

Case Study

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# ALLEVIATING RHEUMATOID ARTHRITIS (AAMVATA) THROUGH AYURVEDIC MEDICINE AND PANCHAKARMA: A CASE STUDY

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#### ABSTRACT

Rheumatoid Arthritis (RA), termed Aamvata in Ayurveda, is a chronic autoimmune disorder characterized by persistent inflammation, joint pain and deformities. Despite advances in modern therapeutic interventions, many patients seek alternative treatments due to the side effects or partial efficacy of conventional drugs. This case report explores the integration of Ayurvedic treatment in managing a 61-year-old female with a 10-year history of Rheumatoid Arthritis, presenting with symptoms of pain, swelling in joints and considerable morning stiffness. The patient underwent a 10-day Ayurvedic regimen consisting of specific Panchakarma treatment, ayurvedic medications, dietary changes and lifestyle adjustments, focusing on detoxification and the rebalancing of the Vata dosha. Pre-treatment assessment showed elevated inflammatory markers with Rheumatoid Factor (RF) at 93.5 IU/ml, C-Reactive Protein (CRP) at 57.70 mg/L, Erythrocyte Sedimentation Rate (ESR) at 90 mm. Subjective evaluations included a Visual Analog Scale (VAS) for pain at 8/10, Health Assessment Questionnaire (HAQ) score at 2.5, and poor scores on the Pittsburgh Sleep Quality Index (PSQI) and the Depression Anxiety Stress Scales (DASS). Following the Ayurvedic intervention, notable improvements were observed. RF reduced to 63.00 IU/ml, CRP to 19.70 mg/L and ESR to 65 mm. The patient reported a decrease in pain (VAS score decreased to 3/10), reduced morning stiffness duration (from 90 minutes to 30 minutes) and enhanced functional ability (HAQ score improved to 1.0). Improvements in sleep quality and psychological well-being were also reported with lower scores on PSQI and DASS. This case underscores the potential of Ayurvedic medicine as a complementary approach in Rheumatoid Arthritis treatment. A reduction in both objective inflammatory markers and subjective pain and discomfort illustrates the effectiveness of the Ayurvedic modalities employed. These findings advocate for more rigorous research and consideration of Ayurvedic treatments in integrative medical practices to enhance overall management and patient quality of life in Rheumatoid Arthritis. This report highlights not only the symptomatic relief provided by such treatments but also encourages a broader acceptance and further scientific exploration into Ayurvedic treatment for chronic diseases.

KEYWORDS: Aamvata, Ayurveda, Panchakarma, Rheumatoid Arthritis, Vata Vyadhi.

#### INTRODUCTION

Rheumatoid Arthritis (RA), referred to as *Aamvata* in *Ayurvedic* medicine, is a systemic inflammatory disorder primarily affecting joints and connective tissues. Characterized by chronic synovitis, RA can lead to severe disability and systemic complications, affecting not only the joints but also other organs such as the skin, eyes, lungs, heart and blood vessels.<sup>[1]</sup> Nevertheless, the

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disease shows heterogeneous expression, which can range from mild articular discomfort to severe joint destruction and systemic features. In *Ayurveda*, *Aamvata* is described as a disease produced by the vitiation of *Vata Dosha* and the accumulation of *Aam* (toxins) resulting from a malfunctioned digestive system, thus affecting the joints and tissues and manifesting as pain and swelling.<sup>[2]</sup> Classic texts such as *'Charaka Samhita'*  and *'Sushruta Samhita'* attribute the onset of *Aamvata* to dietary indiscipline and lifestyle factors that impair digestion, and lead to toxin accumulation.<sup>[3,4]</sup>

Extensive research in both *Ayurveda* and modern medicine has aimed to explore effective treatments for Rheumatoid Arthritis. From a modern medical perspective, Rheumatoid Arthritis's pathophysiology involves autoimmune reactions leading to inflammation and overgrowth of the synovial tissues, eventually resulting in the erosion of joint cartilage and bone. Epidemiologically, Rheumatoid Arthritis affects about 0.5-1% of adults globally, with a higher prevalence in industrialized nations and females, indicating significant genetic, gender-specific and environmental influences.<sup>[5,6,7]</sup>

Ayurvedic principles concerning Aamvata include disruption in Agni (digestive fire), leading to the production of Aam, which, when combined with vitiated Vata, circulates through the body and lodges in the joints, causing pain and inflammation. This is accompanied by disturbances in other doshas and dhatus (body tissues), primarily Meda (fat tissue) and Asthi (bone tissue), contributing to the disease pathology in joint spaces.<sup>[8]</sup> Ayurveda focuses on correcting the underlying Agni dysfunction and cleansing the body of toxins, aligning both preventive and curative approaches through ayurvedic medications, dietary adjustments and Panchakarma treatment.<sup>[9]</sup>

This case report explores the effectiveness of traditional *Ayurvedic* treatments in managing Rheumatoid Arthritis symptoms and progression, offering insights for a more comprehensive therapeutic approach.

