

International Research Journal of Ayurveda & Yoga

An International Peer Reviewed Journal for Ayurveda & Yoga



Differential Diagnosis of *Aamvata* and *Sandhivata*: - A Critical Review

Sangita Choudhary,¹ Nisha Gupta²

VOLUME 4 ISSUE 7

1. PG Scholar, PG Dept. of Ayurveda Samhita and Maulik Saidhanta national Institute of Ayurveda (Deemed to be University) Jaipur
2. Professor and HOD, PG Dept. of Ayurveda Samhita and Maulik Saidhanta national Institute of Ayurveda (Deemed to be University) Jaipur

Corresponding Author:- Sangita Choudhary, PG Scholar, PG Dept. of Ayurveda Samhita and Maulik Saidhanta national Institute of Ayurveda (Deemed to be University) Jaipur. E Mail- sangitachoudhary70@gmail.com

Article received on 3rd July 2021

Article Accepted 27th July 2021

Article published 31st July 2021

ABSTRACT: -

Ayurveda is recognized as the foremost life science and describes multiple ways disease to manifest and manage various disorders. *Ayurveda's* holistic approach, treating the diseased holistically, which means targeted interventions for complete physical, psychological and spiritual well-being, makes this science a complete holistic approach in the management of all types of disorders.

In today's era, 1 out of every 5 people suffered from joint pain and swelling. Two major diseases of the joints have been described in *Ayurveda* as *Amavata* and *Sandhivata*. The most common of these diseases affecting the elderly live population are *Amavata*. The word *Amavata* is derived from two words "*Ama*" and "*Vata*", the word *Ama* is the condition in which various diseases in the system cause toxic effects. When *Ama* together with *Vata Dosha* occupy the mucous place (*Astisandhi*) then the painful disease "*Amavata*" occurs. The second common disease *Sandhi Vata* is a type of *Vata-vyadi*. This is the most common form of articular disorder. Which can be co-related with Osteoarthritis In today's modern era, sedentary lifestyle, air conditioned environment in work places, lack of proper healthy diet, travel and old age etc lead to this disease which is increasing day by day. In *Sandhivata* main symptoms are joint pain and swelling. However, being a physician, it is important to know the etiopathology of each symptom in detail because the pain varies in intensity from case to case and also because treatment protocols vary greatly. Hence its differential diagnosis along with the similar symptoms of various diseases is very important. This article is focusing on the same.

Key Words: *Amavata*, *Sandhivata*, *Ama*, *Vata*, *Vata-vyadi*.



This work is licensed under a creative attribution -Non-commercial-No derivatives 4.0 International License commons

How to cite this article: Choudhary S, Gupta N, Differential Diagnosis of *Aamvata* and *Sandhivata*: - A Critical Review” IRJAY. [Online] 2021;4(7): 48-52. Available from: <http://irjay.com> ; DOI: <https://doi.org/10.47223/IRJAY.2021.4706>

INTRODUCTION

The changing lifestyle of human beings through *Mithya- Ahara- Vihara* that is faulty eating habits and behavior patterns play a major role in the manifestation of many such disorders.

AMAVATA:

In the present era people are so busy with their success rate and lifestyle. They show more interest in their own health, but due to busy life schedule they are not able to lead a relaxed and healthy life. The things that trouble most people are faulty dietary habits and non-adherence to daily seasonal diet as prescribed by different *Acharya* in classics, when *Ama* and *Vata* are simultaneously attenuated and enter into *Trika* and *Sandhi* regions, eventually resulting in stupor (stiffness) of the body, this condition is known as *Amavata*^[1]. *Madhukosh* and *Atanka Darpan* expressed different views while commenting on the word *Yugapada*. According to *Madhukosh*, *Vata* and *Kapha* together during the pathological process of *Amavata* get vitiated. On the other hand the commentators of *Atkandarpan* say that *Ama* and *Vata* together are contaminated^[2].

