

# WORLD JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.wjpmr.com

SJIF Impact Factor: 5.922

Review Article
ISSN 2455-3301
WJPMR

# ROLE OF AGADA IN DRUG DEPENDENCY - A ARTICLE REVIEW

Dr. Jitendra Kumar\*<sup>1</sup> and Dr. Santosh Kumar Vishwakarma<sup>2</sup>

P.G. Scholar<sup>1</sup>, Assistant Professor<sup>2</sup> Dept. of Agadtantra G.A.C.H Patna, Bihar, India.

\*Corresponding Author: Dr. Jitendra Kumar

P.G. Scholar Dept. of Agadtantra G.A.C.H Patna, Bihar, India.

Article Received on 07/06/2022

Article Revised on 27/06/2022

Article Accepted on 17/07/2022

#### **ABSTRACT**

A person gets dependent on medicines due to diseases and consume it every day, then it is called as Drug Dependency. It is of two types- Psychological and physical. Psychological drug dependency arises mentally and in physical the amount of drugs increases continuously and adverse effects arise in the body. Drug dependency escribes hypertension, diabetes and chronic RA diseases in which amlodipine is used extensively in hypertension. Vatsanabh and Sarpagandha are used in the form of Agada. In diabetes, metformin is used according to modernity and the use of Bhallatak in the form of Agad is beneficial. The use of steroid in RA has been going on for a long time which has a very harmful effect on the body. According to Ayurveda, Chitraka, Erenda, Vatsanabh and dushivishari agad are used in Rheumatoid arthritis which are very helpful in digestion, due to which the digestion of ama cures the disease completely. According Ayurvedic literature hypertension, diabetes and chronic Rheumatoid arthritis considered to be Yapya vyadhis. Thus, Yapya vyadhi can be cured by the use of these yogas. And there will be no toxic effects on the body.

**KEYWORD:** Hypertension, Diabetes, Rheumatoid arthritis, Vatsanabh, Bhallataka etc.

### INTRODUCTION

Drug dependence commonly called as 'Drug Addiction', is a compulsive need to use drugs in order to function normally. It occurs when a person stops using a drug and their body experiences withdrawal. Prescription medications used every day over time can also lead to dependence.

It's possible to be dependent on drugs without being addicted. Dependence can be a bodily response to a substance. This often occurs if the patient relies on medications to control a chronic medical condition. These conditions may include:

- High blood pressure
- Diabetes
- Auto immune disease
- Chronic Rheumatoid arthritis
- Bronchial asthma etc.

#### 1. High blood pressure

(a) Amlodipine drug used in Hypertension

Within any population, blood pressure values occur within a continuum, and are determined by mechanical, hormonal and environmental factors. Any definition of hypertension therefore utilizes arbitrary threshold values within this continuum. Systemic BP rises with age, and the incidence of cardiovascular disease (particularly stroke and coronary artery disease) is closely related to

average BP at all ages, even when BP readings are within the so-called 'normal range'.  $^{[1]}$ 

Amlodipine is considered a peripheral arterial vasodilator that exerts its action directly on vascular smooth muscle to lead to a reduction in peripheral vascular resistance, causing a decrease in blood pressure. It is a dihydropyridine calcium antagonist that inhibits influx of calcium ions into both vascular smooth muscle and cardiac muscle and results in reduced blood pressure. [2]

ACE inhibitors (e.g., Enalapril 20 mg daily, Ramipril 5-10 mg daily or Lisinopril 10-40 mg daily) inhibit the conversion of angiotensin I to angiotensin II and are usually well tolerated. They should be used with particular care in patient with impaired renal function or renal artery stenosis because they can reduce the filtration pressure in the glomeruli and precipitate renal failure. [3]

### Adverse drug reaction

Amlodipine: Its side effect includes flushing, palpitation and fluid retention. [4] An overdose of amlodipine could result in a high degree of peripheral vasodilatation with a possibility of reflex tachycardia. Significant and prolonged hypotension leading to shock and fatal

www.wjpmr.com | Vol 8, Issue 8, 2022. | ISO 9001:2015 Certified Journal | 190

have been reported. Carcinogenesis, mutagenesis, impairment of fertility.<sup>[5]</sup>

