



SIGNIFICANCE OF AYURVEDA DIAGNOSIS IN MANAGEMENT OF DISEASES W.S.R. TO AVASCULAR NECROSIS: A CASE REPORT

ARUNDHATI MUKHEDKAR^{1*} ANUP THAKAR² RAHUL S GANDHI³

^{1*} PhD Scholar, Panchakarma, ITRA, Jamnagar

² Director & HOD(Panchakarma), ITRA, Jamnagar

³ Assistant Professor (Panchakarma), ITRA, Jamnagar

Corresponding Author Email: mukhedkararundhati7@gmail.com Access this article online: www.jahm.co.in

Published by Atreya Ayurveda Publications under the license CC-by-NC-SA 4.0

ABSTRACT:

Avascular necrosis (AVN), also known as osteonecrosis or aseptic necrosis or ischemic bone necrosis, is characterized by the death of cellular components of bone, secondary to an interruption of the subchondral blood supply. If not stopped, this process eventually causes the bone to collapse. This condition is majorly correlated with *Asthi-Majjagata Vata*, in Ayurveda. The case presented here is of a 32 year male patient complaining of pain & stiffness of back and bilateral (B/L) hip joint, left knee joint pain and bloating of abdomen. The MRI report suggested the case to be of AVN Stage- II of B/L hip joint. But, the symptoms were suggestive of *Amavata* (Rheumatism), according to Ayurveda. Thus, the treatment of *Amavata* was followed. The case study emphasizes the significance of the clinical diagnosis for the betterment of the disease condition, and not just correlational diagnosis.

Keywords: AVN, *Amavata*, *Vaitarana Basti*, diagnosis.

INTRODUCTION:

The exact pathophysiology of AVN has to be explicated, but it is characterized by the vascular insult to the blood supply.^[1] The most commonly affected joint is the hip joint. According to the severity of the disease, its stages are as follows- 0, I, II, III, IV. The necessity for surgical intervention is underlined, as the stage proceeds. It is commonly correlated with the *Asthi-Majjagat Vata*; but the clinical diagnosis of Ayurveda should be based on the holistic view of the case, and not merely on the reporting and correlation. After detailed examination, the reported AVN cannot be necessarily correlated with a specific disease, as transpired in the case presented here. The patient was diagnosed of *Amavata*, and was treated for the same. *Amavata* is the result of the indigested metabolite-*Ama* (undigested material) being circulated in the whole body, causing the pain and stiffness of the joints. Thus, treatment protocol is *Langhana* (depleting therapy); *Pachana* (enhancing digestion)- *Deepana* (enhancing metabolic fire), *Swedana* (sudation therapy) and *Shodhana* (bio-cleansing therapy), to avoid the new formation of *Ama* and clear the already present.

Case description:

A 32-year-old Hindu male visited OPD, complaining of gradual lower back ache & stiffness, bilateral hip joint pain with stiffness and left knee joint pain since nine months. He had history of COVID-19 infection one and half years ago. He was admitted in the hospital and treated with the conventional treatment using corticosteroid, for 20 days. No surgical history was reported. He had no co-morbidity or ongoing medication, no allergy, addiction; and no family history for any disease.

The *Ashtavidha Parikshana* was followed.

Nadi(pulse)-*Guru* (heavy), *Manda* (mild),*Vata Pradhana* (dominant)

Mutra (urine)- 5-6 times/day;

Mala (excreta)- 1/day, semisolid;

Jivha (tongue)-*Sama*

Druk (eyes and eyesight)-*Samyak* (normal);

Sparsha (tactile examination) - *Anushna Sheeta* (warm),

Shabda (voice and sounds)- Normal,

Akruti (body stature) - *Madhyama*.

Clinical Findings

Complaints-1) Pain, stiffness of the joints, especially of the lumbosacral joint, hip joints and knee joint,

2)Bloating

Materials And Methods

Diagnostic Assessment

Pain was examined by the VAS (visual analogue scale), and stiffness by range of

motion. Harris Hip Scale was used to find the result in the subjective parameters specific to AVN. MRI reported AVN Stage II.

