



## Research Article

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### THE COMBINED EFFECTIVENESS OF SATAVARICHINNARUHADI KASHAYA AND SIGRUVARUNASYA LEPAM IN THE MANAGEMENT OF RHEUMATOID ARTHRITIS: A CASE STUDY

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#### ABSTRACT

Introduction- Rheumatoid arthritis (RA) is an autoimmune disorder which affects the joints and manifest primarily as pain and later by limiting the joint functions along with swelling, redness and stiffness. Aim- To study the combined effectiveness of Satavarichinnaruhadi Kashaya and Sigrugarunasya Lepa in managing RA. Methods- A 62 yr. old female patient already diagnosed as RA for 2 years reported in the study setting with complaints of pain in all joints for 15 days. The patient was advised to take 48 ml of Satavarichinnaruhadi Kashaya and Sigrugarunasya Lepa twice daily for 30 days. Periodic evaluation with DAS28 formula and joint measurements was done on 0<sup>th</sup> and 30<sup>th</sup> day. Results- DAS28 Score, before treatment = 8.08, after treatment = 3.67 (P < 0.001) Discussion- Satavarichinnaruhadi Kashaya and Sigrugarunasya Lepa found to be very effective in RA. In Ayurveda RA can be related and understood as Vatasonita, which occurs due to Sookshma Sara and Drava Sara properties of Vata and Rakta respectively. Most of the drugs in Satavarichinnaruhadi Kashaya are Vata-Pitta Samana, Seeta Veerya and Madhura Vipaka which in turn helps in managing the deranged Vata and Rakta, whereas in Sigrugarunasya Lepa both drugs are Kapha-Vata Samana, Ushna Veerya and Katu Vipaka, which in combination with Dhanyamla is Vata-Kapha Samana, Sparsa Seeta in turn reduces the pain due to Vata. At the end of the study there was significant reduction in ESR along with symptoms. Conclusion- Hence the combination of Satavarichinnaruhadi Kashaya and Sigrugarunasya Lepa is having significant role in the management of RA.

**Keywords:** Rheumatoid Arthritis, Satavarichinnaruhadi Kashaya, Sigrugarunasya Lepa

#### INTRODUCTION

Rheumatoid arthritis (RA) is an autoimmune disorder which affects the joints first and manifest primarily as pain and later by limiting the joint functions along with swelling, redness and stiffness. The causes for the disease are still completely unknown<sup>1</sup> RA adds risk of cardiac and pulmonary disorders, risk of lymphomas, peripheral neuropathy, carpal tunnel syndrome, baker's cyst, subcutaneous nodules, systemic vasculitis etc. Gender prediction ratio of RA is 3 women: 1 man.<sup>2</sup> People with RA has 3-fold increased mortality rate that is median life expectancy shortens by 3-7 years. The prevalence of Rheumatoid Arthritis increases with age, highest among people of age 65 years and older, women and those who are obese.<sup>3</sup> In India, the prevalence of RA is 0.75%.<sup>4</sup> Projected to the whole population, this would give a total of about 7 million patients in India. The incidence also increases with age, peaking between 4<sup>th</sup> and 6<sup>th</sup> decades. 80% of all patients develop the disease between the ages of 35 and 50<sup>1</sup>. Even genetic factor has an important role in the susceptibility to Rheumatoid Arthritis<sup>2</sup>.

Even though science advanced to such a great extent, there is no much effective medical management for RA apart from giving symptomatic relief of pain by administering NSAIDs and modification of disease pathology by administering DMARDs

