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RESEARCH ARTICLE

A CRITICAL REVIEW OF AMAVATA AND ITS AYURVEDIC MANAGEMENT

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Abstract

In today's time, Amavata is regarded as one of the most serious diseases affecting human health. The term "Amavata" is derived from two components: Ama and Vata. Ama refers to improperly digested food that produces toxic substances, which can harm body tissues and lead to disease. When this Ama combines with Vata dosha and settles in the joints (shleshmasthana or asthi sandhi), it gives rise to a painful condition known as Amavata.The clinical features of Amavata closely resemble those of Rheumatoid Arthritis, including symptoms such as joint pain, swelling, stiffness, and fever. This disease has been described in Ayurveda since the time of Madhavkara (16th century A.D.) and is classified under Vata-Kaphaja disorders.Amavata is particularly challenging for physicians because of its chronic nature, associated complications, and high morbidity. Modern medicine primarily focuses on disease control rather than complete cure, and prolonged treatment is often associated with adverse effects, as the condition often persists and may progressively lead to disability despite treatment. This study aims to provide a systematic review of Amavata based on classical Ayurvedic texts and its symptoms, pathogenesis and therapeutic approaches.

Literature Search Methodology:-
This review was conducted using published literature available in classical Ayurvedic texts and electronic databases. Classical references were collected from Madhava Nidana, Chakradatta, Yogaratnakara, Bhaishajya Ratnavali, Bhava Prakasha, Ashtanga Hridaya, andVangasena Samhita. Electronic databases including PubMed, Google Scholar, and Scopus.

Introduction:-

The concept of Agni (metabolic fire) in Ayurveda provides a distinctive perspective on digestion and metabolism. Agni is closely associated with Pitta Dosha, which represents the body's heat energy. When Agni functions poorly, it leads to the formation of improperly processed metabolic substances known as Ama. This condition, referred to as Mandagni (low digestive fire), results in incomplete digestion. According to Ayurvedic principles, Ama behaves like

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a toxin (Visha) and contributes to various localized and systemic diseases, with classical texts even comparing it to a state of acute poisoning. Additionally, Ama represents metabolic byproducts that obstruct the body's microchannels (Srotas), causing dysfunction.

At the tissue level, reduced activity of Dhatwagni (tissue-specific metabolic fire) leads to impaired metabolism and accumulation of harmful substances (Ama), which are responsible for systemic disorders such as Amavata. This condition is both localized and systemic, inflammatory in nature, and arises from the interaction of Ama with aggravated Vata Dosha. Improper dietary habits, along with poor adherence to daily (Dinacharya) and seasonal (Ritucharya) regimens, disrupt metabolism and Agni, leading to Ama formation. Simultaneously, Vata becomes aggravated due to factors like engaging in strenuous activity immediately after consuming heavy or fatty foods. When Ama combines with aggravated Vata and circulates throughout the body under the influence of Vyana Vayu, it blocks the Srotas and triggers inflammatory processes, resulting in disease.Ama formed as a result of Hetu Sevana (causative factors) leads to the aggravation of Vata Dosha. When this Ama combines with the vitiated Vata, it localizes in the Trika Sandhi (lumbosacral joint), Kapha Sthana (sites dominated by Kapha), and other joints of the body. This results in symptoms such as joint pain, stiffness, swelling, and fever. Over time, these manifestations may lead to partial or complete loss of joint function, significantly affecting the patient's daily activities.[1]

