Ayurveda- A boon to rheumatoid arthritis sufferers

Dr. Meera H. Kotak1 Dr. D.V. Patel2
1. P.G.Scholar, Department of Kayachikitsa, Govt. Akhandanad Ayurved College, Ahmedabad, Gujarat, India.
2. M.D., Ph.D., Assistant professor, Department of Kayachikitsa, Govt. Akhandanad Ayurved College, Ahmedabad, Gujarat, India.

Abstract: Rheumatoid Arthritis is a chronic immune-inflammatory systemic disorder mainly affects synovial joints. Main complaint for which a patient seeks medical attention is pain, swelling in and around the joints, stiffness and limited range of motion. Other tissues and organs are also involved in patients with more extensive disease in the form of heart diseases, respiratory complications etc. Modern medical science has made so many advancements but exact aetiopathogenesis of the disease is yet to be conclusive. Modern system of medicine has drugs like corticosteroids, DMARD’s and NSAID’s which ameliorates the symptoms and overcome agony and crippling caused by the disease but the underlying pathology remains unchecked. This possesses a challenge to the physician owing to its apparent chronicity, incurability, complications and morbidity. Its signs and symptoms can be correlated with Amavata which directly targets the root cause of the disease. Ayurveda can do a lot for mankind in preventing as well as treatment of this dreadful disease.

Keywords: Amavata, Rheumatoid Arthritis, Treatment, Prevention, Ayurveda.

I. INTRODUCTION

With the march of time, most of the dietary habits, social structure, life style and environment have been changing. Occurrence of Rheumatoid Arthritis (~Amavata) an inflammatory autoimmune disorder on large scale is one of the outcomes of this modification. It is commonest among chronic inflammatory joint diseases in which joints become swollen, painful and stiff. It is a debilitating disease in view of its chronicity and complications. Therefore it has taken the foremost place among joint disorders. The lives of more than one million people are physically impaired due to this disease and one fifth of these are severely disabled. Hence management of this disease in other systems of medicine is inevitable.

II. LITERATURE REVIEW

Madhavkara was the first author who described Amavata as a separate disease entity in his text ‘Rogavinischaya’ which later came to be known as Madhav Nidana.1 Chakrapani, first introduced the line of treatment in his text Chakradutta2 and Bhavprakash elaborated it further which can be seen in his text Bhaishajya Ratnavali.3 It is believed that the description of disease was initiated by Hippocrates (600 B.C.) in the realm of medical science. But in the right perspective the clinical description was given by Arthus (100 A.D.). Rheumatism word was coined by Galen (199 A.D.) who has referred the word Arthritis to indicate the joint disorders.4

III. AGNI, AAMA AND AGNIMANDYA IN AMAVATA

As per Ayurvedic principle Aaharis one among the Trayopstambha for the maintenance of our life. The Aahar is digested by the Agni so that it can be transformed into appropriate form which is then absorbed, thus providing nutrition to further Dhatus. The ApathyaAahar and Mandagni might result in improperly digested material, which is termed as Ama, a substance which is harmful to the health and might become cause of various diseases.5 The Aam formation can occur at the level of Jatharagni or Dhatvagni. At Jatharagni level main gross digestion takes place. When Jatharagnimandya occurs, it results in poorly digested food i.e. Ama, which is not easily absorbed and is unable to nourish the body. Mandagni at the stage of Dhatvagni and Bhutagni, can be compared with impairment of metabolism at the cellular level. It can produce metabolic and cellular waste products. Thus Ama can be understood as accumulated harmful substances at different levels of metabolism.
When Aam is accumulated in any strotas or Dhatus, it can be a cause of Khavaigunya. In case of Aamvata, it occurs in Asthi-Sandhis (joints) where Ama gets logged in Rasavahi Srotas. So when provoked doshas passes through Ashtisandhi, they get obstructed and initiate the pathophysiology of Aamvata.

IV. NIDAN (ETIOLOGY) OF AMVATA

4.1 Incompatible diet and body movements

Excessive indulgence of any of ViruddhaAhara (Incompatible diet) i.e. those ahara which are inimical to the body elements and tends to disagree with the system leads to formation of Ama and vitiation of Vata. It may include following things: Exertion soon after taking unctuous meal, sedentary lifestyle, suppression of natural urges, performing acts beyond one’s own capacity leads to vitiation of Vatadosha.

