



ISSN 2456-3110

Vol 8 · Issue 12

December 2023

Journal of  
**Ayurveda and Integrated  
Medical Sciences**

*www.jaims.in*

**JAIMS**

An International Journal for Researches in Ayurveda and Allied Sciences



**Maharshi Charaka**  
Ayurveda

Indexed

## Ayurvedic management of *Sandhivata* (Osteoarthritis)

Urvashi Chandrol<sup>1</sup>, Swati Nagpal<sup>2</sup>

<sup>1</sup>Post Graduate Scholar, Department of Kayachikitsa, Pt. Khushilal Sharma Gov. Ayurvedic College, Bhopal, Madhya Pradesh, India.

<sup>2</sup>Reader, Department of Kayachikitsa, Pt. Khushilal Sharma Gov. Ayurvedic College, Bhopal, Madhya Pradesh, India.

### ABSTRACT

*Sandhivata* is the most common disease in the world which affecting a large population. *Sandhivata* term is derived from "Sandhi" and "Vata" which means when *Vata* lodges in *Sandhi* causes pain, swelling, restriction of joint movements. Clinical presentation of *Sandhivata* is closely mimics to osteoarthritis. Osteoarthritis is a degenerative disease. According to Ayurveda *Sandhivata* is a type of *Vatavyadhi* which more commonly occurs in *Vridhavasta*. In present era due to its chronicity, incurability, complications, *Sandhivata* become a challenging disease. *Sandhivata* commonly affects knee joint, hip joint, and it is more common in weight wearing joint among all joints. If knee joint involved condition become more painful. Early diagnosis of *Sandhivata* such as through symptoms or screenings, can often lead to better treatment outcomes and a higher likelihood of successful recovery. Timely intervention can help slow down the progression of the disease and increase the chances of achieving positive results within a shorter period, typically within 5-6 days. In the current study main aim to treat *Sandhivata* in early stage by herbal medicine, *Januvasti* and physiotherapy.

**Key words:** Early stage *Sandhivata*, osteoarthritis. herbal medicine, *Januvasti*, physiotherapy.

### INTRODUCTION

Osteoarthritis is the most common degenerative disorder. Its prevalence is high in the elderly, and the high rate of disability related to disease makes it as a leading cause of disability. The occurrence of Osteoarthritis is on the rise due to faulty lifestyle. Obesity specially imparts significant contribution to the weight bearing joints. Commonly affected joints include the cervical and lumbosacral spine, hip, knee and first metatarsal phalangeal joint. In the hands, the distal and proximal interphalangeal joints and the base of the thumb are often affected. Usually affected joints

are wrist, elbow, and ankle. The symptoms can interfere with work and normal daily activities. Among those over 60year old, about 10% of males and 18% of females are affected with OA. In the affected individual, osteoarthritis is the cause of about 2% of years lived with disability.<sup>[1]</sup>

OA can be correlated with *Sandhivata* in Ayurveda. *Acharya Charaka* had described this disease under *Vataj Nanatmaj Vyadhi* (different diseases of *Vata*). He had narrated this condition with symptoms such as inflammation, difficulty and pain while walking, and crepitus present in joint.<sup>[2]</sup> *Acharya Shusruta* had further added specific symptoms, that is, degenerative changes in joints as the symptoms of *Sandhivata*.<sup>[3]</sup> Contemporary treatment has its own limitation in managing this disease. In Western medical science, various treatment options in advanced stage of OA are present but they do not provide remarkable recovery and cause multiple side effects. So, there is a great need to find effective management in *Sandhivata*. Such type of rheumatological condition can be better treated with application of various *Panchakarma* procedures and *Shaman Chikitsa* (palliative therapy) in Ayurveda. Through this paper, a novel effort was undertaken to enlighten over the great efficacy of

#### Address for correspondence:

Dr. Urvashi Chandrol

Post Graduate Scholar, Department of Kayachikitsa, Pt. Khushilal Sharma Gov. Ayurvedic College, Bhopal, Madhya Pradesh, India.

