

ROLE OF JANUBASTI AND MAHAYOGRAJ GUGGULA IN THE MANAGEMENT OF JANUSANDHIGATA VATA (KNEE OSTEOARTHRITIS)

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ABSTRACT

Osteoarthritis of the knee joint is the most common joint disorder seen in old age people. It limits everyday's activities and make the person individual handicap. No treatment is available in modern medicine to cure the disease. In Ayurveda osteoarthritis can be considered as *Sandhigata vata*. *Sandhigata vata* is described under *vatavyadhi* in *Ayurvedic Samhitas*. As the local *samprapti sthan-sansraya* is having quite major importance in *janusandhigata vata* (knee osteoarthritis) and *sthanic snehana swedana* has been recommended in *vata vyadhi chikitsa* by *Acharya Vagbhata*¹. So the aim of this study was to evaluate the role of *sthanic snehana swedana* as *Janubasti* with *Shacharadi taila*² along with popular *vatashamak* and *rasayana kalpa Mahayogaj guggula*³ which has been used in VPAMC, Sangli. In the present study 60 patients suffering with *Janusandhigata vata* were selected and divided in to three groups. Statistical analysis showed better result in reliving the sign and symptoms of *Janusandhigata vata* in all three groups. In comparison Group C (*Mahayograj Guggula + Janubasti*) showed better result than Group A (*Mahayograj Guggula*) and B (*Janubasti*) and Group B showed better result than group A

Keywords: *Janusandhigata vata*, Knee Osteoarthritis. *Janubasti*, *Mahayograj guggula*

INTRODUCTION

Knee joints carry our body weight with maximum movements and are under constant stress as they participate in all the activities which we do through the day. In India 15 million adults are affected by arthritis every year and percentage of knee osteoarthritis is very high. Pathological changes can be seen very frequently in weight bearing joints in the X-ray of most of the people with age above 40 years along with associated symptoms of joint pain, stiffness, swelling & restricted movements. It limits daily activities such as walking, standing, sitting, bathing etc. In Allopathy

anti inflammatory, analgesic drugs are the options for the treatment of osteoarthritis. This do not gives satisfactory results and also causes great adverse effect. The disease *Sandhigata vata*⁴ is defined as a disease of *sandhi* in which the symptoms *shula*, *shotha*, *sashula kriya* and *grahata* can be observed in affected *sandhi*⁵. Considering these symptoms, one broad spectrum remedy was necessary and assuming that *Mahayograj Guggula* along with *Janubasti* may be beneficial. *Vata dosha* is exclusively responsible for any pain of the body. Hence the drug should be act on *vata*

dosha as well as it should be broad spectrum. As the local *samprapti sthan-sansraya* is having quite major importance in *Janusandhigata vata* (knee osteoarthritis) and *sthanic snehana swedana* has been recommended in *vata vyadhi chikitsa* by Acharya Vagbhata. *Janubasti* is type of *bahiparimajan chikitsa*⁶ mentioned by Charaka. It is stated in Ayurvedic texts that *Mahayograj Guggula* not only beneficial for pain but many other *vata roga pitta roga* and *kapharogas*⁷. For this study patients were selected and divided in to three groups for the comparison purpose.

AIMS AND OBJECTIVES

1. To evaluate efficacy of *Janubasti* in the management of Knee Osteoarthritis.
2. To evaluate efficacy of *Mahayograj guggula* in the management of Knee Osteoarthritis.
3. To evaluate efficacy of combined treatment of *Janubasti* and *Mahayograj guggula* in the management of Knee Osteoarthritis.

MATERIALS AND METHODOLOGY

Source

The following parameters were assessed before and after the treatment in all three groups.

Pain in knee joints (*Sandhi shula*)

Severity of pain	Grading
No pain	0
Mild pain,	1
Moderate pain, no difficulty in walking.	2
Slight difficulty in walking due to pain.	3
Severe difficulty in walking due to pain	4

Stiffness of knee joints (*Sandhi graha*)

Severity of Stiffness	Grading
No stiffness	0
Mild stiffness	1
Moderate stiffness	2
Severe stiffness	3

Patients who were fulfilling the sign and symptoms and diagnostic criteria of *Janusandhigata vata* (Knee Osteoarthritis) were selected from the OPD and IPD of *kaychikitsa* dept. Vasantdada Patil Ayurvedic Medical College Sangli.

Diagnostic criteria

The patient having the clinical features of *Janusandhigata vata* according to Ayurvedic classic like *sandhishula*, *sandhishotha*, *sandhigraha*, *kriya kashtata*, *kriya alpata* etc.

Inclusion criteria

1. Both male and female patients.
2. Age of patient between 40 to 60 years
3. Patients having signs and symptoms of only *Janusandhigata vata*/Knee Osteoarthritis.

Exclusion criteria

1. Age less than 40 years and more than 60 years.
2. Patients having other Systemic disorder.
3. Severe deformities.
4. Rheumatic Arthritis, Septic Arthritis, Rheumatoid arthritis, Gouty Arthritis.

