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Case Report

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Holistic Management of Sandhivata Integrating Ayurveda Medicine - A Case Study

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In the illness known as Sandhigatavata, Vata affects the joints, resulting in pain, swelling, and discomfort while moving them. Among its several causes include injury and Dhatukshaya. These days, analgesics and calcium supplements are used to treat this illness. However, it turns out to have minimal impact. The medicinal care of Sandhigatavata, which is also highly efficient in treating it, is explained in great length in Ayurvedic science. We are reporting a case of a 50-year-old woman who complained of pain over B/L knee joint and restricted movement, and unable to climb stairs. She was tested using Kellgren's radiological scale and was diagnosed with osteoarthritis (Sandhigatavata).[1] Mahayograja Guggulu, Dashmoola Kwath, Vatavidhwanshaka Rasa, Shamshamani Vati and Eranda Tail were to be administered internally, while Swedana was to be administered outwardly as Janu Basti with Mahanarayana oil for 21 days respectively. The effectiveness of the therapy was assessed using the Visual Analogue Scale for Pain, the Swelling Score, and the Womac Scale for evaluating daily routine job abilities. The visual analogue pain scale, range of motion, and capacity for daily regular tasks all showed notable improvements. The appropriate use of internal Snehana and external Swedana in this patient greatly enhanced their quality of life. As a treatment for a degenerative disease that is quite prevalent in our culture, this discovery is extremely pertinent to the current situation.[2]

Keywords: Sandhigatavata, Mahayograja Guggulu, Dashmoola Kwath, Vatavidhwanshaka Rasa, Shanshamani Vati, Snehana, Swedana

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Note



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Introduction

Sandhivata is described in the classical Ayurvedic texts as a manifestation of Vata Dosha aggravation in the Sandhis (joints), leading to pain, stiffness, and reduced range of motion. It closely resembles osteoarthritis (OA) in modern parlance. Sandhivata increasingly common due to lifestyle irregularities, aging, poor diet, and a sedentary lifestyle. Contemporary medicine symptomatic relief through analgesics, steroids, or surgical replacements, but the outcomes often have limitations or side effects. Ayurveda, however, provides a holistic alternative that not only addresses the symptoms but also aims at the root

This case study provides an in-depth exploration of a real-life clinical presentation of *Sandhivata* and its successful *Ayurvedic* management

Case Report

Patient Profile

A 50 year old female patient visited the Kaya Chikitsa OPD of J.P Institute of *Ayurveda* and Medical Science, *Ayurvedic* College and Hospital, Patna, Bihar with a chief complaint of *Ubhaya Janusandhi Shoola* with *Shotha* 1 year, the flexion and extension movement of both knee joint were restricted and Unable to climb stairs. X-Ray of both knee joint shows osteoarthritis.

Medical History: Diagnosed with osteoarthritis of both knees (confirmed by X-ray showing joint space narrowing and osteophyte formation). No history of diabetes, hypertension, or other comorbidities.

Lifestyle: Sedentary, with a history of poor dietary habits and irregular bowel movements.

Clinical Assessment

Symptoms: Severe pain (VAS score: 8/10), morning stiffness lasting ~ 30 minutes, crepitus on movement, and mild swelling in both knees.

Ayurvedic Diagnosis: Sandhigatavata with Vata aggravation

Objective Measures

- Visual Analog Scale (VAS) for pain: 8/10
- Western Ontario and McMaster Universities
 Osteoarthritis Index (WOMAC) score: 68/96

 Range of motion (ROM): Limited flexion (90° in both knees).

Disease process according to Shad Kriya Kala

1. Sanchaya (Stage of Accumulation)

The *Dosha* normally stays in a state of balance inside its own *Ashaya*, but any disruption to this condition brought on by any *Nidana* causes it to accumulate excessively within their *Ashaya* or at their original location. *Stambha Purna Koshthata* may appear at this stage because to *Vata Dosha*. Su. Su 21/12. The aforementioned *Lakshana* of *Vata Sanchaya* may be observed in patients who may eventually develop *Sandhigatavata* because of *Vata Sanchaya* at its *Mula Sthana*, or Baked. Since *Asthi* is the seat of *Vata*, it is also possible to see some of the symptoms of *Vata Vriddhi* in *Asthi*, such as *Asthi Rukshata* and *Asthi Kharata*. This is also due to *Nidana's* influence on both *Dosha* and *Dushya*.[3]

2. Prakopa (Stage of Vitiation)

Failure to take corrective measures during Sanchaya Avastha & allowed to act further, Prakopa stage starts. In this stage already accumulated Dosha get strengthened at their own place & tend to become exci. in this stage. Due to provocation of Vata, Kosthatoda & Kostha Sancharana may be manifested (Su Su 21/13). Same symptoms like Asthi Rukshata, Asthi Kharata may be seen with its severity.

