



World Journal of Pharmaceutical Science & Technology

Journal homepage: www.wjpst.com

Review Article

CHIKITSĀ SIDHANTA OF ĀMA VĀTA : A CRITICAL REVIEW

Dr. A P Nayak¹, Dr. Meenakshi Sharma², Dr. Alisha Prakash³

1. Associate professor, Dept. of Kaya Chikitsa, MSM Institute of Ayurveda ,BPSMV, Khanpur kalan
2. Assistant professor, Dept. of Rog Nidan, MSM Institute of Ayurveda ,BPSMV, Khanpur kalan
3. MD Scholar,Pt. Khushilal Sharma Ayurvedic College and Hospital , Bhopal

Address for correspondence:

Dr. Meenakshi Sharma, Assistant professor, Dept. of Rog Nidan, MSM Institute of Ayurveda ,BPSMV, Khanpur kalan

Email Id:- drmeenakshi858@gmail.com

Received: 15-11-2023, Revised: 01-12-2023, Accepted: 29-12-2023

ABSTRACT

Amavata is a chronic inflammatory autoimmune disease affecting primarily joints and peri-articular soft tissues. Its global prevalence is increasing rapidly in last decades. Treatment of *Āmavāta* is challenge due to its autoimmune nature. In clinical settings, each patient of this disease is different from the other, with respect to etiology, pathogenesis as well as clinical condition. In ayurveda many approaches are in practice to treat it but it is important to analyse the *Chikitsa Siddhant* of *Āmavāta* described by ancient scholars of Ayurveda. In this article, a review of the treatment principles of Amavata by different *Acharyas* is critically analyzed.

KEYWORDS

Āma Vāta, Deepan, Pachan, Langhana , Swedana, Chikitsā, Rheumatoid arthritis , *Āma*

INTRODUCTION

Rheumatoid arthritis is an inflammatory autoimmune disease affecting primarily joints but later on may affect multi-organ system which usually makes the person crippled and unfit for an independent life.^[1] About 60% of the patients become incompetent at work within 10 years of its onset.^[2] The term is composed of two words *Āma* and *Vāta* i.e. the condition caused by accumulation of *Āma* and *Vāta*. In terms of medicine, *Āma* refers to the events that follow and the factors that arise as a consequence of impaired function of 'Agni' whereas in literal terms, the word "*Āma*" means unripe, immature and undigested. This '*Āma*' is then dragged along by

'Vāta' to travel throughout the body and, eventually, it accumulates in the joints producing *Āmavāta*. In classics, *Shamana* and *Shodhana* therapy are advised in its management. *Samshodhana* essentially refers to bio-purification of the body aiming to cleanse the macro and micro channels of the biological system i.e. *Strotas*. Classics have described sequential employment of *Deepana*, *Pāchana*, *Shodhana* and *Shamana* therapies in the management of this disease. In present study, *Shamana* and *Shodhana Chikitsa* mentioned in *Chakradatta* and other classical texts will be analyzed.

METHODOLOGY

Review of literature suggested no clear evidence of reference of the treatment principles of *Āmavāta* in *Brihattaryee*. Though, the term *Āmavāta* hasn't been described as an independent disease in *Charak Sahmitā*; *Yogindra Nath Sen* has commented that *Prameha*, *Vāta* and *meda nāshaka* treatment can be employed in *Āmavāta*. *Chakradatta* was the pioneer to describe the *Chikitsā sutra* of *Āmavāta*.^[3] Later, *Bhāv Prakāsha* and *Yogratnākara* also supported it. The line of treatment given by *Chakradatta* is very rational and consolidated principle for the management of this disease. *Acharaya Bhāv Prakāsh* and *Yog Ratnākara* have added *Upanāh* without *Sneha* to these therapeutic procedures. Therefore following therapeutic procedures are used in treatment of *Āma Vāta* :

- ✚ Langhana
- ✚ Swedana (Ruksha – By Baluka Pottali)
- ✚ Use of Tikta, Dipana & Katu Davyas
- ✚ Virechana
- ✚ Snehapāna by Erand Sneha or External Snehana
- ✚ AnuvāsanaVasti by Saindhavādi Taila and then use of kshār-Vasti.