Modern studies suggest a parallel between Ama and cellular damage caused by free radicals and reactive oxygen species (ROS), which are unstable molecules produced during normal metabolism.Rheumatoid arthritis is a common disorder that most frequently occurs during the third to fourth decades of life. It is significantly more prevalent in females, with a female-to-male ratio of approximately 3:1. Individuals carrying genetic markers such as HLA-D4 and HLA-DR4 are at a higher risk of developing the condition.[2]When present in excess, these molecules cause significant cellular damage. Similarly, Ama is considered a byproduct of impaired metabolic processes. Therefore, managing such conditions involves neutralizing free radicals and ROS while also eliminating accumulated Ama and restoring proper metabolic function to maintain overall health.Non-steroidal anti-inflammatory drugs (NSAIDs), immunomodulatory medications, and sometimes steroids are commonly used to reduce pain and inflammation. However, their long-term use can lead to significant side effects. Additionally, as the disease progresses, it may result in joint contractures and increasing disability.[3]

Etymology:-

- The term Ama is derived from the root word "Am" with the suffix "ninj," and it refers to improperly or incompletely digested substances.
- It describes material that has undergone digestion but has not been fully processed.
- In other words, Ama represents partially digested matter that remains unassimilated in the body.[4]
- It also includes substances that fail to digest properly and are still pending further digestion.[5]
- Additionally, Ama is considered a factor that causes discomfort or obstruction by accumulating in the channels (srotomukha) and creating pressure within them.[6]

Definition of Ama [7]
Various definitions of Ama are described in different classical texts, and a few of them are presented below.

ऊष्मणोऽल्पबलत्वेन धातुमाद्यमपाचितम्|;-
दुष्टमामाशयगतं रसमामं प्रचक्षते|| २५||**[A. H. Su.13/25]**
When Ushma (Agni) functions inadequately, the first Dhatu—Rasa—is not properly formed. Instead, the Anna Rasa remains in the Amashaya and undergoes fermentation or putrefaction (dusta). This improperly processed Rasa is referred to as Ama.
Definition of Amavata[8]

युगपत्कुपितावन्तस्त्रिकसन्धिप्रवेशकौ |:-
स्तब्धं च कुरुतो गात्रमामवातः स उच्यते|| ५|| **[M.N.25/5]:-**
Ama combines with Vata and quickly spreads throughout the body, settling in areas dominated by Kapha. It accumulates in the channels (dhamanis), creating a thick, wax-like obstruction. This process simultaneously affects multiple joints, including those of the waist, neck, and shoulders. This severe condition is referred to as Amavata.

NIDAN [9]

विरुद्धाहारचेष्टस्य मन्दाग्नेर्निश्चलस्य च|:-

स्निग्धं भुक्तवतो ह्यन्नं व्यायामं कुर्वतस्तथा|| १|| **[M.N.25/1]:-**

- ViruddhaAhara: Consumption of incompatible or unsuitable foods.
- ViruddhaCheshta: Engagement in improper or unhealthy physical activities.
- Nischalata: Sedentary lifestyle or lack of physical movement.
- Exercising immediately after eating heavy, oily (snigdha) food.

PURVARUPA [10]: -Amavata is not clearly described in the Brihattayi texts. Only Vangasena has mentioned symptoms like head pain (Shiroruja) and body pain (Gatraruja) as the prodromal features (Purvarupa) of Amavata. These early clinical signs and symptoms can be considered the initial manifestations of the disease.

Classification [11]: -

In Madhava Nidana, AcharyaMadhavakara has classified Amavata based on the predominance of Doshas as follows:

Eka Doshaja:-

1. Vataja
2. Pittaja
3. Kaphaja

Dwi Doshaja:-

1. Vataja-Pittaja
2. Pitta-Kaphaja
3. Kapha-Vataja

Tridoshaja :- In this type of Amavata, features of all three Doshas are present. Bhavaprakasha and Yogaratnakara describe the same classification.

