



## Efficacy of Shunthayadi Kalka in the Management of Aamvata (Rheumatoid Arthritis): A Case Study

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Amavata, as a disease, was first described in detail by Madhavakara in Madhava Nidana. The word Amavata is made up of a combination of two words, Ama and Vata. The disease is mainly due to derangement of Agni, like Jatharagni, Dhatvagni and Bhutagni, etc. The symptoms are produced due to the vitiation of Vata (biophysical force) along with the formation of Ama (bio-toxin). The Ama is carried by the aggravated Vata and deposited in Sleshmasthanas (Seats of biophysical force, kapha like joints etc.) producing features like Angamarda (body ache), Aruchi (loss of appetite), Alasya (weakness), Sandhiruk (joint pain), Sandhishopha (joint swelling) etc. Ayurveda Acharya, Sri. Madhavakara in his book Madhava Nidana described the features of Amavata for the first time whereas the treatment of Amavata was first explained by Acharya Chakradatta. The treatment modalities like Langhana (fasting therapy), Swedana (fomentation therapy), use of drugs having Tikta Katu Rasa (bitter and pungent taste), Deepana (kindling digestive fire) property, Snehapana (oral intake of Ayurvedic medicated ghee), Virechana (purgation therapy), Basti (enema) etc. are the treatments advised. In the present study, the treatment of a female patient having features of Rheumatoid Arthritis treated with Shunthayadi Kalka for Shamana purpose discussed. The treatment modalities done showed marked improvement in the patient's signs and symptoms and blood investigations and hence was found fruitful results.

**Keywords:** Aamvat, Rheumatoid Arthritis, Shunthayadi Kalka

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## Introduction

*Amavata* (rheumatoid arthritis) is the prime disease that cripples a person and makes one unfit for an independent life, and about 60% of the patients become unfit to work 10 years after the onset of this disease. This disease is still a challenge to medical science. *Amavat*, as a disease, was first described in detail by *Madhavakara* in *Madhava Nidana*.<sup>[3]</sup>

The word *Amavat* is made up of a combination of two words, *Ama* and *Vata*. The disease is mainly due to derangement of *Agni*, like *Jatharagni*, *Dhatvagni* and *Bhutagni*, etc., resulting in the production of *Ama*, and this *Ama* circulates in the whole body by the vitiated *Vata* and gets located in the *Sandhis* (joints), causing pain, stiffness and swelling over the joints. According to modern medicine, it is strikingly similar to rheumatoid arthritis, which is a chronic autoimmune disease that causes inflammation and deformity of the joints. Rheumatoid arthritis can also cause inflammation of the tissues around the joints as well as other organs in the body. Autoimmune diseases are illnesses that occur when the body tissues are mistakenly attacked by one's own immune system. Other problems throughout the body (systemic problems) may also develop, including inflammation of blood vessels (vasculitis), development of bumps (called rheumatoid nodules) in various parts of the body, lung disease, blood disorders and weakening of the bones (osteoporosis).<sup>[6]</sup>

As the disease exhibits *Lakshanas* (symptoms) in both *Abhyantara* (internal) & *Madhyama* (middle) *Rogamarga* (pathway of disease), it is said to be *Krichrasadhya* (difficult to cure) or *Yapya* (long lasting). The *Nidanas* (causes) lead to the formation of *Ama* and vitiation of *Vata* resulting in the symptoms of *Amavata*. *Ayurvedic* approach to *Amavata* (RA) leads to break in the *Samprapti* (pathogenesis) of the disease and thereby removing the root cause of the disease. *Ayurvedic* treatment modalities like *Langhana*, *Swedana*, use of *Shunthayadi Kalka* having *Tikta*, *Katu Rasa* and *Deepana* property are said to be done in *Amavata*.

## Aim and Objectives

To evaluate the efficacy of *Shunthayadi Kalka* in the management of *Aamvata* (Rheumatoid arthritis).

## Case Report

A female patient aged about 56 years came in OPD, presenting with complaints of multiple joint pains, and swelling of joints and morning stiffness of the joints in the last 6 months.

### History of present illness

6 months before, the patient had a gradual onset of stiffness and pain in the right knee joint followed by symptoms in the left knee joint. Gradually pain and stiffness developed in B/L ankle joints, toes, B/L wrist joints.

The pain was so severe that it was associated with swelling and felt difficulty while initiating any action and aggravated on exposure to cold. The symptoms subsided by application of heat. There is occasional night starts present. She feels comfortable after taking *Ayurvedic* medicines. Hence, she came to our hospital for better management.

### History of past illness

H/o bronchitis 6 months before.

