

## A COMPARATIVE STUDY TO EVALUATE THE EFFECT OF MATRA VASTI IN KHARA PAKA WITH MADHYAMA PAKA IN JANU SANDHIGATA VATA

[Thulasi T.V](#)<sup>1</sup>, [Joshi George](#)<sup>2</sup>, [Rahul H](#)<sup>3</sup>

<sup>1</sup>PG scholar, Associate Professor, Associate Professor,  
Dept of PG Studies in *Panchakarma*, MVRAMC, Parassinikadavu, Kannur, Kerala, India

Corresponding Author: [thulasishh@gmail.com](mailto:thulasishh@gmail.com)

<https://doi.org/10.46607/iamj0409042021>

(Published Online: April 2021)

Open Access

© International Ayurvedic Medical Journal, India 2021

Article Received: 23/03/2021 - Peer Reviewed: 30/03/2021 - Accepted for Publication: 31/03/2021



### ABSTRACT

*Vasti* has been told as *Ardhachikitsa* and is applicable in all the *Vatavyadhi*. As a general rule, when *Rogas* are caused by *Vata Dosha* alone, without the association of *Ama*, then *Sneha Vasti* should be given. *Matra Vasti* is one among the *Bheda* of *Sneha Vasti*, it can be given to any person irrespective of age and *Ritu*, without any strict regimen of *Ahara* and *Vihara*. *SandhiVata* is a *Vatika* disorders and *Dhatukshaya* is its prime factor. *Vata Dosha* is the regulator of other two *Dosha*, *Dhatu* and *Mala* and also all the body activities. Therefore, once *Vata* is controlled by *Vasti*, all these factors are automatically regulated, and total body equilibrium is achieved. *Sandhigata Vata* is characterized by symptoms like joint stiffness, joint pain, swelling and difficulty in joint movements, etc. *Snehana* is mentioned as one of the main treatments of *Sandhigata Vata*. According to therapeutic administration, *Sneha Paka* is mainly 3. Acharya Charaka and Vagbhata explained *Sneha* in *Madhyama Paka* for *Vasti Karma*, whereas Acharya Susruta opines *Sneha* in *Khara Paka* for *VastiKarma*. Here in this study, *MatraVasti* with *KsheeraBala Taila* prepared in two different *Paka* is selected. A group of 40 patients with signs and symptoms of *Janu Sandhigata Vata*, fulfilling the inclusion criteria and were randomly divided into two groups with number of twenty. *MatraVasti* with *Ksheerabala Taila* prepared in *Khara Paka* was given to Group A and *Madhyama Paka* was given to Group B for consecutive 9 days. Patients were evaluated thoroughly prior to the treatment, on 9th day of treatment and on 18th day of follow up period on the basis of subjective and objective parameters. Statisti-

cal analysis revealed that both groups were statistically significant in all subjective and objective criteria in after treatment results and after following up results.

