

A CONCEPTUAL STUDY ON AMAVATA

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ABSTRACT

Aamvata is a disease caused due to the vitiation of *Vata* associated with *ama*. Vitiated *Vata* circulate the *ama* all over the body through *Dhamanies* and get deposited in the *Kapha Sthana* (*Amashya*, *Sandhi* etc.) producing symptoms like stiffness, swelling and tenderness in multiple small and big joints. In present study *Amavata Nidana*, *Samprapti*, classification is described. Treatment of *Amavata* comprise of *Langhana*, *Ruksha Swedana*, *Dipana*, *Virecana*, *Snehapana*, *Basti*. The *Pathyas* mentioned for *Amavata* includes *Purana Sali*, *Patola*, *Karavellaka*, *Sigru*, *Lasuna* and *Adraka* etc.

KEYWORDS: *Aamvata*, *Vata*, *Ama*, *Samprapti*, *Nidan* etc.

AMAVATA

INTRODUCTION

Madhavkara, the author of *Rukviniscaya* was first to describe it as a separate disease. He described it in detail including its etiology, pathogenesis, signs and symptoms and prognosis. *Cakrapani* in 11th Century in his text *Cakradatta* for the first time gave the line of treatment for *amavata* along with many combinations of drugs. The word *amavata* is also mentioned in *ciktsasthana* of *Caraka Samhita*. But no description of *amavata* as disease is available. Various books of mediveal period like *Yogaratanakar*, *Bhaisajya Ratnavali* etc. have also prescribed some more combination of drugs. In *Bhavaprakasa Samhita* also detail description of *amavata* is available including the line of treatment.

In modern era, *Acarya Gananath Sen* has termed *amavata* as *Rasavata* and many other Scientists have equated it with rheumatoid arthritis.

Etymology of *Amavata*

'*Amavata*' word consists of two words viz *ama* and *vata*. Undigested food & Improper digestion causes *ama* and along with *vata* it produces well known disease i.e. *amavata*.

Vitiated *ama* and *vata* when get seated in *Trika* and *Sandhi* cause *stabdhata* in whole body, the condition is called as *amavata*.

Nidana of Amavata

The specific aetiological factors mentioned by *Acarya Madhava* are as follows:

Acarya Madhava has divided the *nidanas* into two broad categories viz.

Aharaja and *viharaja*. These *nidans* act in four basic ways to produce a disease.

These are by *dosa prakopa*, by *agnidusti*, by producing *khavaigunya* and by producing *daurbalya* in *dusyas*. Here also the *nidanas* act in the same way. This can be seen by considering each *nidana* separately.

(1) *Viruddhahara* - Many *aharaja nidanas* are mentioned in classics which can be summed under one heading *viruddhahara*. So this makes *viruddhahara* a very important *nidana* for many diseases. *Acarya Caraka* has described eighteen types of *viruddhahara* in Ca.Sa. Su. 26/86-87. Indulgence in any of these *viruddhahara* leads to provocation of *tridosas*, causing vitiation of *agni* which leads to production of *ama*. Although all the three *dosas* are vitiated by intake of *viruddhahara* but involvement of other *vata* vitiating *nidanas* causes the predominance of *vataprakopa*, amongst the three vitiated *dosas*. This excessively vitiated *vata* when gets accompanied with *ama* eventually causes *amavata*.

(2) *Viruddha Cesta* - This group of *nidanas* refers to the *Viharaja* causes responsible in the *samprapti* of *amavata*. *Viruddhacesta* indicates all those activities of the body which have an adverse effect on the normal physiology of body. Thus when normal physiology of body is disturbed the vitiation of *agni* takes place. This vitiated *agni* leads to the production of *ama*. *Viruddha cesta* also causes vitiation of *vata*. Both factors when combined, produce *amavata*.

(3) *Mandagni* - Some persons have inherent *mandagni* because of their specific *prakrti*. Such type of persons, if without considering their *agni*, take other *nidanas*, then they are more prone to get affected from diseases of *ama*, as *ama* production takes place very quickly in them. Therefore *mandagni* has been mentioned separately in *nidanas* of *amavata*.

(4) *Niscalasya* - This word denotes persons who are lazy and less active by their nature. In such persons continuous consumption of nutritious or even normal diet produces accumulation of *kapha* dominant *dhatu*s. Also due to sedentary habits, *agni* gets vitiated which in turn leads to vitiation of *dosas* and production of *ama*. Here again *vata dosa* if vitiated more due to other *nidanas*, it along with *ama* causes pathogenesis of *amavata*.

