

REVIEW STUDY ON AMAVATA W.S.R TO CHIKITSA IN AYURVEDA**Vd. Rashmi N. Kadu***

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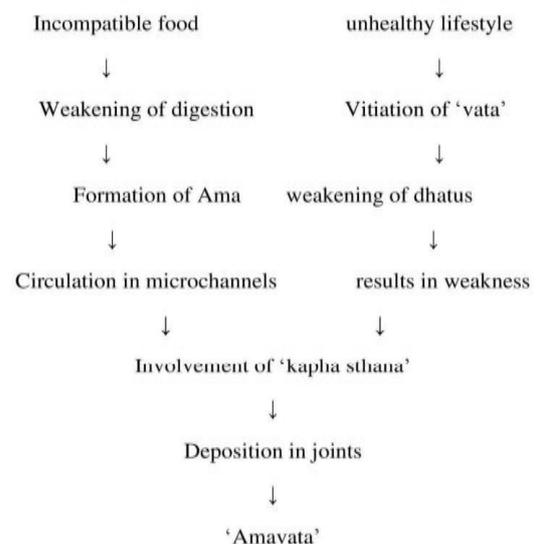
INTRODUCTION

In the present era, *Amavata* is the most common disease affecting a large aged population. *Amavata* term derived from the words “*Ama*” & “*Vata*”.

Amavata is a disease characterized by the aggravation of Vata Dosha and the accumulation of *Ama* in the joints, resulting in stiffness and pain. The growing incidence of *Amavata* needs serious attention to find an effective and fruitful treatment. The word *Ama* is the condition in which various ailments in the system create a toxic effect. *Amavata* is a disease caused by the vitiation or aggravation of *Vayu* associated with *Ama*. Vitiated *Vayu* circulates the *Ama* all over the body through *Dhamanias*, takes shelter in the *Shleshma* Sthana (*Amashaya*, *Sandhi*, etc.), producing symptoms such as stiffness, swelling, and tenderness in small and big joints, making a person lame. The symptoms of *Amavata* are identical to rheumatism, which include rheumatoid arthritis and rheumatic fever. *Amavata* is one of the challenging diseases for clinicians due to its chronicity, incurability, complications, and morbidity. The allopathic treatment provides symptomatic relief, but the underlying pathology remains untreated due to the absence of effective therapy, giving rise to many side effects, toxic symptoms, and adverse reactions, as well as more serious complications like organic lesions. The treatment procedures described are *Langhan*, *Swedan*, *Tikta-Katu Deepan*, *Virechan*, *Basti*, etc. The present study focuses on a systematic review of *Amavata* from all the classics of *Ayurveda* and its management.

As the present article is a review article, different Ayurvedic texts and published research papers have been reviewed for this article. All the Brihatrayi, Laghutrayi, and other supportive Ayurvedic books and their available commentaries have been reviewed for this article. Modern medicine books and research journals were checked to collect information regarding the latest clinical trials and research work on the relevant topic.

विरुद्धाहारचेष्टस्यमन्दाग्नेर्निश्चलस्यचस्त्रग्धंभुक्तितोह्यन्नं व्यायामं
कुंितस्तथा॥ (Madhav Nidan 25/1)

Samprapati of Amavata

Lakshana of Amavata

अङ्गमदोऽरुचस्तृष्णाआलस्यंगौरिर्जिरः।अपाकःशूनताऽङ्गानामामितस्यलक्षणम्॥ (Madhav Nidan 25/6)

1. Angamarda-Body ache
2. Aruchi-Anorexia
3. Trushna-Thirsty
4. Gourav-Heaviness in the body
5. Aalasya-Lethargy
6. Anga-shunata-Swelling in the body
7. Jwara-Pyrexia
8. Apaki-Indigestion

ChikitsaSutra

लङ्घनसिदिनन्तकतं दीपनार्नकटूर्नच। विरेचनस्रेहपानबस्तयश्वाम मारुते॥ सैन्धोद्येनानुस्यः क्षारिस्तः प्रशस्यते। आमितेपंचको लससद्द्रपानान्नसमप्यते॥ (Chakradutta25/1)

1. Langhana: Langhanais the 1stline of treatment to digest Ama. Here Langhanameans not complete fasting but the intake of light food. The duration of Langhanavaries from person to person, depending upon individual capacity.

2. Swedana: रुक्षःसिदोविधातव्योिलुकापुटकैस्तथा। उपनाहाश्चकतिव्या स्तेऽवपस्रहविस्जिता॥ (Yogratnakar Purvardh –Amavata Chikitsa & Bhava Prakash 26/14-15).

Swedana Karma is a procedure that can be done either as a preparatory component of Panchkarma or as an independent intervention by which Vata and Kapha Doshas²⁷ induced diseases can be treated. Swedana Karma has proved its efficacy to treat stiffness, heaviness of the body, and cold. Types of Swedan karma include Sagni, Niragni, Snigdha Swedana, and Ruksha Swedana. In case of Amavata, Snigdha Swedana can aggravate the Ama, as 'Ama' is a main causative factor of Amavata, and Snigdha is one of the properties of Ama; therefore, to treat the 'Ama', Ruksha Swedana should be the treatment of choice. Different types of Ruksha swedana, like Baluka Swedana³⁰, Ishtika Swedana, and Upnaha Swedana³¹, are mentioned in the Ayurveda Samhitas for the treatment of Amavata because Ruksha Swedana has Ushna and Ruksha Guna that aid in digesting the Ama and also help in clearing the channels. Ruksha Swedan is done without any prior use of any Snehana. In the chronic stage of Amavata, where the inflammation has subsided but only pain has been left over, in that case combination of Snigdha and Ruksh Swedhan must be done. Valuka Swedana should not be used when aggravated Pitta is involved in Amavata, presenting symptoms like burning pain, redness, and an increase in temperature.

