



## Role of *madhuli modaka* in the management of *asthisousharya* with special reference to osteoporosis: A case study

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### ABSTRACT

Geriatric is the branch of medicine concern with the old age care and treatment. This age group where catabolic degenerative phenomenons get accelerted due to dominate of *vat dosha*. The *asthikshaya* occurs due to *vataprakop*. Because *Vatadosh* and *Asthi dhatu* are related to each other. Therefore in *Asthi dhatu*, there is formation of *Aakashyitva* (Space) and *sousharya* (porocity). It results into osteoporosis.

In Modern science, Osteoporosis is most common bone disease in Geriatric population. It is characterised by reduced bone mineral density (BMD), micro-architectural deterioration of bone tissue, calcium and phosphorus and increased risk of fracture. The prevalence of Osteoporosis and Osteoporosis related fracture increases markedly with age, reflecting in the related decline in the bone mass and increased risk of Osteoporosis in the Geriatric population.



Madhuli (Eleusine coracona) contain more amount of calcium and phosphorus. So this dravy is usefull in Osteoporosis. So Madhuli modaka showed symptomatically good result in Osteoporosis.

**Keyword:** Osteoporosis, *Asthidhatu*.  
*Madhuli modak*, *Asthisousharya*.

### INTRODUCTION

The medical system that is truely Indian in origin & development is *Ayyurveda*. It is practised throughout India from thousands of years. It means “knowledge of life” or the knowledge by which may be prolonged. The aim of *Ayurveda* is to protect the health of healthy people & second is to cure patient from diseases.

The term geriatrics is derieved greek word , Gen – old age and iatric – care. It is the branch of medicine concerned with the care and treatment of elderly. This is the age group where catabolic, degenerative phenomenons get accelerated due to dominate of *vata dosha*. Geriatric

disorders includes *Sandhigat vata* (Osteoarthritis), *Kampvat* (Parkinson's diseases), *Srutinash* (Dementia), *Asthisoshirya* (Osteoporosis), *Asthibhigna* (Bone fractures) etc. Now here we were discussing about a single case of *Asthisoushirya* (Osteoporosis).

According to Ayurveda, the *asthikshaya* occurs due to *Vataprakop*. Because *Vata dosha* and *Asthi dhatu* are related to each other due to *pratilom ashayashribhav*. When there is *Vataprakop* occurs, there is loss of *asthidhatawansh*. Therefore in *Asthidhatu*, there is formation of *Aakashyitva* (space) and *soushirya* (porosity). It results into Osteoporosis.

According to modern science, osteoporosis is by far the most common bone disease in Geriatrics population. It is characterized by reduced bone mineral density (BMD), micro-architectural deterioration of bone tissue, calcium and phosphorus and increased risk of Fracture. The prevalence of Osteoporosis and Osteoporosis related Fractures are increases markedly with the age, reflecting in the related decline in the bone mass and the increased risk of osteoporosis in the elderly. Fractures related to Osteoporosis are major public health problem.

*Elesuine coracona* contain more amount of calcium and phosphorus. So this *dravya* is useful in Osteoporosis and according Ayurveda, it's *guna* are *bruhan*, *singadha*, *laghu*. Its *madhur* in *ras* and *vipak*, *sheet* in *virya*. Due this property of *Madhuli*, there is recovery of *asthidhatu* and property of *Madhuli*, there is recovery of *Asthidhatu* and porosity is reduced.

## CASE REPORT

A 60 yr old male patient came with complaints of Both Knee joint pain,

Restricted movements of both Knee joint, Difficulty to walk since 1 year.

Patient had taken allopathic treatment before coming to hospital. Patient was thoroughly examined and detailed history was taken. Patient was farmer by occupation; patient did not have history of any major illness.

On examination:

General condition- moderate, afebrile, PR-84/min, regular, no pallor

Local examination of knee joint patient was having:

Sign and symptoms	Right Knee	Left Knee
Crepitus	Present	Present
Swelling	Absent	Absent
Stiffness	Present	Present
Flexion and extension	Painful	Painful

Routine investigation such as CBC, RBS, Urine Routine, Microscopic were in normal range.

RA test, Uric acid was in normal limits.

X-ray of bilateral knee joint Anteroposterior and Lateral view -

Impression- Intra-articular space reduction and presence of osteophytes. Early degenerative changes in both knee joints.

