Efficacy Of Ajmodadi Churna Along With Shatpushpadi Lepa In The Management Of Sandhigata Vata W.S.R Osteo-Arthritis

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Abstract


Operative Techniques Like Tibial Osteotomy, Arthroplasty, Ortho Diasis Are Quite Expensive, Also Better Results After Surgery Are Quite Uncertain & Also Follows The Complications Like Blood Loss & Infection, Deep Venous Thrombosis, Etc.

In Ayurvedic Classics, Acharyas Have Mentioned Various Shaman Procedures, Snehan, Swedan, Lepa, Bandhan, Agnikarma & Raktamokshan Are Emphasized In Ayurveda To Provide Better Relief From The Pain & Swelling To Restore The Mobility .In Sandhigata Vata, Ajamodadi Churn Along With Satpushpadi Lepa Is Effective.

Keywords: Sandhigatavata, Osteo-Arthritis, Ajamodadi Churn, Shatpushpadi Lepa.

Introduction
I Bow To The Lotus Feet Of Lord Dhanvantari Who Is The First God Worshipped By Suras & Asuras , The Healer Of Problems Of Old Age, Physical & Mental Disorders Who Is The Bestowed Of Different Oushadis.(Medicinal Herbs & Drugs)

According To Ayurved There Are Tridoshas Are Vata, Pitta & Kapha. They Protect The Body As They Are Avikrit I.E. Normal & Make It Sick Or Dead When They Get Vitiated. Though They Circulate Throughout The Body Forever, Vata Is Mainly Seated Below The Nabhi, Pitta In-Between The Nabhi And Hridhay, While Kapha Is Seated Above The Hridhay.

Sandhigata Vata Is A Condition Characterized By Sandhishoola, Shopha, Atopa& Sandhigata Laxanas. Sandigata Vata Is The Commonest Form Of Articular Disorder It Is Type Of Vata Vyadhi. Which Is Mainly Found In Vrudhaavastha All Dhatus Under Go Kshay Thus Leading To Vata Prakop.

The Incidence Of Osteoarthritis In India Is As High As 12% . The Sandhitg Vata Begin A Symptomatically In The 2nd & 3rd Decade & Extremely Common By Age 70 . 25% Female & 16% Male Have Symptomatic Osteoarthritis .


In Modern Science Treatment Have Pain Killer, Nsaid & In Ayurveda Have Snehan, Swedan, Basti, Churna, Gutika, Sthanik Lepan Have Useful Treat To Sandhidgata Vata.

Case Study - Patient Description In Historical Examination
A 60 Year Female Patient Suffering From Both Janusandhishula, Janusandhishoth,Sandivedana On Prasaran And Ankunchana. And Came To Our Kayachikitsa Opd Department At G.A.M. Patur.

Chief Complaint - Both Janusandhishula 4 Score Janusandhishoth 3 Score Sandivedana On Prasaran And Ankunchana 2 Score Vata Purna Drutisparsa 1 Score

Scoring Pattern — A) Subjective Criteria

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Severity</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sandhi Shula</td>
<td>Severe Difficulty In Walking &amp; Sitting Due To Pain</td>
<td>4</td>
</tr>
<tr>
<td>(Pain)</td>
<td>Slightly Difficulty In Walking Due To Pain</td>
<td>3</td>
</tr>
<tr>
<td>--------</td>
<td>------------------------------------------</td>
<td>---</td>
</tr>
<tr>
<td></td>
<td>Moderate Pain But No Difficulty To Walking</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Mild Pain</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>No Pain</td>
<td>0</td>
</tr>
<tr>
<td>Sandhi Vedana On Prasaran &amp; Ankuchan</td>
<td>Doesn’t Allow Passive Movement</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Present Complete Flexion</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Pain With Winching Of Face</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Pain Without Winching Of Face</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>No Pain</td>
<td>0</td>
</tr>
<tr>
<td>Vata Purna Druti Sparsha</td>
<td>On Sparsha Skin Filled With More Air</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>On Sparsha Skin Filled With Air</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>On Sparsha Skin Not Filled With Air</td>
<td>0</td>
</tr>
</tbody>
</table>

B) Objective Criteria:
- Severe Swelling: No Bony Part Are Visible With Severe Swelling | 3 |
- Moderate Swelling: Joints Parts Are Less Visible With Moderate Swelling | 2 |
- Mild Swelling: Joints Parts Are Visible With Mild Swelling | 1 |
- No Swelling: All Parts Of Joints Are Visible Clearly Without Swelling | 0 |

Overall Assesment

<table>
<thead>
<tr>
<th>Grades</th>
<th>Efficacy</th>
<th>Amount Of Relief</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Excellent</td>
<td>100% Relief In Sign And Symptoms</td>
</tr>
<tr>
<td>2</td>
<td>Marked</td>
<td>&gt;75% And 75% Relief In Sing And Symptoms</td>
</tr>
<tr>
<td>3</td>
<td>Moderate</td>
<td>&gt;25% And &lt;75% Relief In Sing And Symptoms</td>
</tr>
<tr>
<td>4</td>
<td>Mild</td>
<td>&gt;25% Relief In Sing And Symptoms</td>
</tr>
</tbody>
</table>

Investigation Of Patient -
Body Wt: 63 Kg
Hr-80, Rr- 20,Bp-130/80 Mmhg
Hb-12.7 Gm%
Tlc -7000cumm
Ra Test - Negative
Systemic Examination - Cvs-S1s2 Normal
Rs - Aebe, Clear Cns - Concious And Oriented Pallipitation - Swelling Over Both Knee Joint

Aastavidha Pariksha -
- Nadi - 78 Per Min
- Mutra- 4 To 5 Time
- Mala - Regular One Per Day
- Jivha - Sam
- Shabd - Aatur
- Sparsha - Ushnasparsh
- Dirk - Snigdh
- Aakruti - Madhyam

**Samprapti** - Nidan Sevan → Vata Dushti → Vata Prakop → Datukshaya And Kha Vaigunya In Bothjanu Sandhi (Knee Joint) → Sandhigata Vata

Tretment Schedule - Ajampodadi Churn 5 Gm Bd Along With Shatpushpadi Lepa Bd
In Duration Of 30 Day

**Discussion And Conclusion:**
Discussion Will Be Done On Basis Of Observations, Statistical Analysis Of Data And Conclusion Will Be Drawn And Will Be Presented In Final Dissertation.

**Result** — After Completion Of 1 Month Treatment
Sandhi Shool = 0
Sandhi Bhedana On Prasaran & Ankuchan = 0
Vat Purna Druti Sprasha = 0
Sandhii Shodh = 0
So Effect Of Ajamodadi Churn Along With Shatpushpadi Lepa In The Management Of Sandhigat Vata.

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