



MANAGEMENT OF HYPERURICEMIA(GOUT) THROUGH AYURVEDA: A CASE STUDY

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ABSTRACT

The rapid modernization in India, fast-food culture, stressful and speedy life is causing several lifestyle disorders. Gout is a metabolic disease that most often affects middle-aged to elderly men and post-menopausal women. It results from an increased body pool of urate with hyperuricemia. It is typically characterized by episodic acute arthritis or chronic arthritis caused by deposition of monosodium urate crystals in joints and connective tissue tophi and the risk for deposition in kidney interstitium or uric acid nephrolithiasis. *Vatarakta* (gouty arthritis) is a chronic disease in which derangement of metabolism, occurs due to indulgence in unwholesome dietary habits and lifestyle. *Vatarakta* is caused by vitiated *Vata* and *Rakta* simultaneously. Initially vitiated *Vata* obstructs the path of vitiated *Rakta* and then gets obstructed by *Rakta* itself. It can be correlated with Gouty Arthritis due to their similarity in the clinical presentation. It is characterised by severe pain, tenderness, inflammation and burning sensation in the affected joints. A 34-year-old male patient came to Kayachikitsa OPD of Government Ayurvedic College and Hospital, Guwahati presenting with complaints of pain and swelling in the right first metatarsophalangeal joint, burning sensation of both the sole, right ankle joint pain and swelling along with pain in the right elbow from last 4 months. The patient was subjected to both panchakarma therapy and oral medication and at the end of the treatment Serum Uric acid level came down from 8.6mg/dl to 5.4mg/dl.

Keywords: Gout, Vatarakta, Ksheera basti, Amritadi guggulu, Kokilaksha Kasaya.

INTRODUCTION

The health of an individual depends solely on his/her diet and lifestyle. Due to faulty dietary habits and lifestyles, human beings are more vulnerable to metabolic disorders. These disorders may be causing functional impairment or crippling disorders like *Vatarakta*. Incidence of gouty arthritis is 0.2-2.5 per 1000. Overall prevalence is 2-26 per 1000. Gout is rare in children and premenopausal women in India. Out of the affected population, males are more common while the female of postmenopausal age is at more risk^[1]. *Vatarakta* is caused by vitiation of *Vata* and *Rakta* simultaneously^[2]. Both *Vata prakopak* and *Rakta prakopak nidan* are involved in *Samprapti* of the disease^[2]. When a person does not opt for purification processes like *Vamana* and *Virechana* or due to trauma, *Rakta dhatu* gets vitiated. The same individual with vitiated *Rakta dhatu* when starts taking *Vata-prakopakahara* and *Vihara*, there occurs *Vata-vridhhi*. In this condition, the already vitiated *Raktadhatu* obstructs the path of *Vridhha vata*, in which the *Vata* has to flow. Vitiated *Vata* becomes *Aavrita* with vitiated *Raktadhatu*. *Vridhha* and obstructed *Vata* inturn vitiates the whole *Rakta* and manifests as *Vatarakta*^[3]. It is of two types *Uthana* and *Gambhira Vatarakta*^[4]. *Gambhira Vatarakta* mainly affects *Asthidhatu* and the joints and causes *Daha*, *Toda*, *Sphurana*, *Sotha* etc. Gout is characterised by severe pain, tenderness,

inflammation and burning sensation in the affected joints can be co-related with *Gambhira Vatarakta*.

Case Study

Chief Complaints

A 34-year-old male patient came to Kayachikitsa, OPD of Govt. Ayurvedic College and Hospital, Guwahati with complaints of pain and swelling in right first metatarsophalangeal joint (big toe), right ankle joint, burning sensation of both the sole along pain in the right elbow from last 4 months. The pain became severe in the last 15 days for which he was unable to do his daily activities. He took Febuxostat 40mg for 3 months but only got temporary relief. The pain increases with the application of warm substances over it. He also complains of stiffness over the elbow joint and finds difficulty in walking too.

On doing investigation Serum Uric acid level came as 8.6mg/dl on 24/03/21. He was then asked to get admitted for further treatment.

Aim and Objective: To study the effect of Ayurvedic treatment in the management of *Vatarakta*.

Materials And Methods

Centre of Study: Govt. Ayurvedic College and Hospital, Guwahati.

Single Case Study.

Treatment Plan:

Treatment was planned to keep the symptoms in mind.

Table 1: Showing materials used in the study.

Sl No	Dravya	Dose	Anupana	Duration
1	<i>Eranda Taila + Triphala Kwatha+Guduchi Satwa</i>	30ml+ 30ml+3g	Lukewarm water at bedtime	3 nights
2	<i>Tab Amritadi Gugglu</i>	250mg	Lukewarm water after food thrice daily	8 days
3	<i>Kokilaksha kasaya</i>	30ml	Lukewarm water after food twice daily	8 days
4	<i>Sarivadyasava</i>	30ml	Lukewarm water after food twice daily	8 days
5	<i>Ksheera Basti</i>	300ml	Daily	8 days

For clearing the *Kostha*, *Virechan* with *Sneha Dravya* i.e., *Eranda taila* (30ml), *Triphala Kwatha* (30 ml), *Guduchi Satwa* (1tsf) was given for 3 days.

After that *Amritadi Gugglu*, *Kokilaksha kasaya*, *Sarivadyasava* was started along with *Ksheera Basti* (*Ksheera+Ghrita+Guduchi*) for 8 days.

The patient was asked to avoid alcohol, meat, Tomato, Beans, Urada dal, Lentils, Curd and hot and spicy food.

