Aamvata- A Single Case Study

Dr. Yashashri A Vitonde
Assistant Professor
Department of Kayachikitsa
CsmssAyurvedMahavidyalayaKanchanwadi, Aurangabad

Dr. A.K.Burley
Professor
Department of Kayachikitsa
CsmssAyurvedMahavidyalayaKanchanwadi, Aurangabad

Abstract:
Aamvata is acute joint disorder which is comparable to Rheumatic arthritis. The disease hampers patients routine work by severe fleeting type joint pain, swelling at joints, fever with involvement of heart. Aamvata aggravates due to Aam & Vatadosha which circulates in the body through blood vessels & goes into sheshmusthanaLike Joints, Stomach, Heart, Head etc. The aim of our treatment is to detoxify Aam by giving Langhan, dry fomentation, basti & vatashamakaushadhi. In this study a patient 44 years female diagnosed as aamvata given above said treatment & successfully get relief without remission.

Keywords: -Aamvata, guggul,Aamvat,shool ,shoth.

Introduction:
Aamvatais acute disease in which both Ama&Vata are aggrevated& affects various kaphadosha sites like joints & heart. This disease is comparable to Rheumatic arthritis. Indulgence in incompatible foods and habits, or does physical exercise after taking fatty foods & those who have poor digestive fire, even normally also, produces Ama in the body.

At the same time if the same person takes Vataprovoking diet & activities, then such Ama gets associated with vitatedAma & starts circulating in the body. This Ama spread from the heart & blood vessels & then goes at various site of kaphadosha, like Joints, Head & stomach. This causes fever, heart disorders & joint problems. This diseases starts in the stomach manifests in the joints and the heart. There is acute pain at big joints ,heaviness in the body, high fever, indigestion & edema on the body.

The pain is fleeting type as if bitten by scorpion.

The painfully swelling can be found in the joints of hands, feet, cervical region, pelvic and shoulder joint, knees & thighs. Associated symptoms like loss of energy, bad taste in mouth, polyuria, burning sensation, low functioning of digestive system, anorexia, reversal of sleep pattern, constipation, joint stiffness etc.

when the heart gets involved usually the mitral value is affected & there is either stenosis or regurgitation type deformity. when there is predominance of Pitta, there is redness and heat, whereas with the predominance of Vata, the pain is severe. If kapha is aggrevated more then there is feeling of being covered with wet clothes, heaviness and itching sensation. When one or two dosha are involved then diseases is curable but it gets incurable when all the three doshas are involved.

Hence the main treatment is to destroy Ama. For this fasting, fomentation, use of bitter & pungent herbs for detoxification of Ama. Purgation, interval oleation & giving decoction enemes should be carried out.

Castor oil is very useful because of its power of removing Ama.

Herbs of choice are Eranda, Bhallataka, Rasnaguggul, Vatsanabha, Dhatura, Sahachar, Dhashmula.
Case study: A 44 yrs female patient, working in farm (previously before 6-7 yrs) came to hospital having complaints of severe joint pain & swelling over carpal ,metacarpal joint . With history of fever & anorexia since 6 yrs in on & off pattern .Now since 1 month above symptoms gets aggrevated so harsh that she can not able to perform routine work even.

So patient was examined & diagnosed by Ayurvedic approach.

Asthavidhpariksha had been done

Patient Name : ABC 44 Yrs /Female
Hindu by religion
occupation –farmer
OPD NO - 1423
IPD NO – 1423/18
Date of admission - 3/2/2018
Chief complaints : Duration
1 Sarvangsandhishool 6 yrs
2 Parvasandhishool&shoth 1 month
3 Jwar 1 month
4 Sakashtachankramana 1 month
5 Tivrasancharivedana 1 month

On examination:-
GC – Poor , Febrile.
Temp. – 101 ° F
PR – 90/min
BP- 130/90mm Hg
CVS -S1 S2 - Normal
RS- chest clear AEBE
PA - soft non tender
CNS- conscious, well orientated
Mala -Malavashtambha
Mutra-Bahumutrata
Jivha-Saam
Netra-shwetabh, Pallor Present
Weight - 50 kg
M/H - Irregular menses
Diagnosis- aamvata (Diagnosis made clinically.)

