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A STUDY ON THE PROSPECTS OF AYURVEDIC MANAGEMENT OF OSTEO-ARTHRITIS

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ABSTRACT

Osteoarthritis is a degenerative non-inflammatory joint disease that results in pain and restricted movement of affected joints. It is a condition causing the deterioration of the cartilage protecting cushion lining the ends of the bones where two bones meet to form a joint. Studies indicate that there is a gradual growth in OA prevalence from age 30, so that 65, 80% of people have radiographic OA data, but only 25-30% are symptomatic. It's a slow-moving degenerative disease. Potent analgesics and anti-inflammatory medications are present on the market which are at risk of causing adverse effects such as gastric erosion, hepatic and nephrotoxicity, etc. Even surgery has scientifically found to have a 10% failure rate in knee replacements. Contemporary research is limited to offering detailed, efficient management. Study in Ayurveda, therefore, has apparent potential in this condition. Osteoarthritis of the knee can be very linked to Sandhivata due to similarity in signs and symptoms. Sandhivata is one among the most common Vata Vyadhi. This Sandhivata is usually presented in Janusandhi, which is one of the most important weight bearing joints in the body. According to Ayurveda Snehana, Svedana, Dahana and Upanaha are the main care modalities in the management of Sandhivata, most of which are aimed at Brimhana. Janubasti is the procedures having Bramhana action where Sneha is allowed to stay for a stipulated duration in the affected joint. Patra Pinda Sweda is type of Sankara Sweda helps in pacifying of both Vata and Kapha. It also acts as Srothoshodhaka.

Key words: Sandhivata, Osteoarthritis, Nanatmaj Vatavyadhi, Vata Khuddata.

INTRODUCTION

In this era of competition, it is mandatory for the human to be cautious about health and appearance. Drastic change in life style of human and pollution have not only created social problems but also have a great impact over health which has leads to exacerbation of certain disorders; Osteoarthritis of Knees is one of them. The happiness of every individual is derived through locomotion i.e., ability of using joints and bones. The moment person loses his power of locomotion; he not only feels himself a miserable creature but also becomes burden to his family and society. Sandhivata is a huge concern as a significant proportion of the population suffers from this condition.

Osteoarthritis is a steadily progressive joint condition that is debilitating and crippling in the development of years of age. Before 60 years of age 1 out of 10 persons and after 60 years 3 out of 4 persons suffers from Osteoarthritis. Till the age of 55 it occurs equally in both sexes; after 55 the incidences are higher in women. The incidence of osteoarthritis in India is as high as 80% of the 65+ population in 2013. 40% of these people are likely to suffer from severe osteoarthritis says the experts quoting WHO. By 2020, 177 million people will be affected by Osteoarthritis at that time the population of India will be 100 million people in this age group in 2010.

Chakrapani expounded that Vata Khuddata is nothing but Sandhivata. Sandhivata is one of the diseases in which Sandhi Shoola, Ankunchan Prasaranayo Shoola, Shotha, Graha and Pidanasahtva are there. Acharya Bhavamishra while explaining Vata Vyadhi explained about Sandhivata. Acharya Sushruta and Madhavakara have added Sandhi Shoola, Atopa, Sandhi Hanti. In Vriddhavastha, both Dhatus are undergoing Kshaya, thus leading to Vataprakopa and making the person vulnerable to many diseases. Among them, Sandhivata is at the top of the list. Sandhi falls under the Madhyama Roga Marga and, as a result, the presence of Madhyama Roga Marga, Vata Dosha and Dhatushaya reveals this disease Kashta Sadhya. Acharya Vagbhata has also considered Vata Vyadhi as a Maharoga. The trouble of Sandhi by Prakupita Vata is the main phenomena in Samprapti of Sandhivata. Acharya Sushruta has mentioned Sandhishopha, Sandhishoola and Hanti Sandhin as symptoms.

