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An Ayurvedic prospective of *Sandhigatvata* and its Management

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ABSTRACT:

Sandhigatvata is one type of vat-vyadhi and it is a degenerative joint disorder. The disease's effects lead to deformity in the joints, particularly weight-bearing joints like the knee joints, as well as loss of function. Given that Sandhigata Vata is one of the Vata Vyadhis, those who practice Vatakara Ahara and Vihara are more susceptible to developing this condition. The present period, which is characterized by sedentary work, air-conditioned environments, a lack of a proper, healthy food, travel, and other factors, contributes to this disease, which is likely to be becoming worse every day. The term "vatvyadhi" is used to denote all osteoarthritis conditions in Ayurveda. Panchkarma therapies, such as Snehana (oil therapy), Swedana (fomentation), Basti Karma (administering therapeutic oil via the anal canal), and Nasya Karma (infusing medicated oil into both nostrils).

Keywords: *Sandhigatavata, Osteoporosis, Osteoarthritis Vata Vyadhi, Snehana, Swedana, Basti Shoola, etc.*

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Introduction:

Ayurveda Review: All Acharya refer to Sandhigatavata under Vatavyadhi. Acharya Charaka made reference to Nanatmaja Vyadhi of Vata, Pitta, and Kapha, but only Vatavyadhi has been given its own chapter. Vatavyadhias was referred to as "Maharoga" by Acharya Vagbhatta. As Vata predominates in the activity and is considered to be the leader of the other two Doshas, this demonstrates the importance the Acharya gave to Vata.

Sandhigatavata vis-a-vis

Osteoarthritis: From the period of Charaka onwards, the disease Sandhigatavata has been identified as a separate clinical entity. Acharya Charaka has described the disease first separately by the name of 'Sandhigata Anila' under the chapter of Vata Vyadhi. Acharya Charaka defined it as a disease, with the symptoms of Sotha, which is palpable as air filled bag (Vata Purna Driti Sparsha) and Pain on flexion and extension of the joints (Akunchana Prasarane Vedana)¹. Charaka has not included this disease in 80 types of Nanatmaja Vatavyadhi. However, a disease Vatakhuddata has been mentioned by Charaka in Nanatmaja Vatavyadhi, which is considered as Gulphavata or Sandhigatavata by Acharya Chakrapani.² Acharya Sushruta has described Pain (Shula), Swelling (Shotha) and Diminution of the movements at the joints involved (Hanti Sandhigatah) as symptoms of

Sandhigatavata³ Acharya Sushruta has mentioned another disease called Vatakantaka, which occurs due to the vitiated Vata by involving Khadu Sandhi. According to Dalhana and Gayadas⁴, Khadu means Padajangha Sandhi (Ankle Joint). The other view has been quoted according to which Khadu may be taken as Parshni (Calcaneum).

Acharya Vagbhatta and other Acharya have mentioned the disease Sandhigatavata as per description of Charaka and Sushruta. Acharya Madhavakara has mentioned the symptoms Hanti Sandhigatah and Shula, same as mentioned by Acharya Sushruta. But instead of shotha, he has quoted the symptom 'Atopa' which may be taken equivalent to air-filled bag.⁵ In this way, the disease Sandhigatavata can be described as a sickness of the Sandhi (Joint) with symptoms of Akunchana Prasarana Pravritti Svedana, Sandhishula, and Sandhishotha, and in the later stages, Hanti Sandhigatah. Osteoarthritis is the term used by allopathic medicine to describe a comparable joint ailment. A degenerative joint illness called osteoarthritis manifests as joint pain, joint swelling, restricted and painful joint movement, and joint instability. It is a disorder that slowly worsens over time and typically strikes people after the age of 40. Because of these similarities, osteoarthritis and

sandhigatavata might be considered to have similar illness conditions.

Definition of Sandhi⁶

Bhaskar Govind Ghanekar - the Commentator of Sushruta Samhita has explained that where two or more objects articulate with each other in the body it is called the 'Sandhi'. Commentator Dalhana has explained that the Sandhi means 'Shariram Asthi Samyog Sthana.' Vachaspatyam compiled 16 meanings of Sandhi used in different aspects. All the meaning conveys the same feature i.e., joint. Although Peshi Sandhi, Snayu Sandhi, Shira Sandhi, and other varieties of Sandhi have all been discussed by Acharya Sushruta, we are only concerned with Asthi Sandhi in this context. Asthi Sandhi is the source of Majjavaha Srotas, according to Acharya Charaka, who said this in Vimana Sthana. The meeting points of two or more bones, known as joints or sandhis, are what allow the skeletal system's muscles to move.

