

ISSN 2456-3110 Vol 5 · Issue 6 Nov-Dec 2020

Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in

Indexed

An International Journal for Researches in Ayurveda and Allied Sciences





ORIGINAL ARTICLE Nov-Dec 2020

Comparative clinical study of Alambushadi Churna and Dwipanchmuladya Tail Basti in the management of Amavata vis-a-vis Rheumatoid Arthritis

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ABSTRACT

In Ayurvedic text book, Amavata symptom is mentioned as swelling, joint pain, numbness, appetite loss, indigestion and fever. In Charaka Samhita and Sushruta Samhita, Amavata is mentioned as a syndrome called Vatavyadhi, a diverse group of symptoms that are organized according to the systemic and local manifestations of Vata Dosha. According to the Charaka Samhita of Vatavyadhi, when Vata affects the Asthi and Majja there is painful swelling and immobility of the joints. Hence clinical study is planned to evaluate effect of Alambushadi Churna and in the Management of Amavata for that 60 Patients having classical symptomatology of Amavata have been selected from Kayachikitsa OPD and IPD of Sir Sunder Lal Hospital, Institute of Medical Sciences, Banaras Hindu University, Varanasi and divided in two groups. Results of study shows that the sign and symptoms e.g., Loss of appetite, Angamarda, Alasya etc. due to derangement of Aam are observed to be improved in by Alambushadi Churna oral dose compared to Methotrexate.

Key words: Alambushadi Churna, Dwipanchmuladya Taila Basti, Amavata, Aam, Rheumatoid Arthritis.

INTRODUCTION

Amavata is one such disease where in authors categorized the pain as Vrischikadamshavata Vedana.^[1] It is a chronic condition involving loss of mobility and enduring pain of the joints with some swelling of the synovial joints. Amavata has similarities to many arthritic diseases with specific clinical features associated with Rheumatoid Arthritis

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Submission Date: 17/11/2020 Accepted Date: 11/12/2020

Ac	cess this article online
Quick Response Code	
	Website: www.jaims.in
	DOI: 10.21760/jaims.5.6.3

(RA).^[2] Rheumatoid arthritis is a joint disorder which affects multiple joints at various sites. RA is a chronic systemic inflammatory disease. Persistent synovial inflammation often causes cartilage damage and bone erosions that badly disturbs joint integrity, as an outcome of which one third of patients suffer from working disability by five years.^[3] RA is correlated with Amavata mentioned in Ayurveda. Amavata is a particular type of disease that is mentioned in Ayurveda since the period of Madhav, under the category of Vata-Kaphaja disorder. In spite of the description of multiple drug therapy on Amavata in different classics of Ayurveda, potential and durable results are not found due to non-removal of the basic cause. Hence, special emphasis should be put into searching for a standard and suitable drug for Amavata. In Amavata, Vata is dominant Dosha and Ama is the chief pathogenic factor. Ancient Acharyas of Ayurveda has described sequential employment of Deepana, Pachana, Shodhana and Shamana therapies in the management of Amavata.^[4]

The rheumatological disorder is a group of diseases that has no specific medical management in any type of therapeutics. Anti-inflammatory, analgesic, steroids and disease modified anti rheumatic drug are required for its management which are not free from its side effect. Many Avurvedic formulations are carried to be effective in Amavata however scientific evidence need to be produced, though ample research work has been done on disease Amavata but satisfactory result has not been obtained till date. Hence to establish a firm scientific basis for classical Ayurvedic formulation is now being felt. The formulations under trial in this study, Alambushadi Churna is described in the Avurvedic Text in Chakradatta Amavataadhikara.^[5] The selected trial drug Alambusadi Churna is mentioned by Acharya Chakrapani in Chakradatta in reference to Amavata Rogadhikara. Alambushadi Churna is given by oral route. Also Matra Basti with Dwipanchmuladya Taila is described in the Ayurvedic Text in Chakradatta Niruhadhikara.^[6] In present study Basti Karma was selected as Shodhana Chikitsa. It is directly mentioned in the Chikitsa Sutra of Amavata by Chakradatta and is considered as Ardha Chikitsa in Ayurvedic texts.

Design of the study: The study is open-labelled, randomized clinical study.

AIMS AND OBJECTIVES

- To clinically assess the efficacy of Alambusadi Churna in the management Amavata vis-à-vis Rheumatoid arthritis.
- To clinically assess the efficacy of Dwipanchmuladya Tail Basti in the management of Amavata
- To compare the clinical efficacy of Interventional group and modern Control group in the management *Amavata* vis-à-vis Rheumatoid arthritis.

MATERIALS AND METHODS

Preparation of drugs

 All the crude drugs were available in pharmacy of Rasa Sastra department. All drugs were tested for their quality and authenticity. *Alambushadi Churna* was prepared following the SOP norms as follows-

 Starting from *Lajjalu*, all the drugs up to *Trivrita* in given quantity were mixed and made into fine *Churna* (powder).