From Ayurvedic perspective, it was diagnosed as *Amavata*.

Table 1:Therapeutic Intervention

Procedure	Medicine with dosage & frequency	Anupana	Days
<i>Sthanika Abhyanga-Nadi Swedana (Kati, Udara)</i>	<i>Sahachara Taila</i>	-	8
<i>Vaitarana Basti & Sahachara Taila Anuvasana Basti</i>	350 ml-Vaitarana Basti 120 ml-Sahachara Taila	-	8 days
<i>Shamana Aushadhi</i>	<i>Yogaraja Guggula</i> -250 mg TDS After food	Warm Water	For 1.5 months

Follow up and outcome

Table 2: Pain

Date	VAS Score
30/07/2022	7
07/08/2022	1(Knee Joint) 0(Other joints)
14/08/2022	1
07/09/2022	1

Table 3:Harris Hip Scale

Sr.No	Criteria	BT	AT	Follow-up 7/9/22
1	Pain	20	44	44
2	Limp	5	8	11
3	Support	7	11	11
4	Distance walked	8	11	11
5	Sitting	3	5	5
6	Enters public transportation	0	0	0
7	Climbing stairs	1	4	4

8	Put on shoes & socks	0	4	4
9	Absence of Deformity (All yes =4; Less than 4 =0)	0	0	0
10	Range of Motion <ul style="list-style-type: none"> • Flexion (140°) • Abduction (40°) • Adduction (40°) • External Rotation (40°) • Internal Rotation (40°) 	100 30 20 20 10	130 30 30 30 20	140 30 30 30 30
11	Range of Motion Scale	4	5	5
	Total	48	92	95

DISCUSSION-

The major complaint in *Amavata* is pain and stiffness of joints.^[5] Major joint to be involved is the lumbosacral/thoracic outlet; as mentioned-*Trik Sandhi Praveshaka*.^[6] (sacrum or region around shoulder girdle). According to the *Dosha* involvement, it is mentioned: *Daha* (burning), *Raga* (redness) in *Pitta*, *Shoola* (pain) in *Vata*, *Staimitya*, *Guruta* (heaviness), *Kandu* (itching) in *Kapha* is found.^[7]

The presented case showed the symptoms of *Shoola* (pain), *Stabdhat* (stiffness) of the lower back, and B/L hip joint and knee joint. So, it was diagnosed as *Amavata* (rheumatism) with the dominance of *Vata Dosha*.

As patient had previous history and chronicity of pain, he was treated with *Basti*

(therapeutic enema) treatment. *Vaitarana Basti* is advised for- *Amavata* (rheumatism), *Shula* (pain), *Anaha* (non passage of flatus and faeces).^[8] The name, *Vaitarana* suggests that it bring back the dead to live.^[9] *Vaitarana Basti* has very potent cleansing action; which is required in the condition of *Amavata* to check off the closed channels due to *Ama* and restore their normal functions.

Overall, the *Vaitarana Basti* is *Vata-Kaphahara*, *Ushna* (hot in potency), *Deepana* (enhancing metabolic fire), *Kledaharana* (removal of moistness) and *Anulomana* (mild purgation) in quality. These properties of *Vaitarana Basti* are antagonists to the *Kapha* and *Ama*, and help in its digestion, if less in amount; and *Anulomana* (mild purgation) and

Nirharana(excretion), if more amount of *Dosha* are present. *Saindhava Lavana* and *Gomutra* are *Teekshna* (sharp) in nature, which break the *Sanghat/Sanga* (conglomeration of *Dosha*), liquefies the viscous matter and also help the *Basti* to reach upto the molecular level. They are also irritants in nature, which help in elimination of waste material. The use of jaggery in place of honey, highlights the importance of formation of nearly isotonic solution to permeate the water or *Kleda* (moistness) easily.