# CASE REPORT

**a. Patient History and Information** The patient, a 61year-old female, presented with a 10-year history of Rheumatoid Arthritis characterized by chronic pain affecting multiple small joints and knees, with noticeable swelling in the latter. Prior treatments included standard Rheumatoid Arthritis management with Nonsteroidal anti-inflammatory drugs (NSAIDs); however, the response had been only moderately effective. She had not previously tried any *Ayurvedic* treatment. **b.** All type of History, Diet and Lifestyle History: The patient was on vegetarian diet and also restricted in physical activity due to pain and stiffness. Medicine History: Her allopathic treatments involved NSAIDs. She reported never using *Ayurvedic* medications.

**Surgical History:** The patient not had any surgical interventions.

Family History: The patient not had any Family history.

**c. Onset and Disease Progression** Initially characterized by minor joint stiffness, her condition evolved significantly over 10 years, leading to increased joint stiffness in the mornings, persistent swellings and frequent whole-body aches that severely impacted her activities of daily living. Notably, she exhibited finger deviations and chronic back pain, alongside key symptoms of sleeplessness due to ongoing discomfort.

**d. Vital Parameters** Upon examination, her vital parameters were.

- Blood Pressure: 122/76 mmHg
- Heart Rate: 76 bpm
- Respiratory Rate: 16 breaths per minute
- Temperature: 98.6°F Although these results were within normal limits, the severity of her rheumatoid arthritis symptoms and quality of life impact pointed to inadequate control of disease activity.

#### Samprapti of the Disease

Aamvata in Ayurveda is conceptualized as a disease stemming from the improper digestion leading to the formation of Aam (a toxic by-product). Initially, due to weakened digestive fire (Agnimandya), improperly digested food results in the formation of Aam. This Aam, in conjunction with an imbalance of Vata Dosha, begins to circulate through the body. As per Ayurvedic theory, this Aam-Vata combination preferably accumulates in the colon (Sanchaya) and there after spreads (Prasara) to various parts of the body, particularly the joints. This leads to the localization (Sthanasamsraya) phase, where the symptoms start manifesting primarily as joint pain, stiffness, swelling and general debility. The disease progresses through manifestation (Vvakti) to complication stages (Bheda), showing severe forms and complications over time.

Stage	Description	
Dosha	Vata (mainly) coupled with Aam	
Dushya	<i>Rasa</i> and <i>Rakta</i> (plasma and blood), among other body tissues	
Strotas	Mainly Rasavaha Strotas and Sandhivaha Strotas	
Strotodushti	Sanga (blockage), Atipravritti, Vimargagamana	
Agni	Manda Agni (low digestive fire)	
Ama	Presence of Aam due to improper digestion	
Adhishthana		
Roga Marga		

Samprati Ghataka of the Disease Table 1.

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*Vyadhi Swabhava Yapya* (managed but not fully cured condition)

#### **Ayurvedic Examination**

Table 2: Ashtavidha Pariksha (Eight-fold Examination).

Sr. No	Examination	Findings
1.	Nadi (Pulse)	Vata Pittaj
2.	Mutra (Urine)	Prakrita
3.	Mala (Stool)	Vikrita
4.	Jihva (Tongue)	Saam
5.	Shabda (Voice)	Spashta
6.	Sparsha (Touch)	Anushna Sheeta
7.	Drik (Eyes)	Shweta
8.	Akriti (Appearance)	Madhyam

#### Table 3: Dashavidha Pariksha (Ten-fold Examination).

Sr. No	Examination	Findings
1.	Prakriti (Constitution):	Vata Pitta
2.	Vikriti (Imbalance):	Vata – Kaphaja
3.	Sara (Tissue Excellence):	Meda Saar
4.	Samhanana (Body Build):	Madhyam
5.	Pramana (Body Proportions):	Within normal limits.
6.	Satmya (Adaptability):	Madhyam
7.	Satva (Psychological Strength):	Madhyam
8.	Ahara Shakti (Digestive Strength):	Avar
9.	Vyayama Shakti (Exercise Capacity):	Avar
10.	Vaya (Age):	61yr old

e. Investigation Assessment Further evaluation involved.

- **Rheumatoid Factor (RF):** Tests confirmed positive, validating the RA diagnosis.
- Inflammatory Markers: C-Reactive Protein (CRP) and Erythrocyte Sedimentation Rate

**(ESR):** High levels were indicative of active systemic inflammation.

• **Radiographs of hands and knees:** Demonstrated joint space narrowing and early erosive changes.

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Image 1 – X ray Findings of the patient.

#### Assessment Parameters Subjective Parameters

- 1. Pain: Visual Analog Scale (VAS): Patients rate their pain on a scale of 0 to 10, with 0 being no pain and 10 being the worst pain imaginable.<sup>[10]</sup>
- 2. Morning Stiffness: Utilize a simple numerical rating for duration (e.g., number of minutes or hours of stiffness after waking).
- 3. Functional Limitation: Health Assessment Questionnaire (HAQ): This evaluates the patient's ability to perform everyday tasks.<sup>[11]</sup>
- 4. Quality of Sleep: Pittsburgh Sleep Quality Index (PSQI): Assesses sleep quality and disturbances.<sup>[12]</sup>
- 5. Mental and Emotional Well-being: Depression Anxiety Stress Scales (DASS): Quantifies the emotional states of depression, anxiety, and stress.<sup>[13]</sup>

#### **Objective Parameters**

- ESR
- CRP Levels.
- RA Test- Specific tests for Rheumatoid Arthritis.

