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Nidanapanchakatmak study of Aamvata

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ABSTRACT

In Ayurveda there are various approaches to diagnose a disease; the concept of *Nidan Panchak* is one such modality of Ayurveda. *Nidan Panchak* helps to diagnose diseases at various stages. Knowing the definite *Nidana* (etiological factors), *Dosha* vitiation, *Samprapti* (pathogenesis or progress of disease) and to check it at early stage is given prime importance. *Nidan Panchaka* plays vital role to identify types of disease. It consists of five subtypes which are *Nidan* (causes), *Purvarupa* (Prodromal Features), *Rupa* (Clinical features), *Upashaya* (Therapeutic methods), and *Samprapti* (Pathogenesis). These five elements collectively or selectively help in making an accurate diagnosis. *Aamvata* is a disease caused by *Dushti* of *Rasavaha Strotas* in which there is formation of *Ama* due to *Jatharagni Mandya*. The *Aamvata* condition closely resembles with Rheumatoid arthritis, an autoimmune inflammatory condition characterised by symmetrical polyarthritis. *Aamvata* disease was first described in *Laghutrayee* by *Acharya Madhava*. Before the *Acharya Madhava* the concept of *Aamvata* was vague. *Aamvata* develops due to *Dushti* or *Prakopa* of *Ama* as well as *Vata Dosha*. As the disease *Aamvata* is very prevalent in society, it's important to know the exact diagnosis along with treatment. In our current review we had tried to elaborate about the *Nidanapanchaka* of *Aamvata*.

Key words: *Aamvata*, *Nidanapanchaka*, *Rheumatoid Arthritis*

INTRODUCTION

Ayurveda offers a distinctive, all-encompassing method for disease diagnosis. Various contexts and viewpoints have been used to describe various sets of criteria in *Ayurvedic* literature. The two forms of *Ayurvedic* diagnostic methods are known as *Rogi Pariksha* and *Roga Pariksha*, respectively. *Roga Pareeksha* is an illness analysis. It is the investigation of *Vyadhi* and its personalities. *Nidanapanchaka* and *Shata Kriyakala* can help with this. Both economically and in the diagnosis and treatment of illness, *Ayurveda's Nidanapanchaka* diagnostic method is

useful. *Nidanapanchaka*, an *Ayurvedic* concept, uses causal factors as its primary method of disease diagnosis.^[1]

The combination of these five factors or any one of them individually, aids in correct diagnosis. By understanding the notion of *Nidanapanchaka*, the doctor can identify the illness at an early stage and then arrange the course of therapy effectively, averting further difficulties.

The first *Acharya* to describe the illness *Aamvata* was *Madhava*. Although it seems like an easily treatable illness, the prognosis is not favourable. The concept of *Aamvata* remained hazy before to the *Acharya Madhava*. *Vata Dosha* and *Ama's Dushti* or *Prakopa* both contribute to the development of *Aamvata*. Unique to *Ayurvedic* science, the concept of *Ama* is what causes the majority of different illnesses. *Ama* has no equivalent in contemporary science.^[2]

Aamvata is comparable to rheumatoid arthritis in terms of its illness. Both diseases share a lot of the same signs and symptoms. An autoimmune condition is rheumatoid arthritis. It is a symmetrical polyarthritis that is chronically inflammatory, destructive, and

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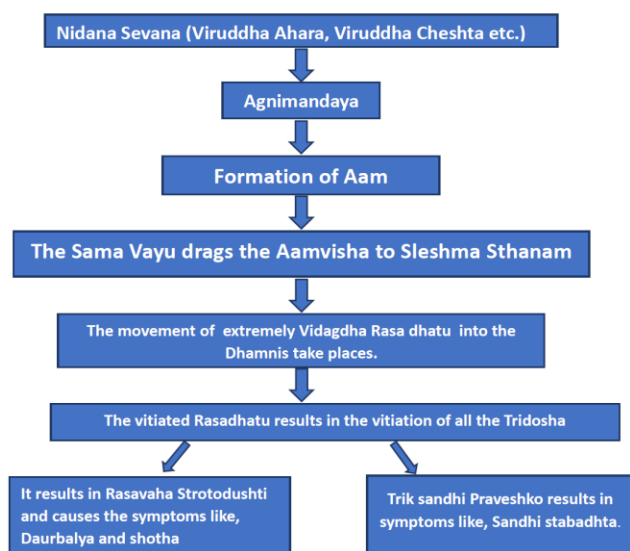
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deforming. The three main clinical manifestations are arthritis pain, stiffness, and joint swelling.^[3]