E-mail: chandrolurvashi@gmail.com

Submission Date: 14/10/2023 Accepted Date: 21/11/2023

#### Access this article online

##### Quick Response Code



Website: [www.jaims.in](http://www.jaims.in)

DOI: 10.21760/jaims.8.12.35

Ayurvedic treatment for *Sandhivata*. In this case study, a female patient with *Sandhivata* was prescribed for palliative treatment along with local therapy, which resulted in excellent recovery in symptoms.<sup>[4]</sup>

### History of present illness

A 38 year-old female patient was symptomless 9 months ago but gradually she had symptoms such as pain in both knee joints and difficulty while walking since 7-8 months, stiffness in both knee joints since 5 months, and mild swelling in right knee joint since 3 months, which are briefly mentioned in Table 2. She had associated symptoms of recurrent constipation, which are type 1 in consistency [Table 2]. After intake of analgesic also, no relief was obtained, and symptoms were getting worsened day by day. Patient had no history of hypertension. So, she approached *Kayachikitsa* outpatient department of Pt. Khushilal Sharma Government Ayurvedic College and Hospital, Bhopal, Madhya Pradesh, India, for Ayurvedic treatment. Examination of the patient including vitals examination, *Ashtavidha Pariksha* (eight systemic examination), and specific locomotor system examination is mentioned in Tables 3, 4, and 5, respectively, and after obtaining written informed consent, the treatment was started on inpatient department level.

**Table 1: Demographic details**

Age	38
Sex	Female
Address	Indrapuri, Bhopal
Occupation	Housewife
OPD no. / IPD no.	20230052176/20232761
Marital status	Married
Socioeconomic status	Middle class family

**Table 2: Chief complaints**

SN	Chief complaint	Grade	Duration
1.	Pain in both knee joint	+2	Since 7 months
2.	Difficulty and pain while walking	+2	Since 7 months

3.	Stiffness	+1	Since 5 months
4.	Mild swelling in right knee joints	+1	Since 3 months

### Associated complaints

SN	Associated complaint	Grade	Duration
1.	Constipation	Type	On and off

**Table 3: Vitals examination**

Blood pressure	130/80 mmHg
Respiratory rate	18/min
Pulse	76/min

**Past History** - No history of trauma or fall was reported.

**Medication History** - Patient had not taken any previous treatment.

### Personal History

Food Habits: excessive intake of spicy food

Sleep: disturbed sleep

Addiction: no any addiction

Family History: No significant family history was reported.

### *Nidan Panchak* (The Procedure of Etiopathogenesis of *Sandhigatavata* as per Ayurveda)

#### *Hetu* (etiology or causative factors):

*Ahara*: *Katu Rasa* (spicy food items), *Ruksha* (dry or shrunken food items)

**Table 4: *Ashtavidha Pariksha***

<i>Nadi</i> (pulse)	76/min
<i>Mala</i> (stool)	<i>Sama Mala</i>
<i>Mutra</i> (urine)	Normal
<i>Jivha</i> (tongue)	<i>Nirama</i>
<i>Shabda</i> (speech)	<i>Prakrut</i>
<i>Sparsha</i> (skin)	<i>Sheetushana</i>

Druka (eyes)	Prakruta
Aakruti (posture)	Medium

Examination for locomotor system (examinations specific to diagnosis)

<p><b>Inspections</b></p> <ul style="list-style-type: none"> <li>▪ Difficulty and pain in both knee joints while walking for long duration</li> <li>▪ mild Swelling over right knee joint</li> <li>▪ Knee flexion deformity on right knee</li> <li>▪ Reflexes are intact</li> <li>▪ No any scar</li> <li>▪ No varicosities are seen</li> <li>▪ No any structural deformity in left knee joint</li> </ul>
<p><b>Palpation</b></p> <ul style="list-style-type: none"> <li>▪ Crepitus present in both knee joints</li> <li>▪ Affected flexion and extension of right knee joint</li> </ul>
<p><b>Range of movement (ROM) Right knee</b></p> <ul style="list-style-type: none"> <li>▪ Flexion at right knee joint, 70°– 80° extension of right knee joint Rest of movements are normal</li> <li>▪ Left knee joint - No occurrence of any deformity</li> </ul>