SN	Name	Botanical Name	Quantity
1.	Lajjalu	Mimosa pudica	1 part
2.	Gokshur	Tribulus terrestris	2 part
3.	Amalaki	Emblica officinalis	3 part
4.	Haritki	Terminalia chebula	4 part
5.	Bibhitki	Terminalia bellirica	5 part
6.	Sunthi	Zingiber officinalis	6 part
7.	Guduchi	Tinosporacardifolia	7 part
8.	Trivrita	Operculinaturpethum	28 part

Table 1: Contents of Alambushadi Churna.

ORIGINAL ARTICLE

Preparation of Basti

Table 1: Contents of Dwipanchmuladya Tail Basti

SN	Name	Botanical name	Quantity
1.	Belmul twak	Aegle marmelos	1 part
2.	Gambharimultwak	Gmelia arborea	1 part
3.	Patalamul)	Stereospermum suaveolens	1 Pala
4.	Sonapatha	Oroxylum Indicum	1 part
5.	Arnimul	Premna mucronata	1 part
6.	Shalparni	Desmodium gangeticum	1 part
7.	Prishnaiparni	Uraria picta	1 part
8.	Chotkatari	Solanum Surattense	1 part
9.	Badikatari	Solanum Indicum	1 part

Nov-Dec 2020

10.	Gokshur	Tribulus Terrestris	1 part
11.	Tilataila	Sesame Oil	Q.S.

Method of preparation

All the crude drugs were available in pharmacy of *Rasasastra* department. All drugs were tested for their quality and authenticity. *Dwipanchmuladya Taila* was prepared according to *Ayurvedic* Classic Text Book.

Time of administration

It is a *Matra Basti* that can be given after the meals (*Bhukte Cha Api Pradiyate*).

Method of administration of Basti

Patient was advised to lie on an even *Basti* table in left lateral position with straight body and left hand kept as pillow. His right leg was folded at knee joint and made to rest flat over the left leg. Patient's anus and rubber catheter was smeared with oily substance like tail. Rubber catheter was introduced in anus by its 4-6cm part slowly. *Bastidravya* was taken in Asep to pump and forced slowly in one push then after Rubber catheter was taken out slowly.^[7]

Selection of cases

Total 60 patients of *Amavata* were randomly selected and divided in 4 groups for the present study, from the *Kayachikitsa* OPD and IPD of Sir Sunder Lal Hospital, Institute of Medical Sciences, Banaras Hindu University, Varanasi. The case selection was random regardless of age, sex, occupation and religion. Both acute and chronic phase of *Amavata* patients were taken for the study, following the criteria of the diagnosis of Rheumatoid Arthritis in Modern Medicine and the clinical features of *Amavata* described in *Madhava Nidana*.

Inclusion criteria

- Age between 20-60 years.
- Diagnosed cases of Amavata based on symptoms and signs described in Nidana and EULAR 2010.
- Sero positive and sero negative both cases are included.

- Patients with H/O 1-5 years with established
- disease.

Exclusion criteria

- Patients should not be less than 20 year and more than 60 year.
- Patients of Rheumatic Arthritis, Gouty Arthritis, Septic Arthritis, Osteoarthritis and Ankylosing Spondylitis.
- HIV, Tuberculosis, Hypertension, D.M. and other systemic problem.
- Pregnant and lactating women.

Diagnostic criteria for rheumatoid arthritis

Modern diagnosis is done by the 1987 revised criteria by American college of Rheumatology for diagnosis of Rheumatoid arthritis and Anti-CCP antibody *Ayurvedic* diagnosis of *Amavata* was made on the basis of symptom of *Amavata* described in *Ayurvedic* text book. After thoroughly studied and all the sign and symptoms has been taken into consideration. Among them all the cardinal symptoms have been analysed before and after the treatment.

Study design

Registration and allocation of 60 patients in different groups



Group A

No. of patients	Medicine	Dosage	Duration & follow up	
13	Alambushadi Churna (Orally)	5g - BD with Iukewarm	90 Days with a follow up	

	water	every 1 Month.
Group B		

No. of Medicine Dosage Duration & patients follow up 12 Matra Vasti By 60 ml/day for 90 Days with a Dwipanchmuladhy follow up 7 days a Taila every 1 Month.

Group C

No. of patients	Medicine	Dosage	Duration & follow up
13	Alambushadi Churna (Orally)	5g BD with lukewarm water	90 Days with a follow up every 1 Month.
	Matra Vasti By Dwipanchmuladhy a Taila	60 ml/day for 7 days	90 Days with a follow up every 1 Month.

Group D

No. of patients	Medicine	Dosage	Duration & follow up
13	Methotrexate Folic Acid	5 mg OD weekly 5mg OD Weekly	90 Days with a follow up every 1 Month.

