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# Case Study

# Role of Dashamoola taila matra basti and Janu pichu in the management of Janusandhigata vata (osteoarthritis of knee joint)

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#### ABSTRACT:

The aim of Ayurveda is to keep *dosha* and mind in balanced state. *Vata dosha* plays a chief role in disease. Though *Vatavyadhi* is prevalent since ancient period but these days this is increasing rapidly due to comfortable and busy life. In modern science *Vatavyadhi* can be compared with osteoarthritis due to resemblance of clinical features. Osteoarthritis is the most common arthritis globally, with symptoms ranging from minor discomfort to disability. It can occur in any of the body's joints but most often develops in the weight bearing big joints specially knee. The medicines prescribed for osteoarthritis are moderately effective. But there is significant side effects of these treatments can and sometimes life-threatening. Joint replacement has risks and not cost effective. Ayurveda offers better management and cost effective in the form of *Panchakarma* (bio-purification) and medicaments. In this case study, patient of *Janusandhigata vata* (OA knee) were treated with *Matra Basti* (medicated enema), *Janu Pichu* (special type of local application of medicated oil) along with some palliative medicines and got significant relief in symptoms of Osteoarthritis of knee joint.

KEY WORDS: Ayurveda, Janusandhigata vata, Osteoarthritis, Basti karma.

# INTRODUCTION:

Vata is one among the Tridoshas. It is the main driving force behind all the activities of the body. The disease which is caused by vitiated Vata is called Vatavyadhi. Clinical features caused by vitiated Vayu depends upon the location in different parts of the body. Vitiation of Vayu in the knee joints is called as Janusandhigata Vata and it causes Vata purna driti sparsha shotha (Swelling of the joints which, on palpation, appears as if it is a leather bag inflated with air) and Prasarana akunchana pravritti vedana (Pain during extensions and contraction of the joints).[1]

The clinical features of *Janusandhigata Vata* is more or less similar to Osteoarthritis (OA) of knee joint. Osteoarthritis (OA) is a degenerative joint disease. Commonly it is thought to be wear and tear of joints as one ages. The disease occurs in elderly people, mostly in the major joints of the lower limb, frequently bilaterally. There is a geographical variation in the joints involved, depending probably upon the daily activities of a population. The hip joint is commonly affected in a population with western living habits, while the knee is involved more commonly in a population with Asian living habits i.e. the habit of squatting and sitting cross legged. [2]

OA is an important cause of disability and the second most common musculoskeletal problem in the world (30%) after back pain (50%). The reported prevalence of OA in rural India is 5.8%. The major risk factors associated with the knee joint OA are age, female sex, obesity, non-smoker, occupational knee bending, physical labour and chondrocalcinosis. Symptomatic and radiographic OA increases with age. The disease follows a more severe course in women with greater symptoms, more extensive involvement, and increased prevalence of knee and hand joint involvement. In contrast, men have an increased prevalence of hip OA in western countries. [3]

Pain is the earliest symptom. It occurs intermittently in the beginning, but becomes constant over months or year. Initially, it is dull pain and comes on starting an activity after a period of rest, but later it becomes worse and cramp-like, and comes after activity. A coarse crepitus may be complained of by some patients. Swelling of the joint is usually a late feature, and is due the effusion caused inflammation of the synovial tissues. Stiffness is initially due to pain and muscle spasm, but later, capsular contracture and incongruity of the joint surface contribute to it. Other

symptoms are: a feeling of 'instability' of the joint, and 'locking' resulting from loose bodies and frayed menisci. [2]

Various treatment modalities are available in modern medical science for the management of OA knee. But there is no satisfactory recovery is seen. It also cause multiple side effects. So there is much need to find effective and safe management of *Janusandhigata Vata* (OA knee). Condition can be better managed with *Panchakarma* (Bio purification) along with *Shamana Chikitsa* (palliative treatment) of Ayurveda.