Adverse drug reactions of ACE inhibitors include first dose hypotension, cough, rash, hyperkalemia and renal dysfunction.[6]

### Ayurvedic view of Hypertension

The prakopa of koshthaashrit vayu is through ruksha, kashaya, katu and tikta rasa containing ahara and it is derived as *Udavarta roga*. In this, due to the prakopa of apana vayu, the channels carrying mutra, rakta, kapha, meda got the pratiloma gati and raktagata vata janya and vataprakopajanya different diseases arise. Due to which, there is aruchi and severe pain the hridaya and vasti region. After this, the passage of mutra and mala becomes difficult. [7] The vayu having pratiloma gati in *Udavarta* is treated by *Anulomana chikitsa*. [8]

# Sarpagandha or Vatsanabha agada drugs are commonly used in hypertension but should be avoided before treating the udavarta

#### (a) Sarpagandha (Rauvolfia serpentine)

Ayurvedic pharmacodynamics - Rasa-Tikta, Guna -Vipak –Katu, Doshkarma Ruksha, Virya-Ushna, Kaphavatshamak.<sup>[9]</sup>

According to Acharya Sushruta, Sarpandha is included in Ekasar Gana which is useful against visha. It is kapha and medanashak due to its kaphavatashamak guna.

# Reserpine is an effective antihypertensive major alkaloid of Sarpagandha.[10]

# (b) Vatsanabha (Aconitum ferox)

According to Rasa tarangini, Vatsanabha has been grouped under mahavisha varga.[11] It is Madhur in rasa and ruksha, tiskshna, laghu, vyavayi, vikasi in guna. It has deepana, pachana and shoolaprashmana properties and they play a major role in the treatment of udavarta.[12]

#### 2. Rheumatoid Arthritis

Rheumatoid arthritis (RA) is a chronic inflammatory disease that makes the small joints of the hands and feet painful, swollen, and stiff. It's a progressive disease that has no cure yet. Without treatment, RA can lead to joint destruction and disability.

Treatment plans usually include antirheumatic drugs combined (DMARDs) with nonsteroidal antiinflammatory drugs and low dose steroids.

Common types of steroids used for RA include:

- Prednisone
- Hydrocortisone
- Prednisolone
- Dexamethasone
- Methylprednisolone
- Triamcinolone
- Dexamethasone

www.wjpmr.com

#### Betamethasone

#### Side effects from steroid use in RA treatment include

- Weight gain
- Rounded face, also known as moon face
- High blood pressure
- Mood disruption, including depression and anxiety
- Insomnia

Adverse effects are related to dose, duration of therapy and pre-existing conditions that might be worsened by corticosteroid therapy, such as diabetes mellitus or osteoporosis. Osteoporosis is a particularly important problem because, for a given bone mineral density, the fracture risk is greater in glucocorticoid- treated patients than in post- menopausal osteoporosis.

The anti-inflammatory effects of glucocorticoids may mask signs of disease. For example, perforation of a viscus may be masked and the patient may show no febrile response to an infection. [13]

### Rheumatoid Arthritis as per Ayurvedic View

Mandagni is caused by intake of Virudhh aahar-vihar and snigdha aahar and results in the formation of ama. Due to which, ama is produced due to the prakopa of vayu and goes towards the main region of kapha, amashaya, sandhi, shir and kantha region. And by prasarana through the arteries, produces kleda in the channels of whole body. Vata and ama got the vitiates together and enter into koshtha, trika pradesh and sandhi pradesh and stiff the whole body. This is called Aamvata.[14]

Langhan, swedana and deepana chikitsa through tikta and katu aahar, snehapaan, vasti and virechan are the treatment procedures given in Aamvata. [15]

According to Sushrut samhita Chitraka and Eranda are grouped under vishghana dravya. They are useful in the treatment of aamvata. [16]

### (a) Chitrak

It is katu in rasa and laghu, ruksha, tikshna in guna. [17] It is a deepana dravya due to its ras and guna which is helpful in the digestion of ama. It is deepan, pachaka due to which it also works as shothahara and vednashamaka dravya.<sup>[18]</sup>

#### (b) Eranda

It is Madhur in rasa and snigdha, tikshna and sukshma in guna. And it is rechak due to its prabhava. Due to which it is vibandhhara and shoolahara and does shodhana of vitiated dosha.[19]

### 3. Diabetes mellitus

As per WHO, diabetes mellitus (DM) is defined as heterogeneous metabolic disorder characterized by common feature of chronic hyperglycemia with disturbance of carbohydrate, fat and protein metabolism.