CRITERIA FOR ASSESSMENT

Swelling of knee joints (*Sandhi shotha*)

Severity	Grading
No swelling	0
Mild swelling	1
Moderate swelling	2
Severe swelling	3

Crepitus in knees (*Sandhi sputana*)

Severity	Grading
No crepitus	0
Palpable crepitus	1
Audible crepitus	2
Always audible crepitus	3

Material used

In this study following drugs were utilized

Mahayograj Guggula :Prepared by Nava-shakti Ayurvedalaya (P) Ltd

Dose 2 Tab (500mg) Two times a day after meal with warm water

Sahachradi Taila : Prepared by The Arya-vaidya Pharmecy (Coimtoire) Ltd

For *Janubasti* Temp: 40 to 45⁰

METHODOLOGY

60 patients that fulfilling the above criteria were selected. Patients were randomly divided in to three groups. Group A, group B and Group C

Group A

20 Patients were registered in this group, administrated only *Mahayograj Guggula* for 6 weeks (42 days). But only 17 patients completed the treatment

Group B

20 patients were registered in this group, administrated only *Janubasti* in three courses of a week after a one week gap alternately i.e. in first, third and fifth week *Janubasti* was given and results were observed after 6 weeks (42 days) But only 16 patients completed the treatment

Group C

20 patients were registered in this group, administrated both *Mahayograj Guggula* and *Janubasti* (i.e. in first, third and fifth week *Janubasti* was given) for 6 weeks (42 days) But only 15 patients completed the treatment All groups' patients asked to take light diet and warm water.

Janubasti procedure

1. Patient was asked to lie on his/her back on the table and erect and extend his/her legs.
2. Built the black gram flours dough ring around the knee joints.
3. Pour the lukewarm *Sahachradi taila* in to the ring (Temp of oil should be 40° to 45°)
4. When the *taila* was cooled down, it was squeezed out with cotton gauze and again lukewarm *talia* was poured.
5. Repeat the procedure again and again up to half hour along with maintaining the temperature.
6. Remove the dough ring and massage the knee gently for five min.

OBSERVATION AND RESULT

Maximum number of patient i.e.50.00% belongs to 55-60 years of age group. 71.66%Paientes were female. 83.33% were Hindu, all were married, 82% patients with disease were between 45-55 years of age. 53.33% patients were having *vata-kapha pra-*

kriti, 66.66% were having *krura kosht*. Maximum 90% patients were having *mandagni*. 73.33% were doing *vishamashana* 65% patients had habitual constipation. In this 60 patients 53.33% patients were from middle class

family. And 51.66% patients were educated from 5th to 10th level.

Result obtained in symptoms of Janusandhigata Vata

Effect of therapy on clinical features and objective parameter in Group A, B& C

Symptom	Group	N	Mean score		X	%	S.D.	S.E.	T	P
			B.T.	A.T.						
Sandhishula	A	17	2.00	1.06	0.94	47.0	0.24	0.06	16.00	<0.001
	B	16	2.87	1.00	1.87	65.21	0.80	0.20	9.30	<0.001
	C	15	1.60	0.13	1.47	91.8	0.63	0.17	8.88	<0.001
Sandhishotha	A	12	2.75	1.08	1.67	60.60	0.65	0.19	8.86	<0.001
	B	13	3.31	1.08	2.23	67.44	1.17	0.32	6.89	<0.001
	C	10	1.40	0.10	1.30	92.85	0.67	0.21	6.09	<0.001
Sandhigrahata	A	9	2.66	0.88	1.78	66.91	0.83	0.27	6.55	<0.001
	B	7	2.85	0.85	2.00	70.00	0.57	0.21	9.16	<0.001
	C	9	1.77	0.11	1.66	93.78	0.71	0.24	7.07	<0.001
Sandhisputana	A	6	1.16	0.50	0.66	56.89	0.52	0.21	3.16	<0.05
	B	8	2.37	1.00	1.37	57.80	0.91	0.32	4.28	<0.01
	C	9	3.50	1.00	1.87	71.87	0.52	0.17	14.54	<0.001
Kriya alpata	A	3	1.00	0.33	0.67	67.00	0.57	0.33	2.00	>0.05
	B	4	1.00	0.25	0.75	75.00	0.50	0.25	3.00	>0.05
	C	5	1.60	0.4	1.2	75.00	0.44	0.19	6.31	<0.001
Kriyakashtata	A	12	1.17	0.50	0.67	53.14	0.78	0.23	2.76	<0.05
	B	9	1.33	0.44	0.89	66.67	0.60	0.20	4.44	<0.01
	C	9	1.33	0.22	1.11	83.33	0.78	0.26	4.26	<0.01

Observations

Janusandhigata vata (Knee osteoarthritis) is observed in maximum patients of *Sandhigata vata* (osteoarthritis) in old age people due to *dhatu kshaya* and it limits everyday's activities. *Mahayograj Guggula* is one of the popular *vata shamak* remedy used in *vata vyadhi*. *Guggula* is main content and we know its *vata har* property. It contains various types of *bhasmas* such as *vanga*, *roupa*, *loha*, *abhraka*, *mandura* and *rasasindura*. It acts on *astigata vata* and lowers knee joint pain. It also contains various *agnideepak* and *pachak dravyas* which acts on *ama* and cures *agnimandya*, *malavastambha* etc. *Mahayograj Guggula* acts on vitiated *vata*, *pitta* and *kapha*

dosha and normalize them. Due to its *rasayana* property it increases effectiveness.

Janubasti is kind of *bahiparimarjama* type of *chikitsa*, In *Janubasti*, *snehana* and *swedana karmas* acts at a same time. *Snehana* acts against *ruksha guna* of *vata* and *swedana* acts *sheeta guna* of *vata* and for *janubasti*, *sahachradi taila* has been used. It contains *sahachara*, *devdaru shunthi* and *tila taila* which possesses *vata kapha nashaka* as well as anti-inflammatory, analgesic and muscle relaxant properties which give relief from *Janusandhigata vata*.

CONCLUSION

All the three groups showed significant relief, but Group C showed best improvement than other two groups. The group B showed better improvement than group A. The *Mahayograj Guggula* is effective in reducing *janusandhigata vata symptoms*, but when it is given with *Janubasti* as *sthanic chikitsa* the therapy becomes extremely effective.

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