The main aim of treatment in Modern Medicine is to reduce the pain, maintaining mobility and minimizing the disability. Most of the pain killers produce gastric irritation in the patients. The magnitude of improvement is modest, only 30% reduction in the pain is there. In advance cases of Osteoarthritis in who specified management has failed, joint replacement surgery is advised. Knee joint replacement is costly and even after surgery patient has to continue analgesics for long time. So, people of the present era are in search of alternative medicines not only for the relief but for cure also.

It was thought that the concept of managing Sandhivata with Ayurvedic line of treatment may be helpful to mankind. The Ayurvedic concept of management of Sandhivata comprises repeated application of Abhyanga and Swedana. Snehana and Swedana Karma have prime importance in management of Sandhivata. Swedana Karma plays a major role in relieving the pain and stiffness of joints. Swedana relieves stiffness; heaviness and coldness of body and it radiates sweat out of body. Acharya Charaka has mentioned Pinda Sweda and has advocated the use of Pinda consisting of Tila, Masha, Kulatha, Amladravyas, Ghrita, Taila, Mamsa, Payasa, Krishara etc. for the purpose of Swedana.

CONCEPT OF OSTEO-ARTHRITIS IN AYURVEDA

All most all the Acharyas had mentioned the importance of Vata Dosha. It performs all the metabolic activities of the body in its normal state. Among all the three entities of the body Dosha i.e. Vata, Pitta and Kapha, Vayu has its own special functions. It is the only factor which gives movement to the other two Doshas, to move and perform their functions; otherwise remaining two Doshas and three Mala with seven Dhatus of the body are crippled. It is the Vayu which moves and activates all of them just like the wind which takes away the cloud anywhere it wants.

Acharya Charaka has described symptoms of Vata Vyadhi such as Sankocha, Parvasthanbha, Asthibheda, Parvabheda, Lomharsha, Pralapa etc. These different symptoms are manifested by vitiated Vayu. In the same context Acharya Chakrapani expounded that these above said Sankocha, Parvasthanbha etc symptoms may also be called as disease itself.

The description of Sandhivata can be seen in most of the Ayurvedic literature. In Bhava Prakash, a term 'Sandhivata' came into light under the chapter of Vata Vyadhi. After screening the available literature, it seems that Sandhivata and Sandhivata are the two singular words.

Acharya Charaka has not mentioned Sandhivata in 80 types of Nanatmaja Vikara of Vata Dosha but among these 80, he mentioned the term 'Vatakhuddata'. Charaka has described Sadhya-Asadhyata of Vata Vyadhi. While explaining it, Khuddavatata has been mentioned. Chakrapani, a renowned commentator on Charaka Samhita, explained that Khuddavatata means Gulphavata or Sandhivata. He has mentioned it as Sandhigata Anila and mentioned its symptoms. Acharya Sushruta stated the symptoms of Sandhivata in Nidansthana. He also mentioned the different procedures regarding the management of disease in Chikitsasthana. Acharya Vriddha Vagbhata enlightens the same fact as considered by Acharya Charaka and Sushruta about the signs and symptoms as well as the management of Sandhivata in Nidansthana and Chikitsasthana respectively. Acharya Bhel in his Samhita does not give any clear-cut idea about Sandhivata but description of Sandhi Vichyuti in Asthi Majjagata Vata Vyadhi have been noticed in the 26th chapter of Vata Vyadhi Chikitsa of Chikitsasthana under Vata Rogmula Vikara. Harita has mentioned the line of treatment for Sandhivata like Bhedana Kriya, Sneha Upanaha, Agnikarma, Bandhana, Mardana etc. Madhavkar describes the clinical signs of Sandhivata in Vata. Vijayrakshit and Shrikanthadatta has quoted new symptoms i.e. Sandhinasha, Sandhishoola and Sandhishotha. Sharangdhara mentioned Panchavidha Kashaya Kalpana. Bhavmishra had described Sandhivata as Sandhivata in the chapter of Vata Vyadhi in Madhya Khand in Bhava Prakash. Acharya described Sandhivata as Sandhigata Anile in Ayurved Dipika. Chakradatta described Sandhivata with special reference to its management.

