



Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in

Indexed

An International Journal for Researches in Ayurveda and Allied Sciences





Ayurveda based Non Pharmacotherapeutic Integrated Intervention in Sandhivata w.s.r. to Osteoarthritis

Vidya P Gani¹, Padmaveer PS², Ashok Patil³

^{1,2}Post Graduate Scholar, Dept. of Swasthavritta & Yoga, KAHER's Shri BMK Ayurveda Mahavidyalaya, Belagavi, Karnataka, India. ³Professor & HOD, Department of Swasthavritta & Yoga, KAHER's Shri BMK Ayurveda Mahavidyalaya, Belagavi, Karnataka, India.

ABSTRACT

Sandhivata also known as Osteoarthritis, is a degenerative disease of the joints that mostly affects weightbearing joints such as the elbow, knee, and so on. It causes discomfort and limits movement in the affected joint. The Sandhivata (Osteoarthritis) may be a form of Vatavvadhi, which usually manifests in adulthood due to Dhatukshaya (emaciation of tissues). Among the Vatavyadhi, Sandhivata is one such clinical entity that affects locomotion; Dhatukshaya is a major factor in this condition, which is characterised by specific symptoms including joint discomfort, swelling, stiffness, painful and restricted joint movement, etc. Osteoarthritis (OA), the most prevalent degenerative joint disease, results in excruciating swelling and irreversible destruction to the body's joints. As of now, the molecular causes of OA remain unknown. The development of osteoarthritis (OA) is a diverse illness that affects the entire joint and changes a number of different tissues. Classics have listed several Ayurvedic formulations for treating Sandhivata, including Kwatha, Guggulu Kalpana, Ghreeta, Taila, Gutika, and Rasa Aushadhi, as well as Panchakarma procedures including Abhyanaga, Swedana, Basti, Janubasti, Rasayana therapy, and Agnikarma, along with these dietetics also plays a major role to reduce the disease severity. In this article we try to collect and compile all the dietary preparations, food articles and Yoga Asanas explained in Samhithas which will be easier to adopt for people suffering from Sandhivata.

Key words: Sandhivata, Osteoarthritis, Diet, Pathya-Apathya, Non-Pharmacotherapeutic integrated interventions (NPI)

INTRODUCTION

Sandhigata Vata is a type of Vata Vyadhi, characterized by manifestations like joint pain (Sandhishoola) and joint swelling (Sandhishopha). Osteoarthritis (OA) is a degenerative joint condition that signifies the breakdown of movable, synovial-lined joints. The knee joint's OA falls into the category of inflammatory disorders, closely resembling Sandhigata Vata in Ayurveda in terms of causes, progression, and clinical

Address for correspondence:

Dr. Vidya P Gani

Post Graduate Scholar, Dept. of Swasthavritta & Yoga, KAHER's Shri BMK Ayurveda Mahavidyalaya, Belagavi, Karnataka, India. E-mail: vidyagani15@gmail.com

Submission Date: 13/05/2024	Accepted Date: 22/06/2024

Acc	ess this article online	
Quick Response Code		
	Website: www.jaims.in	
	DOI: 10.21760/jaims.9.7.32	

characteristics.^[1] The clinical presentations of osteoarthritis (OA) vary from mild to severe, impacting joints in the hands and weight-bearing joints like the knees, hips, feet, and spine. OA is identified as a clinical syndrome marked by joint pain, tenderness, restricted movement, crepitus, occasional swelling, and varying levels of inflammation, all without systemic effects.^[2] As per epidemiological data, osteoarthritis (OA) in India is prevalent in the range of 22-39%. Radiographic signs of OA are observed in a significant proportion of individuals aged 65 and above, with 80% of them being over 75 years old. Approximately 11% of those aged over 65 experience symptomatic OA in the knee. In India, 5.3% of males and 4.8% of females are in the age group exceeding 65 years.^[3] In Worldwide the data suggests that prevalence of Osteoarthritis ranges from 14.3%-17.8%.^[4] Acharya Charaka initially identified the condition as Sandhigata Anila within the category of Vata Vyadhi. He characterized it as a distinct ailment marked by symptoms such as swelling (Sotha), which is detectable through touch as Vatapurna Driti Sparsha,

