

Agnikarma with Suvarna Shalaka in Janu Sandhigata Vata (Osteoarthritis of Knee Joint) - A Case Report

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Abstract

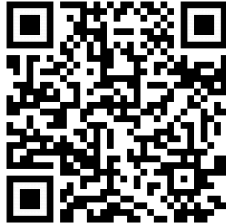
Sandhigata Vata (Osteoarthritis) is common amongst the elderly and obese persons. The disease *Sandhigata Vata* is prone to be manifested in the knee joint. The dominance of *Vata dosha* is seen in the pathogenesis of *Sandhigata Vata*. The symptoms of *Sandhigata Vata* described in *Sushrut Samhita* are *Sandhi vedana* (Joint pain) and *Shotha* (Swelling), due to these symptoms stiffness and crepitus develop, which may be correlated with disease osteoarthritis (O.A) in modern parlance. A 63 years male patient came to Shalya tantra OPD with the presenting complaints of piercing type of pain in both the knee joints associated with crepitus and swelling. On local examination of the knee joint palpation and raising temperature was seen with restricted flexion of 90° and restricted extension of 120° along with restricted medial rotation and lateral rotation with 180°. *Agnikarma* with *Suvarana* (Gold) *shalaka* was done in a single sitting weekly interval followed by two interval periods of 15 days and 30 days. The case was successfully treated and cured with *Agnikarma* within one month.

Key words: *Agnikarma, Janu sandhigata Vata, Osteoarthritis in Knee joint, Suvarna shalaka.*

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Introduction:

SandhiGata Vata (Osteoarthritis) is common amongst the elderly and obese persons. The disease *Sandhigata Vata* is prone to be manifested in the knee joint. The dominance of *Vata dosha* is seen in the pathogenesis of *Sandhigata Vata*. The symptoms of *Sandhigata Vata* described in *Sushrut Samhita* are *Sandhi vedana* (Joint pain) and *Shotha* (Swelling), due to these symptoms stiffness and crepitus develop, which may be correlated with disease osteoarthritis (O.A) in modern parlance.^[1] Osteoarthritis is the commonest form of joint disease that causes pain and disability in advancing years of life. Before 60 years of age 1 out of 10 persons (10%) and after 60 years 3 out of 4 (75%) persons suffers from O.A of knee joint.^[1]

Osteoarthritis also known as degenerative arthritis is a clinical syndrome in which low-grade inflammation of joints, caused by abnormal wearing of cartilage that covers and acts as a cushion inside the joints. Due to the decrease in the quantity of synovial fluid, patient experiences pain upon weight bearing on joint during walking and standing.

Thus considering the recommendation of *Sushrut*, the author of *Sushrut Samhita*, the *Agnikarma* has been selected as one of the therapeutic treatment for Osteoarthritis.^[2] The existing treatment of O.A are the analgesic and anti-inflammatory drugs being prescribed for its remedy which gives temporary relief and the continuance of

chemist drugs give rise to APD and other complications. Hence the patient compels to search complete remedy from the O.A. In chronic O.A the knee replacement by surgical approach may not be possible and affordable for common people and also it does not make fit as be for healthy knee joint. Under the above circumstances the medical research unit finds solution in Ayurveda para surgery. *Sushrut*, the father of the surgery has advocated the *Agnikarma* “a direct cauterization procedure” para surgical work for the complete relief of O.A. *Agnikarma* can be applied for *Vataja* and *Kaphaja vyadhis* (the disease of *Vata* and *Kapha dosha*), grossly in which O.A is one of them as per doshic consideration. *Agnikarma* helps to remove the aggravation of both *dosha* by its opposite heat producing (cauterizing) action.

Case report:

A male patient of 63 years of age came to the Gopabhandhu Ayurveda Mahavidyalaya under the department of Shalya tantra OPD with the presenting complaints of piercing type of pain in both the knee joints associated with crepitus and swelling. The patient was apparently healthy before 6 months. He gradually observed a mild piercing type of pain which started first in the right knee joint and later was also seen in left knee joint that gradually increased. This complaint was consulted for in various allopathic hospitals and some treatments were undergone without any marked

improvement in the condition. The patient is a retired government employee with sedentary style nature of the work having medium built and following vegetarian diet and dwelling in urban area. None of the family members showed similar kind of symptoms and none were said to be suffering from hypertension, hyperlipidemia and diabetes mellitus.

On examination the *Prakruti* (Physical & psychological constitution) of the person was said to be *Pitta Predominant vata* with moderate appetite, *Madhyama koshta* (the pathway of disease). On local examination of the knee joint palpation and raising temperature was seen with restricted flexion of 90° and restricted extension of 120° along with restricted medial rotation and lateral rotation with 180°. On investigation X-ray findings revealed that there was soft tissue swelling and narrowing of joint space in both of the knee joint.

Treatment Given:

Agnikarma was done in a single sitting weekly interval followed by two interval periods of 15 days and 30 days.

Materials:

- *Agnikarma Shalaka: Suvarna* (Gold) *Shalaka* (Suvarna-90% and Tamra-10%)
- *Triphala Kwatha* (decoction): It was used for the cleaning of local part before *Agnikarma*

- *Yashtimadhu Churna* (*Glycyrrhiza glabra* powder): It was used for dusting after *Agnikarma* (dressing purpose)
- *Ghritakumari* (*Aloe barbadensis* Miller. leaf): It was used as soothing effect after *Agnikarma* (dressing purpose)
- *Madhu-Sarpi* (honey and ghee): It was used after *Agnikarma* for healing of wound twice daily 3 days.

