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Role of Agnikarma with Panchaloha Shalakha in the pain management of Janusandhigata Vata- A Case Study

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ABSTRACT:

Janusandhigatavata is one of the Vata Vyadhi type distinguished by the symptoms Shoola and Shotha. Janusandhigatavata is the most prevalent disease seen in society. Sandhigata Vata is more likely to impact the knee joint because it is the most commonly used joint in everyday normal work. Janu Sandhiagata Vata because of comparable signs and symptoms, it can be correlated with knee osteoarthritis. In Knee Osteoarthritis pain, stiffness and uncomfortable/restricted movement in the affected knee joint are common clinical symptoms.

In the current case study, 59 years old female patient had been experiencing pain in bilateral knee joint and stiffness in the left knee joint, as well as trouble in walking since one year. The diagnosis of knee osteoarthritis was confirmed following a clinical examination and X-ray of the knee joint. *Agnikarma* is one of the conventional treatment procedures indicated for *Vatavyadhi* and it is commonly utilized to handle severe instances of pain. In this case study, patient was being treated with *Agnikarma* by *Panchalohashalaka*, which has shown encouraging positive results in current case.

Key Words: Janu Sandhigatavata, Agnikarma, Panchalohashalakha Knee Osteoarthritis

INTRODUCTION:

Sandhigatavata is described as Vatavyadhi in all Samhita and Sangraha Grantha. In Jaravastha, all Dhatus undergo Kshaya, resulting in Vataprakopa and making the individual susceptible to a variety of ailments, including Sandhigatavata. Sandhigatavata pathogenesis is characterized by Vata Dosha dominance. Acharya Charaka described the condition as "Sandhigata Anila" for the first time; however it was not included in the 80 forms of Nanatmaja Vyadhi [1]. Acharya Sushruta mentioned the ailment Sandhigatavata in the Vatavyadhi context. He has described the symptoms and the course of treatment. He added a new symptom i.e. 'Hanti Sandhi' in the symptoms shown by Acharya Charaka previously [2]. Acharya Vagbhatta said Vatavyadhi as "Maharoga".

Clinical Features are *Vatapurna Druti Sparsha*, *Prasaranakunchana Vedana* [3], *Sandhi Shoola and Shotha* [4], *Atopa* [5]. *Sandhigatavata* is one of the commonest joint disorder broadly comes under *Vata Vyadhi* and affects the skeletal system in the geriatrics. This age group is more vulnerable to *Dhatu Kshaya*. *Vata Dosa* becomes provocated due to Kshaya or *Avarana prakriya* and produces various types of *Vata Vyadhi*. To overcome such type of degenerative process and symptomatology various research work are going on to find out new remedy in surgical as well as medical system. *Agnikarma* is a Para surgical procedure, advocated by Acharya Susruta for *Asthi*, *Sandhi*, *Sira*, *Snayugata Vatavikaras* and it is highly effective without producing any further complication. Acharaya Susruta has indicated different types of material according to site of Agnikarma. These can be classified as follows,-

- 1. Twak Dadga Pippali, Ajasakrud, Godanta, ara, Salaka
- 2. Mansa Dadga Jambhavsta Shalaka and other Metals.
- 3. Sira, Sanayu, Sandhi, and Asthigata Madhu, Jggery, and Sneha.

CASE REPORT:

Patient information:

A 59 years old female visited the OPD of Shalya Tantra of BVVS Ayurveda College and Hospital with pain in the bilateral knee joint since one year. She also had difficulty in walking and standing for a longer duration.

History of present illness:

The patient was well before one year. She gradually developed pain in the bilateral knee joint, which aggravated and caused difficulty in walking and standing for more than 10 minutes. She consulted a nearby clinic and was prescribed NSAIDs. She discontinued the medicines due to hyperacidity after consuming tablets for some days.

 $\begin{array}{lll} \textbf{Personal history:} & \textbf{General examination} \\ \textbf{Appetite-Normal} & \textbf{Height-162 cm} \\ \textbf{Bowels-Normal,} & \textbf{Weight-65 Kg} \\ \textbf{Micturition-Normal,} & \textbf{BMI-24.2 kg/m}^2 \\ \textbf{Sleep-Disturbed,} & \textbf{BP-130/90 mmHg} \\ \textbf{Addiction: NO} & \textbf{PR-76 bpm} \\ \end{array}$

Menstrual history: Age of menarche: 13 years Age of menopause: 49 years

SAMPRAPTI GHATAKAM

Dosha: Vata Pradhana,.Kapha Anubandha may be seen.

Dushyas: Asthi, Sandhi

Srotos involved: Asthivaha Srotas

Srotodusti Prakara:Sanga and Vimargagamana.

Agni:Jatharagmimandyajanya Udbhava Sthana: Pakvashaya

Vyakta Sthana:Sandhi Vyadhyavastha:Chirakari

Sadyasadhyata:Krichrasadhya to Asadhya Rogamarga: Madhyama Rogamarga

CLINICAL FINDINGS- O/E of knee joint

Darshana (inspection):

Gait- Normal

Deformity- -Absent

Joints movement-Partially restricted

Sparshana(palpation)

Site of pain- medial aspect Tenderness- present Swelling – absent Crepitus – present

Range of movement

movement	Right	Left
Flexion	120°	104 ⁰

CLINICAL INVESTIGATION

X-ray of the left knee joint revealed narrowing of joint space and osteophytes formation.

