

## SUCCESSFUL MANAGEMENT OF VATAKANTAKA THROUGH MRITTIKA SHALAKA AGNIKARMA AND SHAMANA OUSHADHI: A CASE REPORT

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### ABSTRACT

Vatakantaka is *Vata* predominant disorder affecting ankle region, characterised by severe pain during walking and difficulty in weight bearing. It can be clinically correlated with ankle spur, where pain arises due to inflammation and swelling at the ankle region. Ayurvedic therapies like *Agnikarma* (thermal cauterization), *Raktamokshana* (bloodletting) and *Swedana* (sudation therapy) are used to relieve pain and inflammation and use of *Eranda Taila*. In present case study, 50-year-old female patient from Hubballi, Karnataka, came with complaints of pain in the right heel from past 4 months associated with swelling and tenderness over the heel She was treated with *Agni Karma* with *Mrittika Shalaka* and *Shamana Oushadhi*. Improvement in patient was observed after significant changes in subjective parameters.

### INTRODUCTION

Ayurvedic literature defines *Vatakantaka* as an ailment that occurs due to the vitiation of *Vata Dosh*a, and is usually located in the *Gulpha Sandhi* (ankle/heel area). It is marked by intense

pain of the heel that is usually referred to as a prickly feeling as though a person is being pierced by thorns. Pain generally is more in the early morning or following extended rest. This disorder is classified under *Vatavyadhi*, and is usually related to incorrect foot position, over-walking and overstraining on uneven surfaces.<sup>[1]</sup>

In modern medicine, the same clinical condition is known as calcaneal spur or heel spur which is a bony protrusion of the calcaneus heel bone. It can either take place on the back or under the bottom of the heel. Calcaneal spur often accompanies the presence of plantar fasciitis or Achilles tendinopathy and occurs over time through chronic stress, inflammation in the attachment of the plantar fascia, inappropriate footwear or biomechanical disorders. The disorder is typically noted in middle-aged and overweight people, and research shows that there is a high prevalence of the disorder among the Indian population.<sup>[2]</sup>

Both *Vatakantaka* and calcaneal spur clinically manifest with debilitating heel pain, difficulty in walking, and stiffness, particularly in the first steps in the morning. Although rest, physiotherapy, orthotic support, anti-inflammatory drugs and in severe cases corticosteroid injections or surgery are part of the modern management, *Ayurveda* is a holistic approach with an aim of correcting the underlying imbalance of the *Dosha*.<sup>[3]</sup>

Ayurvedic therapies like *Agnikarma* (thermal cauterization), *Raktamokshana* (bloodletting), *Swedana* (sudation therapy) and *Vataanulomana Chikitsa* are used to relieve pain and inflammation. The goals of these therapies include pacifying aggravated *Vata Dosha*, enhancing local circulation, and relieving the symptoms. The knowledge on the correlation between *Vatakantaka* and calcaneal spur assists in harmonizing both Ayurvedic and modern views on proper management of heel pain.<sup>[4]</sup>

## MATERIALS AND METHODS

This is a single case study. Informed consent was obtained from patient in his language.

## CASE REPORT

### Chief complaints

A 50year old female patient from Hubballi, Karnataka, came with complaints of pain in the right heel from past 4 months associated with swelling and tenderness over the heel.

### History of present illness

The patient was apparently healthy until menopause, after which she gradually gained weight. For the past 4 months, she has been experiencing pain in the right heel, which is associated with swelling and tenderness. The pain is particularly severe when she gets up in the morning and after prolonged sitting, making it difficult for her to stand and walk. She previously consulted a nearby hospital but did not experience significant relief. Therefore, she presented to our hospital for further evaluation and management.

### **History of past illness**

The history of past illness of the patient revealed, she is a not known case of hypertension and Diabetes Mellitus, Hypothyroidism.

