



Management of Sandhigata Vata with Janudhara and Lepa - A Case Study

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Abstract: *SandhigataVata* is a disorder where *Vata* dosha is dominant. In particular, *SandhigataVata* is the changes the inflammation and degeneration in joints. The condition gets tedious when joints like *Janusandhi* (knee joint) which is a mobile joint, the body gets involved in *SandhigataVata*. There is more prevalence in overweight patients because, among all the joints, it is the weight-bearing joint. The dominance of *Vata* Dosha is central to the pathogenesis of *SandhigataVata*. It can be considered a musculoskeletal abnormality according to modern science. To evaluate the efficacy of *dashmool tailjanudhara* and *Lepa* (*Shunthi* and *Haridra*) in *SandhigataVata*. To study the effectiveness of Ayurvedic management with Panchakarma and *ShamanaChikitsa* (palliative therapy) in *SandhigataVata*. A 55 years old female individual was diagnosed as *SandhigataVata* with symptoms of pain, swelling in the right knee joint, and difficulty while walking for one year. There were osteophyte changes in the X-ray of the right knee common. The management plan includes panchakarma in which local *abhyanga* (massage), Local *Swedana* with *Nadisveda* (hot fomentation), *Janudhara* (oil pouring), and *lepa* was advised. *Shamanchikitsa* included *Hingwashtakchurna*, *YogarajGuggulu*, and *Avipattikarachurna*. Pain, Swelling, and difficulty in walking were reduced markedly. The patient got adequate relief in clinical features; she could walk correctly.

Keywords: *Sandhigata Vata*, *Knee Joint*, *Dashamoola Janudhara*, *Lepa*, *Shamana Chikitsa*.

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I. INTRODUCTION

Sandhigata Vata is the most common type of *Vatavyadhi* mentioned in various *Samhitas*. As age progresses, the *dhatu* undergo *Kshaya* leading to disease.¹ In this disease, the *vataprakop* increases in the Joints leading to *dhatukshaya* and the occurrence of Symptoms. It is correlated with Osteoarthritis, and its prevalence is very high among all types of Arthritis. ²Osteoarthritis is also called degenerative arthritis, which occurs due to the degeneration of Bones, Cartilage, and adjacent structures leading to pain and stiffness.³ There is an increase in social burden due to the increasing prevalence of obesity and the community's aging. The Changes in function and structure of the whole joint are the main characteristics of Osteoarthritis and are a multifactorial process. The primary aim nowadays is reducing pain and improving joint function, and there is no cure. Pain and stiffness are mostly observed at a high rate in *Sandhigata Vata*.⁴ Osteoarthritis⁵ (O.A.) is a prevalent abnormality of the musculoskeletal system commonly found at the age of 70 years. Significant joints are mainly affected by this disease. In almost every person, by the age of 40 years, some pathological changes occur in the joints, especially in the weight-bearing joints. 25% of females and 16% of males are often found with the symptoms of Osteoarthritis. It is compared with the Western Population Indian population is more prone to Osteoarthritis of the knee joint, and it interferes with daily routine. The most common joints involved are the knee joint, Shoulder joint, and Ankle joint. Symptoms include inflammation, pain while walking, and crepitus present in the joint. Degenerative changes⁶ in joints are the main symptom added by Acharya Sushruta, along with all the other symptoms of *Sandhigatavata*. There exists a limitation in managing this disease in contemporary Treatment. There are various analgesics, anti-inflammatory, corticosteroids and other drugs commonly used for Osteoarthritis, but they also have their demerits and side effects. Because of that, associated diseases are increasing day

by day. So, there is a need to find effective management of Osteoarthritis. In Ayurveda, many managements are incorporated for *Sandhigata vata* according to different conditions. *Panchakarma* includes *Snehana*, *Swedana*, *Basti*, *Nasya*, *Raktamokshana*, *Agnikarma*, *Dharasveda* etc.⁷ *Janudhara* is one of the types of *panchakarma* included under *Swedana* under the type *Dharasweda*. *Dharasweda* means pouring oil over the body. When the medicated oil is poured on *Janu* (Knee), it is called *Janudhara*⁸ in classics, and it is mentioned that oil is the best for *vataprakop* or vitiated *vata dosha*. Different medicated oils are used for *Dharasweda*. Different drugs are used to prepare oil for *Sandhigata vata*.⁹ Among them, *Dashamool* is one of the drugs which has a wonderful effect on Pain and Stiffness. It acts as an analgesic, anti- inflammatory.¹⁰ *Lepa Chikitsa* is described for the management of Pain, Stiffness, and other associated symptoms.¹¹ Thus this attempt has been made from the previous review of the disease and various treatments to find effective management in *Sandhigata vata* and contribution to the field of Ayurveda. This study aimed to observe the effect of *Snehana*, *Swedana*, *Janudhara*, and *Lepa* in *Sandhigata Vata* management.

