



Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in

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An International Journal for Researches in Ayurveda and Allied Sciences





Journal of **Ayurveda and Integrated Medical Sciences**

REVIEW ARTICLE

July 2024

Conceptual Review on Vatarakta

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ABSTRACT

In the present era various types of health issues are increasing day by day because of unhealthy food habits and sedentary lifestyles. Vatarakta is a disease explained in Ayurveda involving Vatadosha imbalance affecting Raktadhatu, where the Vayu gets aggravated due to Vishamayaana (travelling with improper posture), and on the other hand Rakta gets vitiated by consumption of Lavana, Amla, Katu, Kshara etc. The Vata whose passages are blocked by Rakta further undergoes vitiation and further contaminates Rakta. The Rakta vitiated by Vayu will vitiate the Rakta in whole body later gravitates towards the foot. This vicious amalgamation of vitiated Vata and Rakta is called Vatarakta. The symptoms are first manifested in the small joints of the foot. Later it gradually spreads to the upper portions of the body causing itching, pain numbness etc. symptoms in all the joints of the hands and foot. The other joints of the body are also involved in the painful picture. In association of Kapha, this Vatarakta spreads throughout the body in quick time like rat poison. In the general population the prevalence of Vatarakta (Gouty Arthritis) is between 1.3 to 3.7 % and it is most common among men. As for as Chikitsa of Vatarakta is concerned Ayurveda is considered Basti Karma is effective in the management of Vatarakta.

Key words: Vatarakta, Basti, Vatadosha, Raktadhatu, Gouty Arthritis, Ayurveda.

INTRODUCTION

The Nidana, Lakshana and Samprapti of Vatarakta are having similarity with clinical presentation of Gout explained in the modern medical science. In the present era due to rapid modernization in the developing countries like India, people are habituated to fast food, sedentary life style etc. which has given rise to increase in the number of joint disorders. Among these Vatarakta considered to be serious of its chronicity. Earlier it has affected many great personalities especially the wealthier once such as

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Access this a	rticle online
Submission Date: 14/05/2024	Accepted Date: 21/06/2024

Quick Response Code

Website: www.jaims.in

DOI: 10.21760/jaims.9.7.24

kings and emperors. Recent Indian studies indicate that about 65% of patients are from middle socioeconomic classes are prone to get gout. Prevalence of gout appears to be increasing, although public awareness about the condition is extremely poor. Gout is the most common form of inflammatory arthritis in men (5-27 per 1000 men) and rarely occurs in women before menopause.^[1]

The symptoms are first manifested in the small joints of the foot. Later it gradually spreads to the upper portions of the body causing itching, pain numbness etc. symptoms in all the joints of the hands and foot. The other joints of the body are also involved in the painful picture. In association of Kapha, this Vatarakta spreads throughout the body in quick time like rat poison.

Synonyms

The synonyms of Vatarakta are Adhyaroga, Adhyavata, Khudavata, Vatabalasa and Vaatashonita.^[2]

Nidana (Etiology) of Vatarakta^[3]

Nidana of Vatarakta includes all the factors, which

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cause aggravation of *Vata* and vitiation of *Rakta* or both. It may be categorized into two

- 1) Bahya Nidana
- 2) Abhyantara Nidana

All the etiological factors of *Vatarakta* are eloberated in following subtitles.

- Aharaja Nidana
- Viharaja Nidana
- Manasika Nidana

Aharaja Nidana

Intake of food which are predominantly *Kashaya, Katu, Tikta Rasa's* & *Ruksha Guna Alpa Ahara Sevana, Abhojana.* Generally, *Sukumara* (Delicate persons).

Viharaja Nidana

Excessive riding on elephants, horses, camels, etc.

Manasika Nidana

Krodha

Classification

- a) Depend on site of pathogenesis^[4]
- 1) Utthana Vatarakta where Twak and Mamsa are involved
- 2) *Gambhira Vatarakta* all the *Dhatu* was taking part in pathogenesis.

Table 1: Showing types of Vatarakta on the basis ofchronicity

Types	C.S	s.s	A.S	A.H	M.N	G.N	B.P	Y.R	H.S
Utthana	+	-	+	+	-	+	+	+	-
Gambhira	+	-	+	+	-	+	+	+	-

b) Classification according to *Doshik* predominance^[5]

Table 2: Showing types of Vatarakta on the basis ofDoshik predominance

Types	C.S	s.s	A.S	A.H	M.N	G.N	B.P	Y.R	H.S
Vatadhika	+	+	+	+	+	+	+	+	+
Pittadhika	+	+	+	+	+	+	+	+	+

Kaphadhika	+	+	+	+	+	+	+	+	+
Raktadhika	+	+	+	+	+	+	+	+	+
Dwandaja	+	+	+	+	+	+	+	+	-
Sannipataja	+	+	+	+	+	+	+	+	+

Purvarupa^[6]

Atisweda, Asweda, Karshnyata, Sparsha Adnyatwa, Kshate Atiruk, Sandhi shaithilya, Alasya, Sadana, Pidakodgama, Janu, Janga, Uru, Kati, Amsa Nistoda, Sphurana, Bheda, Gourava, Supti, Kandu, Sandhi Ruk, Vaivarnya, Mandalotpatti, Sheetalata, Osha, Daha, Shopha, Twak Parushya, Sira Dhamani Spandana, Sakti Dourbalya, Atislakshna Sparsha, Khara Sparsha, Shrama, Vrana Adhika Shoola, Vrana Chira Sthiti, Roma Harsha, Asrija Kshaya in the affected part.