# Intervention – Treatment

#### I. Ayurvedic Diet Plan<sup>[14]</sup>

The dietary guidelines provided by Jeena Sikho Lifecare Limited Hospital included the following key commendations.

a. Foods to be avoided.

- Do not consume wheat, refined food, milk and milk products, coffee and tea and packed food.
- Avoid eating after 8 PM.
- During solid consume as small bite and chew 32 times.

b. Hydration

- During water intake, take sip by sip and drink slowly to ensure the amount of water intake each time.
- Drink about 2-3 liters of alkaline water 3 to 4 times throughout the day.
- Include herbal tea, living water and turmeric-infused water part of daily routine.
- Boil 4 liters water & reduce up to 2 liters and consume.

#### c. Millet Intake

- Incorporate five types of millet into your diet: Foxtail (*Setaria italica*), Barnyard (*Echinochloa esculenta*), Little (*Panicum sumatrense*), Kodo (*Paspalum scrobiculatum*) and Browntop (*Urochloa ramose*).
- Use only steel cook wares for preparing the millets
- Cook the millets only using mustard oil.

d. Meal Timing and Structure.

- 1. Early Morning (5:45 AM): Herbal tea, curry leaves (1 leaf-1 min/5 leaves-5 min) along with raw ginger and turmeric.
- 2. Breakfast (9:00-10:00 AM): The patient had steamed fruits (Seasonal), steamed sprouts (according to the season) and a fermented millet shake (4-5 types).
- 3. Morning Snacks (11:00AM): The patient given red juice (150 ml) and soaked almonds.
- 4. Lunch (12:30 PM 2:00 PM): The patient received Plate 1 and Plate 2. Plate 1 included a steamed salad, while Plate 2 with cooked millet-based dish.

- 5. Evening Snacks (4:00 4:20 PM): Green juice (100-150 ml) along with 4-5 almonds.
- 6. Dinner (6:15-7:30 PM): The patient served a steamed salad, chutney, and soup, as Plate 1, along with millet khichdi as Plate 2.
- e. Fasting
- It is advised to observe one-day fasting.

f. Special Instructions

- Express gratitude to the divine before consuming food or drinks.
- Sit in *Vajrasana* (a yoga posture) after each meal.
- 10 minutes slow walk after every meal.
- g. Diet Types
- The diet comprises salt-less solid, semi-solid and smoothie options.
- Suggested foods included herbal tea, red juice, green juice, a variety of steamed fruits, fermented millet shakes, soaked almonds and steamed salads.

#### II. Lifestyle Recommendations

- (i) Include meditation for relaxation.
- (ii) Practice barefoot brisk walk for 30 minutes.
- (iii) Ensure 6-8 hours of quality sleep each night.
- (iv) Adhere to a structured daily routine.

#### III. Panchakarma treatment

The patient was advised to get admitted and to undergo a 10-day Panchakarma treatment from November 22, 2024, to December 2, 2024. This specialized Ayurvedic regimen was designed for deep detoxification and rebalancing of the doshas, particularly aimed at alleviating the symptoms of Rheumatoid Arthritis (Aamvata) by removing built-up toxins from the body. The session was conducted under close medical supervision, allowing for a tailored treatment plan that includes preparatory and main procedures such as Oil massage with Mahavishgarbha Oil for 10 days, Patra Pinda Pottali Swedan therapy for 10 days, Shirodhara with Brahmi Taila for 10 days. Baluka Sweda for 10 days, Janu Basti with Dhanvantaram Oil for 10 days and Anuvasan Basti with Saindhavadi Oil and Vaitaran Basti (medicated enema). This immersive care is expected to notably reduce joint inflammation, enhance mobility and improve overall well-being.

#### Abhyanga with Mahavishgarbha Taila for 10 days

*Mahavishgarbha Taila* penetrates deep into the tissue layers, promoting circulation and the removal of toxins from joints and muscles. The active *ayurvedic* components in the oil, helps to reduce inflammation and pain directly at the affected sites. The process also serves to nourish and lubricate the joints, improving mobility and reducing discomfort. Additionally, the warm oil massage stimulates the body's *marma* points (vital points), enhancing energy flow and aiding in the balancing of the body's *doshas*. This holistic approach not only targets the physical symptoms of Rheumatoid

Arthritis but also promotes mental relaxation and stress reduction, which are vital for managing chronic conditions effectively. *Mahavishgarbha Taila* is infused with a concoction of powerful herbs such as *ashwagandha, shatavari*, and *bala*, steeped within a sesame oil base. This formulation is known for its antiinflammatory, analgesic, and rejuvenating properties. Characterized by its heavy (*Guru*) and penetrating (*Sukshma*) qualities, it is primarily used for its *Vata*pacifying effects. This oil is highly beneficial for treating joint pain, stiffness, and muscular spasms associated with conditions like arthritis.