**Keywords:** *MatraVasti, Sneha Paka, Sandhigata Vata, Ksheerabala Taila*

## INTRODUCTION

*Panchakarma* plays a very important role in *Chikitsa* aspect of each and every disease. *Panchakarma* is a very unique therapeutic procedure, because of its preventive, promotive, prophylactic and regenerative properties as well as providing a radical cure. Among *Panchakarma Vasti* has been told as *Ardhachikitsa* and is applicable in all the *Vatavyadhi*'s. As a general rule when *Rogas* are caused by *Vata Dosha* alone, without the association of *Ama*, then *Sneha Vasti* should be given. *Matra Vasti* is one among the *Bheda* of *Sneha Vasti*, it can be given to any person irrespective of age and *Ritu*, without any strict regimen of *Ahara* and *Vihara*. Among *Tridosha*, *Vata* is responsible for all *Cheshta* or Kinetic functions. In old age, all *Dhatu* being to undergo *Kshaya*, thus leading to *Vata Prakopa* and making the individual prone to many diseases. The affliction of *Sandhis* by *Prakupita Vata* is the chief phenomenon in *Samprapti* of *Sandhigata Vata*. The involvement of *Marma*, *Madhyama Roga Marga*, *Vata Dosha* and *Dhatu kshaya* make disease *Kashta Sadhya*. Ayurvedic classics have given due importance and attention to *Vata* in the management of diseases, as having the prime control of various activities of body and active factor in causing diseases. *SandhiVata* is a *Vatika* disorder and *Dhatukshaya* is its prime factor. *Vata Dosha* is the regulator of other two *Dosha*, *Dhatu* and *Mala* and also all the body activities. Therefore, once *Vata* is controlled by *Vasti* all these factors are automatically regulated and total body equilibrium is achieved. *Sandhigata Vata* is characterized by symptoms like joint stiffness, joint pain, swelling and difficulty in joint movements, etc. *Snehana* is mentioned as one of the main treatments of *Sandhigata Vata*. *Vasti Karma* occupies important place in treating *Vatavyadhis*. *Anuvasana Vasti* is indicated in same conditions where *Niruha Vasti* is indicated. It is specifically indicated for the persons having *Ruksha-Tikshna-Agni* and

*Kevala-Vata roga*. Moreover, in *AsthiDhatu Gata Vata*, *Bahya-Abyantara Sneha* is mentioned as the treatment. According to therapeutic administration, *Sneha Paka* is mainly 3 - *Mrdu*, *Madhyama* and *Khara*. Acharya Charaka and Vagbhata explained *Sneha* in *Madhyama Paka* for *Vasti Karma*<sup>1</sup>, whereas Acharya Susruta opines *Sneha* in *KharaPaka* for *VastiKarma*.<sup>2</sup> Here in this study, *MatraVasti* with *KsheeraBala Taila* prepared in two different *Paka* is selected. *Ksheerabala Taila* is specifically indicated in *Aseeti Vata Rogas*. It can be used as *Paana*, *Vasti*, *Nasya* and for *Abhyanga*.<sup>3</sup> Generally *Anuvasana Vasti* is given in two different ways, one as prime to *Niruha Vasti* and also independently for the alleviation of *Vayu*. In the later, it is given 9 or 11 days continuously for *Kevala Vata Vyadi*.

**Need and significance of the study:** No previous studies were done in the *Paka* standardization of *Vasti*. Hence it is important to validate the *Samyak Vasti Lakshanas* and other *lakshanas* like *Ayoga*, *Atiyoga* and *Vyapat* with special reference to *Sneha Paka*. In the present study *Ksheerabala Taila* was chosen for *Vasti* and its effect is analysed in the management of *Janu Sandhigata Vata*, considering its prevalence and incidence.

**Scope of the study:** In current clinical practice, most of the practitioners use *Taila* in *Madhyama Paka* for *Vasti Karma*. But when we analyze the market scenario, it has been found that very few *Tailas* are available in *Madhyama Paka* like *Pippalyadi Anuvasana*, *Sahacharadi Anuvasana* and *Dhanwantara Anuvasana Taila*, whereas we can find lot of *Tailas* in *Khara Paka* that is used for *Abhyangadi Karma*. According to Acharya Caraka and Vagbhata, *Taila* in *Madhyama Paka* is used for *Vasti*. Whereas Acharya Susruta had given a reference for *Taila* in *Khara Paka* can be used for *Vasti Karma*. Hence a study is framed to assess the efficacy of *Vasti Karma* with *Taila* in *Khara Paka*,

and also to compare the efficacy of *Vasti Karma* with *Tailas* in two different *Pakas*.

Most of the *Tailas* available in the market are in *Khara Paka*. These are mainly used for *Abhyangadi Karma*. If *Vasti Karma* done with *Taila* in *Khara Paka* has more or equal effect than that in *Madhyama Paka*, then the limitation in selection of *Taila*'s with respect to *Paka* can be ruled out. So wide range of *Tailas* will be available for *Vasti Karma*.