3. Prasara (Stage of spread)

If the previously provocative factors are still not corrected by appropriate means, then the excited *Dosha*s pass on to the next stage known as *Prasara*. At this stage, excited *Dosha* spreads to other organs, structures and parts of the body. (Su Su 21/14). The symptoms like *Asthi Rukshata, Kharata* may appear with its severity. *Vatavriddhi* may cause *Khavaigunya* in *Asthi* and *Majjavaha Srotas*.

4. Sthana Samshraya (Stage of localization)

As a continuation of previous stages and conditions, in this stage the spreading *Doshas* become localized wherever there is *Khavaigunya* and it marks the beginning of specific disease pertaining to that structure. This stage represents the *Purvarupa* phase of disease and the interaction between the *Dosha* and *Dushya* takes place. (Su. Su. 21/15). In case of *Sandhigatavata*, Vitiated *Vata* get localized in *Khavaigunya* which is present in *Asthi* and *Majjavaha Srotas*.

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Means *Prakupita Vata* get situated in *Asthi* and *Sandhi* causing *Asthi* and *Sandhigatavata*. Here, *Purvarupa* of the diseases like occasional *Sandhishula* and *Sotha* occur.

5. Vyakta (Onset Stage)

This is the stage which gives a clear picture of a disease with its full manifestation i.e., *Rupa*. After getting *Sthana Sanshraya* in *Asthi* and *Sandhi*, *Vata* absorbs the *Sneha* from them by its *Ruksha*, *Khara* qualities and so *Vyakta Avastha* takes place with symptoms like *Shula*, *Shotha*, *Hantisandhigatah* etc.

6. Bheda (Stage of Complication)

In According to Sushruta if the proper management is not done at this stage, the vitiated Doshas or the disease may become incurable. Severe complications may take place. Sub laxation, Deformity of the joints, Loose body in joint cavity, Loss of movements of joint take place as complication of the disease. Hanti Sandhigatah occurs in the later stage of disease. Hanti Sandhigatah means Sandhivishlesha or Stambha may occur in this stage. [4]

Samprapti Ghataka

Dosha - Vata esp. Vyanavayu, Shleshaka Kapha

Dushya - Asthi, Majja, Meda

Srotas - Asthivaha, Majjavaha and/or Medovaha

Srotodushti - Sanga

Agni - Manda

Dosha - Marga-Marmasthi Sandhi

Roga Marga - Medium

Udbhavasthana - Pakvashaya

Ayurvedic Assessment

Rogi Pariksha

1. Prakriti: Vata-Pitta

Sara: Asthi-Sara moderate
 Samhanana: Madhyama
 Satmya: Madhyama

5. Satva: Avara

6. Aharashakti: Alpa 7. Vyayamashakti: Alpa

Samprapti Ghataka

 Nidana: Jara, improper diet, Vata-provoking habits

■ **Dosha:** Vata dominant

Dushya: Asthi and Majja Dhatu

• Srotas: Asthivaha and Majjavaha Srotas

Srotodushti: Sanga and Vimargagamana

Roga Marga: MadhyamaAdhisthana: Janu Sandhi

Assessment Criteria

1. Sandhishoola (Pain in Joints)

SN	Severity of Pain Grade		
1.	No Pain	0	
2.	Mild pain	1	
3.	Moderate but no difficulty in moving	2	
4.	Slight difficulty in moving due to pain	3	
5.	Much difficulty in moving the bodily parts	4	

2. Vatapurnadritisparsa (joint crepitations)

SN	Severity of Pain Grade	Grade
1.	No crepitus	0
2.	Palpable crepitus	1
3.	Audible crepitus	2
4.	Always audible crepitus	3

3. Sandhi Shotha (joint swelling)

SN	Severity of Pain Grade	Grade
1.	No swelling	0
2.	Mild swelling	1
3.	Moderate swelling	2
4.	Severe swelling	3

