

**AYURVEDIC MANAGEMENT OF AVASCULAR NECROSIS WITH CHANDAN BALA
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Article Received: 08/06/2024 - **Peer Reviewed:** 17/06/2024 - **Accepted for Publication:** 15/07/2024.**ABSTRACT**

Avascular Necrosis (AVN) is a progressive degenerative condition of bone that mainly affects the bone of the lower region. It is more common in the hip joint. Avascular necrosis of the femoral head refers to the death of osteocytes with subsequent structural changes due to impaired blood supply. People between 30 and 50 years of age are usually affected. It is associated with excessive alcohol intake and long-term use of high-dose steroidal medications. On the contrary, Ayurvedic treatment provides long-term relief and prevents disease progression without drawbacks. It is *Vata Pradhana Tridoshaja Vyadhi* with *Vikruti* of *Asthi-Majja Dhatu*. In modern medicine, no specific treatment other than surgery is available. The present case study is upon a 45-year-old male patient, diagnosed with avascular necrosis involving nearly 50 percent of the femoral head with moderate marrow oedema (stage 3rd) femoral head with complaints of pain in the bilateral hip region since one and a half years, which was associated with difficulty in doing normal daily activities such as walking, sitting, squatting along with a change in the gait.

Key words: Avascular necrosis, *matra basti*, *asthimajjagat vaat*, *Lakshadi guggule* Musculoskeletal Disorder

INTRODUCTION

1. To study the effect of *Matra basti* and Lakshadi guggul in managing *Asthimajjagata Vata* (AVN).

2. To find an effective Ayurvedic Treatment Protocol for *Asthimajjagata Vata* (AVN).

MATERIAL AND METHODS: Selection and Source of Patient for this clinical study: The patient of *Asthimajjagata Vata* was registered from OPD of *Rognidan* department (OPD NO.- UHID 20230073668 IPD NO.-20233808 of Pt. Khusilal Sharma Govt. (Auto.) Ayurveda Hospital Bhopal (M.P.)

INTRODUCTION: Avascular necrosis (AVN), also called osteonecrosis, aseptic necrosis, bone infarction, and ischemic bone necrosis, is a progressive degenerative condition of the bone.[1] The arteries supplying the femoral head are narrow and, hence, are easily prone to injury followed by mere dislocation or a sub-capital fracture of the femoral neck. This leads to a lack of nourishment to the femoral head, resulting in necrosis. It typically affects the epiphysis of long bones at weight-bearing joints. An effort was made to evaluate the efficiency of *Panchakarma* (five therapeutic procedures) treatment and the conservative management of AVN of the femoral head against painful surgical procedures prescribed by modern science. The disease prevalence rate is 0.135% per 1000 people, most of whom are between 20 and 50. [1] Based on clinical presentation, AVN can be correlated with *Asthi-kshaya*, *Asthimajjagata Vata*, and *Asthibhagna*; *Asthimajjagata Vata* is more similar to AVN by its pathogenesis and symptoms. The signs and symptoms of *Asthimajjagata Vata* are *Bhedoasthiparvanam* (breaking type of pain in bones), *Sandhishoola* (Joint pain), *Mansakshaya* (muscular wasting), *Balakshaya* (weakness), *Sandhishaitilyam* (flaxity of joints), *Aswapna Satatruka* (sleeplessness due to continuous pain), *Asthi-Dourbalyani* (destruction of bony tissue causing generalized weakness). *Asthimajjagata Vata* can be cured if treated in the acute stage, but it becomes challenging to complete recovery in the chronic stages.[2] The general line of treatment of Vata Vyadhi is Abhyanga (oil anointing), Swedana (sudation), Basti

(therapeutic enema), etc. In avascular necrosis, Vata Dosha is the main vitiated Dosha here, so the treatment process should be Vata-shamaka (pacifies Vata), and therapies such as Abhyanga (oil anointing), Mridu Swedana (mild sudation) and *Brahmana Basti* (nourishing type of enema therapy) to restore the diminished *Dhatu*. [3] *Lakshadi Guggul* is an Ayurvedic medicine used to treat bone-related problems. It is a rich source of calcium that aids in conditions like osteoporosis. It also fastens the healing process in bone fractures, low bone density, and joint pain. [4] *Matra Basti* is a form of enema treatment with *herbal oils* or *ghees*. It is helpful in pure *Vata* conditions such as osteoarthritis. *Matra vasti* has a special place among all the *vastis* and is highly praised because it can be administered at any time. It doesn't cause any complications. Since the dosage of *sneha* used in *matra vasti* is low, there will be no fear of any complications.