Parameters for the assessment of improvement

The effect of therapeutic regimen was assessed with the help of certain parameters stating the clinical, biochemical, and immunological status of the disease. Follow up findings were compared with the initial /

OBSERVATION AND RESULTS

Table 2: Pain

basal observations and the data subjected to the suitable statistical analysis.

ORIGINAL ARTICLE

Following parameters were selected as the criteria for assessing the improvement.

- Assessment change of functional status and physiological factors of these patients before and after the treatment.
- Clinical assessment of disease severity. This is done by estimating the severity in specific symptoms of disease and joint inflammation index.
- Laboratory investigations conducted before, during follow ups and after the treatment.

Clinical assessment of Amavata

A. Assessment of functional status

- 1. Walking time
- 2. Grip power and pressing power
- 3. Foot pressure
- B. Clinical assessment of the disease

Clinical assessment of the disease, its severity, extent and grades of inflammation were objectively done in terms of pain swelling tenderness, deformity, general function capacity and stiffness of the joints.

- 1. Pain
- 2. Swelling
- 3. Stiffness
- 4. General Function Capacity
- 5. Tenderness

C. Haematological investigations - Anti CCP, EULAR and RA.

Group	Score	вт		F1		F2		AT		Within the group comparison
		No. of pt.	%	Friedman Test						
A	0	0	0.0	0	0.0	0	0.0	0	0.0	χ2=37.554
	1	0	0.0	0	0.0	0	0.0	4	30.8	p=0.000

Nov-Dec 2020

N: 24	56-3110					ORI	GINAL		.е	Nov-Dec 2020
						1	1			1
	2	0	0.0	0	0.0	6	46.2	5	38.5	
	3	5	38.5	6	46.2	7	53.8	4	30.8	
	4	8	61.5	7	53.8	0	0.0	0	0.0	
В	0	0	0.0	0	0.0	0	0.0	0	0.0	χ2=32.556
	1	0	0.0	0	0.0	0	0.0	5	41.7	p=0.000
	2	0	0.0	2	16.7	5	41.7	6	50.0	
	3	3	25.0	7	58.3	7	58.3	1	8.3	
	4	9	75.0	3	25.0	0	0.0	0	0.0	
С	0	0	0.0	0	0.0	0	0.0	5	38.5	χ2=37.331
	1	0	0.0	0	0.0	3	23.1	7	53.8	p=0.000
	2	0	0.0	4	30.8	8	61.5	1	7.7	
	3	6	46.2	8	61.5	2	15.4	0	0.0	
	4	7	53.8	1	7.7	0	0.0	0	0.00	
D	0	0	0.0	0	0.0	0	0.0	8	61.5	χ2=37.984
	1	0	0.0	0	0.0	7	53.8	5	38.5	p=0.000
	2	0	0.0	2	15.4	6	46.2	0	0.0	-
	3	6	46.2	9	69.2	0	0.0	0	0.0	-
	4	7	53.8	2	15.4	0	0.0	0	0.0	
among tl	oup comparison he groups Wallis test	χ2=1.515 P=0.679		χ2=9.981 P=0.019		χ2=21.472 P=0.000		χ2=27.265 P=0.000	1	
Kruskal V	wallis test			(S)		(HS)		(HS)		

Table 3: Swelling

Group	Score	вт		F1		F2		AT		Within the group comparison
		No. of pt.	%	Friedman Test						
A	0	0	0.00	0	0.00	0	0.00	3	23.1	χ2=35.605
	1	0	0.00	0	0.00	4	30.8	9	69.2	p=0.000
	2	4	30.8	7	53.8	9	69.2	1	7.7	

N: 2456	5-3110					ORIGINAL ARTICLE			CLE	Nov-Dec 2020	
	3	9	69.2	6	46.2	0	0.00	0	0.00		
В	0	0	0.00	0	0.00	0	0.00	1	8.3	χ2=30.810	
	1	0	0.00	0	0.00	5	41.7	8	66.7	p=0.000	
	2	3	25.0	9	75.0	7	58.3	3	25.0		
	3	9	75.0	3	25.0	0	0.00	0	0.00		
С	0	0	0.00	0	0.00	0	0.00	9	69.2	χ2 =36.378	
	1	0	0.00	0	0.00	9	69.2	4	30.8	p=0.000	
	2	5	38.5	11	84.6	4	30.8	0	0.00		
	3	8	61.5	2	15.4	0	0.00	0	0.00		
D	0	0	0.00	0	0.00	0	0.00	8	61.5	χ2=35.845	
	1	0	0.00	1	7.7	10	76.9	5	38.5	p=0.000	
	2	5	38.5	9	69.2	3	23.1	0	0.00		
	3	8	61.5	3	23.1	0	0.00	0	0.00		
Inter group among the g Kruskal Wal		χ2=0.707 P=0.872		χ2=3.478 P=0.324		χ2=7.383 P=0.61		χ2=15.605 P=0.001			

