Research Article

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CLINICAL STUDY ON THE EFFECTIVENESS OF DASHMOOL GHRITA PARISHEKA AND AMRUTA GUGGUL IN THE MANAGEMENT OF VATARAKTA (GOUT)

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ABSTRACT

Background: Vatarakta (Gout), an ailment described in Ayurveda, closely resembles gout in modern medicine. It is characterized by pain, swelling, and burning sensations in joints due to the vitiation of Vata and Rakta. Gout is a metabolic disorder associated with hyperuricemia and recurrent inflammatory arthritis. Conventional treatments like NSAIDs, colchicine, and corticosteroids provide temporary relief but have limitations and side effects. Objective: To evaluate the efficacy of Dashmool Ghrita Parisheka (medicated stream pouring) combined with Amruta Guggul (oral therapy) compared to Amruta Guggul alone in the management of Vatarakta. Methods: A comparative clinical trial was conducted on 80 patients diagnosed with Vatarakta. Group A received Dashmool Ghrita Parisheka externally with Amruta Guggul orally, and Group B received only Amruta Guggul orally for 7 days. Subjective and objective parameters were assessed before and after treatment. Results: Group A showed significantly greater relief in tenderness (88.23% vs. 52.17%), burning sensation (94.11% vs. 51.72%), and stiffness (89.36% vs. 50%). Statistical analysis confirmed that the combination therapy was significantly more effective ($p<0.05$). Conclusion: Dashmool Ghrita Parisheka combined with Amruta Guggul is more effective than Amruta Guggul alone, offering a safe, holistic, and side-effect-free alternative for managing Vatarakta (gout).

Keywords: Vatarakta, Gout, Parisheka, Dashmoola Ghrita, Amruta Guggul

INTRODUCTION

According to Ayurveda, the balance of Dosha, Dhatu, and Mala sustains health, and their imbalance causes disease [1]. Among the Doshas, Vata is most potent in initiating chronic disorders. Rakta Dhatu, considered the basis of life (Raktam jiv iti sthiti)[2], when vitiated along with Vata, leads to Vatarakta, a condition comparable to Gout in modern medicine.[3] Vatarakta presents with kandu (itching), shwayathu (swelling), shoola (pain), and daha (burning), often starting at the metatarsophalangeal joints before spreading to other joints.[4] In modern science, Gout—caused by hyperuricemia—affects 1–4% of the global population and is managed with NSAIDs, corticosteroids, and allopurinol, which may cause adverse effects like hepatotoxicity and osteoporosis.[5] Ayurveda describes Parisheka Sweda[6] as beneficial in Vata disorders, with Dashmool Ghrita Parisheka particularly effective due to its tridoshaghna, shothaghna, and shoolaghna properties.[7] Additionally, Amruta Guggul, a classical formulation mentioned in Bhaishajya Ratnavali,[8] is considered highly effective in managing Vatarakta. This study evaluates the comparative efficacy of Dashmool Ghrita Parisheka with Amruta Guggul versus Amruta Guggul alone in treating Vatarakta.

Aims and Objective: To evaluate the clinical efficacy of Dashmool Ghrita Parisheka combined with Amruta Guggul in Vatarakta management compared to Amruta Guggul alone.

MATERIALS AND METHODS

Source of Data: 80 patients diagnosed with Vatarakta were selected from OPD and IPD of CSMSS Ayurvedic Mahavidyalaya and Rugnalaya, Chh. Sambhajinagar, Maharashtra, India.

Diagnostic Criteria

Inclusion criteria

- Diagnosed patients of Vatarakta as per classical text.[9]
- Patients between age group 30 -70 years of either gender.
- Clinical sign and symptoms of Vatarakta.
- Patient willing for trial and giving written consent.

Exclusion criteria

- Below 30 and above 70 years old patients.
- Patients with known case of Rheumatoid arthritis, osteoarthritis, malignancy etc.
- Sweda Anarha patients.

Withdrawal of subject

- Patient willing to discontinue during trial treatment.
- Patient not giving written consent.
- Patient left against medical advice.

Research Design

It is controlled clinical study where the random selected 80 patients were systematically allotted into Group A and Group B with 40 patients each respectively**.** The subjective and objective parameters of was analyzed statistically.

