

Original Research

Clinical Study on Efficacy of Virechana in Management of Rheumatoid Arthritis (Amavta)

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Abstract:

Generally classical Virechana is avoided in Amavata as internal Snehana is contraindicated in it. To overcome this problem Brihat Saindhvadi Taila was used for internal Snehana and in this study the patients of Amavata were given classical Virechana to evaluate its efficacy. The results showed that classical Virechana Karma provides significant relief in the signs and symptoms of the patients of rheumatoid arthritis. It also significantly reduced Knuckle swelling and degree of disease activity and provided major improvement to 30.7% patients and minor Improvement to 46.3% patients but 23.0% patients remained unchanged.

Key Words: Virechana Karma, Amavata, Rheumatoid arthritis, Brihat Saindhvadi Taila

Introduction:

Virechana is an important constitute of Chikitsa Sutra of Amavata (Chakradatta, Amavata Adhikara). As castor oil is very much praised for the treatment of Amavata, generally the physicians prefer to perform Rechana with castor oil because it is Sneha Rechana. Hence there is a need to evaluate the role of classical Virechana to assess whether it has additional benefit for its management. Snehana is contraindicated in Amavata but mandatory for the classical Virechana. Therefore to come over this problem Brihat-Saindhavadi Taila was selected which is indicated in Amavata as well as prepared with castor oil as its base.

Aims: To evaluate the role of classical Virechana in the management of Amavata

Material and Methods: The diagnostic criterion of American Rheumatism Association 1988 was followed as well symptoms of Ama and Amavata were also taken into consideration.

Inclusion Criteria: Patients of both the sexes irrespective of cast, creed, religion, region of 21 to 60 year age were included.

Exclusion Criteria: Amavata patients with contracture were excluded.

Plan of Therapy:

Internal Snehana was done by oral administration of Brihat Saindhvadi Taila in the increment dose started with 25 ml administered orally in the morning on empty stomach till appearing the Smayaka Snehana symptoms but minimum for 3 days and maximum for 7 days. After proper Snehana three days gap was kept wherein whole body massage with Bala Taila was done followed by Vashp Svedana once daily in morning. During these days liquid and hot diet was given and lukewarm water was allowed to drink.

On the next day Virechana drug was administered comprising of Triphala Kvatha-75 to 100 ml, Triphala Churna-20 g, Eranda Taila-20 ml and Icchabhedi Rasa 125 to 250 mg (depending upon Koshta) was given in a single dose on empty stomach at about 9 am.

After Samyak Virechana the type of Shuddhi was assessed and accordingly the patients were kept on Samsarjana Krama and on the next day patients were assessed for the effects of the Virechana.

Results and Discussion

In this study Brihat Saindhvadi Taila was given for internal Snehana in increment dose started with 125 ml on first day and maximum 525 ml on the last day with average quantity of 277.5 ± 31.2 ml (mean \pm SE) per patient consumed to show the Samyak Snehana Lakshana within 3 to 7 days.

It was observed that on the first day, the patients passed 2-6 loose motions, may be as the base of the oil is Eranda Taila. But later they passed 1 to 2 motions only though the dose was increased. All the patients showed Samyak Snehana Lakshana within 7 days which are shown in Table-1. Relief in pain and swelling was seen in 71.5% patients after the internal Snehana.

Assessment of Samyaka Virecana: The loose motions passed by the patients of this series passed on average were 11.5 ± 1.49 /patient. The symptoms of Samyaka Virecana reported by the patients are presented in Table-2.

In this series, 53.8% patients had Madhyama Shuddhi, 38.4% patients had Avara Shuddhi and only 7.6% patients had Uttama Shuddhi.

Effect of the Virechana on Amavata: As shown in Table-3 the Virechana therapy provided significant relief in joint redness (70.0%), warmth of the joints (50%), stiffness of joints (36.3%), joint pain (29.6%), joint swelling (27.2%) and Joint tenderness (4.2%).

Virechana therapy also provided highly significant relief in Ama symptoms (60.8%) and general symptoms (55.7%). It also provided significant relief in degree of disease activity (5.2%) and Knuckle swelling (Table-4).

Virechana therapy caused no significant changes in hematological parameters which indicate that it has no adverse effect on hemopoietic system (Table -6).

The classical Virechana therapy provided major improvement to 30.7% patients and minor improvement to 46.3% patients but remaining 23.0% patients remained unchanged (Table-7).

The classical Virechana alone though provided significant relief in the signs and symptoms, no patient got complete remission; hence there is a need to administer Shamana drugs after Virechana to provide the cure to maximum patients.