OBSERVATION AND RESULT

Amavata occurs due to low digestive fire that in turn produces 'Āma' leading to the obstruction of the channels and simultaneous vitiation of *Vāta* due to its independent etiological factors. *Langana* is prescribed as the prime tool to digest *Ama*.^[4] *Ruksha Swedana* (dry fomentation) is also advised for purification of obstructed channels. *Tikta-Katu rasa* drugs boost up the digestive power of the body; therefore aids in its treatment. Among purification procedures, *Virechan karma* is the most suitable therapy for pacification of *Sthanik pitta dosha*, improving *agni* and evacuation of *Ama*. After *Pachana* of *Āma*, *Snehapāna* especially with *Eranda taila* is advised. To pacify alleviated *Vata*, *Vasti* is recommended. The view of different *Acharyas* regarding the treatment principles of *Amavata* is enlisted in table 1.

Table 1: Treatment principles of *Āmavāta* according to different Acharyas

Sr. No.	Upkarmas	CD	B.P.	Y.S.	BR	BS	HS	V.M.	RR
1.	Langhana	+	+	+	+	+	-	+	+

2.	Swedana	-	+	+	+	+	-	+	+
3.	Katu Tikta Rasa	+	+	+	+	+	-	+	+
4.	Deepana	+	+	+	+	+	-	+	+
5.	Virechana	+	+	+	+	+	+	+	+
6.	Snehapāna	+	+	+	+	+	-	+	+
7.	Vasti	+	+	+	+	+	+	-	+
8.	Ruksha Sweda by Bāluka Pottali	+	+	+	+	+	-	-	+
9.	Sneharahita Upanvha	+	+	+	-	-	-	-	-
10.	Anuvāsana with Saindhavadi Taila	+	-	-	+	-	-	-	-
11.	Kshāra Vasti	+	-	-	+	-	-	-	-
12.	Pāchana	-	-	-	-	-	+	-	-
13.	Stambhana	-	-	-	-	-	+	-	-
CD- chakradutta, BP – Bhava prakash, YS- Yogendra nath sain , BR- Baisajya Ratnavali									

Pathya-pathya (wholesome and unwholesome diet)

Planning of dietetics plays an important role in classical holistic approach. The proper incorporation of diet not only prevents disease but also help in its management. In the disease like *Amavata*, where slow digestion is the main causative factor, diet may impart significant role in management of the disease. The *pathyapathya* of Amavata are enlisted in Table 2 & 3.

Table 2: Showing Pathya as per different Ancient Ayurveda Texts

Sr. No.	Name of Pathya	Charka Dutta (C.D.)	Bhav Prakash (B.P.)	Yog Ratnakar (Y.R.)	Bhaishya Ratnavali (B.R.)	Sharandhar a Sahmitā (Sh .S.)
1.	Bathuā	+	+	+	+	+
2.	Nimba Patra	+	+	+	+	+
3.	Punarnava	+	+	+	+	+
4.	Parval (Parble)	+	+	+	+	+

5.	Varaku (Brinjal)	+	+	-	+	+
6.	Karvellaka (Bitter Gourd)	+	+	+	+	+
7.	Lashuna (Garlic)	+	-	-	+	+
8.	Jau	+	+	+	+	+
9.	Kodo	+	+	+	+	+
10.	Shvli Chaval (Shāli Rice)	+	+	-	+	+
11.	Sāthe Rice Chawal	+	+	-	+	+
12.	Takra-Sanskrit Lāva Pakshi Mansa	+	+	-	+	+
13.	Kulthi Yusha	+	+	+	+	+
14.	Matar Yushu (Pea-yushu)	+	+	-	+	+
15.	Chanak Yusha	+	+	-	+	+
16.	Panchkol Sadhit Anna Peya	+	+	-	+	-
17.	Shushaka Muli Yusha	-	+	-	-	-
18.	Panch Mool Yusha	-	+	-	-	-
19.	Gokshuru	-	+	-	+	-