Rupa^[7]

Kandu, Daha, Ruja, Ayama, Toda, Sphurana, Kunchana, Shyava Twak, Rakta Twak, Tamra Twak, Bheda, Gourava, Suptata of affected Sandhi.

Samprapti of Vatarakta^[8]

Nidana Sevana

 $\mathbf{1}$

Vata Prakopaka Nidana like Lavana, Ksharadi Sevana and Haya, Ushtradiyana

 $\mathbf{1}$

Vata and Rakta Dushti

$\mathbf{1}$

Obstruction to the path of *Dushita Vata* by *Dushita* Rakta

 $\mathbf{1}$

Vata gets vitiate further and vitiates Dushita Rakta again

$\mathbf{1}$

(Mutual obstruction of path by each other) *Rakta* gets *Avarana* by *Vata*

 $\mathbf{1}$

Spreads through Srotas by Sukshmatwa, Chalatwa of Vayu and Saratwa and Dravatwa of Rakta

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$\mathbf{1}$

Takes Ashraya in Kara Pada Anguli and Sarvasandhies and produces Vakrata in Sandhi

$\mathbf{1}$

Vatarakta

Sadhyasadhyata of Vatarakta^[9]

Sadhya

- If Vatarakta caused by only one Dosha
- No Upadrava
- Freshly occurred
- If patient is strong, who have good will power and proper availability of medicaments.

Yapya

- If caused by two Dosha
- Without Upadravas
- If having one year duration or more
- If patient is strong, self controlled and with sufficient means.

Asadhya

- If caused by all three Dosha
- Associated with Upadravas
- Having complications like *Aajanusuptita* etc.

Chikitsa of Vatarakta^[10]

Rakta Mokshana

Though the *Raktamokshana* is one of the treatments in *Vatarakta* excessive bleeding may further vitiate the *Vata Dosha* of *Vatarakta* hence frequent employment of *Raktamokshana* in small amounts is always justified.

General line of treatment

In the beginning Snehana should be done. There after he should be given Virechana with Sneha Dravyas (if person is of Ruksha Shareera) or with Ruksha Virechana (if person is of Atisnigdha Shareera). Virechana should be mild in nature, as Tikshna Virechana will leads to Vata Prakopa. Then

patient should be administered with *Nirooha* and *Anuvasana Basti* frequently.

 Seka, Pradeha, Abhyanga, with Avidahi Dravya and Snehana.^[11]

Specific line of treatment

According to Acharya Charaka as the disease Vatarakta is of two types, accordingly treatment should be adopted i.e.

- In Uttana Vatarakta Alepa, Abyanga, Parisheka, Upanaha.
- In Gambhira Vatarakta Virechana, Asthapana Basti, Snehapana.^[12]

DISCUSSION

According to Acharyas other than these Nidana, Haya Ushtradi Yana, Jala Kreeda etc. are the specific Nidana of Vatarakta. Likewise, now a day, one who travels more over the vehicles may be more susceptible to disease Vatarakta, because continuous traveling may lead to the venous pooling in the distal parts of the lower limbs. The venous pooling i.e., the blood stays more in these parts because of gravitational force, this stagnated blood with raised levels of serum uric acid may lead to the deposition of uric acid crystals in the joints.

The movement of *Vatadosha* is inhibited by the unique pathology of *Raktamargavarana* in *Vatarakta*. This in turn initially manifest with certain clinical signs and symptoms in the form of *Purvarupa*. Alteration in the color and texture of the skin in the affected part, alteration in sweating, alteration in the sensation, different forms of pain and similar other manifestations are listed as *Purvarupa*.

Ayurveda explains Shodhana Chikitsa, Shamana Chikitsa, and Rasayana Prayoga. Shodhana Chikitsa is considered as the best line of treatment for as the main line of approach is to eliminate the Sanchita Mala and to bring back Vata and Rakta to its normalcy. Among the Shodhana procedures Basti and Virechana are is considered as the main line of treatment for Vatarakta. Hence for the present study it is planned to evaluate the efficacy of Basti in management of Vatarakta.

ISSN: 2456-3110

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CONCLUSION

Nidana of Vatadosha and Raktadhatu like Adyashana Ativyayama Alpanidra will separately or together can result in the Vikruti of Vata Dosha as well as Pradusti of Raktadhatu. Vitiated Vata Dosha further cause vitiation of Raktha Dhatu which causes Margavarana. Vitiated Vata Dosha takes Ashraya in Parvasthi Sandhi causing clinical signs and symptoms of Vatarakta. It has two stages i.e. Uttana and Gambhira. Gambhira Vatarakta mainly affects Asthi, Majja Dhatus and causes Ruja spreads as Aakur Visha. Among Vatahara and Raktaprasadaka remedies, Shodhana Procedures like Basti is main protocol of Chikitsa. As reoccurrence of Vatarakta is very common; so long-term treatment like Basti is essential for cure of the disease.

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How to cite this article: Shakuntala HG, Savita Sajjana. Conceptual Review on Vatarakta. J Ayurveda Integr Med Sci 2024;7:162-165. http://dx.doi.org/10.21760/jaims.9.7.24

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

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