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# Management of Ankylosing Spondylitis through Ayurveda

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## ABSTRACT

Our immune system has a very flawless system to keep an individual disease free. In auto immune diseases there is a flawed reaction of our defence system against our own body cells resulting in a wide array of life altering diseases. One such potentially debilitating auto immune disease with insidious onset is Ankylosing Spondylitis. It is one ailment which shows a strong association with the genetic factor HLA-B27. The disease progresses with symptoms such as loss of spinal mobility, peripheral arthritis and sacroiliitis which ultimately results in reduced quality of life of the diseased. The exact signs and symptoms of ankylosing spondylitis does not resemble with any disease mentioned in *Ayurvedic* texts but based on clinical presentation it can be consistent with *Pravruddh Aamvata*. Here, a diagnosed case of Ankylosing spondylitis having HLA-B27 positive presented with inflammatory condition having joint pain, stiffness, loss of mobility in spine and lower back, which was managed with *Shaman* drugs and *Panchkarma* procedures, the details of which will be mentioned in the full paper. Through this treatment promising results were found in the management of the disease without causing any adverse side effects.

**Key words:** Ankylosing Spondylitis, HLA-B27, Pravruddh Aamvata

## INTRODUCTION

Ankylosing Spondylitis (AS) is a chronic inflammatory disease with insidious onset causing axial arthritis resulting in early symptoms such as low backache with stiffness and progresses with eventual severe symptoms such as loss of spinal mobility and sacroiliitis ultimately leading to spinal fusion.<sup>[1]</sup> It is a potentially debilitating auto immune disease with gradual worsening

of functional capacity over time.<sup>[2]</sup> Ankylosing Spondylitis is usually present during the third decade of life and is rarely seen after 45 years, with a male: female ratio of 3:1. The global prevalence of Ankylosing spondylitis is generally believed to be between 0.1% to 0.4% while 0.25% Indian population is said to be affected by this life altering disease.<sup>[3]</sup> AS is the archetype of a heterogeneous group of arthritis within the rheumatic diseases formerly known as seronegative spondyloarthropathies but now it is commonly referred as spondyloarthritis.<sup>[4]</sup> The exact aetiology of AS remains unknown but heritability is frequently considered as a significant contributor in the manifestation of the disease. This ailment shows strong association with major histocompatibility alleles particularly HLA-B27, which may account for up to one third of the genetic effect.<sup>[5]</sup> In contemporary medical science the disease is usually managed with Non-Steroidal Anti-Inflammatory Drugs (NSAIDs), corticosteroids and various Disease Modifying Anti Rheumatic Drugs (DMARDs), but there are limited

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benefits and numerous side effects associated with these drugs when given systemically for over a longer period of time. So, it is the need of the hour to look for a better mode of management for the disease in other medical sciences. Through *Ayurvedic* treatment protocol promising results were found in the management of the disease without causing any adverse side effects and increasing the quality of life of the diseases.

The exact signs and symptoms of ankylosing spondylitis does not resemble with any disease mentioned in *Ayurvedic* texts but based on clinical presentation it can be consistent with symptoms of *Pravruddh Aamvata*. The classical symptoms of *Pravruddh Aamvat* include *Angmarda* (pain), *Aruchi* (anorexia), *Aalasya* (fatigue), *Gaurav* (stiffness), *Jwara* (fever), *Apaka* (indigestion), *Trishna* (thirst), *Angashoonta* (oedema).<sup>[6,7]</sup>

This case study is undertaken by keeping all these facts in mind and appropriate treatment plan is designed for the patient for successful management of the disease.

**Table 1: Modified New York Criteria for Diagnosis of Ankylosing Spondylitis<sup>[8]</sup>**

Clinical criteria	
1.	Low back pain persisting for ≥3 months reduced by exercise and not relieved by rest.
2.	Limited motion in the lumbar spine in coronal and sagittal planes.
3.	Limited chest expansion compared with normal values for age and sex.
Radiographic criterion	
1.	Unilateral grade 3 or 4 sacroilitis or bilateral grade 2 sacroilitis on plain radiograph.

The patient is said to have Ankylosing spondylitis if radiographic criterion is present with at least one clinical criterion.

## CASE STUDY

A 44 year old male patient came to Kayachikitsa OPD of Pt. Khushilal Sharma Govt. Ayurveda College, Bhopal with complaints of low backache with severe stiffness

(specially in morning hours), occasional numbness in lower back, cervical pain and bilateral knee joint pain and inflammation since 3 years but the pain worsened in the last 3 months. Pain is usually severe in morning and night and is relieved after a few hours of day-to-day activity. He was diagnosed as a case of Ankylosing Spondylitis with positive HLA-B27. For these complaints initially he consulted an allopathic physician where he got temporary relief by NSAIDs and corticosteroids but the patient did not get satisfactory result and the complaints reoccurred after sometime. Then the patient switched towards *Ayurvedic* mode of management for further treatment.