Table 4: Joint Stiffness

Group	Score	вт		F1	F1			AT		Within the group	
		No. of pt.	%	comparison Friedman Test							
A	0	0	0.00	0	0.00	0	0.00	1	7.7	χ2=34.189	
	1	0	0.00	0	0.00	5	38.5	9	69.2	p=0.000	
	2	4	30.8	9	69.2	8	61.5	3	23.1		
	3	9	69.2	4	30.8	0	0.00	0	0.00		
В	0	0	0.00	0	0.00	0	0.00	2	16.7	χ2=28.372	
	1	0	0.00	1	8.3	8	66.7	8	66.7	p=0.000	
	2	6	50.0	10	83.3	3	25.0	2	16.7		
	3	6	50.0	1	8.3	1	8.3	0	0.00		
С	0	0	0.00	0	0.00	0	0.00	5	38.5	χ2=34.902	
										p=0.000	

SN: 24	56-3110				OR	IGINA	CLE	Nov-Dec 2020		
	1	0	0.00	1	7.7	9	69.2	8	61.5	
	2	7	53.8	9	69.2	4	30.8	0	0.00	
	3	6	46.2	3	23.1	0	0.00	0	0.00	
D	0	0	0.00	0	0.00	0	0.00	5	38.5	χ2= 35.690
	1	0	0.00	1	7.7	11	84.6	8	61.5	p=0.000
	2	4	30.8	10	76.9	2	15.4	0	0.00	
	3	9	69.2	2	15.4	0	0.00	0	0.00	
	roup comparison	χ2=2.363	•	χ2=2.716	•	χ2=5.866	•	χ2=8.345	•	
_	among the groups Kruskal Wallis test			P=0.438		P=0.118		P=0.039		

Table 5: Walking Time

Group	Score	вт		F1		F2		AT		Within the group comparison	
		No. of pt.	%	No. of pt.	%	No. of pt.	%	No. of pt.	%	Friedman Test	
А	0	0	0.00	0	0.00	0	0.00	1	7.7	χ2=34.091	
	1	0	0.00	0	0.00	8	61.5	11	84.6	p=0.000	
	2	5	38.5	11	84.6	5	38.5	1	7.7		
	3	8	61.5	2	15.4	0	0.00	0	0.00		
В	0	0	0.00	0	0.00	0	0.00	4	33.3	χ2=32.774	
	1	0	0.00	0	0.00	9	75.0	8	66.7	p=0.000	
	2	6	50.0	11	91.7	3	25.0	0	0.00		
	3	6	50.0	1	8.3	0	0.00	0	0.00		
С	0	0	0.00	0	0.00	2	15.4	10	76.9	χ2=35.619	
	1	1	7.7	3	23.1	9	69.2	3	23.1	p=0.000	
	2	6	46.2	10	76.9	2	15.4	0	0.00		
	3	6	46.2	0	0.00	0	0.00	0	0.00		
D	0	0	0.00	0	0.00	0	0.00	10	76.9	χ2=36.885	
	1	0	0.00	1	7.7	11	84.6	3	23.1	p=0.000	
	2	5	38.5	11	84.6	2	15.4	0	0.00		
	3	8	61.5	1	7.7	0	0.00	0	0.00		
Inter group	nter group comparison		χ2=1.257		χ2=6.771		χ2=3.901				

ISSN: 2456-3110	ORIGINAL ARTICLE	Nov-Dec 2020

among the groups	P=0.739	P=0.80	P=0.272	P=0.000	
Kruskal Wallis test					

Table 6: Grip Power

Group	Score	BT		F1		F2		AT		Within the group comparison	
		No. of pt.	%	No. of pt.	%	No. of pt.	%	No. of pt.	%	comparison Friedman Test	
А	0	0	0.00	0	0.00	0	0.00	1	7.7	χ2=33.956	
	1	0	0.00	1	7.7	6	46.2	12	92.3	p=0.000	
	2	5	38.5	10	76.9	7	53.8	0	0.00		
	3	8	61.5	2	15.4	0	0.00	0	0.00		
В	0	0	0.00	0	0.00	0	0.00	1	8.3	χ2=31.912	
	1	0	0.00	0	0.00	8	66.7	10	83.3	p=0.000	
	2	6	50.0	11	91.7	4	33.2	1	8.3		
	3	6	50.0	1	8.3	0	0.00	0	0.00		
с	0	0	0.00	0	0.00	0	0.00	7	53.8	χ2=35.619	
	1	0	0.00	1	7.7	11	84.6	6	46.20	p=0.000	
	2	6	46.2	12	92.3	2	15.4	0	0.00		
	3	7	53.8	0	0.00	0	0.00	0	0.00		
D	0	0	0.00	0	0.00	0	0.00	7	53.8	χ2=35.542	
	1	0	0.00	2	15.4	8	61.5	6	46.2	p=0.000	
	2	5	38.5	10	76.9	5	38.5	0	0.00		
	3	8	61.5	1	7.7	0	0.000	0	0.00		
Inter group comparison among the groups Kruskal Wallis test		χ2=0.500 P=0.919	,	χ2=1.963P=(D.580	χ2=4.209 P=0.240	,	χ2=12.743 P=0.005			