METHODOLOGGY

Agnikarma procedure:

Materials required:

•Panchalohashalaka • Gauze piece •Candle • Aloe vera •Eranda Patra.

Poorva Karma:

Procedure explained to patient and informed consent was taken from the patient. Materials required for *Agnikarma* were kept ready. The patient's vitals were noted, and the patient was made to lie in supine position. The knee joint were exposed. *MurchitaTila Taila* was heated and Abhyanga was done. *Panchalohashalaka* was heated.

Pradhana Karma:

A tender area was noted. Another end of heated *Panchaloha Shalaka* will be applied to the tender area after covering the area with *Eranda Patra*.

Paschat Karma:

Aloe vera was applied over the site of Agnikarma. Pathyaapathya was advised to patient

GRADINGS:

Sl.	Scoring Assessment	G0	G1	G2	G3
1	Sandhi Shula	No Pain	Mild pain	Moderate pain	Severe pain
	(Joint pain)		(1-3)	(4-6)	(7-10)
2	Sandhi Atopa	No	Palpable	Audible	Always audible
	(Crepitus)	Crepitus	Crepitus	Crepitus	Crepitus
3	Sandhi Vedana on	135°-115°	115°-105°	105°-95°	95°-85°
	Prasarana Akunchana				
	(Goniometry)				
4	Sandhi Shotha	No	Mild	Moderate	Severe
	(Joint swelling)	Swelling	Swelling	Swelling	Swelling
			(0-1cm)	(1-2cms)	(2-3cms)

RESULTS:

It was observed that the patient was free from pain while walking, and flexion of the left knee joint was improved after the 7 days of Agnikarma.

Tabular representation of the results w.s.r to assessment parameters.

ASSSESSMENT OF PARAMETERS:

Subjective parameters:

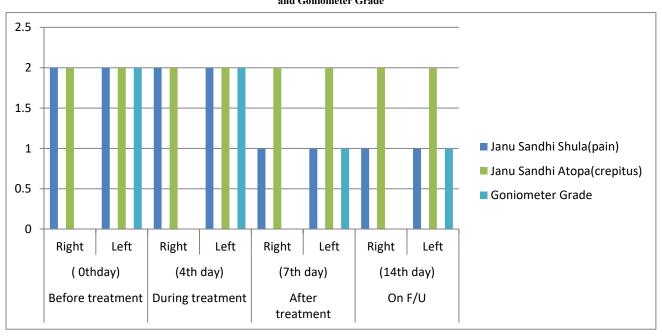
Complaints	Before tr (0 th day)	eatment	During treatment (4th day)		After treatment (7 th day)		On F/U (14 th day)	
	Right	Left	Right	Left	Right	Left	Right	Left
Janu Sandhi	2	2	2	2	1	1	1	1
Shula(pain)								
Janu Sandhi	2	2	2	2	2	2	2	2
Atopa(crepitus)								

Objective parameters:

Prasarana Akunchana Savedana(Range of Movement)

 Renemana Suvedana (Range of Movement)								
Grading	Before	treatment	On 4 th day		After treatment		On F/U	
(Goniometer)	(1	stday)			(7 th day)		14 th day	
	Right	Left	Right	left	Right	Left	Right	Left
Grade	0	2	0	2	0	2	0	1

Graph showing distribution of grades Janu Sandhi Shula(pain), Sandhi Atopa(crepitus) and Goniometer Grade



Sandhi Shotha	(Measurement	of swelling	at knee joint)	
Sanum Snoma	(Ivieasureilleni	oi sweming	at knee joint)	,

Knee joint	Before treatment	After treatment	On F/U	
Midpoint of patella	39cms		39cms	39cms
2inches above patella	40cms		40cms	40 cms
2inches below patella	34cms		34cms	34cms

DISCUSSION

As per Ayurvedic texts due to Vata Dosha with Kapha Dosha Anubandha there is pain and stiffness in Sandhi, resulting in painful movements of joints. Both Vata and Kapha Dosha are Shita Guna Pradhana and Agnikarma is Ushna, Tikshna, Sukshma, Vyavai and Vikasi in Guna which helps to breakdown Vata Kapha Anubandha and neutralizes them, because of that pain and stiffness instantly releases and patient get relief. As per the modern medicine, therapeutic heat increases blood circulation at knee joint leads to the proper nutrition of the tissue

CONCLUSION

Sushruta highlights the importance of Agnikarma practice in case of highly painful conditions precipitated by Vata affected Sira, Snayu, Asthi components. The order of Dahanopakaranas given in Sushruta Samhita represents the application of each Upakarana to the Dhatu. As previously stated, Panchalohashalaka has been utilized to treat symptoms of Sandhigata Vata. Agnikarma is a simple, can be performed at the OPD level, cost-effective therapy that provides quick relief without any complications.

PHOTO PLATE:





Agnikarma by Panchalohashalaka



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