- No H/O any trauma, surgery or other severe illness.
- Pulse was 82/min and regular, BP - 130/90 mm of Hg, Respiratory rate - 18/min
- Hb - 12gm% and ESR - 22mm/hr
- No any specific abnormality in Respiratory, Cardiovascular and Central Nervous System
- Morning stiffness of joints and inflammation of bilateral knee joints present.

Tenderness present in bilateral sacroiliac joints.

Considering all these conditions and symptoms of the patient *Shaman* drugs and *Panchkarma* procedures were planned along with Physiotherapy.

## Treatment Regimen

The following *Shaman* drugs and *Panchkarma* procedures were used during the course of treatment along with physiotherapy

**Table 2: List of Shaman Drugs**

Medicine	Dose	Frequency	Anupana
<i>Trayodashang Guggulu</i>	500mg	Twice a day	Lukewarm water
<i>Ekangveer Rasa + Sameerpannag Rasa</i>	125mg+125mg	Twice a day	Lukewarm water
<i>Dashmoolarishta</i>	20ml	Twice a day	Lukewarm water

<i>Rasraj Rasa</i>	125mg	Twice a day	Lukewarm water
<i>Erand Bhrisht Haritaki Churna</i>	5gm	Once a day (At Night)	Lukewarm water
Anti-inflammatory liniment for local application			

Table 3: List of Panchkarma procedures

Procedure	With	Duration
<i>Sarvang Snehan</i>	<i>Sahcharadi Taila</i>	15 days
<i>Sarvang Patra Pinda Pottali Swedan</i>	<i>Sahcharadi Taila + Vata Shamaka Leaves</i>	15 days
<i>Kati Basti</i>	<i>Mahanarayan Taila</i>	15 days
<i>Janu Basti</i>	<i>Mahanarayan Taila</i>	15 days
<i>Ruksha Baluka Pottali Swedan</i> at night		

## OBSERVATION

The total effect of therapy was assessed by Bath Ankylosing Spondylitis Disease Activity Index (BASDAI)

Table 4: Bath Ankylosing Spondylitis Disease Activity Index (BASDAI)<sup>[9]</sup>

Symptoms	BT	AT
Fatigue	8	4
Neck pain, back pain and hip pain	10	5
Pain and swelling in other joints	9	5
Joint tenderness	8	4
Morning stiffness (intensity)	9	5
Morning stiffness (duration)	1.5 - 2 hours	15 - 20 min

## RESULT

After completion of above mentioned treatment regimen.

Sacroiliac pain was significantly reduced.

There was marked improvement in morning stiffness both in terms of intensity and duration. Cervical pain and occasional numbness of lower back was also subsided.

Knee joint pain was also better with mild oedema in bilateral knee joints.

NSAIDs, corticosteroids and DMARDs were tapered and eventually withdrawn during the course of Ayurvedic treatment.

## DISCUSSION

The condition was approached with classical line of treatment of *Pravruddha Aamvat* as the characteristics of *Aam* and *Vata Dosh* were clearly reflecting in the symptoms mentioned by the patient.

### Individual effects of Shaman drugs<sup>[10,11]</sup>

**Trayodashang Guggul** - It contains drugs having *Tikta, Katu, Kashay Rasa, Ushna Virya* and *Madhur Vipaka*. These properties collectively possess *Vata Hara* and *Kapha Hara* properties. It promotes strength of bones and joints and acts as an excellent analgesic and anti-inflammatory agent.

**Dashmoolarishta** - It acts on the vitiated *Vata* and *Kapha Dosh*, it has anti-inflammatory, analgesic and *Balya* and *Shothhar* properties.

**Ekangveer Ras + Sameer Pannag Ras** - The combination balances all three *Dosha* specially *Vata* and *kapha*. It relieves stiffness caused due to *Kapha Vata Anubandh*. It increases metabolic process in CNS & PNS, thus it facilitates good neuromuscular communication.

**Rasraj Ras** - It works on all three *Dosha* specially *Vata*. It acts as an excellent nervine and cardiac tonic. It strengthens the nerves muscles and helps to restore functions of nerves and blood vessels.

**Erand Bhrisht Haritaki** - Erand is considered as the prime drug to win over the symptoms of *Aamvata*, it along with *Haritaki* works as rejuvenator, *Srotoshodhak*, *Aampachak* and reliever of *Kapha Vata Anubandha*.

## CONCLUSION

The present study shows the Ayurvedic mode of treatment works effectively in the management of ankylosing spondylitis. Based on clinical presentation AS can be consistent with *Pravruddh Aamvata*. The *Panchkarma* procedures relieve stiffness and pain by *Mraduta* and also promotes blood circulation and the *Shaman* drugs work on the vitiated *Aam* and *Vata*. Though ankylosing spondylitis cannot be cured completely but its symptoms and disease progression can be effectively managed through Ayurveda which will save from the potential side effects of other drugs and ultimately improve the quality of life of the diseased.

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