Table 2: Treatment Given after 8 days

At every Follow-up	Treatment given
1 st follow up after 7 days	<ul style="list-style-type: none"> • <i>Kaishore Guggulu</i> 250mg twice daily after food with lukewarm water. • <i>Kokilaksha Kasaya</i> 40ml twice daily after food with lukewarm water. • <i>Sarivadyasava</i> 30ml twice daily after food with lukewarm water. • <i>Tab Gokshura</i> 250mg twice daily after food with lukewarm water.
2 nd follow up after 7 days	<ul style="list-style-type: none"> • <i>Kaishore Guggulu</i> 250mg twice daily after food with lukewarm water. • <i>Tab Guduchi</i> 250mg twice daily after food with lukewarm water. • <i>Kokilaksha Kasaya</i> 40ml twice daily after food with lukewarm water. • <i>Sarivadyasava</i> 30ml twice daily after food with lukewarm water.
3 rd follow up after 7 days	<ul style="list-style-type: none"> • <i>Amrutadi guggulu</i> 250mg thrice daily after food with lukewarm water. • <i>Ekangaveer rasa</i> 250mg thrice daily after food with lukewarm water. • <i>Kokilaksha Kasaya</i> 40ml twice daily after food with lukewarm water. • <i>Tab Guduchi</i> 250mg twice daily after food.

Table 3: Showing changes in symptoms before and after treatment.

Sl No	Symptoms	Before treatment	After treatment
1	Pain in the right big toe, ankle joint	Severe	Mild
2	Swelling in the ankle joint	Present	Absent
3	Burning sensation of both the soles	Present	Absent
4	Stiffness over the elbow joint	Present	Absent

Table 4: Showing changes in Sr. Uric acid levels.

Before Treatment (24/03/21)	8.6mg/dl
After Treatment (21/04/21)	5.4mg/dl

RESULT

The patient had started improving during the hospital stay and at the end of the 8th day there was a regression in the symptoms and after the completion of treatment Serum uric acid levels came down to normal.

DISCUSSION

Vatarakta is a more distressing and common metabolic disorder prevalent in the present era. *Vatarakta* is caused by vitiation of *Vata* and *Rakta*

simultaneously. Both *Vata prakopak* and *Rakta prakopak nidan* are involved in *Samprapti* of the disease. It is characterised by severe pain, tenderness, inflammation and burning sensation in the affected joints. The aetiological factors responsible for Gouty arthritis, pathology and clinical features are quite similar to the *Vatarakta*. Gout is also known as the "disease of kings" and also "king of diseases" in modern medicine.

The action of Drugs and other procedure used are:

- ✓ *Kaishor guggulu* mentioned in *Sharangdhar Samhita madhyam khanda 7/70-81* is *Tridoshaghna, Rasayana, Vataraktahara*
- ✓ *Kokilaksha kashay* mentioned in *Bhaishajya Ratvali, Vatarakta Rogadhikara 27/13* is used in *Vatarakta* and is *Madhura* and *Shita* in nature, it is also *Shothaghna, shoolaghna*.
- ✓ *Amrutadi guggulu* mentioned in *Bhavaprakash madhyam khanda, Vatarakta chikitsa*. It is mainly *Vata pitta shamaka*.
- ✓ *Sarivadyasava* mentioned in *Bhaishajya Ratnavali, Pramehapidikachikitsa 38/22-27* is *Pitta shamaka* and is used in *Vatarakta*.
- ✓ *Ekangaveer rasa* mentioned in *Brihat Nighantu Ratnakara, Vatvyadhi chikitsa* is *Vata kapha shaman Brimhana, Rasayana*.
- ✓ **Mode of action of Snehana:** *Snehana* helps in the proper *Gati* of *Vata*, brings *Gaatra Mardavata* and removes the *Srothorodha*. *Sneha* overcomes *Rukshata* by its *Snigdha* property and the *Sanga* is corrected.
- ✓ **Mode of action of Virechana:** *Ushna guna* does *Srothoshuddi* and *Ama pachana*, so it relieves stiffness. *Snigdha Virechana* is given to expel out the vitiated *Dosha*. Due to the elimination of *Kleda, laghuta* is achieved. *Stambha, Gaurav, Swayathu* are the symptoms of *Vatarakta*.
- ✓ **Mode of action of Basti:** *Basti* is the best therapy to control the *Vata* and thus it controls the *Pitta* and *Kapha* also. The given *Basti* is a *mridu Niruha vasti* when enters the *Pakvasaya* by its *Virya*, draws the vitiated *Doshas* lodged in the entered body from foot to the head, just as the sun situated in the sky sucks up the moisture from the earth. *Ghrita misrita Kshira vasti* is the best treatment for *Vatarakta* by *Acharya Charaka* and in *Astanga Hridaya*.

CONCLUSION

Since treatment for *Vatarakta* is limited in Modern science, Ayurvedic management of chronic *Vatarakta* can be an effective therapy. On understanding proper *Nidan, Lakshana* and *Samprapti* of *Vatarakta* we can treat it successfully with Oral medications along with

panchakarma therapy. The medicines are given to the patient mainly fall under the categories of *Tikta kashay rasa, Laghu rooksha guna, Ushna veerya* and either *Kaphavata hara* or *Pittavata hara* mainly used for *Deepan paachan* and *Rakta prasadana*. The patient showed relief in symptoms and the laboratory findings of Serum Uric acid had lowered significantly. Therefore, the given Ayurvedic treatment along with *pathya* and *apathy* was successful in curing the disease without landing into a further complication.

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