According to AcharyaSharangadhara [12:-]

1. Vataja
2. Pittaja
3. Kaphaja
4. Sannipataja

AcharyaHarita has classified Amavata into four types based on clinical manifestations, which are as follows:

1. Vishtambhi: In this type, symptoms like heaviness of the body (GatraGaurava), abdominal distension (Adhmana), and bladder pain (Bastishula) are observed.
2. Gulmi: This type is characterized by intestinal gurgling sounds (JatharaGarjana), pain similar to Gulma, and stiffness in the lower back (KatiJadata).
3. Snehi: In this type, there is unctuousness of the body (GatraSnigdhata), stiffness (Jadya), weak digestion (Mandagni), and elimination of watery and oily Ama (Vijala and SnigdhaAma).
4. Sarvangi: This type presents with elimination of Pitta along with dark, slimy Ama (Shyama, VijjalaAma), along with fatigue (Shrama) and exhaustion (Klama).

RUPA [13]: -

Madhavakara, Bhavamishra, and other scholars have described the signs and symptoms (Rupa) of Amavata.

These symptoms are classified into the following categories:

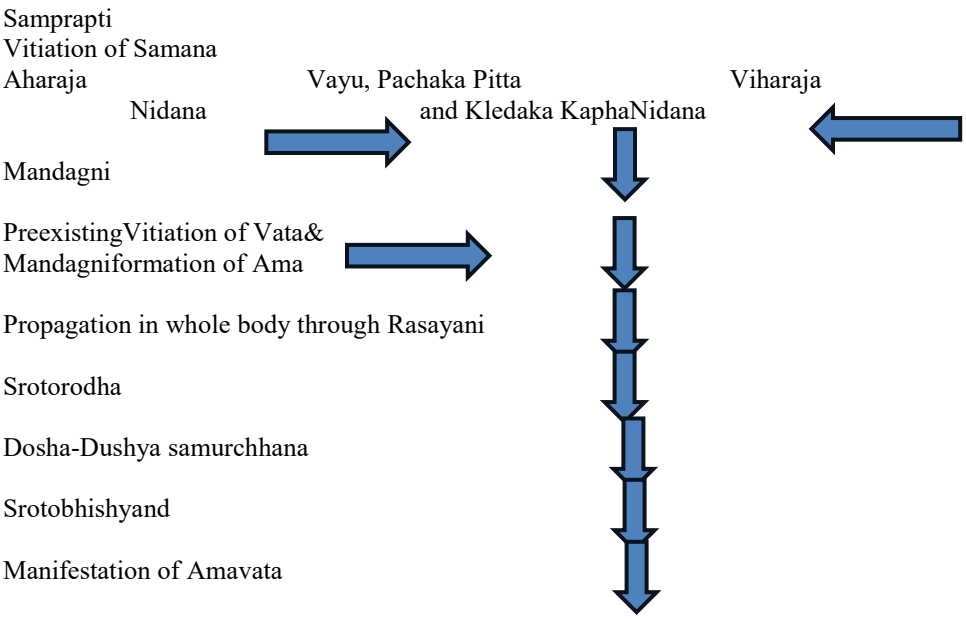
- PratyatmaRupa (specific symptoms)
- SamanyaRupa (general symptoms)
- DoshanubandhaRupa (symptoms associated with Dosha involvement)
- PravriddhaRupa (advanced or aggravated symptoms)

अङ्गमर्दोऽरुचिस्तृष्णा आलस्यं गौरवं ज्वरः|

अपाकः शूनताऽङ्गानामामवातस्यलक्षणम्|| ६||

(M.N.25/6)

Pratyatma	Samanya	Doshanubandha Rupa			Pravriddha
Sandhishool	Angamard	Vata	Pitta	Kapha	Vrishchikvat Vedana
Sandhishotha	Aruchi	Shoola	Daha	Staimitya	Agnidaurbalya
Stabdhata	Trishna		Raga	Guruta	Praseka
Sparshasahatva	Alasya			Kandu	Nidra Viparayaya
	Gaurav				Vidvibaddhata
	Jwara				Vairasaya
	Apaka				Daha
	Shuntaanganama				Bahumutrata
					Antrakunjan



