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A case study of *Erandadi Guggulu* and *Sagni Upnaha Sweda* in the management of *Sandhigata Vata* (Osteoarthritis)

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ABSTRACT

The reported case was a 58-year-old male with late-stage osteoarthritis (OA) (*Sandhi Gata Vata*) of both knee joints accompanied by pain & mild swelling reducing the movement of both knee joints. The radiology (X-ray) report confirmed it reduces the space between both knee joints. Initially, the knee scores of pain, movement, and stability were poor, and the function score was reduced. *Erandadi Guggulu* was given continuously for 90 days & External *Sagni Upnaha Sweda* treatment was given in two regimens for 90 days. A visual analog scale for pain, knee swelling measurement by measuring tape, and knee joint movement score by goniometer and *Ayurveda* clinical assessment criteria were used to evaluate the effects of treatments on 15 days. After treatment for 90 days, the Knee scores of pain and movement were also improved to a good level and the function score was improved to an excellent level also reducing the swelling of both joints. During the follow-up period, joint symptoms and signs and the knee scores were mildly changed. In conclusion, this OA patient's quality of life was improved by the treatment of *Erandadi Guggulu* described in *Bangasen Samhita Vatarogadhikara* and *Sagni Upnaha Sweda* which is described in *Chikitsa Adarsh*.

Key words: *Sagni Upnaha Sweda*, *Sandhigata Vata*, *Erandadi Guggulu*

INTRODUCTION

Sandhigata Vata^[1] is among the most common degenerative health problems in medical practice nowadays. The prevalence increases dramatically with age. It is the most prevalent disease of all musculoskeletal disorders. It is the most common form of chronic degenerative changes affecting approximately 22 to 39 % of the population.^[2] The timing, duration, and quality of dietary habits and patterns are the aspects of life that are most ignored in

our day and age of unhealthy lifestyles and erratic eating patterns. *Mandagni* has a major function in disrupting *Doshas* and is susceptible to disruptions from a variety of internal and external sources, including environmental variables and food. *Sandhigata Vata* is associated with osteoarthritis (OA) in contemporary science the degenerative condition known as osteoarthritis (OA) of the knee severely limits the range of motion in the knee joints patients also feel pain and swelling. In the context of contemporary *Ayurvedic* science, *Janu Sandigata Vata* is seen as a similarity of OA in the Knee. Due to the vitiation of *Vata Dasha*, there is a steady degrading of the body structures with aging, which causes disease of degenerative illnesses, including *Sandhigata Vata*. Reducing discomfort while trying to preserve or improve the knee's range of motion and minimizing impairments in activities of daily living are the goals of the treatment. Analgesics and nonsteroidal anti-inflammatory medications (NSAIDs) are part of the conventional pharmacological care of osteoarthritis (OA), yet their use does not effectively relieve pain or

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slow the progression of the disease.^[3] It is a persistent degenerative illness. The dangerous side effects of modern NSAIDs and steroids are a concern for their patients.^[4]

CASE REPORT

A 58-year-old male patient presented to the outpatient department of Shri Khudad Dungaji Government Ayurveda College & Hospital at Raipur with a history of pain in the B/L knee joint with crepitations and also mild swelling for the last 6 years followed by an inability to move freely knee joints from 3 years. He was a retired colonel and asymptomatic for 6 years. He takes allopathy medication but does not get proper relief.

OPD: 5106212, Start of procedure:-22/12/2023, Name:-xxxx, Age:- 58, Sex -Male, Address:-Nava Raipur C.G, Religion :- Hindu, Education:-UG, Marital Status :- Married, Socio – economic status :-High Class,

Occupation: Retired colonel in the navy, Habitation: Urban

Table 1: Clinical Findings.

Complaint	Details						
Sandhishoola (Pain)	Bilateral knee joint, Pain increases gradually, Dull ache type of pain, and pain is going worse by cold weather. VAS scale - 6						
Sandhishotha (Swelling)	Measurement of joints (in Cm):- (Measured by) <table border="1"> <thead> <tr> <th>Joint</th> <th>Right</th> <th>Left</th> </tr> </thead> <tbody> <tr> <td>Knee</td> <td>41.5cm</td> <td>41.8cm</td> </tr> </tbody> </table>	Joint	Right	Left	Knee	41.5cm	41.8cm
Joint	Right	Left					
Knee	41.5cm	41.8cm					
Prasaran - Akunchan (Flexion-Extension) both knee joint movement	Measurement of flexion-Extension in knee joints by goniometer						
Associate complaints	<i>Utsahahani, Gauravata, Nidra Viparyaya, Afgangamarda</i>						

Table 2: General Examination

B.P	130/90 MmHg	P/R	79/min
Height	170 cm	Weight	95 kg

Ashtavidha Pariksha^[5]

