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Effect of Panchtikta Ksheer Majja Basti in the Management of Sandhivata (Osteoarthritis)-A Case Study

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Abstract

Sandhigata Vata is a type of Vata Vyadhi that occurs primarily in old age as a result of Dhatukshaya. In the Ayurvedic literature, a specific etiological component for Sandhivata is not mentioned; nonetheless, the aggravating factors for vata can be used for it because vata and in particular Vyana vata, has a tight link with the movement of Sandhi.

Osteoarthritis sufferers typically experience discomfort and restricted joint movement. Pain has a number of different origins, both inflammatory and noninflammatory. NSAIDs, analgesic medications, physiotherapy, corticosteroids, etc. are used to treat the illness. The medications mentioned above are quite expensive and have side effects. Even surgical intervention does not offer total relief. When compared to males, females have a higher prevalence of this syndrome (25%) than males (16%).

The treatment of osteoarthritis can be used to treat Sandhigata Vata in ayurveda. Tikta Kshira Vasti is recommended for treating osteological condition like asthi vikaras, As a result, the illness Sandhivata can be described as a joint condition with symptoms of Shula, shotha which are worsened by movement, and eventually leading to complete restricted movements of joints.

Pancha Tikta Kshira Majja yukta Vasti is used here for treating asthi vikaras, an osteological condition. This case study looks at the effectiveness of Panchatikta Ksheer majja yukta Vasti and ksheerbala taila in treating osteoarthritis (Knee joint).

A pre diagnosed case of Sandhivata with complaint of pain in bilateral knee joints and difficulty in sitting, walking, limping gait. Patient was managed by panchtikta ksheer Majja yukta Basti and Ksheerbala taila anuvasana basti. Significant improvement was noticed after the treatment and pain was reduced significantly.

Keywords: Panchtikta ksheer majja basti, sandhivata, osteoarthritis, ayurveda

Introduction

Sandhivata is currently one of the most prevalent disease affecting a large number of population. It is a degenerative joint disease that mostly affects weight-bearing joints [1], such as the knee joint. In Vridhavastha, Sandhigata Vata is one of the most common degenerative disease of joints.

It is not one of the 80 different varieties of "Nanatmaja Vatavyadhi."

In the majority of Samhitas and Sangrah Granthas, Sandhigata Vata is explained under the broad topic of Vatavyadhi. The sign and symptoms of OA resembles with Sandhivata, one of the disease conditions described under Vatavyadhi of Ayurveda [2]. Sushruta samhita delineates the disease in Vatavyadhi chapter under the heading of Sandhigata vata, while Charaka delineates under Sandhigata vata under the Vatavyadhi as Sandhigata anila [3].

It starts off asymptotically in middle life and develops

escalating symptoms as you become older. With age, its prevalence rises, particularly in weight-bearing joints.

While 16% of men experience Sandhigata Vata, 25% of women are more susceptible. Vata Dosha vitiation is typical with Jaravsatha (old age).

The vitiated Vata, whether alone or in combination with other Dushyas, locates in the joint and produces Sandhigata Vata.

Osteoarthritis is characterized by loss of articular cartilage, hypertrophy of bone at the margins, subchondral sclerosis and range of biochemical and morphological alterations of the synovial membrane and joint capsule.

According to its Samprapti, each Vatavyadhi also has two types: Sroto Avarodha Janya and Dhatukshaya Janya [4].

Vata Dosha vitiation is the only factor in dhatukshaya Janya.

Acharaya Charaka only identified three primary signs and symptoms of dhatu kshaya janya vatavyadhi, Sandhishotha, Prasaran-akunchan Pravrutti Svedana, Sandhishool, and Vatapurna druti sparsha [5].

Dhatukshayajanya Controlling, Vata vitiation and stopping the degradation of Dhatus are two ways to treat sandhigata vata.