Synonyms of Sandhigatavata: No synonym of Sandhigatavata is given in Ayurvedic classics. However, the probable synonyms of Sandhigatavata used in the contexts or considered by the commentator's equivalent to Sandhigatavata are as follows.

- Sandhigata Anila (Charaka)
- Sandhivata (Bhava Prakash)
- Khuddavata (Charaka)
- Vata Khuddata (Charaka)
- Gulpha Vata (Chakrapani)
- Vata Kantaka (Sushruta)

Classification of Sandhigatava

No reference is available for the classification of Sandhigatavata. Vata Prakopa can occur either of three causes.

1. Dhatukshyajanya Vata Prakopa
2. Svanidana Sevanajanya Vata Prakopa
3. Avaranjanya Vata Prakopa

As Sandhigatavata is a Vatavyadhi, it mainly occurs due to Prakopa of Vata and so it can be classified in three types as below.

1. Dhatukshyajanya
2. Vataprakopaka Nidana Sevanajanya
3. Avaranjanya
 - Sandhigatavata can be classified according to its Nidana – Nija and Agantuja
 - 1. Nija Sandhigatavata
 - 2. Agantuja Sandhigatavata.

Nidana Panchaka of Sandhigatavata: The knowledge of disease is obtained by the study of Nidana, Purvarupa, Rupa, Upashaya, Samprapti which are termed as Nidana Panchaka.

Hetu: In classics no specific Nidana has been mentioned for Sandhigatavata. As Sandhigatavata is a Vatavyadhi, general Hetu of Vatavyadhi can be taken as Hetu of Sandhigatavata. Commentator Chakrapani has said that specificity of Nidana produces affinity of Vata towards vitiation of particular sthana. Also, Acharya Charaka has stated that provoked Dosha due to specific Nidana, vitiates specific Dushya and generates innumerable varieties of disorders.

Common Hetus of Vatavyadhi:

It is mentioned by Acharya Charaka as below.

Aharaja: Atiruksha, AtiShita, Atialpa,

Atilaghu, Abhojan

Viharaja: Atiprajagaran, Divasvapna, Ativyavaya, Vegasandharan, Plavana, Atiadhva, Ativyayam, Vichesta, Sigrayangamana, Yanavatansana.

Manas: Atichinta, Atishoka, Atikrodha, Atibhaya.

Others: Langan, Amad, Vishamad Upacharad, Dhatunam Sankshyad, Doshashruk Sravanad, Rogatkarshanad, Marmaghat

How these Nidans are responsible for the production of Sandhigatavata. We can understand it as below;

Overindulgence in Ruksha, Laghu, Alpa etc. diet aggravates Vata. The chief qualities of Vata are Ruksha, Laghu, Khara, Vishada, Sukshma. These are exactly opposite to the qualities of Sleshaka Kapha present in Sandhi and Majja Dhatu situated in Asthi. When provoked Vata gets localized in Sandhi, it overpowers and undoes all qualities of Kapha and Majja which lead to Sandhigatavata.

- Atichesta, Ativyayama, Abhighata, Apatansana etc. Viharaja Hetu cause Vata Prakopa and Khavaigunya in Sandhi.
- Atibhaya, Atichinta etc. causes Agnimandhya, Vata Prakopa and Dhatukshya.
- Vegavarodha and Vegodirana are the chief Nidana for all diseases. Especially Malavegadarana or Udirana produces vitiation of Purishadharakala i.e., Asthidharakala.

Purvarupa⁷

Purvarupa predicts illnesses that will develop in the future. In the Sthanasanshraya stage of Satkriyakala, it takes place. No definite Purvarupa of the illness Sandhigatavata is referenced in the classics, similar to Hetus. So, it is possible to consider Purvarupa of Vatavyadhi to be Purvarupa of Sandhigatavata. According to a quotation from Acharya Charaka, Vatavyadhi's Avyakta Lakshanas should be regarded as its Purvarupa. The term "Avyakta" is defined by commentator Vijayarakshita as symptoms that do not reveal themselves clearly. Therefore, minor sporadic Sandhi Shula or Shotha may be administered as Purvarupa prior to the onset of sickness.