2. CASE REPORT

A 55 years old female patient was symptomless a year before, but gradually she developed symptoms such as pain in the right knee joint and, restricted knee joint movement for one year, swelling over the right knee joint. She had no relief after continuously consuming analgesics, and her symptoms were aggravated daily. So, she approached *Panchkarma O.P.D.* in *Mahatma Gandhi Ayurved College Hospital and Research Centre Salod (H) Wardha, Maharashtra, India*, for ayurvedic management. Demographic details of the Patient are mentioned in Table I. Chief complaints were taken (Table II), and other History was taken with the Patient's informed consent (Table III). Examinations according to Modern medicine (Table IV) and Ayurveda (Table V) was conducted to reach the final Diagnosis.

Table I: Demographic Details

Age	55 years
Sex	Female
Marital Status	Married
Socioeconomic Status	Lower Middle class
O.P.D. no	2208160125
Height	160 cm
Weight	68 kg

Table II: Chief Complaints of Patient with Duration

Pain in the right knee joint	1 year
difficulty while walking	1 year
Swelling over the right knee joint	7 months
General weakness	7 months
Loss of appetite	3months

Table III: Other History of the Patient

Past Medical History	I year back, she underwent trauma (fall at home). The patient was taking multiple analgesics when necessary.
Past Surgical History	no surgical history
Family History	no specific history noted
Dietary History	Mixed diet

Addiction	No addiction
Menstrual History	Menopause before seven years.

Table IV: Examinations according to Modern**Examination of the knee joint**

Inspection	Swelling over the right knee joint No varicosites are seen. Not having any structural deformity in the left knee joint.
Palpation	Tenderness
Crepitus	It affected all the movements, like flexion and extension.
Reflexes	intact
Systemic examination	
Pulse	76/min
Respiratory Rate	17/min
Respiratory System	A.E.B.E., Clear
CVS:	S1S2 normal
Blood Pressure	110/70 mm of Hg
C.N.S	conscious, well-oriented.

Table V: Ashtavidha parikshan

Nadi (Pulse)	78/min
<i>Mutra</i> (Urine))	<i>Aniyamita</i> (irregular)
<i>Mala</i> (Stool)	<i>Samyak</i> (normal)
<i>Jivha</i> (Tongue)	<i>Nirama</i>
<i>Shabda</i> (Speech)	<i>Spashta</i>
<i>Sparsha</i> (Skin)	<i>Anushna</i>
<i>Drik</i> (Eyes)	<i>Prakruta</i>
<i>Akriti</i> (Posture)	<i>Madhyam</i>
Other findings	
<i>Agni</i> (digestive capacity)	<i>Manda</i>
<i>Koshtha</i> (Bowel)	<i>Madhyama</i>
<i>Kshudha</i> (appetite)	<i>Alpa</i>
<i>Nidra</i> (sleep)	disturbed due to pain

2.1 Diagnosis

Janusandhigata vata (OA Knee joint)

2.2 Nidan Panchaka**2.2.1 Hetu (causative factors)**

Ahar: Katu Rasa (Spicy food), Ruksha (dry food items).
 Vihara: Vegdharan(suppression of natural urges),
 Ativayam(excessive body exertion), Atijagran(excessive awakening at night)

2.3 Purvarupa (Prodromal symptoms)

While walking little discomfort and stiffness in both knee joints.

2.4 Rupa (Manifestation)

Severe pain in the right knee joint, pain while walking for one year, swelling over the right knee joint for seven months, and pricking pain in the right knee joint for seven months.

2.5 Samprapti (Pathophysiology of disease)

Rasa dushti and Vata Prokop occur due to the above-said causative in all body channels. It obstructs several channels and weakens joints. Due to obstruction, Degenerative changes occur in the joint, which leads to Sandhigata Vata.

2.6 Sadhyaasadhyatva (prognosis)

Kruchrasadhyya(can be cured with difficulty)

2.3 Investigations

X-Ray of the right knee joint (AP and Lateral)was carried out.



(Before Treatment)

Fig 1- X ray Right Knee Joint

3. MATERIALS AND METHODOLOGY

After the complete examination of the patient, the patient was informed about the disease, treatment plan- Shaman chikitsa (Table VI), diet, and regimen during and after the procedure, and written consent was taken from the patient before the Study. The patient's privacy was respected completely.

3.1 Equipment

Snehan Table for Snehana and Janudhara, Bowl, Cotton swab, NadisvedanYantra, Dhara yantra, Heating arrangement, Towel.