**Vihara:** Atijagarana (excessive awakening at night), Ativyayama (excessive body exertion), Chinta (worry), Shoka (grief), Vegdharana (suppression of natural urges)

**Aggravating factor:** Constipation, age-related degeneration.<sup>[5]</sup>

**Purvarupa (prodromal symptoms):** stiffness in both knee joints, mild discomfort during walking

**Roopa (manifestation):** Right knee joint pain, trouble walking, crepitus in both knee joints, stiffness in both knee joints since 20 days, and little swelling over the right knee joint since 15 days.

**Samprapti (pathophysiology of the disease):**

The above mentioned contributing elements cause Rasadushti (inadequate blood plasma generation) and Vataprokopa (Vitiation of Vata), which spreads

Vatadosha throughout the entire body and obstructs many channels and wedged over joints. Joints experience degenerative changes as a result of blockage which results in Sandhivata.<sup>[6]</sup>

**Investigations:** X-ray of both knee joint Anteroposterior view had showed space reduction in knee joint, and osteoporotic changes as shown in figure.



**Diagnosis:** Sandhivata (osteoarthritis)

**Treatment advised:** A therapy plan was suggested after investigating the disease's pathophysiology in this patient. This is included in below table.

**OBSERVATIONS AND RESULTS**

Assessment of the patient was performed in terms of clinical features.<sup>[7]</sup> After completion of therapy, the patient got significant relief in pain while walking, stiffness, and swelling of knee joint. Constipation was relieved in this duration.

**DISCUSSION**

Accordingly factors are responsible for pathogenesis of Sandhivata, principle of treatment was planned in this Sandhivata patient. The treatment was as

Medicine	Dose	Days
<i>Rasanadi Guggulu</i>	2 BD	5 days
<i>Trifala Guggulu</i>	2 HS	5 days
<i>Sahcharadi Kwatha</i>	10ml BD	5 days
Tablet Nucart OA	2 BD	5 days
<i>Sukumar Ghrita</i>	15 ml BD	5 days
Combination of <i>Godanti</i> 250mg and <i>Kamduda Rasa</i> 125 mg	125 mg BD	5 days
<i>Swadist Virechan Churna</i>	5 gm HS	5 days
<i>Janu Basti</i>	With <i>Mahanaraya Oil</i>	5 days
Physiotherapy		5 days

Probable mode of action of these drugs and procedures are as follow

*Rasanadi Guggulu* - *Rasana* has painkiller property.<sup>[8]</sup>

*Trifala Guggulu* - In this patient constipation was present, and *Trifala* has laxative property.<sup>[9]</sup>

*Sahcharadi Kwath* - *Sahcharadi Kwath* has anti-inflammatory and antiarthritic action of this medicine helps to alleviate the various symptoms including improving the blood circulation in the affected areas, body pain and debility.<sup>[10]</sup>

*Sukumar Ghrita* - *Ghrita* has rich in *Snigda Guna* which reduces *Rukshta* in *Sandis* and *Shamana* of the *Vata Dosh*.<sup>[11]</sup>

Combination of *Godanti* and *Kamdudha Rasa* - *Kamdudha Rasa* is a polyherbal formulations as a powerful digestive tonic and treating various health aberrations including *Deepan*, *Pachan*, *Aaahara*, *Vatahara* etc. This combination also gives calcium which is responsible for bone density.<sup>[12]</sup>