Table 7: Angamarda

Group	Score	вт		F1		F2		AT		Within the group	
		No. of pt.	%	comparison Friedman Test							
A	0	0	0.0	0	0.0	0	0.0	1	7.7	χ2=33.393	
	1	0	0.00	0	0.00	8	61.5	10	76.9	p=0.000	
	2	5	38.5	11	84.6	5	38.5	2	15.4		

N: 2456-3	110		ORIG	INAL	ARTIC	LE	Nov-Dec 2020			
	3	8	61.5	2	15.4	0	0.00	0	0.00	
В	0	0	0.00	0	0.00	0	0.00	5	41.7	χ2=32.528
	1	0	0.00	1	8.3	6	50.0	7	58.3	p=0.000
	2	4	33.3	9	75.0	6	50.0	0	0.00	
	3	8	66.7	2	16.7	0	0.00	0	0.00	
С	0	0	0.00	0	0.00	0	0.00	8	61.5	χ2=35.410
	1	0	0.00	1	7.7	11	84.6	5	38.5	p=0.000
	2	6	46.2	12	92.3	2	15.4	0	0.00	
	3	7	53.8	0	0.00	0	0.00	0	0.00	
D	0	0	0.00	0	0.00	0	0.00	6	46.2	χ2=35.690
	1	0	0.00	0	0.00	9	69.2	6	46.2	p=0.000
	2	5	38.5	11	84.6	4	30.8	1	7.7	
	3	8	61.5	2	15.4	0	0.00	0	0.00	-
Inter group among the group Kruskal Wallis te		χ2=0.434 P=0.933		χ2=2.980 P=0.395		χ2=3.507 P=0.320		χ2=9.486 P=0.023		

Table 8: Aruchi

Group	Score	вт		F1		F2		AT		Within the group
		No. of pt.	%	comparison Friedman Test						
A	0	0	0.00	0	0.00	0	0.00	1	7.7	χ2=33.491
	1	0	0.00	0	0.00	4	30.8	10	76.9	p=0.000
	2	4	30.8	9	69.2	9	69.2	2	15.4	_
	3	9	69.2	4	30.8	0	0.00	0	0.00	
В	0	0	0.00	0	0.00	0	0.00	3	25.0	χ2=35.292
	1	0	0.00	0	0.00	6	50.0	6	50.0	p=0.000
	2	4	33.3	8	66.7	6	50.0	3	25.0	
	3	8	66.7	4	33.3	0	0.00	0	0.00	
с	0	0	0.00	0	0.00	0	0.00	9	69.2	χ2=36.328
_	1	0	0.00	3	23.1	8	61.5	4	30.8	p=0.000
	2	5	38.5	9	69.2	5	38.5	0	0.00	

ISS	N: 2456-31	L10					ORIGINAL ARTICLE Nov-Dec					0
r							1		1			
		3	8	61.5	1	7.7	0	0.00	0	0.00		
	D	0	0	0.00	0	0.00	0	0.00	6	46.2	χ2=35.043	
		1	0	0.00	2	15.4	7	53.8	7	53.8	p=0.000	
		2	5	38.5	10	76.9	6	46.2	0	0.00		
		3	8	61.5	1	7.7	0	0.00	0	0.00		
	Inter group	comparison	χ2=0.246		χ2=8.318		χ2=2.621		χ2=13.049			
	among the groups Kruskal Wallis test		P=0.970		P=0.040		P=0.454		P=0.005			

Table 9: Trishna

Group	Score	вт		F1		F2		AT		Within the group comparison
		No. of pt.	%	No. of pt.	%	No. of pt.	%	No. of pt.	%	Friedman Test
А	0	0	0.00	0	0.00	0	0.00	1	7.7	χ2=32.135
	1	0	0.00	0	0.00	6	46.2	10	76.9	p=0.000
	2	6	46.2	10	76.9	6	46.2	2	15.4	
	3	7	53.8	3	23.1	1	7.7	0	0.00	
В	0	0	0.00	0	0.00	0	0.00	3	25.0	χ2=32.654
	1	0	0.00	0	0.00	8	66.7	9	75.0	p=0.000
	2	4	33.3	9	75.0	4	33.3	0	0.00	
	3	8	66.7	3	25.0	0	0.00	0	0.00	
С	0	0	0.00	0	0.00	2	15.4	9	69.2	χ2=35.154
	1	0	0.00	3	23.1	8	61.5	4	30.8	p=0.000
	2	6	46.2	9	69.2	3	23.1	0	0.00	
	3	7	53.8	1	7.7	0	0.00	0	0.00	
D	0	0	0.00	0	0.00	1	7.7	8	61.5	χ2=34.342
	1	0	0.00	4	30.8	11	84.6	5	38.5	p=0.000
	2	7	53.8	8	61.5	1	7.7	0	0.00	
	3	6	46.2	1	7.7	0	0.00	0	0.00	
Inter group among the groups	comparison	χ2=1.063 P=0.786		χ2=8.029 P=0.045		χ2=8.111 P=0.044		χ2=15.054 P=0.002		

