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Case Report

Title of Article: Management of Knee Osteoarthritis Through Ayurveda: A Case Study

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ABSTRACT

Osteoarthritis is a degenerative joint disease. The disease occurs in elderly people, mostly in major joints of the lower limb; frequently bilaterally. The knee joint is involved more often in the population with Asian living habits which have the habit of squatting and sitting cross-legged. In Ayurveda, the disease Sandhivata resembles osteoarthritis is described under *vatavyadhi*. NSAIDs are the drug of choice. In Ayurveda, Leech therapy is extensively used in various conditions specifically where there is predominance of pain and swelling either in acute or chronic conditions. In this regard, the role of Jalaukavacharan is justified by its virtue of the reduction of pain, stiffness, and swelling in patients with osteoarthritis. Arthritis is a chronic inflammatory disorder that affects one or more joints leading to pain, swelling, tenderness, and stiffness of the affected joints. As mentioned in Ayurveda, osteoarthritis is a condition caused majorly due to Vatadosha along with the involvement of Pitta and Kaphadoshas.

Keywords: Ayurvedic medicine, Jalaukavacharan, Leech therapy, Osteoarthritis.

INTRODUCTION

Osteoarthritis is a degenerative joint disease; primarily affecting the articular cartilage. The first change observed is an increase in water content and depletion of the proteoglycans from the cartilage matrix. The disease occurs in elderly people, mostly in major joints of the lower limb; frequently bilateral. There is a geographical variation in the joint involved, depending probably upon the daily activities of the citizenry. The knee is involved more commonly in populations with Asian living habits i.e. habit of squatting and sitting cross-legged. The pain is the earliest symptom. It occurs sporadically in the beginning but becomes constant over months or years.

Initially, it is dull pain and arrives upon starting an activity after a period of rest; but later it becomes worse and cramp-like. Swelling of the joint is usually an overdue feature and is due to the effusion caused by inflammation

of the synovial tissues. Stiffness is initially due to pain and muscle spasms; but later, capsular contractures and incongruity of the joint surface contribute to it. (1) Leech therapy was a mainstay in the conventional treatment of pain and inflammatory diseases throughout antiquity until the 20th century. There is now renewed interest in leech therapy in the field of complementary medicine. (6). In medicinal leech, there is 'hirudin a-65', a residual anticoagulant protein, that prevents the clotting of blood,

which has diuretic and antibiotic properties (MS & D this research Lab Pensalvennia). The leech has the call' which prevents blood coagulation, 'destabilize an endo-epsilon (gamma-Glu) lys-iso peptidase protein, and inhibits arterial thrombus formation by inhibition of induced and spontaneous platelet aggregation. Its saliva has an anesthetic effect which is responsible for pain insensitivity. The action of the leech is by its biological substances by normalization and improvement of capillary circulation, expressed anti-inflammatory effect, adaptogen effect, immunostimulating and immunomodulating effect, antibacterial effect, and improvement of an endocellular exchange and realization of these mechanisms. (2)

Raktamokshanadone with leech a.k.a.jaloukavacharana, is said to have an analgesic and anti-inflammatory effect. Hence the study was conducted to evaluate the effect of raktmokshana on the pain, swelling, and stiffness parameters of osteoarthritic subjects.

METHODOLOGY

Place of study: Late. KedariRedekar Ayurvedic College & Hospital, Gadhinglaj, Kolhapur.

Inclusion Criteria:

1. The subjects coming under diagnostic criteria
2. Patients diagnosed with primary Knee Osteoarthritis (Sandhigataavata).
3. Patient's fitness for Jalukavacharana.

Exclusion Criteria:

1. Patients with secondary Knee Osteoarthritis.
2. Patients having other systemic disorders which may interfere with the course of the disease and its management.
3. Patients who are incapacitated, bedridden, and confined to a wheelchair.

Case report: A female patient aged 50 years came to the OPD of L K R College Gadhinglaj, patient's presenting complaints were Vam Janu shula (pain in the left joint), vam pad stambha (left leg stiffness), and adamant. The patient was suffering from a similar complaint for one month, but recently the symptoms were getting aggravated on activity (shramajhetu).