3. Katu, Tikta, Pachak-Aahar &Aushadhi: The drug which possesses Katu(pungent), Tikta(bitter) Rasaand which act as Deepana-Pachana, are recommended in Amavata.

4. Virechana: For Virechana, Eranda Tailaand Haritakiare used. In Amavatawithout any preoperative

procedure, Virechanais is recommended directly. Erandaacts as Sroto-Shodhaka, Shothahara, Shoolaharaand Amavatahara.

By virtue of its above-mentioned properties, Virechana dravyas first reaches the Haridya and then circulates to Dhamani, from where it reaches all the large and small Srotas. Virechana Dravayas also has a Ushan potency, with which it causes Vishyandana (melting of doshas), and by its Tikshana guna, it helps in the disintegration of accumulated Doshas. One of the best Dravya that can be used for the Virechana Karma in Amavata is 'Eranda', as Eranda has properties like Ushna, Vatahara, Kaphashamaka, Shophya, and Shoolghanam. Further, Tailum also works as a Vata Anulomana Dravya; therefore, Virechana Karma with Eranda tailum given prime importance. Both these Dravya work by removing the blockage of Vata caused by Kapha, Meda, Rakta, and Pitta.

5. Basti Chikitsa: Chakradutta recommends Kshara Basti and Anuvasana Basti in Amavata.

Different Bastis indicated in Amavata

- (1) **Saindhavadi Anuvasana Basti** – Sandhavadi Anuvasana Basti consists of Saindhava, Araka Mulam, Maricha, Chiktrakmula, Bhringraj, Haldi, and Daruhaldi. All these Dravyas used in the preparation of Sandhavadi Tailum Anuvasana Basti work as an efficient Deepan-Pachan intervention.
- (2) **Vaitrana Basti** - Vaitrana Basti is given a prime importance in the treatment of Amavata because Vaitrana Basti is made up of Imli, Guda, Saindhava lavana, Gomutra, and Tila Tailam. All these ingredients help to treat pain, Anaha, Vata roga. Gomutra used in this Basti preparation by nature itself is very useful in aggravation of digestive fire, which cures the Agnimandhya, which is one of the health problems faced by an Amavata patient.
- (3) **Kshara Basti**– Kshara Basti comprises Saindhava, Guda, Chinchha, Shatahva, and Gomutra. Gomutra used in this Basti has a Kshara property, which shows Lekhana and Vishoshana effect in the body that is antagonistic to Ama and can help to treat the Ama in an Amavata patient.
- (4) **Many other Basti** like Brihatsandhavadi tail Anuvasan Basti, Rasnapanchak⁴⁶ Niruh Basti, Rasnasaptak Niruh Basti, Dashmooladi Niruh Basti⁴⁸, Panchkoladi Niruh Basti, are capable enough to cure Amavata.

Shamana Chikitsa

Those individuals who have disturbed Pitta and Kapha Dosh in their body and are suffering from Alasaka, fever, constipation, heaviness in the body, anorexia, and nausea must be treated with Shamana Langhana. The Shamana Langhana includes Pipasa, Maruta, Atapa, Pachana, Upvasa, and Vyayam. In case of Amavata, the patient shows symptoms like fever, heaviness, constipation, and anorexia; therefore, Langhana is indicated in Amavata.

CONCLUSION

In Ayurveda, Nidana Parivarjana has always been considered to be the first approach towards any disease. Therefore, one must avoid Viruddh Ahara and Vihara. Spreading of awareness about Viruddh-Ahara can cut down the rate of increasing incidences of metabolic as well as autoimmune diseases. Amavata, having similar signs and symptoms to rheumatoid arthritis, is nowadays very common in females after the delivery of the baby. As far as the Ayurveda text is considered, while indicating a Pathya-Apathya in females after delivery, it is clearly written that women should avoid Mithya-Achara like Mathun, Krodh, and Aayasa, i.e., extreme physical activities, and should take a bath only with warm water. Further, it is advised to females that after delivery, they must consume Snigdha, Agnivardhak, Balavardhak, and Vatashamak Ahara as the Bala of the female after delivery is considered to be reduced because of the development of the foetus in the Grabhashya, Dhatukshya, and loss of Kleda and blood during delivery. Nowadays, Hospital stays in AC rooms, IV fluid transfusion, use of different drugs, and food during Hospitalization of females for delivery provide a suitable environment for Vata Parkop in females, which cannot be avoided completely in today's era but can be managed by spreading awareness and adding Ayurveda diet plans strictly in hospital diets, Decoction prepared from Jeevaniyaghan, Brihaniyaghan, Madhurghan and Vata-shamak Dravya can be advised to the females. Growing incidences of R.A in Post covid patients can be managed effectively by using treatment options that are mentioned in Ayurveda literature. Even after recovery from other infections and surgeries where the individual's body went through extreme stress exposure, in those cases also Agni and Bala should be maintained in their normal state So to prevent the growing incidences of autoimmune disorders in these kinds of patients.

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