etc. Ayurveda the ancient medical wisdom mentions a disease called Vatasonita (RA) and this concept can be applied to understand and relate RA. Sookshma (subtle) Sara (pervasive) Vata (morbid humour) and Drava (fluidity) Sara (mobility) Rakta (blood) moves through the Siras (vessels) and settles in Sandhis (joints) due to Vakrata (tortuous nature of joints) present there, gets associated with Sthanika Doshas which present there like Kapha and Pitta produces Sopha (swelling), Ruja (pain) etc in Sandhipradesa (joint)<sup>5</sup> Such similar symptoms can be observed in RA also. Satavarichinnaruhadi Kashaya (medicated decoction)<sup>6</sup> which mentioned in Sahasrayogam and Sigrugarunasya Lepa (poultice)<sup>7</sup> mentioned in Vangasena which are specifically indicated in Vatarakta. Satavarichinnaruhadi Kashaya consists of Satavari (*Asparagus racemosus*, Willd), Chinnaruhya (*Tinospora cordifolia*, Miers), Amalatwak (*Emblica officinalis* Linn), Bala (*Sida cordifolia* Linn), Ikshu (*Saccharum officinarum* Linn.), Kokilaksha (*Asteracantha longifolia* Nees), Yashtimadhu (*Glycyrrhiza glabra*, Linn) and most of the drugs are Vata-Pitta Samana (reduces Vata and Pitta), Seeta Veerya (cold potency) and Madhura Vipaka (state of food/drug after digestion) which in turn helps in managing the deranged Vata and Rakta. Sigrugarunasya Lepa consists of Sigru (*Moringa oleifera*. Lam), Varuna (*Crateva religiosa*). Both these drugs are Kapha Vata Samana (reduces Kapha and Vata), Ushna Veerya (hot potency) and Katu Vipaka (state of food/drug after digestion),

which in combination with Dhanyamla is Vata Kapha Samana, Sparsa Seeta (cold in touch) used externally in turn reduces the pain in joints.

**MATERIALS AND METHOD**

**Place of study**

Pankajakasthuri Ayurveda Medical College and Post Graduate Centre Hospital, Killy, Kattakkada, Thiruvananthapuram, India

**Ethical clearance**

The study has been cleared by IEC vide approval reference number (PKAMC/ADM/01/ 2017). The study is carried out as per International Conference of Harmonization – Good Clinical Practices Guidelines. (ICH – GCP).

**Case presentation**

A 62-year-old Hindu female patient, Homemaker, reported to Kayachikitsa OPD, Pankajakasthuri Ayurveda Medical College and PG Centre Kattakkada on 31/12/2018 with OP No71696 with complaints of pain in all major and minor joints since 15 days, who is already diagnosed with RA since 2 years, came with blood

**Personal history**

reports which show positive RA factor and CRP. Who on further investigation showed raised ESR.

**History of presenting complaint**

The patient was asymptomatic before 2years. Later she developed pain in the right big toe, then on bilateral knee, shoulder, neck and smaller joints of both hands. She took allopathic medication for the same and got symptomatic relief, thereafter the symptoms re-occurred once she stopped the medication. She noticed occasional appearance of reddish discoloration on both feet which disappears by itself. 15 days before she got pain in the neck, bilateral shoulder, elbow, wrist, metacarpal, distal and proximal interphalangeal joints, knee and ankle joints. She had severe morning stiffness which lasts for more than 30 minutes and gets subside by itself; once she starts the day today activities. Thus she came to Pankajakasthuri Ayurveda Medical College Hospital for better management through Ayurveda.

**History of past illness**

Not a known case of diabetes, hypertension and dyslipidaemia.

**Treatment history**

Nothing Significant

**Table 1: Personal History**

Appetite: Good	Bladder: Normal
Allergy: Not Detected	Diet: Taking mixed diet. Katu -Rooksha -Amla- Lavana-Teekshna – Ushna –Vidahi Ahara Priyatva and took fish fry daily.
Addiction: Nil	Sleep: Disturbed.
Bowel: Regular	Exercise: Moderate Labour

**Investigations**

RA: Positive  
 CRP: Positive  
 Total WBC: 7500cells/cumm  
 Neutrophils: 62%  
 Lymphocytes: 33%  
 Eosinophils: 04%  
 Monocytes: 01%  
 Basophils: 0%  
 ESR: 88mms/hr  
 X-Ray: Mild arthritic changes in IP joints. No serious erosions noted.

**Assessment criteria and grading**

Assessment was done before and after treatment, with the parameter DAS28<sup>8</sup> formula and Swelling of bilateral shoulder, Elbow, wrist, proximal and distal interphalangeal joints and knee joint is measured with a tape.

