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## Clinical Study of Tindukamrita capsule with Nirgundi Patra Panda Sweda in the management on Amavata

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**Abstract:** There are so many dreadful diseases prevalent in medical science. The scopes of therapeutic measures are limited even extreme advancement of modern bio-medical sciences. The Rheumatological disorder is such a group of diseases which has no specific medical management in any type of therapeutics Amavata is the particular type of disease which is the mentioned in Ayurveda since the period of Madhavakara under the category of vata-kaphaja disorders. The Ayurvedic approach to the treatment is the need of our as no system is successful in providing the complete cure to the Rheumatological disorder. Still Amavata is a challenging and a burning problem of medical science. In this research work 27 patients were registered from OPD and IPD of IPGT and RA, these patients were given *Tindukamrita* capsule in the doses of 500gm two capsule three times a day for 30 days, along with *Nirgundi Patra Pinda Sweda* in 28 days. Results shows that significant decrease in the sign and symptoms of *Amavata* after treatment regimen.

**Keywords:** *Nirgundi Patra Pinda Sweda*, *Tindukamrita* capsule, *Amavata*, Rheumatoid arthritis

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**INTRODUCTION:**

Vata dosha along with Ama is termed as Amavata. It indicates the propulsion of Ama by vitiated vata in the entire body and gets lodged in Sandhithana producing Amavata.<sup>1</sup> The clinical presentation of Amavata closely can be correlated with Rheumatological disorders called rheumatoid arthritis, in accordance with their similarities on clinical features, like pain, swelling, stiffness, fever, redness, general debility etc.<sup>2</sup> Rheumatoid Arthritis is a chronic multisystem disease of unknown cause. Characteristic features of which persistent inflammatory synovitis is usually involving peripheral joints in a symmetric distribution. The prevalence of RA is approxi. 0.06 to 3.4%. Reliable with data from other regions, RA was more prevalent among urban than rural populations, and among women than men. The women:men prevalence ratio ranged from 1.3:1 to 12.5:1, which proposes prominent differences from the global average of 2:1.<sup>3</sup> In some patients with rheumatoid arthritis, chronic inflammation leads to the destruction of the cartilage, bone and ligaments causing deformity of the joints. Damage to the joints can occur early in the disease and be progressive. Moreover, studies have shown that the progressive damage to the joints does not necessarily correlate with the degree of pain, stiffness, or swelling present in the joints.<sup>4</sup> In the present clinical study effect of selected drugs *Tindukamrita capsule* and *Nirgundi Patra Pinda Sweda* were evaluated. For *Patrapinda*, *Nirgundi* is used traditionally and very effective and its *vedana sthapaka*, *Vatashamaka* and *Ama pachana* properties.<sup>5</sup>

Which help to prognosis of Amavata. Also *Nirgundi Patra* is easy to prepare and easily available. Effect of *Snehana* and *Swedana* both can be accomplished by *Nirgundi Patra Pinda Sweda* is an effective procedure to reduce the *Sandhishoola*, *Sandnistabdhata*.<sup>6</sup> In shamana drug *Tindukamrita capsule* is used. It is used in practice, it is a combination of simple drug i.e. *Goghrita shdhit kupilu* is specifically indicated in Amavata due to its *Kaphavata Shamaka* and *vedana sthapana* properties,<sup>7,8</sup> and *Guduchi* is also having *Balya* and *vedana sthapana* properties. Additionally both rugs are specifically good for *kaphavata* condition and having *Rasayana* properties as well.<sup>9</sup>

**Aims and Objectives:**

1. To evaluate the role of *Tindukamrita capsule* with *Nirgundi patra pinda sweda* on Amavata.
2. To review the disease Amavata in ayurvedic classics.

**Materials and Methods**

Row drug *Nirgundi*, *Kupilu* and *Guduchi* is collected from pharmacy of IPGT &RA, GAU Jamnagar, and authenticated by Dravyaguna department, *Tindukamrita capsule* prepared according to the prescribed method in the pharmacy.