(5) *Snigdhabhuktavato Vyayama - Snigdha ahara*, which is also *guru*, causes vitiation of *agni* in the body and production of *ama*. Whereas *vyayama* just after *snigdhabhोजना* causes vitiation of *vayu* and also *khavaigunya* in *sandhis*. During *vyayama* there is excessive mobilisation of *sandhis*. This over use of *sandhis* causes *khavaigunya* within them. Thus *vyayama* acts as *khavaigunya* producing *nidana* and combination of it with *snigdhabhोजना* makes a specific *nidana* for *amavata*.

SAMPRAPTI

First *viruddhahara* cause vitiation of *agni* and *tridosas*. The vitiation of *agni* causes the production of *ama* and the *caya* of vitiated *tridosa* and *ama* takes place at *slesmsthana* i.e. at *amasya*. Now further *sevana* of *vata* vitiating *nidanas* like *ativyayama* etc. cause excessive vitiation of *vata* directly producing *dosa*-vitiating. This is the stage of *prakopa*. This excessively vitiated *vata* now along with *ama* goes into circulation or *prasaravastha*. Till here the *samprapti* process denotes the common *samprapti* for all *amajavyadhis*. From here onwards the production of particular disease depends upon the rest of specific *nidanas*. In case of *amavata* *avyayama* and *ativyayama* are two *nidanas*, though opposite to each other, work on the same site (i.e. at *sandhis*) to produce *khavaigunya* in them. From *ativyayama*, due to the excessive use of *sandhis* and in *avyayama* hypofunction of *sandhis* produce *khavaigunya*. Also due to both conditions *dusyas* like *mamsa*, *dhamnis* become weak. Therefore these *nidanas* act as *dusya daurbalyakara* and *khavaigunya* producing *nidanas*. So the *khavaigunya* is produced in *sandhis* and now the *ama* which is circulating with excessively vitiated *vata* simultaneously gets accumulated in *sandhis*. *Sandhis* are physiological site of *kapha*. *Ama* has properties like *kapha* and hence it accumulates here. *Vata* acts as *avaraka* and blocks *srotasas*. Hence *sotha* and pain occurs in *sandhis*. Thus finally it produces *amavata*.

CLASSIFICATION

According to Dosa

1. *Vatapradhana* 2. *Pittapradhana* 3. *Kaphapradhana* 4. *Vata-Pitta Pradhana*

5. *Vatakaphapradhana* 6. *Pittakapha Pradhana* 7. *Sannipatika*

According to Severity

1. *Samanya Amavata* 2. *Pravrddha Amavata*

According to *Harita Samhita*

1. *Vistambhiamavata* 2. *Gulmiamavata* 3. *Snehamavata* 4. *Sarvangiamavata*
5. *Pakvaamavata*.

SYMPTOMS

Samanya symptoms of amavata

Samanya symptoms of *amavata* are described as, *angamarda*, *aruci*, *trsna*, *alasya*, *gauravam*, *jwara*, *apaka*, *sunatanganam*. All these symptoms are produced due to prevalence of *ama* in the body.

Symptoms of *Pravrddha Amavata*

Pain and swelling in joints of hands, legs, head etc., *vrscikdansavat* pain wherever *ama* reaches, *agnimandya*, *aruci*, *gaurava*, *utsahahani*, *vairasyata*, *daha*, *bahumutrata*, *kuksikathinta*, *sula*, *Nidraviparya*, *cardi*, *bhrama*, *murcha*, *hrdgraha*, *vidavibadham*, *jada*, *antrakunjanam*, *anaha* etc. are the symptoms found in severe cases of *amavata*.

Symptoms according to *dosanubandha*

- (1) *Vatanubandha* - *Sasolam*
- (2) *Pittanubandha* - *Sadaha*, *Saraga*
- (3) *Kaphanubandha* - *Stimitatam*, *Guru*, *Kandu*

UPADRAVA

Angavaikalya (*Harita*), *khanja*, *sankoca* (*Vijayaraksita*), diseases explained under *vatavyadhis* if occur in *amavata* patients and the symptoms manifested in advanced stage of *amavata* (*Vacaspati*) are said to be *upadravas* of *amavata*.

UPASAYA - ANUPASAYA

The measures which alleviate the symptoms of *ama* and *vata* such as *usna*, *tikta-katu rasas*, *deepana*, *laghuahara* and *usnavihara*, *pathyahara* etc. are *upasaya* and *sita*, *guru*, *snigdha ahara*, *sitakala*, *varsakala* etc. cause aggravation of symptoms and hence are *anupsaya* for *amavata*.

SADHYASADHYATA

Amavata is mainly the disease of *madhyama roga marga*. When the disease is *ek-dosaja*, produced by limited number of *hetus*, with few signs and symptoms and of recent origin, it is considered as *sadhya*. When it is *dvidosaja*, having many causative factors signs and symptoms and chronic, it becomes *yapya*. *Sannipatika amavata* with generalised oedema (*sarvangasotha*) is known as *krchsadhya*.