Samprapti Ghataka

Dosha	Involvement of all three Doshas (Tridosha), with predominance of Vata (Vyana, Samana, Apana) and Kapha (Kledaka, Bodhaka, Shleshmaka).
Dhatu	Affected tissues include Rasa, Mamsa, Asthi, and Majja.
Upadhatu	Secondary tissues involved are Snayu (ligaments) and Kandara (tendons).
Srotasa	Channels involved include Annavaha, Rasavaha, Asthivaha, and Majjavaha.
Srotodusti	Vitiation of channels occurs mainly as obstruction (Sanga) and abnormal movement (VimargaGamana).
UdbhavaSthana	Originates primarily in the Amashaya (site of Ama formation) and Pakvashaya (main site of Vata).
Adhisthana	The disease affects the entire body.
VyaktiSthana	Manifestation occurs throughout the body, especially in the joints (Sandhi).
RogaMarga	Classified under MadhyamaRogaMarga (intermediate disease pathway).
Avayava	Primarily involves the joints (Sandhi).
VyadhiSvabhava	The nature of the disease is mostly chronic (Chirakari).

Sadhyata or asadhyata[14]

एकदोषानुगः साध्यो, द्विदोषो याप्य उच्यते|:-
सर्वदेहचरः शोथः स कृच्छ्रः सान्निपातिकः ||*१२*|;-|
(M.N.25/6)

Madhava Nidanahas classified Sadhya-Asadhyataof Amavataon the basis ofAnubandhaof Dosha, whichare as follow:-

- Involvement of one Dosha (Eka-Doshaja) – Sadhya
- Involvement of two Dosha (Dvi-Doshaja) – Yapya
- Involvement of three Dosha (Sannipataja), SarvadehacharaShotha

Upadrava:-
Upadrava refers to complications or secondary clinical conditions that develop along with the primary disease and are usually associated with the same Dosha and Dushya involved in the main pathology.
The following verse describes the eight Upadravas of Amavata:

"*जाड्यान्त्रकूजनानाहतृट्छर्दिबहुमूत्रताः।:-*
शूलंशयननाशोऽष्टोपद्रवाआमवातजाः||119 *।।*":-
According to AnjanaNidana, the eight complications of Amavata include Jadyata (stiffness), Antrakunjana (intestinal gurgling), Anaha (abdominal distension), Trishna (excessive thirst), Chhardi (vomiting), Bahumutrata (frequent urination), Shoola (pain), and Nidranasha (insomnia). Vachaspati and Yogaratnakara have mentioned that these manifestations seen in the advanced stage of Amavata are considered as its Upadravas.

Chikitsa of Amavata (Treatment)[15]: -
AcharyaChakrapani was the first to clearly explain the treatment principles of Amavata. In the text Chakradatta, he described a systematic line of management for Amavata aimed at digesting Ama, reducing aggravated Vata, relieving pain and swelling, and restoring normal body functions.

लङ्घनं स्वेदनं तिक्तं दीपनानि कटुनि च।
विरेचनं स्नेहपानं बस्तयश्चाममारुते ।
सैन्धवाद्यानुवास्याश्च क्षारबस्तिः प्रशस्यते ॥ १ ॥ (Chakradatta)
In the general treatment of Amavata, therapies such as Langhana (fasting/light diet), Swedana (sudation therapy), the use of bitter and pungent substances, and digestive fire–enhancing medicines are considered beneficial. Virechana (purgation therapy), Snehapana (internal oleation), Anuvasana Karma with Saindhavadi Taila, and Kshara Basti are also recommended for effective management of the disease.

लङ्घनंस्वेदनंतिक्तंदीपनानिकटुनिच।
विरेचनंस्नेहपानंबस्तयश्चाममारुते॥१॥
रूक्षः स्वेदोविधातव्योबालुकापोटलैस्तथा।
उपनाहाश्चकर्तव्यास्तेऽपिस्नेहविवजिताः॥२॥ (yogaratnakar)
According to Yogaratnakara, the treatment of Amavata includes Langhana (fasting or lightening therapy), Swedana (sudation therapy), administration of bitter substances, digestive stimulants, and pungent substances. Virechana (purgation therapy), Snehapana (internal oleation), and Basti Karma (medicated enema therapy) are also beneficial in the management of Amavata.
Dry fomentation (Ruksha Sweda) should be performed using boluses prepared with dry materials such as sand. Likewise, Upanaha (poultice therapy) should be carried out only with substances free from unctuous or oily properties.