4.2 Low digestive fire

It is the root cause of all disease according to Ayurveda. Thus; it plays an important role in manifestation of most of the diseases. Sluggishness of Agni taking place due to its own cause and result in production of Ama. Among the thirteen types of Agni Jatharagni is very important. Intactness of strength of Jatharagni is necessary because it also augments the functions of Bhutagni and Dhatavagni. Therefore, if strength of Jhataragni is hampered it will also leado Bhutagnimandya as well as Dhatavagnimandya. Due to Dhatavagnimandya proper formation of Rasadhatus does not take place, resulting in Dhatukshaya and Dhatukshaya ultimately leads to vitiation of Vata. Thus it can be stated that Mandagni results both in production of Ama as well asvitiation of Vata, which are the two important pathognomic factors for causation of Aamvata.

4.3 Exercise after taking heavy diet

Though exercise just after any type of meal is unhealthy, but exercise after taking unctuous meal (SnigdhaAhara) has been specially mentioned in causation of Aamvata. Here exercise means any type of physical activity. Normally a good blood supply is very essential in gastro-intestinal tract (GIT) for the digestion of heavy meal. During first hour of meal the oxygen uptake of the GIT is maximum but when a person indulges in any type of physical activity just after consuming meal, blood circulation and oxygen consumption to the skeletal muscle increases resulting in decrease of blood and oxygen supply to the gastro-intestinal tract comparatively. By this act the process of digestion and absorption gets seriously hampered. Therefore improper digestion leads to formation of Ama, which is the foremost pathological factor of Aamvata.

V. PATHOGENESIS OF AMAVATA

The root cause behind the pathogenesis of Aamavata is Agnimandya. State of Agnimandya leads to formation of Ama and further leads to VataPrakopa along with the impairment of other Doshas. Hence it can be said that any factor whether dietary, environmental or psychological which causes impairment of Agni is responsible for the production of Ama and gets lodged in SleshmaSthanas especially in Sandhies (synovial joints) and produce various symptoms of Aamavata. Among five types of Vata, VyanVayu and SamanVayu which are responsible for circulation of Rasa Dhatu and control Agni respectively are mainly vitiated in Aamvata.

VI. TREATMENT

6.1 Why- Need to change the system of medicine?

The chief pathogenic factors being contradictory in nature possess difficulty in planning the line of treatment. Allopathy system of medicine has got an important role to play in overcoming agony or pain, restricted movement and crippling caused by the disease. Drugs are available to ameliorate the symptoms due to inflammation in the form of NSAIDs (Non-steroidal anti-inflammatory drugs) and the long term suppression is achieved by the DMARDs (Disease modifying anti-rheumatic drugs). But most of NSAIDs have gastrointestinal side effects whereas DMARDs cause marrow, renal and hepatic suppression mainly leading to increased serum glutamic-pyruvic transaminase (SGPT) levels. Hence, management of this disease is merely insufficient in other systems of medicine and Ayurveda can do a lot to overcome the challenge in treating RA.

Chakradutta was first to describe the line of treatment of Aamvata in detail. Main pathological factor behind Amavata is Ama which initiates the disease process and is responsible for aggravation of VataDosha. Hence the first target in the management of Aamavata should be removal of already formed Ama and checking further production of Ama.

Management principles described in Ayurveda texts can be categorised under following headings:
Ayurveda - A boon to rheumatoid arthritis sufferers

Langhanam swedanam tiktaaum deepananikatunicha
Virechana snehapanaam cha bastyaschaaummarute
Saindhavaanuvasasyaksharabasti prasashyate. 14

1.2 Fasting or Light food intake (Langhana)
The first line of treatment is Langhana in Amavata. Fasting provides a period of concentrated physiological rest during which time the body can devote its self-healing mechanisms to repairing and strengthening of damaged organs. It increases the digestive and metabolic power and also helps in digestion of Ama. Moreover the treatment of vitiated RasavahaSrotas is mentioned as Langhana. 15

1.3 Fomentation (Swedana)
A process which causes perspiration and destroys stiffness. 16 Ruksha Swedana i.e. with sand should be done. Heat causes vasodilation and increases blood circulation and thus helps in removal of tissue metabolites. It helps in muscular relaxation along with producing analgesic effect. Application of oil is contraindicated. Other type of Swedanabeneficial in Amavata is oral administration of lukewarm water.

1.4 Intake of bitter and spicy drugs (Tikta-Katu rasa sevana)
These dravyas are Laghu(light) and Ruksha (dry) in nature which is very useful for AmaPachana and Deepana. 17 So by these properties digestion of Ama and re-establishment of Agni takes place.

