

**EFFECT OF VIRECHAN AND BASTI KARMA IN THE MANAGEMENT OF AAMVATA  
-A CASE STUDY**

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**ABSTRACT**

*Aamvata* is a chronic immune-inflammatory disease that is caused by the accumulation of *Aam* and vitiation of *Vata* dosha. The formation of *Aam* is caused by impairment of *Agni* and that *Aam* combines with *Vata* dosha and occupies *Sleshmsthan*. The disease mainly affects the young generation and crippled them physically as well as mentally due to its poor prognosis. It can be correlated with Rheumatoid Arthritis due to its similar features but not every patient of *Aamvata* is RA factor positive, some patients have RA factor negative. The treatment modalities like *Langhan*, *Rooksha Swedana*, *Tikta-Katu & Deepniya drugs*, *Virechan*, *Snehpana*, and *Basti* were firstly mentioned by *Chakradutta*. By using this *Chikitsa Siddhanta*, a case of *Aamvata* is successfully treated and no side effects are found during treatment. In the present study, we have discussed a female patient having *Aamvata* who has been treated with *Dravya* having *Tikta Katu Rasa*, *Rooksha Sweda*, *Snehpana*, *Virechan*, and *Basti*.

**Keywords:** *Aamvata*, *Snehpana*, *Virechan*, *Erandamooladi Basti*

## INTRODUCTION

*Aamvata* is a multi-system involving disorder in which a person indulges in any type of *Vyayam* just after consuming a meal resulting in hampering digestion and absorption of food. In the modern era, a person has a sedentary lifestyle like sitting or lying down while watching TV, using mobiles/ computers for much of the day, while reading, etc., and incompatible diet due to this the functions of *Jathragni*, *Bhutagni*, and *Dhatwagni* (digestive fires) are hampered, and it produces *Aam*. The prevalence of Rheumatoid Arthritis in adults in India varies from 0.5-3.8 % in women and 0.15-0.37 % in men. It can be seen in present days that people doing work out / exercise just after eating oily food, as mentioned in *Bhavaprakash* it hampers *Vata* in the body and that vitiated *Vata* combines with *Aam* and reaches to *Sleshmsthan* i.e., joints<sup>[1]</sup>. With the help of *Vata* that *Aam* circulates all over the body and accumulates in the joints by *Srotosanga* and making the body stiff, this condition is known as *Aamvata*. Both *Aam* and *Vata* vitiated together and reaches *Kostha*, *Trik pradesh*, and joints and make the whole-body stiff. In Ayurveda, *Madhavkar* (700 A. D.) in his book *Madhav Nidan* described *Aamvata* for the first time under *Vata-Kaphaj Vikar*. Due to contra-indicatory features of *Aam* and *Vata*, it is difficult to plan its line of treatment. It is a disease of *Madhyam Rogamarg* hence it is said to be *Krichasadhya* or *Yapya*. The *Aam* produces features like *Angamarda* (bodyache), *Alysa*(weakness), *Sandhiruk* (joint pain), *Sandhisoth* (joints swelling), etc. In *Samhita* pain of *Aamvata* is compared with the pain of a scorpion bite (*Vrishchik Dantvat*). It is a disease of *Asthivaha* and *Rasavaha srotas*. In the present study, the patient was administered by *Rooksha Valuka Sweda*, *Erandmooladi Basti* and *Virechan* followed by *Snehan* with *Mahatiktak ghrut*.

### Case Report

Female patient age 34 years house wife having 48 kgs weight came to our hospital having complaints of pain and swelling in multiple small and large joints, polyarthralgia in the past 7 years, morning stiffness of more than 1 hour in the past 5 years, and deformity

in bones started. The patient had no pain, no swelling, and no stiffness over joints 7 years before. Gradually onset of pain and stiffness in both knee joints. Thereafter she developed pain in the bilateral interphalangeal and then the pain started radiating to multiple joints. The pain was so severe, so it was hampering day to day activity of the patient, and it was associated with swelling and felt difficulty in walking. The patient was diagnosed based on the *Lakshans* of *Aamvata* mentioned in the commentary.