NIDAN

Acharya Charaka has mentioned different Hetu of Vata Vyadhi in 28th chapter of Chikitsasthana. While some others have described some more Hetu at length. Reviewing all these Hetu, it is observed that some of them are responsible for Dhatu Kshaya, while others are responsible for Margavarodha. Thus, Acharya Charaka also mentioned two main causes under which different Hetu can be classified. They are as follows -

1) Dhatu Kshaya & 2) Margavarana

All the etiological factors mentioned for Vatavyadhi or vataprakopa can be classified into the following headings-

1. Aharaja (Dietetic factors)
 2. Viharaja (Behavioural factors)
 3. Agantuja (External factors)
 4. Manasika (Mental factors)
 5. Kalaja (Seasonal factors)
 6. AnyaHetuja (Other causes)
1. **Aharaja (dietetic factors):** Excessive intake of food substances which are having Tikta, Katu, Kashaya Rasa predominantly and Gunas which are predominantly Ruksha, Laghu and Sheeta causes the vitiation of Vata. Aharas like Kalaya, Chanaka, Mudga, Adaki, and Pramana like Alpa Bhojana, Hina Bhojana and Kala factors like Anasana, Vishamasana also results in the provocation of Vata Dosha.
 2. **Viharaja (habits and regimen):** Vega Dharana and Udeerna, Ratri jagarana, Uchairbhashya (speaking loudly), Atyadhva (excessive walking), Atiyana (excessive traveling) etc. are considered as the Viharaja factors for Vataprakopa. Also, excessive indulgence in Vyayama, Vyavaya, Dhavana, Pidana, Plavana, Bharavahana (lifting heavy weight) etc. also result in the provocation of Vata.
 3. **Agantuja factors (External factors):** Agantuja factors like Patana, Pidana, Abhighata, Marmaghata, Seeghrayana are considered as external causative factors for the provocation of Vata.
 4. **Manasika factors (Mental factors):** Atichinta, Atishoka, Atikrodha, Atibhaya. Factors like Chinta, Shoka, Bhayaresult in Vataprakopa.
 5. **Kalaja (Seasonal factors) :** Greeshma Pravrit Varsha Shishira Ritu, last part of day and night and in the last part of process of digestion Vata get increased.
 6. **AnyaHetuja(Others):** Langhan, Ama, Vishama Upachara, Dhatunam Sankshyad, Doshashruk Sravanad, Rogatikarshanad, Marmaghataand Dhatukshaya. Atikshataja Mokshnat, Dandadi Praharanat.

PURVARUPA - Purvarupa of Sandhivata has not been mentioned. As this disease is considered to be a Vataj Vikara, Purvarupa of Vatavyadhi in general are described herewith as the Purvarupa of Sandhivata. Acharya Charaka described the Lakshana of Purvarupa of Vata Vyadhi as 'Avyakta'. As Sandhivata is considered to be a Vata Vyadhi its Purvarupa is also considered to be Avyakta. No evidence of Purvarupa of Sandhivata was revealed in literature during the study.

RUPA - Rupa i.e. Vyaktavastha of Sandhivata has been clearly mentioned and explained by the renowned Acharyas. The Lakshanas of Sandhivata have been mentioned by Charaka, Sushruta and Vagbhata.

1. **Sandhishoola:** Shoola is the chief symptom of Prakupita Vata. It is stated that without Vata, Shoola does not occur. It's clear that Shoola is facing diseases that are governed by Vata. In Sandhivata Asthi, Kshaya is present in the area of Sandhi, thus Sandhi shola may be regarded as a symptom of Asthikshaya.
2. **Sandhishotha:** Dosha Sanchaya in specific site is the main causative factor for Shotha. In Sandhivata, Prakupita Vata gets enlodged in Sandhi where Srotoriktata already exists so the accumulated Vata produce Shotha. Here Vataputna Druti Sparsha type of Shotha has been described by Acharya Charaka and Vagbhata. On palpation the swelling is felt like a bag filled with air which on pressure displaces air from the site but gets refilled immediately on removal of pressure (Vataputna Druti Sparsha) which is typical Vata Shophya.
3. **Hanti Sandhi Gatah:** Acharya Sushruta mentions this symptom for the first time followed by Madhavakara while commenting on this word, Acharya Dalhana and Gayadasa explain it as inability of flexion and extension of the joints. However, this symptom may not to be seen in early stages because inability of movements of joints like flexion and extension is seen when disease get progressed.