REVIEW ARTICLE

July 2024

and pain during flexion and extension of the joints, known as Akunchana Prasarana Vedana.^[5] Chakrapani acknowledges Sandhivata as Gulpha Vata or Sandhigata Vata, categorizing it as Kashtasadhya, implying that its treatment is challenging and requires significant effort. Acharya Sushruta has detailed the ailment in the Vatavyadhi section, specifically under the heading of Sandhigata Vata. Sandhivata is recognized as both a Marma (vital point) and a disorder occurring along the Madhyama Roga Marga (intermediate disease pathway). It encompasses various structures such as Snayu (tendons), Sira (vessels), Asthi (bones), Peshi (muscles), Kandara more.^[6] Nonpharmacological (ligaments), and interventions (NPI) encompass treatments that do not involve medications, such as physical activity and like psychosocial interventions speech-based therapies. These approaches aim to prevent, manage, or alleviate health issues, taking various forms such as products, methods, programs, or services. Users must understand the content of these interventions, which are linked to biological mechanisms and/or psychological processes. NPI encompasses a range of techniques, including physiotherapy (e.g., manual manipulations, electromagnetic radiations, electrical ultrasound and sources), assistive devices. psychotherapy, behavioural modifications (e.g., lifestyle habits, nutrition), occupational therapy, speech, and language therapy, as well as complementary and alternative medicine.^[7] Pathya refers to the dietary and lifestyle practices that have a calming effect on the mind, are beneficial to the body, and provide essential nutrients. On the other hand, Apathya represents the opposite, signifying practices that are not conducive to well-being or are not beneficial for the body and mind.^[8] Ayurveda emphasises on Pathya-Apathya more than drugs, so that the food itself will be considered as Bheshaja (medicine). The significance of Pathya and Apathya in Ayurveda is highlighted by the fact that Acharya Charaka explicitly detailed Pathya as a synonym for treatment. This emphasizes the critical role of appropriate dietary and lifestyle practices in maintaining health and facilitating therapeutic interventions in Ayurvedic principles.^[9] Most people

followed inconsistent and incompatible dietary habits in their daily lives. This behaviour leads to an imbalance in the digestive system (*Agni Vaishamya*) and an aggravation of the *Vata Dosha* (*Vataprakopa*), ultimately causing a reduction in bodily tissues (*Dhatukshaya*). When coupled with the aging process, these factors contribute to the onset of joint-related conditions referred to as *Sandhivata*.^[10]

Studies indicate that engaging in regular exercise can be effective in managing symptoms associated with osteoarthritis. These symptoms include pain, reduced flexibility, decreased strength, and morning stiffness. By addressing and controlling these symptoms through exercise, overall function can improve, leading to an enhancement in the individual's quality of life.^[11] In a recent study conducted by Ebnezar et al. (2012) examining the impact of Yoga exercises on pain, morning stiffness, and anxiety in 250 patients with knee osteoarthritis. The participants were divided into two groups: a control group receiving only physical therapy and an experimental group receiving both physical therapy and yoga. The findings of the study suggested that simultaneous participation in yoga and physical therapy yielded more positive effects compared to receiving physical therapy alone. ^[12] The practice of Hatha Yoga proves to be a valuable nonmedicinal approach in the rehabilitation of patients with knee osteoarthritis. It is associated with a noteworthy reduction in pain and symptoms, as well as a substantial increase in daily activities, sports and spare-time activities, ultimately leading to an improvement in overall quality of life.^[11]

AIM AND OBJECTIVES

To develop an integrated non pharmacotherapeutic intervention protocol for *Sandhivata* (OA)

Objectives

To compile and develop Ayurveda based integrated non pharmacotherapeutic protocol for *Sandhivata*.

MATERIALS AND METHODS

Literature search of *Sandhivata* have been done on *Charaka Samhitha, Raja Nighantu, Kashyapa*

REVIEW ARTICLE

July 2024

Samhitha, Madanaphala Nighantu, Baishajya Ratnavalli, Yoga Rathnakara and Bhaishjya Ratnavali and other Yoga related textbooks.

