VAITARAN BASTI IN –AMAVATA A PILOT STUDY

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ABSTRACT
Amavata is the most crippling of the joint disease. It occurs throughout world in all the climate & all ethical groups. Ama associated with aggregated vata play dominant role. The Clinical features Amavata such as pain, swelling, stiffness, fever, general debility are most identical mentioned in classical text. Vaitarana Basti is very effective in Bahudosh & Lindosh Avastha. It is used in new & old Amavata as well because it brings Doshas from Shukha to Koshata & remove it from Gudmarg & gives relief. A study was conducted in 10 patients Clinically diagnosed with Amavata. All Patients enrolled in study after an informed consent were subjected to RA test & CRP test before & after treatment. Vaitarana Basti approximately 480 ml, having ingredients Gomutra 160-200 ml, Gudha 60-90 ml, Saingadav 5-10 grms, Tiltail 100 ml, Chincha Shrarsa 60-100 ml was administered for 8 days on empty stomach. Vaitarana Basti showed significant result (P<0.05) in Amavata.

KEYWORDS: Amavata, Vaitaran Basti, Shukha & Kostha.

INTRODUCTION
Pain is an agonizing symptom experienced by human beings which is many a time inducing distress.

Amavata is one such a disease of chronic joint pain & body pain accompanied by swelling of some or all of the synovial joints, Angamarda (Body Pain), Aruchi, (Loss of Taste), Thrishana (Thirst), Alasya (Lack of enthusiasm), Gourava (heaviness), Klama (tiredness without doing work) Apaka (indigestion) & fever. In the letter stage pain may begin to migrate from place to place with Vrushchika danshavat Vedana (intense stinging type of pain) and burning sensation. The clinical presentation of Amavata closely mimics with the special variety of Rheumatologic disorders called rheumatoid arthritis, in accordance with their similarities on clinical features, like multiple joint pain, swelling, stiffness, fever, general debility. This disease is chronic debilitating affects mostly in the middle aged group, 80% of patients suffering with this disease in between the age of 35 to 50 years, Women are affected approximately 3 times more often than men. Pregnancy is often associated with remission of the disease in the last trimester with subsequent relapses after delivery. About 10% of the patients are affected first degree relative. A genetic susceptibility to altered immune responses probably is important in Rheumatoid Arthritis. Management of Rheumatoid Arthritis includes use of analgesics, Steroids for the pain management which are having several adverse reactions and drug dependency. Thought Ama (Product due to indigestion of food) and vata are the initiating factors in its pathogenesis progress and exacerbation make the disease more Kashtasadhya (difficulty to cure) due to vitiation of Tridosha and involvement of Gambhira Dhatu like Asthi and Madhyama Rogamarga like Sandhi. Basti helps to correct the Vata Dohsa and to relieve pain further Vaitarana Basti a type of Basti specifically prescribed for the treatment of Amavata.

Amavata is a disease of Chronic Joint pain & body pain compared to Rheumatoid Arthritis explained in Modern Medicine.

Vaitaran Basti Mentioned by Vangasena & Chakradatta a cost effective bastiyoga.

Aim & Objectives
Evaluation of the role of Basitkarma in Amavata.
Evaluation of the role of Vaitarran Basti in Amavata.

MATERIALS AND METHOD
Source of Data – Patients who were fulfilling the sign & symptoms & diagnostic criteria of Amavata (Rheumatoid Arthritis) were selected from the OPD & IPD section Govt. Ayurved Hospital Nanded, Maharashtra, irrespective of sex, religion & socio economic status.

Diagnostic Criteria
Patients having features of Amavata like Angamarda (Body Pain), Aruchi, (Loss of Taste), Thrishana (Thirst), Alasya (Lack of enthusiasm), Gourava (heaviness),...
Klama (tiredness without doing work) & Apaka (indigestion) & jwara (Fever).

The base of criteria laid down by American Rheumatism Association (ARA) was also taken into consideration as follows. Diagnosis of Rheumatoid Arthritis is made with 4 or more criteria.
- Presence of Rheumatoid Factor
- CRP test
- Morning stiffness lasting for > 1 hour
- Arthritis of hand Joints.
- Arthritis of more joints areas.

Inclusion Criteria
- Patients aged between 20-60 years
- Patients having sings & symotoms of Amavata & Rheumatoid Arthritis.
- Patients fit for Basti Karma.