Amavata Nidana^[4]

- Dietary: Viruddha Ahara** (Intake of incompatible combinations of foods., irregular dietary habits.) *Viruddha Ahara* plays important role in causing *Ama*, *Viruddha Ahara* provokes the *Doshas* but does not expel them out of the body. Ex. Mixing of milk with fish in a diet.
- Lifestyle:**
 - Viruddha Cheshta (Improper physical activity):** the physical activity performed without following the procedure is called *Viruddha Cheshta*. Ex. Physical exercise or sexual act when an individual is already suffering from *Ajeerna*
 - Nischalata (Lack of physical activity):** Lack of physical activity or sedentary life style is the main cause of accumulation of *Ama* in the body
 - Snigndham Bhuktavato Vyayaamam:** Performing physical exercise soon after intake of heavy food causes *Ama* in the body.
- Psychological:** Negative mental states while taking meals. Stress is a triggering factor for rheumatoid arthritis
- Others:** Improper management in pregnancy and post partum period causing aggravation of *Vata* can lead to *Amavata*.

Amvata Samprapti^[5]



Amavata Lakshana^[7]

Samanya Lakshana of Amavata (initial phase)

- Angamarda* – Body ache
- Aruchi* – Anorexia
- Trushna* – Thirsty
- Gourav* – Heaviness in the body
- Aalasya* – Lethargy
- Angashunata* – Swelling in the body
- Jwara* – Pyrexia
- Apaki* – Indigestion

Aggravated Lakshana of Amavata: When the disease aggravates, it causes severe pain associated with swelling especially in joints of upper and lower limbs and in sacral region. Generalized symptoms like loss of appetite, pain or heaviness in abdomen, excessive micturition, burning sensation, sleep disturbances, constipation, abdominal distention, vomiting, giddiness are also seen.

Pratyatma Lakshana of Amavata

- Sandhi Shotha* – Swelling in multiple joints
- Sandhi Shoola* – Pain in the joints
- Gatra Stabdhta* – Stiffness in the body

Clinical characteristics of Amavata vs Rheumatoid Arthritis^[8]

- Hasta Sandhi Shotha & Shoola* - Rheumatoid arthritis is most strongly characterised by inflammation and excruciating pain in the proximal interphalangeal joints and metacarpophalangeal joints.
- Paad Sandhi Shotha & Shoola* - The feet are frequently afflicted, particularly the subtalar & metatarsophalangeal joints.
- Jaanu Gulfa Sandhi Shotha* - R.A. involves first smaller joints of hands & feet and then symmetrically affects the joints of wrist, elbow, ankle & knee.
- Angagourav* - Feeling of heaviness.

5. *Stabdhatta* - In R.A., joint stiffness is most common feature often occurs in the morning hours.
6. *Jaadhya* - R.A. experiences weakness in the grasp or finger triggering due to deformity- results in restricted joint movement.
7. *Angavaikalya* - Joint deformity.
8. *Sankocha* - Contractures
9. *Vikunchana Vikunchana* – This can be compared to volar subluxation, ulnar deviation which occurs at metatarsophalangeal joints and bilateral flexion contractures of the elbow are observed in R.A.
10. *Angamarda* – Body ache, myalgia occurs in R.A.

Prognosis of Aamvata

It depends on the participation of *doshas*, *dhatu*s, number of symptoms and *Upadrava* manifestations in the patient. Considering its severity, *Madhava* considers *Amavata* a terrible disease. Nature of illness to the point that the patient will immediately go into an acute state. Commenting on joint involvement and its complexity, *Madhava* concludes that the management of *Amavata* is difficult, if swelling and pain to all the joint involved.^[9]

Clinical feature	Prognosis
If involvement of only one <i>Dosha</i>	Curable
If involvement of two <i>Dosha</i>	Palliable (<i>Yapya</i>)
If involvement of all <i>Dosha</i> , Presence of generalized edema	Difficult to treat

CONCLUSION

Aamvata is a grave disease caused by *Dushti* of *Rasavaha Srotas*. In terms of clinical features *Aamvata* is comparable to Rheumatoid Arthritis. *Viruddha Ahara*, *Nischalata* and *Mandagni* are the main etiological factors of *Aamvata* with *Ama* as a basic pathological component. All the etiological factors of *Aamvata* results in *Agnimandya* and as a byproduct *Ama* is formed as a toxin. When *Ama* travels in the

body through *Rasavaha Srotas* it results in *Angamarda*, *Aruchi*, *Trushna* along with *Sandhishoola* and *Stambhadi* symptoms.

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