REVIEW OF LITERATURE

Pathya Ahara according to different *Samhitas* exclusively for *Sandhivata* are as follows -

Charaka Samhitha - *Kulattha* (Horse Gram), *Lasuna* (Garlic), *Shigru* (Moringa Leaves), *Amla* (Indian Gooseberry), *Draksha* (Raisins)

Raja Nighantu - Hitakara Dravya Samooha - Ghrita (Ghee), Saindhava (Salt), Dhanyaka (Coriander), Jeeraka (Cumin Seeds), Ardraka (Ginger), Tanduleeyaka (Thorny Amaranth), Patola (Pointed Gourd), Alabu (Bottle Gourd), Godhuma (Wheat), Jeerna Shali, Gokshura (Tribulus), Hamsodaka and Mudga (Green Gram).

Yoga Rathnakara - Kulatha (Horse Gram), Shamaka (Barnyaed millet), Kodrava (Kodo millet), Raktashali (Red Rice), Vastuka, Shigru (Moringa oliefera), Varshabu (Boerhavia diffusa), Karavella (Bitter Gourd), Patola (Pointed Gourd), Kushmanda (Ash Gourd), Godhuma (Wheat), Masha (Black Gram), Adraka (Ginger), Tapatanirr, Lasuna (Garlic) With Buttermilk, Jangala Mamsa (Kukkuta, Tittiri, Barhi, Chataka) Shilendra, Takra (Butter milk), Garjara (Carrot), Parvathe, Dadima (Pomegranate), Parushaka (Falsa Fruit), Badara (Ber Fruit), Draksha (Resins), Tambula, Matsyandika.

Bhaishjya Ratnavali - Vatahara (Vata pacifying), Madhura (Sweet), Amla (Sour), Lavana (Salt) and Snigdha (Unctuous), Sarpi (Ghee), Taila (Oil), Vasa (Fat), Majja (Bone Marrow), Godhuma (Wheat), Purana Dhanya, Masha (Black Gram), Kulattha (Horse Gram), Mamsa, Mishi (Fennel Seed), Dunduka, Kataka, Raktashali (Red Rice),

Madanapala Nighantu - Dadima-Amlaka Yusha

Kashyapa Samhitha Khillasthana - Kambalika Yusha, Lashuna Yusha

Apathya Aharas which are found in classical texts are as follows:

Yavanala (Great Millet), Yava (Barley), Kodrava (Kodo Millet), Gavedhuka, Shali (Rice), Nartaki (Finger Millet), Adhaki (Pigeon Pea), Masura (Lentil), Chanaka (Chickpea), Satina (Pea), Nishpawa (Indian Bitter Bean), Rajamasha (Cow Pea), Shushka Mamsa (Dry Meat), Palaka (Spinach), Karkati (Cucumber), Apakawa Kadali (Unripe Banana), Shita Jala, Kusumbha Taila, Shringataka (Water Chest Nut), Jambu (Jambhul), Apakva Amra, Areca Nut.

Therapeutic diet advices for *Sandhivata* in *Samhitas*:^[13-17]

S N	Vargas					
1.	Shooka	<i>Rakta Shaali</i> (Red rice)	Kodaraa (Anupa)	Shashtik a Shaali (Navara Rice)	Godhumo (Wheat)	כ
2.	Shami	<i>Kulath a</i> (Horse gram)	Masha (Black gram)	<i>Tila</i> (Sesame seeds)	Sarshap a (Mustar d seeds)	<i>Atasi</i> (Flax seeds)
3.	Mamsa	Anupa Mams a, Chatak a (Sparr ow)	Matsya (fish) Kukkuta (Chicken)	Chaga (Goat) <i>Mesha</i> (Sheep)	Vrshab ha (Male cattle) Mahish a (Buffalo)	<i>Tittiri</i> (partri dge), <i>Barhi</i> (Peaco ck),
4.	Shaka	Kushm anda (Ash Gourd) Chang eri (Creepi ng wood sorrel)	Potaki / Upodaki (spinach) Chinchin da (snake gourd)	Mahakos hataki (sponge gourd) Bimbi (ivy gourd)	Koshav ati (ridge gourd) Grnjana ka (Carrot)	Patola (Bottle guard) Shigru (Morin ga)
5.	Phala	Pakva Amrap hala (Riped Mango	Pakwa Kadali (Unripe banana) Narikela	Pakva Kapittha (Wood apple) Naranga	<i>Nimbup hala</i> (Lemon)	Parush aka (false fruit)

Vidya P Gani et al. Non Pharmacotherapeutic Integrated Intervention in Sandhivata

