A Study of Shunthi-Gokshura Kwatha on Amavata

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ABSTRACT

This study is designed to evaluate the efficacy of Shunthi-Gokshura Kwatha over Amavata. This disease as a separate entity in Ayurveda came into existence in 7th cent. A.D. For the first time Madhavakara described the etiopathogenesis and symptomatology of Amavata in detail in his book Rugvinishchaya. Main cause of Amavata is formation of Ama (undigested food material) which get associated with Vata resultant origin of this disease. Amavata commonly affects the elderly people. This disease hampers not only the routine works but also the psychic of the patients.

Due to formation of Ama there is heaviness of body, poor digestion, lack of vigour, perverted taste, anorexia etc. and due to Vata there is pain in joints, disturbed sleep, constipation etc. Reason of taking this Kwatha in Amavata because Shunthi has the property of Ama-Pachana along with Vata-Shamaka simultaneously Gokshura is having property of Vatahara and pacify inflammation of joints.

Key words: Shunthi-Gokshura Kwatha, Amavata.

INTRODUCTION

The present study deals with the Amavatahara-karma of Shunthi-Gokshura Kwatha. In Ayurveda the main cause of Amavata is advocated as decreased state of digestive capacity of body. This may occur at all three level of Agni i.e. Jatharagni, Dhatvagni and Bhutagni. Incompatible diet and some psychological factors like Envy, anger, anxiety greediness etc. are responsible for vitiation of Agnis and this is considered as exogenous cause. On the other hand some endogenous cause (produced within body) may also play an important role in production of Amavata. In 25th century most of the scholars correlate the Amavata with Rheumatoid arthritis (RA). The word Rheum has different meaning in different languages the one of that applies aptly is “generalized pain”. One of such devastating disorder in which pain remains as the cardinal symptom is Rheumatoid arthritis-a-chronic, crippling, multifactorial and multi systemic disease.

MATERIAL AND METHODS

The selected patients were divided into three groups (A, B and C) having 15 patients in each. Group ‘A’ (15 in number) patients were treated with trial drug Shunthi-Gokshura Kwatha in dose of 50-100 ml B.D. Group ‘B’ patients (15 in number) were treated with analgesics / anti-inflammatory (Aceclofenac) in dose of 100 mg B.D. Group ‘C’ (15 in number) patients were treated with Shunthi-Gokshura Kwatha along with analgesics / anti-inflammatory (Aceclofenac) in dose of 50-100 ml B.D. and 100 mg B.D. respectively. The duration of treatment was fixed for three months intermediating with regular monthly follow-ups.

Subjective Parameters (Ayurvedic)

Sandhi-Saruja-Shotha (Inflammation of Joints)
0 = No pain, no swelling
1 = Mild pain+Mild swelling.
2 = Moderate pain + Moderate swelling
3 = Severe pain + Severe swelling on more than two Joints.
Vrishchika dansavata vedana (Pain like scorpion stung)
0- Absent
1- Present at one joint
2- Present at two joints
3- Present at three or more joints.

Agnimandya (Poor digestion)
0- Absent
1- Transiently present
2- Present for long period
3- Daily with associated symptoms.

Aruchi (Anorexia)
0- Absent
1- Aversion to food and appetite just less than normal
2- Aversion to food and loss of appetite
3- Aversion to food and associated with clinical features of loss of appetite.

Gaurava (Feeling of heaviness of the body)
0- Absent
1- Present for half an hour after bed rest.
2- Present for one hour after bed rest.
3- Present for more than one hour

Utsaha Hani (Lack of vigour)
0- Absent
1- Lack of interest in social interaction.
2- Lack of interest in profession.
3- Lack of interest in routine work.

Mukha Vairasya (Perverted taste)
0- Absent
1- Complained, no associated features.
2- Complained for associated features.
3- Present with associated features.

Objective Parameters
ESR, C-reactive protein, RA factor, X-ray of most affected joints

Inclusion Criteria
1- The Patients of Rheumatoid Arthritis with mild and moderate phase of Amavata were included.
2- Duration not more than 6 yrs.

Exclusion Criteria
1- The patients having longstanding disease with complications were excluded.
2- The patients having severe deformities.
3- Patients with corticosteroid dependence and with its iatrogenic complications were also excluded.

RESULTS
Trial drug Shunthi-Gokshura Kwatha is more effective in stiffness of joints ($t=6.32; p<0.001$ HS), poor digestion ($t=5.39; p<0.001$ HS), anorexia ($t=5.39; p<0.001$ HS), heaviness ($t=5.55; p<0.001$ HS), perverted taste ($t=8.88; p<0.001$ HS), where as Aceclofenac having advantage over Shunthi-Gokshura Kwatha in swelling ($t=7.64; p<0.001$ HS) and in pain ($t=7.14; p<0.001$ HS). When both the drugs used in combination patient got relief from most of the sign and symptoms.

While analyzing the age incidence it was found that most of the patients were ranging between 31-60 yrs. of age group indicating the late onset of this disease.

In this study it seems that females are more prone to this disease.

Percentage of male and female were 28.89% and 71.11% respectively and ratio is 1:2.46.

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Sign and symptoms</th>
<th>t value</th>
<th>p value (Highly Significant)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Stiffness of joints</td>
<td>6.32</td>
<td>&lt; 0.001 HS</td>
</tr>
<tr>
<td>2.</td>
<td>Poor digestion</td>
<td>5.39</td>
<td>&lt; 0.001 HS</td>
</tr>
<tr>
<td>3.</td>
<td>Anorexia</td>
<td>5.39</td>
<td>&lt; 0.001 HS</td>
</tr>
<tr>
<td>4.</td>
<td>Heaviness</td>
<td>5.55</td>
<td>&lt; 0.001 HS</td>
</tr>
<tr>
<td>5.</td>
<td>Perverted taste</td>
<td>8.88</td>
<td>&lt; 0.001 HS</td>
</tr>
<tr>
<td>6.</td>
<td>Swelling</td>
<td>7.64;</td>
<td>&lt; 0.001 HS</td>
</tr>
<tr>
<td>7.</td>
<td>Pain</td>
<td>7.14;</td>
<td>&lt; 0.001 HS</td>
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</table>
SUMMARY AND CONCLUSION

Shunthi-Gokshura Kwatha is taken as trial drug in management of Amavata. It is proved that the root cause of pathogenesis of Amavata is mandagni which causes formation of Ama and Vata causes pain and inflammation of the joints. Therefore, the first line of treatment is considered to restrict the production of Ama, liquidate already produced Ama and improve and correct the improper function of Agni and use the drug which pacifies Vata which is the main cause of pain and inflammation of the joints. These aims can be achieved by this trial drug.

Gokshura is having Madhura Rasa, Guru, Snigdha Guna, Madhura Vipaka and Shita Virya. By virtue of these properties it pacifies Vata-Pitta and also acts as Vedanasthapana, Shothahara etc.

Shunthi is having Laghu, Snigdha Guna, Katu Rasa, Madhura Vipaka and Ushna Virya. By Virtue of Ushna Virya it pacifies Kapha and Vata and also acts as Rochana, Dipana, Pachana, Shulaprashamana, Shothahara etc.

By virtue of these qualities this drug is having advantage over modern drug in stiffness of joints, anorexia, heaviness, perverted taste etc.

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