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## ROLE OF YOGBASTI AND SHAMANA CHIKITSA IN THE MANAGEMENT OF VATARAKT W.S.R TO GOUT: A CASE STUDY

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### ABSTRACT:

Ayurveda emphasizes prevention and focuses on promoting health and treating diseases. Vatarakta is a condition described in Ayurveda that can be related to gouty arthritis in modern medicine. In Ayurvedic terms, Vatarakta is primarily a disorder of Vata and Rakta, affecting the joints. Ayurvedic treatments for Vatarakta include shodhana (cleansing) and shaman (pacifying) therapies. Shodhana involves processes like oleation and mild sudation followed by specific enema treatments. Shaman treatments include various Ayurvedic medicines like Amrutadi guggulu and Manjishtha churna to alleviate symptoms. While modern medicine relies on analgesics, anti-inflammatory drugs, and steroids for Vatarakta treatment, Ayurveda offers natural and holistic approaches with fewer side effects. The study aims to identify an effective, cost-efficient Ayurvedic remedy for Vatarakta.

**KEYWORDS:** Vatarakta, Shaman chikitsa, Yogbasti, Gout

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**INTRODUCTION:**

**Ayurveda** the “science of life” or longevity is the holistic alternative science it has since vedic era. Vatarakta is a Santarpana-janya Vyadhi thus Aam-Dosha is dominant initially. The origin of the word Vatarakta comes from two words Vata and Rakta. Rakta which is vitiated by vata is derived as vatarakta. It is also known as Adhyavaata means the disease which generally affects the people with comfort and royalty and secondly as it is difficult to cure ‘SYNONYMS

**Khudha Vata-** The word “Khudda” has two meanings i.e small & joint. Hence disease which occurs mostly in Khudda Desha i.e near the ankle or in smaller joints.

**Vata Balasa-** The disease manifested after provoking Kapha.

**Vatashonita** – This disease results due to vitiated Vata and Rakta, hence called Vatashonita.

**Adhyavaata** – As explained above

**CLASSIFICATION**

Depends on site of Pathogenesis

**\*Charaka Samhita**

1)UTTANA Vatarakta: where twak and mamsa are involved

2)Gambhira vatarakta: All the other dhatus are taking part in pathogenesis

3)Ubhayashrita vatarakta: signs and symptoms of both these types are present

According to Doshas predominance:

1)vataja, 2)pittaja, 3)Kaphaja, 4)Raktaja

5) Vatapittaja, 6)Vatakaphaja, 7) Kaphapittaja

8) Sannipatik

Factor responsible for vitiation of Vata		Factor responsible for vitiation of Rakta	
Ahara	Vihara	Ahar	Vihar
Food which are predominantly Ras-Kashay, Katu, Tikta	Excessive riding (horse, camel) Excessive swimming	Food which are predominantly Ras-Lavana, Amla, Katu, kshara.	By riding on camel, horse
Ruksha, Shita guna	Suppression of natural urge	Snighda, ushna guna	Exposure to heat and cold
Abhojan,	Increased physical activity, violent exercise	Ajeerna bhojana Viruddhashana, Adhyashana	Divaswapna, Ratrijagaran
Faulty use of Sneha	Traum,	Excessive intake of irritant, hot, sour, alkaline substance	Due to abhighata, Ashuddi, Krodha

Uttana Vatarakta (Superficial)	Gambhir Vatarakta (Deeply seated)
Doshas seated only up to Twaka and Mamsa Dhatu	Doshas penetrate to deeper Dhatus and have complex manifestation
Sign and symptoms <i>Kandu</i> (itching) <i>Daha</i> (burning sensation) <i>Ruja</i> (pain) <i>Aayama</i> (extension) <i>Toda</i> (pricking pain) <i>Sphurana</i> , <i>Kunchana</i> (contraction) Skin becomes <i>Shyavarakta</i> and <i>Tamra Varna</i>	Sign and symptoms <i>Swayathu</i> with <i>Stabdhatta</i> (oedema with stiffness) <i>Kathino</i> - Antar Arti (Hardness –agonizing pain inside the joints. <i>Shyava</i> – <i>Tamra Twaka Varna Daha</i> (burning) <i>Toda</i> (pricking)

