

**SINGLE-LINE CASE STUDY ON JANUSHOOL VATA ((KNEE OSTEOARTHRITIS))****\*<sup>1</sup>Vd. Vinodini Payghan, <sup>2</sup>Vd. Chitra Karekar**<sup>1</sup>Associate Professor, Department of Roagnidan Department. Bhausaheb Mulak Ayurved Medical College Hospital Research.<sup>2</sup>Associate Professor, Department of Kayachikitsa. Bhausaheb Mulak Ayurved Medical College Hospital Research.**\*Corresponding Author: Vd. Vinodini Payghan**Associate Professor, Department of Roagnidan Department. Bhausaheb Mulak Ayurved Medical College Hospital Research. DOI: <https://doi.org/10.5281/zenodo.18480070>**How to cite this Article:** <sup>1</sup>Vd. Vinodini Payghan, <sup>2</sup>Vd. Chitra Karekar (2026). Single-Line Case Study On Janushool Vata ((Knee Osteoarthritis). World Journal of Pharmaceutical and Medical Research, 12(2), 406-408.  
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**ABSTRACT**

According to Ayurveda, Acharayas have also explained in a type of *Vatavyadhi* as a *Janu Sandhigata Vata* (knee osteoarthritis), which is dominating role in old age, commonly due to *Vata Prakupita* and *Dahtaukshaya*. In the present realm of is a difficult task for the therapist because of their chronicity (according to the nature of the disease or according to patient ignorance in the initial stage of the disease), uncorrectable in the late phase. Today, numerous treatments are available in modern medicine, including pain relievers, anti-inflammatory drugs, muscle relaxants, calcium and vitamin D supplements, steroids, and physical therapy. However, these treatments can have limited success and may cause side effects if used for an extended period. *Janushool* is the commonest form of articular disorder. It is a type of *Vatavyadhi* which mainly occurs in *Vridhdhavastha* due to *Dhatukshaya*, which limits everyday activities such as walking, dressing, bathing, etc., thus making the patient disabled/handicapped.

**KEYWORDS:** *Janushool* is the commonest form of articular disorder.**CASE REPORT**

A female patient of 54 years old was admitted on 17 September 2025. Chief Complaint: left knee joint pain for the last two months.

**Signs and symptoms**

- Classical signs and symptoms of *Janu Sandhigatavata* with *Shula*, *Shoatha*, *Stambha*, *Sparsha-asahyata*, *Sphutana*, *Akunchana Prasarana Vedana* at the left knee joints

History of Present Illness: The patient was asymptomatic for 2 months. She gradually develops the above symptoms.

Past History N/K/C/O - hypertension (HTN), DM, SLE.

Personal History Ahara – Mixed

Vihara – Sadharan

Addiction – Tea

Bowel Habit – Regular

Nidra – Sound

Urine – Frequency – 3-4/ Day, 0-1/Night

Occupational History Nature of work – standing, working hours – 3-4 hrs.

Menstrual and Obstetric History Number of deliveries – 2.

**General Examination**

Gait – Normal

Decubitus – Normal

Faces - Normal

Pallor - Normal

Icterus – Normal

Cyanosis – Normal

Edema - Normal

Clubbing – Normal

Lymph nodes - Not palpable

**Ashta Vidha Pariksha**

Nadi: Vata pitta,

Pulse: 86/minute

Mutra: 3-4 Times/day

Mala: One Time

Sparsha: Normal

Drik: Normal

Jihva: Niramal

Sabdha: Normal

Akrithi: Normal

### On Examination

General condition: Moderate

Pulse Rate: 86/min

BP: 130 /80 mm of Hg

RR: 20/min

HR: 80/min

Temp- 98.6 F0

Radiology Finding - X –ray – Changes of OA Grade II

Provisional Diagnosis – Janu Janushool Vata, Ama vata, Janu shoola

Differential Diagnosis - Janu Janushool Vata, Ama vata, Janu shoola

Diagnosis - Janu Janushool Vata

Prognosis – Sadhya

### Samprapti ghataka (Pathogenesis factor)

Dosha -Vata Pradhana kapha Anubandha

Dushya -Rasa, Asthi, Majja

Srotas – Asthivaha

Ama – Sama

Udbhavasthana – Pakvashya

Vyaktisthana -JanuPradesh

Treatment- Shodhana, Shamana

Abhayana -with murivelma tail

Lepa- eranda lepa, sandhava with tila oil

Nadi sweda (3 minutes) with eranda patra (janu sandhi)

Anuvashana Basti (enema) and Dhanwantri Tailam Basti (enema)

### Method of Administration Form

Anuvashana Basti (enema) and Dhanwantri Tailam Basti (enema)

Dose: 80 ml

Kala: once a day

Duration of therapy: for 10days

Follow-up: after 20 days

Patients underwent the above-mentioned medication from 17/09/2025 to 27/09/2025. Janu Janushool Vata (knee osteo arthritis) is mentioned in all the classics. Symptoms are usually found in bus drivers, computer operators, and school instructors, obese individuals, etc.