It is also important to understand another related term, metabolic syndrome, consisting of a combination of metabolic abnormalities which increase the risk to develop diabetes mellitus and cardiovascular disease. Major features of metabolic syndrome are central obesity, hypertriglyceridemia, low LDL cholesterol, hyperglycemia and hypertension. [20]

Sulphonylureas are an effective therapy for lowering blood glucose and are often used as an add-on to metformin, if glycaemia is inadequately controlled on metformin alone. The main adverse effects of sulphonylureas are weight gain and hypoglycemia. [21]

### Diabetes as per Ayurvedic view

According to Ras tarangini, *Bhallataka* has been mentioned under *Upvisha* group. It is *madhur in rasa, katu, tikta, kashaya in guna and madhur in vipak.* According to Acharya Charak, it has been explained in *Shatvirechanshatashritiya adhyaya* under *Kushthaghana* and *Mutrasamgrahaniya gana.* Acharya Sushruta has been mentioned it in *Nyagrodhadi* and Mustadi gana.

In Rasayana Adhyaya of Charak Chikitsa Sthana, 11 yogas of Bhallataka like *Bhallataka taila, ghrit, yush* etc. <sup>[26]</sup> have been described and in the analogy made by Acharya, it has been described as *Kaphashamaka*. <sup>[27]</sup> According to Acharya Charak, *Trikantakadya sneha* and Bhallatakasava have been described *in Prameha Chikitsa* which is said to be very effective in *Prameha*. <sup>[28]</sup>

#### **DISCUSSION**

The use of agada yogas in drug dependency are effective. Bhallataka is *kaphashamaka* due to its ushna virya. Chitrak and Sarpagandha both are *Kaphavatashamaka* due to their *ushana*, *tikshna guna and ushna virya* respectively. Therefore, they are given in the treatment of *kaphaj prameh*, *aamvata and raktagat vata* respectively.

#### CONCLUSION

According to Ayurvedic literature, use of *agada* can be done after *Shodhan* of *visha* and *upvisha* dravya in drug dependency. *Agada* work by their *guna* and *virya* which is helpful in *samprapti vighattan* of different rogas due to which *Yapya roga* can be cured. Ayurveda need to work more by use of *Agada* to bring the different rogas in their *samyavastha*. So much research has to be done through which many *Yapya rogas* in the society can be easily cured and we can avoid the side effect of modern medicines.

### REFERENCES

- Text book Davidson's principle and practice of medicine edited by Brian R. Walker, Nicki R. Colledge, Stuart H. Ralston, Ian D. Penman in, 22<sup>nd</sup> edition, 2014; 607.
- Text book Davidson's principle and practice of medicine edited by Brian R. Walker, Nicki R.

