

MANAGEMENT OF VATRAKTA: A CASE STUDY

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ABSTRACT

Ayurveda is a life science which not only deals with curative but also preventive aspects of the disease. Incidence of *Vatrankta* is increasing at an alarming rate. *Vatrankta* is a disease which is caused by vitiation of *Vata & Rakta Dosh*. *Vata* is vitiated by excessive swimming, late night sleep, stress, fasting, long distance rides on animals such as horses, camels, and *Rakta* is vitiated by the excessive consumption of *Amla, Lavana, Katu rasa kshara, ushana*, meat, curd, black gram etc. On the basis of etiopathology *Vatrankta* correlated with Gout which is mainly caused by increased uric acid level in the blood. Uric acid is the waste product of purine metabolism which is a component of nucleic acid. Uric acid gets crystallized and these crystals are deposited in small joints, tendons & surrounding tissues. A 36 years old male patient came to the OPD with the chief complaints of: pain in all major joints, *pad-anguli shoth* since last six months. The patient was given completely *Ayurvedic* medicines, leech application. *Kaishore guggulu & Punarnava guggulu, Avipattikar choorna* were given as internal medicine for 3 months.

KEYWORDS: *Vatrankta, Kaishore guggulu, Punarnava guggulu.***INTRODUCTION**

The disease in which aggravated *Vata* is obstructed by aggravated *Rakta* this obstructed *Vata* vitiates the *Rakta*. This pathological condition is called *Vatrankta*.^[1] *Vatrankta* is described in detail in *Ayurvedic* classical text. It has many synonyms such as '*Vata Shonitam*', '*Khuda*', '*Vatabalasa*', '*Vatasruka*', '*Adhyavata*'.^[2] The causative factors responsible for etiopathogenesis of *Vatrankta* stated in *samhitas* are closely related to faulty eating habits and sedentary lifestyle. The symptoms of *Vatrankta* like *Shool, Shotha, Sparshasahatvam* etc. correlated with gout which is included in locomotor disorders.^[3] *Vatrankta* mainly affects the *pad-anguli sandhi* (big toe).^[4] It is commonly seen that meta tarsophalangeal joints get affected in gout. Uric acid is the end product of purine metabolism in humans.^[5] In purine metabolism crystals of monosodium urate monohydrate are formed because of increased uric acid levels in body fluids which produce arthritis, bursitis, tophaceous deposits.^[6] Increased uric acid level in blood is known as hyperuricemia which is mostly caused due to the imbalance in the production and excretion of urate that is overproduction or underexcretion or both. The prevalence rate of gout is 0.1% in Maharashtra.^[7] Since last two decades incidence and prevalence is doubled.^[8] The major factors contributing to increasing the lifestyle

disorders are faulty food and drink habits like irregular eating, fast food eating, smoking, tobacco chewing, alcohol, drugs addiction, and sedentary life, irregular sleeping pattern & stress, lack of exercise.

Types & Symptoms of *Vatrankta*^[9]

- *Utthana* (superficial) 2) *Gambhira* (deep)

Symptoms of *utthana* and *gambhira vatrankta* are as follows.^[10]

Utthana vatrankta- *Daha* (burning), *Kandu* (itching), *Ruka* (pain), *Toda* (aching), *Spurana, Shyava twaka* (dark skin colour), *Aakunchana* (contraction)

Gambhira vatrankta- *Stambha* (stiffness), *Shvaythu* (oedema), *Daha* (burning), *Tamravarna* (discoloration), *Paka* (suppuration), *Arati* (pain), *Sphurana*

Samprapti

This vitiated *vata* along with derranged *rakta* circulates all over the body by the virtue of its *sukshma* (minute) and *drava* (liquid) *guna* respectively & undergo *dosh-dushya sammurchana* in *sandhi sthana*^[11] creates joint pain & swelling.