लङ्घनेस्वेदनंतिक्तंदीपनानिकटुनिच।
विरेचनंस्नेहनञ्चबस्तयश्चाममारुते।।१५।।
रूक्षःस्वेदोविधातव्योबालुकापुटकैस्तथा।
उपनाहाश्चकर्त्तव्य, स्तेऽपिस्नेहविवर्जिताः।।१६।। (vangasenasamhita)
As described in VangasenaSamhita, the management of Amavata includes Langhana (lightening therapy/fasting), Swedana (sudation therapy), and the use of pungent, digestive-enhancing, and spicy substances. Therapies such as Virechana (purgation), Snehana (oleation therapy), and Basti Karma (medicated enema therapy) are also advised for

alleviating the disease.Ruksha Sweda (dry fomentation) should be performed with sand-filled boluses, while Upanaha Sweda (poultice fomentation) should be carried out using non-unctuous substances devoid of oily properties.

लङ्घनं स्वेदनं तिक्तं दीपनानि कटूनिच।
विरेचनंस्नेहपानंबस्तयश्चाममारुते ॥१॥ (B.R.)
According to BhaishajyaRatnavali, the treatment of Amavata includes Langhana (fasting or intake of light food according to the strength of the patient), Swedana (sudation therapy), administration of bitter substances, digestive and appetite-stimulating medicines, and pungent substances. Virechana (purgation therapy), Snehapana with medicated oils such as castor oil, and Basti Karma (purificatory enema therapy) are also recommended.
After the reduction of Ama through therapies like Langhana, oleation therapy may additionally be administered to alleviate dryness and aggravated Vata.

लङ्घनंस्वेदनंतिक्तंदीपनानिकटूनिच।
विरेचनंस्नेहनञ्चवस्तयश्चाममारुते॥१४॥
रूक्षःस्वेदोविधातव्योबालुकापुटकैस्तथा।
उपनाहाश्चकर्त्तव्यास्तेऽपिस्नेहविवर्जिताः॥ (B.P.)
According to BhavaPrakasha, the management of Amavata should primarily include Langhana (lightening therapy/fasting), Swedana (sudation therapy), administration of bitter substances, digestive fire–stimulating medicines, and pungent substances. Virechana (purgation therapy), Snehana (oleation therapy), and Basti Karma (medicated enema therapy) are also considered beneficial.
Ruksha Sweda (dry fomentation) should be performed using sand-filled boluses, and Upanaha Sweda (poultice fomentation) without unctuous substances is regarded as beneficial in this condition.

आमवातगजेन्द्रस्य शरीरवनचारिणः ।
निहन्त्यसावेक एव एरण्डस्नेहकेसरी ॥१२॥ (B.R.)
According to Ayurvedic literature, Amavata is compared to a powerful elephant wandering within the forest of the body, while castor oil (Eranda Taila) is described as a lion capable of subduing it single-handedly. This signifies that castor oil is considered highly beneficial in the management of Amavata. The recommended dose is approximately 2 to 2½ tolas.

"*एरण्डतैलमाह*":-
आमवातगजेन्द्रस्य शरीरवनचारिणः ।
एक एव निहन्त्याशु एरण्डतैलकेशरी ॥ ५० ॥ (B.P.)
According to classical Ayurvedic description, Amavata is metaphorically compared to an elephant roaming in the forest of the body. In this analogy, Eranda Taila (castor oil) is described as a lion that alone is capable of swiftly destroying this disease. This signifies the strong therapeutic efficacy of castor oil in the management of Amavata.