ISSN: 2456-3110

) <i>Amrat</i> <i>aka</i> (Guava) <i>Panasa</i> (Jackfr uit)	(Coconu t) <i>Pakwa Kalinda</i> (Water melon)	(Orange) <i>Dadima</i> (Pomegr anate)	Amlika (Goose berry) Apkva Vrksha mla (Kokum)	Badar a (Indian Bear fruit) Draksh a (dried grapes)
6.	Harita	Ardrak a (Ginge r) Jambir a (Lemo n)	Balamul aka (Tender radish)	Palandu (Onion)	Dhanya ka (Corian der leaves)	<i>Lasuna</i> (Garlic)
7.	Madhy a	Sura (Stron g water)	<i>Madira</i> (Strong water)	<i>Surasava</i> (Alcoholi c Preparati on)	<i>Amlaka</i> <i>njika</i> (Ferme nted rice water)	
8.	Jala	Ushna Jala (Hot water)	Shritash ita Jala (Boiled and cooled water)			
9.	Gorasa	Gavya Paya (Cow milk) Avika Paya (Sheep milk)	Dadhi (Curd)	Navanee ta (Butter) Go	<i>Takra</i> (Butter milk)	Ghrtha (Cow ghee)
10	Ikshu	<i>Ikshu</i> (Sugar cane)	Guda (Jaggery)	<i>Sita</i> (Sugar)	Khanda Sharkar a (Sugar candy)	
11	Krutan na	<i>Manda</i> (Gruel water)	<i>Vilepi</i> (Tick gruel)	<i>Mamsa RASA</i> (Meat soup)	Raaga (Chutne y)	Payas a Krishar a

		Peya (Gruel)	<i>Odana</i> (Cooked rice)	Rasala (Sweet preparati on)	Shadav a (Pickle) Vesawa ra (Bonele ss meat soup)	Kulath a Yusha (Horse gram soup)
12	Aharop ayogi	<i>Tila Taila</i> (Sesam e oil) <i>Eranda</i> <i>Taila</i> (Castor oil)	Atasi Taila (Flax seed oil) Sharsha pa Taila (Mustar d oil)	<i>Maricha</i> (Pepper) <i>Hingu</i> (Asafoeti da) Saindhav a (Salt)	Shushk a Ardraka (Dry ginger)	<i>Pippali</i> (Long peppe r)

REVIEW ARTICLE

July 2024

A Madhyama Roga Margagata Vatika illness called Sandhigata Vata occurs when vitiated Vata lodges in Sandhi. Therefore, medications that work on both Vata and Asthi should be chosen in order to treat Sandhigata Vata. Charaka says that Tikta Dravya and Kshira should be the treatments for Asthi Dhatu Dushti. Vayu and Akasha Mahabhuta are the dominant figures of Tikta Rasa. As a result, it has attraction for bodily elements like Vayu-dominant Asthi and Akasha Mahabhuta. The fundamental idea of Ayurvedic medicine is Sthanam Jayate Purvam, even if Tikta Rasa aggravates Vayu and may intensify the pathogenic process of Sandhigata Vata. Sandhi, the location of Shleshaka Kapha, is the principal site of Sandhigata Vata. So, Tikta Rasa satisfies the concept of reducing the Kapha Dosha.

The majority of the Ahara Dravya mentioned here include Madhura, Katu Vipaka, Ushna Virya, and Tikta Rasa. The metabolic stage, or Dhatvagni, is elevated by Tikta Rasa. All of the Dhatus will receive more nourishment as Dhatvagni increases. As a result, Majja Dhatu and Asthi Dhatu Kshaya may diminish and Asthi Dhatu and Majja Dhatu may stabilize. Therefore, Asthi Dhatu degeneration might not happen quickly. One could argue that it slows down the processes of deterioration. Deepana, Pachana, and Rochana qualities are present in Tikta Rasa. Thus, it strengthens all of the body's joints and contributes to the enhancement of overall health.^[18] On the other side,

