EFFICACY OF VAITARAN BASTI AND SIMHANAD GUGGUL IN AMAVATA

ABSTRACT:
Amavata is an autoimmune disease & compared with Rheumatic arthritis. Vaitaran Basti is indicated to control this disorder. To prove its efficacy in Amavata 10 patients were selected with classical symptoms of Amavata from Panchakarma OPD of Dr.D.Y.Patil school of Ayurved & Research Institute Nerul. First & last Saindhavadi tail matra basti of 50 ml. was followed by 8 no. of vaitaran Basti. Total 10 Basti was administered. Simhanad guggul 500mg. twice in a day for 30 days was advised as shaman aushadhi. Patients got significant result with these treatment.

Key words: Vaitaran Basti, Simhanad guggul, Amavata.

INTRODUCTION: Amavata is a chronic disease which is a disease of rasavaha strotas and madhyama rogamarga. Due to tremendous pain in Amavata patient's daily life get disturbed. Also the severity of disease disturbs routine work of the patient. Today millions of adults in the world suffer from amavata. The prevalence of R.A is approximately 1% of the population. The prevalence increases with age and sex difference, diminish in the older age group. R.A. is seen throughout the world and affects all races. The onset is most frequent during the fourth decades of life, Family studies indicate a genetic predisposition. The term "Ama" means unripe, immature and undigested. It is resulted as a consequence of impaired functioning of 'kayagni'. According to vagbhata; due to the hypo functioning of ushma (Agni), the anna-rasa undergoes fermentation and or putrification (dushta). It is this state of Rasa, which is known as 'Ama'. The vitiated doshas along with Ama causes Amavata.

AIMS & OBJECTIVES:
AIMS: Management of Amavata with Vaitran Basti and simhanadguggul
OBJECTIVES:
1) To study the efficacy of Vaitran Basti in Amavata.
2) To study the effect of simhanad guggul in Amavata.

MATERIAL & METHODS:
1) Selection of patients: 10 Patients were selected randomly with symptoms of Amavata irrespective of their age, religion, & sex etc. Patients were then subjected to detailed clinical history on the basis of specially prepared case proforma.

INCLUSION CRITERIA:
- The patients with age 19 to 60 years were selected irrespective of their sex, religion and socioeconomic status.
- The patients having clinical signs and symptoms of Amavata
- Bastiraha patients were included

EXCLUSION CRITERIA:
- Bastianaraha
- Patients with symptoms of JeernaAamvata.
Vaitran Basti: (Vangasena 79/186-190)\(^1\)

**Ingredients:** Table No.1

<table>
<thead>
<tr>
<th>Name</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saindhava</td>
<td>10 gm</td>
</tr>
<tr>
<td>Amlika</td>
<td>40 gm</td>
</tr>
<tr>
<td>Guda</td>
<td>20 gm</td>
</tr>
<tr>
<td>Go-mutra</td>
<td>200 ml</td>
</tr>
<tr>
<td>Tila Taila</td>
<td>50 ml</td>
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</table>

**Plan and Protocol:** Table No.2

<table>
<thead>
<tr>
<th>Therapy</th>
<th>Vaitran Basti</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dose</td>
<td>320 ml</td>
</tr>
<tr>
<td>Kal</td>
<td>Abhuktakal</td>
</tr>
<tr>
<td>Duration</td>
<td>10 days (2 matrabasti &amp; 8 vaitaran basti)</td>
</tr>
</tbody>
</table>

**Method of preparation of vaitaran basti:**

Vaitarana Basti was prepared as per the classical method:

Initially 20 gm of Jaggary (Guda) was mixed uniformly with equal quantity of lukewarm water. 10 gm of Saindhava was added to the above. Tila Taila (50 ml) was added till the mixture become homogenous. 40 gm of Chincha Kalka was taken and added to above mixture carefully. Lastly 200 ml of Gomutra was added slowly and mixing continued so as to have uniform Basti Dravya. Finally after filtering, Basti dravya was made lukewarm by keeping it in hot water pot.

**First & last Saindhavadi tail 2 matra basti of 50 ml was given.** Total 10 Basti was administered.

Simhanad guggul 500 mg twice in a day for 30 days was advised as shaman aushadhi. Simhanad guggul was prepared in ras-shala of D.Y. Patil school of Ayurveda Nerul. Followings are the ingredient of Simhanad guggul:\(^3\)

Simhanad guggul : triphala kashay 140 ml, Suddha gandhak 46 gm
Suddha guggulu 46 gm
Erand tail 187 gm

**CRITERIA FOR ASSESMENT**

**1. SUBJECTIVE PARAMETER**

All patients were registere for clinical trial and they were looked after any changes in their clinical manifestation and growing feeling of well being, if any before and after treatment, we collected data of selected patients.

