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CORRELATION BETWEEN RAKTAVRITA **VATA AND CELLULITIS:- A CLINICAL STUDY**

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Abstract-

Ayurveda considers *Tridosha* are one of the pillars of the body. Among these three doshas, Vata has immense significance. It plays key role behind maintenance of body in normal and healthy state. Concept of Avarana is one of the fundamental and unique concept which helps in explaining samprapti of a disease. The Avarana on vata Dosha by Rakta dhatu is known as Raktavrita vata. The clinical features show karma hani of vata and karmavrudhi of rakta. After review of literature regarding Avrita Vata, it is found that the clinical features of Cellulitis are remarkably similar to *Raktavrita Vata*. Hence, both the diseases can be correlated. An observational and analytical study was carried out on 30 diagnosed Patients of Cellulitis. Patients were selected by purposive method irrespective of gender, caste and socio-economic status. The theoretical concept of Avarana particularly Raktavrita Vata was studied clinically by studying patients of Cellulitis. Clinically five out of eight symptoms of cellulitis were found in about 62.66% of patients registered in the study and Rakta dushti hetus are predominantly observed than Vata prakopa hetus.

Key words- Avaran, Cellulitis, Raktavrita vata.

Introduction-

Ayurveda considers *Tridosha* as the pillar of the body. All the functions of the body are controlled by these three fundamental factors (1). The body is sustained and is free from disorders when these are in equilibrium, located in their places and perform their normal functions. If they get deranged they afflict the body with disorders (2). Any disturbance to their equipoise state leads to diseases. Among these three doshas, vata is very significant. It plays a key role in maintenance of body in normal healthy state (3). Vata is strongest of all the doshas and is responsible for causing a large number of diseases. It is also quick enough to cause emergency conditions.

The Avarana sankalpana is one of the fundamental concepts of Ayurveda. The avarana of vata can be caused by the dosha, dhatu, mala, anna and ama. In avarana there are two major factors i.e. avaraka and avrita.

Concept of avarana is one of the unique methods of explaining samprapti of a disease. However, it is not very popular and not routinely followed for vyadhi-nidan and vyadhi-chikitsa. Clinical study of one of the avarana was thought to be essential for better insight of concept of avarana.

Avarana of vata is difficult to understand as well as to diagnose. Its wrong diagnosis leads to faulty management which further exacerbate the condition. Its understanding is essential for the accurate diagnosis and management.

It is also helpful in understanding the pathogenesis of some complicated diseases in this modern era. Avarana is an atypical presentation; hence in depth analysis must be done for a proper diagnosis for a comprehensive management.

The avarana on vata dosha by rakta dhatu is known as raktavrita vata. In this condition the gati of vata is disturbed due to etiological factors other than its own i.e. not due to direct vata vitiation factors. Avaraka suppresses the normal functions of avarita. The clinical features show karma hani of vata and karmavrudhi of rakta. This gives rise to features like daha, arti, twak-mansataryo, raga, shwayathu and mandala in Raktavrita vata (4). Due to lack of observation and clinical scale it can be mistaken many times. So, for better insight, concept of Avarana is studied with the help of particular avarana i.e. raktavrita vata.

Cellulitis is a non-suppurative inflammatory disease. It can be spread along the subcutaneous tissue, connective tissue plane and across intercellular space. Cellulitis is an entity having systemic and external origin. It cannot be treated properly and can lead to severe complications like Necrotizing fasciitis, Sepsis and Shock (5).

Cellulitis is difficult to compare with any other diseases mentioned in Ayurvedic texts.

As clinical features of *raktavrita vata* are seem similar to cellulitis

Theoretically, it is observed clinically. The study was helpful in understanding Avaran sankalpana not only by theoretically but also practically by observation and clinical scale. The study was helpful in understanding the etio-pathogenesis of cellulitis in terms of avarana. Here; clinical features of cellulitis are found to be very much similar to clinical features of raktavrita vata.

Aim and objectives-

To observe and analyse correlation between *lakshanas* of *Raktavrita Vata* and Cellulitis

Material and method-

For conceptual study literature regarding the Avrita vata was reviewed from Ayurvedic classics. Modern review of cellulitis was taken from modern text books also Internet data and various research papers were reviewed.

For Clinical study patients were assessed according to the case record form (C.R.F). Valid and written informed consent of each patient was taken prior to case taking.

Type of study-

- 1) Observational
- 2) Analytical

Sample size calculation-

In attached hospital, prevalence of Cellulitis is 1.9 %. Including error (0.05-0.10%) According to that sample size is 30.

Sampling Method-Purposive method

Method-

- 1. 30 patients of Cellulitis were studied.
- 2. Written consent of the patients was taken.
- 3. Detailed case history of patients was taken and required clinical examination was done with help of specially prepared Case Performa.

