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RESEARCH ARTICLE

A CLINICAL STUDY OF SANDHIGATAVATA WITH THE EFFECT OF PANCHAMULADI KSHIR BASTI.

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Abstract

Sandhigatavata is very common clinical condition of old age especially during 4th and 5th decade of life. It is particularly a degenerative disorder caused by vitiation of vata. *Sandhigatavata* is described in *Bruhat trayies*. *Acharya charak* has described *Sandhigatavata* with signs and symptoms like *Vatapurnadritisparsha* (crepitation in knee joint) *Sshotha* (swelling) *Pprasaran Sakunchan Savedana* (painful flexion and exetention)¹. In modern system of medicine it is closely resembles with Osteoarthritis, which is due to destruction of articular cartilage, synovial fluid and synovial activity of large joints, it limits daily activity such as walking dressing etc². Prevalence of osteoarthritis in India is reported to be in the range of 17-60.6%³. In modern medicine, mainly Analgesics, Non steroidal anti-inflammatory drugs or surgery are the options for the management of osteoarthritis. These don't give satisfactory relief and also cause adverse effect. *Ayurveda* has a ray of hope to such patients because of its holistic approach of cure and prevention of disturbances in physiology. *Acharya Charak* has stated the management of *Asthyashrit vyadhi* by *panchakarma* specially *Basti, Kshir Ghrita* and *Sneha*⁴. *Kshir* processed with *Bruhat Panchamula* and *BalaPanchamuladi kshir* is described in *Chakradatta* for the management of *Vatavyadhi*⁵. Considering above reference *panchamuladi kshir* was selected in the form of *Basti* in experimental group and in control group *Sandhigatavata* was treated by *Rasnadi Guggul*. The study showed significant result in experimental group as compare to control group.

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Introduction:-

Ayurveda is the science of life and longevity. In *Ayurveda*, *Sandhigatavata* described in all Samhita Granthas. In *Sandhigatavata*, *Sandhi* denotes the *Adhishthana* of *Vyadhi* and *Vata* denotes the *Dosha* of *Vyadhi*. The signs of symptoms of *Sandhigatavata* is *Shotha* (swelling) *Vatapurnadritisparsha* (crepitation), *Sandhishotha* (swelling), *Prasaran Akunchan Svedana* (difficulty in flexion and exetention) described by *Acharya Charaka*. *Sushrut* described *Sandhigatavata* in *Nidan Sthana* as *Hantisandhi* (destroy of joint), *Sandhishula* (joint pain) and *Sandhi shotha*⁶. These signs and symptoms of *Sandhigatavata* closely resembles with Osteoarthritis which is due to destruction of articular cartilage, synovial fluid and synovial cavity of large joints. Most commonly affected joints are knee joints. It limits daily activities such as walking, dressing, etc.

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In modern science, mainly analgesics, Non steroidal anti inflammatory drugs or surgery are options for the management of Osteoarthritis. These treatments don't give satisfactory relief and also causes some adverse effects .*Ayurveda* has a ray of hope to such patients because of its holistic approach of cure and prevention of disturbance in physiology. *Sandhigatavata* is one of the *Ashtyashrit vyadhi*.*Acharya charak* has stated the management of *Ashtyashrit vyadhi* by

Panchakarma specially *Basti, Kshir, Sneha* .*Kshir* processed with *Bruhat panchamula* and *Bala* is described in *Chakradatta* for the management of *Vatavyadhi*. considering above reference *Panchamuladi kshir* was selected in the form of *basti* for the *Sandhigatavata*. this study was divided into two groups. In experimental group, 30 patients of *sandhigatavata* were treated with *Panchamuladi kshir Basti* was given in morning in the dose of 120 ml for thirty days after some food. In control group, 30 patients of *Sandhigatavata* were treated with *Rasnadi Guggul* in the dose of 500mg two times for six weeks.

The result of the study showed that *Panchamuladi Kshir* provides better results in *Sandhigatavata* as compare to *Rasnadi Guggul*. In case of symptoms, significant results were found in treated group as compare to control group. Angle of flexion was significantly increased in treated group and also ESR was significantly decreased in treated group .So it was concluded that the result of *Panchamuladi kshir* were better compare to *Rasnadi Guggul*.

Aims and objectives:-

- ❖ To study the effect of *Kshir Basti* processed with *Brihit panchamula* and *bala* in case of *sandhigatavata* (*panchamuladi kshir basti*).
- ❖ To asses the effect of *basti* clinically
- ❖ To study the *Sandhigatavata* through ayurvedic texts and osteoarthritis through modern text.
- ❖ To compare the effect of *Kshir basti* with *Rasnadi Guggul*.

Materials and Methodes:-

Criteria for selection of patient:-

For this study patient were selected from OPD/IPD department of *kayachikitsa* of our institute .The patient having signs and symptoms of *Sandhigatavata* were randomly selected irrespective of age, sex, caste, religion, economical and educational status. The necessary investigation were carried out to exclude the patients described in rejection criteria.

Criteria for rejection of patient:-

- ❖ The patients having *Samavastha* were rejected.
- ❖ The patients having fixed joints or had developed contractures were not included in the study.
- ❖ The patients who were depending upon steroids and some analgesics drugs were also excluded from the study.
- ❖ The patients who had signs and symptoms of rheumatoid arthritis, gonococcal arthritis, syphilitic arthritis, pyogenic arthritis were rejected from this study.
- ❖ The patients who had signs and symptoms of *Amvata, Vatarakta, Kroushtukshirsha* were also rejected
- ❖ Overweight patients were excluded from this study.