Nadi (Pulse) - Vat-Pitta

Mutra (Urine) - Prakruta

Mala (Stool) - Vibandha

Jivha (Tounge) - Shwetabha

Shabda (Voice) - Prakrit

Sparsh (Skin) - Ruksha

Drika (Eye) - Samanya

Akriti (General Appearance) - Sthula

Dashvidha Pariksha^[6]

Prakriti - VK,

Vikriti - Dosha-VPK, Dushya-Rasa,Rakta,Asthi

Sara - Pravara

Samhanana - Madhyama

Pramana - Madhyama

Satmya - Madhyama

Satva - Pravara

Ahara Shakti - Madhyama

Vyayam Shakti - Pravara

Vaya - Madhyam

Family History: No H/O - DM/HTN/OA/RA/PTB/HIV

Assessment Criteria^[7]

G0 - No Symptoms.

G1 - Mild Symptoms.

G2 - Moderate Symptoms sufficient to cause Distress/Difficulty in performing routine work.

G3 - Symptoms very severe/patient unable to perform routine work.

Knee Joint pain

Symptom	Grading Score	Before treatment	After treatment
No. Pain	0	3	1
Mild Pain + no difficulty in walking	1		
Moderate pain but no. difficulty in moving	2		
Much difficulty in moving the body parts	3		

Severity of Swelling

Symptom's	Grading Score	Before treatment	After treatment
No swelling / not making the bony landmark of joints	0	2	0
Just covering the bony prominences	1		
Considerably above the landmark may be with positive fluctuation.	2		
More than	3		

Prasan Ankuchanvedana (Pain in movement of knee joint)

Symptom's	Grading Score	Before treatment	After treatment
Absent	0	3	1
Without wincing at face	1		
With wincing of face	2		
Shout or prevent the movement of a joint	3		

Associate complaints: Crepitation sound found B/L knee joints.

Objective parameters: Investigations

Investigation	Before trial	After trial
Aam Pariksha ^[8]	6 (Moderate)	3 (Mild)
Agni Assessment ^[9]	Mandagni	Samagni
Weight	95 kg	93.4 kg
BMI	32.87 kg/m ²	32.18 kg/m ²
BMR	1847.64 K/Cal	1820.85 K/Cal
X-ray	Both joints are very close to each other	A proper gap in joints
Swelling		
Right Knee Joint	41.5 C.M.	40.7 C.M.
Left Knee Joint	41.8 C.M.	40.8 C.M.

Therapeutic Procedure

1. Oral medication: *Erandadi Guggulu* was given 500 Mg before meal two times in a day with lukewarm water for 90 days.
2. *Sagni Upnaha Sweda*: Local application for a minimum of 4 hours for 15 days regularly. Then gap of 15 days and then repeat this process for 3 months.

Duration of Treatment: 90 days.

Ingredient of Erandadi Guggulu: Reference *Bangsen Samhita Vatarogadhikara*.^[10] In *Sandhigatavata*, the main symptoms are pain, swelling and restricted movements of joints. This is a *Vata Dosh*a predominant disease. When *Vata* gets disturbed causes disorders in the joints. *Erandadi Guggulu* are mainly effective in eliminating all *Vata* disorders, relieving digestion, reducing inflammation, reducing *Vata* dosha and removing the contaminated *Kapha Dosh*a located in the source like knee joints. They are mainly anti-inflammatory, pain reliever; improve the digestion, *Kapha Dosh*a suppressant medicines.

Ingredients

Eranda	Sahachara	Nagarmotha	Duralabha
Ajvain	Devdaru	Kutaki	Shati
Pippali	Pippali Mula	Chavya	Chitraka
Shunthi	Bala	Haritaki	Kantakari
Vrihati	Punarnava	Ativisha	Vacha
Ashvagandha	Shatavari	Vasa	Dhanyak
Giloya	Vidang	Amaltas	Gokshur
Vidhara	Haridra	Daruharidra	Ajmoda
Guggulu			

Ingredient of Sagni Upanaha Sweda: Reference Chikitsa Adarsh^[11] Khanda

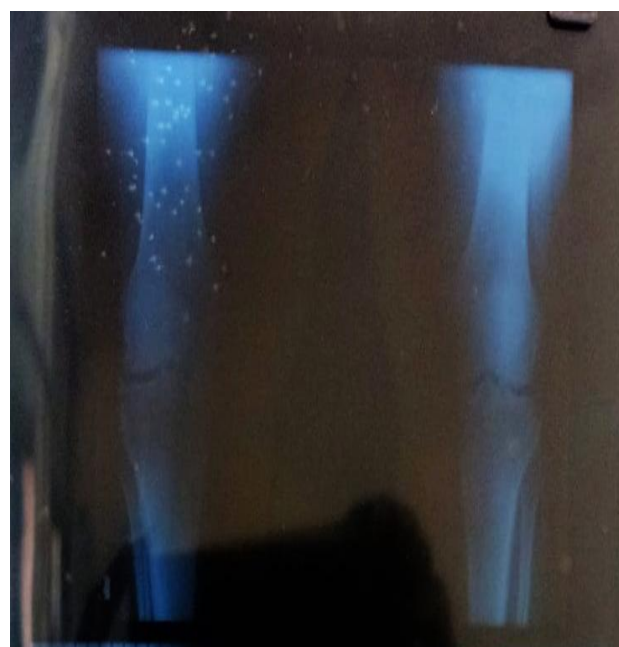
The process of producing sweat by removing stiffness, heaviness and cold from the body is called *Swedana*. *Swedana*^[12] or *Sikai* in *Ayurveda* is a treatment procedure that involves inducing sweating in a person by the process of heat in the form of steam or other hot medicines or methods. In the process, the body starts sweating, due to which stiffness, heaviness, and coldness of the body goes away. Due to which pain, numbness, swelling and stiffness are reduced.