Journal of Ayurveda and Integrated Medical Sciences | Nov - Dec 2020 | Vol. 5 | Issue 6

ISSN: 2456-3110	ORIGINAL ARTICLE	Nov-Dec 2020

Kruskal Wallis test			

Table 10: Alasya

Group	Score	вт		F1		F2		АТ		Within the group
		No. of pt.	%	No. of pt.	%	No. of pt.	%	No. of pt.	%	comparison Friedman Test
A	0	0	0.00	0	0.00	0	0.00	3	23.1	t =30.961
	1	0	0.00	3	23.1	8	61.5	7	53.8	p=0.000
	2	6	46.2	8	61.8	4	30.8	3	23.1	
	3	7	53.8	2	15.4	1	7.7	0	0.00	
В	0	0	0.00	0	0.00	0	0.00	2	16.7	t =30.360
	1	0	0.00	1	8.3	5	41.7	7	58.3	p=0.000
	2	5	41.7	8	66.7	7	58.3	3	25.0	
	3	7	58.3	3	25.0	0	0.00	0	0.00	
С	0	0	0.00	0	0.00	0	0.00	9	69.2	t =35.147
	1	1	7.7	4	30.8	11	84.6	4	30.8	p=0.000
	2	4	30.8	6	46.2	2	15.4	0	0.00	
	3	8	69.2	3	23.1	0	0.00	0	0.00	
D	0	0	0.00	0	0.00	0	0.00	6	46.2	t =34.565
	1	0	0.00	2	15.4	9	69.2	6	46.2	p=0.000
	2	4	30.8	9	69.2	4	30.8	1	7.7	
	3	9	69.2	2	15.4	0	0.00	0	0.00	
Inter group comparisor among the groups Kruskal Wallis test		χ2=0.650 P=0.885		χ2=1.218 P=0.749		χ2=4.993 P=0.172		χ2=10.507 P=0.015		

Table 11: Gaurav

Group	Score	ВТ		F1 F2		AT			Within the group comparison	
		No. of pt.	%	Friedman Test						
A	0	0	0.00	0	0.00	0	0.00	0	0.00	χ2=32.215
	1	0	0.00	0	0.00	4	30.8	11	84.6	p=0.000

SN: 2456-3	3110					ORIC	GINA	ARTIC	LE	Nov-Dec 2020
	2	4	30.8	10	76.9	9	69.2	2	15.4	
	3	9	69.2	3	23.1	0	0.00	0	0.00	
В	0	0	0.00	0	0.00	0	0.00	3	25.0	χ2=30.240
	1	0	0.00	1	8.3	4	33.3	6	50.0	p=0.000
	2	4	33.3	8	66.7	8	66.7	3	25.0	
	3	8	66.7	3	25.0	0	0.00	0	0.00	
с	0	0	0.00	0	0.00	2	15.4	10	76.9	χ2=305.462
	1	0	0.00	2	15.2	9	69.2	3	23.1	p=0.000
	2	7	53.8	11	84.6	2	15.4	0	0.00	
	3	6	46.2	0		0	0.00	0	0.00	
D	0	0	0.00	0	0.00	1	7.7	6	46.2	χ2=33.956
	1	0	0.00	2	15.4	8	61.5	7	53.8	p=0.000
	2	6	46.2	10	76.9	4	30.8	0	0.00	
	3	7	53.8	1	7.7	0	0.00	0	0.00	
Inter group among the grou Kruskal Wallis te		χ2=1.844 P=0.605		χ2=5.617 P=0.132		χ2=12.070 P=0.007		χ2=17.837 P=0.000		

Table 12: Jwara

Group	Score	вт		F1		F2		AT		Within the group comparison
		No. of pt.	%	Friedman Test						
A	0	0	0.00	0	0.00	0	0.00	1	7.7	χ2=29.909
	1	0	0.00	3	23.1	6	46.2	10	76.9	P=0.000
	2	6	46.2	8	61.5	6	46.2	2	15.4	
	3	7	53.8	2	15.4	1	7.7	0	0.00	
В	0	0	0.00	0	0.00	0	0.00	3	25.0	χ2=29.722
	1	0	0.00	4	33.3	7	58.3	9	75.0	P=0.000
	2	8	66.7	8	66.7	5	41.7	0	0.00	
	3	4	33.7	0	0.00	0	0.00	0	0.00	