### Objectives

1. To study the effect of *MatraVasti* in *Khara Paka* in the management of *Janu Sandhigata Vata*.
2. To compare the effect of *MatraVasti* in *Khara Paka* with *Madhyama Paka* in the management of *Janu Sandhigata Vata*.

### Materials and Methods

#### Source of Data

A group of 40 patients with signs and symptoms of *Janu Sandhigata Vata*, fulfilling the inclusion criteria were selected from the OPD and IPD of MVRAMC Kannur. They were randomly divided into two groups with number of twenty.

#### Method of Collection of Data

A special proforma was prepared with relevant points of history taking, physical examination to confirm the diagnosis as mentioned in Ayurveda literature, various *Lakshanas* of *Vasti* administration and grading of assessment criteria.

### Trial Drug

*Ksheerabala Taila* in *Madhyama Paka* and *Khara Paka* prepared in the pharmacy of MVRAMC.

### Diagnostic Criteria

Patients suffering from classical signs and symptoms *Janu Sandhigata Vata* were selected.

- a) *Sandhi Sula* b) *Sandhi Sotha* c) *Prasarana-Akunjanayoho Pravarti Savedana*.

### Inclusion Criteria

1. Patients fit for *Anuvasana Vasti*
2. Patients of either sex presenting with classical signs and symptoms *Janu Sandhigata Vata* will be selected.
3. Patients between age group of 30 to 70 will be selected.

### Exclusion Criteria

- a) Patient unfit for *Anuvasana Vasti*.
- b) Patients other than the age group of 30 to 70.
- c) Patients who are obese.

### Study Design

It is a comparative clinical trial with pre-test and post-test design.

➤ Methodology of the Study: Forty patients having *Janu Sandhigata Vata*, irrespective of age and sex were randomly divided into 2 groups- Group A and Group B.

### Intervention Chart

**Table 1:** Intervention Chart

Particulars	Group A	Group B
Sample	20	20
Drug of <i>MatraVasti</i>	<i>Ksheerabala Taila</i> prepared in <i>Khara Paka</i>	<i>Ksheerabala Taila</i> prepared in <i>Madhyama Paka</i>
Dose	72ml	72ml
Schedule	Consecutive 9days	Consecutive 9days
Time of administration	After food, at afternoon	After food, at afternoon
Study duration	9 days	9 days
<i>Pathyakala</i>	18 days	18 days

### Assessment Criteria

Patients were evaluated thoroughly prior to the treatment, on 9th day of treatment and on 18th day of follow up period on the basis of subjective and objective parameters.

#### I. Subjective Parameter

#### 1. *Sandhi sula*

#### II. Objective Parameter

1. Joint pain with WOMAC Osteoarthritis Index
2. *Sandhi Gati* [movement of Knee joint with goniometer]

3. Sandhi Sotha [size of swelling using measuring tape]
4. Tenderness
5. Walking time

**Assessment of Objective parameters**

WOMAC Osteoarthritis Index: The grading for pain was assessed on the basis of WOMAC Osteoarthritis Index. It is a self-administered questionnaire consisting of 24 items divided into 3 subscales. The test questions are scored on a scale of 0-4, which correspond to: None (0), Mild (1), Moderate (2), Severe (3), and Extreme (4).

**Observation and Results**

The effect of *Matra Vasti* with *Ksheerabala Taila* prepared in 2 *Pakas* ie *Khara Paka* with *Madhyama Paka* was studied in patients suffering from *Janu Sandhi Gata Vata*, fulfilling the inclusion criteria.

No of patients included in the study- 40

No of patients completed the study- 40

The processed data on observation and results of both the Groups is systematically arranged.

