

WORLD JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.wjpmr.com

Research Article ISSN 2455-3301 WJPMR

OBSERVATIONAL STUDY ON ROLE OF VIRUDDHAHARA IN ETIOPATHOGENESIS OF AMAVATA WITH SPECIAL REFERENCE TO RHEUMATOID ARTHRITIS

Kamble Sagar^{*1}, T Saritha², S. Nagaraj³ and Shetty Sandesh Kumar⁴

¹PG Scholar of PG Studies in Roganidana, S.D.M. College of Ayurveda Kuthpady, Udupi- 574118.
²Assistant Professor Dept. of PG Studies in Roganidana, S.D.M. College of Ayurveda Kuthpady, Udupi- 574118.
³Professor and HOD Dept Roganidana. of PG Studies ,S.D.M. College of Ayurveda Kuthpady, Udupi- 574118.
⁴Associate Professor Dept. Of Swasthavritta, S.D.M. College of Ayurveda Kuthpady, Udupi- 574118.

*Corresponding Author: Kamble Sagar PG Scholar of PG Studies in Roganidana, S.D.M. College of Ayurveda Kuthpady, Udupi- 574118.

Article Received on 21/07/2022

022 Article

Article Revised on 11/08/2022

Article Accepted on 31/08/2022

ABSTRACT

The Amavatais a chronic disease of Madhyama Rogamarga which involves Ama and Vata as the main pathological entities, which is characterised dominantly by Ruja and Shopha significantly in sandhi. The etiology of Amavata is described in Madhavanidana consists of various dietary habits, the first among them is considered as ViruddhaAhara. The concept of ViruddhaAhara is well explained by Acharya Charaka by classifying them into 18 types in AtreyabhadrakapeeyamAdhyaya. There are other factors which act on etiopathogenesis of Amavata, in that ViruddhaAhara, Viruddhacheshta are the important factors. Hence in this study an attempt is made to study the role of Viruddhaahara in etiopathogenesis of Amavata. Methods: It was an observational study on minimum of 30 patients diagnosed with Amavata using diagnostic parameters, physical examination and laboratory investigations. A detailed questionnaire was prepared on ViruddhaAhara and Amavata including detailed history taking. Result-Kaala Viruddha and SamyogaViruddha is assumed as most probable causes of Amavata among different types of Viruddhaahara as their frequency was between 75% to 100%. The incidence VeeryaViruddha, SatmyaViruddha, Karma Viruddha, DeshaViruddha, Samskara Viruddha, SampatViruddha were assumed as most probable causes of amavata among different types of Viruddhaahara as their frequency was between 75% to 100%. The incidence VeeryaViruddha, SatmyaViruddha, Karma Viruddha, Vidhi Viruddha, PaakaViruddha, Parihara& UpacharaViruddha, Dosha Viruddha, Agni Viruddha HritViruddha, Vidhi Viruddha, PaakaViruddha, Parihara& UpacharaViruddha, Dosha Viruddha, Agni Viruddha were not identified as significant cause of manifestation of Amavata vyadhi.

KEYWORDS: Ama Amavata, Viruddha, Etiopathogenesis.

INTRODUCTION

Health is a multi-factorial complex which is influenced by things like Ahara, vihara etc. When an individual indulges in faulty dietary habits and life style and does prajnaparadha which hampers the agni and manifest the diseases. Amavata is also such a disease, where *mandagni* is considered as one of the important cause for the manifestation of the disease. Agni is considered as one of the important factor in maintenance of health in equilibrium. Ama is considered as a toxic substance, which is formed due to impairment in agni. Amavata is the disease which is comprised of two factors ama and vata, which was first explained by Acharya Madhava and said as ViruddhaAhara,^[1] and Viruddhacheshta,^[2] are the important causative factors in manifestation of disease. Acharya Charaka explained in detail about Viruddha Ahara and he mentioned that it interrupts metabolism and deteriorating action on *dhatus*,^[3] and told that when person consumes ViruddhaAhara, is prone to many disorders.

Amavata is the disease where in ama is carried by prakupitavata dosha, which settles in kaphasthana leading to ruja and shopha, mainy in sandhi. The ama acts as an external agent which is formed of mandagni and other factors, antibodies are formed against this and they interact with each other forms immune complexes and get settles in joints. Hence this disease is characterised by inflammation with systemic and articular manifestations. As In texts mentioned as sandhi shoola, sandhi graha and sandhi shopha are clinical features of Amavata are seen in inflammatory joint disease. There are many other inflammatory joint diseases like Ankylosing Spondylitis, Gouty arthritis, Psoriatic arthritis, Systemic lupus erythematous and Rheumatoid arthritis which exhibits stiffness, swelling, pain, redness, inflammation of joints, fluid effusion and skin changes etc. Exact etiology of these joint disorder is still unknown.