4. Prasaran-Akunchana Pravritisa Vedana (pain during flexion and extension of joint)

SN	Severity of Pain Grade	Grade
1.	No pain	0
2.	Pain without winching of face	1
3.	Pain with winching of face	2
4.	Prevent complete flexion	3

Materials and Methods

SN	Aushadha	Dose	Duration	Anupana
1.	Mahayograja Gugglu	500 mg	BD	Lukewarm water
2.	Dashmoola Kwath	30 ml	BD	Warm Water
3.	Vatavidhwanshaka Rasa	1 Tablet	TDS	Water
4.	Samshamani Vati	500mg	BD	Lukewarm water
5.	Eranda Tail	10 ml	HS	Warm Milk

For the present study, the following materials are required for *Janu Basti* therapy session-

- 1. Masha (black gram) flour 1 kg
- 2. Mahanarayana Taila- 500ml
- 3. Small piece of sponge 01
- 4. Water as per requirement

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Methods

Making Mashapisti, or black gram paste, by adding adequate water is the first stage in creating Janubasti. After that, the patient is told to sit up straight on the table and bend their knees. The knee joint is suitably exposed, and the lower limbs get a gentle Abhyanga. Mashapisti is then applied as a circular boundary wall that is 4 Angula (about 4 inches) high over the knee joint. After letting Mashapisti's circular boundaries settle for five to ten minutes, this is known as Basti Yantra. Precautions should be taken in case the Basti Yantra spills oil. The Basti Yantra is filled with hot Mahanarayana Taila using a small piece of sponge till it reaches the level of two Angula. The temperature of the oil should be suitable for the patient. As the oil cools down over time, warm oil should be supplied to keep it at a consistent temperature. It takes half an hour to finish this process. After that, oil is drained from the Basti Yantra and the Masha Pisti border wall is taken down.[5]

Treatment Protocol

The patient was prescribed a comprehensive Ayurvedic treatment plan for 60 days, combining oral medications, external therapy, and lifestyle modifications. The following interventions were used:

- **1. Mahayograja Guggulu** (500 mg, 2 Tablets twice daily after meals):
 - A classical Ayurvedic formulation containing Guggulu (Commiphora mukul), Triphala, and metals like iron and mercury in purified form. It is known for its anti-inflammatory, analgesic, and Vata-pacifying properties.
 - Role: Reduces joint inflammation, alleviates pain, and supports cartilage health.
- **2. Dashmoola Kwath** (30 ml with 120 ml warm water, twice daily before meals):
 - A decoction of ten roots (Dashmool) with potent anti-inflammatory and Vata-balancing effects.
 - Role: Relieves joint stiffness and improves circulation to the affected joints.
- **3. Vatavidhwanshaka Rasa** (125 mg, 1 tablet thrice daily with warm water):
 - A herbo-mineral formulation containing Shuddha Parad (purified mercury), Shuddha Gandhak (purified sulfur), and herbs like Pippali (Piper longum).

- Role: Pacifies aggravated Vata, reduces pain, and supports joint lubrication.
- **4. Samshamani Vati** (500 mg, 2 tablets twice daily after meals):
 - Contains Giloy (Tinospora cordifolia), known for its immune-modulatory and anti-inflammatory properties.
 - Role: Reduces Ama accumulation, enhances immunity, and supports tissue repair.
- **5. Eranda Tail** (Castor Oil) (10 ml with warm milk at bedtime):
- A natural laxative and *Vata*-pacifying oil with anti-inflammatory properties.
- Role: Improves digestion, eliminates *Ama*, and reduces joint pain.

6. Janu Basti (Daily For 21 Days):

This is a specific process that is especially advised for Janu Sandhigatavata in Ayurveda. Janu Basti is not specifically mentioned or described in the classic Ayurvedic scriptures. It is similar to an Ayurvedic therapeutic massage. Janubasti might be considered Bahirparimarjana Chikitsa as it is a kind of Swedana and Bahya Snehana (using oil externally and sudating). However, some individuals also consider Janu Basti to be Snigdha Sweda. Janubasti uses a variety of medicinal oils, depending on the illness. Mahanarayana Taila, a well-known Ayurvedic composition, has been recommended for the treatment of a number of Vatavyadhi. Janu Basti with Mahanarayana Taila has been selected for the present case study[6].

Results

In the J.P Institute of Ayurveda and Medical Science, *Ayurvedic* College and Hospital, Patna, Bihar, within 21 days, the patient had relief from *Sandhishoola* and *Sandhishotha*. The patient's crepitus subsided after 15 days of therapy. The patient had symptomatic Relief from all of their most severe complaints.