### Treatment history

Had an attack of bronchitis 6 months before for which she took antibiotics and inhaler.

H/o taken pain killers for arthritic complaints.

### Personal history

**Name:** abc

**Age:** 56yrs.

**Sex:** Female

**Pulse:** 68/min

**Temperature:** 98°F

**Marital status:** Married

**Respiratory rate:** 12/min

**Occupation:** House wife

**Heart rate:** 60/min

**Blood pressure:** 114/70mmHg

**Appetite:** poor

**Bowel:** 1- 2times/day

**Bladder:** 2-3 times/day, 0-1 times at night

**Sleep:** normal

**Allergy:** dust

### Chief Complaints

Patient came with complaint of *Kara-Pada Daha* (burning sensation in both the palms & soles) since 6 months and *Daurbalya* (general weakness).

### General Examination

**Ahara** - Vegetarian

**Rasa Pradhana** - Madhura Rasa

**Nidra** - Prakrut (normal)

**Mutra** - 2-3 times/day, 0-1 times/night

**Mala** - 1 time/day, no constipation

**Sharira Akriti** - Madhyama

**Stress** - no

**Menstrual history** - menarche - 12years, menopause - attained 7 years back.

### Systemic Examination

#### Musculoskeletal System Affected

**Inspection:** Swelling present on lt. wrist joint, B/L knee joints.

**Palpation:** Tenderness present on B/L knee joints and wrist. Tenderness also on thoracic spine and sacro-iliac joint.

**The range of Movements:** Painful movements of B/L wrist joints, B/L knee joints and ankle joints. Lateral flexion of lumbosacral spine painful.

#### Investigations

**Hemoglobin** - 11.8 g%

**Total leucocyte Count** - 7300 cells/mm<sup>3</sup>

**Total platelet count** - 2.11 lacs/cu.mm

**Rheumatoid Arthritis factor** - 30.7 IU/ml (Normal: <18)

#### Differential leucocyte Count

Neutrophil - 53,  
Lymphocyte - 39,  
Eosinophil - 6,  
Monocyte -2,  
Besophil - 0

**Serum. Uric acid** - 4.0 mg/dl

**Erythrocyte Sedimentation Rate** - 36mm/hr

#### Ashtasthana Pareeksha

- **Nadi** (pulse): *Mandam* (slow)
- **Mootram** (urine): *Prakruta* (regular)
- **Malam** (stool): *Prakruta* (regular)
- **Jihwa** (tongue): *Upalepa* (coated)
- **Shabda** (voice): *Vyakta* (clear)
- **Sparsha** (touch): *Prakruta* (normal)
- **Drik** (eyes): *Prakruta* (normal)

- **Akriti** (built): *Madhyama* (moderate)

#### Dashavidha Pareeksha

- **Prakruti** (constitution): *Vatakapha*
- **Vikruti** (morbidities): *Dosha - Vatapradhana Tridosha, Dushya - Rasa*
- **Satwa** (psychic conditions): *Madhyam*
- **Sara** (excellence of tissue elements): *Asthi*
- **Samhanana** (compactness of organs): *Madhyama*
- **Pramana** (measurement of organs): *Madhyama*
- **Satmya** (homologation): *Sarva Rasa*
- **Aharasakti** (power of intake & digestion of food): *Madhyama*
- **Vyayamashakti** (power of performing exercise): *Avara*
- **Vaya** (age): 58 years

#### Treatment

##### Shunthyadi Kalka[4]

शुण्ठीतिलगुडै कल्कं दुग्धेन सह योजयेत् ।

परिणामभवं शूलमामवातं च नाशयेत् ॥  
Sharangdhar Samhita 5/18

**Shunthi:** *Shunthi* improves taste and is useful in *Aamvata* (rheumatism) is digestive, pungent in taste and *Laghu*. It is unctuous, hot in potency, sweet in *Vipaka*, removes obstruction due to *Kapha Vata Doshas*. [3]

**Tila:** *Tila* is pungent, bitter, sweet and astringent in taste, pungent (and sweet) in *Vipaka* is unctuous, hot in potency and pacifies *Vata Dosh* as well as *Kapha Dosh*. [5]

**Shunthyadi Kalka** was given with *Go-Dugdha* (*Anupana*) for 15 days. The patient was advised to continue the *Shunthyadi Kalka* for 15 more days and to come to the OPD after 15 days for taking the After Treatment assessment.

#### Diet:

##### Pathya (Do's)

**Aahar:** *Yava* (barley), *Kulaththa* (horse gram), *Rakta Shali* (rice), *Shigru* (drum sticks), *Punarnava*, *Karvellaka* (bitter guard), *Parwar*, *Ardraka* (ginger), Hot water.