### O/E – *Asthavidh Pariksha*

*Nadi* – *Manda*, *Mala* – *Snigdh* (sticky), *Shabda* – *Prakrut*, *Akruti* – *Madhyam*, *Sparsh* – *Prakrut*, *Jivha* – *Sama*, *Mutra* – *Prakrut*, *Drik* – *Prakrut*

### *Samprapti Ghatak*

*Dosha* – *Tridosh* mainly *Vata* and *Kapha*

*Dushya* – *Rasa*, *Mamsa*, *Asthi*, *Majja*

*Srotas* – *Rasavaha* , *Mamsavaha*, *Asthivaha*, *Majjavaha*

*Srotodushti*- *Sang*, *Vimarga* -*gamana*

*Samsthana* – *Aam* -*pakvashayottha*

*Vyaktisthan* – *Sandhi*

*Roga Marga* – *Madhyam*

### Local Examination

1. Swelling and tenderness are present on both wrist joints, both knee joints, and ankle joints.
2. Restricted and painful movement of both wrist joint, right shoulder joint, knee joints, both ankle joints, and Meta phalangeal joints.

### Criteria for assessment of disease

#### • Grading of *Sandhishool* -

No pain – 0

Mild pain -1

Moderate pain, but no difficulty in movements – 2

Slight difficulty in movements due to pain- 3

Much difficulty in moving body parts due to pain. – 4

#### • Grading of *Sandhishotha* –

No swelling -0

Slight swelling -1

Moderate swelling -2

Severe swelling -3

#### • Grading of *Stiffness* –

No stiffness – 0  
2 hrs -1

Stiffness for 5min –

Stiffness for 2 hrs – 8 hrs  
for >8 hrs - 3

Stiffness

**Table 1:** Assessment of *Sandhishool*

Left		Name of joint	Right	
BT	AT		BT	AT
3	0	Interphalanges	3	1
3	1	Wrist joint	4	1
2	1	Shoulder joint	4	3
3	0	Hip joint	4	1
4	0	Knee joint	4	1
4	2	Ankle joint	4	2

**Table 2:** Assessment of *Sandhishotha*

Left		Name of joint	Right	
BT	AT		BT	AT
2	1	Wrist joint	3	1
2	0	Knee joint	3	0
2	0	Ankle joint	2	1

**Table 3:** Assessment of morning stiffness

BT	AT
2 [2-3 hrs]	1 [10-15 mints]

**Table 4:** Assessment of *Sparsashatva*

BT		AT
3	Wrist joints	0
3	Knee joints	0

## Treatment

**Table 5:** The patient had given both *Bahya and Abhyantar* types of *Chikitsa*.

Drugs	Dose	Duration
<i>Panchakol Phanta</i>	5gm × BD	8 weeks
<i>Simhanad Guggulu</i>	2 BD	8 weeks
<i>Chitrakadi Vati</i>	2 BD	8 weeks
<i>Amavatari Rasa</i>	250 mg	8 weeks Twice a day
<i>Pippali Churna</i>	250 mg	
<i>Ajmodadi Churna</i>	3 gm	
<i>Godanti Bhasm</i>	250 mg	
<i>Brihatvatachintamani Rasa</i>	1 BD	4 weeks
<i>Rheumat liniment</i>	L/A	
<i>Valuka Pottali Sweda</i>	L/A	
<i>Erand Bhrast Haritaki</i>	5 gm HS	20 days

**Panchakarma** -: After *Deepan Pachan's* treatment, ***Erandmooladi Niruh Basti [Kaal Basti Karma]*** was planned. Before administration of *Basti Sarvang Snehana* was done by ***Brihat Saindhavdi Tail*** and

*Sarvang Nadi Sweda* was given. In *Kaal Basti Karma*, 60 ml *Anuvasan Basti* was administered by ***Brihat Saindhavdi Tail*** and 400 ml *Aasthapan Basti* by ***Erandmooladi Kwath***. After 16 days of the proce-

ture, the patient feels relief in stiffness, swelling, and pain in multiple joints.

**ERANDMOOLADI NIRUH BASTI** -: Erandmooladi Basti is mentioned in Charak Siddhi Sthan 3 Shlok no. 38-42 for **Janghauru-paadrikprastha Shool** and **Kaphaavritta Vata**.

**VIRECHAN** -: After a month of Basti procedure, Virechan was planned for which 8 days Snehanpan was administered by **Mahatiktak Ghrit** in increasing amount. After 8 days when **Samyak Lakshan of Snehanpan** (Vatanuloman, Deeptagni, Snigdha Varch, Anga-

**mardav or Snigdha, Snehan Dwesh**)<sup>[2]</sup> were seen, 3 days of rest [ from Snehanpan] had been taken and after that Virechan. Before the day of Virechan, the patient had given **Laghu, Ushna, Drava, Kapha Avridhikar** food, and **Ushna Jal** at night. On the day of Virechan, after **Sarvang Snehan Swedan Virechan drugs Kwath** was administered in the **Pitta Kala**. On 15/10/21, after Virechan had been completed **Samsarjan Karma** was pursued for 5 days. The same procedure of Virechan was administered after 2 months which shows a tremendous result.