The two comments seem to be similar as *Ama* is structurally very similar to *Kapha*. The only difference is that *Kapha* causes deformity only in a vitiated (*prakopa*) state, whereas *Ama* is always pathological. There is regular pain in the lumbar (back), swollen joints (especially the elbows with fingers and knees) and their inability to perform daily routine tasks^[3]. In our

opinion sacral region can be taken as joints where more than two bones join to form an anatomical structure and sacrum can be taken as joint where two bones unite to form an anatomical structure. According to *Ayurvedic* philosophy, *Amavata* is similar to Rheumatoid Arthritis in terms of signs and symptoms. *Amavata* is a special type of disease which has been mentioned in *Ayurveda* since the time of *Madhavakar* (16th century AD) in the category of *Vata-Kaphaj* disorders. *Ama* and *Vata* are seen in this disease. It is not mentioned in the *Charakasamhita*, although it is described in detail in the *Madhavanidana*. Its main purpose lies in the consumption of *asparagus/snigdhar* alone with exercise. It is a chronic painful condition of *madhyam rogmarga*^[4]. In this disease, *samavayu* formation takes place by taking the sacral junction and the sacral junction, which is transmitted throughout the body. Taurus sting is *Vata* pain and communicable pain^[5].

SANDHI VAAT:

Sandhi Vata is a type of *Vatavyadhi*. *SandhiVata* is described in all the *Samhitas* and collection texts under *Vatavyadhi*. In this *Vata* gets disturbed due to various reasons, as described in the *Samhita* and *Sangrah Granth*^[6]. The etiopathogenesis and symptomatology of *Sandhi Vata* are briefly described in *Ayurvedic* classics. Clinically, the description of *Sandhi Vata* explained in classical texts is similar to the condition of osteoarthritis in modern science. *Sandhi Vata*

was first described by *Acharya Charaka* as *Sandhigata Anila*, characterized by *Shotha* (inflammation), which feels like a bag filled with air on the palate, and *Prasarana* and *Akunchana* (pain on flexion and extension of the joints), *Shula* (pain)^[7]. *Acharya Sushruta* also mentions *shula* and *shotha* in this disease, which together lead to a decrease in movement involved^[8]. *Madhavkar* adds *Atopa* (crepitus in addition) as an additional attribute.

The pathological basis of this disease is attributed to *Vata* and *Kapha Doshas*, which affect *asthi* (bone), *sandhi* (joint), *mamsa* (muscle) and *snaya* (ligament)^[9].

In this *vyadhi awstha*, there is *sandhishoola* and *sandhishotha*.

It is the most common gout seen in the population. It is of two types – *Upastambhit* and *Nirupastambhit*. It is mostly a condition of old age. When *Vataprakopaka Ahar Vihar* causes ruthlessness on the sources,

The source is filled with air and *Dhatukshaya* leads to *Sandhi Vata*. This disease is manifested by *Mahat Sandhi* (big joints) like *Janu Sandhi*, *Gulf* etc. It is characterized by various features such as *Sandhi Shola* (pain in the joints), *Sandhi Shotha* (swelling in the joints), contracture in normal movements that is (pain on flexion and extension of the joints) and later *Hanu Sandhi* (decreased movement in the joints).

AIMS & OBJECTIVES

Differential diagnosis of *Aamvata*, *Sandhigataavata* on the basis of classical features (*Granthokta Lakshan*).

MATERIAL & METHOD

Various *Ayurveda* classical texts have been used for study as source materials. Main *Ayurvedic* books used are *Laghutrayi* & *Bhruhatrasyi* & other reference books.

Differential Diagnosis Of Symptoms Of Amavata With Sandhivata Disease

SYMPTOM	AMAVATA	SANDHI VATA
<i>Dosha</i>	<i>Kapha, Vata</i>	<i>Vata predominant</i>
<i>Dusya</i>	<i>Rasa</i>	<i>Sandhi</i>
<i>Ama</i>	Present	Absent
<i>Jvara</i>	Present	Absent
<i>Sandhishul</i>	Present	Present
<i>Sandhishooth</i>	Present	Present
<i>Stabdhata</i>	Present	Present
<i>Kriya alpata</i>	Present	Present
<i>Kriyahani</i>	Present	Present
<i>Amapradhana</i>	Present	Absent
<i>Hridgaurava</i>	Present	Absent
<i>Shashula Kriya</i>	Present	Present
<i>Vedana</i>	<i>Vrischik Dansha Vata and Sanchari</i>	<i>At Prasarana Akunchana Pravritti</i>
<i>Shotha</i>	<i>Sarvang and Sandhigata</i>	<i>Vatapurna Driti sparsha</i>