Ayurveda, the Science of life and its main aim are to promote health (promotive) of healthy person and to cure the diseased (curative). *Maharshi Shusruta* described that *Bastikarma* (medicated enema) has promotive, curative and rejuvenative benefits. [4] As *Janusandhigata Vata* is a type of *Vatavyadhi*, the treatment principle is same as *Vatavyadhi* i.e. *Snehana* (oleation), *Swedana* (fomentation), *Basti* (medicated enema) etc. [5] So in this case study, patient with *Janusandhigatavata* was treated with *Matra Basti*,

*Janu Pichu* as *Panchakarma* along with palliative treatment, which gives recovery in symptoms.

#### **AIMS AND OBJECTIVES:**

- 1. To study the effect of *Dashamoola taila Matra Basti* and *Janu Pichu* in the management of *Janusandhigata Vata*.
- 2. To evaluate the role of *Yogaraj Guggulu* and *Maharasnadi Kwatha* in the management of *Janusandhigata Vata*.

#### **MATERIALS AND METHODS:**

#### **Case Presentation**

A 65 years old female patient presented to the *Panchakarma* OPD of I.P.G.E.A.E & R at SVSP Hospital, Kolkata with the complaint mentioned in Table no. 2. She took various treatment but no significant relief was found. So she approached for advance treatment of Ayurveda.

Table No. 1: Demographic details

Name	XYZ	
Age	65 years	
Sex	Female	
Religion	Islam	
Address	Park Circus, Kolkata	
OPD	AYUR/OR2100003743	
Occupation	Housewife	
Marital status	Married	
Socioeconomic status	Lower middle class	
Weight	52 kg	
Height	5'3"	

Table No. 2: Chief complaints with duration

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S. N.	Chief complaints	Duration
1	Pain in right knee joint	6 months
2	Difficulty and pain while walking	4 months
3	Stiffness in right knee joints	1 months
4	Mild swelling over right knee joint	1 months

**Table No. 3: Vitals examination** 

Blood pressure	130/70 mm Hg
Pulse	82 b/min
Respiratory rate	19/min

Table No. 4: Ashtavidha Pariksha (Eight fold examination)

Nadi (pulse)	82/min
Mala (stool)	Samyak (normal)
Mutra (urine)	Samyak (normal)
Jeehva (tongue)	Slightly dry
Shabda (voice)	Spashta (clear)
Sparsha (skin)	Anushanasheeta (normal temperature)
Drika (Vision)	Prakrita (natural)
Aakriti (built)	Madhyama (medium)

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# **Examination for Locomotor system**

#### **Inspection:**

- Difficulty and pain in both knee joints while walking for distance and sitting for long duration
- Swelling over right knee joint
- Right knee flexion deformity
- Reflexes are normal
- No any scar
- No varicose vein are seen
- No any structural deformity in both knee joint

#### Palpation:

- Tenderness present over right knee joint medially
- Crepitus present in right knee joint
- · Affected flexion and extension of right knee joint

#### Range of movement (ROM)

- Right knee Flexion at right knee joint, 62°-80° extension of right knee joint
- Rest of movements are normal
- Left knee—No deformity

#### Investigations

- Routine Blood- CBC, FBS, Urea, Creatinine, Uric acid, Lipid profile all were WNL.
- X-Ray Right Knee Joint (AP & Lat View) Osteophytic lipping formation is seen of patella, supra patellar region, tibial spines and round about the Knee joint with diminished joint space (Medially right side) seen.

By analyzing the clinical features and investigation of patient, treatment plan was prescribed. Treatment can be categorized under two categories i.e. *Shamana Chikitsa* (palliation) *Shodhana Chikitsa* (purification)

Table No. 5: Shamana Chikitsa

Drug	Dose	Duration	Anupana
Tab. <i>Yogaraja Guggulu</i>	2 Tabs. Twice a day after food	14 Days	Lukewarm Water
Maharasnadi Kwatha	20 ml Twice a day before food	14 Days	Normal Water

Table No. 6: Panchakarma Chikitsa

Therapy	Drug	Dose	Duration
Matra Basti	Dashamoola Taila	60 ml	7 days
Janu Pichu	Dashamoola Taila	Q.S.	30 minutes/ day for 7 days

# Procedure of Matra Basti

Abhyanga with Dashamoola taila on the back and lower abdomen followed by Nadi sweda was done. Thereafter the patient was made to lie down in the left lateral position with the left leg extended and the right flexed at the knees and hips. Then oil was administered into Pakwashaya through rectal route with the help of Basti syringe and rubber catheter. After few minutes of giving Basti, the patient was allowed to get up from the table and advised to take

rest for 30 minutes.