Upanaha^[13] - The literal meaning of *Upanah* is - bond. Grinding medicines and tying them at a particular place for treatment is called *Upanah*. The purpose of *Upanah Sweda* is to remove local *Ama Dosha* from the body by applying plaster on the affected joints and through the sweat generated from it, so that pain, swelling and stiffness in the joints can be reduced. It includes oils, powders, medicinal leaves and Cotton cloth is used for binding. In this process, oil is applied on the affected area and massage is done, after which medicinal paste are applied, covered with leaves and tied. The total duration of treatment in *Upanah* was 90 days. In which first 15 days of *Upanah* and 15 days break were followed by 15 days of *Upanah*, thus a total of 3 times *Upanah* and 3 times break was given. *Upanah Sagni Sweda* has been done for a total 45 days.

Table 3: Method of preparation administration of Sagni Upanaha Sweda.

Eranda Patra	Nirgundi Patra	Dhatura Patra
Shigru Patra	Haridra Churna	Nimbu Phala
Saindhava Lavana	Eranda Taila	Shunthi Churna

Before treatment



After treatment



First sitting (day 1-15):

A volume of 40 ml of *Eranda Taila* and 5 grams each of *Shunthi*, *Haridra* and *Saindhava Lavana Churna* with the *Kalka* of *Eranda*, *Nirgundi*, *Dahtura* and *Shigru Patra*. The *Mahanarayana Taila* was applied on both *Janu Pradesha* (knee joints). Then, in every morning at 10.00 a.m., 150g each joint of paste (made previously before application of oil) was applied on the both knee region and it was kept on for 4-6 hours.

Day 16-30 - Gap.

Second sitting (days 31–45): Same as first regimen.

Day 46 to 60 - Gap.

DISCUSSION

In *Sandhigata Vata*, joint inflammation initially causes pain (*Sandhishula*) and later swelling (*Sandhishotha*). Mainly due to pain and swelling, the mobility of joints is restricted (*Stabdha*) at the initial stage, and later it is aggravated by the anatomical changes that occur in the articular surfaces and the joint capsule, and the ligaments. When and if the patient tries to move the joint, it may result in excruciating pain (*Prasarana Akunchanayoho Vedana*).

However, according to the description in *Ayurvedic* text, the signs, symptoms, and signs with a scoring system were noted to evaluate the severity. This assessment was done twice (i.e., in pre- and post-treatment phases). The severity of symptoms and sign was categorized as follows: Mild: 1, moderate: 2, and severe 3.

A statistically significant relief was observed in cardinal symptoms of *Sandhivata* (OA) in the patient. This proves that the procedure is effective in reducing the cardinal symptoms of OA. The drugs which used in procedure are having *Vata* pacifying properties due to their *Ushna* (digestive and metabolism stimulating) and *Tikshna* (penetrating) properties. It would have acted on vitiated *Vata* and helped to relieve in pain of the affected joints. Stiffness and tenderness are produced due to the presence of *Ama*. The drugs have *Deepana* (enhance digestive power) and *Srotoshodhaka* (remove obstruction of the micro

channels) properties, which reduces local *Ama* formation.^[14]

CONCLUSION

As per the *Ayurveda* in chronic stage of disease *Vata Dosh* is dominant of the patients and *Vyadikshamatva*^[15] (immunity) of the patients are reduced. Hence, it was difficult to achieve better result with short duration of therapy in such cases. Most of the ingredients of *Sagni Upanaha Sweda* have analgesic and anti-inflammatory actions, and hence, statistically significant improvement was observed in symptoms of *Sandhivata*. Hence, it can be concluded that *Sagni Upanaha Sweda* is effective drugs to manage acute and moderate cases of *Sandhivata* (OA).

With *Ayurvedic* combination therapy, the described patient with end-stage OA and an improvement in quality of life after this procedure. The current case study prove that this could be effective and the safest and easiest in treatment plan. Further research into the chemical analysis of these treatment plan utilizing contemporary fractionation and molecular techniques may be possible in the future.

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