Group A- Dashmoola Ghrita Parisheka with Amruta Guggul orally.

Group B- Amruta Guggul orally.

The study was carried out as per ICMR National Ethical Guidelines for Biomedical and Health Research Involving Human Participants.

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Drugs

Table 1: Ingredients of Dashmoola Ghrita

Name	Latin name	Family	Rasa	Virya	Vipak	Prayojyanga
Bilva[10]	*Aegle marmelos*	Rutaceae	Kashay, Tikta	Ushna	Katu	Root, Leave, Fruits
Agnimanth[11]	*Premna mucronata*	Verbenaceae	Tikta, Katu, Kashay	Ushna	Katu	Root, Leaves
Shyonaka [12]	*Oroxylum indicum*	Bignoniaceae	Madhur, Tikta, Kashay	Ushna	Katu	Root
Patol[13]	*Stereospermum suaveolens*	Bignoniaceae	Tikta, Kashay	Ushna	Katu	Root, Seeds, Flowers, Kshar
Gambhari[14]	*Gmelina arborea*	Verbenaceae	Tikta, Kashay, Madhur	Ushna	Katu	Root, Fruits
Shalparni[15]	*Desmodium gangeticum*	Leguminosae	Madhur, Tikta	Ushna	Madhur	Root
Prishniparni[16]	*Uraria picta*	Leguminosae	Madhur, Tikta	Ushna	Madhur	Root
Brihati[17]	*Solanum indicum*	Solanaceae	Katu, Tikta	Ushna	Katu	Root, Fruits
Kantakari[18]	*Solanum surattense*	Solanaceae	Tikta, Katu	Ushna	Katu	Root, Whole plant
Gokshur[19]	*Tribulus terrestris*	Zygophyllaceae	Madhur	Sheet	Madhur	Fruit
Goghrita			Madhur	Sheet	Madhur	

Table 2: Ingredients of Amruta Guggulu[20]

Name	Latin name	Family	Rasa	Virya	Vipak	Prayojyanga
Amruta	*Tinospora cordifolia*	Menispermacea	Tikta, Katu, Kashay	Ushna	Madhur	Kand, leaves
Amalaki	*Emblica officinalis*	Euphorbiaceae	Panchras (except lavan)	Sheeta	Madhur	Fruits
Haritaki	*Terminalia chebula*	Combretaceae	Panchras (except lavan)	Ushna	Madhur	Fruits
Bibhitak	*Terminalia belerica*	Combretaceae	Kashay	Ushna	Madhur	Fruits
Danti	*Baliospermum montanum*	Euphorbiaceae	Katu	Ushna	Katu	Root, seeds, leaves
Shunthi	*Zingiber officinale*	Zingiberaceae	Katu	Ushna	Madhur	Tuerous root
Punarnava	*Boerhavia diffusa*	Nyctaginaceae	Katu, madhur, tikta, kashay	Ushna	Katu	whole plant
Pippali	*Piper longum*	Piperaceae	Katu	Sheeta	Madhur	Fruits
Vidanga	*Embelia ribes*	Myrsinaceae	Katu	Ushna	Katu	Fruits
Twak	*Cinnamomum zeylanicum*	Lauraceae	Katu, Madhur	Ushna	Madhur	Twak
Trivritta	*Operculina turpethum*	Convolvulaceae	Katu, Kashay, Madhur	Ushna	Katu	Mool-twak
Chitrak	*Plumbago zeylanica*	Plumbaginaceae	Katu	Ushna	Katu	Mool-twak
Guggulu	*Commiphora mukul*	Burseraceae	Tikta, Katu, Kashay	Ushna	Katu	Niryas

Method of preparation of Dashmoola Ghrita

1. Dashmoola Ghrita- (For 1 liter)

Kwatha dravya - Dashmool Bharad (2kg)

Sneha dravya - Goghrita (1lit)

Kalka dravya - Dashmool Churna (250gms)

Preparation Method: Dashamool Ghrita was prepared as per ghrita kalpana (Khara Pak) mentioned in the Sharangdhara Samhita[21]

First the Dashamool was dipped in water for overnight and next day Kwatha is prepared.

This Kwatha was added in Goghrita and Sneha was prepared as per standard protocol.