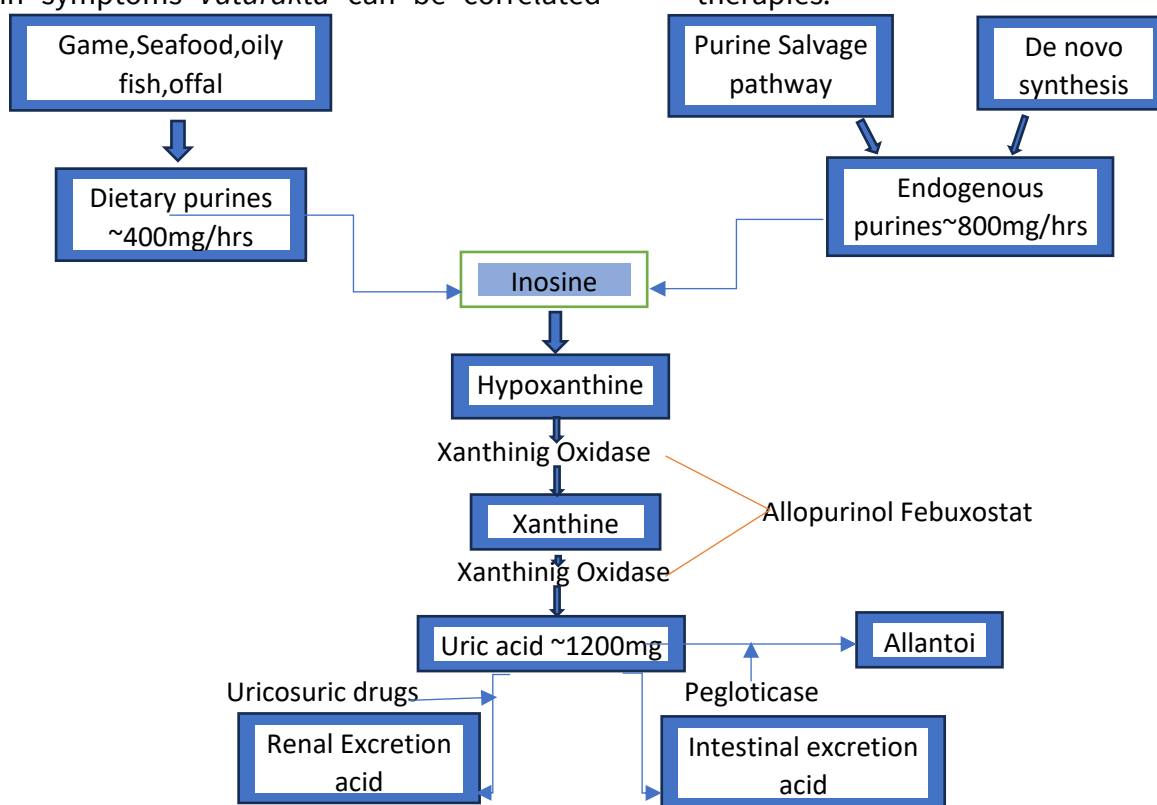
**SAMPRAPTI (PATHOGENESIS)**

**Vatarakta** is caused due to the vitiation of both *Vata dosha and Rakta dhatu*. Aggravated

*Vata* leads to the aggravation of *Rakta* as a result causes pain and inflammation in joints. Due to *Vata evam Rakta Parkopak aahara-*

*vihara sevana*. vitiated *doshas* circulate through the *Srotas* and become localised in the *Raktavahstrotas*, where there is *Khaivagunaya*, as it is obstructed there and the disease is evolved by *doshas* get localised in *Sandhi* is called *Gambhira Vatarakta* (deep seated) and that get localised in *Twak, mamsa* is called *Uttana Vatarakta* (superficial). The spread of *doshas* in joints is compared with *mushika visha* producing the symptoms of *Daha* (Burning sensation), *Toda* (pricking pain), *Kandu* (itching), *Vaivarnaya* (discoloration), *Sparshasahshnuta* (tenderness), *Stabadha* (stiffness). On the basis of similarity in symptoms *Vatarakta* can be correlated

with gouty arthritis in contemporary science. Gout is a heterogeneous group of diseases characterized by hyperuricemia. Gout is found to have increased prevalence in recent years. Gout is seen predominantly in men during middle life. The male female ratio is 7:1 to 9:1. Conventional treatment of the disease includes analgesics, anti-inflammatory drugs such as non-steroidal anti-inflammatory drugs (NSAIDs), Colchicines, Uric Acid lowering therapy, Xanthine oxidase inhibitor, and Uricosurics drugs. The main pathways for uric acid production and elimination are shown along with the site of action for urate lowering therapies.