**RESULT**

**DAS28 Form<sup>8</sup>**

DAS28=0.56\* (t28) +0.28\*(sw28) +0.70\*Ln (ESR) +0.014\*VAS  
 Score >5.10---High disease activity  
 Score 5.1 to 3.2 --- Moderate disease activity  
 Score <3.2 ---Low disease activity  
 Score <2.6 --- Being in remission

Response to Rx.-\_ of >= 1.2--- Good and <0.6--- Poor

European League Against Rheumatism (EULAR)

**Course of treatment**

The patient was advised to take 48ml<sup>9</sup> Kashaya with Yashtimadhu Churna (1gm)<sup>10</sup> as Prakshepa Dravya (adjuvant) twice daily before food for a period of 30 days. Sigruvarunasya Lepa Churna (powder) with Dhanyamla twice daily for application as thin Lepa (poultice) against the direction of Romakoopas (hair follicle)<sup>11</sup> in all painful joints for 30 days. She was advised to report once in 15 days for uninterrupted feedback.

**Table 2: Observations**

Parameter	Before treatment	After treatment
DAS 28 FORMULA Score	8.08 (High activity)	3.67 (Moderate activity)

Table 3: Observations

JOINT SWELLING (In cm's)	MEASUREMENT LEFT				MEASUREMENT RIGHT			
	BEFORE TREATMENT		AFTER TREATMENT		BEFORE TREATMENT		AFTER TREATMENT	
SHOULDER	40		38		37		37	
ELBOW	26		25		25		25	
WRIST	16		15		14.5		14	
	Prox.IPJ	Dist.IPJ	Prox.IPJ	Dist.IPJ	Prox.IPJ	Dist.IPJ	Prox.IPJ	Dist.IPJ
THUMB	7	6	6	6	7	6.5	6	6
INDEX FINGER	6	6	6	5	6	5.5	6	5
MIDDLE FINGER	7	6	6	5	6	5.5	5	5
RING FINGER	6.5	6	5	5	6	6	6	5
LITTLE FINGER	6	5	6	5	5	4.5	5	4
KNEE	39		37		39		37.5	

Thus Satavarichinnaruhadi Kashaya and Sigrugarunasya Lepa was combined found effective in reducing pain and swelling and thus reducing DAS28 Score along with change in joint measurements. Also patient felt noticeable change in easy fatigability, morning stiffness and burning sensation.

## DISCUSSION

The concept of Vatarakta can be applied to understand and relate RA. Sookshma (subtle) Sara (pervasive) Vata (morbid humour) and Drava (fluidity) Sara (mobility) Rakta (blood) moves through the Siras (vessels) settles in Sandhi (joints) due to its Vakra (tortuous nature of joints), and gets associated with Sthanika Doshas (localized morbid humour) which present there in Sandhi (joint) like Pitta and Kapha, produces Sopha (swelling), Ruj (pain), etc in Sandhipradesa (joints). There for in general, the disease gives rise to pain in all the joints. The pain becomes excessively unbearable for the affected persons. Such similar symptoms can be observed in RA also; in Ayurveda, Samprapti Vighatanameva Chikitsa (breaking of pathogenesis). For breaking the samprapti Vata-Pitta Samana, Seeta Virya (cold potency), Guru (heavy)-Snigdha (unctuous) Guna, Madhura Vipaka (state of food/drug after digestion), Sheeta Sparsha (cold in touch), and Vata-Kapha Samana for Sthanika Doshas are necessary. Satavarichinnaruhadi Kashaya consists of seven drugs in which most of the drugs are Vata-Pitta Samana, Seeta Virya (cold potency), Guru-Snigdha Guna and all the drugs are having Madhura Vipaka (state of food/drug after digestion). In Sigrugarunasya Lepa both drugs are Kapha- Vata Samana, Ushna Virya (hot potency) and Katu Vipaka (state of food/drug after digestion). Kapha-Vata Samana property helps to manage the Kapha which is present in the joints. Both these Katu Vipaka (state of food/drug after digestion), Ushna Virya (hot potency) in turn can aggravate the disease condition but here it is used along with Dhanyamla which is Seeta Sparsa (cold in touch) in nature, will help to pacify the Ushnata (hotness) of drugs as its used externally and in turn reduces the pain in the joints.

## CONCLUSION

Hence the combination of Satavarichinnaruhadi Kashaya and Sigrugarunasya Lepa is having significant role in the management of Rheumatoid Arthritis.

## Recommendations

The primary outcome of this case study was reduction of pain and swelling assessed with DAS28 score and joint measurements. Also in case of chronic RA patients the intervention can be extended for a period of at least 6 months for better results without Lepa (poultice) as it may cause Vata Vriddhi.

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