

*Case Report***Management of Rheumatoid Arthritis through Panchkarma- A Case Study**Rashmi Bhaskar¹, Parul Sharma², Ved Bhushan Sharma³¹M.D. Scholar, Dept. of Panchkarma, Rishikul Campus (Haridwar), Uttarakhand Ayurved University, Dehradun²M.D. (Ay.) Panchkarma, Medical Officer, Dept. of Panchkarma, Rishikul Campus (Haridwar), Uttarakhand Ayurved University³M.D. (Ay.) Ras-shastra & Bhaisajya Kalpana, Medical officer, Dept. of Agad Tantra, Rishikul Campus (Haridwar), Uttarakhand Ayurved University

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*Received: 12/05/2015**Revised: 24/06/2015**Accepted: 26/06/2015***ABSTRACT**

Rheumatoid Arthritis is multi-system involving disease, primarily affecting the synovial and adjacent tissues. In its typical form it is symmetrical, destructive and deforming poly-arthritis affecting small and large synovial joints with associated systemic disturbances. Considering its symptoms it resembles to that of Amavata. Ayurveda advises undergoing specific Panchkarma according to season to purify the body, relax the mind, improves the digestion and metabolism. Here a female patient of Rheumatoid Arthritis came to take Ayurvedic management for her betterment. She had been given Panchkarma therapy. This study proved the significance of Panchkarma on the classical symptom of Amavata i.e Angamarda, Aruchi, Jwara, Shotha etc. It reflects that the Panchkarma has potent shroto-vishodhna effect and found role as promotive, preventive and curative measure in the patient of R.A.

Keywords- Rheumatoid Arthritis, Amavata, Panchkarma, Shroto-vishodhna

INTRODUCTION

Rheumatoid Arthritis is an autoimmune disease in which the immune system of the body attacks its own tissues i.e. cartilage and synovial membrane characterized by persistent inflammation of peripheral joints with associated systemic features. It is characterized by inflammation of joints, which causes swelling, pain and loss of function. [1] It is a chronic systemic inflammatory disorder that may affects many tissues and organs including skin, blood vessels, heart, lungs and muscles but principally attacks the joints producing a non-suppurative proliferative synovitis that

often progress to destruction of the articular cartilage and ankylosis of the joints. [2] Community prevalence study shows that the ratio of occurrence between female and male is 3:1. The onset of disease is more frequent during the 4th and 5th decade of life with 80% the patients developing the disease between age group of 35-50 years. [2] In Ayurveda R.A. is co-related with Amavata due to most resembles of its features, which are shown in table no. 1.

In Modern Science, the management of patients with R.A involves an interdisciplinary approach which attempts to deal with the various problems that these

individual encounters with functional as well as psychosocial interactions. NASID, steroids etc. are the main stay of therapy as they provide relief of pain and stiffness but they do not alter the course of disease and the margin between effective and toxic doses is often small.

Therefore a variety of Ayurvedic Panchkarma therapy modalities may be useful in decreasing the symptoms of R.A. In Ayurveda the principles of treatment for Amavata are Langhana, Swedana, drugs having Tikta, Katu Rasa and Deepana action Virechana, Snehapana and Anuvasana basti as well as Kshara Basti. [3]

CASE REPORT

A female patient of age 35 years with complaints of pain in multiple joint especially bilateral lower limb and upper limb, tenderness, swelling, morning stiffness and temperature of all joints. She is unable to doing daily routine works as holding objects etc due to pain also. She got allopathic treatment for it, but she had got no relief.

ON EXAMINATION

G.C – Poor

Appetite- decreased	Urine -
increased frequency	
Bowel- constipated	Sleep –
disturbed	

General Examination

Pulse Rate- 72/min, B.P. - 120/84mmHg

Pallor- present

Tongue- coated

Systemic Examination

Locomotor System:

Inspection - inflammation of both hand joints, elbow joints, knee joints and metatarsal joints.

Palpation - Tenderness and Warmth – present in B/L wrist joint, knee joint, both shoulder and small joints. Stiffness present in all over body.