Various modalities of treatment for *Vatarakta* have good outcome. Highly praised treatment modality includes *Vasti karma* in *Vatarakta*. *Vasti karma* treatment has got some edge over all other modalities in terms of relieving the symptoms early, modifying the underlying pathology and also reducing the duration of treatment. Importantly it can

bring down the disease severity. *Vasti* is the best therapy to control the *Vata* and thus it controls the *Pitta* and *Kapha* also. The given *vasti* when enters the *Pakvasaya* by its *Virya*, draws the vitiated *Doshas* lodged in the entered body from foot to the head, just as the sun situated in the sky sucks up the moisture from the earth. The *Tikshna Guna* of

*Vasti* helps in overcoming the *Sroto Dushti* resulting due to *Sanga*. Thus *Vasti dravya* after reaching to large and small intestine get absorbed due to *Laghu, Ushna, Tikshna, and Ruksha Guna of Dravyas*, it breaks the obstruction and expel out the morbid material from all over the body. *Vasti* by its *Srotosodhan, Vatanulomana and Brumhana* properly achieves both the goals. A *Vasti* which is *Brumhana, Vatashamana, Rakta*

### Material and Methods

#### Case Report as Follows

A female pt of age 42 yrs admitted in female ward of Kayachikitsa Department.

NAME: A.B.C.42 years female DOA -17/08/2023

OPD .NO-11574

IPD.NO- 994

Presenting complaints:

-Bilateral knee joint pain and swelling

-Bilateral ankle joint pain

-Difficulty in walking

-Burning sensation of both sole region and pain.

-backpain

H/o Past illness – No

*prasadana and Rasayanas* more appropriate. Different type of *Vasti* can be used in *Vatarakta* and it is found to be very effective. *Vatarakta* located in *Paani* (hands) is caused by upward *Dosha* and in *Paada* (feet) is due to downward *Dosha*. So, a treatment which is capable of dislodging the deep seated *Doshas* and bringing *Bala* to the Rogi is found to be appropriate.

} from 1year

ASHTAVIDHA PARIKSHA	General Examination
NADI =86/min	Puls = 86/min
MALA= Prakrut	BP= 130/80mmhg
MUTRA = Samyak	GC=Moderate
JIVHA = Saam	Temp= Afebrile
SHABDA= Spashta	RS=AE=BE,Clear
SPARSHA=Anushna	CNS=Conscious,oriented
DRUK=Prakrut	CVS=S <sub>1</sub> S <sub>2</sub> N
AKRITI=Madhyam	P/A=Soft

#### Investigation

- HBG:11.7g/dl
- WBC:5100 /Cumm
- RBCs:4.31/Cu.mm
- Uric acid :8.91mg/dl
- BSL(R):102.9Mg/dl
- ESR:15mmhr
- RA:Negative

Based on the clinical presentation (pain and swelling she developed difficulty in walking) with an increased ESR level of 15 mm/1hr and serum uric acid level of 8.91mg/dl the patient was diagnosed as a case of Acute Gouty Arthritis.

Criteria for assessment-Subjective

Visual analogue scale (0-10 Scale)

Grade

0 =No pain

1-3= Mild pain

4-7= Moderate pain

8-10 =Severe pain

Tab No:1 Showing gradation of symptoms according to WHO scoring pattern

Symptoms	Grade 0	Grade 1	Grade 2	Grade 3	Grade 4
<b>Swelling</b>	No Swelling	Slightly swelling	Moderate swelling	Severe swelling	More severe swelling
<b>Burning Sensation</b>	No Burning Sensation	Mild Burning Sensation	Moderate Burning Sensation	Severe Burning Sensation	More severe Burning Sensation
<b>Pain</b>	No Pain	Mild Pain	Moderate Pain but no difficulty in moving	Slightly difficulty in moving due to Pain	Much more difficulty in moving due to Pain