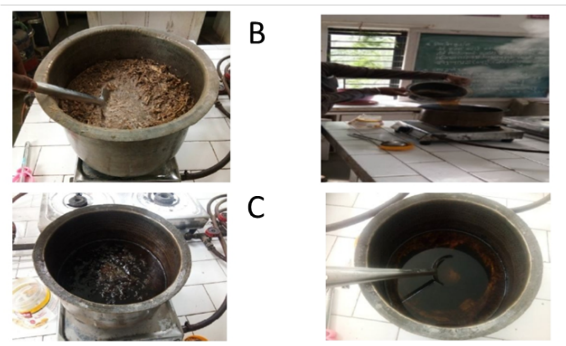

Figure 1: Method of Preparation of Dashmmola Ghrita (A. Ingredients of dashmoola B. Dashmoola Kwath C. After adding Goghrita D. Final Dashmoola Ghrita)

Procedure of Parisheka Sweda

During the Purva Karma (pre-procedure), patients were asked to lie down or sit on a table in a suitable position, and a tray was placed under the affected part to collect the ghrita.

In the Pradhan Karma (main procedure), Parisheka was performed slowly with a continuous dhara of lukewarm (sukhoshna) Dashamool Ghrita over the involved joints for approximately 700 matrakal (about 12–13 minutes). The stream was maintained at a height of 12 angul (around 9 inches) above the affected area. Finally, in the Pashchat Karma (post-procedure), the affected part was gently cleaned with cotton after completion of Parisheka.[22]

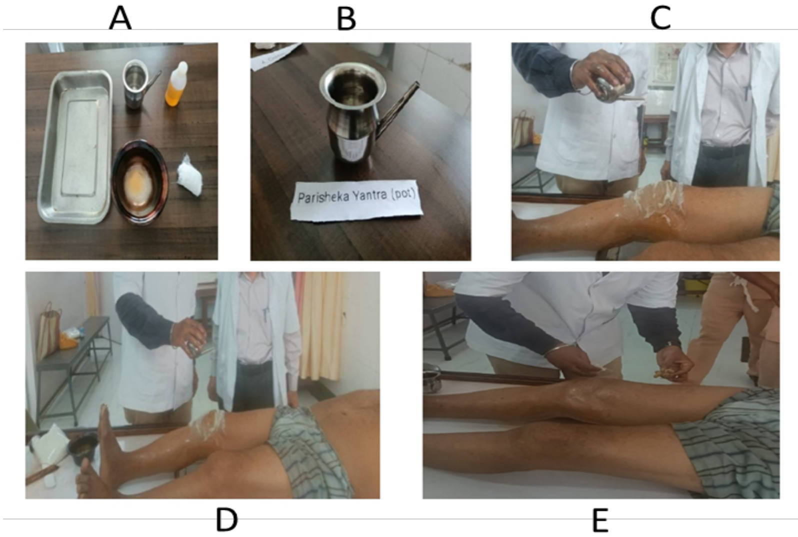

Figure 2: (A. Materials Required for Parisheka Therapy, B. Parisheka Yantra (Pot), C. Application of Dashmool Ghrita Parisheka, D. Parisheka Procedure in Progress, E. Gentle Massage During/After Parisheka)

Treatment Plan

Group A- 40 Patients were administered with Dashamoola ghrita Parisheka along with Amruta Guggul orally
Group B- 40 Patients were administered with Amruta Guggul orally

Table 3: Treatment Plan

	Group A	Group B
Drug	Dashmool Ghrita with Amruta Guggul	Amruta Guggul
Matra	Dashmool Ghrita- 100ml Amruta Guggul- 500mg BID (Ananna Kala)	500mg BID (Ananna kala)
Route of administration	Dashmool Ghrita - Externally Amruta Guggul – Orally	Orally
Duration	7 days	7 days
Initial Assessment	1st day (Baseline)	1st day (Baseline)
Follow up	4th and 8th day	4th and 8th day

Assessment Criteria

Following parameters has been taken for assessment for this clinical study.

Assessment Parameters

Subjective: Tenderness (Sparshasahatva), burning sensation (Sandhidaha), stiffness (Sandhigraha).
Objective: Pain (VAS scale), joint swelling, serum uric acid.