<i>Adhithana</i>	Starts from small joints of hand & spread	Mainly start with weight bearing large joints
<i>Anya Lakshana</i>	<i>Gaurava</i> <i>Apaka</i> <i>Aruchi</i>	Not Significant
<i>Sandhi</i>	Starts from small joint later effects big <i>Sandhi</i>	Weight bearing joint (knee Jt.)
<i>Tvaka Vikara</i>	Absent	May Present
<i>Svabhava</i>	Chronic	Chronic
<i>Prone age</i>	Any age	Old Age
<i>Upashaya</i>	<i>Ruksha</i> <i>Svedana</i>	<i>Snehana</i> <i>Svedana</i>

CONCLUSION

From it can be calculated that both *Amavata* & *Sandhivata Vyadhis* are sometimes confusing to differentiate due to presence of symptoms like *Jwar*, *Sandhishool*, *Sandhishoth* etc.

However with *Granthokt Lakshana* and their specific *Upmaan Pramaan* specification, it becomes easy to differentially diagnose each from other. As we have seen now same features like *Dosha –Dushya* involment (*Dosha* in *Amavata* is *Vata-Kapha* and *Dushya* is *Rasa* and *Dosha* in *Sandhi* *Vata* and *Dushya* is *Sandhi*) presence of *Ama*(in *Ama Vata* there is rigidity of body due to the presence of *Ama* but there is no prime involvement of *Ama* in *Sandhivata*) & *Upashaya* (in *Amavata* *Ruksha Upashaya* is much beneficial and *Sandhivata* *Sneha* is much beneficial) so like this we can easily conclude that there is a bit difference in both disease.

Acknowledgment: Nil.

Financial Support: Nil.

Conflict of Interest: Nil

REFERENCES

1. Upadhyaya *Y Madhavakara Madhav Nidan*. The *Madhukosha Sanskrit* Commentary by Sri Vijayraksita and Srikanthadatta and The *Vidyotini* 25/2 Chaukhambha Prakashana, Varanasi;2009. pp.509
2. Upadhyaya *Y Madhavakara Madhav Nidan*. The *Madhukosha Sanskrit* Commentary by Sri Vijayraksita and Srikanthadatta and The *Vidyotini* 25/2 Chaukhambha Prakashana, Varanasi;2009. pp.509
3. Shastri S, *Madhavnidanam Puurvardha, Amvatnidanam adhyaya* 25/1-5 edition reprint, published by- Chaukhamba Sanskrit Sansthan Varanasi;2010.pp. 511.
4. Shastri S, *Madhavnidanam Puurvardha, Amvatnidanam adhyaya* 25/1-5 edition reprint, published by- Chaukhamba Sanskrit Sansthan Varanasi;2010.pp. 511.
5. Upadhyaya *Y Madhavakara Madhav Nidan*. The *Madhukosha Sanskrit* Commentary by Sri Vijayraksita and Srikanthadatta and The *Vidyotini* 25/2 Chaukhambha Prakashana, Varanasi; 2009 .pp.509
6. Shastri A.D ;*sushruta samhita; Ayurveda-tattva - sandipika* hindhi commentary ; chaukhamba Sanskrit sansthan, Varanasi,

- edition; reprint *Nidansthana*, 2012;1928):29.
7. Chaturvedi G, *Caraka Samhita*; part 2; Chaukhamba Bharati Academy; Varanasi ; Reprint year ; *Chikitsa sthana* , 2012;28(37): 783.
 8. Shastri A.D ;*sushruta samhita*; *Ayurveda-tattva - sandipika* hindhi commentary ; chaukhamba Sanskrit sansthan, Varanasi, edition; reprint *Nidansthana*, 2012;1928):29.
 9. Sastri S, *Madhava Nidanaam* of Sri Madhavakara; *The Madhukosa* Sanskrit Commentary; Chaukhamba Prakashan; Varanasi, 2009;1:463.