The patient had a history of recurrent acidity

### **Personal history**

Occupation - Housewife

Diet: Veg

Appetite: Acidity, Sour belching

Bowel: 2 times/day, formed

Sleep: Disturbed

Micturition: 5-6 times/day

### **General Examination**

Pulse: 82bpm

Temperature: Afebrile

Respiratory rate: 18c/min

BP: 120/80mmhg

Spo2: 99% @ air

### **Systemic Examination**

Central nervous system: Conscious, well oriented

Cardiovascular system: S1, S2 heard, no added sounds

Respiratory system: Normal vesicular breath sounds heard

Gastro-Intestinal System: P/A: Soft and non-Tender, No organomegaly

### **Intervention**

1. *Abhyanga* with *Bala Taila* and *Pinda Taila*
2. *Agnikarma* with *Mrittika Shalaka* – 1 sitting/day – on 4 alternate days

**Table No. 1: Showing Shamana Oushadhi.**

<i>Agnitundi Vati</i>	1-0-1 for 8 days
<i>Arogya Vardhin Vati</i>	1-0-1 for 30 days
<i>Kaishora Guggulu</i>	1-0-1 for 15 days
<i>Ghandharvahastadi Eranda Taila</i>	20ml with warm water for 5 days at Night

**OBSERVATIONS AND RESULTS****Table No. 2: Showing Assessment criteria.**

<b>01. Pain</b>	
No pain	0
Mild (pain only during morning hours and not disturbing daily routine activity)	1
Moderate (Continuous pain in the morning hours and walking after Rest)	2
Pain throughout the day and disturbing daily routine	3
<b>02. Tenderness</b>	
No Tenderness	0
Pain in deep pressure	1
Pain on slight pressure	2
Pain on touch	3
<b>03. Swelling</b>	
No swelling	0
Mild swelling	1
Moderate swelling	2
Severe swelling	3
<b>04. Burning sensation</b>	
No burning sensation	0
Mild burning sensation	1
Moderate burning sensation	2
Severe burning sensation	3
<b>05. Redness</b>	
No Redness	0
Mild Redness	1
Moderate Redness	2
Severe Redness	3

**Table 3: Showing images Before and After Treatment.**

No.	Symptoms	Before Treatment	After Treatment
01.	Pain	2	1
02.	Tenderness	2	1
03.	Swelling	2	0
04.	Burning sensation	0	0
05.	Redness	3	2