**Selection of Criteria:**

- Patients having classical features of Amavata like *Angamarda*, *Aruchi*, *Gaurava*, *Trishna*, *Jwara*, *Shula*, *Shotha* etc. were taken for the present work. The detailed research proforma was prepared incorporating all the signs and symptoms seen in the disease.

- Patients were selected from the age group of 18-60 years, irrespective of sex, religion and occupation etc.
- The base of criteria led down by American Rheumatism Association (ARA) was also taken into consideration.

➤ **Exclusion Criteria:**

- Chronicity for more than 10 years.
- Having severe crippling deformity.
- Having cardiac disease, Pulmonary.T.B, Diabetes mellitus etc.
- Age less than 18 yrs and more than 60 years.

**Investigations:** For the purpose of assessing the general condition of the patient and to exclude other pathologies

**Table no, 1 – Degree of disease activity** to be assessed on the basis of American Rheumatism Association criteria (modified

like, Rheumatoid factor, Hematological Investigations and Biochemical Investigations.

**Study design:** Total 27 patients were registered in *Tindukamrita capsule* group, amongst them 16 patients had completed the treatment and 11 left against medical advice. The patients of this group were given *Tindukamrita capsule* in the doses of 500gm two *vati* three times a day for 30 days, along with *Nirgundi Patra Pinda Sweda* in 28 days.

**Criteria for Assessment:** In this study an effort has been made to follow the guideline laid down by the classical texts of Ayurveda as well as American Rheumatism Association (1988).

Grade	0	1	2	3
1) Fatigue	Not there	Work full time despite fatigue	Patient must interrupt work to rest	Fatigued at rest
2) Grip strength	200 mmHg or more	198 to 120mmHg	118 to 70 mmHg	Under 70mmHg
3) Spread of joints	Not there	0 to 50	51 to 100	Over 100
4) Westergren ESR (in 1 <sup>st</sup> hour)	0 to 20	21 to 50	50 to 100	Above 100
5) Haemoglobin (gm %)	12.5 or more	12.4 to 11	10.9 to 9.5	<9.5
6) General function	All activity without difficulty	Most activity but with difficulty	Few activity cares for self	Little self care mainly on chair & bed
7) Patients estimate	Fine	Almost well	Pretty good	Pretty bad
8) Physicians estimate	Inactive	Minimally active	Moderately active	Severely active

Apart from this criteria of ARA (1987) two other criteria were added here.



9) Foot pressure	36-40 kg	31-35 kg	26-30 kg	<20 kg
10) Walking time (for 25 feet)	15-20 sec.	21-30 sec.	31-40 sec.	>40 sec.

**Assessment of cardinal symptoms like:**

- Sandhishoola* (Pain in joints)
- Sandhishotha* (Swelling in joints)
- Sparshasahyata* (Tenderness in joints)

d) *Sandhigraha* (Stiffness in joints)**Assessment Associated symptoms like**

*Jwara, Alasya, Gaurava, Asyavairasya, Daurbalya, Akarmanyata, Utsahahani, Angamarda, Daha, Trishna.*

**Observations and results****Table - 1: Effect of therapy on *Sandhishula* in joints**

Cardinal Features	'n'	Mean score		% of Relief	$\chi$	S.D. $\pm$	S.E. $\pm$	't'	P
		B.T.	A.T.						
Prox.Int. Phal.(H)	10	2.1	0.6	71.42	1.5	0.52	0.16	9	
Dis.Int.Phal.(H)	12	1.75	0.4	76.19	1.33	0.65	0.18	7.09	
Wrist	8	1.8	0.25	86.66	1.62	0.5	0.18	8.8	-
Elbow	6	2	0.16	91.66	1.83	0.4	0.16	11	-
Shoulder	1	2	0	100	2	-	-	-	-
Hip	10	1.9	0.3	1.6	84.21	0.51	0.16	9.79	-
Knee	12	2	0.25	87.5	1.75	0.45	0.13	13.4	-
Prox Int.Phal(L)	1	1	0	100	1	-	-	-	-
Neck	4	2	0.25	87.5	1.75	0.5	0.25	7	-
Ankle	6	2	0.66	66.66	1.33	0.51	0.21	6.32	-
Jaw	2	1.5	0.5	66.66	1	-	-	-	-

The relief from pain in Knee & Ankle joints were found to be statistically significant ( $P < 0.05$ ;  $P < 0.001$ ).