SN: 2	456-3	110			ORI	GINAL	ARTI	CLE	Nov-Dec 2020		
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с		0	0	0.00	1	7.7	6	46.2	9	69.2	χ2=31.660
		1	2	15.4	8	61.5	6	46.2	4	30.8	P=0.000
		2	8	61.5	4	30.8	1	7.7	0	0.00	
		3	3	23.1	0	0.00	0	0.00	0	0.00	
D		0	0	0.00	0	0.00	1	7.7	4	30.8	χ2=31.800
		1	0		5	38.5	9	69.2	9	69.2	p=0.00
		2	8	61.5	7	53.8	3	23.1	0	0.00	
		3	5	38.5	1	7.7	0	0.00	0	0.00	
Inter	group o	comparison	χ2=4.038		χ2=7.609		χ2=14.408	3	χ2=13.061		
	g the group al Wallis tes		P=.257		P=0.55		P=0.002		P=0.005		

Table 13: Apaka

Group	Score	вт		F1		F2		AT		Within the group comparison
		No. of pt.	%	Friedman Test						
A	0	0	0.00	0	0.00	0	0.00	1	7.7	χ2=30.083
	1	0	0.00	2	15.4	5	38.5	10	76.9	p=0.000
	2	6	46.2	9	69.2	8	61.5	2	15.4	
	3	7	53.8	2	15.4	0	0.00	0	0.00	
В	0	0	0.00	0	0.00	0	0.00	4	33.3	χ2=25.105
	1	1	8.3	6	50.0	8	66.7	6	50.0	p=0.000
	2	7	58.3	3	25.0	3	25.0	2	16.7	
	3	4	33.3	3	25.0	1	8.3	0	0.00	
С	0	0	0.00	1	7.7	6	46.2	10	76.9	χ2=31.088
	1	6	46.2	10	76.9	7	53.8	3	23.1	p=0.000
	2	7	53.8	2	15.4	0	0.00	0	0.00	
	3	0	0.00	0	0.00	0	0.00	0	0.00	
D	0	0	0.00	0	0.00	4	30.8	8	61.5	χ2=31.702
	1	4	30.8	10	76.9	9	69.2	5	38.5	p=0.000

N: 2456	-3110				ORIGINAL ARTICLE					Nov-Dec 2020	
	1										
	2	7	53.8	3	23.1	0	0.00	0	0.00		
	3	2	15.4	0	0.00	0	0.00	0	0.00		
Inter group		χ2=15.714		χ2=15.549		χ2=22.971		χ2=15.359			
among the gr Kruskal Wallis		P=0.001		P=0.001		P=0.000		0.002			

Table 14: Anti CCP

Group	Anti CCP Mean ± SD		Within the group comparison Wilcoxon Signed Rank test
	вт	AT	
А	76.55±160.088	70.33±146.357	Z=-2.758, P=0.006
В	74.94±163.620	49.97±93.868	Z=-2.293, P=0.022
С	131.03±140.061	87.62±98.557	Z=-3.111, P=0.002
D	52.86±13.356	26.41±7.419	Z=-3.181, P=0.001
Between the group comparison Kruskal Wallis test	χ2=15.461 P=0.001	χ2=7.303 P=0.063	

Table 15: RA test

Group	RA Mean ± SD		Within the group comparison	
	ВТ	AT	Wilcoxon Signed Rank test	
А	59.70±109.735	57.883±106.7949	Z=-1.992, P=0.046	
В	64.36±39.344	45.208±22.3579	Z=-2.347, P=0.019	
С	80.42±46.740	69.262±83.1046	Z=-2.040, P=0.041	
D	77.77±16.146	47.308±18.7189	Z=-3.184, P=0.001	
Between the group comparison	χ2=6.650	χ2=2.845		
Kruskal Wallis test	P=0.084	P=0.416		

Table 16: EULAR

Group	EULAR Mean±SD	Within the group comparison	
	вт	AT	Paired t test (BT-AT)
А	8.31±1.182	6.77±0.725	t=6.325, P=0.000

5 5	N: 2456-3110		ORIGINAL ART	ICLE Nov-	Dec 2020
	В	7.92±1.379	5.83±1.030	t=10.795, P=0.000	
	С	7.62±1.446	5.15±1.068	t=10.119, P=0.000	
	D	7.46±1.330	5.31±1.032	t=8.641, P=0.000	
	Between the group comparison	F=1.011	F=7.312		
	One way ANOVA	P=0.396	P=0.000		
	Post Hoc Test				
	A vs C		P=0.001		
	A vs D		P=0.002		