At 21 Days:

■ Pain (VAS): Reduced to 5/10

■ WOMAC score: 48/96

■ ROM: Improved to 110° in both knees

■ Stiffness: Reduced to ~10 minutes in morning

Swelling: Mildly reduced

SN	Aushadh	Before T/t	After T/t
1.	Sandhishoola (Pain in Joints)	2	0
2.	Vatapurnadritisparsa (joint crepitations)	2	1
3.	Sandhi Shotha(joint swelling)	3	1
4.	Prasaran-Akunchana Pravritisa Vedana(pain	1	0
	during flexion and extension of joint)		

Discussion

Direct damage, excessive walking or physical activity, overindulging in rich meals, and stifling natural desires are some prominent reasons that worsen *Vata Dosha*. As Vata gets vitiated, its *guna* (properties), including *Ruksha* (dry), *Sheeta* (cold), *Laghu* (light), and *Chala* (moving), likewise rise from their typical levels in different combinations. It is advised to employ herbs and formulations with opposing Gunas, such as Sneha (oily), Ushna (hot), Guru (heavy), and *Sthira* (stability), to restore vitiated Vata *Dosha*. According to the development of *Vatavyadhi*, exacerbated *Vata* fills the voids in the body's channels and components.

Acharya Chakrapani states that this empty region is only the area of the body where Guna, like Sneha, etc., are absent or deficient. In Sandhigatavata, Ruksha (dry) and Shita (cold) are the main Gunas that are amplified, leading to Dhatu Kshaya (joint degeneration).

In this case study, the patient first suffers from severe joint pain and edema. After two sessions, Janu Basti considerably reduces these problems. There is also a reduction in the first audible joint crepitations after Janu Basti. One of the most prevalent Sandhigata *Vata* features is joint discomfort during movement. This symptom significantly improves after two sessions of Janubasti treatment. This study shows that, Dashmoolakwath, and Janubasti totally reduce joint edema. It may be the outcome of Dashmoola, as the plants in it mostly contain Shothahara qualities. [7]

A Vata Dosha imbalance causes Sandhivata, also called osteoarthritis, a degenerative disease marked by deterioration, aging, and weakening of the cartilage surrounding joints, especially the knee joints. Stiffness and pain are caused by increased friction between the bones at the joint when the adhering cartilage deteriorates. This medication aids in joint lubrication and structural integrity maintenance.

When taken consistently, *Mahayograj Guggul* helps regulate *Vata Dosha* and is especially useful in treating and preventing age-related degenerative disorders like osteoarthritis.[8]

Probable Mode of Action of Janu Basti (Local Oil Dipping at Knee Joint) on Sandhigatavata

When procedure starts, medicated oil crosses cell membrane through skin, and functions phospholipids will increase and act as a carrier for various cellular elements or impurities which are responsible for formation of diseases. The lukewarm oil will increase temperature in localized area, by which vasodilatation will happen and the blood circulation will increase and necessary oxygen and nutrition materials are supplied and free radicals which are responsible for the disease will be removed. This therapy produces a sedative effect because of pharmacological action of used medicine like anti- inflammatory action. Analgesic action, muscle relaxant, etc. and acts as a counter-irritant which is the thermal stimulus and may affect pain sensation. It also induces muscles relaxation and increases the efficiency of muscle activity as the increased blood supply ensures the optimum condition for muscle contraction; it nourishes the muscle, bone and nerve, cartilage and lubricates the joint, and stops the degeneration of the knee joint because of its therapeutic action of the medicine and procedure[9]. Taila serves as a fundamental component of Janubasti therapy, providing multiple benefits that contribute to the alleviation of symptoms associated with Sandhigatavata. Through its warming, lubricating, and therapeutic properties, Taila not only enhances local blood circulation and joint function but also plays a critical role in balancing Vata Dosha, making it an essential element in the management of knee osteoarthritis in Ayurveda.

Conclusion

This case study demonstrates the efficacy of a tailored Ayurvedic protocol in managing osteoarthritis. The combination of Mahayograja Guggulu, Dashmoola Kwath, Vatavidhwanshaka Rasa, Samshamani Vati, Eranda Tail, and Janu Basti significantly reduced pain, stiffness, and swelling while improving joint mobility and quality of life. Further large-scale studies are warranted to validate these findings and establish standardized Ayurvedic protocols for osteoarthritis management.

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