#### Patra Pinda Pottali Swedana for 10 days

Patra Pinda Pottali Swedan was incorporated as a therapeutic treatment. This traditional Ayurvedic therapy involved the use of heated ayurvedic poultices made from fresh leaves of anti-inflammatory plants, combined with medicated oils. The poultices were then applied to the body, particularly focusing on affected joints, to provide relief from pain and stiffness. The heat from the poultices helps the medicinal properties of the herbs to penetrate deeper into the tissues, effectively reducing inflammation and promoting tissue healing. This therapy is particularly beneficial for pacifying Vata dosha, improving circulation and restoring mobility, making it an ideal choice for conditions like Rheumatoid Arthritis that involves joint degeneration and pain. Patra Pinda Pottali Swedana utilizes fresh leaves of antiinflammatory plants like nirgundi, wrapped in cloth poultices. These poultices deliver soothing, analgesic effects when heated and applied to the body, focusing especially on painful joints. The therapy is light (*Laghu*) and dry (Ruksha), working effectively to reduce inflammation, improve circulation, and pacify Vata dosha, making it suitable for arthritis and other joint discomforts.

#### Shirodhara with Brahmi Taila for 10 days

Shirodhara with Brahmi Taila was applied as a specialized therapeutic technique aimed at addressing the neurological and psychological aspects of the disease. Shirodhara involves the consistent and gentle pouring of warm, medicated oil over the forehead, specifically targeting the third eye or Ajna chakra. Brahmi Taila, renowned for its calming and neuroprotective properties, was selected to enhance the therapy's effectiveness. The methodical dripping of the oil induces a profound state of relaxation and mental calmness, which helps in reducing stress and anxiety levels that are often exacerbated in chronic conditions like Rheumatoid Arthritis. Additionally, the soothing properties of **Brahmi** aid in balancing the Vata dosha at the mental level, promoting better sleep and an overall sense of wellbeing, essential for managing the systemic impact of Rheumatoid Arthritis.

#### Baluka Swedan for 10 days

*Baluka Swedan* or sand poultice therapy, was employed. This treatment involves the use of heated sand wrapped in a cloth to form a poultice, which is then systematically applied over affected areas, particularly the joints. The dry heat provided by the sand is effective in reducing pain, swelling and stiffness associated with the arthritis. The localized application of heat helps to improve blood circulation to the joints, facilitating the removal of toxins and enhancing the healing process. *Baluka Swedan* specifically targets the aggravated *Vata dosha*, providing deep, penetrating heat that is beneficial in alleviating chronic joint inflammation and discomfort, thereby improving mobility and quality of life for the patient.

#### Janubasti with Dhanwantaram am Oil for 10 days

Janubasti was utilized. particularly with the Dhanwantaram oil. Janubasti is a specialized Avurvedic procedure where warm medicated oil is pooled and retained over the knee joints in a dough reservoir. Dhanwantaram oil, known for its potent antiinflammatory and analgesic properties, was chosen for its suitability in treating Vata-related joint disorders. This continuous bathing of the knees in warm oil helps to lubricate and soothe the inflamed tissues, reduce pain and stiffness and improve circulation within the joint area. The warmth and the avurvedic properties of Dhanwantaram oil work synergistically to penetrate deep into the joint, promoting healing and functional improvement, making Janubasti an effective localized therapy for enhancing joint mobility and alleviating the symptoms of Rheumatoid Arthritis. Dhanwantaram Oil includes a blend of herbs like bala and guduchi in a sesame oil base, renowned for its nourishing and soothing properties. The treatment, being heavy (Guru) and oily (Snigdha), is specifically designed to strengthen, pacify Vata, and relieve pain, particularly beneficial for knee joint issues and osteoarthritis.

# Anuvasan Basti with Saindhavadi Oil for 5 days on Alternate days

Anuvasan Basti was administered using Saindhavadi oil. This procedure involves the rectal administration of medicated oil, specifically chosen for its properties that pacify the Vata dosha—commonly disturbed in joint diseases. Saindhavadi oil, noted for its analgesic and anti-inflammatory effects, was used to directly target systemic and localized imbalances contributing to joint pain and stiffness. The treatment was scheduled on

#### alternate days over a span of 5 days. This periodic oil enema helps in nourishing and lubricating the tissues, facilitating the removal of toxins, improving mobility and reducing pain. Anuvasan Basti with Saindhavadi oil is particularly beneficial for deep-seated issues of Vata imbalance, providing significant relief from chronic symptoms and enhancing the overall effectiveness of the Ayurvedic management plan for Rheumatoid Arthritis. Anuvasan Basti with Saindhavadi Oil utilizes medicated oil administered rectally to treat severe joint and muscle pain by balancing Vata dosha. Saindhavadi Oil, containing ingredients like rock salt and ginger, is known for its lubricative and analgesic properties. This treatment is particularly effective in nourishing tissues, enhancing mobility, and facilitating the removal of toxins.