In Madhukosha commentary, commentator Vijayarakshita has given two meanings of Hanti Sandhigata. One is Sandhivislesha (Subluxation of joint) occurring due to Prakupita Vata located in Sandhi and other is Sthambha (Loss of movement of joint due to stiffness). Sthambha means immobility as defined by Dalhana. Acharya Arundatta explained Sthambha as less or loss of flexion and other movements. Gati is unique feature of Vata and in Sandhivata this Gati is obstructed because of Sanga type of Sroto Dusti which gives rise to Sthambha. Increased Sheeta Guna of Vata is also responsible for Sthambha.

4. **Akunchana Prasaranayo Vedana:** Acharya Charakas mentioned this symptom in Vata Vyadhi. Akunchanaand Prasarana is the function of Sandhi. As Prakupita Vata is situated in Sandhi, it hinders the usual

role of Sandhi resulting in Vedana during Akunchana and Prasarana. This condition is seen during inactivity, when discomfort is felt at the start of action.

5. **Sandhisphutana:** This symptom is not mentioned in classics but described in modern textbooks; which indicates the Vata Prakopa especially its Ruksha Guna Vriddhi. This is the crepitus/ crackling sensation likely occurs because of the roughening of the surfaces inside the joint. This symptom may also occur due to Vatasanga in Sandhi.

6. **Atopa:** This symptom is mentioned by Madhavakara only. Usually Atopa is referred to Gudagudayana (borborygmi) heard in Udarapradesha. In the context of Sandhivata Atopa may be considered as crepitus on movement of joint.

SAMPRAPTI OF SANDHIVATA

By referring the text, it seems that the Samprapti of disease 'Sandhivata' has not been mentioned separately. Almost all Acharyas stated the origin of Sandhivata by the vitiated state of Vayu hence it has a universal acceptance of being a Vata Vyadhi. As this vitiated Vayu enters the Sandhi and creates the signs and symptoms of the disease, it has been named so. To explain the Samprapti of Sandhivata, here the Samprapti of Vata Vyadhi has been described. It can be explained as follows.

After the responsible or concerned Nidana Sevana, Vayu is vitiated, this vitiated Vayu while propelling through the body, enters the Rikta Srotas and produce different types of Vata Vyadhi.

Acharya Vagbhata also described Dhatu Kshaya and Margavarana as the two main causes due to which Vayu gets vitiated. Pitta and Kapha obstruct the Srotas by which it gets aggravated. Sometimes it produces Dhatu Kshaya by its vitiation. This Vayu enters the pathological Rikta Srotas and Dhatu (Lesion) and manifests Vata Vikara.

As this vitiated Vayu enters one of the Avayava i.e. Sandhi with reference to Sandhivata, it is called as Sandhivata.

Samprapti Ghatak-

- **Nidana :** Vata Prakopaka Nidana
- **Dosha :** Vata especially Vyanavayu and Shleshaka Kapha
- **Dushya :** Asthi, Majjaand Meda
- **Srotas :** Asthivaha, Majjavahaand / or Medovaha
- **Srotodusti :** Sanga
- **Agni :** Mandagni
- **DoshaMarga :** Marma Asthi and Sandhi
- **RogaMarga :** Madhyama
- **Udbhavasthana :** Pakvashaya
- **Vyaktisthana :** Asthi and Sandhi

UPASHAYANUPASHAYA OF SANDHIVATA

Upashaya and Anupashaya regarding Sandhivata may be the same as in Vata Vyadhi. All the types of Ahara, Vihara etc. which do have the opposite properties of Vata are considered to be the Upashayaja factors. For Sandhivata having Niramavastha, Snigdha, Ushna Ahara, Rest (Vishram) etc and specially repeated Abhyanga and Swedana are considered to be the best therapy to overcome the symptoms. At the same instance, the factors opposite to the properties of Upashayaja management produce the adverse effect in Sandhivata. Such as Ruksha, Sheeta, LaghuAhara, more exertion etc. These are considered as the responsible factors for Anupshaya of the disease.

