
DISEASE REVIEW AND MANAGEMENT OF AMAVATA THROUGH AYURVEDIC CLASSIC'S.

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ABSTRACT:

Ayurveda is hope for suffering humanity in today's world where no one found complete treatment solution for commonest chronic inflammatory joint disease Amavata (Rheumatoid Arthritis). This causes swelling, pain and stiffness of joints. Chronic condition may cause debility, deformities of joints and crippling. Unfortunately the man has not succeeded in eradicating this diseases and find to come out with successful therapeutic measures that can cure the patient completely. Amavata is made up of two words, Ama & Vata. Ama means incomplete digestion of food which result in incomplete/impure formation of Annarasa, circulate in body & reach to target cell where it produces pathology like heaviness in body, loss of strength, drowsiness, aggravation of Vata & improper elimination of waste product. Ayurveda says chikitsa (Treatment) is Nidaan Parimarjna (removal of cause). The clinical presentation of Amavata closely mimics with the special variety of Rheumatological disorders called Rheumatoid Arthritis in accordance with their similarities on clinical features like pain, swelling, stiffness, fever, redness, general debility, fatigue are almost identical to that of Amavata. It is a severe form of chronic inflammatory autoimmune systemic disorders which mainly affects the synovial joints. sometimes leads to destruction and ankylosis of affected joints along with substantial loss of functioning and mobility. The available treatment modalities in contemporary science is NSAIDS, DMRDS, steroids etc. but these drugs are related with hazardous side effects and remission is very big problem. The ancient Ayurvedic treatment not only devoid such type of ill effect, but also provides a better way by treating Agni and Ama at its roots. Shamana (conservative) and Shodhana (biological purification of the body) treatments are advised in Ayurveda.

INTRODUCTION

In Present era People are so busy in their success rate & life style. They show more interest in own health, but due to busy life schedule they are unable to make a healthy life. The things that trouble most of people are faulty Dietary habit & not to follow daily seasonal regimen. Frequent indulgence of such factors leads to altered status of *Jatharagni* as well as *Dhatvagni*. Impaired status of *Agni* leads to develop various kinds of diseases. Causative factor for various kinds of disease is *mandagni*.

Amavata is a disease in which vitiation of Vata Dosha and accumulation of Ama take place in joints, which simulate rheumatoid arthritis (RA) in modern parlance. Ama is a maldigested product, which is not homogeneous for the body. Whenever that Ama gets localized in the body tissue or joints, it can lead to production of pain, stiffness, swelling, tenderness, etc., in the related

joints. It is the disease of *Madhyam rogamarg*. *Asthi* and *Sandhi* are the chief site for the manifestation of cardinal symptoms like *Sandhishool*, *Shandhishoth* and *Sandhigraha* etc. All the three Doshas take part in the pathogenesis of disease but *Ama* and vitiated *Vata* play the dominant role.

The clinical presentation of *Amavata* closely mimics with the special variety of rheumatological disorders called rheumatoid arthritis (R.A.), in accordance with their similarities on clinical features, like pain, swelling, stiffness, fever, redness, general debility are almost identical. The disease R.A. is chronic in nature and affects mostly the middle aged group. It is one of the common debilitating disease by the virtue of its chronicity and implications. The onset of disease is frequent during 4th and 5th decade of life with 80% of patients developing the disease between 30-65 years of age.

The disease is a product of vitiation of *Tridosha* though *Ama* and *Vata* are the initiating factors in the pathogenesis. Chakrapaniduta has described the principles and line of treatment for *Amavata*. *Langhana* (fasting), *Swedana* (sudation), use of drug of *Tikta* (bitter) and *Katu* (pungent) *Rasa*, *Deepana* drugs (stimulating hunger), *Virechana* (purgation therapy), *Anuvasana basti* (enema) are beneficial in the management of *Amavata*.

Despite the administration of best available modern drugs, the disease has a tendency to progress and cripple the patients. Conventional medicines - NSAID's (Non-steroidal anti-inflammatory drugs) have adverse effects on GIT (gastrointestinal tract) and DMARD's (Disease modifying anti-rheumatoid drugs) cause hepatic, renal and bone marrow suppression. Thus, Ayurveda provides a safe, economic and effective treatment of RA. A treatment protocol based on these principles of Ayurveda was designed and administered to a patient of *Amavata*.