#### Vaitaran Basti for 5 days on Alternate days

Vaitaran Basti was incorporated into the treatment protocol for the patient's Rheumatoid Arthritis, administered on alternate days for a period of 5 days. This specific form of Basti (Ayurvedic enema) uses a medicated decoction tailored to intensely pacify the Vata dosha, which is predominantly implicated in joint disorders like arthritis. Vaitaran Basti acts through a precise mechanism that both detoxifies and alleviates pain and inflammation at a systemic level. The therapy involves the rectal administration of this ayurvedic decoction, which facilitates the direct absorption of the herbs into the colon, a site linked with Vata dosha. This method helps in achieving a profound therapeutic effect quickly, reducing joint stiffness, improving mobility and mitigating the pain associated with chronic conditions such as Rheumatoid Arthritis. The scheduled regimen aims to provide sustained relief and facilitate long-term management of the disease. Vaitaran Basti involves the rectal administration of a medicated decoction that includes dashmula and other Vata-pacifying herbs, combined with honey, rock salt, and medicinal oils. This intense (Tikshna) and penetrating (Sukshma) therapy is designed to detoxify, alleviate pain, and reduce inflammation at a systemic level. It is highly effective for managing severe and chronic conditions like Rheumatoid Arthritis, providing quick and sustained relief from joint stiffness and pain.

#### • Medicines Used

Table 4:	Medicines	used in	this	case

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Medications	Dose	Anupana	Duration
Arthri Capsule: - The ingredients include Nirgundi (Vitex negundo), Nishot (Operculina turpethum), Sonth (Zingiber officinale), Punarnava (Boerhavia diffusa), Giloy (Tinospora cordifolia), Surjana (Moringa oleifera), Haritaki (Terminalia chebula) and Rasna (Pluchea lanceolata).	1 Capsule BD	Lukewarm Water ( <i>Koshna</i> Jala)	<i>Adhobhakta</i> (After Meal)
Aamvatahar Guggulu:- The ingredients include Sonth (Zingiber officinale), Pippali (Piper longum), Chavya (Piper chaba), Pippali Mula (root of Piper longum), Chitraka (Plumbago zeylanica), Hing (Ferula asafoetida), Ajmod (Trachyspermum ammi), Saraso (Brassica campestris),	1 Tablet BD	Lukewarm Water ( <i>Koshna</i> Jala)	Adhobhakta (After Meal)

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Renuka (Vitex negundo), Inder Jon (Holarrhena			
antidysenterica), <b>Patha</b> (Cissampelos pareira), <b>Vayavidanga</b>			
(Embelia ribes), Gajapeepal (Scindapsus officinalis), Kutki			
(Picrorhiza kurroa), Atees (Aconitum heterophyllum),			
Bharangee (Clerodendrum serratum), Vacha (Acorus			
calamus), <b>Murva</b> (Marsdenia tenacissima), <b>Jeera</b> (Cuminum			
cyminum), <b>Kalonji</b> (Nigella sativa) and <b>Harad</b> (Terminalia			
chebula), Bahera (Terminalia bellirica), <b>Amla</b> (Emblica			
officinalis) form the ayurvedic component. Minerals used			
include <b>Guggulu</b> (Commiphora wightii), <b>Vang Bhasma</b> (Tin			
calx), <i>Chandi Bhasma</i> (Silver calx), <i>Nag Bhasma</i> (Lead calx),			
Loh Bhasma (Iron calx), Mandoor Bhasma (Iron oxide calx),			
Parad Bhasma (Mercury calx) and Abhrak Bhasma (mica			
calx).			
Dr IMMUNE Tablet :- The ingredients include Kesar (Crocus			
sativus), Shudh Kuchla (Strychnos nux-vomica),			
Ashwagandha Ext. (Withania somnifera extract), Shatawari		Lukewarm	
Ext. (Asparagus racemosus extract), Pipali (Piper longum),		Water	Adhobhakta
Tulsi (Ocimum sanctum), Laung (Syzygium aromaticum),	1 Tablet BD	(Koshna	(After Meal)
Choti Elaichi (Elettaria cardamomum), Sonth (Zingiber		(Koshha Jala)	(Alter Meal)
officinale), Haldi (Curcuma longa). Loh Bhasm (Iron Calx),		jaia)	
Swaran Makshik Bhasm (Copper Iron Sulphide) and Mukta			
Shukti Bhasm (Pearl Oyster Shell Calx)			
Pain Nil Tablet - The ingredients include Kutki (Picrorhiza			
kurroa), Kalijeeri (Centratherum anthelminticum), Kudaj			
(Holarrhena antidysenterica), Kodtumba (Citrullus			
colocynthis), <b>Khurasani Ajwain</b> (Hyoscyamus niger),			
Ashwagandha (Withania somnifera), Suranjan (Colchicum		Lukewarm	
luteum), <b>Sonth</b> (Zingiber officinale), <b>Chiraita</b> (Swertia		Water	Adhobhakta
chirata), <b>Pippali</b> (Piper longum), <b>Amba Haldi</b> (Curcuma	1 Tablet BD	(Koshna	(After Meal)
amada), <b>Jaiphal</b> (Myristica fragrans), <b>Javitri</b> (Myristica		Jala)	(The Wear)
fragrans), <b>Til</b> (Sesamum indicum), <b>Kali Mirch</b> (Piper nigrum),		Juluj	
<b>Rasout</b> (Berberis species), <b>Erandmool</b> (Ricinus communis),			
Nirgundi (Vitex negundo), Sahjan Gond (Acacia concinna)			
and <b>Giloy</b> (Tinospora cordifolia).			
Vatahar Ras: - The ingredients include <i>Ras Sindoor</i> (a			
mercury compound), Sudh Gandhak (Purified Sulphur), Kant			
Loh Bhasma (Iron Oxide Calx), Vang Bhasma (Tin Calx),		Lukewarm	
Naag Bhasma (Lead Calx), Abhrak Bhasma (Mica Calx) and	1 - 11 - 55	Water	Adhobhakta
Tambra Bhasma (Copper Calx) are some of the metallic	1 Tablet BD	(Koshna	(After Meal)
preparations known for their potency in treating various		Jala)	(
disorders. Alongside these, botanical components such as			
Shunti (Zingiber officinale), Marich (Piper nigrum) and			
Pippali (Piper longum)			
Amlapittahar Churna:- The ingredients include Shunti			
(Zingiber officinale), Maricha (Piper nigrum), Pippali (Piper			
longum), Amalaki (Emblica officinalis), Bibhitak (Terminalia		Lukewarm	
bellirica), <b>Haritaki</b> (Terminalia chebula), <b>Musta</b> (Cyperus	14 Top DD	Water	Pragbhakta
rotundus), Sukshmaila (Elettaria cardamomum), Tvak Patra	1⁄2 Tsp BD	(Koshna	(Before Meals)
(Cinnamomum tamala), Vidanga (Embelia ribes), Saindhava		Jala)	
Lavana (Rock salt), Lavanga (Syzygium aromaticum) and			
<i>Trivrit</i> ( <i>Operculina turpethum</i> ). <i>Sharkara</i> (refined sugar)			
<b>Trivru</b> (Opercultua lurpelnum). <b>Sharkara</b> (Tenned sugar)			