The preferred treatment for Sandhigata Vata, a disease of Madhyam Rogamarga, is basti. Ksheera Bastis are recommended for Sandhigata Vata, and according to Acharya Charaka, Saghrita Tikta Ksheera Basti [6] should be administered in conjunction with Ghrita and Ksheera for Asthi-related illnesses. Along with this majja also plays an important role in Asthi Dhatu kshya janya vikara. The dashmoola siddha majja basti [7] removes the avarana of the vata and increases the blood supply which is the main purpose of this given treatment. The majja basti. Therefore karma basti plan of Panchatikta Ksheer Majja Yukta Basti and ksheer bala tailam was planned for sandhigata vata.

Aim and Objectives

- To study the effect of Panchatikta ksheera Majja yukta Basti and Ksheerbala oil in the management of Sandhigata vata (OA of knee joint)
- To find out an effective Ayurvedic Panchakarma management for Sandhigata vata.

Material and Methods

Selection and source of patient-For this study, patient was registered from OPD of Panchakarma department and admitted in private IPD of Pt.KLS Govt. Ayurveda hospital Bhopal (MP).

A 62 year-old female patient dated 24/11/22, OPD no.-20220060527, IPD no.-20222860, visited PTKLS Govt. Ayurvedic hospital Bhopal, presented with the complaint of pricking type of pain in both knee joints (Rt.>Lt.), both thighs and antalgic gait since 7 years. The nature of pain was continuous while walking and during any other activity. The patient took allopathic treatment mainly consist of internal pain killers and steroids that provide only symptomatic relief with gradual weakness in the affected limbs. Eventually her condition worsened and she needed support for walking and other daily routine work. She was advised to undergo surgery but she refused and opted for Ayurveda treatment. The patient came in the OPD of Pt. Khushilal Sharma ayurveda hospital, Bhopal and diagnosed to suffer from Sandhigata vata. She had no history of addictions and trauma. She was hypertensive and non-diabetic.

On examination, the patient was found to have bilateral knee crepitus present, anxious with disturbed sleep, had a moderate appetite, samagni, krura Kostha (bowel hard to purgate) with normal micturition. The tongue was clean, the voice was clear, and skin roughness was prominent. Her pulse was 80/min, regular; BP was 130/80 mm of Hg; patient was afebrile and respiratory rate was 20/min, regular. She had Vata Pitta Prakriti with Madhya Vaya (Medium age), Madhyama Sara (medium purity of body tissue), prawar Satwa (good mental strength), Madhyam Satmya (homologation), Sama Pramana (equal body proportions), Avara Vyayama Shakti (least physical endurance), Madhyam Ahara Shakti (medium food intake) and Avara Jarana Shakti (Poor digestive power). Asthivaha Srotodusti (pathology in bone) and Asthivaha srotodusti (pathology in bone marrow) were more prominent.

Radiological Funding

B/L knee joint space reduced with multiple osteophytes formation.

Table 1: Assessment of effect of therapies

S. No.	Assessment Parameter	Grading	BT	AT
1	Joint pain (Sandhi shula)	0-no pain 1-mild pain 2-moderate pain 3-severe pain	2	0
2	Joint swelling (Sandhi shotha)	0-no swelling 1-mild swelling 2-moderate swelling 3-severe swelling	2	1
3	Joint crepitation (vatapurna druti sparsha)	0-no crepitation 1-palpable crepitation 2-audible crepitation 3-always audible	3	1
4	Tenderness	0-no tenderness 1-patient complaints of pain 2-patients of pain and wince 3-patient withdraws of joint	2	1

Preparation

Administration

Purva Karma

a) Preparation of the Patient

- Local Abhyanga with murchita til taila on lumbosacral region, inguinal region and lower limbs was administered.
- Local Swedana with Dashmool vapors on lumbosacral region, inguinal region and lower limbs was administered to the patient.

b) Preparation of Pancha Tiktadi Kshira Majja Yukta Vasti

The Pancha Tikadi ksheer basti kwath dravyas were taken in 40 grams (10gm. Each) to prepare the decoction, in 16 times of water (600 ml). The prepared decoction was approximately 150 ml. After making the decoction, 150 ml of milk was added in it and again boiled, till the quantity of milk remained. This Pancha Tiktadi Kshira decoction was added with 70 ml Dashmoola siddha majja. Thus the total quantity of 220 ml of Pancha Tiktadi Kshira Majja yukta Vasti was prepared for the administration.