**Table 6:** Snehanpan schedule

Day & Date	Quantity Of Ghrit	Time	Time Of Digestion	Remark
1-5/10/21	30 MI	7 Am	1 pm	Testing Dose
2-6/10/21	60 MI	7 Am	2:15 Pm	
3-7/10/21	90 MI	7:15 Am	2:40 Pm	
4-8/10/21	120 MI	7 Am	3:15pm	
5-9/10/21	150 MI	6:45 Am	3:30pm	
6-10/10/21	180 MI	6:50 Am	4 Pm	
7-11/10/21	210 MI	7 Am	4:15 Pm	
8-12/10/21	240 MI	6:40 Am	1 Pm	

**Table 7:** Virechan Drugs

DRUG	QUANTITY
<i>Haritaki</i> (Terminalia chebula Linn.)	20 gm
<i>Aaragwadh</i> (Cassia fistula Linn.)	20 gm
<i>Kutki</i> (Picrorhiza kurroa Royale ex Benth)	20 gm
<i>Trivrat</i> (Operculina turpethum Linn.)	10 gm
<i>Draksha</i> (Vitis vinifera Linn.)	50
<i>Erand</i> (Ricinus communis Linn.) Tail	70 ml

**Table 8:** Samsarjan Karma

Date	Morning	Evening
15/10/21	--	MANDA
16/10/21	MANDA	PEYA
17/10/21	PEYA	YUSH
18/10/21	YUSH	VILEPI
19/10/21	VILEPI	SAMANYA BHOJAN

**Table 9:** Investigation

	BT	After 1 <sup>st</sup> virechan	After 2 <sup>nd</sup> virechan
Hb	8.4 gm%	9.8 gm%	11.7 gm %
ESR	30/hr	25 /hr	21/hr
RA Factor	173.6 IU/ml	67.7 IU/ml	39.9 IU/ml
CRP	9.93 IU/L	31.5 IU/L	4.9 IU/L
Vit D	61.67	95.1	----

## DISCUSSION

In other pathies, there is a limitation in the treatment of *Aamvata* but in Ayurveda management of *Aamvata* is one of the most effective therapies. Here we discussed the medication of *Aamvata* which was given to the patient.

1. **Chitrakadi Vati** – It helps to digest the *Aam* and helps in the *Shodhan* of the body due to its *Deepan* and *Pachan* properties.
2. **Simhnaad Guggul** – It *Deepan Pachan*, *Shoolghan*, *Aamhara*, *Shothaghan*, and *Balya* properties. It enhances *Agni Bala* which prevents the further formation of *Aam*.
3. **Panchkol Phant** – *Panchkol* has *Deepan - Pachan* property which digests the *Aam* and alleviates pain and swelling.
4. **Erand Bhrast Haritaki** – Both *Erand* and *Haritaki* are appreciated as good *Rechak* (laxatives) drugs and useful in treating all *Apanvayu* disorders.
5. **Rasnasaptak Kwath** – It has properties of digesting *Aam* and alleviates pain, swelling, and stiffness of joints.
6. **Brihatvatachintamani Rasa** – It helps to improve strength & immunity and alleviates pain and stiffness.
7. **Rooksha Sweda (Valuka Pottali Sweda)** – In *Charaka Samhita*, *Rooksha Sweda* is mentioned for *Kaphjanya Vikar*. *Aacharya Chakradutta* mentioned *Rooksha Sweda* in the *Chikitsa of Aamvata*. It leads to relieving pain, swelling, and stiffness.
8. **Erandmooladi Niruh Basti** – It is one of the most praised decoctions used for treating *Vata* disorders. It brings back *Vata* blocked by *Kapha* or initiated *Vata* by any cause to a state of balance.

## CONCLUSION

From this study, it can be concluded that *Aamvata* can be effectively and safely treated by using *Chikitsa Siddhanta* described by *Aacharya Chakradutta*. In this case, the tremendous effect of *Erandmooladi Niruh Basti* and *Virechan* has been

shown. After this treatment patient became drug independently. This is only one case study to prove its efficacy there is a need to conduct a study on a large number of patients.

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