

MANAGEMENT OF JANU SANDHIGATAVATA W.S.R. O.A. KNEE JOINT: A CASE STUDY

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ABSTRACT

Osteoarthritis of the knee joint is the leading cause of chronic disability worldwide. *Acharya Charaka* described the disease separately, named “Sandhigata Anila”, under the heading of *Vatavyadhi*. *Vagbhata* has considered *Vatavyadhi* as *Maharoga*. To date, *Sandhivata* is a challenging disease and is the number one cause of disability in old age. *Sandhivata* is a disease occurring due to the affliction of *sandhis* by vitiating *Vata dosha*. For *vata vikara bahya prayoga* (external application) of oil is indicated. Different oil formulations have different modes of action. *Saindhavadi Taila* is one such formulation. The treatment concept focuses on relieving symptoms and maintaining and improving joint functions. The present article deals with the case of a patient with pain in both knee joints. Difficulty in walking and standing back after long sitting. *Janu basti* with *Saindhavadi Taila* was given to this patient.

Keywords: *Sandhivata*, Osteoarthritis, *Saindhavadi taila*, *Janu Basti*

INTRODUCTION

Nowadays, knee pain is a widespread problem. Osteoarthritis is the most prevalent musculoskeletal disease in the county, and it is the most severe joint disorder with a prevalence of 22-30% in India. Knee

Osteoarthritis is much more prevalent in India than in Western countries, and it is the most common cause of joint dysfunction. According to WHO, in 2019, about 528 million people worldwide were living with

osteoarthritis, an increase of 113% since 1990. About 73% of people living with osteoarthritis are older than 55 years, and 60% are female. Primary OA of the knees was found to be more prevalent in females (31.6%) than in males (28.1%). There is a multifactorial cause for OA. Age, female sex, obesity, physical labour, occupational knee bending, family history, joint damage, and vitamin D deficiency are significant risk factors for Osteoarthritis. The prevalence rate is increasing very high, especially in the Asian population. It is more common in females as compared to males. The knee joint is a weight-bearing joint, so most effects are seen only in this joint.

CASE REPORT

This is a single case study of a 64-year-old female patient (housewife) who came to OPD of *Panchakarma* Department, Shubhdeep Ayurved Medical College, Indore, M.P., India with complaints of pain in both knee joints, a little stiffness, restricted movement of both joints and difficulty in walking for the past two years (not continuous). Pain has increased for 15 days. She started having difficulty walking without support. She has gone through modern medicinal treatment. Even after that, the patient complained about the pain and had no significant relief in pain. There was no known case of diabetes or hypertension. The pain was more in the right knee as compared to the left knee. The patient could not sit on the floor, or fold knee joints and discomfort in standing back after long sitting. At the time of examination, the patient could walk without support, but gait was disturbed; Crepitation was observable. Palpation revealed swelling and tenderness in both joints. The range of movements was restricted.

General Physical Examination:

Pulse - 84/min

Blood Pressure - 130/90mm of Hg

Weight - 79 kg

Height - 160 cm

Pallor - No pallor

Muscle tone - Mild tender

Tenderness - Mild tender Restriction of movements with severe pain

Lymphadenopathy - No lymphadenopathy

Investigation: X-ray (Both knee joint)

Diagnosis and Assessment

The diagnosis was confirmed as OA of the knee joint due to pain, stiffness, discomfort, and restricted movements. Observing all the above signs and symptoms, a conclusion was made that this is a case of OA of the knee joint. The patient was admitted to the female IPD of Panchakarma Department, Shubhdeep Ayurved Medical College, Indore, M.P.

Management

The patient was given *Janu Basti* with a complete care plan for *Purva, Pradhan,* and *Pashchat karma.*

Purva Karma

- Patients were advised to clear their bowels and urine properly.
- Black gram powder was mixed with the required quantity of water and prepared in semisolid form to make boundary
- Warmed up the *Saindhavadi Tail.*

Pradhana Karma

Patients were advised to lie comfortably on a simple table in a supine position and asked to expose the knee joint area properly. After that, a circular boundary was prepared with the help of a paste of black gram powder over the knee area, which was two inches in height and required diameter. The inner side of the prepared boundary was properly sealed to avoid leaking oil. The prepared boundary was filled with a lukewarm *Saindhavadi taila* and was kept for 30 minutes. During the procedure, the oil temperature was maintained by changing the warm oil from time to time. The patient was asked not to move to prevent any leakage. This procedure was carried out once daily for 10 days.

