THE COMBINED EFFECTIVENESS OF SATAVARICHRINNARUHADI 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 Satavarchinnaruhadi Kashaya and Sigruvanasya 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 Satavarchinnaruhadi Kashaya and Sigruvanasya Lepa twice daily for 30 days. Periodic evaluation with DAS28 formula and joint measurements was done on 0th and 30th day. Results– DAS28 Score, before treatment = 8.08, after treatment = 3.67 (P< 0.001) Discussion– Satavarchinnaruhadi Kashaya and Sigruvanasya 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 Satavarchinnaruhadi Kashaya are Vata-Pitta Sanam, Seeta Veerya and Madhura Vipaka which in turn helps in managing the deranged Vata and Rakta, whereas in Sigruvanasya Lepa both drugs are Kapha-Vata Sanam, Ushna Veerya and Katu Vipaka, which in combination with Dhanyamala is Vata-Kapha Sanam. Sparser 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 Satavarchinnaruhadi Kashaya and Sigruvanasya Lepa is having significant role in the management of RA.

Keywords: Rheumatoid Arthritis, Satavarchinnaruhadyadi Kashaya, Sigruvanasya 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. RA adds risk of cardiac and pulmonary disorders, risk of lymphomas, peripheral neuropathy, carpel tunnel syndrome, baker’s cyst, subcutaneous nodules, systemic vasculitis etc. Gender prediction ratio of RA is 3 women:1 man.2 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.3 In India, the prevalence of RA is 0.75%.4 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 4th and 6th decades. 80% of all patients develop the disease between the ages of 35 and 50. Even genetic factor has an important role in the susceptibility to Rheumatoid Arthritis.5

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 Vatasona (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 like Kapha and Pitta produces Sopha (swelling), Ruja (pain) etc in Sandhipradasa (joint)5 Such similar symptoms can be observed in RA also. Satavarchinnaruhadi Kashaya (medicated decoction)6 which mentioned in Sahasrayogam and Sigruvanasya Lepa (poultice)7 mentioned in Vangusena which are specifically indicated in Vatarka. Satavarchinnaruhadi Kashaya consists of Satavari (Asparagus racemosus, Willd), Chinonaruha (Tinospora cordifolia, Miers), Amalavatw (Emblica officinalis) Linn), Bala (Sidra cordifolia Linn), Iksku (Saccharum officinarum Linn.), Kokilaksha (Asteracanthus 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. Sigruvanasya Lepa consists of Signi (Moringa oleifera. Lam),Varana (Crataeva 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 RA since 2 years, came with blood 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

**Personal history**

<table>
<thead>
<tr>
<th>Table 1: Personal History</th>
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<tbody>
<tr>
<td><strong>Appetite:</strong> Good</td>
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<tr>
<td><strong>Allergy:</strong> Not Detected</td>
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<tr>
<td><strong>Addiction:</strong> Nil</td>
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<tr>
<td><strong>Bowel:</strong> Regular</td>
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</tbody>
</table>

**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 formula and Swelling of bilateral shoulder, Elbow, wrist, proximal and distal interphalangeal joints and knee joint is measured with a tape.

**RESULT**

<table>
<thead>
<tr>
<th>Table 2: Observations</th>
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<tbody>
<tr>
<td><strong>Parameter</strong></td>
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<td>DAS 28 FORMULA Score</td>
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