Method of Administration

Patient was advised to lie down in left lateral position with their left leg stretched out, while the right leg flexed at knee and held near abdomen. Lubrication was done to the anus of patient and distal end of Vasti netra. The other ends of Vasti netra\ (nozzle) was attached to polythene bag which was already filled with the required quantity of Panchatikta Ksheera majja yukta Vasti. Then the Vasti netra was introduced slowly and steadily parallel to the vertebral column and the polythene bag was squeezed with appropriate pressure to facilitate the entry of Vasti dravyas. Patient was advised to take deep inspiration during administration. With some part of Vasti dravya left in the polythene bag, the Vasti netra was gently removed.

Pascāt Karma

The Buttocks and soles were gently tapped for proper distribution of Vasti. The patient was asked to relax in supine position and lower limbs were raised. After some time they were allowed to go with the advice to make a note on retention time. The patient was also advised to take bath with

lukewarm water after complete Pratyāgamana (evacuation) of Vasti.

Basti Karma

The Basti karma was planned in schedule in the ratio of 3:1.

Firstly one 120 ml Anuvasana basti of Ksheerbala Oil was given. After that three panchatikta kshira majja Basti in dose of 220 ml was administered as a Niruha Basti. The bastis were given for 21 days in the same ratio ^[9]

Treatment Regimen

Table 2: Treatment administered

S. N.	Treatment	Dose	Frequency	Duration	Anupana
1	Shodhana basti with triphala Kwathh triphala kalkaand	450 ml	Once in the morning	3 days	-
2	Panchatikta ksheera majja yukta Basti (therapeutic enema)	220 ml	Once in the morning before meal	21 days (in Ratio 3:1)	-
	Anuvasana Basti with Ksheerbala oil	120 ml	Once in the morning before meal		

Shodhana Basti

Table 3: Shodhana basti schedule

S. N.	Basti	Basti Dose	Retention time
1	triphala Kwath and triphala kalka	450 ml	15 min.
2	triphala Kwath and triphala kalka	450 ml	14 min
3	triphala Kwath and triphala kalka	450 ml	20 min.

Table 4: Plan of panchatikta kheera basti majja yukta

S.N.	Basti	Basti Dose	Retention time
1	Kheerbala oil	120 ml	6 hr. 30 min
2	Panchatikta kshira majja Basti	220 ml	4 hr 20 minutes
3	Panchatikta kshira majja Basti	220 ml	4hr.
4	Panchatikta kshira majja Basti	220 ml	5 hr 30 minutes
5	Kheerbala oil	120 ml	9 hr
6	Panchatikta kshira majja Basti	220 ml	3 hr 45 minutes
7	Panchatikta kshira majja Basti	220 ml	4 hr 15 minutes
8	Panchatikta kshira majja Basti	220 ml	6 hr 35 minutes
9	Kheerbala oil	120 ml	10 hr 30 minutes
10	Panchatikta kshira majja Basti	220 ml	6 hr 15minutes
11	Panchatikta kshira majja Basti	220 ml	8 hr 10minutes
12	Panchatikta kshira majja Basti	220 ml	8 hr 50 min
13	Kheerbala oil	120 ml	11 hr 10 minutes
14	Panchatikta kshira majja Basti	220 ml	5 hr 35 minutes
15	Panchatikta kshira majja Basti	220 ml	8 hr 10 minutes
16	Panchatikta kshira majja Basti	220 ml	9 hr20 minutes
17	Kheerbala oil	120 ml	14 hr
18	Panchatikta kshira majja Basti	220 ml	6 hr 30 minutes
19	Panchatikta kshira majja Basti	220 ml	8 hr 25 minutes
20	Panchatikta kshira majja Basti	220 ml	9 hr 15 minutes
21	Kheerbala oil	120 ml	10 hr10 minutes