3.3 Treatment Plan

3.2 Procedure

Daily examination of the patient was done. After examination Patient was asked to lie down on Snehana's Table, and oil was heated underwater Bath, and Local snehana were done over the lumbar region to the right legs. Later, Nadi svedana was administered for 15 min. After that, the *Dashmoolatail* was poured over the Right Knee with the help of dhara yantra for 30 min. After completion of the procedure, oil was wiped with tissue paper, is the area was cleaned. The patient was allowed to take rest for 20 min and then was asked to take Bath. This schedule was followed for 8 days(Table VII). Follow-up was taken. Later, the assessment was done based on assessment criteria.

Table Vi: *ShamanaChikitsa*

Sr.no	Drugs	Dose	Time of administration	Anupana	Duration
1	<i>Hingwashtakchurna</i>	5 gm B.D.	Before food	Luke warm water	15 days
2	<i>YogarajGuggul</i>	2 B.D.	After food	Lukewarm water	15 days
3	<i>AvipattikarChurna</i>	10 gm B.D.	After food	Lukewarm water	15 days

Table VII: *Panchakarma*

Sr.n o	Panchakarma	Drugs	Site	Time of administration	Duration
1	<i>Local Abhyanga</i>	<i>Dashmoola Tail</i>	lumbar region to Right knee	In the morning	Eight days
2	<i>Nadi swedana</i>	<i>Steam of Dashamoola and Nirgundi kwath</i>	lumbar region to Right knee	In the morning	Eight days
3	<i>Janu dhara</i>	<i>Dashmoola Tail</i>	Right knee to the right leg	In the morning	Eight days
4	<i>Lepa</i>	<i>Haridra +Sunthi + Saindhav</i>	over the Right knee	Evening	Eight days

4 Grading of Parameters

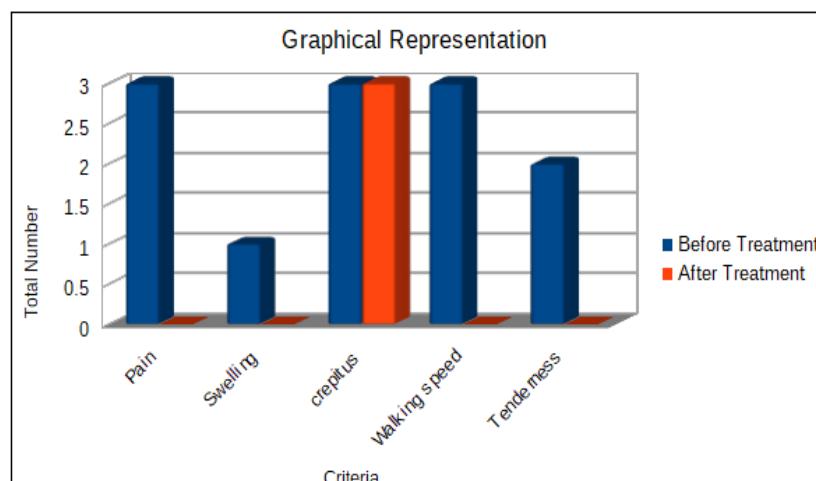
Table VIII: *Assessment criteria*¹²

Sr.no	parameters	0	1	2	3
1	pain	No pain	Mild pain that can be ignored easily	Moderate pain which does not interfere with daily activities	Severe pain is present most of the time, which demands constant attention.
2	swelling	No swelling	Slight swelling	Moderate swelling	Severe swelling
3	crepitus	Normal- no crepitus	Mild- crepitus complaint by the patient but not felt on examination	Moderate- crepitus felt on examination	Severe- crepitus felt and felt on review.

4	Walking speed	Regular- 100 mts in the 60s	Mild- 100 mts in 70s	Moderate- 100 mts in the 80s	Severe- 100 min in 90 s or more.
5	Tenderness	No tender	tender	Tender and wincing	Tender, wincing, and withdrawal

5. Observation and Results

Observation and Results				
Sr.no	Criteria	Before Treatment	After Treatment	
1	Pain	3	0	
2	Swelling	1	0	
3	crepitus	3	3	
4	Walking speed	3	0	
5	Tenderness	2	0	



Graph I- Graphical Representation

Another improvement After Treatment			
Sr.no	Criteria	Before Treatment	After Treatment
1	Agni	Manda	Madhyama
2	Koshtha	Madhyama	Madhyama
3	Kshudha	Alpa	Madhyama
4	Nidra	Unsatisfactory and disturbed	Satisfactory and undisturbed



X-Ray reveals no specific changes after the treatment in 7 days.