CASE HISTORY

A 53-Year-old male patient working as engineer in Wipro Mumbai reported to over *Rog Nidan* department OPD at pandit Khushi Lal Sharma ayurvedic hospital Bhopal in the month of June with the chief complaints of pain and stiffness in whole right leg, no movement in right leg since last 6-month pain constantly present whole day associated with difficulty in doing daily normal activities such as walking, running etc. patient got diagnosed with covid 19 positive and took allopathic medicine along with heavy steroids he claims that he was apparently healthy before 6 month this problem appears gradually with the sudden jerk in leg he consults various of doctors of different pathy's all over India only symptomatic relief may occurs while taking medicine after stopping of medication condition become same one of the senior orthopaedic surgeon advice patient for hip replacement surgery diagnosed his problem as Avascular necrosis (AVN) involving nearly 50 percent of femoral head with moderate marrow oedema and no subchondral fractures (stage second) and mid right joint effusion. One of the patient's relatives suggested our

hospital, and then the patient approached our hospital for conservative treatment.

EXAMINATION OF PATIENT:

The general and specific examination of the patient was conducted as per modern and *Ayurveda*, and the details are highlighted in tables no.1 and 2.

Table no.1: Aturbala Pramana Pariksha (examination of the strength of the patient):

1	<i>Prakruti</i> (Constitution of the person)	<i>Vatapradhan Kapha, Rajas</i>
2	<i>Sara</i> (quality of tissue)	<i>Madhyama</i> (average) <i>Rasa, Mamsa</i>
3	<i>Samhanana</i> (body built up)	<i>Madhyama</i> (average)
4	<i>Pramana</i> (Anthropometric measurement)	Wt.-68kg Ht.-5ft
5	<i>Satmya</i> (adaptability)	<i>Uttama</i> (good)
6	<i>Satva</i> (mental strength)	<i>Uttama</i> (good)
7	<i>Aaharshakti</i> (food intake and digestion capacity)	<i>Abhyavarana</i> (average) <i>Jarana</i> - 4-5 hrs
8	<i>Vyayamshakti</i> (exercise capacity)	<i>Madhyama</i> (average)
9	<i>Vaya</i> (age)	<i>Yuvavastha</i> (adult)
10	<i>Desha</i> (habitat)	<i>Sadharan</i>

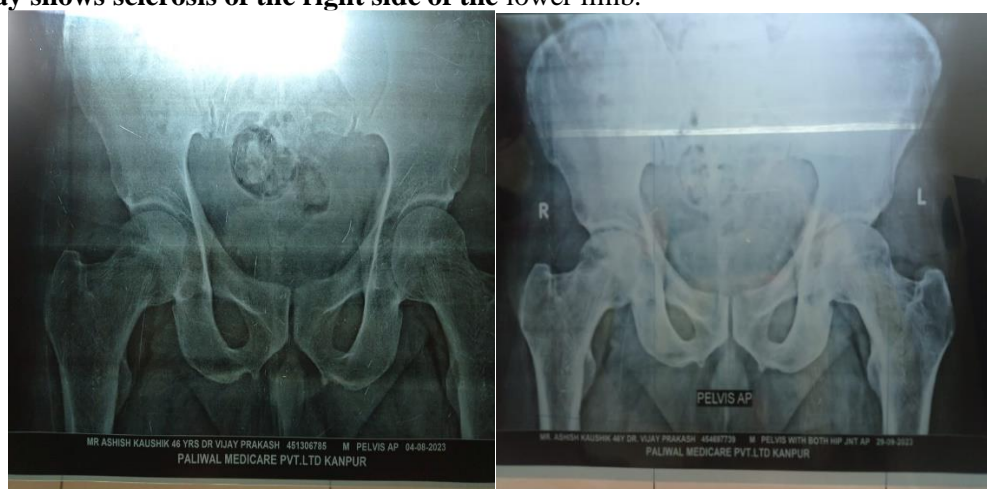
Table no.2: Asthavidha Pariksha (Eight-fold examination):

1	<i>Nadi</i> (pulse)	78/Minute, Regular
2	<i>Mutra</i> (urine)	5-6 time /day <i>Samyaka</i>
3	<i>Mala</i> (stool)	One/day <i>Samyaka</i>
4	<i>Jihva</i> (tongue)	Reddish pink <i>Nirama</i>
5	<i>Shabda</i> (sound)	<i>Spashta</i>
6	<i>Sparsha</i> (touch)	<i>Samsheetoshna</i>
7	<i>Drik</i> (eye)	<i>Spashta</i>
8	<i>Aakriti</i> (build)	<i>Madhyama</i>

INVESTIGATION:

MRI—Avascular necrosis (AVN) involves nearly 50 percent of the femoral head, with moderate marrow oedema, no subchondral fractures (stage second), and a mid-right joint effusion.

X-RAY – x-ray shows sclerosis of the right side of the lower limb.



BEFORE X-RAY

AFTER X-RAY

DIAGNOSIS:

In this disease, the diagnosis was first done based on her previous history, signs and symptoms. However, the final diagnosis was made by X-ray and MRI findings of the hip joint.