Table 4: Subjective Criteria

	Grade 0	Grade 1	Grade 2	Grade 3
Sparshasahatva	No tenderness	Patient winces	Patient winces and withdraws the affected part	Patient will not allow the joint to be touched
Sandhidaha	No Daha	Transient, no approach for its aversion	Frequent, self-approach for its aversion	Regular, seeking medical advice
Sandhigraha	No stiffness/stiffness lasting for 5 min.	Stiffness lasting for 5 min. to 2 hours.	Stiffness lasting for 2 hours to 8 hours	Stiffness lasting for more than 8 hours

Objective Criteria

Sandhishoola (VAS Scale)

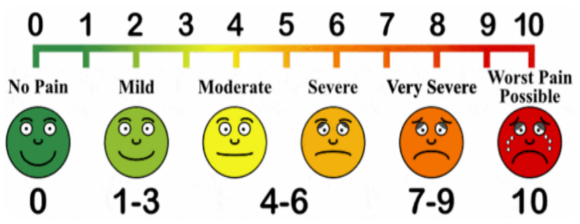

Figure 3

Sandhishotha- Swelling was measured by measuring tape in cm, 2 fingers above and 2 fingers below of joints. Meta phalangeal joint was measured by Gold Smith Ring.

Serum uric acid - Before and after treatment

Overall Assessment of the Therapy

Relief of symptoms	Score
Good Improvement	76-100 % Relief
Moderate Improvement	51-75 % Relief
Mild Improvement	25-50 % Relief
No Improvement	Less than 25% Relief

OBSERVATIONS

Age Distribution: Maximum patients were aged 50–60 years (48.75%), followed by 40–50 years (35%).
Gender: Males (68.75%) were more affected than females (31.25%).
Prakruti: Predominantly Pitta-Vata (77.5%).
Agni: Most had Tikshnagni (41.25%).
Koshtha: Majority had Krura Koshtha (48.75%).
Lifestyle Factors: Gout occurred irrespective of addictions, though tobacco, alcohol, and smoking were present in some patients.

Effect of therapy on chief complaints such as Sandhishoola, Sandhishotha, Sandhistabdhata and Sandhisparsa Asahyata is found to be statistically highly significant (P>0.0001). Also, statistically highly significant (P>0.0001) results were found on general symptoms such as Angamarda, Aruchi, Gaurava etc and statistically significant results on functional capacity parameters.

Statistical Analysis

Table 5: Statistical Analysis of Group A

Parameters	Mean Value		P value
	BT	AT	
Sparshasahatva	0.85	0.1	P<0.05
Sandhidaha	0.85	0.05	P<0.05
Sandhigraha	1.175	0.125	P<0.05
Sandhishoola	3.94	1.14	<0.05
Sandhishotha	30.10	27.89	<0.05
Serum Uric Acid	8.34	8.12	<0.05

BT: Before Treatment, AT: After Treatment

Table 6: Statistical Analysis of Group B

Parameters	Mean Value		P value
	BT	AT	
Sparshasahatva	0.575	0.275	P<0.05
Sandhidaha	0.725	0.35	P<0.05
Sandhigraha	1.3	0.65	P<0.05
Sandhishoola	3.45	2.63	<0.05
Sandhishotha	28.88	28.60	<0.05
Serum Uric Acid	8.61	8.56	<0.05

BT: Before Treatment, AT: After Treatment

Table 7: Statistical Analysis of Comparative Values of Group A and B

Parameters	Mean Difference		P value
	Group A	Group B	
Sparshasahatva	0.75	0.3	P<0.05
Sandhidaha	0.8	0.375	P<0.05
Sandhigraha	1.05	0.65	P<0.05
Sandhishoola	2.8	0.825	<0.05
Sandhishotha	2.212	0.275	<0.05
Serum Uric Acid	0.217	0.05	<0.05