As per Ayurvedic texts the symptoms of *Sandhigata Vata* are: *Vatapurna Druti*, *SprashShotha*, *Sandhigate Anile*, *Prasaran*, *Aakuchanyoho*, *Pravrutti*, *Savedana*.

**DIAGNOSIS:** **Asthisoushirya (Osteoporosis)**

## TREATMENT

- Madhuli modaka was given every day for 2 times in day preferably empty stomach at 7.00 am n 7.00 pm.
- Dosage – Madhui modaka 50 gm
- Duration – Two times in day for 3 months
- Route -Orally
- Preparation of Madhuli modaka-
- Madhuli modaka is aaharadravya. Hence its large dose was required. Therefore it was given in the form of modaka.

## Ingredients-

- Weight of each modaka was 50 gm
- Madhuli churna 30 gm
- Goghrut 5 gm
- Gud (Jaggery)
- Ela 1gm

Jaggery was used as a binding agent and as preservative. Goghrut was used for bharjana of madhuli churna for easy digestion and becomes palatable. Ela was used as flavoring agent and as a preservative.

## Procedure

The preparation of Madhuli modaka was done strictly according to standard methods described in Sharangdhar samhita.

- \* The results were assessed on the basis of Signs and symptoms of Osteoporosis before an after treatment.

**Assessment Criteria:** Bilateral Knee joint pain:

Absent	0
Mild	1
Moderate	2

Severe	3
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Movement of bilateral Knee joint:

Free	0
Mildly restricted	1
Moderately restricted	2
Severely restricted	3

Distance walked by patient within 15 minutes:

90 feet	0
60 feet	1
30 feet	2
Less than 30 feet	3

Observation in present case:

Sign and symptoms	Before treatment	After treatment	Relief
Bilateral knee joint pain	3	1	76%
Movement of knee joint	2	0	76%
Distance walked by patient within 15 minutes	2	0	76%

## RESULT AND DISCUSSION:

In above case study patient got 76% relief in above symptoms of Sandhigata Vata. Above case was of Sandhigata Vatavyadhi and is type of Nirupstambhit Vatvyadhi. In which Asthidhatu Kshay was present. As the vitiated Doshaj circulate in the body and where they found the “Kha-vaigunya” i.e. Sandhi, they lodged there to produce the disease. This result into symptom- Vatpurnadrutisparsh,

Shotha, Prasara sankochanyo Pravrutti Savedana. It seems to be similar with Osteoarthritis.

Mode of action:

The factors influencing the disease were Mandagni, vitiated Vatadosha, Apatarpana and, so line of treatment was Basti, Snehana Swedana, Vedanashaman.

#### Samprapti :

- Hetusevan+ Asthi Dhatukshay
- Vatadosh Dushti, Vataprakopa
- Sandhipradeshi Sthansanshray
- Sandhigatavatvyadhi

#### Samprapti Vighatana:

In Asthivaha Strotodushti Chikitsa Panchatikta Dravya Siddha Ksheer Basti and Sarpi are mentioned and are Rasayana for Asthi Dhātu. They rejuvenate the Dhatus, repair them, remove Kha Vaigunya, give Bala (strength) to the Dhātu, maintain their healthy condition and restricts/ show down the progress of disease.



#### CONCLUSION

The treatment given for Sandhigata Vata was Snehana, Swedana, and Basti which helped in Vatadosha Shaman, relief in symptoms of disease and also an attempt to provide safe and effective treatment to the patient.

#### REFERENCES:

1. Dr. Bramhananda Tripathi, Charaksamhita, 2009- edition, Chaukhamba Surbharati Publication, Varanasi
2. Sushruta Samhita. Acharya Trikamji, Chaukhamba Orientalia, 8<sup>th</sup> edition 2005, Varanasi
3. Clinical Orthopaedic Diagnosis :Sureshwar Pandey and Anil Kumar Pandey 3<sup>rd</sup> edition.
4. Braun J.Inception cohort for orthopathies (pub Med)
5. Essential orthopaedics :J.Maheshwary (3<sup>rd</sup> edition 2004)
6. Hamilton Baily's Physical Signs: S.P. Lumley (18<sup>th</sup> edition, 2001)

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