Exclusion Criteria
- Age less than 20 years & more than 60 years.
- Patients having other systemic disorders

Patients not fit for Basti Karma.

Criteria for Assessment
The Following parameters were assessed before & after the treatment. The following scoring pattern was adopted.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain in the Joint</td>
<td></td>
</tr>
<tr>
<td>No Pain</td>
<td>0</td>
</tr>
<tr>
<td>Mild pain comes occasionally</td>
<td>2</td>
</tr>
<tr>
<td>Moderate pain slight difficulty in joint movement, appears frequently</td>
<td>3</td>
</tr>
<tr>
<td>Severe pain requires medication &amp; may remain throughout the day.</td>
<td>4</td>
</tr>
<tr>
<td>Severe pain, disturbing sleep &amp; requires strong analgesic</td>
<td>5</td>
</tr>
<tr>
<td>Swelling of the Joint</td>
<td></td>
</tr>
<tr>
<td>No Swelling</td>
<td>0</td>
</tr>
<tr>
<td>Slight Swelling</td>
<td>1</td>
</tr>
<tr>
<td>Moderate Swelling</td>
<td>2</td>
</tr>
<tr>
<td>Severe Swelling</td>
<td>3</td>
</tr>
<tr>
<td>Stiffness of the Joint</td>
<td></td>
</tr>
<tr>
<td>No Stiffness or Stiffness lasting for 5 minutes</td>
<td>0</td>
</tr>
<tr>
<td>Stiffness lasting for 5 minutes to 2 hours.</td>
<td>1</td>
</tr>
<tr>
<td>Stiffness lasting for 2 hours to 8 hours</td>
<td>2</td>
</tr>
<tr>
<td>Stiffness lasting for more than 8 hours.</td>
<td>3</td>
</tr>
<tr>
<td>Tenderness of the Joint</td>
<td></td>
</tr>
<tr>
<td>No Tenderness</td>
<td>0</td>
</tr>
<tr>
<td>Subjective experience of tenderness</td>
<td>1</td>
</tr>
<tr>
<td>Wincing of face on pressure</td>
<td>2</td>
</tr>
<tr>
<td>Withdrawal of affected parts on pressure</td>
<td>3</td>
</tr>
<tr>
<td>Resists of touch</td>
<td>4</td>
</tr>
</tbody>
</table>

Materials Used
In the present study following drug were utilized.

Vaitarana Basti
Mentioned by Vangasena & Chakradatta. Got its name due to the specific ability to cure disease.

Indications – Gridhrasi, Khora Amavata, Uristambha, Vishama jwara, Kati-prishtashoola, Urushotha, Janusankocha & Klaibya.

Ingredients of vaitarana Basti – Guda (Jaggary), saindhava lavan (Rock salt), Tila taila (Sesame oil), Chincha (Tamarindus indica) & Gomutra (Cow urine).

Saindhava lavana (Rock salt) 1 Karsha (12 gm.)
Chincha (Tamarindus indica) 1 Pala (50 gm.)
Guda (Jaggary) ½ Pala (25 gm.)
Tila taila (Sesame oil) (50 ml.)
Gomutra (Cow urine) 1 Kudava (200 ml)

Method of Preparation
- Mix Guda (25 gm.) in water & evaporating required quantity of water so as to make the solution dense to be used as honey – 60ml
- Saindhava lavana is added - 12gm.
- Moorchita Tilatala is added – 50 ml.
- Chincha (Tamarindus indica) is put first in hot water, mixed well & filtered. Then the liquid is added to the above mixture -60ml.

Lastly 200ml. of Gomutra (Cow urine) was added slowly & mixing continued so as to have uniform Basti Dravya.
Time of Administration
Niruha Basti administered in the morning hours empty stomach.

Duration
8 days.

Methodology
- Prospective Clinical trial.
- Study was done in a single group.
- Patients age between 20-60 years.
- All the patients were administered vaitaran basti for 8 days.
- Placebo Capsules were given during the follow up period.
- Sample size - 10 patients.

∆ Duration – 8 days & follow up for 1 month.

OBSERVATION AND RESULT
The data were collected as follows
Demographic Data
Data related to etiological factors type & duration of chief complaints
Data related to subjective & objective parameters before & after treatment.