Prognosis - Sadhyasadhyata of Sandhivata is not mentioned specially by any one of the Acharyas. As it is one of the Vata Vyadhi which is considered as one of the Mahagada by Acharya Charaka, suggest that Sandhivata is Asadhya Vyadhi while describing Chikitsa of Vata Vyadhi. Acharya Charaka explained that these Vata Vyadhi due to its deep-seated nature (Gambhiryat) sometimes get cured by proper treatment and sometime remains as it is. The disease of recent origin developed in strong person without any complications must be treated with proper precautions. So, considering the fact, we can corelate that Sandhivata if developed recently, in strong person without any complications, may be considered as Sadhya Vyadhi. But as the disease is found to be developed in old age mostly, the site of disease is a Sandhi which is considered as a Marmasthan. Therefore, Sandhivata may be considered as Yapya Vyadhi.

Differential Diagnosis

In order to get a better understanding of Sandhivata disease, a comparative analysis of cardinal symptoms of related diseases is given below.

Factors	Sandhivata	Amavata	Vatarakta	Koshtukashirsha
Amavastha	Absent	Present	Absent	Absent
Jwara	Absent	Present	Absent	Absent
Hritgarava	Absent	Present	Absent	Absent
ProneAge	Old age	Any age	-	-
Vedana	Akunchana Prasarana Apravrithi	VrischikaDanshavata, Sanchari	MushikaDanshavata	TivraVedana
Shotha	Vatapurana Driti Sparsha	Sarvanga&Sandhigata	Mandalayukta	KroshtukaShirshavata
Sandhi	Weightbearing joint	Large Sandhi	Small Sandhi	Only joint sandhi
Upashaya	Abhyanga	RukshaSwedan	RaktaShodhana	RaktaShodhana

TREATMENT OF SANDHIVATA

Revealing the concepts of treatment regarding Sandhivata through Ayurvedic literature, it came to light that only Acharya Harit, Bhava Mishra, Chakradatta and Vagbhata had separately mentioned the line of treatment or concepts of Chikitsa of Sandhivata. But Charaka, Sushruta and others do give the evidence of Lakshana of Sandhivata but its Chikitsa has not been mentioned. Acharya Harit suggest Swedana, Mardana, Abhyanga, Basti, Snehana and Niruha while treating Snayu Sandhi AsthigataVata. Bhava Mishra mentioned Daha, Snehana, Upanahana Karma while treating it. He also suggests to administer the root of Indrayan and Pippali with Guda to get relief. While explaining the Chikitsa of Snayu, Sandhi and Asthigata Vata, Acharya Chakrapani advised to administer Snehana, Upanaha along with Agnikarma, Bandhana and Unmardana. Acharya Vagbhata in Ashtanga Hridaya mentioned the Chikitsopakrama of Sandhivata while explaining the Chikitsa of Snayugata Vata. He advised Snehana, Daha and Upanaha for treating Snayu, Sandhi and Shiragata Vayu. In Ashtanga Sangraha, the use of Abhyanga, Mardana, Swedana, Upanaha, Bandhana and Agnikarma has been mentioned.

Ahara and Vihara: A brief direction regarding regimen to be adopted with reference to Ahara and Vihara in Vata Vyadhi has been given by Acharya Charaka. He also advised to take the Snehana Chatushtaya i.e. Ghee, Taila, Vasa, Majja, Parisheka (Snana), Abhyanga, Basti, Snehana, Swedana, Mansarasa, Dugdhapana, Ahara having dominant Madhur, Amla, LavanRasa. He advised to stay in those places where direct air or wind contact will not be there, one must wear the warm clothes.