Treatment protocol:

Treatment was conducted in following way for 1 month;
1. Aampachakvati 250mg BD with lukewarm water
2. Tribhuvankirtiras 250 mg BD with lukewarm water
3. Mahayograjguggul 250mg BDwith lukewarm water
4. Maharasnadikwath 20 ml BD with lukewarm water
5. GandharvaHaritakichurna 5 gm at night with lukewarm water
6. Punarnavamandoor 250 mg BD with lukewarm water
Above treatment was given for 1st 7 days. Patient was advised to take warm water to drink and langhanor laghuuahar to take that is mug dal + puranshalishashtik (rice) &to avoid fan& to take guru pravarana.

After 7 days i.e. afterkshudhavardhan patient had taken waluka-pottali sweda\(^9\)over inflamed joints with kalabasti of Anuvasan (Tilte) & Niruha(Dashmulakawath) for 16 days along with above medicine. Patient got relief in 10 days .patient is alsoadvised to avoid oily & spicy food & only to take kulattthyusha,Bajara Roti with 1 tea spoon of Eranda tail with garlic chutney.\(^11\)

Again for 7 days only medicine was given as follows
1. Sihnaadguggul 250 mg BD with lukewarm water
2. Tribhuvankirti 20 ml BD with lukewarm water
3. Maharasnadikwath 20 ml BD with lukewarm water
4. Dadimavaleha 10ml BD
5. Punarnavamandoor 250 mg BD with lukewarm water

Follow up was taken by 1 month & observations carried out .No new complaint raised during the follow up period related to study.

**Observation:**
In the treatment period the patient had not taken anything except these medicines. Assessment criteria were based on the cardinal symptoms which are sarvangsandhishool, shoth, Parvasandhishool, shoth, tivrasancharivedana, jwar.

<table>
<thead>
<tr>
<th>Sr.No</th>
<th>Observations</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Chief complaints</td>
<td>1st day</td>
<td>30th day</td>
</tr>
<tr>
<td>1</td>
<td>Sarvangsandhishool</td>
<td>Severe</td>
<td>Mild</td>
</tr>
<tr>
<td>2</td>
<td>Sarvangsandhishool</td>
<td>Severe</td>
<td>Absent</td>
</tr>
<tr>
<td>3</td>
<td>Parvasandhishoolshoth</td>
<td>Severe</td>
<td>Miled</td>
</tr>
<tr>
<td>4</td>
<td>Tivrasancharivedana</td>
<td>Severe</td>
<td>Absent</td>
</tr>
<tr>
<td>5</td>
<td>Jwar</td>
<td>Severe</td>
<td>Absent 98°F</td>
</tr>
</tbody>
</table>

**Discusssion:**
According to Ayurveda, Aamvata is a disorder involving aam&vata, kaphadosha, ras, rakta, asthidhatu The given treatment works to reduce aam in the body & improve the jatharagni as Well as Dhatwagni. The given treatment Were having vedanashamaka&shothagna properties.

The present research work was mainly based on the clinical assessment of the above sing & symptoms. Effect of therapy was assessed on the basis of scoring chief complaints blood routine examination (mainly Hb%, ESR) Joint examination before & after treatment.

**Conclusion:**
In this case complaints of patient are very much diminished. All the complaints like sarvangsandhishool, shoth, parvasandhishool-shoth, tivrasancharivedana&jwar are markedly diminished in the 1 month of study. In conclusion, aamvata can be controlled up to higher extent by using Ayurveda treatment regimen for long period of time & by following proper pathyaie patient should drink warm water, old rice,
Kulatthayush, errand tel in aahar as well as fasting. Basti, dry fomentation are advised regularly. In this context, it is suggested that the treatment should be continued for longer duration.

References:
1. Madhavnidan 25/1-5  
2. Madhavnidan 25/6  
3. Madhavnidan 25/7-10  
4. Yogratnakar 1-5 amavata  
5. Madhavnidan 25/12  
6. Yogratnakar 1-2 Aamvata  
7. Yogratnakar 3 Aamvata  
8. Bhavprakash 26/132-142  
9. Bhavprakash 26/15  
10. Bhavprakash 26/122  
11. Yogratnakar 1-2 Aamvatakikitsa

Bibliography:
1. Madhavnidan  
2. Yogratnakar  
3. Bhavprakash  
4. kayachikista – DrsubhashRanade&DrsunandaRanade  
5. Principles& practice of kayachikista – Dr S. Suresh Babu  
6. Introduction to kayachikista - C. Dwarakanatha  
7. Encyclopedia