### Shamana

Tab. Ashwagandha yoga 2-0-2 with lukewarm water for 7 days.

### Patients were assessed before and after treatment

Knee examination	Before treatment	After treatment
Pain	+++	-
Crepitus	++	+
Swelling	+	-
Tenderness	-	-
Temperature	+	-

According to Ayurveda, sandhi's (joints) serve as Slesamaka Kapha's (synovial fluid) seats. A large portion of osteoarthritis is caused by Ruksha Guna (roughness)<sup>36</sup>. Vata dosha Prakopa (aggravation) is present in Kapha sthana (location/place) in Janushool vata (Osteoarthritis). Therefore, it is Kapha Kshaya (diminish) and Ruksha Vriddhi (increase of roughness). In Guna, Vata and Kapha are Sheeta. Therefore, Ushna (hot) Brimhana (nourishment) and Anulomana (inverted direction of Vata) must be the drug. One of the Vata Vyadhis (diseases) listed in every Samhita and Sangraha Grantha is Janushool Vata (Osteoarthritis). Yogaraj Guggulu has the properties of Vatahara (vata decrease), Pachana (digestion), Ushnavirya (hot potency), Tiktakatu rasa (bitter taste).

Rationale and Relevance to the Present Study Basti (enema) was given as per the timetable, consisting of the nine-day Anuvashana Basti (enema) and was followed by symptoms including physical lightness and increased hunger, among others. Scheduled administration of Anuvashana. The symptom assessment was carried out

before, during, and after treatment. Right knee joint discomfort was measured using the Visual Analogue Scale (VAS) after 9 days of therapy and was shown to have dropped from 8 to 0, coupled with a marked improvement in other symptoms such limited joint mobility, standing duration, and soreness. The Ayurvedic classical advice suggests Anuvashana and Niruha Basti (enema) in the case of Janu Janushool Vyadhi (knee osteoarthritis) because the Dravyas (liquids) with Snigdha, (unctiousness) Khara (roughness), and Shoshana (emaciation) characteristics are necessary to nourish the Asthi dhatu (bone tissue).

Tikta Rasa (bitter taste) supplies power to the Asthi (bone), to the Kharatwa Guna of the Asthi (bone), and the Asthi dhatu (bone tissue). Firm and unyielding with its Shoshana Guna (emaciation quality). Basti (enema) do Asthi dhatu (bone tissue). Poshana (nutrients) (Guna Samanya Siddhanta). Tikta Rasa, (bitter taste) who is Akasha Mahabhuta Pradhanya Dravya, also acts as a conduit for Basti Dravya (medicated enema) to access their destination with a similar composition by making it

possible for them to penetrate quickly. Asthidhara Kala (bone tissue membrane) and Purishadhara Kala are completely dissimilar. Since Basti Dravya (medicated enema) will work directly on Pusrishadhara Kala and is necessary to nourish Asthidhara Kala (bone tissue membrane) and Asthidhatu (bone tissue) in particular, it is mentioned as a possible therapy for Asthivaha Srotodushti (bone tissue membrane).

The Anuvashana Basti (enema). Purification of the distribution routes was the goal of the administration of Niruha Basti (enema). It makes the provided medicine easier to absorb quickly and helps it reach its intended target. Since this illness is a component of Madhyama Roga Marga with Gambheera Dhatu, (deeper tissue) involvement, the Anuvasana and Niruha Basti (enema) regimens have been chosen for therapy.

It was Doshaharana Basti (enema) (withdraw the morbid Dosha from the body) and Srotosodhaka in its property before the administration of Niruha Basti (enema). Following the cleaning of the waterways, Asthi (bone), Sandhi (joints), and its surrounding structures underwent Basti (enema). The knee joints need Navaprasrutik Basti (enema) to provide strength, compactness, and flexibility, as well as to support the Snayu (ligament) and Kandara (tendon). In this manner, the medicine will reach the intended tissue and we will be able to produce both a short-term and long-term impact.

## CONCLUSION

We may conclude that Panchakarma, in addition to oral medications, is efficient in managing Janu Janushool Vata (knee osteoarthritis), which was not relieved by any contemporary medical intervention and was prescribed surgical therapy but additional clinical studies. Long considered a significant social problem, Janu Janushool Vata (knee osteoarthritis) is now more likely to occur in the future owing to the way we live now. Strong Pachaka (digestion) include Dhanwantari Tail Basti (enema) and Murchhita Tila TailaAnuvashana Basti (enema). Neither before nor after the treatment, there were any ill effects noted. Based on the data, we can say that Vatahara Ahara (diet) Vihara, Ushna (hot), and Brihana (nourishment) Dravyas reduced the patient's symptoms and provided comfort.

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