**Table - 2: Effect of therapy on *Sandhishotha* in joints.**

Cardinal Features	'n'	Mean score		% of Relief	$\chi$	S.D. $\pm$	S.E. $\pm$	't'	P
		B.T.	A.T.						
Prox.Int. Phal.(H)	10	2.1	0.6	71.42	1.5	0.52	0.16	9	
Dis.Int.Phal.(H)	12	1.75	0.41	76.19	1.33	0.65	0.18	7.09	
Wrist	8	1.87	0.25	86.66	1.62	0.51	0.18	8.8	-
Elbow	6	2	0.16	91.66	1.83	0.40	0.16	11	-
Shoulder	2	1.5	1	66.66	1	1.41	-	-	-
Hip	10	1.9	0.3	84.21	1.6	0.51	0.16	9.79	-

Knee	12	2	0.25	87.4	1.7	0.45	0.13	13.40	-
Prox Int.Phal(L)	1	1	0	100	1	-	-	-	-
Neck	4	2	0.25	87.50	1.75	0.5	0.25	7	-
Ankle	6	2	0.25	87.4	1.7	0.45	0.13	13.40	-
Jaw	3	1.66	0.66	100	0.66	1.41	-	-	-

Elbow the relief from *Sandhishotha* in all the joints were found to be statistically significant. ( $P < 0.05$ ;  $P < 0.01$ ;  $P < 0.001$ ).

**Table - 3: Effect of therapy on Sandhigraha in joints in-**

Cardinal Features	'n'	Mean score		% of Relief	$\chi$	S.D. $\pm$	S.E. $\pm$	't'	P
		B.T.	A.T.						
Prox.Int. Phal.(H)	9	2.7	1.22	92	2.55	2.4	0.81	3.12	
Dis.Int.Phal.(H)	10	2.5	1.1	92	2.3	2.4	0.7	3.02	
Wrist	9	2.55	1.11	91.30	2.33	2.17	0.72	3.2	-
Elbow	8	2.37	0.75	100	2.37	1.50	0.53	4.4	-
Shoulder	2	0.5	1	100	-	-	-	-	-
Hip	10	2.6	1.2	88.46	2.3	2.4	0.7	3.02	-
Knee	12	2.75	1.08	96.96	2.66	2.96	0.85	3.11	-
Neck	1	1	0	100	1	-	-	-	-
Ankle	5	1.6	0.4	75	1.2	0.44	0.2	6	-
Jaw	2	1	0.5	100	1	-	-	-	-
MT	4	2.25	1.5	77.77	1.76	1.5	0.75	2.33	-

The relief from *Sandhigraha* in Wrist, shoulder, Knee & Ankle joints were observed as statistically significant ( $P < 0.05$ ;  $P < 0.001$ ).

**Table - 4: Effect of therapy on Sparsa-Ashayata in joints in-**

Cardinal Features	'n'	Mean score		% of Relief	$\chi$	S.D. $\pm$	S.E. $\pm$	't'	P
		B.T.	A.T.						
Prox.Int. Phal.(H)	7	2.28	1	87.5	2	1.41	0.53	3.7	
Dis.Int.Phal.(H)	7	2	1	85.71	1.71	1.49	0.56	3.03	
Wrist	6	2.16	0.83	92.30	2	1.09	0.44	4.47	-
Elbow	3	2	0.66	100	2	-	-	-	-
Shoulder	2	1	0.5	100	1	-	-	-	-
Hip	6	1.83	0.83	90.90	1.66	1.21	0.49	3.37	-
Knee	7	2.14	1.14	86.66	1.85	1.86	0.70	2.63	-
Neck	1	1	0	100	1	-	-	-	-

Ankle	2	1.5	0	100	1.5	0.70	0.5	3	-
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The relief from *Sparsa-Ashayata* in all the joints were found to be statistically significant ( $P < 0.05$ ;  $P < 0.001$ ).