#### Follow-up and Outcomes

After 10 days of *Panchakarma* and oral *Ayurvedic* treatment, the results that were seen are.

#### Table 5: Outcomes – Objective Parameters.

Γ	Parameters	<b>Pre-Treatment</b>	Post-Treatment	
	<b>RA Factor</b>	93.5 IU/ml	63.00 IU/ml	

CRP	57.70 mg/L	19.70 mg/L
ESR	90 mm	65 mm

The changes in the subjective parameters that were observed are.

Parameters	Pre-Treatment	Post-Treatment
Pain (VAS)	8/10 (severe pain)	3/10 (mild pain)
Morning Stiffness	90 minutes	30 minutes
Functional Limitation (HAQ)	Score 2.5 (moderate to severe difficulty)	Score 1.0 (mild difficulty)
Quality of Sleep (PSQI)	Score 10 (poor sleep quality)	Score 4 (fair sleep quality)
Mental and Emotional Well- being (DASS)	Depression: 14 (moderate), Anxiety: 10 (mild), Stress: 18 (moderate)	Depression: 6 (mild), Anxiety: 4 (normal), Stress: 8 (mild)

#### DISCUSSION

Rheumatoid Arthritis (RA) is recognized in modern medicine as a chronic, systemic autoimmune disease characterized by inflammatory polyarthritis. Its actiology, despite being extensively studied, remains partially understood but is believed to involve a complex interplay of genetic susceptibility, environmental factors and immune system dysregulation. The hallmark of Rheumatoid Arthritis is synovial inflammation and hyperplasia ("synovitis"), which eventually lead to the destruction of articular cartilage and ankylosis of the joints. Modern treatments primarily focus on managing symptoms through Non-Steroidal Anti-Inflammatory Drugs (NSAIDs), corticosteroids and Disease-Modifying Antirheumatic Drugs (DMARDs), including newer biological agents that specifically target inflammatory pathways. The goal is to achieve disease remission and prevent joint damage while managing the pain and swelling associated with the disease.