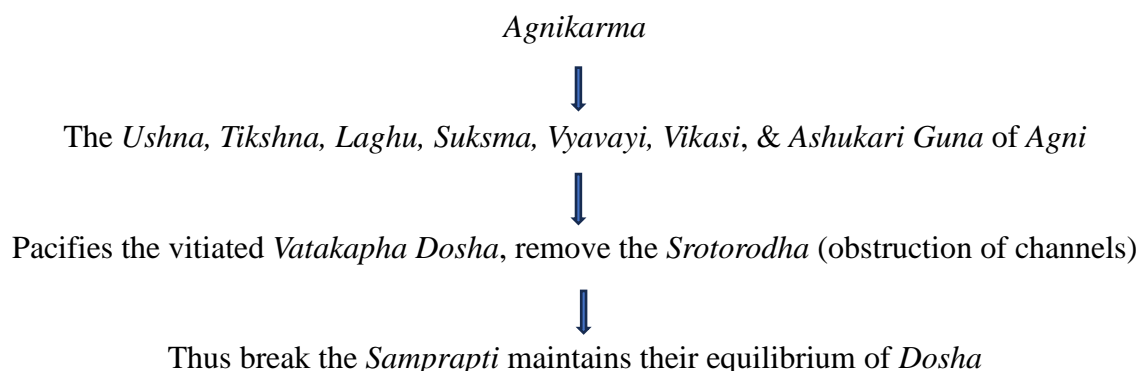


**Before Treatment After Treatment**

## DISCUSSION

On the basis of *Vyadhi Lakshana Vata Kapha Dusti* was considered. So depending on *Vyadhi*, treatment was planned with *Bala Taila*<sup>[5]</sup> and *Pinda taila*<sup>[6]</sup> was selected for *Sthanika Abhyanga* on right heel as it is indicated in *Vatavyadhi and Vatarakta*, it is best *Vatakapha Shamaka* and *Eranda Patra* was used while doing the *Agnikarma* because it reduces aggravated *Vata Dosha*. *Agni karma* by *Mrittika Shalaka* it contains *Loha Bhasma*, horse dung and *Krishna Mrittika* (black soil) which helps for stickiness, compactness etc. one of the best *Ruksha Sweda* especially indicated for *Vatakaphaja* disorders, *Agni karma* plays very important role in giving instant relief from pain.

### Mode of action of *Agni Karma*<sup>[7]</sup>



In the present context, *Mrittika Shalaka* was selected as the instrument for *Agnikarma* because it provides controlled, mild and uniform heat which is particularly suitable for sensitive areas like ankle joint and minimises the risk of excessive tissue damage e. Reduced metabolic activity leads to impaired digestion and assimilation, resulting in improper utilization of calcium in the body. Consequently, unabsorbed or improperly metabolized calcium tends to deposit in soft tissues such as tendons and ligaments, particularly in the calcaneal region, giving rise to pain and inflammation. In Ayurvedic terms, this condition can

be understood as a disturbance of *Agni* leading to the formation of *Ama*, along with vitiation of *Vata* and *Kapha Dosha*, which facilitates abnormal deposition in the *Snayu* (tendons) and *Sandhi* (joints). Administration of internal medications such as *Gandharvahastadi Eranda Taila*<sup>8</sup> and *Agnitundi Vati*<sup>9</sup> helps in correcting *Agni*, thereby improving metabolism and preventing further pathological deposition. Additionally, *Agnikarma* performed using *Mrittika Shalaka* acts locally by enhancing blood circulation, reducing inflammation, and relieving pain. Thus, the combined effect of metabolic correction and local therapeutic intervention helps in breaking the pathogenesis and provides symptomatic as well as functional relief.

*Shamana Oushadhi* which was prescribed in this case i.e *Kaishora Guggulu*<sup>10</sup> having Anti – inflammatory properties of *Guggulu*, *Guduchi*, *Shunti*, *Trivrit* relieves inflammation induced by crystals to synovial membrane and adjacent tissues. *Arogyavardhini Vati*<sup>11</sup> is a compound formulation its ingredients are *Tamra Bhasma*, *Katuki*, *Guggulu*, *Triphala* are having *Lekhana*, *Deepana* and *Medo Doshahara* (Correlating lipid metabolism and transportation) *Lashuna* having *Avaranahara*, *Rasayana* properties, *Agnitundi Vati* which possess properties *Ushna Veerya* and *Madhura*, *Katu Vipaka* act as *Deepana* and *Pachana* does *Agnivardhana*, *Anulomana*. It acts on *Amashaya* and *Pakvashaya* it increases *Jatharagni* and stimulate for good digestion and form proper *Ahararasa* there by relives complaints of sour belching, burning sensation at epigastric region and increases strength to *Amashaya* and enhances the metabolic activity. *Ghandharvastadi Eranda Taila* corrects the *Gati* of *Vata dosha* and also checks the metabolic activity.

## CONCLUSION

*Mrittika Shalaka Agnikarma* proves to be a simple, cost-effective, and minimally invasive therapeutic modality in the management of *Vatakantaka*. The procedure, by virtue of its *Ushna* (heat) and *Tikshna* (penetrating) properties, effectively alleviates pain, reduces stiffness, and improves functional mobility. The use of *Mrittika Shalaka* offers a safer alternative to conventional metallic instruments, minimizing the risk of excessive burns while still delivering therapeutic heat. Clinical outcomes suggest significant symptomatic relief with minimal complications, making it a promising intervention in Ayurvedic practice. However, further large-scale and controlled studies are recommended to validate its efficacy and standardize the procedure for broader clinical application.

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