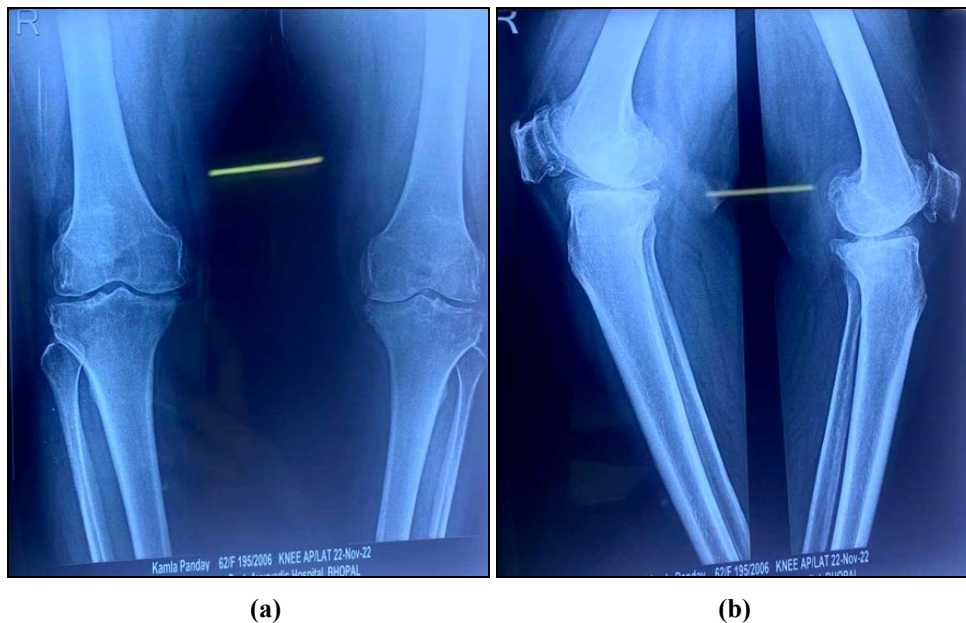


Fig 1 (a, b): Reduced joint space between medial side of femorotibial joint

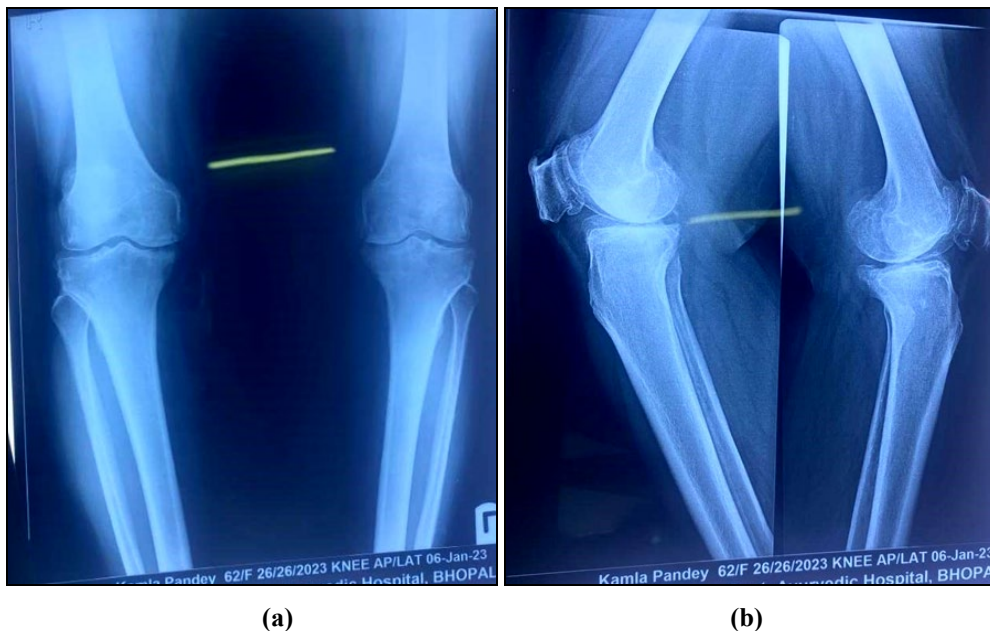


Fig 2 (a, b): Mild increase in joint space in mediolateral area of both joints.

Discussion

The Pakwashaya, or large intestine, is where the medicine that is taken via anal route ends up. This has been discovered to be extremely helpful in both Pakwashaya gata illnesses and several system disorders. Since the medications are absorbed from this region and have a systemic effect [8], the therapeutic action of the medication is not limited to the large intestine.

