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## A Single Case Evaluation of Osteoarthritis and its Management Through *Panchkarma*

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### ABSTRACT:

Osteoarthritis is a degenerative joint disease and also known as a wear and tear disease. It is extremely prevalent in society and is a major cause of disability. Osteoarthritis can be correlated with *Sandhigata Vata* based on similarities in information reviewed from *Ayurveda* and modern literature. *Sandhigatavata* is one such condition, which usually starts with ageing and has become common in the society. It is disease which appears mostly in the early forties but due to over use of joint, trauma, deficient diet and obesity this disease has become now prevalent in young generation too. Hence, not only treating *Sandhigata Vata* is important but equal emphasis must be given to prevent early degeneration and related changes. In the present study the treatment of Male patient having symptoms of *Sandhigata Vata* treated with *Ayurvedic* medication along with *Panchkarma* therapies. No such complication was found during the treatment and significant improvement was observed in sign and symptoms. It is important to treat Osteoarthritis effectively using a multidisciplinary approach and *Panchakarma* provides such approach to the patients.

**KEY WORDS:** *Sandhigata Vata*, Osteoarthritis, *Vata Vyadi*, *Panchkarma*

### INTRODUCTION

Osteoarthritis is the most common articular disorder begins asymptotically in the 2nd and 3rd decades of life and is extremely common by age 60 years. Almost all persons by age 40 have some physiological changes in weight bearing joint. "Osteoarthritis" is derived from the Greek word "osteo" means "of the bone" "arthro" means "joint" and "itis" means inflammation of the joints. Hence, an inflammatory change in the joints of bone is called as

osteoarthritis.

The disease Osteoarthritis may be regarded as a reward of longevity. The disease Osteoarthritis is more prone to be affected the knee joint because it is most frequently involved joint in daily routine work. Knee joint is weight bearing joints among all joints so, more prevalence in overweight patients.

Osteoarthritis is the second most common rheumatologic problem and is most frequent joint disease with prevalence



22% to 39% in India.<sup>[1]</sup> Worldwide O.A. is the most common articular disease of people of 65 years and above.<sup>[2]</sup>

### **Sandhigata vata**

In *Ayurveda* classics *Sandhigata Vata* is one of the *Vata Vyadhi*, which is described as a separate entity comes under *Sthanagata Vyadhi*.<sup>[3]</sup> Herein the Vitiated *Vayu* gets located in the *Sandhi Pradesha* and results in the *Sandhigata Vata Rupa*:

The symptoms seen in *Sandhigata Vata* are *Sotha* (swelling), *Prasarana- Akunchanayoho Pravrittisavedana* (painful joint movement) and *Vata Poornadriti Sparsha* (affected *Sandhi* resembles a bag filled with air) are described by *Acharya Charaka*<sup>[4]</sup>

## **CASE REPORT**

A 57-Year-old male patient came to *Panchkarma* OPD of Rishikul Campus, Haridwar With chief complaints of Pain and swelling in bilateral knee joints since 10-11 years.

### **History of present illness**

Patient was asymptomatic before 10 years. One day he got injury in his right knee joint and suddenly developed pain which was aggravated while walking and climbing stairs. He took homeopathic medicine for 1 month and get significant relief in pain. After that he discontinued all medications. Since last three month, he again developed severe pain and swelling in his both knee joints because of prolonged walking. So he took allopathic medicine from AIIMS Rishikesh and get mild relief in symptoms only the course the medication and where he suggested to under surgery. So he came to us and got admitted in IPD of Department of *Panchkarma* for further management

### **History of past illness**

There is no significant history of Hypertension, Diabetes and thyroid problem but he had history of injury on right knee joint before 10 -year.

### **Personal history**

Occupation – Priest  
Diet – Vegetarian  
Appetite – Normal  
Thirst – Normal  
Bowel - Irregular  
Micturition - Normal  
Sleep – Sound

Allergy – Not any

### **Ashtavidh pariksha**

- 1- *Nadi (pulse)* – 68/min.
- 2- *Mala (Stool)* – Normal consistency
- 3- *Mutra (Urine)* – *Prakrut (regular)*
- 4- *Jihwah (Tongue)* – *Nirama (not-Coated)*
- 5- *Shabda (Voice)* – *Prakrut (clear)*
- 6- *Sparsh (touch)* – *Anushna*
- 7- *Drik (Eyes)* – *Prakrut (Normal)*
- 8- *Akriti (built)* - *Sthul*

### **On examination of musculoskeletal system**

After proper and detailed examination following findings were noted. X-ray of both knee joints was taken for radiological assessment and suggested that there was joint space reduction with small osteophytes seen. Blood investigations like CBC, ESR, RA Factor, CRP were done as a part of screening to rule out other diseases. All these blood investigations were found within normal limit. (Table 1-2)

### **Assessment of criteria**

Subjective Criteria -Pain, Tenderness, Swelling

Objective criteria – ROM, Walking distance, Crepitation

Note-Assessment of pain – By using VAS scale (Visual analogue scale)

Crepitus –

- No crepitus -0
- Palpable crepitus -1
- Audible crepitus -2

Swelling -

- No swelling -0
- Slight swelling -1
- Moderate swelling -2
- Severe swelling -3

Tenderness

- No tenderness -0
- Patient winces on touch -1
- Patient winces and withdraws the affected part -2
- Patient does not allow the joint to be touched -3

### **Treatment protocol**

Treatment protocol was planned as, *Jaanu Basti, Sthanik Abhaynga* followed by *Sthanik Taila Dhara* for 21 days.

(Table 3)

During the procedure, gently *Abhyanga* was done over the both knee joint after *Janu Basti* for 10 -15 minute.