Rupa⁸

Rupa encompasses the signs and symptoms of a manifested disease. For a precise diagnosis, Rupa must be thoroughly understood. After Sthanasamsraya, the fifth stage, or Vyakti Avastha, is Rupa. Shula is the primary sign of Prakupita Vata, according to Sandhi Shula. It is claimed that Shula cannot happen without Vata. Shula is unavoidably present in disorders where Vata predominates. When Vata is located in Sandhi, Sandhi Shula results.

1. **Sandhi Shotha:** The primary cause of Sotha is Dosha Sanchaya at a specific location. Prakupita Vata is ensconced in

Sandhigatavata where Srotoriktata already resides. Vata has a lot of potential to build up there and cause Sotha. Acharya Charaka has described the Vatapurna Druti Sparsha form of Sotha in this place. As a Vatic type, Sotha's swelling feels like a sack full with air when touched. Acharya Madhavakara has given the animal a new name, which is Atopa (Vatapurna Druti Sparsha).

2. Hanti Sandhi Gatah: First Sushruta explains this symptom followed by Madhavakar while commenting on this word, Dalhana and Gayadas explain it as inability to flexion and extension. However, this symptom may not to be seen in early stages. When the disease aggravates the vitiated Vata may produce inability of movements. In Madhukosha Commentary, Commentator Vijayarakshita has given two meanings of Hanti Sandhigata. One is Sandhivishlesha and the other is Sthambha. Here, Sandhivishlesha occurs due to Prakupita Vata located in Sandhi.

Sthambha means immobility as defined by Dalhana. Arundatta explained stambha as less or loss of flexion and other movements. Gati is unique feature of Vata and in Sandhigatavata, this Gati is obstructed because of Sanga type of Srotodusti. This gives rise to Sthambha. Vata also increased Shita guna of Vata is responsible for sthambha.

3. Akunchan Prasarana Vedana: It is a symptom that Acharya Charaka

displayed. Sandhi is designed to fulfill Akunchana and Prasarana's roles. When Prakupita Vata enters Sandhi, it interferes with Sandhi's regular operation and causes vedana during Akunchana and Prasarana.

Sandhisphutana: Our classic literature doesn't specifically discuss this symptom. It is referred to specifically as Sandhisphutana, or crepitation, in allopathic books. When Prakupita Vata affects Sandhi, it is called Sandhigatavata, or localized Vatavyadhi. Due to the presence of Srotoriktata at Sandhi, this Sthana Sansraya was produced. This condition could be brought on by Vatasanga in Sandhi.

Samprapti:⁹

The way in which the Dosha gets Vitiated and the course it follows for the manifestation of disease is called Samprapti. A proper understanding of samprapti is vital for the treatment since Chikitsa is illustrated in the Ayurvedic text is nothing but 'Samprapti Vighatana'. No specific Samprapti has been explained for Sandhigatavata. So, it can be said that Samprapti of Sandhigatavata is same as that of general Samprapti of Vatavyadhi.¹⁰ Acharya Charaka has mentioned that Nidana Sevana aggravates Vata and this Prakupita Vata gets accumulated in Rikta Srotas and gives rise to various generalized and localized diseases. As said earlier, Samprapti of

Sandhigatavata follows either of three ways according to the Nidana of Vata Prakopa. (1) Dhatukshyajanya (2) Avaranjanya (3) Svanidana Sevenajanya. As Sandhigatavata is a degenerative disease and mainly occurs in the old age, Dhatukshaya due to Vriddhavastha which is Parihanikala is the most common cause.

Acharya Charaka indicates that Khavaigunya is primarily caused by Empty Srotas in vatic illnesses. Numerous things contribute to the Vata Dosha's aggravation, and Vata escapes from its Ashaya to circulate throughout the entire body and all of its parts. It becomes localized, or Asthi Sandhi, in the roots of Majjavaha Srotas during circulation. The Khavaigunya may already be present in the Asthi and Majjavaha Srotas. Because the Dosha won't accept Ashraya if there isn't khavaigunya of Srotas. Vata's primary characteristics are Khara, Ruksha, Vishada, and Laghu. The following characteristics of Ashraya, which Sandhi imparts to Shleshak Kapha, are listed. Mrudu, Guru, and Snigdha. All of the properties of Kapha are overpowered and undone when exacerbated Vata becomes localized in Sandhi. This chief aim of Kapha is destroyed by the influence of aggravated Vata. When aggravated Vata is localized into a single joint, the disease will be reflected in only one Joint but if Vata is present in many joints, the

disease may be presented by multiple joint involvement.