**Table no. 5 Assessment Associated symptoms**

Symptoms	'n'	Mean score		% of Relief	X	S.D. ±	S.E. ±	't'	P
		B.T.	A.T.						
<i>Angamarda</i>	16	1.42	0.28	1.14	73.07	0.63	0.15	.57	<0.001
<i>Trishna</i>	7	1.14	0	100	1.14	0.37	0.14	8	<0.001
<i>Aruchi</i>	16	1.42	0.28	80	1.14	0.36	0.09	12.5	<0.001
<i>Alasya</i>	13	1.23	0.23	81.25	1	0.40	0.11	8.8	<0.001
<i>Gaurava</i>	16	1.92	0.57	70	1.35	0.49	0.13	10.21	<0.001
<i>Jwara</i>	13	1.16	0.16	85.71	1	0.73	0.21	4.88	<0.001
<i>Apaka</i>	16	1.64	0.35	78.26	1.28	0.46	0.11	10.97	<0.001
<i>Sunta-Anganama</i>	10	1.6	0.2	87.5	1.4	0.51	0.16	8.5	<0.001

**Table no. 6 Effect on other symptoms**

	'n'	Mean score		% of Relief	X	S.D. ±	S.E. ±	't'	P
		B.T.	A.T.						
<b>Grip strength</b>	14	2.42	0.50	38.23	0.92	0.26	0.07	13	<0.001
<b>walking time</b>	13	1.84	1.00	50	-	-	-	-	-
<b>foot pressure</b>	14	2.28	1.35	40.62	0.92	0.26	0.07	13	<0.001
<b>functional capacity</b>	14	2.28	1.21	46.87	1.07	0.26	0.07	15	<0.001
<b>degree of disease activity</b>	12	2.25	1.50	33.33	0.75	0.62	0.17	4.17	<0.01

**Table no. 7 effect of haematological investigation**

	'n'	Mean score		% of Relief	X	S.D. ±	S.E. ±	't'	P
		B.T.	A.T.						
<b>E.S.R.</b>	14	81	70.57	12.87	10.42	32.86	8.78	1.18	<0.05
Hb gm%	14	10.82	10.26	5.21	-	-	-	-	-
T.L.C. Cu mm	14	7785	8107	-4.12	-	-	-	-	-
Neutrophil %	14	62.92	58.92	6.35	-	-	-	-	-
Lymphocytes %	14	31.28	34.5	-10.27	-	-	-	-	-
Eisionophil %	14	2.85	3.64	-27.5	-	-	-	-	-
Monocyte %	14	2.92	2.92	0	-	-	-	-	-

PCV	14	33.88	31.13	8.11	-	-	-	-	-
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**Table – 8: Effect on Biochemical value**

Investigation	'n'	Mean score		% of Relief	X	S.D. ±	S.E. ±	't'	P
		B.T.	A.T.						
S.Uric acid	12	4.68	4.4	4.44	-	-	-	-	-
S.Cholesterol	14	163.42	171.78	-5.11	-	-	-	-	-
Blood Urea	10	21.57	18.22	15.53	-	-	-	-	-
Total Protien	12	7.09	7.53	-6.22	-	-	-	-	-
S.Albumin	13	3.4	3.6	-3.99	-	-	-	-	-
S.Glubulin	13	3.56	3.78	-6.03	-	-	-	-	-
A/G Ratio	13	1.03	1.02	1.11	-	-	-	-	-
Blood Sugar	13	84.82	88.64	-4.50	-	-	-	-	-

**Discussion**

Chikitsa sutra of Amavata is *langhana, swedana, Tikta-katu-Deepana* drugs, *virechana* etc. the treatment is based on Ama pachana and amelioration of vitiated *Vata*.<sup>10</sup> The prepared shaman yoga (*Tindukamrita capsule*) is well known and popular drug which has possess *sothahara* and *shoola prashaman* qualities and gives desired Rasayana effect. The drug suitably acts one vitiated *Vata* & *Kapha* and produces the ultimate effect. Kupilu also is well known Rasayana and which has possessed *sothahara* and *shula prashamana* qualities and gives desired Rasayan effect. The drug suitably acts on vitiated *vata* & *kapha* and produce the ultimate effect. Guduchi is also having *Balya* and *vedna sthapana* properties. Additionally both drugs are specially good for *Kaphavata* condition and having Rasayana propertirs as well.