MATERIALS METHODS

It was an observational study on minimum of 30 patients diagnosed with *Amavata* using diagnostic parameters, physical examination and laboratory investigations. A detailed questionnaire was prepared on *Viruddha Ahara* and *Amavata* including detailed history taking.

Viruddhahara^[6]

Viruddha ahara is an unique concept which is explained by many Acharyas but the Acharya Charaka in sutrasthana, *Atreyabhadrakapeeyam adhyaya*, he has mentioned *ahara*, *ahara vidhi* and 18 types of *viruddha aharas*, Acharyas have mentioned that *viruddha ahara* will manifest many diseases and *Amavata* is one among them. 18 types of *viruddhahara* as per Acharya Charaka are as following

- 1. Desha Viruddha-Incompatibility To Region
- 2. Kaala Viruddha-Incompatibility To Season
- 3. AgniV iruddha -Incompatibility To Digestive Power
- 4. *Matra Viruddha*-Incompatibility In Terms Of Quantity
- 5. Satmya Viruddha-Incompatibility To Conduciveness
- 6. Dosha Viruddha Antagonistic To Dosha

7. Samskara Viruddha - Faulty Method Of Preparation

- 8. *Veerya Viruddha-* Incompatibility To Potency Of The Food
- 9. Koshta Viruddha- Non-Compliant To Nature Of Bowel
- 10. Avastha Viruddha -Incompatibility To Status Of The Individual
- 11. *Krama Viruddha* -Faulty Way Of Food Consumption
- 12. Parihara Viruddha- Antagonism To Existing Practices
- 13. Upachara Viruddha -Antagonism Of Effectiveness On Bowels
- 14. *Paaka Viruddha* -Antagonism In Terms Of Process Of Preparation
- 15. Samyoga Viruddha- Incompatibility In Terms Of Combination
- 16. *Hrit Viruddha-* Incompatibility To One's Palatability
- 17. Sampat Viruddha- Incompatibility To Quality Of Food
- 18. Vidhi Viruddha- Incompatibility To Codes Of Eating

RESULT Table 1:

Types of viruddha	Sometimes +Always+ Often (in %)	Rarely+Never (in %)
Desha viruddha	53.5	46.5
Kaala viruddha	76.6	23.4
Agni viruddha	46.7	53.3
Matra viruddha	10	90
Satmya viruddha	56.7	43.3
Dosha viruddha	46.7	53.3
Samskara viruddha	53.3	46.7
Veerya viruddha	63.3	36.7
Avastha viruddha	50	50
Karma viruddha	56.7	43.3
Parihara&Upacharaviruddha	16.7	83.3
Samyoga viruddha	70	30
Paaka viruddha	43.3	56.7
Hrit viruddha	10	90
Sampat viruddha	53.3	46.7
Vidhi viruddha	30	70

DISCUSSION

- The Amavata,^[7] is a unique disease which involves the two dominant pathological entities Ama and Vata, which are mutually opposite in properties.
- The main causative factors which manifest the disease are Viruddhaahara and Viruddhacheshta, where the Viruddha is capable of vitiating Tridosha and Dhatus, which does srotorodhaka and Mahaabhishyandhi.
- On detailed analysis of symptomatology of *Amavata*, it clinically resembles the disease Rheumatoid arthritis, SLE Gouty arthritis and ankylosing spondylosis but can be correlated with Rheumatoid arthritis
- The opinion about the disease activity and outcome is made by taking complete history physical examination and laboratory investigations.
- The conceptual part of the Amavata is studied under the triads of diagnosis i.e., Samuthanavishesha, Vikaraprakriti and Adhishtanantarani.
- Different Viruddhaahara as Nidana is clinically studied to analyse it is as a Dosha hetu and Vyadhi hetu.
- ✤ In the disease amavata the presence of asatmyabhava in the body is considered to be the utpadakahetu which might be either due to bheejaswabhava or apathyanimittaja.