#### Procedure of Janu Pichu

The *Dashamoola taila* was taken into a bowl and heated indirectly. A thick gauze piece was dipped and placed over the knee joint. Gauze piece is changed timely to maintain the temperature. The procedure was done daily for 45 minutes.

### Asseessment criteria

Table no. 7: Visual analogue scale (VAS) for assessment of pain

S. No.	Type of pain	Grade	
1	Absent	ent 0	
2	Mild (up to 0-3 mark)	1	
3	Moderate (up to 4-6 mark)	2	
4	Severe (up to 7-8 mark)	3	

Table No. 8: Assessment of walking distance by patient

S. No.	Walking distance by patient	Grade
1	Walks without pain up to 1km	0
2	Walks without pain up to 500 meters	1
3	Walks without pain up to 250 meters	2
4	Feels pain on standing	3
5	Patient unable to stand	4

Table No. 9: Assessment of Range of movement of knee joint

S. No.	Range of movement of knee joint	Grade
1	0-130 degree	0
2	129-90 degree	1
3	89-60 degree	2
4	59-30 degree	3
5	30-0 degree	4

#### **RESULTS:**

Assessment of the patient was done with respect to clinical features. After completion of course of the therapy, the patient got significant relief in pain, stiffness, and swelling of the affected knee joint.

**Table No. 10 Results** 

S. No.	Clinical feature	Before Treatment	After Treatment
1	Pain	3	1
2	Walking distance	3	2
3	Range of movement of knee joint	3	1

#### DISCUSSION:

# Probable mode of action of Abhyanga / Janu Pichu

Abhyanga and Janu Pichu both comes under the category of Bahya Snehana. According to Charaka Samhita Snehana has following 3 actions [6]:

- 1. Sneho Anilam Hanti- Sneha pacifies aggravated Vata dosha.
- 2. *Mridu Karoti Deham- Sneha* by virtue of its *Snigdha* (unctuous), *Mridu* (soft) qualities brings softness of *Deha* (body).
- 3. Malanam Vinihanti Sangam- Mala sanga (obstruction in flow of waste products of body) occurs due to Rukshata (dryness). Sneha overcomes this dryness by its Snigdha (unctuous) and Vishyandana (oozing) properties.

# Probable mode of action of Nadi Sweda [7]

*Nadi Sweda* is a type of *sthanika* (local) *Svedakarma*. It has following 4 actions over the body:

- 1. Stambhaghnata- Stambha means stiffness. This attribute is a resultant of excess Sheetaguna (cold properties). Svedakarma being Snigdha (unctuous) and Ushna (hot), it relieves stiffness of knee joint.
- 2. *Gauravaghnata* By means of *Svedana*, fluids in the body are excreted through the *Sveda* (sweat) and hence a feeling of lightness in the body occurs. *Svedana* stimulates the nerve endings and promotes muscle strength.
- 3. *Sheetaghnata* By excretion of sweat, the heat of the body is being transmitted out.
- 4. *Svedakarakata- Sveda* (sweat) is a *Mala* (excretory products). *Svedana* is a mechanism of excreting the metabolic wastes in the body tissues.

Vata is the chief dominating factor because all dhatus and doshas becomes functionless without Vayu. Pakvashaya is the specific place of Vayu and Basti

specially acts on *pakvashaya*. So *Basti karma* is specially indicated to treat *Vata*. [8]

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#### Probable mode of action of Basti karma [9]

Through the systemic action *Basti*, is capable of removing the *Doshas* from whole of the body. Though *Basti* is given in *Pakvashaya* its active ingredients i.e. "Virya of the Basti" spreads in the entire body.