Plan of work:-

- ❖ Dignosed patients were divided into treated group and control group.
- ❖ TREATED GRROUP-In this group 30 patients were treated with *Panchamuladi Kshir Basti* .*Kshir* was prepared as *Kshirpaka* method mentioned in *Sharangdhar Samhita*. The process of *Basti chikitsa* Was strictly followed .Freshly prepared *Kshir* was used for *Basti*.

Panchamuladi kshir contains:-

Bilva, Agnimantha, ,Shyonak,, Gambhari, Patala, Bala, Kshir and Ghrita

Preparation of panchamuladi kshir:-

The contains of *Panchamuladi Kshir Basti* were brought from market .the process for preparation of *Kshirpak* was followed by *Sharangdhar Samhita*⁷.

Dose-120ml

Duration-30 days

Control group:-

In control group, Rasnadi Guggul was given to 30 patients. The contains of *Rasnadi Guggul* –*Rasna* (*pluchea lanceolata*), *Guduchi* (*tinosporacordifolia*) *Erandmula* (*recinus communis*), *Devdaru* (*cedrus deodara*), *Shunthi* (*zingiber officinalis*), *Shuddha Guggul* described in *Yogratnakar*. *Rasnadi Guggul* was given to the patients in control for 6 weeks in the dose of 500 mg two times a day. *Rasnadi guggul* was prepared in *Ras shastra* department of our institute under guidance of of head of the department.

Criteria of Assesment:-

The main criteria of assessment in this study were based on the symptom score before and after treatment (symptoms included pain ,pain on extention and flexion, stiffness, Shotha in joint, crepitus, tenderness, nature of pain, Dosha and Dushya Dushti, roentginological gradation)

Angle of flexion of knee joint before and after treatment was done

Routine blood investigations, erythrocyte sedimentation rate was done before and after treatment.

Observation and Results:-

SR NO	SYMPTOMS	GROUP	SYMPTOM SCORE			PERCENTAGE OF RELIEF
			BT	AT	DIFF	
1	<i>Pain</i>	Treated group	127	21	106	83.46%
		Control group	129	48	43	33.33%
2	<i>Pain on extention and flexion</i>	Treated group	96	29	67	69.79%
		Control group	115	92	23	20.00%
3	<i>Stiffness</i>	Treated group	92	28	64	69.56%
		Control group	107	82	23	21.49%
4	<i>Shotha</i>	Treated group	68	11	57	83.82%
		Control group	57	41	16	28.07%
5	<i>Crepitus</i>	Treated group	57	11	46	87.17%
		Control group	29	26	3	10.04%
6	<i>Tenderness</i>	Treated group	85	20	65	76.47%
		Control group	114	82	32	28.07%
7	<i>Nature of pain</i>	Treated group	80	9	71	88.75%
		Control group	85	59	26	30.58%
8	<i>Dosha dushti lakshan</i>	Treated group	60	29	31	51.66%
		Control group	53	36	17	32.07%

Relief in the symptom score was calculated with the help of percentage method. This showed percentage of relief in treated group was more as compare to control group.

The effect of therapy in both group was evaluated with the help of score system .Hence non parametric test also used .The difference between before and after treatment was ranked and the difference was statistically analyzed with the help of Wilcoxon signed rank test and it showed significant result.

The mean angle of flexion in knee joint of treated group was 117 ± 20.40 and after treatment it increased up to 141 ± 18.30 .the difference of mean was 24 it was analyzed statistically by paired t-test.the t-test value was 11.76 which was highly significant. In control group mean of the angle of flexion was 114 ± 22.13 and it also increased by 120 ± 19.85 and difference between these mean was statistically analyzed .t-value was 4.51

Routine blood test was estimated before and after treatment was statistically analyzed ,result was found insignificant ESR also statistically analyzed, it was reduced in treated group.

Radiological gradation showed insignificant result.

Discussion:-

Sandhigataavata is one of the *Vataj Vyadhi* and *Asthyasrit Vyadhi*,.Acharya Charak has stated the *Asthyashrit Vyadhi* treatment as *Panchakarma*,*Tikta Dravya* and *Ghruta*. so we choose this *Kshir* . *Sandhigataavata* in the form of *basti* and *ghrita* was added $\frac{1}{4}$ Of *kshir*.*bhrihat panchamula* are *Vatashamak* property and dominant in *Tikta Rasa*.*Ghruta* and *Kshir* are *Jangam Sneha* which is responsible for *Snehan Karma*.*Kshir* was given in the form of *Basti* which the best treatment of *Vata Dosh*.*Basti* introduced in *Pakwashaya* where *Purishdharakala* is present.*Purishdhara Kala* is nothing but *Asthidhara Kala*.*Basti* introduced in *Pakvashaya*,might be directly acting on *Asthidhara Kala* most important site of *Vayu* is *Pakvashaya*.by introducing *Basti* in *Pakvashaya*,it might also be alleviated *Vayu*.*Ashraya Ashrayi* bhava between *Vayu* and *Asthi* itself explain the action of *basti* on *Sandhigataavata*

Conclusion:-

All the symptoms of *Sandhigataavata* showed more significant result in treated group. Highly significant result in angle of flexion was found in this study .in hematological parameter there is no significant changes observed except ESR .so we concluded that *Panchamuladi Kshir Basti* effective in *Sandhigataavata* without any side effect.in this study we also found relief in patients who had cervical or lumbar spondylolysis along with osteoarthritis ,this will become further scope of study.

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