



ISSN NO. 2320-5407

Journal homepage: <http://www.journalijar.com>
Journal DOI: [10.21474/IJAR01](https://doi.org/10.21474/IJAR01)

INTERNATIONAL JOURNAL
OF ADVANCED RESEARCH

RESEARCH ARTICLE

A CASE STUDY ON AVASCULAR NECROSIS.

Dr. Vidya Shivram Boinwad¹, Dr.V.E.Gogate¹, Dr.Sharmili Suryawanshi².

1. Associate Professor, Kayachikitsa Dept.G.A.C.,Nanded.
2. H.O.D. Kayachikitsa Dept , G.A.C., Nanded.

Manuscript Info**Manuscript History:**

Received: 15 March 2016
Final Accepted: 12 May 2016
Published Online: May 2016

Key words:

Avascular Necrosis, Asthimajagata Vata, Snehan, Swedan, Panch Tikta, Ksheer basti.

***Corresponding Author**

**Dr. Vidya Shivram
Boinwad.**

Abstract

Avascular Necrosis of the Bone is due to loss of vascularity of a part of bone. The exact prevalence rate of Avascular Necrosis is unknown. In United State, there are an estimated 10,000 to 20,000 patients newly diagnosed each year¹. A common site of Avascular Necrosis is head of femur. The Symptom of Avascular Necrosis can be correlate with *Asthi Majjagata Vata*. In this case study patient was treated with Ayurvedic Management with *Snehan, Swedan, Panch Tikta, Ksheer basti*. This management showed significant result in the above case study, such as relief in pain, increased range of movement and improvement in gait.

Copy Right, IJAR, 2016., All rights reserved.

Introduction:-

The head femur is a common site of Avascular Necrosis. The causes of femoral head Avascular Necrosis are Alcoholism, Steroid therapy, sickle cell disease, patient on renal dialysis, patients on anticancer treatment and many of them are idiopathic origin. Patients develop symptoms like pain (especially in the groin or in front of thigh) restricted movement.

In management, muscle pedicle bone grafting using tensor facia lata has been shown to produce good result. In some cases with involvement of a part of head, an inter trochanteric osteotomy has been described. In cases with advanced condition total hip replacement become necessary².

Acharya vagbhat stated the symptoms of Asthimajagatavata as, sakthishool (pain in groin or in front on thigh) sandhishool (Joint pain), Balakshaya (Weight Loss) Asthisoushrya (Osteoporosis) and santatamRuja (continuous Pain) which can correlate with Avascular Necrosis.

Asthimajagata vata is one of the asthyashrit Vyadhi. Treatment of Asthimajagata vata stated in charak samhita as Bahya Abhyantar Snehan⁴ & while stated the Management of Asthyashrit Vyadhi he advised Panchakarma (Specially Basti), Tikta Dravya Siddha Ksheer, Ghrita⁵.

In this case the patient was treat with Snehan Swedan, & Panchamuladi Ksheer Bashi & Got Significant Relief in the patient.

Case report:-

This case study was taken from Kayachikitsa OPD Govt. Ayurved College, Nanded.

Case History :

Age : 65 yrs,

Sex : Male

C/o :	Pain in both hip joint.	} since 2 to 3 month
	Pain in both leg	
	Difficulty in walking	
	observed weight loss	

On Examination:-

G.C.Mod

Afebrile

Pulse – 80/m

Bp - 120/80 mm of Hg

No H/o HT/DM/Any major illness/Surgery

H/o – Trauma before 10 to 20 yr back.

H/o – Occasionally Drink.

Local Examination :

Tenderness on both hip joint.

		Rt Leg	Lt Leg
SLRT	-	30 ⁰	90 ⁰
SNDT	-	Positive	Negative

I**nvestigation:-**

X-ray - Lumbar Spine with Pelvis, AP & Lateral view

Patient had received treatment for it but there was no relief in symptoms. X-ray report confirmed the diagnosis of Avascular Necrosis.

According to Ayurved patient was diagnosed as Asthimajjagatavata which can correlate with Avascular necrosis.

Patient was treated with snehan swedan & Panchatikta ksheer basti pancha Tikta ksheer contains

- ❖ Vasa Mula
- ❖ Nimba Mula
- ❖ Guduchi Mula
- ❖ Kantakari Mula
- ❖ Patol Mula

Preparation of Pancha tikta Ksheer:-

The process for preparation of Ksheer was followed as described by sharangdhar i.e. one part of above drug was added into 8 times of milk and 32 parts of water. Ksheer pak was prepared as per standard method. Ghrita was added ¼ of Ksheer & administered 120ml in the form of Basti at the morning for 21 days.

Pain score & range of movement of patient Gait of patient was observed and the findings were noted.

	BT	AT
Pain Score	4	1
<ul style="list-style-type: none"> • 0 - No pain • 1 - Mild pain • 2 - Moderate Pain but no difficulty in walking • 3 - Slight difficulty in walking due to pain • 4 - much difficult to walking • 5 - much pain which prevent walking 		
Range of Movement (SLRT)	30 ⁰	80 ⁰
Gait	Affected	Improved
Weight	48 Kg	50 Kg

Discussion:-

In Asthimajjagatavata, signs & symptoms develops due to vitiation of vata, here vata prakop by dhatukshaya & it is one of the ashyashrit vyadhi by panchakarma, tikta Dravya, Ksher, Ghrita in Chikitsa Sthan.

In this case study, Kshayatmak Samprapti was there, So Bhruhan Basti with Tikta Dravya prepared with ksheer along with Ghrita administered in the form of basti. Due to Tikta ras, Asthyagni niyaman takes place which result in Sar Asthi kDhatu Nirmiti Both Tikta Ras and Asthi Dhatu have Vayu & Akash, Panchabhautik Sanghatan. Panchatikta Ksheer along with Ghrita gives nourishment to the bones. Snehan & swedan improves circulation at this area. Route of administration of Ksheer was Basti which is the best treatment of Vayu. So in this case study patient got relief in pain, range of movement his gait was improved weight gain was also observed by 2 kg in 21 days.

Conclusion:-

In this case study, patient had encouraging results within 21 days. Patient got relief in pain range of movement his angle was 30⁰ before treatment & 90⁰ after treatment. From this case study, we can stated that Ayurvedic management in a Avascular necrosis can prevent the progressive condition of disease and improve the signs and symptoms without any side effect. Also treatment is cost effective. Hence this ancient science can be better alternative treatment modelaty for avascular necrosis and this treatment gives good quality of life to patient.

Reference:-

1. Mont MA, Hungerford D.S., Non traumatic Avascular Necrosis of the femoral head. J. Bone Joint Surgery Am 1995;
2. J. Maheshwari, Editor, Essential Orthopedics, 3rd Edition, Mehta Publication.
3. Vaidya Harishshrastri Paradkar, Editor, Asthangerhodaya, Sarwangsundara of Arundatta.
4. Yadavyi Trikamji, editor, Ayurved Dipika Sanskrit Commentary, Charak Samhita, Chaukhamba Prakashan 2013.