आमवातगजेन्द्रस्य शरीरवनचारिणः।
एक एव निहन्त्याशु ह्येरण्डस्नेहकेसरी।।३७।।(vangasenasamhita)
In the forest-like body, the elephant of Amavata can be controlled and subdued by none other than the lion-like Eranda Taila (castor oil), which alone is considered sufficient for its effective management.

आमवातगजेन्द्रस्यशरीरवनचारिणः /
एक एव निहन्ताशु एरण्डस्नेहकेसरी ॥ ३ ॥
कटीतटनिकुञ्जेषुसञ्चरन्वातकुक्षरः /
एरण्डतैलसिंहस्य गन्धमाघ्राय नश्यति ॥ ४ ॥(yogaratnakar)
Amavata is described metaphorically as a powerful elephant roaming in the forest-like human body. It is stated that only Eranda Sneha (castor oil), symbolized as a lion, is capable of quickly destroying this disease, emphasizing its strong therapeutic efficacy in Amavata. Further, when Vata, also compared to an elephant, moves through the waist and abdominal regions, it is said to get pacified merely by the influence (therapeutic effect) of Eranda Taila. This indicates that castor oil is highly effective in controlling and alleviating Vata disorders, especially those affecting the lower parts of the body.

Pathya in Aamavata[16]: -

यवाः कुलत्थाः श्यामाकाः कोद्रवा रक्तशालयः ।
वास्तुकं शिग्रु वर्तकं कारवेल्लं पटोलकम् ॥२२६॥
आर्द्रकं तप्तनिर्व्यूषं लशुनं तक्रमसंस्कृतम् ।
जाङ्गलानां तथा मांसं सामवातगदे हितम् ॥२२७॥
मन्दुरारोग्यषट्कुष्ठदारु भल्लातक गोजलमाद्रकम् ।
कटूनि तिक्तानि च दीपनानि स्युरामवातापहिनि हितानि ॥२२८॥(B.R.)

In Aamavata, foods and drugs having Deepana (digestive stimulant), Pachana (Ama-digesting), and Vata-Kapha pacifying properties are considered beneficial. Barley (Yava), horse gram (Kulattha), Shyamaka, Kodrava, RaktaShali rice, Vastuka, Shigru, brinjal, bitter gourd, and Patolaka are advised as they are light to digest and help reduce Ama. Fresh ginger, hot soups and decoctions, garlic, preparations processed with buttermilk, and meat of Jangala animals are also beneficial because they improve Agni and relieve pain, stiffness, and swelling. Drugs such as Mandura, Kushtha, Devadaru, Bhallataka, and pungent as well as bitter substances possessing Deepana and Pachana properties are useful in alleviating Aamavata by digesting Ama and correcting impaired metabolism.

आमवातेपञ्चकोलसिद्धंपानान्नमिष्यते।(Chakradatta)

In Ayurveda, Panchakola is a classical herbal combination consisting of long pepper, long pepper root, chavya, chitraka, and dry ginger. It is traditionally recommended in the management of Amavata because of its digestive and metabolite-clearing properties. Food and drinks prepared with Panchakola are believed to stimulate digestion, reduce the accumulation of ama (metabolic toxins), and help relieve heaviness, stiffness, and discomfort associated with the condition.

Apathya in Aamavata:-

दधिमस्तुगुडक्षीरपोतकीमाषपिष्टकान् ।
दुष्टनीरं पूर्ववातं विरुद्धाशनानि च ॥२२९॥
असात्म्यं वेगरोधश्च जागरं विषमाशनम् ।
वर्जयेदामवातार्तो मांसञ्चानूपसम्भवम् ॥२३०॥
अभिष्यन्दकरा ये च ये च वाते गुरुपिच्छिलाः ।
वर्जनीयाः प्रयत्नेन आमवातार्तिदैहिनैः ॥२३१॥(B.R.)