Selection of patients-

Inclusion criteria

- 1. Age group between 18 years to 80 years.
- 2. Gender Both male and female patients were selected Irrespective of caste, occupation and their socioeconomic status
- 3. Clinically diagnosed patients of Cellulitis.

Exclusion criteria

- 1. Pregnant women.
- 2. Patients with diseases like immune compromised disease, Koch's disease.
- 3. Patients having Erysipelas and Herpes Zoster.

Tabel no. 1:-criteria for assessment

Lakshanas of Raktavrita Vata	Clinical features of Cellulitis	
1) Daha	1) Erythema	
2) Arti	2) Localized Heat	
3) Raga	3) Pain	
4) Shwayathu	4) Swelling	
5) Mandala	5) Fever	
	6) Blisters	
	7) Discharge	
	8) Itching	

Plan of work:

30 diagnosed Patients of Cellulitis were selected by purposive sampling method irrespective of gender, caste and socio-economic status.

Valid and written informed consent of each patient was taken prior to case taking. Detailed case history of patient was taken. Patient was assessed for Cellulitis according to the case record forma (C.R.F).

Symptoms of *Raktavrita Vata* and Cellulitis were studied. Discussion and observations were done according to data obtained. Statistical analysis was done. Results were noted. Conclusion was drawn.

Observation and result-

Following observations are noted after case taking of 30 patients.

Age- It was observed from the present study that the prevalence of Raktavrita. Vata is very common in the age group of 50 - 60 years (36.7%) meaning the uttara avastha of age. In this age group vata gets vitiated very easily and there is depletion of other dhatu as well. Hence there is an occurrence of pathogenesis of raktavrita vata. In this age group the immunity also gets diminished and hence can cause the disease very usually.

Gender- From the present study it was observed that male patients (53.3%) were more in number than female patients (46.7%). The causative factors like stress, physical exertion, day and night duty are common in males than females, causing vitiation of rakta dhatu and spicy food intake, night duty causes vitiation of vata dosha. Socio-economic status- Observations in the study show that the prevalence of the disease is common in Middle class (56.7%) and Lower class (40%) population. This is because of dietary habits that they follow and unhygienic practices that result in the growth micro-organisms like S. aureus.

Prakruti- In this study Vata-Pitta prakriti (26.7%), Pitta Kapha prakriti (20%) patients are observed. This shows that people having Vata-Pitta prakriti are more prone to the disease. It may be because Vata gets vitiated easily in this *prakruti* and *Rakta* also gets vitiated easily due to *Pittakara ahara*. This is due to the fact that *Rakta* is ashrita dhatu of pitta dosha and hence causing the pathogenesis easier.

Site involvement- From the present study it can be seen that the disease is very common in lower extremities. The observations show that, *Raktavrita vata* is seen more in left leg (36.7%) followed by right leg (26.7%) and right hand (13.3%). It is so because blood has to flow against gravitational force from lower limbs to heart and that can cause stagnation of blood in blood vessels causing blood vessels tortuous and hence causing the disease at that site very commonly.

Rutu- From observations in study, the prevalence is more in varsha rutu (56.7%) followed by grishma and vasant rutu (16.7%). Rutu has a major impact on human health mentioned in Ayurveda as, in varsha rutu, there is vata prakopa kala, causing vitiation of vata dosha. It is followed by sharada rutu, in which rakta dushti can occur very easily.

These theoretical principles are reflected in observations.

Comparison of Rakta and Vata dushti hetus-

The observation shows 80% incidence of Rakta dushti hetus and 53% incidence of vata prakopaka hetus in patients. rakta dushti hetus are more commonly observed than vata prakopak hetus. This comparison helps in proving that rakta dushti is greater than vata dusht in raktavrita vata. More vitiation of rakta leads to obstruction in the *gati* of *Vata* by developing a covering around *Vata*.

Comparison of clinical features-

In this study, Clinical features of Cellulitis were observed as follows.

About 100% of patients were having clinical feature of Swelling, Pain, and Erythema. 93% of patients were having clinical feature Local temperature. 70% of patients were having clinical feature Blister. 6.7% of patients were having clinical feature Fever and Discharge. 3.3% of patients were having clinical feature of Itching.

Clinical features of Raktavrita vata shows that, about 100% of patients were having clinical feature of shwayathu, arti and raga. 93% of patients were having clinical feature daha. 70% of patients were having clinical feature mandala.

Out of Eight clinical features of Cellulitis; five clinical features of raktavrita vata were correlated (62.66%). These lakshanas can be compared with each other and hence there are similarities in clinical features of Cellulitis and raktavrita vata.