Knee joint - Crepitations very clear in B/L knee joint

SLR Test- Positive in B/L lower limbs. Right limb 60° and left limb 30°

INVESTIGATION - done previously

ESR – 30mm by wintrobe method

Uric acid – 6.6mg/dl

RA test- positive

PATHOGENESIS

The disease comes under Ama and Vatadusthi. It is an Ama and Ras pradosaj vikar. [4] It occurs due to having unwholesome food, regimen and life style which vitiate vata. The etiological factors disturb the agni and produces ama which circulate in body, combined with vitiated vata and lodged in sandhi and asthi. As it is caused due to deeply seated metabolic toxins so there is permanent damage of tissues and channels. So the line of treatment is to correct the Agni, control the vata and avoidance of etiological factors. For that Samshaman chikitsa (oral medicine), Ruksha sweda (dry sudation), Pottli sweda (sudation by medicated bolus), Sarwang Abhyanga- Swedana (whole body massage and steam bath) and yoga-basti (medicated enema) are taken in account.

TREATMENT-

The total three weeks of panchkarma therapy was planned for the patient according to her condition.

In first week the treatment given was Sarwanga Ruksha pottali Sweda with Eranda beeja, Ajwain, and Saindhava salt.

For next week the Sarwanga Jambeera pottli sweda is given. [5]

In third week of treatment, Sarwang Abhyanga-Swedana and Yoga basti is given for 1week. Yoga basti with 5 matra basti and 3 Asthapana basti each on alternate day. Matra basti is given with 50ml Saindhavadi Tail. The constituents of jambeera pottali sweda and asthapana basti are given in table no. 2

[Table no. 1]- Comparison of features of Amavata with Rheumatoid Arthritis

AMAVATA	R.A
Sandhi-Shula	joint pain
Sparshasahyata	Tenderness above the joints
Sandhi-Shotha	Joint-swelling
Gatra-stabdhatta	Stiffness of joints and whole body
Raga	Redness around the joints
Jwara	Low grade fever
Daha	Burning of fingers and toe
Utasha-hani	Loss of enthusiasm
Hridgraha	Pericarditis, myocarditis, conduction defect
Angavaikalyata	Deformities
Jadya	Inability to perform action due to stiffness
Anyani-Updravani	Carpel tunnel syndrome, Felty's syndrome sjogron syndrome

[Table No.2] The constituents of Jambheera pottli sweda and Asthapan basti:-

JAMBEERA POTTLI	ASTHAPAN BASTI
Garlic - 10	Honey- 50ml
Nimbu - 2-3	Saindhav salt-5mg
Sunthi Churna-20gm	Saindhavadi oil-50ml
Rasna Churna- 20gm	Soya kalk- 20 gm
Devdaru-20gm	Dhasmool Kwath-250ml
Methi churna-20gm	
Haldi churna- 1table spoon	
Saindhav salt- 2table spoon	
Eranda oil- 100ml-150ml	

The matra basti was given just after taking light meal, and the Asthapan basti was given empty stomach when previously taken food is digested. [6]

RESULT

After completion of therapies, improvement noticed was that, the patient got relief in pain, tenderness, stiffness of the joint. The patient is now able to do daily routine works with increasing grasping power of the hands, increase appetite and improvement of other sign and symptom.

Symptoms Rating Scale For Rheumatism as per American Rheumatism Association :

Absent	-
Mild	+
Moderate	++
Severe	+++
Agonizing	++++

Clinical Improvement

For the assessment of clinical improvement, the incidents of presenting

features were worked out and the severity of the symptoms rated in patient. For this purpose the following symptoms rating scale was used in all below mentioned symptoms.

Effect on sign and symptom

PARAMETER	Before treatment	After treatment
Morning stiffness	++++	+
Joint Pain	++++	++
Swelling of joint	+++	+
Restriction of joint movement	++++	+
Diffuse muscular skeleton pain	++	+
Anorexia (Aruchi)	+++	+
Thirst (Trishna)	++	+
Malaise (Alasya)	+++	+
Fatigue (Gauravata)	+++	+
Fever (Jwara)	++++	-
Indigestion (Apaka)	+++	+
No. of Joint involvement	Almost all joint	Knee and metacarpal joint



[Figure No. 1] – Patient presented with Z deformity, Swan neck deformity and Ulnar Deviation.