- Here anyonyasammurchitadushtadosha are involved.
- Asatmya doshas, vata and kapha are abhyantara nidanas and among dooshyas rasa, asthi and majja are abhyantara nidanas.
- The gravity of Viruddha ahara as a nidana was assessed on the basis of the framed questionnaires, principally based on Charaka sutrasthana 26th chapter.
- Totally 18 Viruddhas are explained in sutrasthana koshta Viruddha was excluded as it is directly related with the treatment aspect i,e., Aoushadha Dravya which has significance in relation to Aharadravya.
- When it come to clinical current day to day practice, single *Viruddha ahara* seems less common and combination of two or more *Viruddha ahara* are more prevalent in manifestation of the disease.
- Questions were prepared under the each subheading in order to cover all the dietary practices which gives weightage to *Viruddhaaharas* explained in the classics.
- To assess these Viruddhas, different grades were assigned to the observations ranging from 0 to 3 based on frequency of intake. The frequency of the particular type of Viruddha ahara was fixed as that of the question under it with maximum frequency.
- The intake of each Viruddha ahara of each type along with its frequency was assessed and the total sum of a Viruddha aharain all subjects based on its frequency is obtained and obtained result is converted in to percentage.
- Again these percentages are further classified into four groups
- Most definite cause : 75-100%
- Assumed as most probable cause : 50-75%
- Assumed as physiological limit : 25-50%
- Physiological limit : 25-50%

CONCLUSION

- Present study highlights Kaala Viruddha Samyoga Viruddha Veerya Viruddha, Satmya Viruddha, Karma Viruddha, DeshaViruddha, Samskara Viruddha, SampatViruddha, Avastha Viruddha as significant cause of manifestation of Amavatavyadhi.
- Kaala Viruddha and SamyogaViruddha is assumed as most probable causes of Amavata among different types of Viruddhaahara as their frequency was between 75% to 100%.
- The incidence VeeryaViruddha SatmyaViruddha, Karma Viruddha, DeshaViruddha, Samskara Viruddha, Sampat Viruddha were assumed as most probable causes of amavata among different types of Viruddhaahara as their frequency was between 50% to 75%.
- MatraViruddha HritViruddha, Vidhi Viruddha, Paaka Viruddha, Parihara&UpacharaViruddha, Dosha Viruddha, Agni Viruddha were not identified

as significant cause of manifestation of *Amavatavyadhi*.

REFERENCES

- Vaidya JadavajiTrikamji, Editor, Commentary Ayurveda Dipika Of Chakrapanidatta Of Charaka Samhita Of Charaka, Sutra Sthana, Atreyabadrakapeeyamadhyaya, Chapter 26, Verse 85. Varanasi ChaukambaPrakasham, 2017; 150: 738.
- 2. Tripathi Brahmanand Editor, With Madhokosha Commentary By Vijayarakshita And Srikantadatta Of Madhavakara Of Madhava Nidana, Amavata Nidana, Chapter 25, Verse1-5, Varanasi; ChoukambaSurbharathi Prakashan, 2010; 186: 412.
- 3. Pt. Hari SadashivaSastriParadakara , Editor, With The Commentaries Of Sarvangasundara Of Arunadatta And Ayurveda Rasayana Of Hemadri, Ashtanga Hridaya Of Vaghbhata, Dravyadivijnaneeya, Chapter 9, Verse 7, Varanasi: Chaukambha Sanskrit Samsthan, 2012; 166: 956.
- Kasper Dennis L, Hauser Stephen L, Jameson Larry J, Fauci Anthony S, Longo DanL, Loscalzo Joseph. Harrison's Principles Of Internal Medicine (Vol2). 19th Ed. NewYork: Mcgraw Hill Publications, 2015; 2136-2139.
- Tripathi Brahmananda Editor. With Madhukosha Commentary By Vijayaraksita&Srikantadatta Of Madhavakara Of Madhavanidnana AmavataNidana, Chapter 25, Verse 6, Varanasi ;Chaukamba Surbharathi Prakashan, 2010; 186: 412.
- Agnivesha, Charaka Samhita Revised By Charaka & 6. Dridhabala With The Ayurveda Deepika Commentary Of Chakrapani Dutta, Edited By Acharya YadavjiTrikamji Acharya, Varanasi: Choukambha Prakashan, Ed Reprint, 2013; Su26/86.87.
- Ajay Kumar Sharma Avinash Jain, Seema Jain Bhadora. Kaachikitsa. Vol-2 Delhi: Chaukamba Orientalia, 2013; 526: 949.

L

I