In the advanced stage, the persistent imbalance of Vata Dosha is responsible for the vitiation of Pitta and Kapha Dosha. So, in all Panchakarma procedures, Basti is a therapeutic option for all vata vikar, because Basti is the first line of treatment for Vata Dosha. Basti karma is often regarded as the most effective treatment for Vata dosha.

The triphala kwatha shodhana basti [9] causes a localised cleansing of the channels from the colon, or Pakwashaya, as well as from throughout the body. The triphala has vatanulomana effect, thus cleansing the channels for the proper absorption of the basti given in further treatment.

Panchatikta ksheera Basti was planned as it is indicated as a treatment modality in Asthi pradoshaja vikaras [10]. Ksheera

Basti is a type of basti that contains Ksheera or milk as the major component. Ksheera Basti has two functions: Niruha and Anuvasana. As a result, it serves as both Shodhana and Snehana. And the medications Guduchi, Nimba, Vasa, Kantakari, Patol Patra in Bhavprakash Nighantu, which work with Rasa, Virya, Vipaka, and Prabhava, are all mentioned in the therapy of Vata Pradhan Vyadhi. Ksheera Basti alleviates Margavarodha and has a Brimhana effect. Acharya Charaka stated that in the case of Asthi diseases, we should provide basti utilising Tikta rasatmaka aushadhi dravya in conjunction with Ghruta (ghee) and ksheera (milk), which is saghrita tikta ksheera basti (enema of bitter medications with ghee and milk). Tikta rasa also has Shrotoshodhan properties, which help to remove the Sroto sanga. Because Tikta rasa is prominent in Akash and Vayu mahabhut, it might attain the same Vayu and Akash mahabhut pradhan Asthi dhatu. So, we decided to go for Panchatikta ksheera basti.

Guduchi has the qualities of vayasthapana, Rasayana, balya, agnideepana, and tridoshghna. Patol consists of ruchikara, deepan, and kaphapittaghna. Vasa is shoshahara

kaphapittaghna. Nimba is vatakaphaghna and deepana. Deepan, pachana, kaphavatahara, sothahara, and angamarda prashamana are all names for Kantakari. Ksheera has the qualities of jeevaniya, rasayaniya, and sarvarognashana. It has a lot of calcium. Ksheera, Ghrita is Vata Shamak, and Tikta Rasa will boost Asthi Dhatu due to its Panchamahubhut composition. Ksheera, Ghrita, and Tikta Dravyas Siddh Basti are excellent for Vatasamana and Asthiposhana.

The Dashmoola Siddha Majja basti have a Madhura-Tikta Rasa & Katu Vipaka. Dashmoola siddha majja basti described by Acharya Charaka. These Basti's constituents include Madhura Tikta Rasa, ushna Virya, and Katu Vipaka, among others. It nourishes majja dhatu, which in turn nourishes asthidhatu, due to the attributes of snigdha, pichchila, guru, and brimhana poshana guna. When both dhatus are fed, vatashamana occurs. Therefore, by the rasa and vipaka we might conclude that this basti reaches up the asthi elevating the Majja dhatu in asthi and majja vaha srotasa.

The combined effects of panchtikta ksheer majja yukta basti found to be more effective in asthi dhatu gata vikara. They all work together to improve the characteristics of bones and aid to balance the aggravated Vata dosha and promote regular functioning of Dhatvagni, allowing for enhanced nutrition to the Asthi Dhatu

Conclusion

The study was aimed to evaluate the impact of panchtikta ksheer majja yukta basti on Sandhivata. The conclusions were based on a reasonable interpretation of the outcomes from the previous clinical investigation. Sandhivata is often referred to as osteoarthritis nowadays. There is no precise citation for Nidana and Samrapti in relation to Sandhivata. The study found panchtikta ksheer majja yukta basti in sandhivata W.S.R. to osteoarthritis of the knee joint improved symptoms of Sandhivata. Panchtikta ksheer majja yukta was shown to have the most effective benefits. Panchtikta ksheer majja yukta basti, including panchtikta kwath alog with majja can effectively alleviate sandhivata symptoms at a low cost.

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