When the patient reaches the Vatika period of life, say beyond age 50, the illness Sandhigatavata manifests. Vata dosha is found to be predominant during this time, so vatika diseases are obvious. Therefore, it can be claimed that age plays a significant influence in the onset of the disease because this condition is a degenerative joint disease. On the other hand, Vata Vardhaka Ahara Vihara, or a diet that is mostly dominated by Vatika characteristics, can be thought of as one of the predisposing elements in Sandhigatavata. Kalaja Nidana, or old age, is what leads to Ashtivaha Srotodusti and Khavaigunya in Sandhi. Vatasanchaya and Agni Vaishamya can be reached via Vata Vardhaka Ahara Vihara. Additionally, Anuloma Dhatukshya results in Agni Vaishamya, which in turn generates Vataprakopa, and vice versa. Because of Anuloma Dhatukshya the vitiated Vata moves in the body and settles down in joints. Why does Vata congregate solely in joints is a very significant point that is raised in this situation. The "Ashraya - Ashrayi Bhava" Sambandha, which describes the link between Dosha and Dushya, is the most beneficial response to this query. Because of this connection, medications and dietary plans that improve one Dosha also affect the host, Dhatu. Although Vata is said to be mobile in nature, a specific seat can't be

given to it, and locations that are more mobile can be thought of as Vyanavayu sites. Since Meda is the Ashraya of the Kapha Dosha and Sandhi is the Upadhatu of Meda, it follows that if we consider Sandhi to be the seat of Vayu, then Vyana Vayu may have a close relationship with Shleshaka Kapha. Every time the Vyanavayu becomes vitiated, there may also be some Sthana Vikriti or Khavaigunya at Sandhi. Due to this vitiated Vyanavayu's tendency to dwell in joints and cause Ashti Srotodushti, Asthigatavata and Sandhigatavata (Purayitva Anilobali) result. The symptom Sandhishula is brought on by the combination of Asthigatavata and Sandhigatavata. Due to Ruksha and khara Guna, Sandhigatavata results in Shleshaka Kapha Ksahya. Aatma Tejasa Dhatun Kshpayat. Here, Shleshaka Kapha is thought to be agitated by the Ruksha and Khara Gunas of Vata, which ultimately causes a reduction in Shleshaka Kapha. The symptoms Ankunchana Prasarnayoh Vedana or Hanti Sandhigatah result from this decrease of Shleshaka Kapha by Sandhigatavata. Samprapti of Dhatukshya and Svanidana Sevanajanya Vataprakopa janita Sandhigatavata is the one described above.

Avaranjanya Sandhigatavata:

If Kapha is present, Medavardhak Nidana Sevana leads to

Medasagni Mandya. Medasagni Mandya is the cause of Amamedavridhhi. Asthi and Majja, two of Meda's later Dhatus, are Poshak Dhatus. Meda is Poshya Dhatu of these Dhatus. If Amamedavridhhi occurs, then Poshak Dhatus Kshya must also occur. As a result, Ashtidhatu and Majjudhatu Kshya take place. At the same time, Medasavarit Vata develops as a result of Amameda Vriddhi. This Avarana is Vataprakopa's leader. Khavaigunya now takes place in Asthi and Majjavaha Srotas as a result of Asthidhatu and Majjadhatu Kshya. Asthi and Majjavaha Srotas (Purayitva Anilobali) contain Khavaigunya (Rikta Srotas), where Avaranajanit Prakupita Vata is located. This is the Shad Kriyakala Sthana Sanshraya Avastha where Dosha-Dushya Sammurcchana takes place. The qualities of Sneha, such as Ruksha, Khara, etc., are absorbed by Vata in this stage (Dhatun Kshpayat Aatma Tejasa). Rupa of Disease, including Sandhishula, Sandhishota, Akunchana Prasaranayoh Vedana, and Hanti Sandhigatah, appear further in Samprapti Vyakti Avastha.

