



Devdarubaladi Tail Matra Basti in Janu Sandhigata Vata: A Case Study

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ABSTRACT:

Sandhigatavata is the most common form of articular disorder which may begin asymptotically in 2nd and 3rd decade of life and is extremely common by age of 60. Among all persons by age of 40 have some pathological changes in weight bearing joint which limits their day today's activity. In *Sandhigatavata* the diseases occur in *sandhi* i.e. joints and *janusandhi* i.e. knee is the mostly affected joint in *Sandhigatavata*. *Vata dosha* plays the major role in this disease. In this case study effect of *Devdarubaladi taila matra basti* for 21 days is assessed. The study reports significant relief in subjective parameters like *Sandhishoola*(joint pain), *Sandhishotha*(swelling), *Sandhigraha*(stiffness), *Akunchana prasaranjanya vedana*(pain during extension and flexion of joint), *Sandhisphutana*(crepitus).

Keyword: *Sandhigatavata, Matra basti, Devdarubaladi taila*

INTRODUCTION

Osteoarthritis of knee joint is a common degenerative joint disorder seen in modern India. The incidence of osteoarthritis in India is as high as 12%. It is estimated that approximately four out of 100 people are affected by it. In Ayurveda *Sandhigatavata* is described under *Vatavyadhi* in all the *Samhitas* and *Sangrahagranthas*. It is a major problem as large percentage of population suffers from this disease. Acharya Charak has first described *Sandhigatavata* as *Sandhigata Anila* with symptoms of *Sotha*(swelling) which on palpation feels like bag filled with air and *Shula*(pain) on *Prasaran* and *Akunchana* (pain on flexion and extension). Acharya Sushruta also mentioned *Shula* and *Sotha* in this disease leading to the diminution (*hanti*) of the movement at joint involved. Madhavkara adds *Atopa*(crepitus in joints) additional feature of it. It is said to be caused by excessive intake of

Vatavrudhikara ahara like *Kattu, Tikta and Kashaya Rasa Pradhana dravyama*, excessive stress and strain of joints or *Abhigata* (Injuries).

Basti chikitsa (medicated enema treatment) is considered to be the prime treatment modality among the *Panchkarma*, as it radically pacifies the morbid *Vata*, the sole *dosha* responsible for the movement of all *doshas* within the body. It is considered as "*Ardha Chikitsa*" i.e. half treatment. *Matra Basti* is one of type of *Anuvasana Basti*. It is always applicable to those emaciated due to work, physical exercise, weight lifting, journey on vehicle and indulgence in women as well as those with *Vata* disorders. *Devdarubaladi tail* has been mentioned in *Shashtrayog* in *taila prakrana* and is mentioned as *Sarvanga Vatajita*, which wins over *Vata* of whole body.



CASE REPORT:

A 60 year old male patient presented to the *Panchkarma* OPD of YMT Ayurveda medical college with chief complaint of pain in both knee joint since 1year. Patient felt difficulty in climbing the stairs and sitting in squatting position. On examination pain was present along with mild swelling, crepitus was present based on above complaints and radiological reports patient was diagnosed with *Sandhigata vata*.

History of past illness: not significant

On examination:

BP: 120/90mmofHg, P: 78/min, Temperature: afebrile

Weight: 54.3

Systemic examination:

CVS: CNS: RS: no abnormality was detected

Criteria For Assessment:

Signs and symptoms mentioned in classics:

Sandhishoola

Sandhishotha

Sandhigraha

Akunchana prasarnajanya vedana

Sandhisphutana

Gradation criteria: Table 2

Treatment Detail:

Devdarubaladi taila

Type of *Basti*: *Matra basti*

Time: after having lunch

Route: per rectum

Dose: 60ml

Duration: 21 days

Follow-up: on 42TH day

Procedure detail:

POORVA KARMA:

Sthanik Snehan and *Sthanik Swedana* over *Kati*, *Prushta* and *Nitamba* Region will be done.

PRADHAN KARMA:

Matra basti will be administered slowly through the rectum in left lateral position.

PASCHAT KARMA:

Taadana karma and *uttan* position.

Bastidharan kala of subjects will noted.

RESULT:

(Table 1) After treatment with *Devdarubaladi taila matra basti* patient had good relief in symptoms of *Janu*

Sandhigata vata.

DISCUSSION:

Sandhigata vata is the commonest disorder which mainly occurs due to *Dhatukashya* and other *Vata Prakopaka Nidana*. Even though *Sandhigata vata* is not a fatal disease but it cripples the movement of patient and makes him or her dependent on others.

Majority of drugs used in *Devdarubaladi taila* for *Matra basti* has *Vatashamaka* action. Due to *Snigdha Guna* it is also helpful in chronic stage of the diseases and balancing the *Vata*. *Basti* helps in *Vata Anulomana* thus helps in correcting *Apana*.

In this case study patient came up with severe pain in both the knees which was relieved and the swelling over the knees got completely relieved along with stiffness. The pain which was present with extension and flexion movement of knees also got significantly reduced. Audible crepitus was also reduced. *Devdarubaladi taila* has significant effect on *Janu Sandhigata vata*.

CONCLUSION:

On the basis of single case study it can be concluded that *Panchkarma* treatment like *Matra basti* is effective in treatment of *Janu Sandhigata vata*.

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Table 1 shows Gradation criteria:

<i>Pramukh Vedana</i>	<i>Gradation</i>	<i>Gradation Marks</i>
<i>Sandhishoola</i> (JointPain)	No pain Mild pain/occasional Moderate/frequent Severe pain	0 1 2 3
<i>Sandhishotha</i> (Swelling)	No swelling Slight swelling Moderate swelling Severe swelling	0 1 2 3
<i>Sandhigraha</i> (stiffness)	No stiffness Mild stiffness Moderate stiffness Severe difficulty due to stiffness	0 1 2 3
<i>Akunchana</i> <i>Prasaranjanya Vedana</i> (pain during extension and flexion of joint)	No Pain Pain without winching of face Pain with winching of face Prevent complete flexion	0 1 2 3
<i>Sandhisphutana</i> (Crepitus)	No Crepitus Palpable Crepitus Audible Crepitus Always audible crepitus	0 1 2 3

Table 2 Shows RESULT:

Subjective criteria :	Before treatment Day 1	After treatment Day 21	Follow up Day 42
<i>Sandhishoola</i>	3	0	1
<i>Sandhishotha</i>	1	0	0
<i>Sandhigraha</i>	2	1	0
<i>Akunchana</i> <i>Prasaranjanya Vedana</i>	2	1	1
<i>Sandhisphutana</i>	2	1	1