Historical review

The entity *Amavata* is available since the period of *Charaka* as a reference in the context of various treatments. However, *Amavata* as a separate disease entity was described for the first time in detail by *Madhavakara* (900 AD) who devoted a full chapter (25th) of *Amavata* in his famous treatise *Madhava Nidanam* dealing with the etiopathogenesis of the disease in a systematic manner besides the signs, symptoms, complications and prognosis.

AIMS AND OBJECTIVE

To make evaluation of *Ama* and In-depth description of disease *Amavata*. And with line of treatment given in Ayurvedic classics

MATERIAL AND METHOD

For this study literary materials which include the reference of "*Ama and Amavata*" have been collected through the Ayurvedic text mainly *Madhav Nidana*, *Charaka Samhita* and *Astang Hridaya* also with supportive Ayurvedic Books and its available commentary.

ETYMOLOGY

‘Amena sahita vata Amavata’. The virulent Ama circulates in the whole body propelled by the vitiated vata dashas producing block in the body channels that stations itself in the sandhi giving rise to Amavata. ¹

The combinations of ‘Ama’ and vata form Amavata. It shows the predominance of Ama & vata in the samprapti of Amavata. ²

Ajeerna produce ‘Ama’ & along with vata it produce Amavata. ³

The word *Ama* is derived from the root word ‘Am’ with suffix ‘ninj’

It means improper or partially digested matter.

In which substances undergo digestion but not completely digested.

Which is either incompletely digested or partially digested is *Ama*. ⁴

Substances does not digest properly and remains yet to undergo for digestion is being called *Ama*. ⁵

Substances produces pain or creates pressure on Srotomukha and Accumulates on the Srotomukha is called *Ama*. ⁶

DEFINITION OF AMAVATA

Amavata is a condition where *Stabdghata* of the body occurs due to lodging of vitiated *Ama* and *Vata* in the *TrikaSandhi* and Commenting on the word “*Yugapat*” *Madhukoshakara* explains it as simultaneously *Vata* and *Kapha* while in *Atanka Darpana*, it is explained as *Ama* and *Vata* as both are held responsible for its pathogenesis.

These are the various definition of *Ama* available in different classics. Some of them are given below.

ऊष्मणोऽल्पबलत्वने धातुमाध्यमपाचितम्/

दुष्टमामायगतं रसमामंप्रचक्षते // ⁷

Due to hypo functioning of *Ushma* (Agni) the first Dhatu ‘Rasa’ is not properly digested, instead the *Anna Rasa* undergoes fermentation or putrefaction (*Dusta*) being retained in the *Amashaya*. This *Rasa* is called as *Ama*. ⁷

CLASSIFICATION OF AMAVATA ⁸

Madhavakara has classified Amavata according to predominance of doshas 32 which are as follows:

1. EkDoshaja:

- (a) Vataja
- (b) Pittaja
- (c) Kaphaja

2. DwiDoshaja :

- (a) Vata-pittaja
- (b) Pitta-kaphaja
- (c) Kapha-vataja

3. TriDoshaja :

These varieties of Amavata can be differentiated on the basis of characteristic symptoms of Dosha involved .

Acharya Harita has classified Amavata into following four types on the basis of clinical manifestation.

1. **Vishtambhi**– In Vishtambhi type of Amavata Gatra-gaurava, Adhamana and Bastishoola are present.
2. **Gulmi**– In this type Jathargarjana (Bowel sounds), Gulmavatapeeda and Katijadata are present.
3. **Snehi**– Gatrasnigdghata, Jadya, Mandagni and Excretion of Vijjala and Snigdha Ama are present in such type of Amavata.
4. **Sarvangi**– Excretion of Peeta, Shyama, Vijjala and Pakva Ama, Shrama and Klama are present in this type. Again it can be classified according to

(A) Severity:

1. Samanya Amavata
2. Pravridha Amavata

In Samanya Amavata, the symptoms are more or less general, less severe and not associated with Upadravain comparison to Pravridha Amavata.

(B) Chronicity:

1. Navina Amavata
2. Jeerna Amavata

Up to one year of onset it is said to be Navina and more than one year it is Called Jeerna Amavata.