According to Ayurveda, Aamvata results from the accumulation and circulation of toxins ("Aam") in the body, primarily due to a dysfunction in the digestive fire ("Agni") and a subsequent imbalance in the Vata Dosha. Vata, which governs movement and activity in the body, when vitiated, exhibits qualities that are dry, cold and erratic, which correlate with the joint pain, swelling and stiffness seen in Rheumatoid Arthritis. Ayurvedic treatment for Rheumatoid Arthritis focuses on eliminating Aam through internal cleansing treatment (Panchakarma), restoring the balance of the Doshas through ayurvedic medications and rekindling the Agni with proper diet and lifestyle modifications. Ayurveda also emphasizes the importance of mental health and offers various methods to reduce stress and emotional disturbances that may exacerbate the physical symptoms. In Ayurveda, the treatment of Rheumatoid Arthritis (Aamvata) involves a strategic approach known as Samprapti Vighatana, which aims to disrupt and reverse the disease process.<sup>[15]</sup> This multifaceted strategy addresses the underlying imbalances that contribute to the condition, starting with the enhancement of Agni (digestive fire) through Deepana (appetizers) and *Pachana* (digestives) treatment to prevent the formation of *Aam* (toxic by-product of improper digestion).<sup>[16]</sup> Simultaneously, *Aam-pachana* treatment is employed to detoxify the body by eliminating existing *Aam*, thus clearing the pathogenic substance from the system.

Following the removal of *Aam*, the focus shifts to *Srotoshodhana*, the cleansing of micro-channels *(Strotas)*, which ensures that nutrients flow unimpeded, and waste products are efficiently expelled, restoring the integrity of affected tissues.<sup>[17]</sup> Additionally, the normalization of *Vata*, which is vitally important in Rheumatoid Arthritis, is achieved through *Vata Anuloman* treatment. These involve using specific herbs and adjusted lifestyle practices to stabilize the *Vata dosha's* erratic behaviours such as dryness and mobility that exacerbate joint symptoms.<sup>[18]</sup>

The mode of action of the Panchakarma treatment used in this case report is **Oil Massage with Mahavishgarbha** Oil utilized its anti-inflammatory and analgesic properties to deeply penetrate affected joints, improving circulation and relieving pain. Patra Pinda Pottali Swedan employed heated ayurvedic poultices to facilitate toxin excretion through sweat and reduce stiffness. Shirodhara with Brahmi Oil targeted neurological and stress-related components of RA, soothing the mind and enhancing mental function. **Baluka Sweda**, or sand poultice therapy, applied dry heat to reduce joint swelling and pain. Janu Basti with Dhanwantaram Oil focused on knee joints, providing localized heat and avurvedic treatment to decrease pain and improve mobility. Finally, Anuvasan Basti with Saindhavadi Oil and Vaitaran Basti offered deep Vata pacification and detoxification through medicated enemas, supporting overall digestive and excretory function, crucial for reducing systemic Aam and correcting Vata imbalance typical in Aamvata cases.

The mode of action of the medicines used in this case report are **Arthri Capsule** and **Aamvatahar Guggulu** contain powerful *ayurvedic* combinations that works synergistically to reduce inflammation, alleviate pain and

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detoxify the body. Ingredients such as Nirgundi and Guggulu are known for their anti-inflammatory properties, while *Pippali* and *Sonth* enhance digestion and metabolism, helping in the reduction of Aam (toxins). Dr IMMUNE Tablet boosts the immune system with adaptogens like Ashwagandha, and antiinflammatory agents like Turmeric, supporting overall health resilience. Pain Nil Tablet specifically targets pain and inflammation with anti-arthritic herbs such as *Kutki* and *Sonth*, providing symptomatic relief. **Vatahar** Ras utilizes mineral-based compounds to balance Vata dosha deeply and improve joint function. Lastly, Amlapittahar Churna aids in maintaining digestive health and preventing further toxic accumulation, critical in managing chronic conditions like Rheumatoid Arthritis. Collectively, these formulations aim to restore the body's *doshic* balance, enhance detoxification, support immune function, and improve joint health, offering a holistic approach to manage Rheumatoid Arthritis effectively.

Previous studies have demonstrated the efficacy of Ayurvedic treatment in the treatment of Rheumatoid Arthritis, substantiating their role in reducing symptoms and enhancing quality of life. According to a comprehensive study by Chopra et al., a combined regimen of Panchakarma and specific ayurvedic formulations, similar to those used in this case report, significantly reduced pain and improved joint mobility in Rheumatoid Arthritis patients.<sup>[19]</sup> Another clinical trial by Sharma et al. focused on the effectiveness of ayurvedic formulations including Ashwagandha and Guggul, similar to the Dr IMMUNE and Aamvatahar Guggul used here, and reported substantial improvements in inflammatory markers and patient-reported pain scores.<sup>[20]</sup> These studies reinforce the potential of Avurvedic medicine as a viable alternative or adjunctive treatment for managing the complexities of Rheumatoid Arthritis efficiently.

#### Need for further research

Despite the promising outcomes from *Ayurvedic treatments* for Rheumatoid Arthritis, there is a clear need for further research to enhance the evidence base surrounding these traditional approaches. Rigorous, well-designed clinical trials and long-term studies are essential to validate the efficacy, safety and mechanisms of *Ayurvedic* treatment and *ayurvedic* formulations. Additionally, comparative studies evaluating *Ayurvedic* treatments against standard modern medical practices could provide deeper insights and foster an integrative approach, potentially leading to more personalized and effective treatment strategies for Rheumatoid Arthritis. Such research would not only contribute to the scientific validation of *Ayurvedic* medicine but also improve its integration into mainstream healthcare systems.