The patient called for review after 1 month and discharged with some shaman medicine as

Singnaad Guggulu - 500 mg three times a day with lukewarm water after meal

Aamvatari Ras – 250mg three times a day with lukewarm water after meal
Pathya- Apathya - The patient was advised to take light, hot and fresh food articles. She should avoid curd, heavy and oily food and citrus fruits etc.

DISCUSSION

Probable Etiopathogenesis & Line of Treatment

Due to improper food habits and life style, there is vitiation of doshas leading to muscular skeleton deformity. It leads to the deviation of Agni (digestive fire) from the normal stage causing mandagni (diminished bio-fire). This mandagni causes the formation of Ama (undigested food toxin). Along with this, there is vitiation of vata due to indulgence in the vata prakopaka ahar-vihar. Now this morbid Ama circulates all over the body. Ama propelled by vata reaches the sleshma sthana of the body. The vitiated Ama facilitates shrotoabhishyandana and srotorodha (obstruction of channels). Simultaneously vitiated vata and Ama reaches the Trika (sacral region) and other joints causing stiffness in the whole body and producing disease Amavata. So the treatment given is that of Amapachaka, Shrotoshodhan and vata Chikitsa upkrama.

As the line of treatment of Amavata is Langhana (fasting), Swedana (sudation) having Tikta, Katu rasa and Deepana action, virechana (therapeutic purgation), Snehapana (oral intake of medicated ghee) and Anuvasana as well as Kshara basti.^[7] So here Ruksha sweda, Jambheera pottli sweda (Snigdha sweda) with Matra and Asthapan basti were given. Kshara basti is not opted as in the patient vata was predominant dosha, the kapha and meda was not vitiated to such an extent to prescribed vaitaran basti etc, as it can lead to more vitiation of vata.

Mode of action of treatment given:-

In first two third of treatment Ruksh Swedana and Jambheera pottli sweda was given, Swedana therapy is the best treatment for vitiated vata and kapha dominant disease.^[8] Swedana is done to liquefy the vitiated doshas which are spread throughout the body. Swedana is the procedure, which relieves stiffness, heaviness, and coldness of the body and produces sweating.^[9] Ushna and Tikshna properties of Swedana karma helps in digestion of Ama doshas, which results in stimulation of all the 13 types of Agni.^[10] Ruksha sweda with Eranda Beeja, Ajwain and Saindhav salt having Ushna, Tikshna, Shrotosodhana and Amapachaka properties and Dravya of Jambheera pottli sweda having Ushna, Tikshna, Sukshma, Aashukari, anti inflammatory, antiseptic, Shrotosodhana and Amapachan properties. So Swedana given by these Dravya is more effective in the patient of Amavata. The Swedana helps the remaining of pain, stiffness, inflammation and soften the body.^[11]

In last third week yoga basti was planned. Basti is the chief therapy for the vitiated vata.^[12] Vata is only responsible for all the functions of the body and also therefore for the production of the disease. The given basti enters the Pakvasaya, which is the main seat of vata dosha and destroy vitiated vata dosha, which is the originator of the disease. By subsiding the vata, the disease located in the other parts of the body also become pacified just like cutting the root of a plant, stem branches, sprouts, fruits, leaves etc. also destroyed.^[13] The Shaman medicine like Singnaad Guggulu and Amavatari Ras is beneficial in Amavata. They help in curing joint stiffness, inflammation, pain and imbalance of Agni and Doshas.

CONCLUSION

In today's world more and more people falling victim to the adverse effects

of faulty dietary habits, stress, lack of exercise etc. which is leading to disease like improper digestions, lack of sleep, chronic fatigue resulting into serious illness like that of Rheumatoid arthritis in patient having hereditary factors. It can be managed by following the line of treatment of vitiated Vata and Ama i.e Snehana, Swedana, basti and use of Guggulu etc. This case study proves that Panchkarma therapy is very beneficial and effective in Rheumatoid Arthritis.

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