Pathya Ahara

No.	Varga	Dravya
1	Annavarga	Godhuma, Masha, Raktashali, Kulattha
2	Dugdhavarga	Goaja Dugdha, Ghrita, Kilatam etc.
3	Phalavarga	Draksha, Badara, Amra, Madhuka
4	Jalavarga	Ushna Jala, Shritashita Jala
5	Madyavarga	Sura, Madira, Surasava, Amalakanjika
6	Mamsavarga	Kukkuta, Mayura, Chataka, Nakra, Matsya, Varaha
7	Mutravarga	Go, Aavika, Ashva, Hasti Mutra
8	Rasavarga	Madhura, Amla, Lavana
9	Shakavarga	Patola, Shigru, Rasona, Jivanti
10	Snehavarga	Taila, Vasa, Majja, Ghrita

Pathya Vihara: Atapa Sevana, Mridushayya, Ushnodaka Snana etc.

Pathya Aushadha:

- Rasna, Sunthi, Bilva, Gokshura, Agnimantha, Rasona, Palandu etc.
- Brimhana, Samshamana, Abhyanga, Mardana, Avagahana, Upanaha, Nasya, Basti, Agnikarma etc.

Apathya Ahara:

No.	Varga	Dravya
1	Annavaarga	Yava, Kodrava, Shyamaka, Nirava, Chanaka, Kalaya etc
2	Dugdhaavarga	Gardabha Dugdha
3	Ikshuvarga	Madhu
4	Jalavarga	Nadi Samudra, Tadagasya jalam, Shita Jala, Dushita Jala etc
5	Madyavarga	Navamadhya, Atimadyapana
6	Mamsavarga	Kapota, Paravata, Kulinga, Shuka, Shushka Mamsa etc.
7	Mutravarga	Ajamutram
8	Phalavarga	Jambu, Kramuka, Kasheruka, Lavali, Parpataki Phala etc.
9	Rasavarga	Katu, Tikta, Kashaya Rasa
10	Shakavarga	Kumuda, Kamalanala, Palakya, Udumbara etc

Apathya Vihara: Chinta, Jagarana, Vega Sandharana, Shrama, Anashana, Vyavaya, Vyayama, Pravata, Chankramana, Kathina Shayya, Yana Gamana etc.

Apathya Aushadha: Vamana and Raktamokshana.

DISCUSSION

Osteoarthritis is a multi-factorial, non-inflammatory degenerative joint disorder which is at par to Sandhivata in respect to etiology, pathology and clinical features. osteoarthritis does not cause any immediate mortality but it is one of the major causes of disabilities of the people affecting their day to day activity. According to Ayurveda Sandhivata is Kashtasadhya because Sandhivata develops in Madhyama Rogamarga. Further, Vatavyadhi occurring due to vitiation of Asthi and Majja are difficult to cure.

Acharya Charaka had described two basic words in relation to Chikitsa of Vata Vyadhi. They are as follows - a) Nirupstambhit Vayu and b) Avritta Vayu. Acharya Chakrapani has explained Nirupastambhit Vayu as Anavritta Vayu.

Chikitsa of Nirupastambhit Vayu - Acharya Charaka and Vagbhata have mentioned to administer Snehana and Swedana to the patients suffering from Vata Vyadhi.

Role of Snehana: Acharya Charaka has stated to use Sneha Chikitsa. The patients, having Nirupastambhit Vayu, should be subjected for Sneha Chikitsa with the help of Ghrita, Vasa, Taila and Majja. By observing Samyak Sneha Lakshana, patient should be once more explored for Sneha Chikitsa with the help of Paya. By virtue of Sneha, Vishyandana, Mardava and Kledakaraka properties of Sneha Dravya, alleviation of Vayu might be achieved. Thus, any of the above mentioned Sneha Dravya produces Mriduta in the body and Malasanga is also over comes. Sneha Dravya also has Drava, Sukshma, Sara, Snigdha, Pichchila, Guru, Manda and Mridu properties. By virtue of Sukshma, Drava and Sara properties, it reaches to the Sukshma Srotas. Thus Sneha, by virtue of its above-mentioned properties, alleviates Vayu in Vata Vyadhi. It also nourishes to the Shushka Dhatu immediately and increases, Bala and Agnibala.