NIDANA⁹

The word 'Nidana' is used in Ayurvedic classics in a broad sense. This word is derived from the Sanskrit *Dhatu* 'Ni' which carries the meaning to determine (Ni –*Nishchaya deeyate Jnanam*). This word either refers to aetiopathogenesis of the disease in general or the etiology of the illness in particular from the perspective of treatment.

Nidana is most important as the avoidance of etiological factor forms the first and foremost line of treatment.

“*Madhavakara*” has described : –

1. *Viruddhahara* (Unwholesome Diet)
2. *Viruddhacheshhta* (Erroneous Habits)

3. *Mandagni*(Diminished Agni)

4. *Nishchalata* (Sedentary Life)

5. *Snigdham Bhuktavato Hiannam Vyayamam* (Exertion immediately after taking Snigdha Ahara)

Viruddhahara (Unwholesome Diet)

Unwholesome diet means “which aggravates the body humors but not expel them out of the body”. some of the virudha Ahara are as follows

1) Milk along kulatha 2) Panase fruit with matsya 3) Mixtures of equal quantities of honey & ghee 4) Boiled curd.

Viruddhacheshta (Erroneous Habits)

Erroneous habits (Viruddha chesta) mainly included alternate use of cold and heat, suppression of natural urges, sleeping during daytime, walking at night, over indulgence in work.

Mandagni (Diminished Agni)

As it is said that *Mandagni* is the the root cause of all diseases. It includes hypofunctioning of various forms of *dehagni* (i.e. *Jatharagni*, *Bhutagni* & *Dhatvagni*). The ingested food is digested by all these types of Agni to form *Poshaka* & *Vardhakadhatus* in the body. *Mandagni* leads to formation of *Ama*, which causes *Srotorodha*& results in reduced *Dhatuposhana* in turn causing *Dhatukshaya*. This *Dhatukshaya* leads to *vataparakopa*.

Nishchalata (Sedentary Life)

Nishchalatwa causes *kaphavridhi* ultimately leading to *Agnimandya*. In today’s life, our habits have changed with change of time & epochi. People taking *guru-snigdhaahara* & due to computerization of whole works & business is main source of income they spend whole time sitting in a place in stressful situation i.e. sedentary life style by which low circulation of blood & low secretion of digestive enzymes Agni is hampered by which *Ama* formation occurs after that *Amavata* like disease occurs.

Snigdham Bhuktavato Hiannam Vyayamam (Exertion immediately after taking Snigdha Ahara)

After consumption of food, normally most of blood circulation is supplied to the digestive system. If a person starts exercise or exertion immediately after taking food especially rich in *Snigdha guna*, circulation of blood will be turned to skeletal muscles, resulting in hampered digestion & absorption which leads to *Ama* formation. Also exercise after taking food causes *vataparakopa* which affects the metabolism & assimilation of *Ahara*.

So from the above description it clearly seems that *Ama Dosha* generally by unwholesome food habits like *Viruddhasana Adhyasana*, *Ajirnasana* is known as *Amavisha*. It is very difficult to treat due to its *Ashukriya* (prompt action) & opposite natures of treatment of *Ama* & *Visha*.

PURVA RUPA OF AMAVATA

Charaka has described that where the *Purvarupas* are not mentioned, early clinical manifestation of the sign /symptoms can be considered as *Purvarupa* of the disease.

When the *prakupita Ama* via *Rasavaha srotasa* endures *sthanasanshraya* in *Hridaya, Sandhi* etc. before getting fully manifested as disease *Amavata*, in the early stage produces mild symptoms like *Apaka, Aruchi* etc. which can be considered as *Purva Rupa* of *Amavata*. Hence, the following *Lakshana* could be considered as *Purvarupa* of *Amavata*.

1. *Agnimandya*:- It is a results of hampered function of *Agni* due to consumption of *Nidana*.
2. *Apaka* :- It is due to *Agnimandya* because proper digestion & metabolism does not take place.
3. *Daurbalya*:- It is a result of improper digestion of *Dhatu* & deprived of sufficient nourishment.
4. *Angamarda* :- All type of nourishment of *Dhatu* presence a form of *Ama*, so body feeling ache , that is called *Angamarda*.
5. *Aruchi*:- When the function of *Rasanendriya* is impaired by vitiated *RasaDhatu* & *Bodhaka Kapha*, they produced *Aruchi*.
6. *Gaurava*:- It is result of vitiated *Kapha* & *Ama* which produce heaviness in the body.
7. *Gatrastabdhta*:-*Guna* of *Ama* like *Pichhila, Guru, &Sheeta* circulate in the body with the help of *Vyanavayu*, it gives rise to *Gatrastabdhta*.