2.1 On examination

1. General condition of the patient: fair
2. Pulse rate: 80/min
3. B.P-120/80mm of Hg
4. Pallor-absent
5. Weight-54 kg

6. Height-5 ft.1 inch
7. RS-AEBE and clear
8. CVS-S1 S2Normal, No abnormal sound heard
9. CNS- Well Oriented to time place and person
10. P/A – Tympanic note present over Rt lumbar region

Ashtavidhapariksha

- | | |
|---------------------|----------------------|
| 1. Nadi-Vata | 2.Mala-Malavshatmbha |
| 3. Mutra-Pittoushna | 4.Jivha- Sama |
| 5. Shabda-Spashta | 6.Sparsha-Ushna |
| 7.Druk-Panduta | 8.Akriti-Madhyama |

2.2 present illness-

The patient had the above-mentioned complaints for 1 month for which the patient came to LKR Ayurvedic College and Hospital, Gadhinglaj.

2.3 history

H/O –Typhoid fever 3 months back.

2.4 Clinical examination of the knee joint

Inspection-Mild swelling and mild rubor were seen over knee examination

Palpation-Tenderness was present on the left knee examination.

2.5 Samprapti of Knee joint osteoarthritis(4)

General Sampraptiof Sandhivata-vatavyadhi:As indicated by Acharya Charaka, the thesamprapti-nidansevan aggravates vata, and prakupitavata accumulates in Riktasrotas, causing generalized and localized disease. As the pathogenesis progresses, the patient may acquire clinical indications of Janu sandhi gataavata (osteoarthritis) when vitiated VataDoshainhabits(sthanasamsraya) the Janusandhi(knee joint), and produces inflammation in knee joint/s, resulting in stiffness, tenderness, etc.

2.6 Pathogenesis of Janu sandhi gataavata(4)

Nidan- vataprakopakNidan
 Dosha-vyanavayu, shleshakakapha
 Dushya-Asthi,majja,meda
 Strotodushti-Sang
 Agni-Mandagni
 Doshamarga-Marmasthi sandhi
 Rogamarga-Madhyama
 Udbhavashana-Pakvashaya
 Vyaktashana- Asthi-Janusandhi

Treatment approach:

After a thorough physical and systemic examination, the patient has admitted to the female kayachikitsa ward, and

the following Ayurvedic medicine was given after meals with water.

- GandharvaHaritakichurna -1 tsf/HS with warm water
- TrayodashangGuggula(125 mg) 2 BD after the meal with water.
- Lepa-manjistha+darvi+yashtimadhu (local application) once a day.
- Jalaukavacharan- over the desired site i.e. over the most tender part of the left knee joint(Two leeches were applied at a time).

RESULT AND DISCUSSION:

Pain, stiffness, and swelling of the knee joint were assessed before and after treatment, and follow up done after 15 days of completion of treatment. In the first follow-up after (7 days), it was found that the patient's condition was improved by 50 %. The improvement in terms of the patient's view of clinical symptoms was as follows: reduction in the tenderness of the left knee joint, reduction in pain, and swelling over the left knee joint. In the second follow-up (after 15 days) it was found that the patient got an 85% improvement in clinical symptoms.

Ayurvedic drugs significantly reduced symptoms, The Gandharvaharitakichurna stabilizes the gut system by improving the gut musculature and purgative action.TrayodashangGuggulanot only reduced pain but also helps in the reduction of knee joint stiffness.

The leech saliva assists in the treatment of arthritis. Other than anti-inflammatory components, superoxide production and poorly characterized anesthetic that alleviates pain in the joint and also contains a histamine and acetylcholine-like substance that acts as a vasodilator. These are important for the treatment of arthritis because vasodilators increase the blood flow, thus removing inflammatory compounds from the local site, ultimately patient gets relief in pain, swelling, and stiffness. (5)

CONCLUSION

The case report demonstrates that treatment of osteoarthritis can be achieved with only ayurvedic medicinal intervention. Jalukavacharan plays a major role in the plan of treatment. Osteoarthritis worsens over time, and there isn't a cure for it. Ayurveda offers a holistic approach to treatment that can prevent further progression of the condition and improve the function and mobility of the joints.

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