Vata prakopaka aahar, vihar sewan
 ↓
Annavidhagdhatta
 ↓
Rakta dushtikar aahar, vihar sewan
 ↓
Raktadushti
 ↓
Dushta rakta & prakopit vata sanchay – pada mool
 ↓
Prakopit vata, rakta swar sharir sanchar
 ↓
Twak, masa asharya- Uttana Vatrakta
 &
Sandhi asharya- Gambhira Vatrakta

Samprapti ghatak

<i>Dosha</i>	<i>Vata, Pitta (Rakta)</i>
<i>Dushya</i>	<i>Rasa, Rakta, Twaka, Masa</i>
<i>Adishtana</i>	<i>Rasavaha Srotas, Sandhi, Twaka, Masa</i>
<i>Srotas</i>	<i>Rasavaha, Raktavaha</i>
<i>Agni</i>	<i>Mandagni</i>
<i>Ama</i>	<i>Sama</i>
<i>Srotodushti</i>	<i>Sanga Pashchat Vimarg Gamana</i>
<i>Udbhawastana</i>	<i>Pakwashaya</i>
<i>Vyakta Sthana</i>	<i>Sarva Sandhi</i>
<i>SadhyaAsadhyata</i>	<i>Kruccha Sadhya</i>
<i>Roga Marga</i>	<i>Madhyama(Twak, Mamsa, Asthi, Sandhi)</i>

Gradation of the symptoms according to WHO scoring pattern^[12]

Symptom	Swelling	Burning sensation	Pain	Discoloration
Grade 0	No swelling	No burning	No pain	Normal colouration
Grade 1	Slight swelling	Mild burning	Mild pain	Near to normal colouration
Grade 2	Moderate swelling	Moderate burning	Moderate pain but nodifficulty inmoving	Reddish colouration
Grade 3	Severe swelling	Severeburning	Slightly difficulty inmoving dueto pain	Slight reddish,black discolouration
Grade 4	-	-	Much difficulty	Blackish discolouration

CASE STUDY

A 36-year-old male patient came to the O.P.D. of *Kayachikitsa* of our college. He was presented with the following complaints.

Main complaints with duration

1) *Pada anguli shoth vam & l*(swelling) 2) *Sandhi shotha & shool* (Swelling, pain)
 3) *Toda* (aching) 5) *Daha* (Burning sensation) 6) *Stabdhta* 7) *Sandhishula* (Pain in Joints) Since last 06 months.

History of present illness: Patient was normal before 06 months and then gradually developed above symptoms. For treatment he came to O.P.D of our Hospital.

Past History: No past history.

Family History: No family history to any family member.

Hetu Sevan: Patient continuously having irregular intake of food,regular consumption of chat, spicy food, curd, junk food, suppression of urges like urination, fast and improper sleep.

General examination of the patient

General condition	Good
BP	130 /80 mmHg
PR	82 / min
RR	17 / min
Wt	61 Kg
Tongue	Coated
Temperature	98.8 ⁰ F
Pallor	Absent
Icterus	
Clubbing	
Cyanosis	

Systemic examination of the patient

Respiratory System	Air entryequal on both side
Cardiovascular System	S ₁ ,S ₂ clear, No Murmur
Central Nervous System	Conscious and oriented
GI System	P/A- Soft, Normalbowel sounds,No Organomegaly

Ashatavidh Pareeksha of the patient

Nadi	Gati - 82/ min
Mala	Vibandhita mala yadakada (sometimes)
Mutra	D/ N – 6 / 0 times
Jivha	Alpa saam
Shabda	Prakrita
Sparsha	Ushna Sparsa in affected Sandhis
Druk	Prakrita
Akriti	Madhyama

Dashvidh Pareeksha of the patient

Prakriti	Vata Pitta
Vikriti	Vata- Shula, Pitta- Daha,
Sara	Rakta, Rasa Sara
Samhanana	Madhyama
Pramana	Madhyama
Satva	Madhyama
Satmya	Shad Rasa Satmya
Ahara Shakti	Abhyavarana shakti:Madhyama Jarana Shakti: Avar
Vyayama Shakti	Madhyama
Vayah	Madhyama

Treatment plan**Jaloukavacharana**

Jaloukavacharana is carried out 4 times at regular time interval of 2 weeks.