Criteria for assessment-objective

Objective criteria

Hb

ESR

Serum Uric Acid

**Materials=CHIKITSA**

*Samanya Chikitsa*

a) *Shodhana Chikitsa* b) *Shamana Chikitsa* = *Antahparimarjana Chikitsa*

c) *Rakta-mokshana Karma* d) *Lepa, Avgahana, Seka Chikitsa* = *Bahiparimarjana Chikitsa*

*Shamana chikitsa*

Most commonly *Gokshura, Guduchi, Musta, Punarnava* drugs are mentioned in *Charaka Samhita* which helps in reducing symptoms of *Vatarakta*. Some formulations found to be effective are *Amrutarishta, Punarnava ghanavati, Vatavidhwansa ras*. Most of these drugs have *Vatashamaka* properties and

**Tab No:2: Showing Panchkarma Done**

Sr.no	Panchkarma	Drug
1	<i>Matra Vasti</i> (60ml)	<i>Pinda tail</i>
2	<i>Niruha Vasti</i> (650ml)	<i>Guduchi kwath</i>

*Mutra-virechaka* quality so help in excretion of excess uric acid present in the body.

**Shodhan chikitsa:**

This pt treated with *yogavasti* (*Guduchi kwath*) for 8 days

Contents of the *Vasti*

- 1) *Guduchi* (*Tinospora cordifolia*)
- 2) *Til taila* (Oil of *Sesamum indicum*)
- 3) *Saindhava* (type of a salt)
- 4) *Madhu* (Honey)
- 5) *Pinda tail*
- 6) Catheter (female)
- 7) Bowl & *Vasti* pot

*Vasti dravya* will be mixed in the following order. Initially *madhu* and *saindhava* are to be mixed and then *til tail* will be mixed then *Guduchi kwatha* will be mixed properly [*Charak siddhisthana* 3/23]. All total 650ml *niruha basti* given to the patient.

*Niruha* had given on empty stomach and *Anuvasana vasti* had given after meal. *Anuvasan vasti* and *niruha vasti* in *yatyasata*, 8 vasti should be given to the pt.

Purva karma: Sarvanga abhyanga with Pinda tail + sarvanga swedana with Dashmool kwatha for 8 days.

Pradhan karma: After snehan, swedana (purvakarma)

Day	Day 1 <sup>st</sup>	Day 2 <sup>nd</sup>	Day 3 <sup>rd</sup>	Day 4 <sup>th</sup>	Day 5 <sup>th</sup>	Day 6 <sup>th</sup>	Day 7 <sup>th</sup>	Day 8 <sup>th</sup>
Type	Anuvasan vasti	Niruha vasti	Anuvasan vasti	Niruha vasti	Anuvasan vasti	Niruha vasti	Anuvasan vasti	Anuvasan vasti

Firstly, one snehabasti and lastly one Sneha basti are given. There are 3 niruha vasti between these two3 anuvasan basti are given in between them. This way the totle numer of these vasti become 8. The method used in this sequence is called yogabasti.

Pachhata karma: Sansarjana krama, Vishranti.

### Shaman Chikitsa

In consideration with the findings of clinical examinations & investigations following treatments was given as table

Tab No: 3

Sr.no	Dravya	Dose	Duration	Kala & Anupana
1	<i>Amrutadi guggulu</i>	250mg	3 Mas	Adhobhakta (3 times a day after food) with koshana jala
2	<i>Vatavidhavansa ras</i>	250mg	3Mas	As per above
3	<i>Amrutarishta</i>	15ml	3Mas	As per above
4	<i>Musta churna</i>	1gm	3Mas	As per above
5	<i>Punarnava ghanavati</i>	250mg	3Mas	As per above

Medication takes 30 days for 3 months

### Pathya:

**AAHARA** - Cereals like the old Barley, *Saali* as well as *shashtika* Rice, leafy vegetables like – *Kakamachi*, *Vastuka*, *Upodika Perwal*, *Soup of adhaki*, *Chanaka*, *Masura*, *Mudga* added with *Ghrita*, *Pratuda* and *Vishkira Mamarasa*. Milk of cow, buffalo and goat.