20.	Varuna	-	+	-	+	-
21.	Sanva	-	-	-	-	-
22.	Sahinjan	-	-	+	+	-
23.	Adrak (Ginger)	-	+	+	+	-
24.	Uāhna Jala	-	-	+	+	-
25.	Jāngal Mānsa	-	-	+	+	-
26.	Madya	-	-	-	+	-
27.	Takra	-	-	-	+	-
28.	Arand-Datrak (oil)	-	-	-	+	-
29.	Arka Patra	-	-	-	+	-
30.	Vidhāra	-	-	-	+	-
31.	Bhallātaka	-	-	-	+	-
32.	Katu-Tikt Dravya (Fruits)	-	+	-	+	-
33.	Ruksha Sweda (Bālulka)	+	-	-	+	-
34.	Langhan	-	-	-	+	-
35.	Snehapāna	-	-	-	+	-
36.	Vasti-Karma	-	-	-	+	-
37.	Bāhyāplap (ext. application)	-	-	-	+	-
38.	Virechana (Purgation)	-	-	-	+	-
39.	Payu Varti	-	-	-	+	-

40.	Cow-Urine Gomutra	-	-	-	+	-
41.	Agni-Deepak Dravya	-	-	-	+	-

Table 3: Showing Apathya as per different Ancient Ayurveda Text

S. N.	Name of Apathya	C.D.	B.P.	Y.R.	V.Ni.R.	B.R.	Sh.S.
1.	Dadhi (Curd)	+	+	+	+	+	+
2.	Matsya (Fish)	+	+	+	+	+	+
3.	Gur	+	+	+	+	+	+
4.	Ksheer	+	+	+	+	+	+
5.	Dusheet Jal (Contaminated Water)	+	-	+	+	+	+
6.	Poishāka	+	+	+	+	+	+
7.	Virudh-Bhojana	+	-	+	+	+	+
8.	Purvi-Vāyu	+	-	+	+	+	+
9.	Vegavārodha	+	-	+	+	+	+
10.	Ratri-Jāgaran	+	-	+	+	+	+
11.	Cold Water	+	-	-	-	-	+
12.	Ati Vyāvāya (Excess-Sex)	+	-	-	-	-	+
13.	Asātmya Bhojana	-	-	+	+	+	-
14.	Urad	-	+	+	+	+	-
15.	Anoop Mānsa	-	+	-	-	+	-
16.	Abhishyandi Padārtha	-	+	-	-	+	-
17.	Guru-Pichil Padārtha	-	-	+	+	+	-

18.	Vishmashana	-	-	+	+	+	-
19.	Pishtamaya Padārtha	-	+	+	+	+	-

DISCUSSION

Probable mode of actions of the interventions:-

1. Langhana

Āmavāta is considered as *Rasaja Vikāra* involving formation of *Ama*. *Langhana* is the first line of treatment advised for the management of this disease. *Ācharya Vagbhata* has described two types of *Langhana* as *Shodhana & Shamana*. *Ācharya Charaka* has described ten types of *Langhana*. *Āmavāta* is a *Rasaja vikara* originated from *Amashaya*; *Ācharya Charaka* has described *Langhana* as the mainstream treatment for the diseases involving *Rasavaha Strotas*. It help in removing the sliminess of *Ama*, purification of channels, improves digestion thus creates a hunger reflex in the patients resulting in the enhanced production of internal corticosteroid, which provides relief through the reduction of the inflammation.

2. Swedana

In *Āma Vāta*, *Saruja Sandhi Shotha* (painful inflammation of joints) and *Vrischik-dansh- vat- Vedanā* (scorpion bite like pain) is the cardinal feature and is mainly produced by the *Strotorodha* (obstruction in the body channels) at the local sites due to accumulation of *Āma*. *Swedana* (fomentation) therapy is used to clear the obstructed *Strotas* (channels) by mobilization of *Āma* from local sites. Usually, drugs used for fomentation are *Ushna, Tikshana, Snigdha, Ruksh, Drava, Sthira & Guru* properties that help in pacification of *Vāta & Kapha dosha*.

3. Ushna

This Property of *Swedana* drugs is opposite to *Sheeta guna* and predominant in *Agni mahabhuta*. This property relieves the stiffness caused by *Ama* and *Vata dosha* and promotes digestive action. In terms of Ayurveda, digestion here means the digestion of *Āma dosha*. Therefore, wherever there is dominancy of *Āma*, Fomentation is compulsory for the digestion of *Āma* residing in *Koshtha* and *Dhātus*.