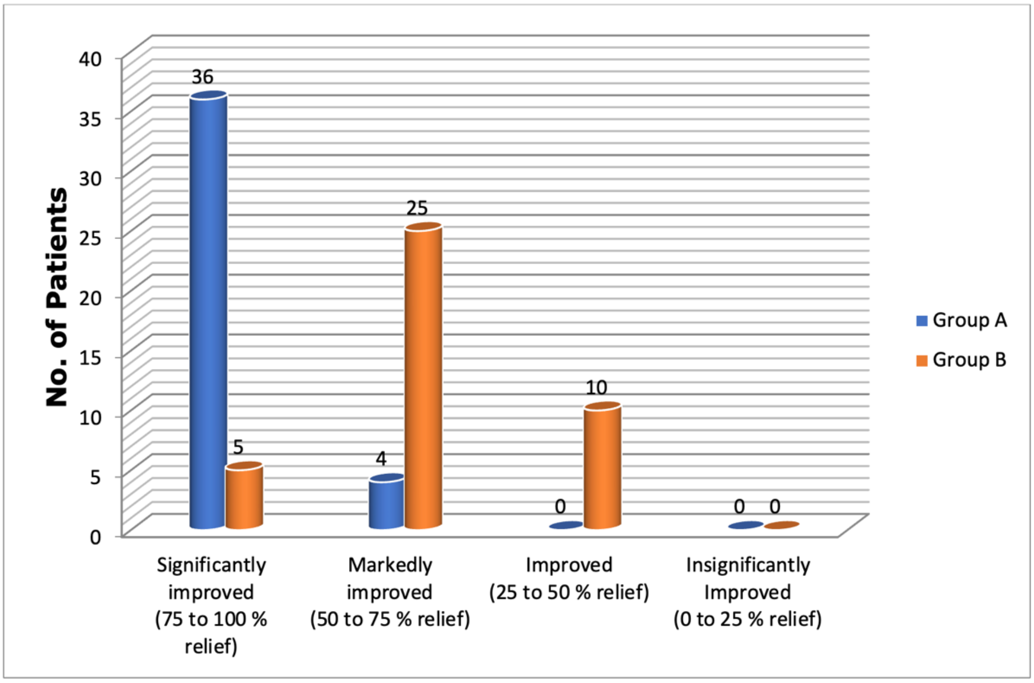

Figure 3: Overall effect of therapy

DISCUSSION

The present study aimed to evaluate the efficacy of Dashmoola ghrita parisheka and Amruta Guggulu in managing Vatarakta.. The discussion covers several essential aspects of the clinical study, including an overview of Vatarakta, the properties and roles of the drugs used, the clinical observations, and a detailed examination of the results.

Vatarakta

According to Ayurveda, Vatarakta is a condition brought on by the concurrent vitiation of Rakta and Vata. The condition mainly affects the extremities and manifests as shoola (pain), shotha (swelling), daha (burning feeling), sparshasahatva (tenderness), and sandhigraha (stiffness). The pathophysiology is similar to that of gout in contemporary medicine, in which hyperuricemia causes monosodium urate crystals to form in joints, causing inflammation. Acute joint pain, swelling, and recurrent attacks that interfere with patients' everyday lives are common symptoms of both illnesses.

NSAIDs, colchicine, and corticosteroids are examples of modern gout therapy techniques that relieve symptoms but do not address the underlying cause. Long-term usage of these medications may result in side effects such osteoporosis, renal impairment, or gastrointestinal distress. In order to restore the balance of doshas and avoid recurrence, Ayurveda, on the other hand, stresses a holistic approach through shodhana (purification), shamana (palliation), and bahya chikitsa (external remedies).

Parisheka in Vatarakta

Parisheka (therapeutic affusion) is mentioned under Swedana karma (sudation therapies) by Acharya Charaka and Sushruta. In Vatarakta, where vitiated Vata and Rakta obstruct the channels, Parisheka provides localized relief. By pouring a medicated warm liquid continuously over the affected joints, Parisheka alleviates stiffness, reduces tenderness, and improves circulation. The ushna guna of the medicated liquid counteracts the sheeta guna of aggravated Vata and dissolves aama deposits, thereby reducing pain and inflammation

Dashmoola Ghrita Parisheka

Dashamoola: Tridosha Shamaka, Vedana Sthapaka (analgesic), Shothahara (anti-inflammatory).
Goghrita: Vata-Pittahara, Rakta-shodhaka, and pain-relieving.
Dashmoola, a group of ten roots, is widely recognized in Ayurveda for its tridoshahara, shothahara (anti-inflammatory), vedanasthapaka (analgesic), and rasayana properties. The continuous pouring of warm Dashmoola ghrita or decoction on inflamed joints enhances local circulation, promotes absorption of active principles through transdermal routes, and reduces swelling and stiffness. Dashmoola also acts systemically by pacifying Vata and purifying Rakta.

