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# APPLIED ASPECT OF AMAVATA CHIKITSA SUTRA

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## **ABSTRACT**

Context: In ayurveda, most of the diseases are named taking into consideration either the vitiated dosha, dushya, avayava, marga, lakshan and karma. In the same way amavata has been named, taking into account two predominant pathological factors i.e. ama and vata having their important place in chikitsa and nidana of this disease. Aim: To understand applied aspect of the chikitsa sutra of Amavata. Material & method: All the references are taken from the Ayurvedic scriptures, Researches, journals of the Ayurveda. Special emphasis should be put into the correct application of Amavata chikitsa sutra described in our classics for a holistic approach with diet, life style intervention and continuous use of drugs to have a good control of the disease and to achieve improvement in quality of life. Conclusion: As Amavata is one of the common debilitating disease by virtue of its chronicity and implication and ama and vata have the properties on opposite pole of each other so these things come in across while treating it, because any measure adopted will principally Oppose one another. So a very careful approach can only benefit the patient. In this paper an attempt is being made to substantiate these principles scientifically.

**KEYWORDS:** Ama, Amavata, Chikitsa Sutra, Chikitsa.

# INTRODUCTION

In ayurveda, most of the diseases are named taking into consideration either the vitiated dosha, dushya, avayava, marga, lakshana or karma. In the same way amavata has been named, taking into account two predominant pathological factors i.e. ama and vata having their important place in chikitsa and nidana of this disease. The ama is caused due to malfunction of the digestive and metabolic mechanism. The disease is initiated by the consumption of virudhahara in the pre—existence of mandagni. In it, vitiated vayu circulates the ama all over the body through dhamani; takes shelters in the sleshma sthana (amashyas; sandhi etc.) producing symptoms such as stiffness, swelling and tenderness in the small and large joints, making a person lame. [1]

# Chikitsa Sidhanta of Amavata<sup>[2]</sup>

Acharya Chakrapani was the pioneer who said down the principle and line of treatment of amavata. He has described following measured in his text Chakradatta. Later Bhavaprakasha and Yogaratnakar added rukshasweda and upnaha to the above said measured by Chakrapani. The line of treatment described for the disease as "Langhanam Swedanam Tiktham..." can be summarized under following captions-

1. Measure to bring *agni* to normal state.

- 2. Measure to digest *ama*.
- 3. Measure to eliminate vitiated *vata* and *ama*.

Ama and vata are the two chief pathognomic factors in production of amavata. Ama is guru, snigdha, sthira, sthula and pichhila while the vata have the properties like laghu, ruksha, chala, sukshama and vishada. The properties of both are on opposite pole of each other. Only the sheeta guna is common to both. These are the things, which come in across while treating the amavata, because any measure adopted will principally oppose one another. So a very careful approach can only benefit the patient. The line of treatment laid down by chakrapani denotes firstly the pachana of ama, then restoration of agni and finally control of vata dosha. Here an attempt is being made to substantiate these principles.

# 1. Langhana<sup>[3]</sup>

Any measure, which brings in *laghuta* in the body, is known as *langhana* Ten types of *langhana* have been said in *charaka* viz. *suddhi* of four types (*vamana*, *virechana*, *asthapana* and *shirovirechana*), *pipasa*, *maruta*, *atapa*, *pachana*, *upavasa* and *vyayama*. *Acharya Vagbhata* in *ashtanga hridya* has considered *langhana* similar to *apatarpana* and has described under the heading *shodhana* and *shamana*. Acording to *acharya* 

Charaka those who are suffering from excessive vitiation of kapha, pitta, blood and waste products, are afflicted with obstructed vata and who have bulky and strong bodies should be treated using *shodhana* (purificatory) procedures of Langhana. Those who are suffering from diseases caused by moderate increase of kapha and pitta such as vamana, atisara,hridya roga, visuchika. alasaka, jwara, vibandha, gaurav, udgara, hrillasa, arochaka and similar conditions should first be treated with application of pachana. Above mentioned diseases, with mild intensity, should be mitigated by the upvasa and pipasa nigraha (fasting and control of thirst). In a strong person with diseases of mild and moderate intensity, any treatment measure should include vyayama and atapa maruta (physical exercise and exposure to sunlight and the wind). Those who are suffering from skin disorders, urinary disorders, those consuming excess of unctuous food, with excess discharges in the body and undergone excess nourishing therapy should be treated with Langhana therapy. In a season of shishira (winter), Langhana is suitable for patients with vata-dominant disordersThe use of substances, which possess the properties like laghu, ushna, tikshana, ruksha, vishada, sukshama, khara, sara and kathina, causes langhana. Main type of langhana useful in case of amavata is upavasa (no consumption of food materials).

