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Case Study

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CLINICAL STUDY TO EVALUATE THE EFFICACY OF LANGHAN IN THE MANAGEMENT OF AAMVATA W.S.R RHEUMATOID ARTHRITIS – A CASE STUDY

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ABSTRACT

Rheumatoid arthritis i.e. *Aamvata* is a musculoskeletal, chronic and autoimmune joint disorder affecting a large aged population. It is symmetrical, destructive and deforming disorder. The prevalence of RA is approximately 0.8 to 1.0 % in Europe and the Indian subcontinent with a female to male ratio of 3:1.^[1] The highest prevalence in the world is in Pima Indians (5%). The onset of *Aamvata* is peak at the between 30 to 60 years of age. *Aamvata* word is derived from 2 words i.e. *Aam* and *vata* where, *Aamvata* is the condition where *sthabdhata* of the body parts occurs due to, *Aam* (various ailments in body which creates the toxic effect in the body) combined with *vatadosha* causes vitiation of *vata dosha* and occupies various *shleshmasthana* (musculoskeletal joints) and menifests the disease

Aamvata. In modern Era, due to sedentary lifestyle (nishchalatwa), low digestive power (mandagni), exercise after having oily foods (snigdha aahar paschat vyayam). This are specific nidan which are explained by the madhavakara in 16th century A.D. The first line of treatment of Aamvata is langhan followed by pachana, virechan and basti supported by ruksha swedana. In modern medicine, the treatment of RA is DMARD (Disease modifying anti-rheumatic drug therapy), biological response modifier, NSAIDS and glucocorticoids but the response is unsatisfactory. So the present study deals with the classical treatment of Aamvata.

KEYWORDS: Aamvata, Rheumatoid arthritis, Langhan, Ruksha waluka pottali sweda, Sunthi siddha jala.

INTRODUCTION

The disease Aamvata is first explained by madhavakara later in the text of yogaratnakara and bhaishajya ratnavali. There is no exact reference of Aamvata as a disease in the brihatrayi's because of the nonexistence of disease. Aamvata is samanyaja vyadhi (i.e. combined doshas and not purely doshaj vyadhi). In the panchmahabhautik point of view, Aamvata vyadhi is because of the dominancy of prithvi and Aap mahabhaota. [2] Aam is also having dominancy of prithvi and Aap mahabhoota. The classical treatment of Aamvata is exactly opposite to the prithvi and Aap mahabhuta i.e. Agni, Vayu and Aakash mahabhoota Pradhan which is langhan, deepena, paachan and katu, tikta rasa-pradhan siddha jalapaan. Katu-tikta rasa pradhan dravyas are Agni, Vayu and Aakash mahabhuta pradhan. As qualities of Aam and vata are totally opposite, the disease Aamvata is difficult to treat. There are basic 3 types of Aamvata explained by the madhav nidan which are vataja, pittanubandhi and kaphanubandhi. [3] The pathogenesis of Aamvata can be structured in the form of 6 phases of shat-kriya kala. In first phase (sanchaya avastha), there is dosha dushti and mandagni due to the causative factors. In second phase (prakopa avastha), there is formation of Aam due to vitiated vata dosha and mandagni i.e. specific as a dhatwagni. In the 3rd phase (prasara avastha), Aam travels into whole body through dhamanis due to gati of vitiated vata dosha. In 4th phase (sthanasanshraya), the vata dosha along with Aam dosha gets lodged in the shleshma sthana (musculoskeletal joints). In 5th phase (vyakti avastha), symptoms like daurbalya, hrid-gaurav, gatra-sthabdhata and sandhi-shoola-shotha-grahata occurs. In the last phase of Aamvata, there is differentiation of types of Aamvata as a purely vataja, pittanubandhi and kaphanubandhi. Aamvata is the aamashayottha vyadhi and it manifest in the sandhi sthana.

The classical and first line of treatment of *Aamvata* is *langhan* in the form of *upawas* (fasting) which is *Agni*, *vaayu* and *Aakash mahabhuta* dominant treatment along with the *sunthi siddha jala* for the *paachan* of *doshas* and *ruksha valuka pottali sweda* for the *shaman* of local *doshas* and pain management. The action of *langhan* takes place as it digest the vitiates *doshas* in the body by the *Aagni*. The *langhan* acts exactly like autophagy process. Autophagy or cellular self-digestion, is a cellular pathway involved in protein and organelle

degradation by lysosomes.^[4] In RA Anti-CCP antibodies are formed, Autophagy seems to be involved in the generation of citrullinated peptides.

AIM AND OBJECTIVE

To study the effect of langhan chikitsa and ruksha valuka sweda in Aamvata.

MATERIALS AND METHODS

A 60 years old patient who was apparently been normal 6 months back, migrated from south India to Mumbai for job, since 6 months gradually he started complaining of pain and swelling in the bilateral metacarpophalangeal and metatarsophalangeal joints, morning stiffness in all other joints along with mild fever, loss of appetite and generalised weakness. Patient had taken allopathic treatment where he was diagnosed with rheumatoid arthritis and naturopathy treatment within six months but there was no satisfactory result. After six months of other pathies treatment, patient came to our *kayachikitsa* OPD for the *Ayurvedic* management. After taking detail history and examinations patient was admitted to the male *kayachikitsa* ward for further management.