Table No.2:- Clinical features of Cellulitis and Raktavrita vata

Clinical features of Cellulitis	Observed clinical features of Raktavrita Vata	
Localized heat	Sthanika Daha	
Pain	Arti (vedana)	
Erythema	Raga	
Swelling	Shwayathu	
Blister	Mandala	
Fever	+	
Discharge		
Itching	-	

Table .No.3 Vyadhi ghatak-

Vyadhi-ghatak	Factors responsible for	Observed Vyadhi-ghataka
	Pathophysiology of Cellulitis	
Dosha	-	Raktadosha-pradhan Vata
		(Vyana vayu)
Dushya	Blood	Rakta, Rasa
Sroto-vaigunya		Predominate Raktavaha with
		Rasavaha
Dushtiprakara		Vimarga-gaman
Udbhavasthana		Twak-mamsatarayaho

Discussion

In Ayurveda, Vata is one of the significant causative factors in any disease. Different types of Vata prakopa vikaras are mentioned under different concepts. Vata prakopa vikara due to vitiation of only vata is known as "Nanatmaja vikara". Vata prakopa vikara due to vitiation of vata dosha along with vitiation of pitta and kapha dosha is called as "Anubandh vikara". Vata prakopa vikara due to vitiation of dhatu is termed as "Gata vata". Avarana formed due to covering of dosha, dushya, ama, mala and anna to the vata is known as avrita vata. Avarana is one of the basic clinical concepts which go unidentified or mistaken due to lack of clinical scale and observation. All above pathological conditions are produced in different strotas and give rise to different diseases.

Due to globalization and modern life style, excessive work load, physical and mental stress and different dietary habits dominate our lives. Sedentary and stressful life gives rise to different psycho-somatic disorders. Cellulitis is one of the non-suppurative inflammatory diseases. Cellulitis is an entity having systemic and external origin. It is mainly streptococcal infection. It is caused by different predisposing factor such as dietary habits and skin wounds. The complications of Cellulitis include Necrotizing Fasciitis, Sepsis and Shock. All above causative factors are due to today's modern life style.

The observations show that, clinical features of Cellulitis are correlated with clinical features of Raktavrita Vata. Raktavrita Vata can be correlated with Cellulitis because, in both conditions there is pain at site, erythema, swelling, local temperature, and blisters.5 out of 8 symptoms of cellulitis were found in about 62.66% of patients registered in the study.

The hetus of rakta dushti are predominantly the etiological factors of Raktavrita vata. In this study Rakta dushti hetus (35%) are major etiological factors observed clinically in Raktavrita vata.

As per observation, all clinical features developed due to vitiated *doshas* lodge in-between *twak* and *mamsa*. The vitiation of Rakta dosha observed more than vata dosha. So, sthanika vyana vayu get obstructed by rakta. Rakta creates avarana around sthanika vyana vayu. The Karma hani of gati of sthanika vyana vayu was due to decrease in chala guna which develops Pain. Karma vrudhi of sthanika sukshma guna of vyana vayu leads to its vitiation at minuet level i.e. at Twak level. Karma vrudhi of sthaniak rakta by snighdhatwa and dravatwa guna leads to clinical features like daha, raga and mandala at twak sthana. Karma vrudhi of sthanika rakta along with karma hani of Chala guna of sthanika vyana vayu tends to Srotorodh and develop Shwayathu. According to Sushruta, the Raktavrita vata is preceding stage of mamsavrita vata. This shows the involvement of succeeding dhatu i.e. mamsa dhatu in Avarana. Involvement of uttarotar dhatu shows gambhir or asadhya stage of Avarana.

Above observations helps in understanding Avarana and Raktavrita vata sankalpana.

Ayurveda plays an important role in diagnosis and treatment of the disease which identifies the root cause of the disease. At diagnostic level it goes through concept of hetus, dosha, dushya, srotas involvement and rogamarga. Avarana has its own unique feature of diagnosis of disease.

This article puts light on the correlation between clinical features of Cellulitis and Raktavrita vata. This study analyses the *hetus*, *srotas* and diagnosis of Cellulitis according to principles of *Avrita vata*.

After review of literature regarding Avrita vata it is found that the clinical features of Cellulitis are similar to Raktavrita Vata, hence both the diseases can be correlated. A new line of treatment for cellulitis can be drawn according to the treatment principles of *raktavrita vata* as mentioned in the Samhitas.

Conclusion-

- Cellulites can be compared with raktavrita vata.
- On observation, rakta dhatu is the main vitiating factor along with the vitiation of the vata dosha.
- Observation highlights that major etiological factors responsible for raktavrita vata are the rakta prakopaka ahar, vihar and manasik hetu.
- Raktavaha strota dushti hetus are to be dominating during the study. They may be etiological factors of raktavrita vata.
- Majority of the clinical features of raktavrita vata are correlated with the clinical features of cellulitis.
- Above study helps in observation of karma vrudhi of rakta and karma. hani of vata in producing clinical features of raktavrita vata.
- All above observations are helpful in understanding Avarana and Raktavrita vata sankalpana.
- This study helps in diagnosis of cellulites with the help of basic Ayurvedic concepts and fundamental principles.

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