It is the first measure that has been advised for the management of amavata, which is considered to be an amasayothavyadhi and also rasaja vikara, langhana is the first line of treatment in such conditions The pathology originates in amashaya due to poor digestion in presence of *mandagni*, ultimately resulting in formation of ama. So the starvation will further stop the production of ama. In addition it helps in digestion of ama. Along with upavasa the use of drugs having the langhana properties will also benefit in pachana of ama and correct the mandagni. Once the ama is cured, and the strength of the agni is restored the measure to control the vata can be instituted. While doing the langhana foremost care should be taken as these measures can further vitiate the vata dosha. So langhana should be stopped as soon as the *nirama vata* condition is achieved.

# Benefits<sup>[4]</sup>

- **Dosha Kshaya** The *sama dosha* are stagnant (*stimita* and *abaddha*) in the body. Due to starvation, these are metabolised.
- Agnisandhukshana The unprocessed materials undergo digestion and no fuel from outside is provided to the hypofunctioning jatharagni. So the agni is excited gradually.
- Vijvaratva Due to cleaning of srotomagra vatanulomana occurs and usma is restored to its normal function
- Laghuta Due to pachana of guru and pichchila
- *Kshut* Due to *pachana* of *ama*.

Langhana also create hunger reflex in the patients resulting indirectly in enhanced production of internal

corticosteroids which provide beneficial effect by reducing the inflammation.

#### Limitation

In *Nirama Avastha* this measure may increases the *vata dosha*. So *langhana* should be stopped immediately after achieving the *nirama lakshana*.

## 2. Swedana

The process, which causes perspiration, destroys stiffness, heaviness of the body and cold. [5] In ayurveda different varieties of swedana have been said viz. sagnisweda, niragnisweda, rukshasweda, snigdhasweda, of which rukshasweda has performed with baluka (Hot sand). Snigdhasweda with some oil preparation will surely aggravate the symptoms because *snigdha* is a very conducive condition for Ama. So rukshasweda has been advocated. It is beneficial because of its ushana guna that digests (pachana) the ama present in affected area and also dilates the channel. Thus obstruction of channels (srotorodha) is removed. Relief in obstruction results in perspiration. Other type of swedana, which is good in case of amavata, is internal administration of ushana jala (hot water). Ushana jala is dipana, pachana, srotoshodhana, jvaraghna, balya, ruchikara swedakara.<sup>[6]</sup>

In chronic stage of *amavata* when *rukshata* is increased, *snigdhasweda* should also be employed. *Swedana* has been specially advocated in case of *stambha*, *gaurava*, *jadya*, *sheeta*, and *shoola*, which are the predominant features of *amavata*. Among others *atapasevana*, and *ushana jala* (processed in *vataghna* dravyas) *snana* are also helpful *swedana* in *amavata*.

## 3. Tikta-Katu and Deepana Dravyas<sup>[7]</sup>

- Tikta dravyas are ama and pitta pachaka and srotomukhvishodhanam.
- Katu rasa is chedaka, margavivaraka and kapha shamaka.
- Tikta&katu rasa is laghu ushana and tikshana in properties, which are very useful for ama pachana. These are also deepana and pachana, so by means of these properties digestion of ama, restoration of agni (deepana) removal of excessive kledaka kapha and bringing of the pakva dosha to the kostha from the shakha takes place.
- Tikta rasa is vishaghna and lekhana.
- Both are *kleda* and *meda nashaka*.
- Totally they bring about deepana. Pachana. Rochana and laghuta in the body. Katu dravya like shunti, panchakola, chitraka, etc. & tikta dravya like guduchi, sudarshana etc.
- But care should be taken in monitoring the extent of vitiation of vata dosha because the tikta-katu rasa dravya increases the vata dosha. The drugs selected with tikta and katu rasa should also possess the vataghna properties "shunthi" has such properties. Because of its snigdha guna and madhura vipaka it inhibits more vitiation of vata.

#### 4. Virechana

*Virechana* is a therapy, which is indicated in *shodhana* purpose. By virtue of it the *dosha* are eliminated by *adhomarga*. [8]

It has been advocated that *dosha* remain *leena* in the *srotasa* and if *shodhana* is not performed *dosha* can aggravate again. So proper elimination of *doshas* is very essential.

After the *langhana*, *swedana*, *deepana* and *Pachana doshas* come in *nirama* state and from *shakha* to the *kostha*; so *virechana* with suitable drug should be performed.

Reasons for the administration of *virechana* are as follows:

- Production of ama is the result of involvement of *pittasthana* & *kledaka kapha*. *Virechana* removes the *kledaka kapha* from the *pitta sthana*.
- It is the most suitable therapy for the *sthanika pitta dosha*.
- Symptoms of amavata like anaha, vibandha, antrakujana and katisula are indicative of pratiloma gati of vayu. Virechana does anulomana of vata.

