



### A Case Study of *Janusandhigatavata* (Osteoarthritis of knee joint)

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#### Abstract-

Osteoarthritis is one of the most common disorders in joint disease. It is characterized by pain, shiftiness, decreased range of motion which is very close to *Sandhigatavata*. *Sandhigatavata* is amongst 80 *Nanatmaj Vat Vyadhi*. Here is a case of 57 years old male patient who was having complaints of pain, tenderness, crepitus, swelling and restricted movement of both knee joints. Based on these symptoms and clinical sign he was diagnosed as a case of *Sandhigatavata*. Treatment given to this patient was *Snehan*, *Swedan*, *Janubasti*, *Yog*, *Basti* and oral medication. Assessment of patient before and after treatment was done on the basis of pain, tenderness and physical activity to exclude the efficacy of the treatment. Based on assessment parameter, moderate improvement was seen in subjective sign & symptoms after the

completion of Schedule of IPD treatment & 1 month follow up. The pain & physical activity were improved significantly.

**Keywords:** Osteoarthritis, *Sandhigatavata*, *Vata*, *Basti*

#### INTRODUCTION

In *Charak samhita*, two types of *Vat Vyadhi* are mentioned, *Nirupstambhit Vat vyadhi* that develop due to *Dhatukshay* & *Upastambhit Vat Vyadhi* that develop due to *margavarodh* due to *kapha* & *aam*. *Charakacharya* has explained it as '*Sandhigata Anil*' which on palpation feels like bag filled with air.

Food, lifestyle & Environment are three important determinants related to the cause of disease. Nowadays continuous standing work, stress factor; sedentary life leads to *Vatprakop* which may be due to

*Dhatukshaya* (Degeneration) or *Margavarodh* (obstruction). This *Prakupit Vat* is extended to the joints where there is *kha-vaigunya* and marks the beginning of *Sandhigatavat*. Symptoms of *Sandhigatavat* are pain, swelling, tenderness and restricted movement of joints. When the disease occurs after 4<sup>th</sup> decade of life, it is mainly due to *Dhatukshaya*. According to modern, symptoms of O.A. are loss of articular cartilage, swelling, pain, synovial inflammation, joint shiftiness, loss of mobility and it is a degenerative disease. The common obstacle for the elderly is to carry out all daily living & decreased mobility.

Detailed management of this condition in *Ayurveda* texts contains a combination of external & internal medication the *bahya Chikitsa* includes *Snehan, Swedan, Janubasti, Patrapindla* etc. *Abhyantar Chikitsa* include *Churna, Kashay, vati, asav arishtas* and many more processes.

## Materials & Methods

A 57-year-old male patient came to Panchakarma OPD at SMBT *Ayurveda* College & hospital, Dhamangaon, Nashik having following complaints but he didn't get relief anywhere so he was admitted in SMBT hospital for 12 days.

C/O

BL knee joint pain: 3 yrs.

BL knee joint swelling: 3 yrs.

Restricted movement of BL knee joint were having swelling & restricted movements. X-

ray of BL knee joint showed *osteoarthritic* changes and *osteophytes*.

He was diagnosed as a case of *Januandhigatavata* on the basis of clinical sign, symptom, X-ray, finding & examination. Treatment was started after detailed history taking & examination of the patient.

## Examination of patient-

**Table A -  
Ashtavidhanparikshana**

1. Nadi - 72/mins, Vatpradhan Pitta-anubandhi
2. Mutra - Samyak (7-8 times / day , 1 times in night)
3. Mala - Baddhakoshthata (Yadakada) Niram
4. Jivha - Saam
5. Shabd - Spashta
6. Sparsh - Samsheetoshna, Janupradeshi Ushanaspars
7. Durk - Netragolak
8. Akriti - Madhyam

Table 1

**Table B – Aturbalapramana Pariksha**

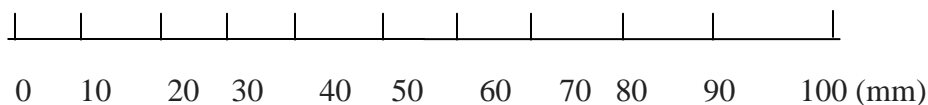
1. Prakriti - Vatpradhan Pittanubandhi
2. Vikriti - Sandighatavata
3. Samhanan - Madhyam
4. Sara - Madhyam
5. Praman - Madhyam
6. Satmyatah - Avar
7. Satva - Madhyam
8. Aaharshakti - Madhyam

Table 2

### Assessment Criteria –

The improvement in the patient like reduction in pain, swelling, restricted movement score graded based on following scales.