1.5 Purgation therapy (Virechana)
It is a procedure useful for purificatory purpose. It removes the Doshas from Adhomarga i.e. purgation. Erandasneha (castor oil) is good drug for Virechana purpose in diseases of Kapha associated with Vata. 18 It is mentioned as ‘Amavatagajkesari’ by AcharyaLolimbraj.

1.6 Intake of Medicated ghee or oil (Snehapana)
Due to chronic nature of the disease tremendous Dhatukshaya and weakness develops in body along with development of various deformities. Shaman Snehpana (medicated oil or ghee) has been stated to augment the Agni. 19 Asit influences digestion by softening food and stimulating Agni. Snehpana is also prescribed in case of Asthi-Majjagata Vata. 20 As AsthiMajjaDhatus are involved in Amavata, Snehpana will surely help the patients.

1.7 Medicated enema(Basti)
In Ayurvedic classics, Basti (medicated enema) is advocated as Ardh (half) Chikitsa 21 and best procedure to control Vata dosha. 22 Asthapanbasti (medicated decoction enema) eliminates the Dosha brought to Koshta by DeepanPachana. Anuvasanabasti (medicated oil enema) removes Ruksha (dryness) produced by chronicity of vatadosha. AcharyaChakrapani has recommended Saindhavaditaila for Anuvasa and KsharaBasti for Asthapan.

VII. DO’S AND DONT’S 24

7.1 Pathya (Do’s)
7.1.1 Cereals and Pulses
Yava (Barley), Kulatha (Horsegram). Raktashali (Red rice), Shyamaka (Sawa millet)

7.1.2 Vegetables
Vatsaka (Brinjal), Shigru (Drumstick), Karvellaka (Bitter - gourd), Patola (Pointed gourd)

7.1.3 Liquid diet
Ushnajala (lukewarm water), Gomutra (cow’s urine)

7.1.4 Others
RukshaSwedana (Dry sudation) with Baluka (sand) Potali

7.2 Apathya(Don’t’s)
7.2.1 Eatables
Dadhii (curd), Kshira (milk), Matsya (Fish), Guda (Jaggery), Pishtanna (eatables made of flour)

7.2.2 Others
Avoid oil massage and staying awake till late night.

VIII. CONCLUSION
From the above discussion it is evident that rheumatoid arthritis (Amvata) can be treated to a large extent through the principles of Ayurveda. Even the modern science also acknowledges that different Ayurvedic drugs used for treating this disease have definite scientific basis with promising results and no
adverse effects. However recurrence can occur if patient does not modify his life style and indulges in causative factors. Hence to overcome this disease it is essential to strictly follow the do’s and don’ts mentioned in Ayurvedic texts.

REFERENCES

[2]. Chakradutta of Shri Chakrapanidutta, Ramnath Dwivedi, with Vaidhyaprabha Hindi commentary, Chaukhambha Sanskrit Sansthan, Varanasi, Ch.25/1-13, Reprint-2011, page no.166-172.
[6]. Ashtanga Hridaya, Dr. BrahmmanandTiripathi, Edited with Nirmala Hindi Commentary Chaukhambha Sanskrit Pratishtthan, Varanasi, Sutrasthana 13/25-27, Reprint-2012, page no. 188.
[7]. Madhavanidana, Madhukoshavyakhya, YadunandanUpadhyay, with Vidhyodini Hindi Commentary, Chaukhambha Sanskrit sansthan, Varanasi, Vol-1, Ch.25/1-2, Reprint-2008, page no.508-509.
[9]. Ashtanga Hridaya, Dr. BrahmmanandTiripathi, Edited with Nirmala Hindi Commentary, Chaukhambha Orientelia, Varanasi, Sutrasthana 13/25, Reprint-2012, pageno.188.
[12]. Chakradutta of Shri Chakrapanidutta, Ramnath Dwivedi, with Vaidhyaprabha Hindi commentary, Chaukhambha Sanskrit Sansthan, Varanasi, Ch. 25/1, Reprint-2011, page no.166.
[14]. Chakradutta of Shri Chakrapanidutta, Ramnath Dwivedi, Chaukhambha Sanskrit Sansthan, Varanasi, Ch.25/1-1, Reprint-2009, page no.508-509.
[23]. Chakradutta of Shri Chakrapanidutta, Ramnath Dwivedi, with Vaidhyaprabha Hindi commentary, Chaukhambha Sanskrit Sansthan, Varanasi, Ch.25/1. Reprint-2011, page no. 166.
[24]. Chakradutta of Shri Chakrapanidutta, Ramnath Dwivedi, with Vaidhyaprabha Hindi commentary, Chaukhambha Sanskrit Sansthan, Varanasi, Ch.25/83, Reprint-2011, page no.172.