Disease progression according to Shat-Kriya Kala:

1. Sanchaya (Stage of Accumulation)

Normally the Dosha remains in a stage of equilibrium in its own Ashaya, but any disturbance in the normal state, due to any nidana result into its excessive accumulation within their

Ashaya or at their original site. In this stage due to Vata Dosha, Stambha Purna Koshthata may be manifested.¹¹ The above-mentioned Lakshana of Vata Sanchaya may be observed in patients who would eventually develop Sandhigatavata due to Vata Sanchaya at its Mula Sthana, or Pakvashaya. Additionally, as Asthi is the seat of Vata, some symptoms of Vata Vriddhi, such as Asthi Rukshata and Asthi Kharata, may be present. Additionally, this is due to Nidana's influence over both Dosha and Dushya.

2. Prakopa (Stage of Vitiation)¹²

The Prakopa stage begins if corrective action is not taken during Sanchaya Avastha and the person is permitted to act further. Already collected Dosha strengthens itself at this stage and is more likely to become excited. Vata may be provoked, resulting in the manifestation of Kosthatoda and Kostha Sancharana. Asthi Kharata may exhibit the same symptoms as Asthi Rukshata depending on its severity.

3. Prasarana (Stage of spread)¹³

The stimulated Doshas move on to the following stage, known as Prasara, if the previously stimulating causes are still not addressed by the proper procedures. At this point, Dosha becomes overexcited and spreads to other bodily organs, parts, and structures. With its severity, symptoms like Asthi Rukshata and Kharata may manifest. In the Asthi and Majjavaha

Srotas, vatavridddhi may lead to khavaigunya.

4. Sthana Samshraya (Stage of localization):

As a continuation of previous stages and conditions, in this stage the spreading Doshas become localized wherever there is Khavaigunya and it marks the beginning of specific disease pertaining to that structure. This stage represents the Purvarupa phase of disease and the interaction between the Dosha and Dushya takes place.¹⁴ In the case of Sandhigatavata, vitiated vata is focused in the Asthi and Majjavaha Srotas' Khavaigunya. means that Asthi and Sandhigatavata are caused by PrakupitaVata becoming positioned in Asthi and Sandhi. Here, sporadic cases of Sandhishula and Sotha, two symptoms of the disease Purvarupa, happen.

5. Vyakti (Stage of Onset):

This stage, known as Rupa, provides a clear image of a disease in all of its form. Vata absorbs the Sneha from Asthi and Sandhi by virtue of its Ruksha and Khara properties, causing Vyaktiavastha to occur with symptoms like Shula, Shotha, Hantisandhigatah, etc.

6. Bheda (Stage of Complication):

If the right management is not implemented at this time, the vitiated Doshas or the illness could become incurable, according to Sushruta. There could be serious problems. Complications of the illness include

subluxation, deformity of the joints, loose bodies in joint cavities, and loss of joint motion. In the later stages of the illness, Hanti Sandhigatah occurs. Hanti Sandhigatah indicates that Stambha or Sandhivishlesha could happen at this stage.

7. Samprapti Ghataka:¹⁵

1. Nidana – Vata Prakopaka Nidana
2. Dosha – Vata esp. Vyanavayu, Shleshaka Kapha Dushya – Asthi, Majja, Meda
3. Srotas – Asthivaha, Majjavaha and / or Medovaha Srotodusti – Sanga
4. Agni – Manda
5. Dosha Marga – Marmasthi Sandhi.
6. Roga Marga – Madhyam.
7. Udbhavasthana – Pakvashaya.
8. Vyaktisthana – Asthisandhi

Sadhya – Asadhyata:

Sandhigatavata is one of the Vatavyadhi described in all Samhita and Sangraha Grantha. Acharya Vagbhatta and Sushruta have considered Vatavyadhi as Mahagada. It is so called due to the fact that the treatment is time consuming and prognosis is uncertain. Further Dhatukshya is the chief cause of Vatavyadhi. Dhatukshya is difficult to treat as Acharya Vagbhatta has elaborated that since body is accustomed to Mala, Dhatukshya is more troublesome than Dhatu Vriddhi. Sandhigatavata is one of the Vatavyadhi, therefore it is Kastasadhya.¹⁶ Older people suffer from Kastasadhya, and this condition is known as Sandhigatavata. Kastasadhya is a disease that is present in Marma and

Madhyamarogamarga. The Sandhi's sickness, Sandhigatavata, causes Madhyamarogamarga. Additionally, Vatavyadhi brought on by the vitiation of Asthi and Majja is the hardest to treat. Acharya Charaka does not include Sandhigatavata in his list of Kastasadhya Vatavikaras, but Chakrapani defines the meaning of the word "Khudavatata" as Gulphavatata or Sandhigatavata in his commentary on the phrase. You could classify this Sandhigatavata as Kastasadhya Vatavyadhi.