On the basis of following sings and symptoms of amavata were assessed for any improvement after the course of therapy:\(^4\)

1. Vrischikdanshvatvedana (severe pain)
2. Angamarda (Bodyache)
3. Aruchi (Anorexia)
4. Jwara (Fever)
5. Apaka (Indigestion of food)
6. Shunatanganam (Edema)

A] Clinical assesment was done according to ARA criteria for the classification of Rheumatoid Arthritis, Symptoms, Self-assessment and improvement on the basis of following gradation:\(^5\)

1. Duration of morning stiffness:
   - Score 3: above 60 min.
   - Score 2: for 30-59 min.
   - Score 1: for 0-29 min.
   - Score 0: no stiffness.

2. Severity of Pain: (by VAS)
   - Score 3: severe.
Score 2 : Moderate.
Score 1 : Mild.
Score 0 : Nil.

3) Tenderness :
Score 3 : Severe.
Score 2 : Moderate.
Score 1 : Mild.
Score 0 : Nil.

OBJECTIVE PARAMETERS :
4) Swelling :
Score 3 : Severely present.
Score 2 : Markedly present.
Score 1 : Slightly present.
Score 0 : Absent.

Swelling of inter phalangeal joints with rings of various diameters to assess increase or decrease in swelling.
Swelling of big joints by measuring their circumference.

5) Grip strength:
measured by recording the pressure that patients can exert by squeezing a partially inflated ballon (at a starting of 20 mm of Hg) of a standard sphygmo-manometer.

Score 3 : Poor (below 38mm of Hg)
Score 2 : Moderate (40-140mm of Hg)
Score 1 : Mild (142-280 mm of Hg)
Score 0 : Normal (above 282 mm of Hg)

6) Functional Score :
Score 3 : Unable to do
Score 2 : With the help of other person or device
Score 1 : Able to do so with difficulty
Score 0 : Able to do so without any difficulty

LABORATORY INVESTIGATIONS:
Lab investigations were done for the selection of patients.
1) CBC & E.S.R.
2) R.A. FACTORS

RELIEF OF SYMPTOMS : Patient was assessed before & after the treatment on 1st & 30th day and parameters are shown in the table given below. Result was drawn statistically by Wilcox test method. It was observed that elevated E.S.R. was improved after the treatment.

<table>
<thead>
<tr>
<th>Sr.No.</th>
<th>No Of Pt.</th>
<th>Duration Of Morning Stiffness</th>
<th>Severity Of Pain</th>
<th>Tenderness</th>
<th>Swelling</th>
<th>Grip Strenth</th>
<th>Functional Score</th>
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</thead>
<tbody>
<tr>
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<td>BT 2</td>
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<td>BT 3</td>
<td>AT 1</td>
<td>BT 2</td>
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<td>AT 2</td>
<td>BT 1</td>
</tr>
</tbody>
</table>

Graph no.1
Graph - No. 2

DURATION OF MORNING STIFFNESS

Graph - No. 3

SEVERITY OF PAIN

Graph - No. 4

TENDERNESS

Graph - No. 5

GRIP STRENGTH
DISCUSSION: Basti is main line of treatment for all vataj vyadhi, here vaitaran basti was given to know its efficacy in Aamvata. This Basti works on the basis of its ingredients i.e. Saindhav lavana by its Sukshma and Tikshna properties, it helps to pass the drug molecule in systemic circulation through mucosa. Thus, it helps the Basti Dravya to reach up to the molecular level. It is also helpful for the elimination of waste due to its irritant property. It is capable of liquefying the viscid matter and breaking it into minute particles. Here, Purana Guda should be taken as it is laghu,pathya, vata kaphahara, it helps in carrying the drug up to agnivardhan & micro cellular level. Chincha is having Kaphavata shamak, Deepan, laghu, ruksha & ushna properties which makes it useful in amavata disease. The main ingredient Gomutra is ruksha, tikshna,laghu & Ushna which helps in aam pachan & does vata anuloman. Til taila is having Ushna, Tikshna,Sukshma properties, that helps in sampriapti vighatan of aamavata. Simhanad guggul has trifala & gandhak which act as rasayan and improves the immunity system. Guggul has anti inflammatory & analgesic property that helps to control joint pain & swelling symptoms. Erand tail is aamapachak & vata anulomak.

CONCLUSION: The present clinical study has been undertaken to evolve the treatment procedure for aamavata to observe the efficacy of vaitaran Basti & simhaanad guggul. The study has revealed that patients has got significant result in functional score & swelling. Patients had got very significant result in morning stiffness, pain,tenderness & grip. Since amavata is an autoimmune disease patient may require second course of the same pattern.
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Corresponding Author:
Dr. Wadhwa Ritu. S. Professor Dept of Panchakarma, D.Y Patil School Of Ayurved Nerul, Navi, Mumbai
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Declared