**Vihar:** Sunlight exposure for at least 15 min in a day, *Pranayam*, *Yoga*, meditation.

**Apathya (Don'ts)**

**Aahar:** Flour of mash (black gram), *Rajma* (Kidney Beans), Sweets, Fast Food, Uncooked Food, Salty, Spicy, Oily Food, Fish, Cold Water, Curd Jaggery, Milk, Cold Beverages, Ice Cream.

**Vihar:** *Divaswap* (Day Time Sleeping), *Vega Vidharana* (Suppression of Natural Urges), Exposure to Cold Wind (Air-Conditioned Area), Excess of Stress.

**Assessment Criteria**

**Subjective Criteria**

**Grading of Sandhi Shoola (Pain)**

SN	Description	Grade
1.	No pain	0
2.	Mild pain	1
3.	Moderate but no difficulty in moving	2
4.	More difficulty in moving the body part	3

**Grading of Sandhi Shotha (Swelling)**

SN	Description	Grade
1.	No swelling	0
2.	Mild swelling	1
3.	Moderate swelling	2
4.	Severe swelling	3

**Objective Criteria**

**Gradation of walking Time**

**Walking time (for 25 feet in number of Second)**

SN	Description	Grade
1.	15 – 20 seconds	0
2.	21 -30 seconds	1
3.	31-40 seconds	2
4.	>40 seconds	3

**Investigation**

Investigation	BT	AT
HB	11.8 g/dl	12.6 g/dl
TLC	7300 cells/mm <sup>3</sup>	6900 cells/mm <sup>3</sup>
Neutrophil	53	53
Monocytes	2	2
Eocinophils	6	5
Total Platelet Count	2.11 Lacs/cu.mm	2.30 Lacs/cu.mm
ESR	36 mm/hr	19 mm/hr
RA Test	30.7 IU/ml	17 IU/ml
Uric Acid	4.0 mg/dl	3.5 mg/dl

**Observations and Results**

**Assessment of Sandhishool**

Left Knee Joint		Right Knee Joint	
BT	AT	BT	AT
2	0	3	1

**Assessment of Sandhi Shotha**

Left Knee Joint		Right Knee Joint	
BT	AT	BT	AT
2	0	3	1

**Assessment of Sparshasatva**

Left Knee Joint		Right Knee Joint	
BT	AT	BT	AT
3	0	3	0

**Objective Criteria**

**Assessment of Walking Time**

For 25 Feet in Number of Seconds	
BT	AT
3	0

**Discussion**

*Aamvata* is mainly caused due to vitiation of *Vata Dosh*a and formation of *Ama*. *Mandagni* is the main cause of *Ama* production. *Chakradutta* was the first who described the *Chikitsa Sidhddhant* for *Aamvata*, it includes *Langhana*, *Swedana Aushadhis* having *Tikta*, *Katu Rasa* and *Deepan* action.[7]

*Yogratnakara* have added *Upanaha* without *Sneha* in *Aamvata Chikitsa*, *Langhana* has been mentioned to be the best measure for the treatment of *Ama*, *Langhana* in the form of *Laghu Ahar* was advised to the patient.[8]

*Aamvata* is considered to be an *Aamashayoththa Vyadhi* and *Rasaja Vikara*, *Langhana* is the first line of treatment in such conditions.

In *Amavata*, *Rukshasweda* has been advocated in the form of *Valukapottali* due to the presence of *Aam*. It helps in pacifying vitiated *Vata Dosh*a, this leads to relieve pain and stiffness.

*Shunthyadi Kalka* 5 gm twice a day with *Godugdha* were given to the patient. *Shunthyadi Kalka* has *Laghu*, *Ruksha*, *Ushna*, *Tikshna* properties. *Shunthi* has *Deepan* (Enzyme activating), *Aama Pachan* (Biotoxin Neutralizing), *Shothaghna*(Oedema reducing), *Shoolaghana*(analgesic) & *Aamvatahara* (antirheumatic) properties.

It enhances the *Agnibala* (digestive metabolic activity), alleviates the *Aam*(biotoxins) and prevents the further *Aam* (biotoxin) formation into the body. This reduces the clinical manifestation of *Aamvata* and helps in breaking the *Samprapti* of *Aamavata*.

## Conclusion

From this case study it can be concluded that *Aamvata* can be effectively and safely treated by using *Chikitsa Siddhant* described by *Acharya Chakradutta*. But this is a single case study hence to prove the efficacy there is a need to conduct a study on large number of patients.

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