PLAN OF STUDY:

- ✓ The patient was not taking allopathic medicines during the study period.
- ✓ The drugs *Matra Basti (Chandanbalalakshadi Tailam)* and Lakshadi guggul were procured and prepared in the pharmacy of Pt. K.L.S. Govt. Ayurveda College Bhopal (MP)

DURATION OF STUDY - 30 days

TREATMENT REGIMEN:

Table no. 3- Treatment Regiment

Drug	Dose	Anupana
<i>Matra Basti (Chandanbala lakshadi tailam)</i>	60 ml	-
<i>Lakshadi guggule</i>	250 mg BD	Lukewarm Water

EXAMINATIONS

Table no. 4 -General and Systematic Examinations

General Physical examination	Systemic examination
<ul style="list-style-type: none"> • Appetite-Normal • Bowel-Regular • Bladder- normal • Sleep- Disturbed • Temperature- Normal • Pallor- Absent 	<ul style="list-style-type: none"> • Respiratory System: Normal • Cardiovascular System: S1S2 Normal, no added sound. • Gastrointestinal System: No abnormality detected. • Nervous System: Higher and Moter functions are normal

Table no. 5 – Range of movement of Hip Joint examination before Treatment

Joint	Flexion	Extension	Abduction	Adduction	Medial Rotation	Lateral Rotation
Left hip joint	100 ⁰	20 ⁰	30 ⁰	25 ⁰	20 ⁰	30 ⁰
Right hip joint	70 ⁰	10 ⁰	15 ⁰	10 ⁰	10 ⁰	25 ⁰
Normal Range	110 ⁰ - 120 ⁰	10 ⁰ - 15 ⁰	30 ⁰ - 50 ⁰	20 ⁰ - 30 ⁰	30 ⁰ - 40 ⁰	40 ⁰ - 60 ⁰

Table no. 6 – Vas Numerical Distress Scale-

Parameter	Criteria	BT		AT	
		Rt. Leg	Lt. Leg	Rt. Leg	Lt. Leg
Pain (VAS Scale)	(0) No pain				
	(1-3) Mild pain		3		2
	(4-6) Moderate pain	6		5	
	(7-10) Severe pain				

Table no. 7- Assessment of Clinical Features Before and After Treatment

Clinical features	Before Treatment	After Treatment
Pain	3	1
Stiffness	2	0
Restricted Range of Movement	3	1
Gait	2	0
Radiograph (Ficat Scoring)	3	2

Table no. 8 – Range of movement of Hip Joint examination After Treatment

Joint	Flexion	Extension	Abduction	Adduction	Medial Rotation	Lateral Rotation
Left hip Joint	110 ⁰	20 ⁰	40 ⁰	30 ⁰	30 ⁰	40 ⁰
Right hip Joint	100 ⁰	15 ⁰	25 ⁰	20 ⁰	25 ⁰	30 ⁰

DISCUSSION

Avascular necrosis (AVN) is the death of bone tissue because of interference of the blood supply. In the early stage, there might be no symptoms. However, in the later stage, it affects both bone and nearby structures. A traumatic AVN of the hip is described as a lack of blood supply to the proximal femur. Approximately 80% of cases of AVN are a result of chronic corticosteroid use or chronic alcohol use.[6] According to the Ayurveda point of view, there is no direct correlation with avascular necrosis. Still, clinical presentation indicates the dominance of *Vata Dosh* and *Vikruti* (vitiation) of *Asthi Dhatu* (bony tissue). In AVN, the blood (*Rakta Dhatu*) supply to the femoral head is decreased due to any *Margavrodha* (occlusion of blood vessels), ultimately leading to necrosis. *Margavrodha* is also responsible for aggravating *Dhatu*. In the advanced stage, due to continuous *Vata Dosha* (due to necrosis) imbalance, it is further accountable for causing vitiation of *Pitta* and *Kapha*. So *Basti* is the first line of treatment of *Vata Dosha* and *Pitta*, *Kapha Dosha* and *Rakta*. [7] In this case, there was no history of trauma or other factors which reduce bone composition. As *Vata* and *Rakta* were involved, the treatment started with *Basti*. [8]

CONCLUSION

There is no permanent treatment for AVN. Joint substitution is the last treatment, which has its own impediments. The enema therapy in the current case

provided marked relief from pain, stiffness, and general debility and marked improvement in the gait. The grade of AVN did not worsen and was maintained well. Thus, this study concluded that *Chandan bala lakshadi tail matra Basti* with *lakshadi guggul* in AVN showed significant results in symptomatic relief. However, in order to generalise the result to other patients, further study with a large study group is required.

OBSERVATION/ RESULTS: The results were encouraging. The therapy provided marked improvements in gait, pain, and tenderness. Conservative management of AVN through Ayurvedic principles provides significant relief in signs and symptoms and improves quality of life.

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