#### 10 cm Visual Analogue Scale (Vas)



No pain

maximum pain

### 2. *Pidanasahtva* (Tenderness) –

Sr. no.	Severity of Symptoms	Grade
1	No tenderness	0
2	Patient says tenderness	1
3	Winching of face	2
4	Winching of face & withdrawal of affecting part	3

Table - 3

### 3. *Shotha* (Swelling)

Sr. no.	Severity of Symptoms	Grade
1	No shotha	0
2	Slight shotha	1
3	Moderate shotha	2
4	Severe shotha	3

Table - 4

### 4. *Crepitus*

Sr. no.	Severity of Symptoms	Grade
1	No Crepitus	0
2	Complained by patient but not felt in	1

### 1. *Pain (Shoola)* –

	examination	
3	Felt on examination	2
4	Felt & heard on examination	3

Table - 5

### Treatment Protocol –

Patient is given both shaman & Panchakarma *Chikitsa*. Patient was given following medicines followed by *Panchakarma* & got significant result.

### Ayurvedic Management –

Sr. No.	Medicine	Dose	Frequency
1	<i>Yograj Guggula</i>	2 Tab	BD
2	<i>Mahavatvidhvansa</i>	2 Tab	BD
3	<i>Dashmool Kwath</i>	40 ml	BD
4	<i>Lavanbhaskar Churna</i>	3 gm	BD
5	<i>Swadishtha Virechan churna</i>	3 gm	HS

Table – 6

**Panchkarma Rx –**

- *Sarvang Snehana & Swedan* is started after 3 days of oral medication.
- *Janubasti* was given after *Snehana & Swedan* with *Mahanarayana tail & Sahachar Tail* mixed oil.
- With above measures, *Yogbasti Karma* was given to patient for 8 days from 4<sup>th</sup> day.

1	Day 1 – oral medication	
2	Day 2 – oral medication	
3	Day 3 – oral medication	
4	Day 4 – <i>Anuvasana Basti</i>	<i>Mahanarayana Tail + Sahachar Tail</i> 40 ml 40 ml
5	Day 5 – <i>Anuvasana Basti</i>	Same as above
6	Day 6 – <i>Niruha</i>	<i>Dashamoola Niruha</i> (960ml)
7	Day 7 – <i>Anuvasana</i>	<i>Mahanarayana Tail</i> (80 ml)
8	Day 8 – <i>Niruha</i>	<i>Dashamoola Niruha</i> (960 ml)
9	Day 9 – <i>Anuvasana</i>	<i>Mahanarayana Tail</i> (80ml)
10	Day 10 –	<i>Dashamoola</i>

	<i>Niruha</i>	<i>Niruha</i> (960 ml)
11	Day 11 – <i>Anuvasana</i>	<i>Mahanarayana Tail</i>

**Preparation of Dashamoola Niruha Basti –**

For preparation of *Dashamoola Niruha basti* 200 gms of *Dashmool baharad* was boiled 320 ml of *.ashmool Kwath*.

Total Quantity of *Niruha Basti* - 960 ml

*Kwath*- 800 ml

*Madhu*- 25 ml

*Dashamoola churna*- 30 gms

*Mahanarayana Tail* – 100ml

*Saindhav*- 5 gm

In the vessel, honey & *Saindhav* are added, mixed well. After that warm oil is added, & stirred well, then paste of drugs is added. After stirring well, *Dashmool Kwath* is added and then combined well & put in the *bastiyantra*.

**Preparation of Anuvasan:**

*Mahanarayana Tail* - 120 ml

*Shatpushpa Churna* - 1 gm

*Saindhav* - 1 gm

*Tail* is heated indirectly. *Shatapushpa Churna & Dashmool Churna* are added as *prakshepa*.

## Result

As per objective assessment criteria, patient's sign & were analyzed before

treatment & after treatment and during followed period. The result shown in the table as under

Sr. n o.	Knee	Pain		Tenderness		Swelling		Crepitus		Total score	
		BT	AT	BT	AT	BT	AT	BT	AT	BT	AT
1	Rt. Knee	40	20	2	1	2	1	2	2	46	24
2	Lt. knee	40	20	2	1	2	1	2	1	46	23
Total										92	47

As per above table score was 92 at the time of admission & if reduced to 47 at the time of discharge . It showed 52% relief in patient

## Discussion

*Sandhigataavata* is a *Nirupstambhit Vat vyadhi* caused by *Dhatukshay*. With the age, *Rukshata* of *Vat dosha* increases and so increase the *Dhatushaya*. So *Snehan* is a given to the patient that reduced pain, brought back the *Mardavata* of joints. *Swedan* helps to reduce stiffness and provide flexibility of *Sandhi*. *Janubasti* reduces the *Shool*, *Shabd* and *Shotha*. It gives strength to the joint. Oral *Ayurvedic* medicines are *Vathara*, *Shothhara*, *Shoolghna* and *Rasayan*. In *Janusandhigataavata*, *Vat Dosha* is vitiated by *Ruksha*, *laghu guna* that is mitigated by *Basti*.

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