Chief complaints – pain and swelling in the B/L MCP and MTP joints,

Morning stiffness in B/L elbow joints, B/L shoulder joints, B/L knee joints,

Difficulty in walking,

Anorexia,

Loss of appetite,

Constipation.since 6 months.

H/O – liver cirrhosis 10 years back.

Myocardial infarction 2 years back.

N/H/O – DM, HTN, BRONCHIAL ASTHAMA or any other major illness.

S/H – haemorrhoidectomy and appendectomy 25 years back.

D/H – took Ayurveda treatment for liver cirrhosis 10 years back.

Allopathy and naturopathy treatment for RA within 6 months.

O/E –

Naadi – 86/min

Mala – asamyak (saamata)

Mutra - samyak

Jivha - saam

Kshudha - mandya

Nidra - khandit (due to pain)

Urah - AEBE

Udara – non tender

Twak – ruksha, karshnya

Akriti – hina

Bala - alpa

Weight – 48 kg

Blood pressure – 130/80 mm of Hg

Diagnosis – *Aamvata* (Rheumatoid Arthritis).

Management

Principles of management

Langhan.

Ruksha waluka pottali sweda (dry Steam) once a day.

Paachan with shunthi siddha jala.

Chikitsa sutra of Aamvata

लड्ङ्घनंस्वेदनंतिक्तंदीपनानिकटूनिच। विरेचनंस्त्रेहपानंबस्त्यश्चाममारुते ॥

सैन्धवाद्येनान्वास्यक्षारबस्तिःप्रशस्यते॥ रुक्षः स्वेदोविघातव्योबालुकापोटलैस्तथा।

उपनाहाश्चकर्तव्यास्तेडपित्रेहविवर्जिताः ॥^[5]

As said by the Acharya chakradutta, the first line of treatment for the disease Aamvata is Langhan along with ruksha waluka pottali sweda and tikta, katu and deepen dravya (sunthi siddha jala), later on virechan, snehapaan and basti. In present case study, we have focused on the langhan i.e complete abstinence of food along with sunthi siddha jala as per thirst for 7 days till samyak langhan lakshana seen.

OBSERVATION





Day 1

After 7 Days of Langhan

Criteria for assessment

Sr no	Symptoms	Day 1	Day 8 (After Langhan)
1	Joint pain	Severe pain more in the morning,	Mild pain, able to
		unable to hold the objects	hold the objects
2	stiffness	> 12 hours	Only in the morning
			(<30 mins)
3	swelling	Effusion, warm	80% reduction
4	Anorexia	Hunger once in a 24 hours	normal
5	Constipation	Strain and hard stools	normal
6	Generalised	Weakness after doing routine work.	No weakness
	weakness		

DISCUSSION

In *Aamvata*, *Aam* and *vata* are two factors along with the low digestive power causing the disease. So *langhan* treatment helps in the *paachan* of *Aam*, improves the *Aagni* and clears *srotavrodh*. *Sunthi siddha jala paan* also helps in the *paachan* of *Aam* and controls vitiated *vata dosha*. *Ruksha waluka pottali sweda* mainly helps in the local analgesic effect and controls *vata dosha*.

Langana

"यत् किन्चित लाघवकर देहे तत् लंघनं स्मृतम् " [6]

महाभूत संघटन - तेज + वायु + आकाश (opposite to Jala and Aap mahabhoota).

Samyak langhan lakshana

वात मूत्र प्रीषाणां विसर्गे गात्र लाघवे।

हृदय उद्गार कण्ठ आस्य शुद्धौ तन्द्रा क्लमे गते॥

स्वेदे जाते रुचौ चैव क्षुत् पिपास सह उदये।

कृतं लङ्गनं आदेश्यं निर्व्यथे च अन्तरात्मनि॥[7]

Proper excretion of urine, flatus and stool.

Lightness in the body.

Feeling of proper hunger and thirst.

Langhan is explained mainly for the Aamashayottha udbhav vyadhis eg. Jwara, Aamvata and rasadhatugata vyadhi. Laghan is best and first line of treatment for the Aamvata as explained by Acharya Yog ratnakara. It is advised in Saama dosha Avastha, once Nirama avastha comes langhan has to be stopped otherwise it increases vata dosha and does dhatu kshaya.

Shunthi siddha jala

Use of Tikta, katu dravya helps in the digestion Aam and deepen of Agni.

Ruksha waluka pottali sweda

Swedan has been indicated in the management of sthambha, Gaurav and shoola. Rukshana and Langhana has almost similar properties, it helps in the shoshan (absorption) of Aam located in the shleshma sandhis therefore reduces stambha (stiffness) and shoola (pain).

CONCLUSION

Langhan along with Ruksha waluka pottali sweda and Shunthi siddha jala is effective in the management of Aamvata (rheumatoid Arthritis). Patient was treated on the basis of purely Ayurvedic principle protocols and improvement in the patient was much effective and faster than the Allopathic medicines.

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