RUPA OF AMAVATA

Madhavakara, Bhava Mishra, & other have described the *rupas* of *Amavata* clearly. They can be classified under following headings.

- ***Pratyatma Lakshana***:- (Cardinal sign & symptoms)
 1. *Sandhishoola*
 2. *Sandhishotha*
 3. *Stabdhta*
 4. *Sparshasahyata*
- ***Samanya Lakshana***:- (General /Associated Features)
 1. *Angamarda*
 2. *Aruchi*
 3. *Trishna*
 4. *Alasya*
 5. *Gaurava*
 6. *Jwara*
 7. *Apaka*
 8. *Angashoonata*

• **Doshanubandha Lakshna:-**

1. *Vatanubandha - Ruka*
2. *Pittanubandha – Daha, Raga*
3. *Kaphanubandha – Staimitya, Guruta, Kandu*
4. *Vatapittanubandha – Ruka, Daha, Raga*
5. *Vatakaphanubandha –Ruka, Staimitya, Guruta, Kandu*
6. *Kaphapittanubandha –Staimitya, Guruta,Kandu, Daha, Raga*
7. *Sannipataja – Symptoms of all doshas.*

UPASHAYA – ANUPASHAYA OF AMAVATA

Use of medicaments, dietary regimens and viharas which bring lasting relief are known as Upashaya. On the contrary anupashaya aggravates the disease.

Katu, Tikta, Ruksha drugs Amla Rasa, Deepan, Pachan drugs Santarpana, Langhan, RukshaSwedaAbhyanga, SnehyuktaSweda, UshnaKaal etc. SheetaKaal, MeghodayaKaal, PratahaKaal

SAMPRAPTI OF AMAVATA

Due to the irregular dietary habits irregular activities like doing exercise soon after consuming food etc. leads to indigestion and formation of Amaras. Further the vitiated vata stimulates this Amaras and takes this to various kapha sthans like Urah, Kantha, Shira etc, through Raktavahini Dhamanies. During the course this Amaras also mixes with thrnidoshas and finally becomes pichil & Kled. Even after reaching the Selshmasthanas, Trikasandhi etc. region due to similarity with kapha its intensity increases mere and finally causes the disease Amavata (R.A.) by causing rigidity in the body. Though in modern medicine the etiology of the disease is unknown the above aetiopathogenesis gives a clear idea about the disease manifestation. Many patients history also support the above aetiopathogenesis. Even the data of R.A. show that the disease onset is more in between 30 to 50 years of age during which feel the possibility of formation of Amaras is higher.

SAMPRAPTIGHATAKA OF AMAVATA

Dosha	<i>Tridosha mainly Vata and Kapha</i>	Udbhavasthana	<i>AmaPakvashayottha</i>
Dushya	<i>Rasa, Mamsa, Asthi, Majja, Snayu and kandara</i>	RogaMarga	<i>Madhyama</i>
Srotas	<i>Rasavaha, Mamsavaha, Asthivaha, Majjavaha</i>	Vyaktisthana	<i>Whole body mainly sandhithana</i>
Srotodushti	<i>Sanga and Vimarg-gamana</i>	Vyadhiswabhava	<i>Chirkari</i>
Agni	<i>Jatharagnimandya & Dhatvagnimandya</i>		