Chikitsa of Sandhivata:¹⁷

"Vighatana of Samprapti" is how Chikitsa is referred to. Given that Sandhigatavata is a Vatik disease that primarily results from Dhatukshya or Avarana, general Vatavyadhi treatment can be used. However, depending on the etiology, Sandhigatavata may also benefit from less common treatments like Snehana, Svedana, Mridu Samshodhana, Basti and Vatahara Aushadha, Ahara, and Vihara. Acharya Sushruta and Acharya Vagbhatta have specified Snehana, Upanaha, Agnikarma, Bandhana, Mardana, and Svedana for the treatment of Sandhigatavata as a specific line of treatment.

Snehana: Snehana besides being the chief Purvakarma procedure for Panchakarma therapy happens to be a one of the most significant Chikitsa. Snehana therapy is administered to a person in two different ways as follows.

1. External application in the form of

Abhyanga

2. Internal application as Snehapana

Both external and internal Snehana are effective in Sandhigatavata. Sneha Dravya possesses Drava, Sukshma, Sara, Snigdha, Manda, Mrudu, Guru Properties which are just opposite to those of Vata so it alleviates Vata. The Vayu, in its normal condition maintains a state of equilibrium between Dosha and Dhatu. Similarly, it exercises considerable influence on the functioning of Manas. Hence this Vayu should be kept in state of equilibrium for the individual to be healthy and happy. Snehana helps in the promotion and regulation of the proper functioning of Vayu. It is stated that by the regular use of Abhyanga all changes of old age could be prevented and cured, if are already manifested. This Jarahara effect of Snehana is very important as far as Sandhigatavata is concerned. It replenished the diminished Dhatu, increases the Prana (Vitality) and strength of Agni.

Upanaha: One of the four categories of Svedas that Acharya Sushruta describes is upanaha. Svedana is a technique that relieves stiffness, weight, cold, and produces perspiration. It serves both the Purvakarma and Pradhanakarma functions. Upanaha is wrapping wounds. Here, the afflicted joints are treated by using a paste made from the roots of the vayu-suppressing medicines. Sneha should be combined

with heated paste. The joint is covered with leaves once the paste has been applied, and then it is bandaged with cotton or leather. The bandage lasts for around 12 hours. The blood flow is improved and muscles and tendons are relaxed when heat is applied.

Agni karma: Pain is reduced by agnikarma on the injured joints. Ksuadra, Guda, and Sneha must be employed to execute Agnikarma on Sandhi. Shira, Sandhi, and Asthi are contraindicated for Agnikarma, according to Acharya Kashyapa. There is no need to do Agnikarma on Shira, Asthi, or Sandhi if they have ailments, as Commentator Dalhana has explained in this passage. He cited a passage from Bhadrasaunaka to support his claim that treating Mamsa with Agnikarma can cure ailments in the Shira, Snayu, and Asthi. According to legend, ailments treated with Agnikarma never recur, although those treated with Ksharakarma or Shastrakarma may.

Bandhana: Vatashamaka medicine leaves are carefully bandaged on the harmed Sandhi by Bandha. This bandaging eliminates Vata's ability to inflate the Sandhi. Sotha appears in Sandhigatavata as an air-filled sack. In this Shotha, bandhana causes abatement.

Unmardana: This kind of massage involves applying pressure to a sick Sandhi. It improves blood circulation and soothes sota.

Basti: Since Sandhigatavata is a Vatavyadhi, Basti is the best treatment for it.

Discussion:

This is a very broad field for ayurveda. According to Ayurveda, poor nutrition and lifestyle choices are one of the causes of disease. All Samhitas including the Sangrahagratha provide descriptions of Sandhigatavata under Vatavyadhi.

Management of Sandhigatavata ^[18]:

The care of osteoarthritis, according to Acharya Bhavamishra, includes oleation (both internal and external), sweda (fomentation), upanaha (external application of herb paste or poultice), and lepana (tropical application) such as cream base formulations.