*Eranda taila* is the drug of choice for the purpose of *virechana* in the *amavata*. The reason behind this are.

- 1. *Eranda taila* removes the *avarana* of *vata* by *kapha*, *meda*, *rakta* & *pitta*. And also beneficial in *samsarga* of *kapha*, *meda* & *rakta* to *vata*. [9]
- 2. It is said to be best *vrishya* and *vatahara* drug. [10]
- 3. It not only performs *virechana* action but also control the *vata dosha* by its *snigdha guna*.

## 5. Snehapana

Snehapana is the process by which snigdhata; vishyandata, mriduta and kledana in body are achieved. The properties of sneha are drava, sukshama, sara, snigdha, pichhila, guru, sheet, manda and mridu snehapana is of two types achha snehapana and sidha snehapana. These can be used as per the condition (samavastha & niramavstha) and bala of the patients. Shamana or brimhana type of snehapana is indicated in nirama stage or chronic condition of the disease.

The therapeutic measures so far employed are likely to cause *rukshata* in the *dhatu* and provocation of *vata*,

which may result in further aggravation of disease process. This can be well controlled by administration of *sneha*. A medicated *sneha* processed in *ushana*, *katu*, and *tikta rasa* drugs is very effective both for *ama* and *vata*. Due to chronic nature of the disease tremendous *dhatukshaya* and weakness develops in the body. Hence *brimhana snehapana* is recommended at this stage.

Shamana snehapana-snehana has been stated to augment the agni, as it influences the digestion by softening food and stimulating the agni. Snehapana is also prescribed in case of asthi majjagata vata. As the asthi and majjadhatus are quite involved in amavata snehapana will surely help the patients. [12]

#### Limitations

- This should not be employed in case of *samavata* as *sneha* increases the condition.
- Administration of only sneha for a longer duration may once again precipitate the ama formation. So, the sneha processed with ushna, katu, etc. dravyas like pippalyadi ghrita, triushanadi ghrita, shunthyadi ghrita, lashunadi ghrita, and bhrihatsaindhavadi taila are to be advised.

## 6. Basti

The procedure of administration of medicated liquid materials through anus (*adhomarga*) is known as *basti*. In *ayurvedic* classics, *basti* is advocated as *ardha chikitsa*, which is the best procedure to control vitiated *vata dosha*. <sup>[13]</sup>

Vata is the second important pathognomic factor of amavata; so basti is very helpful in amavata. As the disease attains chronicity the vata becomes more pravriddha, basti is very useful in this stage. In amavata both anuvasana as well as asthapana (niruha) basti are recommended. Anuvasana basti removes the rukshata of the body caused by deepana and pachana measures to remove the ama and control the vata by snehana guna. It maintains the function of agni and nourishes the body.

Asthapana basti eliminates the dosha brought to the kostha by deepana and pachana. Besides these it also strengthen the local function of the kostha and remove the anaha, vibanadha etc. Chakrapani has recomended saindhavadi taila for anuvasana basti and kshara basti, vaitarana for asthapana (niruha) basti.

Pathya – Apathya<sup>[14]</sup> Pathya

Anna varga	Yava, Kulatha, Raktashali, Shayamaka, Kodrava, Purana Shashtishali,
Shaka Varga	Vastuka, Shigru, Karvelaka, Patola
Dugdha varga	Adraka Ksheer paka
Mansa Varga	Jangala Mans
Drava	Ushna Jala, Purana Madya, Gomutra, Takra & Kanji with Shunthichurana
Dravya	Katu-Tikta Dravya-, Shunthi, Bhallataka, Vridhadaruka, Varuna,
Pathya Vihara	Rukshasveda with Baluka Potali

#### Apathya

Ahara	Dadhi, Kshira, Matsya, Guda, Mansapishtaka, Viruddhahara, Sheeta Jala
Vihara	Viruddha Chesta, Snigdha Abhyanga, Purvavata, Vegarodha and Jagarana

## **CONCLUSION**

In spite of the description of the multiple drug therapy in different classics of Ayurveda potential and durable results are not found due to non-removal of the basic cause. Hence Special emphasis should be put into by the correct application of chikitsa sutra described in our classics for a holistic approach with diet, life style intervention and continuous use of drugs to have a good control of the disease and to achieve improvement in quality of life. As Amavata is one of the common debilitating disease by virtue of its chronicity and implication and ama and vata have the properties on opposite pole of each other so these things come in across while treating it, because any measure adopted will principally oppose one another. So a very careful approach can only benefit the patient. In this paper an attempt is being made to substantiate these principles scientifically.

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