It includes 6 sections:

1. Demographic data
2. Data related to personal history and examination of patients

3. Date related to clinical picture
4. Data related to overall assessment of treatment
5. Date related to observations on *Vasti*.
6. Data related to other observations

**Statistical analysis of effect of therapy:** The difference of effect of the 2 treatments i.e., comparison of effect of treatment between the groups were tested using Mann Whitney U Test. The effect of treatment within each group was tested using Wilcoxon Sign Test. In the analysis the significance value was taken as 0.05. The Assessment parameters were observed before treatment, after treatment and after following up. The significant difference between the grades of pain between BT and AT, AT and FU are statistically tested using Wilcoxon Signed rank test and it was found out whether the difference in the grades of pain are statistically significant or not. The significant difference between assessment parameters of patients with treatment A (*Matra Vasti* with *Ksheerabala Taila* in *Khara Paka*) and Treatment B (*Matra Vasti* with *Ksheerabala Taila* with *Ksheerabala Taila* in *Madhyama Paka*) corresponding to after treatment value and Follow up value was tested using Mann- Whitney U test.

**Table 2:** Overall assessment of treatment:

	Group A		Group B	
	After Treatment	After Follow Up	After Treatment	After Follow Up
Complete relief	0%	0%	0%	0%
Marked response	45%	55%	30%	50%
Moderate response	25%	25%	55%	35%
Mild response	30%	20%	15%	15%
unchanged	0%	0%	0%	0%

**Table 3:** Changes in Assessment Parameters: [AT: After Treatment, FU: Follow Up]

Assessment Parameters (% of Relief)	Group A		Group B	
	AT	FU	AT	FU
Pain on walking	57.97	69.56	72.88	77.96
Nocturnal pain	67.24	79.31	82.35	86.27
Pain on rest	79.16	83.33	94.28	97.14
Pain on weight bearing	77.14	74.28	70.96	80.64
Morning stiffness	66.10	71.18	72.72	78.18
Morning stiffness later on day	74	76	79.16	91.66
Descending stairs	55.71	65.71	64.28	72.85

Ascending stairs	47.22	59.72	52.78	63.88
Rising from sitting	61.53	67.69	71.01	76.81
Pain on standing	63.07	64.61	68.25	77.77
Bending to floor	75.92	83.33	74.46+	82.97
Walking on flat surface	66.66	40	74	86
Lying in bed	87.23	80.85	91.89	94.59
Pain on sitting	75	80	78	82
Heavy domestic duties	61.76	70.58	58.20	71.64
Rising from bed	76.66	81.66	79.62	87.03
Getting in/out of car	70.76	73.84	73.52	76.47
Sandhi sotha	88.23	82.35	80	75
ROM	60.52	63.15	52.94	64.70
Tenderness	78.94	94.73	72.22	88.88
Walking time	36.53	50	42.59	51.85

**Table 4:** Data related to observations on Vasti:

	Group A	Group B
Mean retention time	5.41 hours/day	5.66 hours/day

**Table 5:** Samyak Vasti Lakshanas

Group A									
Lakshanas	Day1	Day2	Day3	Day4	Day5	Day6	Day7	Day8	Day9
Sapureesha Sneha Nivrutti	10%	30%	65%	75%	100%	100%	100%	100%	100%
Saanila Snehanivrutti	30%	75%	90%	100%	100%	100%	100%	100%	100%
Swapnanuvrutti	0%	15%	10%	40%	60%	70%	85%	90%	90%
Laghuta	0%	0%	5%	15%	35%	50%	80%	80%	80%
Balam	0%	0%	5%	5%	15%	20%	50%	70%	70%
Srishtavega	0%	5%	10%	30%	70%	90%	95%	95%	95%