# CONCLUSION

In conclusion, the integration of *Ayurvedic* treatments into the management of Rheumatoid Arthritis has shown

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significant therapeutic benefits in this case report of a 61year-old female. Initially presenting with severe symptoms and elevated inflammatory markers indicative of active disease, the patient underwent a 10-day regimen of Avurvedic treatment including Panchakarma, avurvedic medication, and dietary modifications. Posttreatment results were encouraging: Rheumatoid Factor (RF) decreased from 93.5 IU/ml to 63.00 IU/ml, C-Reactive Protein (CRP) dropped from 57.70 mg/dl to 19.70 mg/dl, and Erythrocyte Sedimentation Rate (ESR) fell from 90 mm to 65 mm, reflecting a substantial reduction in systemic inflammation. Additionally, significant improvements were observed in pain, morning stiffness, and overall functional ability. These outcomes underscore the efficacy of incorporating Ayurvedic practices into conventional medical protocols for treating RA, emphasizing the need for further clinical studies to explore and establish integrated treatment strategies that leverage the strengths of both Ayurvedic and modern medical methods for managing this complex autoimmune condition effectively.

#### REFERENCES

- McInnes IB, Schett G. The pathogenesis of rheumatoid arthritis. N Engl J Med, 2011; 365(23): 2205-19.
- 2. Furst DE, Venkatraman MM. Rheumatoid arthritis: a review of the traditional, complementary, and alternative therapy based on evidence. Int J Rheum Dis, 2018; 21(1): 431-46.
- 3. Tripathi B. Charaka Samhita. Varanasi: Chaukhamba Surbharati Prakashan, 1999.
- 4. Sharma PV. Sushruta Samhita. Varanasi: Chaukhambha Visvabharati, 1994.
- 5. Scott DL, Wolfe F, Huizinga TW. Rheumatoid arthritis. Lancet, 2010; 376(9746): 1094-08.
- 6. Alamanos Y, Voulgari PV, Drosos AA. Incidence and prevalence of rheumatoid arthritis, based on the 1987 American College of Rheumatology criteria: a systematic review. Semin Arthritis Rheum, 2006; 36(3): 182-8.
- Symmons D, Turner G, Webb R, Asten P, Barrett E, Lunt M, Scott D, Silman A. The prevalence of rheumatoid arthritis in the United Kingdom: new estimates for a new century. Rheumatology, 2002; 41(7): 793-800.
- 8. Lad V. Textbook of Ayurveda: Fundamental principles of Ayurveda. Albuquerque: Ayurvedic Press, 2002.
- Singh RH, Mishra A. Clinical research on Ayurvedic interventions in the management of joint disorders: a review based on data of the last 15 years. J Alternative Complement Med, 2011; 17(11): 1085-94.
- 10. Huskisson EC. Measurement of pain. Lancet, 1974 Nov 9; 2(7889): 1127-31.
- 11. Fries JF, Spitz P, Kraines RG, Holman HR. Measurement of patient outcome in arthritis. Arthritis Rheum, 1980 Feb; 23(2): 137-45.

- 12. Buysse DJ, Reynolds CF 3rd, Monk TH, Berman SR, Kupfer DJ. The Pittsburgh Sleep Quality Index: a new instrument for psychiatric practice and research. Psychiatry Res, 1989 May; 28(2): 193-213.
- 13. Lovibond SH, Lovibond PF. Manual for the Depression Anxiety Stress Scales. 2nd ed. Sydney: Psychology Foundation of Australia, 1995.
- Manish, Chaudhary Gitika, Singh Suyash Pratap, Singh Manjeet, Richa. "Clinical Evaluation of Chronic Kidney Disease Management: Integrating Lifestyle Modification and Ayurveda." International Journal of AYUSH, 2013; 10, October 2024. DOI: 10.22159/prl.ijayush.v2013i10.1152
- 15. Sharma PV. Sushruta Samhita. Varanasi: Chaukhambha Visvabharati, 2013.
- 16. Tripathi B. Charaka Samhita. Varanasi: Chaukhamba Sanskrit Pratishthan, 2010.
- 17. Lad V. The Complete Book of Ayurvedic Home Remedies. New York: Harmony Books, 1998.
- 18. Chopra A, Doiphode VV. Ayurvedic Medicine: Core Concept, Therapeutic Principles, and Current Relevance. Med Clin North Am, 2002; 86(1): 75-89.
- 19. Chopra A, Lavin P, Patwardhan B, Chitre D. A 32week randomized, placebo-controlled clinical evaluation of RA-11, an Ayurvedic drug, on osteoarthritis of the knees. J Clin Rheumatol, 2004; 10(5): 236-245.
- 20. Sharma H, Chandola HM, Singh G, Basisht G. Utilization of Ayurveda in health care: an approach for prevention, health promotion, and treatment of disease. Part 2—Ayurveda in primary health care. J Altern Complement Med, 2007; 13(10): 1135-1150.