Snehana (Oleation): Ghrita (Ghee), Vasa (Fat), Taila (Oil), Majja (Marrow), and Sneha (Oily) must be employed in the treatment if the disease was only caused by Vata without the involvement of other Doshas.

Basti: (Medicated enema internal as well as external): After Snehana (Lubrication) with above mentioned Snehas, Basti (Administration of medicated Dravyas like Bala, Atibala, Ashwagandha, Haridra, Guduchi etc through anal route) with milk, soup, Gramya (used or produced in a village)/Jaliya (aquatic)/ Aanupa (any animal frequenting watery or marshy places) birds animals meat soup along with ghee as Anuvasana Basti (Medicated oil enema). In the Ayurvedic classics, Janusandhigatavata is characterized by

sandhishoola, sandhisotha, prasaranaakunchanapravruttivedana, hantisandhi and atopa which can be correlated with osteoarthritis of knee joint in modern medical science.

Swedana (Fomentation or sudation) ^[19]

:When the patient got proper Snehana, apply Vatanashak medicated oil (Mahanarayan tailam, Mahavishagarbha Taila, Ksheerabala Taila, Mahamashadi tailam etc.) to the whole body or only the affected part followed by Swedana (Fomentation), which are Nadi Swedana (induced sweating by passing the steam over the body parts with a special instrument), Sankara Swedana (Dravya Kalka- Paste) wrapped on the cotton cloth or Kshauma Vastra and used for Swedana) also known as Pottali Sweda.

Benefits of Snehana & Swedana ^[20]:

Snehana speeds up the healing of Dhatus and improves endurance, metabolism, nutrition, and cosmic energy. Swedana improves posture while reducing sharp pain, stiffness, and inflammation in the body. After trying the aforementioned treatments without success, the patient must undergo the body-cleansing Shodhana process with Snehana and mild purgatives. Some purgative Yogas recommended refined Ghrita by using Tilvak, Ghrita was refined using milk, saptatla, and er. If a sick person is unable to utilize purgatives owing to frailty, they should instead employ Niruha Basti (administration of a medicated decoction in the form of enema), Deepan (appetizer),

and Pachana dravyas, either in the form of Niruha basti or mixed with food.

Pathya- Apathya: Do's and Don't's-

Pathya: Oil massage, Basti Karma (Administration of medicated decoction through anal route), Swedana (Fomentation), water sports/swimming, use of Vatanashak Dravyas, Nasya (Medicated oil infused into nostrils), Ghee, oil, fat, sweet, sour, salty food, new sesame seeds, one year old Shasthika Shali, parwal, brinjal, Lashuna, Vrintaka, Shogru, Dadima, Amra, Kharbuja, Gokshura, Prasarini, Nimba, Ksheerkakoli, cow-goat-buffalo milk, Chinchu, Sarshapa Taila, etc Vatahamaka Dravyas.

Apathya: Stress, anxiety, *Diwaswapna* (Day sleeping), forcible withholdings of natural urges, excessive physical work, *Ruksha Ahara* (Eating dry foods), *Chanaka*, *Moodga*, *Yava* (Barley), *Kramuka* (Areca nut), *Kamalaroot*, *Karavellaka* (Bitter gourd) *Sheeta Jala Pana* (Cold water), incompatible foods), bitter-pungent foods, horse riding, *DushitaJala Pana* (Drinking of contaminated water).

Conclusion:

The characteristics of sandhigatavata, which can be associated to osteoarthritis of the knee joint in contemporary medical science, are sandhishoola, sandhisotha, prasaranaakunchanapravruttivedana, hantisandhi, and atopa. The Ayurvedic Samhita provides a thorough explanation of Sandhigatvata. The diagnosis and treatment of sandhigat vata in the modern

era will be greatly aided by this ancient Ayurvedic understanding. So, it's an effort to draw attention to specifics of osteoarthritis and sandhigat vata. One of the most Kasha Sadhya Vyadhis, osteoarthritis is somewhat manageable and can be prevented from causing more cartilage deterioration by using the appropriate Ayurvedic treatments. The vatahara medications Bala, Ashwagandha, Nirgudi, Rasna, Shallaki, Eranda, Guduchi, Amalaki, etc. are helpful in this regard. Evaluating the anti-inflammatory and antioxidant qualities of the ayurvedic remedies indicated above is another area of research. To prevent and control Sandhigata Vata, one should avoid unhealthy Ahara and Vihara and adopt appropriate Ahara and Vihara.

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