(After Treatment)

Fig 2: Investigation: X-ray of Right Knee Joint (AP and Lateral View)

6. DISCUSSION

Sandhigata vata is the most common vatavyadhi. Specific etiological factors have not explained the disease, but the common symptoms of Vatavyadhi are considered.¹³ According to modern science, obesity, excess workload, Age, Sex, Repetitive Stress over joints, etc., are the important causative factors of Sandhigata Vata.¹⁴ The main treatment goal, in this case, was curative Treatment for Symptoms, Correction of Agni, and breaking the Pathology of the disease. Hence, *ShamanChikitsa* and *Panchakarma* were advised. The central Pathology of *SandhigataVata* includes degenerative changes which increase the *Vata* in empty spaces, and symptoms appear. Also, Agni is hampered. So for curing the disease, initially, Treatment of Agni is necessary.

6.1 Effect of *Shamanchikitsa*

6.1.1 *Hingwashtakchurna*¹⁵

Contains *Zingiber officinale*(ginger), *Piper nigrum* (black pepper), *Piper longum* (long pepper), *Cuminumcyminum* (cumin), *Ferula foetida* (asafoetida), *Nigella sativa*(fennel), *Trachyspermum Ammi* (carom seed), *Saindhav* (rock salt). It increases digestive capacity by expanding the Agni. *Hingwashtakchurna* contains property drugs like *shunthi*, which helps to increase the digestive fire.¹⁶

6.1.2 *Yograjguggul*¹⁷

Yograj guggul is *tridoshashamaka* which balances all three doshas, especially *Vatadosha*. It has anti-inflammatory and analgesic properties, which help to cure Symptoms of *SandhigataVata* and break the pathology. It is recommended for Joint pain, Joint stiffness. It alleviates tridosha and also act as Rasayan. *Guguula* has anti-inflammatory action, binding and nourishing capacity.¹⁸

6.1.3 *Avipattikarachurna*¹⁹

It contains *Amla*(*EmblicaOfficinalis*), *Bibhitaki*(*Terminalia bellerica*), *Haritaki*(*Terminalia chebula*), *Pippali*(*Piper longum*), *Marich*(*Piper nigrum*), *Shunthi*(*Zingiber officinale*), *Musta*(*Cyperus rotundus*), *Patra*(*Cinnamomum Tamala*), *Lavagna*(*Syzygium aromaticum*), *Ela*(*Elettaria cardamomum*), *Trivrit*(*Operculina turpenthum*), *Vidanga*(*Emblica ribes*), *Sharkara*(Sugar). It helps to relieve doshas from the rectal route. Hence, used for mild *shodhana*, which is needed in this condition. It provides a protective layer in the Inner lining of the gastro-intestinal wall.²⁰

6.2 Effect of *Panchakarma*

6.2.1 Local *Snehan* (Oleation) and *Svedana*(*Nadi Sweda*)²¹

SnehanaSvedan helps with *Vatashamana*. Applied oil penetrates through the skin and is absorbed due to *svedan*, which increases local circulation and facilitates better absorption of the drugs used or procedures in *Panchakarma*. *NadiSweda* also helps reduce stiffness and pain because it relaxes muscles and provides symptomatic relief in *Osteoarthritis*. It promotes the proper function of *Vata dosha*.²²

6.2.2 *JanuDhara*²³

In *Janudhara*, medicated oil is poured on the affected knee. So, in this case, *janudhara* helped in *Vatashamana*, eventually reducing the Pain, Stiffness, and Tenderness. Along with these, Improvement in the movement was observed after the completion of Treatment. *Janudhara* does nourishment and also helps in healing.²⁴

6.2.3 Mode of action²⁵

Janudhara is a type of *svedana*, and its action is similar to *svedana* according to Ayurveda. Due to its *ushna* and *Snigdhaguna*, *Gandhara* helps relieve stiffness(*stambha*). According to Sushrutacharya, the *dravya* entered the body through *Romakupa*²⁶ and circulated all over it. After absorption, the medicated oil does *vatashamana* due to their *vataghnaguna* and also helps nourish the knee joint, which further helps break the *samprapti*. According to modern science, *svedana*(sudation) works by vasodilation, increasing blood circulation, absorption, and excretion of toxins through sweating.

6.2.4 *Lepa*²⁷

Due to the anti-inflammatory and analgesic characteristics of *Haridra* and *Sunthi*, a reduction was observed in inflammation and pain after application in the form of *lepa*. Due to *ushnavirya*(hot potency), *Haridra* and *Shunthi* help relieve stiffness. The range of motion was increased due to decreased intensity of symptoms.²⁸

7. CONCLUSION

With *janudhara*, local *snehana*, *Nadi Sweda*, and *Shamanchikitsa*, *SandhigataVata* was cured effectively. Thus, with *Panchakarma* and *ShamanChikitsa*, *SandhigataVata* can be treated effectively according to different conditions. It can also help for further Prevention of Disease. It is a single case report. Studies can be conducted with the help of a larger sample size for more research.

8. CONFLICT OF INTEREST

Conflict of interest is declared none.

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