Tikta Rasa has the Lekhana property, which aids in patients' weight loss and osteoarthritis management. Additionally, Tikta Rasa possesses the qualities of Jwaraghna and Daha Prashamana, which may function as an anti-inflammatory and lessen joint discomfort and swelling.^[19] In addition to Balva, Agnivardhaka, Sheeta Madhura. Saumya, Virya, Shulahara, Jwarahara, Vrishya, and Vayasthapaka, Ghrita is Vata-Pittashamaka.^[20] As a result, it calms Vata, enhances the body's general health, and revitalizes the body. Aids the Sandhigata Vata's Samprapti Vighatana as a result. Similar to Yogavahi, Ghrita has properties that help increase the bioavailability of other medications without sacrificing any of their own unique qualities. Additionally, Ghrita contains Vitamin D, which is crucial for the utilization of calcium and phosphorus in the synthesis of blood and bones. Most of the abovementioned Ahara Dravya are Ushna in Veerya. It functions as a Medohara because of its Ruksha and Vishada Guna. Research indicates that the medicine is mostly present in Ushna Virya, which aids in calming down agitated Vata and relieving pain.

Planning of dietary preparations for a day:

Preparati ons	Option 1	Option 2	Option 3	Option 4	
Morning beverages	Lemon grass tea	Cinnamon tea	Ardraka tea		
Breakfast	Kulatha Yoosha	Veg Upma	Oats Upma	Mudga Yusha	
Mid-day snacks	Fruits	Dry fruits &	Dry fruits & seeds		
Mid-day beverage	Lasuna Ksheerap aka	Haridra Ksheerap aka	Butter milk	Rasanadi Ksheerap aka	
Lunch	-				
Roti (in Numbers)	Jawar Roti	<i>Shigru</i> stuffed Chapati	Chapati	Multi millet Roti	
Vegetable sabji (in portions)	Patola	Shigru	Kushman da	Potaki	

Rice item (in portions)	Brown rice	Dashamo ola Yavagu	Khichadi
Dinner			
Roti (in Numbers)	Ragi roti	Rice roti with dill leaves	<i>Methi</i> stuffed chapati
Vegetable sabji (in portions)	Koshavati	Mahakosha	
Rice item (in portions)	Manda/ Peya	Vilepi	

	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6
Asan a	Tadasan a (mountai n pose) Shavasa na (corpse pose, palms up)	Katicha krasan a (lateral arc pose) Paschi mottan asana Setuba ndhasa na	Konasa na (angle pose) Virabha drasan a Dhanur asana	Urdhwa hastott anasan a (upstret ched arms posture) Chakrav akasan a	Pavana muktasa na (wind removin g pose) Trikonas ana	Bhujan gasana (cobra pose) Vriksh asana
Prana yama	Nadisho dhana Pranaya ma (alternat e nostril breathin g)	Surya Bhedan a	<i>Bhrama</i> <i>ri</i> (hummi ng bee breathi ng)	Ujjayi	Bhastrika	
Mudr a	Vayu Mudra	Sandhi Mudra	Prithvi mudra	Varun / Jal Mudra	Vata-Nashak / Vaata Shamak / Vishnu Hasta Mudra	
Exerci ses	(Exercisi ng muscles controlli ng the arms)	(Exercis ing muscle s controll	exercisi ng muscles controll ing the palms	exercisi ng muscles controll ing the knees	exercisin g muscles controlli ng the	Standi ng leg lifts Sit and stand

Yoga Asanas and Pranayama advised for Sandhivata

REVIEW ARTICLE

July 2024

REVIEW ARTICLE

July 2024

ISSN: 2456-3110

ing the		ankles	Kick-
wrists)		and feet	backs

Yoga is mind-body interventions, that impart stress management with physical activity may be well suited for osteoarthritis. The potential mechanism for voga therapy-related changes in OA symptoms is unknown. The multifactorial approach of Yoga therapy includes physical postures (Asanas), breathing exercises (Pranayama), meditation (Dhyana), mental and emotional cultures can help relieve symptoms of OA. Yoga therapy procedures can increase cartilage proteoglycan content and prevent cartilage degeneration. This helps strengthen the periarticular muscles that normally contract to stabilize pain. Yoga practice can also prevent synovial fluid loss by stretching and strengthening different parts of the body, massaging and bringing fresh blood to internal organs, while rejuvenating the nervous system and lubricating joints, muscles and ligaments. It is said to have various effects on the nervous and circulatory systems, coordination and concentration, and a calming effect on the body. It also suggests that yoga practice can help reduce some psychological factors such as stress, anxiety, depression, mood disorders, and improve self-esteem and quality of life in people with chronic pain and arthritis.^[21]