4. Tikshana

Vitiation of the *doshas*; digestion of *malas* and their excretion are performed by *Tikshana* property. It normalizes the vitiated *Kapha* and *Vāta* and is also aids in purification (*Shodhana*) of the channels which is the primary requisite in *Amavata*.

5. Ruksha

The drugs possessing this quality are dominant in *Vāyu & Agni Mahabhuta*. Dry fomentation subsides *Vata* and *kapha dosha* and help in excretion of *Kleda* and digestion of *Āma*. *Ruksha Sweda* may be used in acute condition of *Amavta* where pain and swelling dominates. *Ācharyas* have especially advised *Bāluka Pottali Sweda* among all types of *Ruksha Sweda*. *Ācharya Bhavmishra* described it as *lekhana* (scraper), *Sheeta* (cold) and *Vrana-nashaka* (wound-healing). In the process of fomentation, when *Bāluka* is used after

heating, it acquires *Ushana*, *tikshana* and *ruksha* properties; therefore capable of removing the obstruction by absorption of *Āma* and *Kleda*. By the virtue of above mentioned properties swelling, pain, stiffness and inflammation symptoms get relieved. This *Bāluka sweda* can be performed for ½ to 1 hr once, twice or thrice times a day. In chronic patients gentle massage by *Vishagarbha* oil should be done, followed by dry fomentation with *Bāluka Pottali*.

6. Tikta, Katu and Deepana Drugs:-

These drugs are *Laghu* (light), *Ruksha* (dry) in properties; stimulate the digestive fire and help in *Amapachana*. Besides, these *rasa* increase the secretions of digestive juices leading to engrossment in food.

7. Virechana

Virechana dravyas are dominant in *Parthiva* and *Āpya Mahabhutas*. Because of heaviness property these drugs eliminate *Dosha* from anal route. *Virechana* aids in *Vāta dosha anulomana*. *Eranda Beeja*, having *Vibhedana* (purgative), *Srotoshodhana* (channel-cleansing), and *Anulomana*,^[5] (directing *Vata* in the right direction) actions, therefore is used for *Mriduvirechana*. *Eranda Taila* has *Vatahara*^[6] action and it is the best among the medicaments used for *Virechana* (purgative therapy).^[7] In addition to the purgative action, *Eranda* also possess anti-inflammatory, anti-oxidant and immunosuppressive action.^[8-10]

8. Snehapāna

In the treatment principles of *Āma Vāta*, *Snehapāna* is described next to *virechana*. After *Agni deepana* and *pāchana* (digestion) of *Āma Dosha*, the patient is able to digest *sneha*. A medicated *sneha* processed with *Ushna*, *katu*, *tikta rasa* is indicated as *snehapana*. By virtue of its properties (*Snigdha*, *Ushna* & *Guru*) opposite to that of *Vāta*, it helps in vitiating *Vāta* dosha. Mostly scholars have contraindicated the use of *Bāhya Sneha* but internal administration can be done. It should be kept in mind that *Snehapāna* has been indicated in the *Nirāma* state of disease.

9. Vasti

In the end of treatment principle of *Āmavāta*, *Vasti* is indicated. In Ayurvedic classics, *Vasti* is advocated as half treatment (*Ardha Chikitsā*) and the best procedure to control vitiated *Vāta*. The one which goes into the *Nābhi*, *Kati*, *Pārshava* and *Udara* (abdomen) and returns with *Doshas* is termed *Vasti*.^[11] In this process, medicated *Kwātha*, *Sneha*, *Ksheera*, *Māmsa*, *Rakta* etc. are introduced in *Pakvashaya* (intestine) through anal route. It allivates vitiated doshas specially *Vata*, improves metabolism, increases digestive fire and help in the digestion of *Āma*. This normalizes the functions of *Sāmana Vāyu* which ignites the digestive fire and removes the condition of *Agnimāndya*. In patients with chronic *Āmavāta* disease, stiffness develops in joints. *Acharya charaka* has mentioned *Vasti* in the case of pain and stiffness in joints.