Procedure of *Agnikarma*:

The procedure performed in three stages as *Purva Karma* (Pre-procedures), *Pradhana Karma* (Main- procedures), and *Paschat Karma* (Post- procedures) mentioned by Acharya Sushrut.^[3]

Purva karma: *Snigdha Picchila Annapana* (rice with ghee) was given prior to the procedure. The site of *Agnikarma* is washed with *Triphala Kwatha* and wiped with dry sterilized gauze and covered with a cut sheet. *Suvarna Shalaka* was heated up to red hot. *Ghritakumari* pulp, *yashtimadhu Churna* kept ready for dressing.

Pradhana karma: In OA of the knee joint, supine position was adopted as it is comfortable to the patient. Irrespective of a specific site, *Agnikarma* was done at maximum tender site affected at the knee joint. The minimum space was kept between two *Agnikarma* points to avoid overlapping of *Dagdha Vrana* (Burned wounds). After *Agnikarma*, fresh *Ghritakumari* pulp was applied on *Dagdha* to relieve burning pain.

Paschat karma: After wiping of *Ghritakumari* pulp, honey and ghee was applied on *Dagdha Vrana*, after that dusting of *yashtimadhu Churna* was done. Patient was observed for 30 min after procedure and advised *Pathyapathya* (Proper dietics) as mentioned in *Sushruta Samhita* until the healing of *Samyak Dagdha Vrana* (Proper sign and symptoms of Cauterization).^[4] Patients were strictly

advised not to allow water contact at *Dagdha Vrana* site for 24 h.

The pain was measured on visual analogue scale (VAS) and findings were found significant relief in pain. Noticeable improvement in the symptoms was seen, it was up to 100% in pain, Tenderness, swelling and Crepitus (Table 1,2). Angle of knee joint showed marked improvement in Flexion and Extension up to 100% after 2nd week of treatment (Table-3).

Images:



Fig-1: *Suvarna (Gold) Shalaka*



Fig-2: *Agnikarma at Knee joint*

Table -1: Observations of Subjective and Objective Parameter:

Parameters	BT	AT				Follow up (after)	
		1st week	2nd week	3rd week	4 th Week	15 Days	30 Days
Pain	6	5	5	4	4	3	0
Tenderness	1	0	0	0	0	0	0
Crepitus	1	1	0	0	0	0	0

Table-2: Swelling of Knee Joint: (Rt. / Lt.):

Knee Measurement	BT	AT				Follow up (after)	
		1st Week	2nd week	3rd week	4 th Week	15 Days	30 Days
Middle point of patella	1	1	0	0	0	0	0
2 inches above patella	1	1	0	0	0	0	0
2 inches below patella	1	1	0	0	0	0	0

Table- 3: Angle of Knee Joint: (Rt. / Lt.):

Goniometric Reading (ROM)	BT	AT				Follow up (after)	
		1st Week	2nd week	3rd week	4 th Week	15 Days	30 Days
Extension	1	1	1	0	0	0	0
Flexion	1	1	1	0	0	0	0

Discussion:

Probable mode of action of Agnikarma

The probable mode of action can be described in the form of pharmacological actions which ultimately relief the disease. The application of the *Agnikarma* (Cauterization) produce physical heat by its red hot *Salaka* (probes) which counts with its various properties *Ushna* (hot), *Tikshna* (acute/potent), *Ashukari* (immediate

effective) and *Sukshma* (minute). All these properties are transferred to first dermis followed by epidermis of the skin (*Twak dhatu*) while the cauterization continues. Then these forms of actions penetrate to deeper dhatu and act probable in following three forms, like

1. It removes blockage of channels (*Srothoavarodha*) which increases the circulation of plasma and blood (*Rasa*

and *Rakta*) and thereby flush out/pacifies the pain.

2. It increases the metabolism of body elements (Dhatu) by which it enhances the digestion by removing deranged doshas and at the same time it supplements nutrition to body tissues (Dhatu) that makes healthy to the diseased area.
3. It acts on the deep tissue by neutralizing the cold property (*Sheeta guna*) and simultaneously pacifying other features of *Vata* and *Kapha dosha* which alleviates *Vata* and *Kapha* diseases. Under the above mode of action, the disease and associated symptoms of disease treated by *Agnikarma* are relieved. By which the *Sira* (Vein), *Snayu* (Tendon), *Sandhi* (joints) and *Asthi* (Bone) becomes stable. *Agnikarma* when applied considering doshas involved in *Janu Sandhigata Vata* reduces the symptoms of Pain, Tenderness caused due to the involvement of *Vata* and restricted movement caused due to effect of *Kapha dosha* and brings about increased circulation and improves the health of the joints.

Suvarana shalaka is one of the most suitable *shalaka* for performing *Agnikarma* as *Suvarna* (Gold), the *Sara Lauha* is an important, noble metal known to Indians since antiquity.^[5] References can be traced back to *Charak* and *Sushrut Samhita* where the noble metal has been attributed with a

wide range of applications. Quantitatively it is a combination of metallic Gold (96.76%), silica (1.14%), ferric oxide (0.14%), phosphates (0.78%), potash (0.16%), salt (0.078%), and traces of copper and magnesium.^[6] Gold compounds have the ability to decrease concentrations of rheumatic factors and influences the immunological responses.^[7]

Conclusion:

Agnikarma is one of the effective mode of treatment for *Janu sandhigata Vata* (Osteoarthritis of Knee joint) when used with *Suvarna shalaka* it catalysis the effect to bring about faster relief. For the scientific validation the study should be carried out in more number of cases.

Images

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