DISCUSSION

Sandhivata (Osteoarthritis) is a prevailing condition in today's era because of the increased prevalence of obesity and unhealthy lifestyle.^[22] Osteoarthritis (OA) is a complex condition with multiple contributing factors, and the mechanism leading to joint degradation appears to be more intricate than initially anticipated. Although a correlation exists between obesity and OA, it is not solely attributable to heightened mechanical stresses on joint tissues resulting from weight gain. Other soluble elements, like adipokines, may also significantly contribute to the initiation of OA in individuals with obesity.^[23] The combined effect of mechanical stress because of weight gain and adipokines together gives rise to the increased symptoms of disease. The Samprapthi of Sandhivata mentions that the Vata increases and

Kapha depletes in the joints, which in turn decreases the *Shleshaka Kapha* in joints.^[24] Thus leading to degenerative changes and causing *Sandhivata*. So, the *Vata* should be controlled as much as possible to get better results in *Sandhivata* management.

CONCLUSION

The aim for treatment of *Sandhivata* in an obese individual should be reduction of weight.^[20] For achieving weight reduction, the best methods are adhering to strict diet and life style modifications. So, the *Ayurveda* emphasises the *Vatahara* diet is best in reducing the complications along with local treatment with *Sleshmavardhaka Dravyas* for *Sandhivata*. *Yoga* also has beneficial effect on reducing the symptoms as it increases joint mobility and flexibility there by reduction in pain and inflammation. So, *Vata Hara* diet and *Yoga* can be included in the management protocol for better results.

REFERENCES

- Patil, S.S. (2022). A review on ayurvedic management of Sandhivata with respect to Osteoarthritis. World Journal of Advanced Research and Reviews, 2022, 1032–1036, 16(02). doi: https://doi.org/10.30574/wjarr.2022.1 6.2.1233.
- Keuttner KE, Goldberg VM (1995) Introduction. In: Kuettner, KE, et al. Osteoarthritis disorders. Rosemont IL. American Academy of Orthopaedic Surgeons, pp: 21-25.
- Sharma MK, Swami HM, Bhatia V, Verma A, Bhatia SP, et al. (2010) An Epidemiological study of correlates of osteoarthritis in geriatric population of UT Chandigarh. Indian J Community Med 32(1): 77-78.
- Cui A, Li H, Wang D, Zhong J, Chen Y, Lu H. Global, regional prevalence, incidence and risk factors of knee osteoarthritis in population-based studies. EClinicalMedicine. 2020 Nov 26;29-30:100587. doi: 10.1016/j.eclinm.2020.100587. PMID: 34505846; PMCID: PMC7704420
- Agnivesha Charaka Samhita revised by Charaka and Drdhabala with Ayurveda Dipika commentary by Chakrapani Datta and Vidyotini Hindi commentary by Pt. Kashinatha Shastri (ed.), Dr. Gangasahaya Pandeya, (Part II), Chaukhambha Sanskrit Sansthan, Varanasi, 20
- Sushruta Sushruta Samhita edited with Ayurveda Tatva Sandipika Hindi commentary by Kaviraja Ambikadutta Shastri (Part I & II), Chaukhambha Sanskrit Sansthan, Varanasi.