*Shamana Aushadhi* –(Table 4)

(Anupana – Koshna Jala)

During the course of *Panchkarma* therapies, these *Shamana Aushadhi* was also given to the patient. These medications was continued for 1 month. Assessment of the parameters was done before therapy and at the end of the therapy. Follow up was taken after 1 month of completion of therapy.

## OBSEVATION & RESULT (Table 5-6)

### DISCUSSION

The general line of treatment for the *Sandhigata Vata* is “*Sneha upnaha agnikarma bandhana unmardanani cha*”.<sup>[5]</sup> Hence *Snehana* and *Swedana* in the form of *Janu Basti* and *Dhara* would be promising to relieve the symptoms.

For irregular bowel movements, *Avipattikar Churna* was given. Patient get the significant improvement in bowel habit. *Yograj guggulu* is one of major *Vata Shamaka Dravya*. Thus it pacifies *Vata Dosha*, improve the general condition of the body and act as a rejuvenator of the body. Along with these Tab. Neo also act as a rejuvenator. Osteon D is a *Ayurvedic* calcium and zinc supplement. It contributes to tissue regeneration and formation of bone. Thus helps in the *Samprapti Vighatana* of the *Sandhi Gata Vata*

*Amritadi guggulu* has *Tikta Rasa* and *Ushna Virya*. *Tikta Rasa* increases the *Dhatvagni* (metabolic stage). As *Dhatvagni* increases, nutrition of all the *Dhatu* will be increased. As a result, *Asthi Dhatu* and *Mjja Dhatu* may get stable and *Dhatu Kshaya* will be decreased. It can be said, it slows down the degeneration process.

Along with these oral medications, Patient was undergoing *Panchkarma* therapies i.e *Janu Basti* and *Sthanik Taila Dhara*. *Janu Basti* can be considered as *Bahirparimarjana Chikitsa*.<sup>[6]</sup> As it is a type of *Bahya Snehana* and *Swedana*. It is considered as a *Snigdha Sweda*. *Snehana* mainly acts against *Ruksha guna* caused by *Vata* and *Swedana* mainly act against *Sheeta guna*. It also reduces *Stambha* and *Gauravta*. *Dhara Karma* is one of the treatment mentioned under *Murdh Taila Chikitsa* as *Shirodhara*.<sup>[7]</sup> The same *Dhara* can be applied on localized area then it is called *Sthanik Dhara*. According to *Acharya Sushruta*, the *Veerya* of *Dravyas* applied over the skin is absorbed by

*Tryagaami Dhamanis*<sup>[8]</sup> which are present all over the body and are attached to *Romakoopas*. *Swedana* opens these *Romakoopas*. These *Dravyas* are mostly *Ushna*, *Teekshna*, *Laghu* in properties and having effect of *Vata-kaphahara* and *Shophahara*. Due to these properties oil reaches the target part. Hence these will be helpful in pacification of the vitiated *Vata Dosha*.

### CONCLUSION

Osteoarthritis is a very common condition. Individual who suffers from this disease as usually suffers for their life. Management is usually difficult at later stages of the disease. Osteoarthritis become cause of distress to modern medical science and satisfactory treatment is yet to be discovered. All such factors show the gravity of the disease and compelled to go for a better remedial search from *Ayurveda*. In this study patient initially had severe joint pain and swelling over the joint. After therapy these symptoms are significantly relieved. Audible joint crepitations in the beginning are also reduced after *Sthanik Taila Dhara*. Swelling over the joints is completely relieved after 21 days of therapy.

*Ayurvedic* management of *Sandhigata Vata* is one of the cost-effective therapy. This is one case study which give significant relief to the patient

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**Table 1 Upper limb (B/L)**

Nutrition	Normal
Tone	Normal
Power	5/5
Coordination	Proper
ROM	Normal

**Table 2 Lower limb-**

	<b>RIGHT</b>	<b>LEFT</b>
<b>Nutrition</b>	Normal	Normal
<b>Tone</b>	Normal	Normal
<b>Power</b>	4/5	4/5
<b>Coordination</b>	Proper	Proper
<b>ROM</b>	Upto 20 degree	Upto 30 degree

**Table 3 Treatment protocol**

<i>Jaanu Basti with Dhanwantar Taila - for 7 days</i>
<i>Sthanik Abhyanga with Dhanwantar Taila- for 7 days</i>
<i>followed by Sthanik Taila Dhara with Tila Taila – for 14 days</i>

**Table 4 Shamana Aushadhi –**

<b>S.no.</b>	<b>Shamana Aushadhi</b>	<b>Dose</b>	<b>Duration</b>
1-	<i>Avipattikar churna</i>	5gm bd before meal	30 days
2-	<i>Yograj guggulu</i>	250mg bd after meals	30 days
3-	<i>Amritadi Guggulu</i>	250mg bd after meals	30 days
4-	Tab. Osteon D	500mg bd after meals	30 days
5-	Tab. Neo	250 mg bd after meals	30 days

**Table 5 OBSERVATION & RESULT – Subjective Criteria**

<b>Subjective Criteria</b>	<b>Before treatment</b>		<b>After treatment</b>	
	<b>Rt.</b>	<b>Lt.</b>	<b>Rt.</b>	<b>Lt.</b>
Pain	8	8	2	2
Tenderness	2	2	0	0
Swelling	2	2	0	0

**Table 6 Objective Criteria**

Objective Criteria	Before treatment		After treatment	
	Rt.	Lt.	Rt.	Lt.
Walking distance	100m	100m	300m	300m
ROM	Restricted upto 20 degree	Restricted upto 20 degree	45 degree	45 degree
Crepitation	2	2	1	1