When the *Vaitarana Basti* was used for 3 days continuously, pain in knee joint was increased, possibly due to the *Aama Pachana*; and temporary increase in *Vata Dosha*. It was treated with *Anuvasana Basti* (therapeutic unctuous enema) of *Sahachara Taila*, for 2 days. The knee joint pain was reduced by 40%. Then, again the *Vaitarana Basti* was started. It was given for 2 days; and the *Basti* treatment was ended with *Anuvasana Basti* of *Sahachara Taila*. As the *Amavata* was diagnosed with *Vata Pradhanya*, the *Vata Vriddhi* was possible to occur; and was thus, treated with *Snehabasti*, with *Sahachara Taila*.

Overall, the combination of *Sahachara Taila* is balanced, treating all three *Dosha*, and the combination is of *Deepana* (enhancing metabolic fire)-*Pachana* (enhancing digestion) drugs as well as the *Balya* (strengthening)

drugs. Such a combination is better to be used in the condition, where *Vata* can be pacified along with the *Pachana* (digestion) of other *Dosha*.

CONCLUSION

Thus, the case study signifies the importance of the diagnosis in the Ayurvedic purview for the finalization of the treatment protocol accordingly. The *Yoga Basti* pattern in classical texts is an illustration for the *Basti* Schedule, and not a strict indication to be followed. The condition of *Dosha* should be examined to decide the nature of *Basti*. And, relief within a short period of time, is possible with Ayurveda, provided the diagnosis of disease is confirmed. A single case study is not enough to conclude any statement about the various possibilities of the disease correlations; but one-to-one disease correlation needs to be avoided. Further survey study with the diagnosed reported cases and their diagnosis from Ayurvedic pretext can be considered to find the broad spectrum of diseases under single reported diagnosis.

REFERENCES:

1. Hari Sadasiva Sastri Paradakara(editor). Ashtang Hrudaya of Vagbhata, Sutrasthana, chapter 1, verse no.22, Varanasi; Chaukhamba Sanskrit Sansthana, 2012:14.
2. Hari Sadasiva Sastri Paradakara(editor). Ashtang Hrudaya of Vagbhata, Sutrasthana, chapter 1, verse no.22, Varanasi; Chaukhamba Sanskrit Sansthana, 2012:14.

Arundhati Mukhedkar, Anup Thakar, Rahul S Gandhi. Significance of Ayurveda Diagnosis in management of diseases w.s.r. to Avascular Necrosis: A Case Report. Jour. of Ayurveda & Holistic Medicine, Vol.-XI, Issue-VII (July 2023).

3. Brahmanand Tripathi(editor). Madhava Nidana Of Madhavakara, Chapter 25, verse no.5, Varanasi;Chaukhamba Surabharati Prakashana,2018:464.
4. Brahmanand Tripathi(editor). Madhava Nidana Of Madhavakara, Chapter 25, verse no.5, Varanasi;Chaukhamba Surabharati Prakashana,2018:464.
5. Brahmanand Tripathi(editor). Madhava Nidana Of Madhavakara, Chapter 25, verse no.11, Varanasi;Chaukhamba Surabharati Prakashana,2018:467.
6. Ramnath Dwivedi(editor). Chakradatta of Shri Chakrapanidutta, Chapter 73, verse no.32,Varanasi;Chaukhamba Sanskrit Bhawan,2019:455.
7. Wasedar VS, Ragi Madhushree, Grampurohit PL, Versatility of Vaitarana Basti-A retrospective study. IAMJ 2018;2(2):916-922.
8. Dewangan Neetu, Shrivas Sandeep,Khichariya S.D.,Role of Vaitarana Basti in the Management of Amavata w.s.r.to Rheumatoid Arthritis-A Review Article. IAMJ 2018;6(7):1448-1455.
9. Dewangan Neetu, Shrivas Sandeep,Khichariya S.D.,Role of Vaitarana Basti in the Management of Amavata w.s.r.to Rheumatoid Arthritis-A Review Article. IAMJ 2018;6(7):1448-1455.

CITE THIS ARTICLE AS

Arundhati Mukhedkar, Anup Thakar, Rahul S Gandhi. Significance of Ayurveda Diagnosis in management of diseases w.s.r. to Avascular Necrosis: A Case Report. *J of Ayurveda and Hol Med (JAHM)*. 2023;11(7):105-110

Conflict of interest: None

Source of support: None