CIKITSA SIDDHANTA

Acarya Cakrapani was the pioneer in describing the principles of treatment of *Amavata* which are *Langhana*, *Swedana*, drugs having *tiktakatu* rasa and *Dipana* property, *virecana*, *snehapana* and *Basti*. In *Yogaratanakar* similar description regarding the etiology and principles of treatment is available. In addition to *ruksha sweda* like *Valuka pottali* and *upanaha* have been mentioned for the management of *Amavata*. In *Yogaratanakar* and *Cakradatta* a lot of recipes in the form of *Kvatha*, *curna* and *lepana* have been enumerated. *Acarya Bhavamisra* also followed the same steps in this aspects.

Langhana

Langhana is the first and must measure that has been advised for *Amavata cikitsa*. *Agnimandya* and *ama* are the chief initiating factors of *Amavata* which are best conquered by *langhana*. (Ca. Vi 2/13, Su. U. 39/101). Further *Amavata* is considered as an *amasayottha Vyadhi* and *langhana* is the first line of treatment in such conditions.

Swedana

In the management of *Amavata*, *Ruksha sweda* has been advocated mostly in the form of *valuka pottali* due to its *amapacana*, *Kaphahara*, *Sosana* etc. properties. Moreover *upanaha sweda* without *sneha* is also prescribed in *Amavata* by *Bhavaprakasha* and *Yogaratanakar*. But in the chronic stage of the disease when *ruksata* takes place due to *vatavrddhi*, *snigdha sweda* should be employed as it is *Mardavakara* and *Balakara*.

Tikta-katu and Dipana drugs

Tikata and katu rasa have got the antagonistic properties that of *ama* and *kapha*. Because of their *Agni Vardhaka* property, they increase digestive power which digests *amarasa* and reduces the excessive production of *kapha* and also removes the obstruction of channels. *Dipana* drugs act through the same mechanism. These all properties also help in

transportation of the dosas from sakhās to kōṣṭhā and thus help in the samprapti vighātana process.

Virecana

In Amavata the procedure of virecana is specially adopted to expel out the Ama and Kapha obstructed in the Rasavaha Srotasa. The virecana drugs which are comparatively higher in concentration than that of ama attract it into the kōṣṭhā and from there it is expelled out. The reopening of rasavaha srotas establishes the proper nutrition of consecutive dhatus. The agni becomes sharp and helps in digestion of amarasa.

Snehapana

Snehapana has been indicated in the nirama stage of the disease. The therapeutic measures employed so far are likely to produce ruksata in the tissues of the patient which may provoke the vatadosa and further aggravate the disease process. This is best prevented by snehapana. Moreover samana sneha has been stated to augment the agni (Ca. Ci. 15/201) as it influences the digestion by softening the food and stimulating the agni which is the primary requirement in Amavata. It also pacifies the vitiated vata.

Basti

In Amavata both Anuvasana as well as Niruha basti have been advocated. The Niruha basti eliminates dosa from the body brought into the kōṣṭhā by the langhana and allied therapies. In addition to generalized effects Basti produces local beneficial effects also by removing the anaha, antrakujana, vibandha etc. Anuvasana Basti removes the 'ruksata' of the body caused by the amahara cikitsa. In nut shell, sequential employment of Dipana, Amapacana, Sodhana and Samana therapies constitute the holistic approach in the treatment of Amavata.

PATHYAPATHYA

The pathyas mentioned in Yoga Ratnakava and Bhaisajyaratnavali for Amavata can be classified and listed as under.

Pathya

Anna varga: Purana sali, purana sastikasali yava, pancakola siddha anupana

Saka varga: Patola, Karavellaka, Sigru, Varuna goksura, nimbi patra.

Kanda varga: Lasuna and Adraka

Mamsa varga: Takra siddha lava mamsa, jangala mamsa

Jala varga: Usna jala

Mutra varga: Gomutra

Ksira varga: Takra and Mastu

Madya varga: Purana madya

Apathya

Annavarga: Masa

Saka varga: Upodika

Mamsa varga: Anupa mamsa, matsya

Taila varga: Tila taila

Jala varga: Dusta jala, sita jala

Ksira varga: Dadhi

Anyā: Viruddhahara, Vegavidharana, Visamasana etc.

In general it can be said that any drug or diet that is katu, Tikta by rasa, usna by guna and having Vatahara Kaphahara and amapacana in action can be considered as pathya for Amavata. The drugs and diet that possess Madhura and amla rasa, guru, picchila, Atisnigdha Sita and abhisyandi guna and which causes provocation of vata, kapha and formation of ama are apathya for Amavata.

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