Shamana Chikitsa

Shaman drug	Dose	Kala	Anupan	Duration
Punarnavaguggulu	500mg	Two times a dayafter Lunch and dinner.	lukewarm water	90 days
Kaishoreguggulu	500mg	Two times a dayafter Lunch and dinner.	lukewarm water	90 days
Avipittikarachurna	3 gm	At bedtime	lukewarm water	90 days

Contents of Punarnava guggulu^[13]

Sr. No.	Hindi Name	Botanical Name	Part Used
1.	Punarnava mool	<i>Boerhavia Diffusa</i>	Root
2.	Erand mool	<i>Ricinus communis</i>	Root
3	Amalaki	<i>Emblica oflcinalis</i>	Fruit
4	Haritaki	<i>Terminalia chebula</i>	Fruit
5	Bibhitaki	<i>Terminalia bellerica</i>	Fruit
6	Trivrit	<i>Operculina turpethum</i>	Root
8	Danti	<i>Operculina turpethum</i>	Seed
9	Guduchi	<i>Tinospora cordifolia</i>	Stem
10	Suntha	<i>Zingiber oflcinale</i>	Rhizome
11	Mirich	<i>Piper nigrum</i>	Fruit
13	Pimpali	<i>Piper longum</i>	Fruit
14	Swarnamakshikbhasma	<i>Chalcopyrite</i>	Powder
15	Shudh Guggulu	<i>Commiphora mukul</i>	Oleo Resin

Contents of *Kaishore guggulu*^[14]

Sr. No.	Hindi Name	Botanical Name	Part Used
1.	Guggulu	<i>Commiphora mukul</i>	Oleo resin
2.	Haritaki	<i>Terminalia chebula</i>	Fruit
3.	Bibhataki	<i>Terminalia bellerica</i>	Fruit
4.	Amalaki	<i>Emblica oflcinalis</i>	Fruit
5.	Guduchi	<i>Tinospora cordifolia</i>	Stem
6.	Shunthi	<i>Zingiber oflcinale</i>	Rhizome
7.	Maricha	<i>Piper nigrum</i>	Seed
8.	Pippali	<i>Piper longum</i>	Fruit
9.	Vidanga	<i>Embelia ribes</i>	Fruit
10.	Trivrit	<i>Operculina turpethum</i>	Root
11.	Danti	<i>Operculina turpethum</i>	Seed

OBSERVATION

Symptoms	Before treatment	After treatment
Swelling	3	1
Burningsensation	3	1
Pain	3	1
Padangul sandhi shoth(vam)	2	1

Investigation of the patient

Investigation	B.T	A.T
Hb	11.4 gm%	12 gm%
S- Uric acid	8.4 mg/dl	6.0 mg/dl

DISCUSSION

The history of irregular intake of food, suppression of urges like urination, fast and improper sleep and stress leads to *vata prakop* & regular consumption of chat, spicy food, curd, junk food leads to *Rakta dushti*. The *dushta rakta* caused *Avarana* to *Vata*, which caused again *Rakta dushti*.^[15]

Mode of action of leech application- Properties of *pitta* and *rakta* are similar & hence when *pitta* gets vitiated, it vitiates the *rakta dhatu*. Leech application is indicated in *pittaj* and *rakta pradoshaja vyadhis* hence it is used for this patient to reduce *daha* and *shoola*.^[16]

Mode of action of Punarnava guggulu & Kaishore guggulu - Both these guggulu contain triphala, trikatu, amruta, *vidang*, *nishoth*. It helps in correction of purine metabolism and checks on uric acid production. Anti-inflammatory properties of *Guggulu*^[17], *Guduchi*^[18], *Shunthi*, and *Trivrit* relieve inflammation induced by crystals to synovial membranes and adjacent tissues. *Amalaki*, *pimpali*, *shunthi*^[19] act as analgesics relieving pain, tenderness in gout patients. *Haritaki* and *Amalaki*^[20] have adaptogenic properties reducing acute flares in gout patients. *Bibhataki*^[21] shows nephroprotective properties, which reduces the chances of Uric acid stone development in gout patients.

Mode of action of *Avipattikara Churna*- It helps to increase the *Agni* that causes *Amapachana*.

CONCLUSION

While understanding properly *Nidana*, *Lakshana* and *Samprapti* of *Vatrakta* we can easily keep it under the heading of *Vata Vyadhi* and it is also *rakta pradoshj vyadhi* and hence treats it successfully with *shaman* treatment. With the help of proper understanding of *Dosha*, *Dushya* and *Vyadhi Awastha* (etiopathogenesis) we are able to manage *Vatrakta* with the use of *shamana chikitsa*. The patient not only had good symptomatic relief but also the laboratory findings of uric acid had lowered significantly. Hence the given *Ayurvedic* treatment was successful in breaking the pathophysiology of the diseases & curing the disease without landing into further complications.

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