Pashchat Karma

- The oil was removed with the help of a cotton swab.
- The boundary was detached from the body, and that area was cleaned with a gauze piece.
- An *abhyanga-swedana* knee joint for 15 mins was given.

Assessment Criteria and Outcomes:

An assessment criterion was based on the signs and symptoms of *janu Sandhigata vata* as per the Ayurveda text.

- *Sandhishoola* (Joint Pain)

- 0 - Pain-free
- 1 - Mild pain
- 2 - Moderate pain but no difficulty in walking
- 3 - Slight difficulty in walking due to pain
- 4 - Severe difficulty in walking due to pain
- *Sandhi Stambha* (Joint Stiffness)
 - 0 - No Stiffness
 - 1 - Mild Stiffness
 - 2 - Moderate Stiffness
 - 3 - Severe difficulty due to Stiffness
 - 4 - Severe Stiffness lasting 15 minutes
- *Sandhi Shotha* (Joint Swelling)
 - 0 - No Swelling
 - 1 - Mild Swelling present
 - 2 - Moderate swelling
 - 3 - Severe swelling
- *Sandhigati- Akunchana Prasaranayoh Vedana* (Restriction in Range of Joint movements)
 - 0 - No Pain

- 1 - Patient complaints of pain without winces of face
- 2 - Winces the face with pain
- 3 - Prevent complete flexion
- 4 - Does not allow passive movement
- *Sandhi Atopa* (Crepitus in joint)
 - 0 - No Crepitus
 - 1 - Palpable Crepitus
 - 2 - Audible Crepitus
- *Sandhi Sparsha Asahayata* (Joint Tenderness)
 - 0 - No Tenderness
 - 1 - Patient complaints of pain with winces of face
 - 2 - Patient winces the face and withdraws the part
 - 3 - Does not allow touching the joint
- *Daha*/Burning sensation
 - 0 - No burning sensation
 - 1 - Mild burning sensation felt occasionally
 - 2 - Moderate burning sensation felt daily

OBSERVATION:

Table 1

S.No	Subjective Parameters	Before treatment		After treatment	
		Right leg	Left leg	Right leg	Left leg
1.	<i>Janu sandhi Shoola</i> (Joint Pain)	4	3	1	0
2.	<i>Janu sandhi Stambha</i> (Joint Stiffness)	2	2	0	0
3.	<i>Janu sandhi Shotha</i> (Joint Swelling)	2	1	0	0
4.	<i>Janu sandhi Akunchana Prasaranayoh Vedana</i> (Joint movements)	3	2	1	1
5.	<i>Janu sandhi Atopa</i> (Crepitus in joint)	2	2	1	1
6.	<i>Janu sandhi Sparsha Asahayata</i> (Joint Tenderness)	2	1	1	0
7.	<i>Daha</i> /Burning sensation	2	2	0	0

BT-Before treatment; AT-After treatment

RESULT:

The treatment results are observed in Table 1 based on the above parameters. There was about 70 per cent relief in patient complaints. The patient was happy, and the condition improved.

DISCUSSION

Janu basti procedures are *Snehan* along with *Swedan* at the same time. It can be considered as *Snigdha Sweda* treatment. *Snehana Purvaka sweda* makes the treatments ideal for *chikitsa* of any *vata vyadhi*, in this case, *Janu Sandhigata vata*, Acharya Vagbhata explained the mode of absorption of the drugs applied over the skin. Thus, according to the above references, the *Dravya* used in *Janu Basti* is absorbed through the skin and produces an effect based on the

properties of the drug. The main *dosha* which required to be balanced in this case was *vata*. The properties of the *Saindhavadi taila* are opposite to that of the *vata dosha*. So, using the above concept, the treatment was done. During the janu basti procedure, a constant temperature is maintained (a little above the body temperature 40-42degree), which removes stiffness, pain and burning sensation. Due to the *guna* present in the oil, the joint's dryness reduces, resulting in easy movement and decreased crepitation of the knee joint.

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