*Swadista Virechan Churna* - In this patient constipation is also a symptom, and this *Churna* has laxative property.<sup>[13]</sup>

Tablet Nucart OA - this tablet is a nutritional supplement which is used to provide nutrition to the

cartilages in conditions such as osteoarthritis. Its content extract of *Boswellia serrata*, and *Chingali Satva* acts as active ingredients which improves joint mobility and prevents cartilage deterioration.<sup>[14]</sup>

*Janu Basti* - It induces reduction in stiffness without damaging structures in joint. In this patient, it increases strength and circulation with reduction in pain.<sup>[15]</sup>

Physiotherapy - In physiotherapy isometric exercise, knee band in supine and prone position, hamstring muscle stretching with ultrasound therapy were included. It helps to restore movement and function of joints.

**Assessment** - Assessment is based on subjective and objective criteria.

Subjective Criteria	Before Treatment	After Treatment
Pain in right knee joint (VAS score) +2 0	+2	0
Difficulty and pain while walking + 2 0	+2	0
Stiffness in both knee joints +1 0	+1	0
Crepitus present in both knee joint + 2 0	+2	0
Mild swelling over right knee joint +2 0	+2	0
Constipation	Type1	normal bowel
<b>Objective criteria</b>		
Range of movement: (Right leg)	Grade 2 (71°–80° flexion)	Grade (101°–120° flexion)

## CONCLUSION

If *Sandhivata* diagnosed in early stage than it can be cured effectively by *Shaman* medicines and physiotherapy.

## REFERENCES

1. Kayachikitsa book part 4 by Dr. ajay kumar pandey.

2. Trikamji Y, editor. Chikitsasthan; Vatavyadhichikitsa Adhyaya. Verse 37. In: Charakasamhita of Agnivesha. Varanasi, India: Chaukamba Publication; 2011. p. 690.
3. Shastri K, editor. Nidhanasthana; Vatavyadhinidan Adhyaya. Verse 29. In: Sushruta, Sushruta Samhita. Varanasi, India: Chaukhamba Sanskrit Sansthan; 2012. p. 460
4. Comprehensive Ayurvedic management of Sandhigataavata: case report Article in Journal of Indian System of Medicine · January 2019 DOI: 10.4103/JISM.JISM\_71\_1 by Poonam Ashtankar, Punam Sawarkar
5. Tripathi B, editor. Chikitsasthana; Vatavyadhichikitsa Adhyaya. Verse 15–18. In: Charak, Charak Samhita. Varanasi, India: Chaukhamba Sanskrit Pratisthana; 2011. p. 93.
6. Gupt A, editor. Nidanasthana; Vatavyadhinidan Adhyaya. Verse 5–6. In: Shrimadvagbhat, Astanghrudayam. Varanasi, India: Chaukhambha Sanskrit Samsthan; 2005. p. 375.
7. Lewis SJ, Heaton KW. Stool form scale as a useful guide to intestinal transit time. Scand J Gastroenterol 1997;32:920-4.
8. Ayurveda saarsanghra, guggul prakarana page no. 523
9. Ayurveda saarsanghra, guggul prakarana page no. 517
10. sahstrayoga kasaya yoga page no. 113
11. sahstrayoga ghrita yoga
12. Rajnighantu and sharangdhar Samhita,
13. Rastantrasaar rogadhikar vivandh
14. Gufic biosciences limited
15. Pathak R, editor. Taila Prakarana. In: Ayurveda Sara Sangraha. 12th ed. Nagpur, India: Vaidhyanath Ayurveda Bhavan Limited; 2007. p. 663-4.

**How to cite this article:** Urvashi Chandrol, Swati Nagpal. Ayurvedic management of Sandhivata (Osteoarthritis). J Ayurveda Integr Med Sci 2023;12:236-240. <http://dx.doi.org/10.21760/jaims.8.12.35>

**Source of Support:** Nil, **Conflict of Interest:** None declared.

\*\*\*\*\*