In Aamavata, all food articles and lifestyle factors that increase Ama and aggravate Vata should be strictly avoided. Curd, mastu (watery part of curd), jaggery, milk, Potaki, black gram preparations, flour-based heavy foods, contaminated water, exposure to cold eastern wind, and incompatible diet are considered harmful as they impair digestion and promote Ama formation. Similarly, unwholesome food habits, suppression of natural urges, night awakening, irregular eating patterns, and consumption of meat obtained from marshy or aquatic animals (Anupamamsa) worsen the disease condition. Foods that are Abhishyandi (causing obstruction in body channels), heavy, sticky, and difficult to digest further aggravate stiffness, pain, swelling, and restricted movements in patients suffering from Aamavata.

Discussion: -Amavata is a chronic inflammatory disorder caused by the formation of Ama due to Mandagni and its association with aggravated VataDosha. The disease closely resembles Rheumatoid Arthritis and presents with joint pain, swelling, stiffness, fever, and restricted movements. In Ayurveda, the main aim of treatment is to digest Ama, improve Agni, remove Srotorodha, and pacify VataDosha.

Langhana is considered the first line of treatment as it reduces Ama and improves digestion. Deepana and Pachana medicines having Tikta and Katu properties help stimulate Agni and digest accumulated toxins. Swedana, especially RukshaSweda like BalukaSweda, is useful in relieving stiffness, swelling, and pain. After Ama is reduced, Snehana and Virechana are advised to pacify Vata and remove vitiated Doshas.

Among Panchakarma therapies, Basti Karma is regarded as the most effective treatment because it directly controls aggravated Vata Dosha. Classical texts also emphasize the importance of ErandaTaila, which possesses Deepana, Vata-KaphaShamana, and mild purgative properties, making it highly beneficial in reducing pain and stiffness.

Diet and lifestyle also play an important role in management. Light and easily digestible foods such as Yava, Kulattha, ginger, garlic, and Takra are beneficial, whereas curd, heavy oily food, incompatible diet, and sedentary habits should be avoided as they increase Ama formation.

Thus, Ayurvedic management of Amavata provides a holistic approach by correcting the root cause of the disease rather than only giving symptomatic relief.Recent clinical studies have reported that Ayurvedic interventions including Panchakarma procedures, Basti therapy, Eranda Taila, and Deepana-Pachana formulations may reduce pain, joint swelling, morning stiffness, and inflammatory markers in patients with rheumatoid arthritis. However, most available studies have relatively small sample sizes, short follow-up periods, and methodological limitations. Therefore, larger multicentric randomized controlled trials are required to establish stronger scientific evidence regarding the efficacy and safety of Ayurvedic management of Amavata.

Limitations: - This review primarily relies on classical Ayurvedic literature, while the number of high-quality clinical trials evaluating Ayurvedic interventions in Amavata remains limited. Furthermore, variations in study design, treatment protocols, and outcome measures make direct comparison among studies difficult. Future well-designed randomized controlled clinical trials are required to strengthen the available evidence.
Conclusion: - Amavata is a chronic disease caused by Ama formation and aggravation of VataDosha due to impaired digestion and unhealthy lifestyle practices. Ayurveda describes detailed treatment principles focused on AmaPachana, AgniDeepana, and VataShamana.

Therapies such as Langhana, Swedana, Deepana-Pachana, Virechana, Snehana, and especially BastiKarma are highly effective in managing the disease. ErandaTaila is also considered an important remedy for relieving pain, stiffness, and inflammation. Proper PathyaAhara and lifestyle modifications are essential for better recovery and prevention of recurrence.Therefore, Ayurveda offers a safe and holistic approach in the management of Amavata and can help improve the quality of life of patients suffering from Rheumatoid Arthritis-like conditions.
Ethical Statement: -This is a review article based exclusively on published literature. No human participants or animals were involved in this study; therefore, institutional ethical approval was not required.

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