- Colledge, Stuart H. Ralston, Ian D. Penman in, 22<sup>nd</sup> edition, 2014; 612.
- Text book Davidson's principle and practice of medicine edited by Brian R. Walker, Nicki R. Colledge, Stuart H. Ralston, Ian D. Penman in, 22<sup>nd</sup> edition, 2014; 611.
- Text book Davidson's principle and practice of medicine edited by Brian R. Walker, Nicki R. Colledge, Stuart H. Ralston, Ian D. Penman in, 22<sup>nd</sup> edition, 2014; 612,
- 5. https://www.sciencedirect.com/topics/pharmacolgy-toxicology-and-pharmaceutical-science/amlodipine
- Text book Davidson's principle and practice of medicine edited by Brian R. Walker, Nicki R. Colledge, Stuart H. Ralston, Ian D. Penman in, 22<sup>nd</sup> edition, 2014; 611.
- Madhav nidan, vol.1, 27<sup>th</sup> chapter, edited by Shri Yadunandan upadhyaya, Choukhamba bharti academy Varanasi, 531.
- 8. Agnivesha, Charak samhita 'Vidhyotini Hindi tika' edited with Pandit Kashi Nath Shastri & Dr. Gorkhnath Chaturvedi, Chaukambha Bharti Academy Varanasi-221001, Reprint year, Chikitsa sthan, 2015; 26/11.
- 9. Dravyaguna vigyan, vol.II, Acharya Priyavart sharma ;choukhamba bharti academy varanasi reprint, 2006; 37.
- Sushruta Samhita, Kaviraj Ambikadutta Shastri edited with Ayurveda tattva sandipika Chaukambha Sanskrit Sansthan publishers Reprint, shloka no. 5/84 Kalpa Sthan, 2016.
- 11. Rastrangini, edited by Pandit Kasinath Shastri, Motilal Banarsidas, 24/6-7.
- 12. Dravyaguna vigyan, vol.II, Acharya Priyavart sharma; chowkhamba bharti academy varanasi reprint, 2006; 107.
- 13. https://health/rheumatoid-arthritis/steroid-forrheumatoid-arthritis
- 14. Madav nidan, vol.1, 25<sup>th</sup> chapter, edited by Shri Yadunandan upadhyaya, Choukhamba bharti academy Varanasi, 509.
- 15. Chakradutta, edited by Dr. Indradev Tripathi, Chowkhamba Bharati Academy, Varanasi, 166.
- Sushruta Samhita, Kaviraj Ambikadutta Shastri edited with Ayurveda tattva sandipika Chaukambha Sanskrit Sansthan publishers Reprint, Sutra sthan shloka, 2016; 38/6.
- 17. Dravyaguna vigyan, vol.II, Acharya Priyavart sharma;chowkhamba bharti academy varanasi reprint, 2006; 360.
- Agnivesha, Charak samhita 'Vidhyotini Hindi tika' edited with Pandit Kashi Nath Shastri & Dr. Gorkhnath Chaturvedi, Chaukambha Bharti Academy Varanasi-221001, Reprint year, Sutra sthana, 2015; 25/40.
- 19. Dravyaguna vigyan, vol.II, Acharya Priyavart sharma chowkhamba bharti academy varanasi reprint, 2006; 60.

- 20. Textbook of pathology, Harsh Mohan 7<sup>th</sup> edition, Published by Jaypee Brothers Medical Publishers, 807,808.
- Text book Davidson's principle and practice of medicine edited by Brian R. Walker, Nicki R. Colledge, Stuart H. Ralston, Ian D. Penman in, 22<sup>nd</sup> edition, 2014; 823.
- 22. Rastrangini, edited by Pandit Kasinath Shastri, Motilal Banarsidas, 24/163-164.
- 23. Dravyaguna vigyan, vol.II, Acharya Priyavart sharma chowkhamba bharti academy Varanasi, 2006; 167.
- Agnivesha, Charak samhita 'Vidhyotini Hindi tika' edited with Pandit Kashi Nath Shastri & Dr. Gorkhnath Chaturvedi, Chaukambha Bharti Academy Varanasi-221001, Reprint year:, Sutra sthana, 2015; 4/13,33.
- Sushruta Samhita, Kaviraj Ambikadutta Shastri edited with Ayurveda tattva sandipika Chaukambha Sanskrit Sansthan publishers Reprint, Sutra sthan, 2016; 38/48; 55.
- 26. Agnivesha, Charak samhita 'Vidhyotini Hindi tika' edited with Pandit Kashi Nath Shastri & Dr. Gorkhnath Chaturvedi, Chaukambha Bharti Academy Varanasi-221001, Reprint year, Chikitsa sthana, 1st chapter/ 2nd paad sloka, 2015; 16.
- 27. Agnivesha, Charak samhita 'Vidhyotini Hindi tika' edited with Pandit Kashi Nath Shastri & Dr. Gorkhnath Chaturvedi, Chaukambha Bharti Academy Varanasi-221001, Reprint year, Chikitsa sthana, 1st chapter/ 2nd paad sloka, 2015; 19.
- 28. Agnivesha, Charak samhita 'Vidhyotini Hindi tika' edited with Pandit Kashi Nath Shastri & Dr. Gorkhnath Chaturvedi, Chaukambha Bharti Academy Varanasi-221001, Reprint year, Chikitsa sthana, 2015; 6/38.