



## Review of Panchakarma in Amavata

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### Abstract-

Amavata is the most crippling joint disease. It occurs throughout the world in all ethnic groups. In modern science, Amavata is compared with Rheumatoid Arthritis which is an auto-immune disorder. In modern science, anti-inflammatory, analgesics, steroids are advised in the management of rheumatoid arthritis, which have their own side effects. Amavata is the one of the most challenging diseases due to its chronicity, incurability, complications and morbidity. So, it is the need of the time to seek the Ayurvedic treatment, specially Panchakarma therapies to manage the pain, slow down the progression and improve patients' quality of life.

Keywords-Amvata, Panchakarma, Snehan, Swedan, Virechan, Basti

### INTRODUCION

*Acharya Madhavakara* was the first author who has described *Amavata* as a separate *vyadhi* entity in his text "*Roga Vinishchaya*" which is later on known as "*Madhava Nidana*"<sup>1</sup>. There is a complete chapter containing detail description of the *vyadhi* regarding definition, Aetiopathogenesis, clinical manifestations, complications and prognosis of *Amavata*. *Amavata* described in Ayurvedic classics is similar to Rheumatoid Arthritis in Various means. In 1591 Guillaume Baillou, the French physician and Dean of the University of Paris medical faculty writes, on the of the first books on Arthritis. In this book he used the term 'Rheumatism' to describe a condition characterized by inflammation, soreness, stiffness in the muscles and pain in and around the sandhi's. In 1859, sir, Alfred Garrod, the London physician, coins the clinical term "rheumatoid arthritis" and the first reference is made in medical literature.

About 1% of the world population is afflicted by R.A. The onset is more frequently during fourth and fifth decade of life with 80% of patient developing *vyadhi* between the age of 30 to 40 years. Women are affected approximately three times more often than men. It is a *vyadhi* of temperate climates with low incidence in tropics<sup>2</sup>. *Amavata* is one of the dreaded *vyadhi*'s that the mankind faces today. Even though, *Amavata* is not proved to be fatal, it cripples the affected patients. This dreadful *vyadhi* initiates as joint stiffness, ultimately opens up as a cause of many others. It can affect many facets of a patient's life, viz. his family, occupational and community relationships even. It affects not only the social and economic position of the individual and his family, but it leads to the draining of national resource due to the work hours lost, resulting in diminished production. The incidence of *Amavata* (Rheumatoid Arthritis) is reported to be 1-2% of general population with a female to male ratio of 3:1.<sup>3</sup>

### AMAVATA CHIKITSA:

In *Ayurveda*, there is emphasis on a therapeutic programme for managing the patients of *Amavata* instead of a single drug therapy. This therapeutic programme is more or less etiologically oriented and aimed at *samprapti vighatana*. This line of treatment depends a good deal on the stage of the *vyadhi* process.

*Chakradatta* was the pioneer book in describing the principles of treatment for the *vyadhi*, which are *Langhana*, *swedana*, administration of drugs having *tikta*, *katu rasa* and *deepana* action, *virechana*, *snehapana* and *basti*. Same line of treatment is adopted in *Yogaratanakara* and *Gada nigraha*, *Yogaratanakara* and *Bhavaprakasha* have added *ruksha upanaha* to these therapeutic measures<sup>4</sup>.

लघनं स्वेदनं तिक्तदीपनानि कंटूचि च ।

विरचनं स्नेहपानं बस्त्यश्चाममारुते ॥

रूक्षः स्वेदो विधातव्यो वालुकापोटलैस्तथा ।

उपनाहाश्च कर्तव्यास्तेऽपि स्नेहविवर्जिताः । - योगरत्नाकर

Practically we use this *chikitsa sutra* for the treatment of *Amavata*.