REVIEW ARTICLE July 2024

- T. C. Hoffmann, C. Erueti, and P. P. Glasziou, "Poor description of non-pharmacological interventions: analysis of consecutive sample of randomised trials," BMJ, vol. 347, no. sep10 1, 2013.
- Agnivesha, Charaka, Dradhabala, Charaka Samhita, Sutrasthana, edited by Pt. KashinathShastri, reprint edition, Chaukhamba Bharati Academy, Varanasi, 2003; 25/45:478.
- Agnivesh, Rasaayan Adhyaay, Abhaya Aamalaki Rasaayan Paad, Chikitsa Sthan, Charak Samhitawith Chakrapani Teeka, ed. Yadavji Trikam Ji, 1st edition, Chaukhambha Surbharti Prakashan, Varanasi, 2014; page- 376
- 10. P. K, Gupta, et al. "Evaluation of Diet and Life Style in Etiopathogenesis of Sandhivata Osteoarthritis." *Indian Journal of Ancient Medicine and Yoga*, vol. 3, no. 4, Dec. 2010.
- Ghasemi GA, Golkar A, Marandi SM. Effects of hata yoga on knee osteoarthritis. Int J Prev Med. 2013 Apr;4(Suppl 1): \$133-8. PMID: 23717763; PMCID: PMC3665019.
- Ebnezar J, Nagarathna R, Yoghita B, Negendra HR. Effect of integrated yoga therapy on pain, morning stiffness and anxiety in osteoarthritis of the knee joint: A randomized control study. Int J Yoga 2012; 5:28-36.
- Shukla Vidyadhar, Tripathi Ravi Dutt, Charaka Samhita of Agnivesha Volume 2, Edited with Vaidyamanorama Hindi commentary, chikitsasthana, Chaukhamba Sanskrit Pratishthan, Delhi, 2011; 28: 104-106.
- Dr. Anant Ram Sharma, Narayan Ram Acharya Kavyatirthai, Sushruta Samhita chikitsasthana vatavyadhi chikitsa adhyaya Chaukhambha Surbharati Prakashana, Vranasi, 2015; 4: 21-22.
- 15. Siddhinandan Mishra, shree govindadasasena virachit bhaishyajya ratnavali with siddhiprada hindi commentary, vatavyadhi chikitsa, chaukhambha surbharati prakashan, Varanasi, 26: 613-625, 416-417.
- 16. Vaidya laxmipati shastri, yogaratnakara with vidyotini hindi commentary, vatavyadhichikitsa addhyaya, chaukhambha Sanskrit sansthan, Varanasi, 1997; 51: 1,2,4.
- Vaidya laxmipati shastri, yogaratnakara with vidyotini hindi commentary, vatavyadhichikitsa addhyaya, shlok no. chaukhambha Sanskrit sansthan, Varanasi, 1997; 548: 1-3

- Agnivesha, Charaka, Dradhabala, Charaka Samhita, Sutrasthana, edited by Pt. KashinathShastri, reprint edition, Chaukhamba Bharati Academy, Varanasi, 2003; Sutrasthan. 26(5):144.
- Agnivesha, Charaka, Dradhabala, Charaka Samhita, Sutrasthana, edited by Pt. KashinathShastri, reprint edition, Chaukhamba Bharati Academy, Varanasi, 2003; Sutrasthan. 26(5):144.
- Sutrasthan. 96. Vol. 45. Varanasi: Chaukhambha Surbharati Prakashan; Sushruta Sanhita, Edited with Susrutavimarsini Hindi commentary by Dr. Anant Ram Sharma; p. 366. [Google Scholar]
- 21. Ray, S. D. (1997). YOGIC EXCERCISES Physiologic & psychic process (1st ed., Vol. 1). JAYPEE BROTHERS.
- Bliddal H, Leeds AR, Christensen R. Osteoarthritis, obesity and weight loss: evidence, hypotheses and horizons - a scoping review. Obes Rev. 2014 Jul;15(7):578-86. doi: 10.1111/obr.12173. Epub 2014 Apr 22. PMID: 24751192; PMCID: PMC4238740.
- Akhtar B, Mahto RR, Dave AR, Shukla VD. Clinical study on Sandhigata Vata w.s.r. to Osteoarthritis and its management by Panchatikta Ghrita Guggulu. Ayu. 2010 Jan;31(1):53-7. doi: 10.4103/0974-8520.68210. PMID: 22131685; PMCID: PMC3215322.
- 24. Swetha Bm, Kulkarni M, Hullur Y, A review on Janusandhigata Vata. J AyuIntMedSci. 2024;9(2):258-262.

How to cite this article: Vidya P Gani, Padmaveer PS, Ashok Patil. Ayurveda based Non Pharmacotherapeutic Integrated Intervention in Sandhivata w.s.r. to Osteoarthritis. J Ayurveda Integr Med Sci 2024;7:212-218.

http://dx.doi.org/10.21760/jaims.9.7.32

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

Copyright © 2024 The Author(s); Published by Maharshi Charaka Ayurveda Organization, Vijayapur (Regd). This is an open-access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by/4.0/unported [CC BY 4.0]), which permits unrestricted use, distribution, and perform the work and make derivative works based on it only for non-commercial purposes, provided the original work is properly cited.