Amruta Guggul

Amruta Guggulu is a classical formulation mentioned in Bhaishajya Ratnavali for Vatarakta chikitsa. Its chief ingredients include Guduchi, Guggulu, Haritaki, Bibhitaki, Amalaki, and others. Guduchi possesses immunomodulatory, antioxidant, and uric acid-lowering properties, while Guggulu has established anti-inflammatory and analgesic effects. Together, the formulation detoxifies Rakta, pacifies Vata, and improves Agni, thereby preventing ama formation. This systemic action makes Amruta Guggulu highly effective in chronic Vatarakta and in preventing recurrence.

Combined effect of Dashmoola Ghrita Parisheka and Amruta Guggulu

The combined regimen addresses both local and systemic pathology. Dashmoola Parisheka provides rapid relief from local pain, burning, swelling, and stiffness through its ushna, tikta, and kashaya properties, while Amruta Guggulu acts at the systemic level by purifying blood, correcting metabolism, and pacifying doshas. The dual action ensures not only symptomatic relief but also correction of the underlying pathology.
Dashmoola Parisheka: Provides local vasodilation, reduces stiffness, relieves pain, and aids absorption of phytochemicals through skin.
Amruta Guggulu: Corrects Raktadushti, pacifies Vata, improves metabolism, and prevents urate accumulation.

Synergistic Action: The external-local effect of Parisheka combined with the systemic effect of Amruta Guggulu ensures faster recovery, sustained relief, and prevention of relapse.

Clinical Study and Observations

Among 80 Vatarakta patients, most were aged 50–60 years (48.75%) and male (68.75%), indicating a higher prevalence in middle-aged men. The majority were Hindu (88.75%) and came from varied occupations, suggesting lifestyle plays a key role. All were married. Most had Pitta-Vata or Vata-Pitta prakruti, Tikshnagni or Mandagni, and Krura Koshtha—highlighting Vata and Pitta dominance. While 37.5% had no addictions, others reported tobacco, smoking, or alcohol use. Overall, Vatarakta appears to be lifestyle-related, affecting individuals regardless of age, gender, or occupation.

Group A (treated with Dashmool Ghrita Parisheka and Amruta Guggul) showed significantly better results compared to Group B across all parameters. Relief in Sparshasahatva (88.23%), Sandhidaha (94.11%), and Sandhigraha (89.36%) was notably higher than in Group B (52.17%, 51.72%, and 50% respectively), with statistical significance ($p<0.05$). Group A also showed significant improvement in objective parameters such as Sandhishoola (pain), Sandhishotha (swelling), and serum uric acid levels, indicating its overall efficacy in managing Vatarakta (Gout)

Overall result

- Dashmoola Parisheka with Amruta Guggulu is more effective than Amruta Guggulu alone in the management of Vatarakta (Gout).
- The dual approach provides faster, safer, and more sustainable relief from the painful and disabling symptoms of the disease.
- This integrative therapy offers a promising Ayurvedic solution with minimal side effects and may be recommended as an effective clinical protocol for Vatarakta patients**.**

CONCLUSION

Dashamool Ghrita Parisheka combined with Amruta Guggul offers a significantly better outcome compared to Amruta Guggul alone in managing Vatarakta (Gout). The integrated approach provided greater relief in symptoms like joint pain, burning sensation, and stiffness, along with a notable reduction in serum uric acid levels. These findings highlight the potential of classical Ayurvedic therapies as safe, effective alternatives in the treatment of chronic inflammatory conditions like gout. Future research can explore long-term outcomes, larger sample sizes, and biochemical studies on uric acid metabolism.

Limitations

- Small sample size (40 patients) limits the generalizability of the findings.
- The short duration of follow-up (7 days) may not fully capture long-term effects.
- Further studies with larger sample sizes and longer follow-up periods are recommended to validate these findings.

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