LINE OF TREATMENT OF R.A. ACCORDING TO MODERN

According to modern point of view main goals of therapy of R.A. are

1. Relief of pain
2. Reduction of inflammation.
3. Preservation of Functional capacity.

The drugs of modern medicine are mainly divided into 3 groups:-

- Non-steroidal anti-inflammatory drugs.
 - DMARDS- Disease modifying anti rheumatic drugs
 - Glucocorticoid drugs.
- a) As first line of treatment, normally aspirin like nonsteroid anti-inflammatory drugs along with low dose glucocorticoids are used.
 - b) As second line of treatment DMARDS like gold compounds, D- penicillamine, Anti-malarials, sulfasalazine etc. are used.
 - c) Some times Immuno suppressive drugs like Azathioprine, Cyclophosphamide etc. are used. Though all the above drugs are in practice no drug is having satisfactory results. Almost all are having severe adverse effects. Even NSAIDS prolong use causes gastric irritation, platelet dysfunction, azotemia etc. DMARD's are not similar chemical compounds. They are having different mode of actions. one can not say which patient will respond to which DMARD's drugs and also having adverse effects. Though glucocorticoid therapy gives temporary relief as it is not altering the course of the disease, in later days it further worsens the condition. Majority of these practical problems in the treatment of R.A. can be overcome by Ayurvedic line of treatment and Ayurvedic formulations. The important thing in Ayurvedic line of treatment is based on the aetiopathogenesis of the disease and the drugs which are used can also be supported by the properties of those drugs.

AYURVEDIC LINE OF TREATMENT OF AMAVATA

Among the Snehas used for SNEHAPANA, Eranda taila is said to be the best because it is having both Amapachan and Virechen properties.

Other Snehas indicated as pana are

- a) Sunti ghritam
- b) Kanjika Shatphala ghritam
- c) Prasarinitailam
- d) Saindavaditailam etc.

Among Swedakarmas mainly RUKSHA SWEDA LIKE VALUKA SWEDA, POTALISWEDA etc are indicated.

VIRECHAN YOGAS mentioned for Amavata

- a) Trivritadi Churnam
- b) Hareetaki prayog
- c) Aragvada pallavaprayog
- d) Eranda Kwatha pryog
- e) Eranda taila prayog etc.

TIKTA, KATU, DIPAN, PACHAN, AMAPACHAN YOGAS indicated in Amavata

- a) Nagara Churnam
- b) Vaiswanara Churnam
- c) Sata Pushpadi Churnam
- d) Hingvadi Churnam
- e) Chitrakadi Churnam
- f) Deve darvadi Churnam
- g) Panchakola Churnam
- h) Amrutadi Churnam
- i) Shatyadi Kalkam
- j) Sunti Kvatham
- k) Ajamodadi Churnam
- l) Bhallatakadi Churnam

BASTI :-

ANUVASANA BASTI with Vatanasaka tailas like

- a) Nirgundi,
- b) Saindavadi tailas etc.
- c)

NIRUHABASTI with

- a) Dashmula Kwath,
- b) Maharasnadi Kwath,
- c) Rasna Erandamula kwath etc.

Some of the important Amavata Nashak GUGGULU, VATI, KWATHA are as follows:

- a) Simhanada guggulu
- b) Rasona pinda
- c) Vatari guggulu
- d) Yogaraja guggulu
- e) Rasnadikwath
- f) Vyadhi sardoola guggulu
- g) Rasna saptaka kwatha

h) Siva guggulu etc.

External LEPAS, TAILA'S for symptomatic relief;

- a) Himsradilepa
- b) Satapushpadilepa
- c) Vija yabhairava tailam
- d) Sainda vadi taila

Rasa Aushadies used in Amavata

- a) Amavatariras,
- b) Amavatarivatika,
- c) Amavateswararas.
- d) Vatagajendraras,
- e) Amapramathini Vatika,
- f) Amavatadrivajraras,
- g) Amrita manjariras etc.

For Amapachan and maintenance of Agni in Amavata patient even pathya & apathyas are mentioned in Ayurvedic classics.

Pathya For Amavata Rogi

Rukshasweda, Langan, Snehapana, Swedanam, Vasti, Lepam, Rechana karma, Puranmadhyas, Jangamamamsam, vata kaphanashak dravyas, takram, erands taila, lasuna, patola, karavellaka, vartaka, shigruphala, ushnajala, mandara, vriddadaruka, bhaliataka, gomutra, ardhraka, katutikta, rasa pradhan dravyas, agni dipaka dravyas.

Apathya For Amavata Rogi :

Dadi, matsya, guda, dugda, masha, other heavy sweets, Dushita jala, poorvadisa vayu, vairudda bhojan, vegavarodhan, Jagaran, vishamasan, Anupamamsa etc. Abhishyandakara, Guru, picchila padarathas are also contraindicated.

CONCLUSION

By the all above descriptions it can be concluded that, following Ayurvedic line of treatment and taking Ayurvedic formulations give better results in the disease Amavata (Rheumatoid arthritis).

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