Role of Swedana: Acharya Charaka has mentioned that after observing Samyak, Snigdha Lakshana, Swedana should be administered. He specifically mentioned to use 'Sneha Sweda'. For that Nadi Sweda, Prastar Sweda, Sankara Sweda or other different types of Sweda may be used. Thus, patients should be subjected to Snehana and Swedana therapy. By administering Snehana and Swedana, Stambha produced by vitiated Vayu may be relieved. Not only is that but other symptoms such as Harsha, Toda, Ruka, Shotha and Graha also relieved. Sneha is helpful to nourish the Shushka Dhatu. It increases the Bala and Agnibala; while Swedana is helpful to alleviate vitiated Vayu immediately. Any Swedana Dravya alleviates Stambha, Gaurava and Sheetata. It must produce Sweda. This function might be achieved with the help of properties of Swedana Dravya. These properties are Ushna, Tikshna, Sara, Sukshma, Drava, Sthira etc.

Role of Virechana: Acharya Charaka has stressed to administer Snehana and Swedana to the patients of Vata Vyadhi having Nirupstambhit Vayu. After administration of Snehana and Swedana, Vayu is going to be alleviated. If by means, Vayu is not alleviated, Mridu and Sneha Virechan is indicated by Acharya Charaka. For that, different Virechan drugs have been mentioned. Basically, Virechana is the best treatment for Pitta Dosh. However, Virechana in Vata Vyadhi removes the waste metabolic product particularly Purisha and Anulomana of Vayu might be achieved by the use of Virechana. Diet which dominantly has the properties of Snigdha, Amla and Lavana Guna should be advised to enhance the action of Virechana. Virechana has action on Vata Dosh, specifically in the Pakvashaya. Thus, Virechana not only acts on Pitta Dosh but also act on Vata Dosh. This action may be performed by virtue of Anulomana of Vayu. Snigdha property of the Virechana drug along with Amla and Lavana Rasa may be helpful for Anulomana.

Role of Basti: Use of Basti has been indicated in Vata Vyadhi in connection with different context. Acharya Charaka particularly indicated the use of Niruha Basti in the patient who are Durbala. Niruha should be given to the patients in whom Virechana is contraindicated. The use of Anuvasana is also indicated. For that, different Sneha, such as Grita, Taila and Majja have been mentioned by Acharya Charaka. Niruha Basti have the property to remove Purisha, Kapha, Pitta and Vayu. By removing waste metabolic product through the anus, it alleviates Vayu. Anuvasana Basti has the property to alleviate Vayu. The drugs in Anuvasana Basti have Sneha, Guru and Ushna property. With the help of Sneha property, Ruksha and Laghu Guna of Vayu might be controlled, while Guru and Ushna are in a position to control Sheetata of Vayu. Thus, alleviation of Vayu is possible. Importance of Basti has been pin pointed by Acharya Charaka. Basti is administered in the Pakvashaya which is again the main site of Vayu where from all types of functions of Vayu are controlled. Basti is responsible to remove vitiated Vata Dosha from Pakvashaya and disease is controlled. This has been explained by citing the example of plant of which root has been cut off so that whole plant will be destructed. In the same manner Vata Vyadhi can be controlled by administering Basti. In the same manner importance of Anuvasana have also been explained.

Avarana Chikitsa: The concept of Chikitsa for the vitiated Vayu by means of Avarana, has been separately mentioned. In general, Chikitsa of Pittavritta Vayu and Kaphavritta Vayu have been described.

In case of Pittavritta Vayu, Sheeta and Ushna Chikitsa should be adopted alternately. Ghrita and Jivaniya drugs should be given. Yapan Basti, Kshira Basti, Virechana and Kshirapana have been indicated. In case of Kaphavritta Vayu, Yava Anna, Mausara Rasa of Jangal and Mriga, Tikshna Sweda, Niruha Basti, Vaman and Virechana have been indicated. Jirna Ghrita, Tila Taila, Sarshapa Taila are beneficial in it. In case of mixed Avritattva Vayu i.e. Kapha Pitta Vritta Vayu, treatment for Pitta should be done firstly.