Three types of *Vasti* is indicated in *Āmavāta*:-

- ❖ *Anuvāsana Vasti* with *saindhavādi taila*.
- ❖ *Vaitarana Vasti* [prepared with alkaline substances having *Pāchana* (digestive) properties.]
- ❖ *Kshāra Vasti*

CONCLUSION

Amavata is a disease caused due to vitiation of *Vata* associated with *Ama*. which get localized in the joints. Therefore, in order to dissociate the pathogenesis (Samprāpti) of *Āmavāta*, sequential employment of *Deepana*, *Pāchana*, *Shodhana* and *Shamana* therapies is must. The treatment principle of *Āmavāta* comprises of *Āma Pāchana* (by *Langana*, *Swedana*, *Pāchana* ; *Deepana* (*Agni vardhana*) , *Vāta Nirharana* (by *Virechana*, *Snehapāna* and *Basti*).The basic approach should be to support and enhance digestion (*Agni*); facilitate the digestion of *Āma* in the body and to repair damaged tissue and restore vitality (*oja*) by use of *Rasāyana* drugs like *Ashwagandha*, *Lasuna*, *Bhallatak* and *Eranda*.

REFERENCES

1. Klareskog L, Rönnelid J, Saevarsdottir S, Padyukov L, Alfredsson L. The importance of differences; On environment and its interactions with genes and immunity in the causation of rheumatoid arthritis. *J Intern Med*. 2020 May;287(5):514-533. [[PubMed](#)] [[Reference list](#)]
2. Papakonstantinou D. Work disability and rheumatoid arthritis: Predictive factors. *Work*. 2021;69(4):1293-1304. doi: 10.3233/WOR-213550. PMID: 34366311.
3. Sri chakrapanidutta, Chakradutta, Padarthabodhini Hindi Commentary, Edited by Vaidya Ravidatta Sastri, Amavatadhikar, chapter-29, page No.-116, sloka No.1-6.
4. Agnivesh, Charak, Charak Sahmitā, Charak Chandrika Hindi Byāksha, Edited by Brahmānanda Tripāthy, 5th edition, 1998, Chaukhambā Surabhārati Prakāsana, Vāranāsi, sutra sthana chapter -22 /9 page no-424. (Asthang hridaya sutra sthana chapter 14/4-6.
5. Anonymous. 1st ed. Vol. 3. New Delhi: Dept. of AYUSH, Ministry of Health and Family Welfare; 2003. *Ayurvedic Pharmacopoeia of India*; p. 52. Part 1. [[Google Scholar](#)]
6. Agnivesha, Charaka, Dridhabala. In: *Charaka Samhita – Vol. 1, Sutra Sthana Yajjapurushiya Adhyaya, 25/40*. Shastri K, editor. Varanasi: Chaukhambha Sanskrit Samsthan; 2004. p. 468. [[Google Scholar](#)]
7. Ibidem. *Charaka Samhita, Vol. 1, Sutra Sthana, Snehadhyaya, 13/12*. :256. [[Google Scholar](#)]
8. Ilavarasan R, Mallika M, Venkataraman S. Anti-inflammatory and free radical scavenging activity of *Ricinus communis* root extract. *Journal of Ethnopharmacology*. 2006;103(3):478–480. [[PubMed](#)] [[Google Scholar](#)]
9. Lee SK, Mbwambo ZH, Chung H, et al. Evaluation of the antioxidant potential of natural products. *Combinatorial Chemistry and High Throughput Screening*. 1998;1(1):35–46. [[PubMed](#)] [[Google Scholar](#)]
10. Wang HX, Ng TB. Examination of lectins, polysaccharopeptide, polysaccharide, alkaloid, coumarin and trypsin inhibitors for inhibitory activity against human immunodeficiency virus reverse transcriptase and glycohydrolases. *Planta Medica*. 2001;67(7):669–672. [[PubMed](#)] [[Google Scholar](#)]

11. Agnivesh, Charak, Charak Sahmitā, Charak Chandrika Hindi Byāksha, Edited by Brahmānanda Tripathy, 5th edition, 1998, Chaukhambā Surabhārati Prakāsana, Vāranāsi, siddhi sthana chapter -1/40 page no-971a