Table-1
Symptoms of Proper (Samyak) Snehana Reported by 13 Patients of Amavata (RA)

Symptoms	No of patents	%
Vatanulomana (proper movement of flatus)	09	69.2
Dipta-Agni (improvement in digestion)	01	07.6
Snigdha-Varchas (oily feces)	13	100
Asamhata-Varchas (lose feces)	13	100
Mardatva (softness in body)	01	07.6
Snigdha-Angata (oiliness of skin)	06	46.1

Table-2
Symptoms of Proper (Samyak) Virechana Reported by 13 Patients of Amavata (RA)

Symptom	No of patents	%
Sroto-Vishuddhi (cleanliness of channels)	13	100
Indriya Prasada (elation of senses)	05	38.4
Laghuta (lightness)	11	84.6
Agni-Vridhhi (Improvement in digestion)	06	46.1
Evacuation of feces, Pitta and Kapha in sequence	11	84.6
Vata-Anulomana (proper movement of flatus)	03	23.0

Table-3
Effect of Virechana on the Cardinal Signs and Symptoms of 13 Patients of Amavata (RA)

Signs & Symptoms	Mean Score		% of relief	SD (±)	SE (±)	t	P
	BT	AT					
Joint pain	2.7	1.9	29.6	0.84	0.23	3.37	<0.01
Joint swelling	2.2	1.6	27.2	0.62	0.17	4.94	<0.001
Joint stiffness	2.2	1.4	36.3	0.57	0.15	3.93	<0.01
Joint tenderness	2.1	1.8	14.2	0.60	0.16	3.37	<0.01
Joint redness	1.0	0.3	70.0	0.63	0.17	1.76	>0.05
Joint warmth	0.9	0.45	50.0	0.66	0.18	2.55	<0.05

Table-4
Effect of Virechana on the Clinical Parameters of 13 Patients of Amavata (RA)

Clinical Parameters	Mean Score		% of relief	SD (±)	SE (±)	t	P
	BT	AT					
General symptoms	1.13	0.5	55.7	0.38	0.07	9.42	<0.001
Ama symptoms	1.43	0.56	60.8	0.27	0.09	9.72	<0.001
Knuckle swelling	21.6	21.4	00.9	0.19	0.05	4;15	<0.001
Degree of disease activity	1.7	1.6	5.2	0.13	0.03	3.0	<0.05

Table-5
Effect of Virechana on the Functional Parameters of 13 Patients of Amavata (RA)

Functional Parameters	Mean Score		% of relief	SD (±)	SE (±)	t	P
	BT	AT					
Joint movement range in degree	85.4	86.8	1.6	1.9	0.54	1.8	>0.05
Foot pressure in Kg	38.4	39.6	3.1	2.1	0.6	1.9	>0.05
Hand grip in mm of Hg	96.5	101.9	5.6	8.77	2.43	2.1	>0.05
Walking time in second	28.0	28.0	0.0	--	--	--	>0.05
General functional capacity	2.1	1.8	14.3	0.43	0.12	1.92	>0.05

Table-6
Effect of Virechana on the Hematological Values of 13 Patients of RA

Parameters	Mean Score		% of relief	SD (±)	SE (±)	t	P
	BT	AT					
WBC/cu.mm	8215.3	7869.2	4.2	757.7	210.7	1.61	>0.05
Neutrophil%	63.3	61.1	3.4	4.36	1.21	1.14	>0.05
Lymphocytes %	32.6	33.9	3.9	4.34	1.20	1.08	>0.05
Eosinophil%	3.46	3.46	0.0	--	---	---	>0.05
Monocytes %	1.7	2.0	17.6	0.64	0.17	0.41	>0.05
ESR (1 st H Wintrobe)	32.0	29.2	8.7	5.5	1.5	1.8	>0.05
Hemoglobin gm%	11.4	12.3	7.8	0.35	0.09	0.5	>0.05
PCV %	38.3	38.4	0.2	0.55	0.15	1.0	>0.05

Table-7
Overall Effect of Virechana on 13 Patients of RA

Overall Effect	No. of Patients	Percentage
Complete remission	0	00.0
Major Improvement	4	30.7
Minor Improvement	6	46.2
Unimproved	3	23.1

Conclusions

Brihat Sandhivadi Taila can be used internally for Snehana in Amavata patients prior to perform Virechana. It provided relief in pain and swelling of joints in 71.5% patients when administered as internal Snehana prior to Virechana. Classical Virechana carried out after proper Snehana and Svedana provided significant relief in all the cardinal signs and symptoms viz. joint redness (70.0%), warmth of the joints (50%), stiffness of joints (36.3%), joint pain (29.6%), joint swelling (27.2%) and Joint tenderness (4.2%). Virechana therapy also provided highly significant relief in Ama symptoms (60.8%) and general symptoms (55.7%). It also provided significant relief in Knuckle swelling (0.9%) and degree of disease activity (5.2%).

Virechana therapy caused no significant changes in hematological parameters which indicate that it has no adverse effect on hemopoietic system.

Classical Virechana provided major improvement to 30.7% patients and minor improvement to 46.3% patients of Amavata but remaining 23.0% patients remained unchanged. Virechana alone provided significant relief in the signs and symptoms but as in this series no patient got complete remission, hence it is suggested that after performing Virechana, appropriate Shamana drugs should be administered for providing the maximum cure to the patients of Amavata (Rheumatoid arthritis).

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