Role of Rasayan: The use of Rasayan drugs such as Shuddha Guggulu and Shuddha Shilajeet in Vata Vyadhi has been indicated by Acharya Charaka. Abhaya Amalaki Rasayan has also been indicated in Vata Vyadhi. Dalhana also has described the use of Naimitika Rasayan.

Role of Naimitika Rasayan on VataVyadhi : Acharya Dalhan has expressed his views that Naimitika Rasayan should be given to the patients suffering from diseases. Thus, administration of Rasayan drugs in diseases such as Vata Vyadhi can be taken. By implication, Sandhivata, one of the chronic disorders amongst Vata Vyadhi, Naimitika Rasayan may be helpful in it. Naimitika Rasayan drugs might be controlling the vitiated Dosha in the Sandhivata and might have action on Dhatu also. Thus, by alleviating Vayu, some particular Rasayan drugs might be helpful in Sandhivata.

Use of Nasya and Dhumapan: After Sanshodhan Karma, when Jatharagni gets increased again, the patient should be again subjected to Snehana and Swedana. Patient must be provided diet having dominant Madhur, Amla, Lavana Rasa. After that NavanNasya, Dhumapan should be administered. It is helpful in VataVyadhi and controls the vitiation of Vayu.

Use of Upanaha: It is one of the four types of Swedaexplained by Acharya Sushruta. Swedana is a procedure which relieves stiffness, heaviness, cold and induces sweat. Acharya Charaka advised to apply Upanaha of crushed Asthirahit boiled Mansa mixed with Ghee, Taila and Kanji. This luke warmed bolous should be applied on the affected part by Vata Roga. After applying the paste, the joint is covered with leaves and then it is bandaged with cotton or leather. The duration of bandage is about 12 hours. Apart from this, other drugs such as Nagarmotha, Tila etc can also be used to medicate the Sneha to be used for Upanaha, is also mentioned by Acharya Charaka.

Use of Avagahan and Parishechan: The Kwath of leaves of Vatanashak Herbs, medicated milk by Vatanashak Dravya or such medicated Vatahar Taila should be used for Avagahana therapy in patients suffering from Vata Vyadhi. One can also do the therapy of Parishechan in the patients of Vata Roga. Kwath of Vatahar Aushadhi Yog and Taila can also be used for Parishechan.

Role of MajjaSneha: Acharya Charaka stated that the Majja extracted from the bones of Gramya, Anupa and Audak animals is medicated with decoction of Dashmula or by any Vatahar dravya and can be used for Nasya, Abhyanga, Pana and Anuvasana Basti. It alleviates the Vata Dosha situated in Sira, Parva Asthi and Koshta. This Sneha is considered to be beneficial and promoter of strength in the patients having deficiency of Majja, Shukra and Oja.

Use of Taila and its Role: Taila is considered as the best while treating any of the Vata Roga because of its Vyavayi, Vikasi, Ashukari, Ushna, Guru and Snigdha Guna. It alleviates its opposite properties. If this Taila is medicated by Vatahara Ganadravya, its effect also gets increased and Vata Dosha can be alleviated quickly. Thus, this medicated Taila can inhibit the Vata Vikara situated in minute to minute organs. This type of Taila can be administered by four means as Pana, Abhyanga, Nasya, and through the Anuvasana Basti.

CONCLUSION

It can be concluded that dietetic, behavioural, external, mental, seasonal and other factors play a major role in causation of this disease. Thus, the approach of Ayurveda in this field is essentially preventive, palliative and the medicines can provide better cure for the disease. It is a slow progressive degenerative disorder; most prevalent in elderly patients. Contemporary research is limited to offering detailed, efficient management. Study in Ayurveda, therefore, has apparent potential in this condition.

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