DISCUSSION

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Relief in pain may be due to Ushnavirya property of drug like Shunthi, Guduchi, Trivrit help in Ama pachan, thereby reducing pain. This may be due to decreased PGE2 release inside the joint space. Reliefin Swelling may be due to drug like Vibhitaki, Haritaki, Guduchi having Ushnavirya property, thereby reducing the swelling. This relief in swelling may be due to inhibition of IL-1, IL-6 and TNF-α. Relief in Joint stiffness occurs due to predominance of Vata Dosha. Therefore Vatahara drug like Trivit, Shunthi having Ushna property, thereby reducing joint stiffness. Morning stiffness is the common manifestation in RA. After receiving treatment by the patients there will be reduction in joint stiffness, thereby enhancing the walking time. As per Ayurvedic text, Vasti is said to be the major procedure to reduce Vata and stiffness is mainly related to Vata Dosha. That is why those patients who receive Vasti show better result. Administration of Vasti pacified Vata Dosha, thereby enhancing grip power. Ama is the causative factor of Amavata. Kaphahara property of drug like Amalaki, Vibhitaki reduces the Ama and hence get relief from Angamarda. Aruchi occurs due to vitiation of Kapha Dosha. After receiving treatment by Ushna Virya property like Shunthi, Vibhitaki produce Ruchikar effect. Relief in Trishna due to Vata Pitta Dosha. In order to reduce the Trishna drug like Lajjalu, Gokshur having Shitavirya property and Vata Pitta Shamak nature they reduces Trishana. Relief in Alasya due to Kapha Dosha. After receiving treatment by Ushnavirya

drug like Shunthi, Guduchi reduces Kapha Dosha and ultimately reduces Alasya. Gaurav occurs due to Ama Dosha. After receiving treatment by Ushna Virya drug like Shunthi, Guduchi, Trivrit reduces Ama Dosha and ultimately reduces Gaurav. There was a significant reduction in Anti CCP in both groups. It may be due to reduction in inflammation of disease. Macrophage migration inhibitory factor (MIF) and vascular endothelial growth factor, as crucial parameter of angiogenesis and inflammation, were evaluated to identify the role of cyclic citrullinated peptic antibodies (Anti ccp) during angiogenesis in rheumatoid arthritis.^[8,9] There was a significant reduction in RA factor titre in both groups. It may be due to breaking of pathogenesis of disease by Dipana and Pachana property of Alambhushadi Churna. Serum IgM RF has been found in 75-80% of patients with RA; therefore, a negative result does not exclude the presence of disease. It is also found in other connective tissue, such as primary Sjogrens systemic lupus erythematosus, Hepatitis B and C and in chronic infection.^[10] Also there was a significant reduction in EULAR in both groups. Ingredients of Alambhushadi Churna are Alambhusha (Lajjalu), Gokshur, Haritaki, Bibhitaki, Amalaki, Shunthi, Amrita, Trivrutta in the having highest concentration of *Trivrutta* with their Kapha Vata Shamaka and Virechan properties thus help in reducing the swelling in the joints. All the properties of the drugs of Alambushadi Churna, Ama and Vata Dosha is treated and thus relief in the cardinal symptoms of the disease was found. Guduchi

is also proved to have antirheumatic, antiinflammatory, and immunomodulatory properties. Sunthi is beneficial for rheumatic and musculoskeletal disorders. Provide relief from pain and swelling Shunthi with its Ushnavirya help in digestion of Ama and improve the Agni. Triphala has Rasayana, Tridoshahara and Virechana properties which helps in reducing the swelling in the joints. Trivrit is considered best among laxative drug. The laxative effect of Trivrit is mainly due to the presence of turpentine. Gokshuru with its diuretic property help in reducing the swelling of joints. Also it is Vata and Kapha Shamaka.^[11]. Dwipanchmuladya Taila Matra Basti is the type of Sneha Basti described in Bhav Prakash Amavata Chikitsa. As a whole the qualities of Matra Basti can be considered as Laghu, Snigdha, Ushna, Tikshna. Majority of the drugs are having Vata-Kapha Shamaka action. Owing to this property, antagonism to Kapha and Ama the Basti help in significant improvement in sign and symptom of disease.

CONCLUSION

Disease Amavata can be correlated to Rheumatoid Arthritis, which is one among the chronic destructive polyarthritic systemic disease. The exact aetiology of the disease remains unknown, but the pathognomic Nidana like Ama is believed to be acts as autoantigen, which triggers the immunological reaction in genetically susceptible individuals. The sign and symptoms e.g., Loss of appetite, Angamarda, Alasya etc. due to derangement of Aam are observed to be improved in by Alambushadi Churna oral & Matravasti regime as compared to Methotrexate. There was neither any side effect produced nor any side effect observed during the trial drug therapy. We have observed that in group C oral intake of Alambushadi Churna and Matravasti by Dwipanchmuladhya Taila is effective in treating all the sign and symptoms and other associated Lakshanas of the disease.

ORIGINAL ARTICLE Nov-Dec 2020

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How to cite this article: Sunil Kumar, J.P. Singh, Prof. O.P. Singh, Mukesh Kumar. Comparative clinical study of Alambushadi Churna and Dwipanchmuladya Tail Basti in the management of Amavata vis-a–vis Rheumatoid Arthritis. J Ayurveda Integr Med Sci 2020;6:20-35.

http://dx.doi.org/10.21760/jaims.5.6.3

Source of Support: Nil, Conflict of Interest: None declared.

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