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## LANGHANA

*Langhana* is adopted first in the management of *Amavata*. Following concepts substantiate the usefulness of *langhana* in *Amavata*. All types of *langhana* are beneficial in *rasaja vikaras*<sup>5</sup>

*Rasadhatu* is mainly involved in *Amavata*. *Langhana* treatment is advised in *amashayotta vyadhi*<sup>6</sup>. *Ama* in *Amavata* has its origin from *amashaya*. *Langhana* also pacifies the *Amavikaras*<sup>7</sup>.

*Langhana* is also indicated in *samavata*, *samapitta*, and *samakapha* condition<sup>8</sup>. After examining *desha*, *kala*, *dosha* etc. these measures can be adopted in *amaja vikaras*. In *alpa dosha* condition –*langhana*, *Madhya dosha* condition – *langhana* and *pachana* and in *prabhuta dosha* condition – *shodhana*.

In *Amavata*, *Ama* is involved in *prabhuta matra* and has *samavata* condition, for which *langhana* should be done first. Because it has been described that *samadasha* cannot be eliminated until and unless *Ama* attains the *pakva* form<sup>9</sup> which can be attained by *langhana*. *Langhana* in the form of *upavasa* is advised in cases of *amajanya vikaras*.

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## SWEDANA:

The therapy which does *nigraha*, *gaurava nigraha*, *sheeta nigraha* along with the production of *sweda* is known as “*swedana*”. In *Amavata*, *ruksha sweda* has been advocated in the form of *valuka pottali*<sup>10</sup> this can be substantiated by *Charaka's* vision that if vitiated *vata-dosha* locates in *kapha sthana* first *rooksha sweda* should be done<sup>10</sup>.

*Swedana* help in cleaning the *doshas* and thus aids in the transportation of *doshas* from *shaka* to *koshta*. It has been indicated in the condition of *stamba*, *gourava*, *sheeta* and *shoola*<sup>10</sup> which constitutes the predominant feature of *Amavata*.

*Swedana* is also advised in the line of treatment of *samadasha*, which has spread throughout the body, to attain *niramavastha*, to facilitate *shodhana*<sup>11</sup>. In *Amavata* as *doshas* take *sthanasamshraya*, in *sandhis* and *vyadhi* process is confined to *sandhi's*, *stanika sweda* can be given and if there is involvement of *sarvashareera*, *sarvanga sweda* can be done.

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## TIKTA, KATU AND DEEPANA DRUGS:

The rationality behind usage of *tikta*, *katu* and *deepana* drugs are as follows: *Tikta rasa* has *rooksha* and *laghu gunas*. It does *lekhana* as well as *deepana* and *pachana*. It is beneficial in conditions like *aruchi*, *thrushna*, *moorcha* and *jwara*. It absorbs the *kleda* and *shleshma*<sup>12</sup>. *Katu rasa* is having *laghu*, *ushna* and *rooksha gunas*. It also has properties like *deepana*, *Pachana* and *rochana*, so it dilates the *srotases*. It dries up *sneha*, *kleda* and *mala* and is beneficial in *shotha*.<sup>13</sup>

As *Agni vikriti* is the main factor for *Amavata*, so administration of *deepana* drugs helps to increase the appetite. These drugs have *theeksna*, *ushna*, *langhana* and *agneya* properties. These *tikta*, *katu* and *deepana* drugs are proved to be effective in the *vyadhi Amavata*, which is due to their *Ama pachana* property.

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## VIRECHANA:

After the administration of *langhana*, *swedana* and *tikta*, *katu* and *deepana* drugs, the patient should be subjected to *virechana* therapy because the *doshas* rendered *nirama* by these therapeutic measures require elimination from the body by *shodhana*<sup>14</sup>.

*Shodhana* should be adopted in *prabhutha Ama* condition<sup>15</sup>. The *virechana* drugs expel the *sanghata doshas* after liquefying them by reaching through *dhamanis* due to their properties like *ushna*, *teekshna*, *sukshma*, *vyavayee*, *vikasi* and *adhobagahara prabhava*<sup>16</sup>.