**VIHARA** – Use of soft pillows and bed. Warm poultices

**Apathya:** **Avoid** deep fried,oily food, *divaswap varja*.

### RESULTS:

: Criteria for assessment-Objective:

Objective criteria	Before Treatment	After Treatment
Serum Uric Acid	8.91mg/dl	6.84mg/dl
ESR	15mmhr	12mmhr

There was reported a remarkable improvement in the complaints Hematological parameters were reinvestigated. Very good response was noted after the completion of therapeutic interventions. Reduction in symptoms like severe joint pain, stiffness, fatigue along with Acute phase reactants (ESR) and Serum Uric Acid level were noticed. Overall functional capacity and general condition of the patient were improved with medication.

HB	11.7g/dl	11.8 g/dl
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## SUBJECTIVE CRITERIA (JOINT SYMPTOMS ASSESSMENT)

Scoring Pattern: VAS Scale (0-10 scale)

	Before Treatment	After Treatment 7 days	After 30 days of Treatment	After 3 months
Joint Pain	Severe Joint Pain	Moderate Pain (Grade 4-7)	Mild Pain (Grade 1-3)	No Pain (G =0)

Showing changes in symptoms before and after treatment

Tab No: 4

symptoms	Before treatment	After treatment
Swelling	3	1
Burning Sensation	3	1
Pain	4	1
Sr Uric Acid	8.91mg/dl	6.84mg/dl

**DISCUSSION:**

In this study, observation was done before and after treatment based on symptoms gradation pattern. *Shamana Chikitsa and Shodhan chikitsa*. This particular case was treated based on the *Vatarakta* line of management. *Snehana* (oleation), *Swedana* (sudation) followed by *Yoga Vasti* (medicated enema) which was given for eight days along with *Samanaushadhies* (oral medicines) *Acharya Charaka and Vagbhata* documented, “*Na hi vasti samam kincit Vatarakta chikitsitam*” (there is no other therapeutic measures equivalent to *vasti* in treating *Vatarakta*). *Vasti* is considered as *Agrya Aushadha for Vata*. *Amrutadiguggulu: Tridosha shamak* mainly *Vata and Pitta shamak for Vatarakta patient guggulu* is considered to be a good, useful medicine. It contains *Amruta, Guggulu, Triphala, Trikatu, Vidanga Tvacha, Trivrut* .etc. It is one of the important *guggulu kalpana for Vatarakta*. *Vatavidhwans ra: Vatashamaka Amrutarisht: Pittadosh shamak Pinda taila:* for Pain management, local application of Pinda

*taila* is useful. It is mentioned by *Acharya Charaka, for Ruja, Daha shaman. Guduchi: Guduchi* is considered as drug of choice in *Vatarakta*. The alkaloid present in *Guduchi* such as *Berberina* acts as xanthine oxidase inhibitor. Most of the *Aushadhas* is having *Guduchi* as their Main ingredient. *Guduchi* (*Tinospora cordifolia*) is said as the *Agrya* (best) *Aushadhi* for *Vatarakta*. *Uricosuric activity* which causes an additional excretion of uric acid. It is proved to have anti-inflammatory and antiarthritic action. *Tinosporin* (chemical constituent) is a natural diuretic agent. *Tinosporin* also possesses gastro protective activity which is a beneficial property while using it as an analgesic. It has *Vyadhi pratyaneeka* as well as *Rasayana. Punarnava: Punarnava* speeds up the filtration process of kidney and flushes out the excessive fluids and other waste products. *Trivrit* and *Danti* possess anti-inflammatory properties

**CONCLUSION:**

This case showed significant improvement during and after the combined therapeutic intervention. From the above case, it can be clearly concluded that *Chikitsa* mentioned in *Vatarakta* by *Acharyas* can clearly bring down the Symptoms as well as the serum uric acid level. In this case all symptoms like Pain & Burning sensation in *ubhaya janu sandhi, ubhaya hastaparva sandhi*, throbbing pain in the muscles, mild swelling in the affected joints are markedly diminished in 3 months study. *Vasti* is much beneficial in the patient



of *Vatarakta* (Gout) by relieving the local pain, swelling and tenderness as most of its contents are *Vataghna*, *Vednasthapan* and *Shothahara Dravya* and bloodpurifier which detoxify body. *Shamana chikitsa* and *Yogvasti* are significantly effective in *Vatarakta*, followed by proper *Pathya Apathya*.

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