*Tindukamrita capsule* gives highly significant improvement in sign and symptoms of disease, which includes symptom like *Sandhishula, Sandhishotha, Sandhigraha,*

*Angamarda, Aruchi, Trishna, Alasya, Gaurava, Jwara, Daurbalya, Vibandha, Bahumutrata, Hridgraha, Usnata Around Joints, Gripping strength, Foot pressure, Functional capacity,* were statistically highly significant and other hematological parameters were statistical insignificant. out of 16patients, marked remission was reported in 2 patients (12.5%) while 10 patients (62.5%) got moderate improvement and 4 patients (25%) got mild improvement. None of the patient was found complete and unchanged in both the groups. The improvement was statistically highly significant may be because of the properties of kupilu like *vedanasthapana, Deepana, Pachana* which helps to relieve the *shoola* and for the digestion of the *Ama*. Also Properties of kupilu like *immuonomodulator, Antinociceptive, Anti-inflammatory, Anti-allergic*<sup>11</sup> which helps to over come the immunological derangement induced RA by boosting once immunity which brakes the pathogenesis of the disease.



**Probable mode of action of Nirgundi Patra**

**Pinda Sweda:** Three phenomenon takes place which are valuable from the scientific point of view:

Advocation of heat in the form of warm *pottali* repeatedly on affected surface. Lastly the light massage on the fomented parts.

A. By the above procedure the affect of therapy can be assumed in two ways:

- By the Physical manipulation.
- By the chosen drug.

**Physical Manipulation:**

1. To help relieving the pain by increased blood circulation is that area.
2. Relaxing adjacent structure.
3. Checking the further process of the disease.
4. And also enhance the absorption of the drug material advocated during the process.

**Effect of the therapeutic Drug:**<sup>12</sup> The effect of the choosen drug with the heat had administration may produce the analgesic effect by diverted stimuli. The thermo-stimulation applied above the site of region may possibly replace the already existing pain sensation there by producing the hypo-analgesic effect. In this course of *Nirgundi Patra Pinda Sweda* the administration of the drug is made in two ways:

- A. Oleation by the *Nirgundi* leaves tied in the form of *Pottali*.
- B. The fried *Nirgundi* leaves tried in the form of *Pottali*

The drug *Nirgundi* here administered in the form of oil and cell membrane is lipid in Nature, the higher the lipid solubility of the drug the super the concentration gradient within the

membrane and thus greater will be the driving force for the diffusion of the substance across the membrane.

- Due to *Vedanasthapaana*, *Vishaghanna*, properties of *Nirgundi* helps in reducing the symptoms like *shoola*, *shootha Jwara* and also increases the immunity of the individual.<sup>12</sup>
- Also better relief was observed in *shoola*, *Gaurava*, *Sthabdata*, *shootha* by *Nirgundi Patra Pinda Sweda* in both the groups due to above mention properties.

**Conclusion**

*Tindukamrita capsule* drugs effective on Amavata because both have such type of properties like Rasa, Guna, Virya, and Vipaka which can remove the samprapti Ghatak of Amavata. *kupilu* has *vedanasthapanana*, *Deepana*, *Pachana* properties which helps to relieves the *shoola* & digestion of the Ama. Also properties *guduchi* like immunomodulator, *Rasayana*, helps to over come the immunological derangement induced Rheumatoid Arthritis. *Nirgundi Patra Pinda Sweda* local *swedan* therapy used in mostly in practice was very effective. Better relief was observed in symptoms like *shoola*, *Gaurava*, *Stabdhatta*, *Shootha* by treatment regimen at significant level.

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#### Conflicts of interest

Nil.

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