The *virechana* drug acts by following manner. *Sara guna* causes *anulomana*, *sukshma guna* is responsible for reaching minute channels. *Teekshna guna* produces rapid *dosha sravana* and *ushna guna* eliminates *soumya*<sup>17</sup>.

The *virechana* does the *adhomarga anulomana* and *vimarga nirharana* of *vata*<sup>18</sup>. It also produces *Agni deepati*, *dhatu sthirata*, and increase in *bala* and *sroto shudhi*<sup>19</sup> Thus, *virechana* has advantage on *Ama*, *vata* and *Agni*.

In *Yogaratakar* and in *Bhaishajya Ratnavali* there is description that Use of *Eranda Taila* in *Amavata* is best, because *Eranda Taila* does the *Ama Pachana* and *Virechana* also. That means one medicine doing two important things like *Ama Pachana* and *Virechana* simultaneously.

“*Amavata gajendrasya sharer vanacharinaha | Ekmevagrani rhanti erand sneha kesari || Yogaratnakar / Bh.R.*”

That means if *amavata* is considered as *Elephant* and *Sharira* is considered as *Vana* means forest and *Eranda sneha* is considered as a *kesari* means *Lion*, the king of forest. That *Lion* definitely destroys the *elephant* by his power. Here *shastrakaraj* use *upamana pramana* to show the effect of *Eranda tail* in *Amavata*. So, they want to highlight the efficacy of *Eranda taila* in *Amavata*.

## SNEHAPANA

After *langanadhi* therapies, the patient should be subjected to *snehapana*, to pacify the *vata*, but only after attaining *nirama avastha*<sup>20</sup> *Snehapana* has been stated to augment the *agni*, as it influences the digestion by softening the food and stimulating the *agni*<sup>21</sup> which is the primary requirement in *Amavata*. Furthermore, *sneha* is said to be supreme in the treatment of *vata* predominant disorders<sup>22</sup>.

## BASTI

In *Amavata* both *anuvāsana* as well as *niruha basti* have been advocated. Chakradatta advised *saindhavadhi taila* for *anuvāsana* and *kshara basti* for *niruha*. Administration of *anuvāsana basti* followed by *niruha basti* by various *snehas* has good control on *Amavata*. *Shodhana bastis* are considered to be beneficial in *Ama* condition<sup>23</sup>.

The administered *basti dravyas* reaches *nabhi- kati- parshava* and *kukshi*. By staying there, itself, it acts through its *veerya* and spreads to different parts of body, quickly through the *srotasas* and is able to eliminate or palliate the *doshas*<sup>24</sup>.

As *vata* is responsible for the location of *vyadhi's* in *shaka, koshta, marma* and different *avayavas*, *basti* is considered as best one to control the *vata*. *Basti* can be adopted in conditions like *stabdhata, sankocha, sandhi muktata, vighrahit purisha, shoola, aruchi* and in conditions where *vata* is present in *shakas*. In *shudha vata* condition *anuvāsana basti* is indicated. Besides this, *niruha basti* does the *sroto shuddhi* and is useful in all stages of the *vyadhi*<sup>25</sup>. It facilitates *lekhana* along with *shodhana* and expels the *dravikrita doshas*.

**Table no.3: Line of treatment according to different texts:**

Name of the Treatment	C.D	B.P	Y.R	B.Y.T	B.R
<i>Langhana</i>	+	+	+	+	+
<i>Swedana</i>	+	+	+	+	+
<i>Tikta</i>	+	+	+	+	+
<i>Deepana</i>	+	+	+	+	+
<i>Katu</i>	+	+	+	+	+
<i>Virechana</i>	+	+	+	+	+
<i>Snehapana</i>	+	+	+	+	+
<i>Basti</i>	+	+	+	+	+

## CONCLUSION-

In the classics, various Panchakarma therapies – *Virechana, Snehapana, Basti, Valukasweda, Upanha sweda*, etc are described to overcome the disease *Amavata*.

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