**Table 6:**

Group B									
Lakshanas	Day1	Day2	Day3	Day4	Day5	Day6	Day7	Day8	Day9
Sapureesha Sneha Nivrutti	30%	35%	85%	90%	100%	100%	100%	100%	100%
Saanila Snehanivrutti	10%	55%	75%	85%	90%	90%	90%	90%	95%
Swapnanuvrutti	0%	10%	25%	50%	65%	80%	85%	90%	90%
Laghuta	0%	5%	5%	10%	25%	60%	65%	65%	65%
Balam	0%	0%	0%	0%	15%	25%	40%	50%	55%
Srishtavega	5%	5%	15%	45%	75%	85%	90%	90%	95%

## DISCUSSION

Conclusion on overall effect of treatment: Majority of the patients showed marked response to the treatment. Clinically both the treatments had effect on relieving signs and symptoms of Janu Sandhigata Vata. In both Groups maximum number of patients attained marked response after treatment and each group is having pos-

itive changes in the follow up. In group A after treatment 45% with marked response changed to 55% after following up, 25% moderate remained same and 30% mild to 20% after following up. In Group B 30% marked response changed to 50% in follow up.

Retention time: No major difference was found between the retention time of both groups and we cannot

conclude which group has got the maximum retention time. In group A there was a tendency of decrease in retention time after 5th day whereas in group B retention time was almost same in all the 9 days.

*Samyak Lakshanas*: In both groups, *Samyak Lakshanas* like *Sapureesha Sneha Nivruthi* and *Saanila Sneha Nivruthi* was attained for all 40 patients from 4th day onwards. *Swapnanuvruthi* was attained slowly in both groups. Only 90% of patients attained *Swapnanuvruthi* in both groups. Number of patients who attained *Laghuta* was found maximum in Group A comparing to Group B. 70% of the patients in Group A attained *Balam* whereas only 55% of the patients got *Balam* in group B. Comparing the *Srishtavega Lakshana* both the group was having almost same result. *Samyak Lakshanas* of *Anuvasana Vasti* attained was similar in both groups except in *Laghuta* and *Balam*.

No major complications were observed in both groups.

## CONCLUSION

After treatment results were statistically significant for all the parameters in both groups.

Statistically significant results were obtained in assessment parameters after following up period in both groups. Pain on Walking, Nocturnal pain, pain on ascending stairs, pain while bending to floor and Walking time was significant in Group A during follow up period. Parameters like Morning stiffness later in day, pain on descending stairs, pain on standing, pain while walking in flat surface; ROM was found significant in Group B.

## Acknowledgement

I wholeheartedly thank my guide Dr. Joshi George and Coguide Dr. Rahul H for their guidance and continuous support to execute this study. I express my sincere gratitude to all faculty members of PG studies in *Panchakarma*, at MVRAMC, Parassinikadavu, Kannur. I remember and thank all my colleagues at this moment for their valuable discussions and comments.

## REFERENCES

1. Agnivesa/ Caraka samhita/Danti Dravanti kalpa Adhyaya /Vaidya Jadavji Trikamji Acharya(ed.)/Krishnadas Ayurveda Series 66/ Chowkhamba Krishnadas Academy/ Varanasi/2010/p.676.
2. Susruta/ Susruta Samhita/ snehopayogikam Chikitsitham Adhyaya / Acharya Jadavji Trikamji and Narayan ram Acharya Kavyatirtha (eds.)/Kashi Sanskrit Series 316/chowkhamba Sanskrit Sansthan/ Varanasi/p.509
3. Sahasrayogam/*Taila* Prakaranam/Dr.Ramnivas Sharma and Dr. Surendra Sharma/ Chaukamba Sankrita Pratishthan/ Delhi/p.315

Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Thulasi T.V et al: A Comparative Study To Evaluate The Effect Of Matra Vasti In Khara Paka With Madhyama Paka In Janu Sandhigata Vata. International Ayurvedic Medical Journal {online} 2021 {cited April, 2021} Available from: [http://www.iamj.in/posts/images/upload/713\\_718.pdf](http://www.iamj.in/posts/images/upload/713_718.pdf)