Statistical analysis & assessment for response.

Out of 10 patients maximum 80% patients were female, 70% patients in between the age group of 35-50 years, 50% patients were Hindu, 76% patients were married, 51% were Vata Kapha Prakriti, 53% were Kroora Kostha & 78% patients were non vegetarian.

<table>
<thead>
<tr>
<th>Parameters</th>
<th>M.B.T</th>
<th>M.A.T.</th>
<th>M. diff.</th>
<th>M %</th>
<th>SD</th>
<th>SE</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain</td>
<td>3.8</td>
<td>1.4</td>
<td>2.4</td>
<td>59.64</td>
<td>0.59</td>
<td>0.15</td>
<td>12.60</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Swelling</td>
<td>2.8</td>
<td>0.73</td>
<td>2.07</td>
<td>73.80</td>
<td>0.79</td>
<td>0.20</td>
<td>10.20</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Stiffness</td>
<td>1.66</td>
<td>0.46</td>
<td>1.2</td>
<td>72</td>
<td>0.56</td>
<td>0.144</td>
<td>8.26</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Tenderness</td>
<td>3.33</td>
<td>1.26</td>
<td>2.07</td>
<td>62</td>
<td>0.70</td>
<td>0.18</td>
<td>11.37</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>CRP</td>
<td>2.94</td>
<td>1.23</td>
<td>1.71</td>
<td>58</td>
<td>0.46</td>
<td>0.11</td>
<td>14.97</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>RA Factor</td>
<td>3.33</td>
<td>1.26</td>
<td>2.07</td>
<td>62</td>
<td>0.70</td>
<td>0.18</td>
<td>11.37</td>
<td>&lt;0.001</td>
</tr>
</tbody>
</table>


The mean score of pain was 3.8 before treatment which reduced upto 1.4 after treatment with 59.64% relief. In swelling mean score was 2.8 before T/t which reduced upto 0.73 after T/t with 73.80% relief. Whereas the mean score of stiffness was 1.66 before T/t which reduced up to 0.46 after T/t with 72% relief & in Tenderness mean score was 3.33 before T/t which reduced up to 1.26 after T/t with 62% relief in CRP mean score was 2.94 before T/t which reduced up to 1.23 after T/t with 58% relief RA factor mean score was 3.33 before T/t which reduced up to 1.26 after T/t. with 62% relief.

DISCUSSION
The Basti therapy is considered as prime in the treatment of Amavata diseases, Saindhava Javana by its Sukshma and Tikshna Properties, it helps to pass the drug molecule in systemic circulation through mucosa. Thus it helps the Basti Dravya to reach up to the molecular level. It is also helpful for the elimination of waste due to its irritant property. It is capable of liquefying the viscid matter and breaking it into minute particles. In this Basti instead of honey (Madhu) Jaggary was used. It along with Saindhava makes homogenous mixture, to form a solution having properties to permeable the water easily. The retention of the irritative substances may be favored by making its solution as nearly isotonic as possible by using colloidal fluids. Here, Purana Guda should be taken as it is Laghu, Pathya, Anabishhyandi, Agnivardhaka and Vatapittaghna. It also helps in carrying the drug upto micro-cellular level. In this Basti, Tila Taila mixed with the solution of jaggary and Saindhava help in forming the uniform mixture. Chincha is having Vata-kaphashamka, Ruksha and Ushna Properties. These properties of the Chincha make it useful for the disease Amavata. In Vaitarana Basti, the Gomutra is chief content, which owing to its katu Rasa, Katu Vipaka, Ushna Virya, Laghu Rausha and Tikshan Gunapacify the Kapha. It is having Tridosahara, Agnideepana, Pachana, Srotovishodhana and Vatanulomana properties.

CONCLUSION
Amavata a commonest joint disorder usually seen in the middle age. The clinical signs and symptom of the Amavata can be compared to Rheumatoid arthritis of the modern science. It is noticed that relief in sings and symptom of Amavata was found in signal group.

Vaitaran Basti is an effective treatment in the management of Amavata & it shows long lasting result.

On both vataj, Pittaja, Kafaja Amavata, Vaitaran Basti found effecting in managing the chief & associated complaints.

Vaitaran Basti can be administered without prior snepapana, swedana, or virechana.

Complications are seldom occurring during & after the course of basti Karma.

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