Though small intestine is supposed to be an important organ for absorption of food and drugs, colonic administration of drug has specific importance. The colon is a site where both local and systemic drug delivery could be achieved. As a site for drug delivery, the colon offers a near neutral pH, reduced digestive enzyme activity, a long transit time and increased responsiveness to absorption enhancers. Colonic drug delivery are suitable for drugs which are susceptible to chemical and enzymatic degradation in the upper GI tract, highly affected by hepatic metabolism.

#### **Gut brain theory**

Enteric Nervous System (ENS), the "second brain" contains more than 500 million neurons. There are so many similarities between CNS and ENS regarding cellular structure, neuropeptide secretion and specific functions. Recent studies have shown that there is great influence of CNS and ENS (Enteric Nervous System) on each other. Thus Basti may act over the receptors of the ENS to stimulate the CNS causing secretion of required hormones or other chemicals. Hence the effect of Basti may also be associated with "Touch and Go Theory" causing activation of ENS receptors. [10]

# **Drugs**

Dashamoola taila mentioned in Baisajya Ratnavali cures Asthisandhi Vata roga. [11] Indication of Yogaraja Guggulu in Sandhigata Vata roga is mentioned in Bhaisajya Ratnavali. [12] Maharasnadi kwath contains

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Rasna (Alpinia officinalis), Eranda (Ricinus communis), Vacha (Acorus calamus), Pathya (Terminalia chebula) etc. These all drugs has Vatahara (pacification of Vata) property. It also contains Bala (Sida cordifolia), Aswagandha (Withania somnifera) which gives strength to the muscle and helps in pacification of Vata.

#### **CONCLUSION:**

Matra Basti with Dashamoola taila and Janu Pichu shows remarkable symptomatic relief and functional improvement in Janusandhigata Vata. Relief was found in the most of the symptoms of Vata such as pain, restricted movement. The present single case report need to be studied on larger sample size for the better assessment.

#### **REFERENCES:**

- [1] Kushwaha harishchandra, *Charaka Samhita, Vatavyadhichikitsa* 28/37, Reprint edition, Vol II Varanasi, Chaukhamba Orientalia 2016, pg no.734.
- [2] Maheshwari J., Essential Orthopaedics, 4<sup>th</sup> edition, New Delhi, Jaypee Brothers Medical Publishers (P) LTD- 2011, pg no. 287-288.
- [3] Munjal YP, API Textbook of Medicine, 9<sup>th</sup> edition, New Delhi, Jaypee Brothers Medical Publishers (P) LTD- 2012, pg no.1818.
- [4] Murthy K.R.S., *Sushruta Samhita, Chikitsasthana* 35/34 Reprint Edition Varanasi, Chaukhambha Orientalia, Vol 2 -2016, pg no.337.

- [5] Kushwaha harishchandra, Charaka Samhita, Chikitsasthana 28/75-76, Reprint edition, Vol II Varanasi, Chaukhamba Orientalia 2016, pg no. 745.
- [6] Kushwaha harishchandra, *Charaka Samhita, Siddhisthana* 1/7, Reprint edition, Vol II Varanasi, Chaukhamba Orientalia 2016, pg no.138.
- [7] Lohith Dr. B. A., A Text book of *Panchakarma*, 1st edition, Chaukhambha Orientalia, Varanasi, 2016, page no.169-170.
- [8] Kar P.K., Comprehensive Theory and Practice of Panchakarma, 1st edition, Varanasi, Chaukhamba Sanskrit Pratisthan- 2008 pg no. 531.
- [9] Kushwaha harishchandra, *Charaka Samhita, Sid-dhisthana* 1/28, Reprint edition, Vol II Varanasi, Chaukhamba Orientalia 2016, pg no.950.
- [10]Lohith Dr. B. A., A Text book of *Panchakarma*, 1st edition, Chaukhambha Orientalia, Varanasi, 2016, page no.320-321.
- [11]Rao G. Prabhakara, *Bhaisajya Ratnavali*, 1<sup>st</sup> edition, Vol II, Varanasi, Chaukhambha Orientalia-2014, pg no. 520.
- [12]Rao G. Prabhakara, *Bhaisajya Ratnavali*, 1<sup>st</sup> edition, Vol II, Varanasi, Chaukhambha Orientalia-2014, pg no. 836.

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