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Review on Lakshan / Rupa (Clinical Features) of Amavata (Rheumatoid Arthritis)

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Abstract:

Amavata as a special disease entity in *Ayurveda* is first mentioned by *Acharya Madhavakar*. *Ama* (biotoxin) and *Vata* (biophysical force or kinetics) are playing an important role in the *samprapti* (pathogenesis) and *lakshan/rupa* (clinical features) of *Amavata*. According to its clinical manifestations and pathogenesis *Amavata* is very closely resemble with the Rheumatoid arthritis. The *lakshan* (clinical features) of *Amavata* is more clearly and specifically described in *Madhavnidana*. *Samanya Lakshana* or general clinical features are *Angamarda* (bodyache or malaise), *Aruchi* (anorexia), *Trishna* (thirst), *Alasya* (laziness/lethargy), *Gaurava* (heaviness of body), *Jwara* (fever), *Apaka* (indigestion), *Angashunata* (oedema of deferent parts of body including joints). *Pratyatma Lakshana* or cardinal clinical features of *Amavataa*(Tenderness over joint).

Key words: Amavata, Rheumatoid arthritis, lakshan/ rupa, clinical features.

Introduction:

Rheumatoid arthritis is a chronic, progressive autoimmune arthropathy and characterized by bilateral symmetrical involvement of joints with some systemic clinical manifestations¹. Acharya Madhavakar mentioned first the Amavataas a special disease entity in Ayurveda and where Ama (biotoxin) and Vata

(biophysical force or kinetics) are taking an important role in the *samprapti* (pathogenesis) of *Amavata*.²*Amavata* is very closely resemble with the Rheumatoid arthritis according to its clinical manifestations and pathogenesis. As per the Ayurvedic concept *Ama* is considered the root cause of the maximum number of diseases. *Ama*and *Vata* play major role in this disease to manifest the *lakshan* (clinical features). The entity *Amavata* and its *lakshan* (clinical features) are available since the period of *Charaka* in different context. The *lakshan* (clinical features) of *Amavata* is more clearly and specifically described in *Madhavnidana*.

Ama:

Faulty metabolism in the level of tissue and cell andfaulty digestive mechanism at the level of G.I.T. i.e. termed as Mandagni (poor digestive capacity). It mainly responsible for the genesis of Ama. The term Ama means unripe and partially digested food that is unwholesome to the body³. It is a product due to defect in digestion and or metabolism and it is directly related with the state of Agni (digestion or metabolism capasity). Hence it is an important causative factor for the pathogenesis of the most of the diseases and predominant cause of Amavata.

Etymology of Ama:

The word *Ama* is derived from the '*Am*' *Dhatu* with the suffix 'A'according to *Vachaspatyam*. It means improper or partially digested matter ⁴. The word *Ama* is derived as combination of '*Am*' *Dhatu* with '*Nich*' *Pratyaya* forms the word *Ama* which means the substance subjected to digestion according *Amarkosha* and it damages or it is harmful to the different of *Srotasa*(channel) is known as *Ama*⁵.

Vata or Vayu:

In living human body Vata or Vayu is the chief functional component and according to its normal or abnormal condition it gives rise to good and bad consequences in the body. All the activities of the living body especially voluntary and involuntary movements are performed under the control of Vatadosha. Vata dosha is another important pathogenic factor for Amavata. In Amavata, mainly sandhishula (joint pain), sandhisotha (joint swelling) and sandhigraha (stiffness of joint) lead to the restricted movements of the multiple joints specially wrist and finger joints and patients become crippled gradually due to vitiation of Vata with Ama. Besides that other functions of Vata are also disturbed in Amavata.

Etymology of Vata or Vayu :

"*Vati Iti Vayu*" sloka means which has got movement, is known as *Vayu* (*Vachaspatyam*, *Shabdakalpadruma*)⁶. The term '*Vata*' is derived from root '*Va Gatigandhanayoh*' which means to move, to enthuse, to make known and become of according to *Amarkosha*, *Shabdastoma Mahanidhi*.⁷ In different classics it is also referred by synonyms like *Anila*, *Marut*, *Pavana* etc.

Rupa/Lakshana(Clinical features) of Amavata(Rheumatoid arthritis):

Madhavakara, Bhavamishra, and thers have described the *Rupa/Lakshana* (Clinical features) of *Amavata*(Rheumatoid arthritis)clearly.⁸ It can be classified under following headings:

I. PratyatmaLakshana (Cardinal Clinical Features):

- (a) *Sandhi Shula*(Joint-pain): The severe joint pain simulating *Vrishchika Damshavata* that means scorpion bite like pain is the most characteristic feature. The most commonly involved joints are the joints of hands, legs, head, ankle, lowback, knee, and hip.⁹
- (b) *Sandhi Shotha*(Joint-swelling): Swelling in to the joint is the result of *Srotorodha*(obstruction in channels) in the joint caused by the accumulation of *Ama* and vitiated *Kapha*.¹⁰

- (c) *Sandhi Stabdhata*(Stiffness of joint): Joint stiffness in *Amavata* patient is caused by the affliction of the joint by Samavata.¹¹
- (d) Sandhi Sparshasahyata(Tenderness over joint): Joint tenderness due to inflammation into joint.

II. SamanyaLakshana (General Clinical Features):

- (a) Angamarda (bodyache or malaise)
- (b) Aruchi (anorexia)
- (c) Trishna (thirst)
- (d) *Alasya* (laziness/lethargy)
- (e) Gaurava (heaviness of body)
- (f) Jwara (fever)
- (g) Apaka (indigestion)
- (h) Angashunata (Oedema of deferent parts of body including joints)

III. DoshanubandhaLakshana (Clinical features according to Dosha predominance) :

- (a) Vatanubandha Ruka (pain)
- (b) Pittanubandha- Daha (burning sensation), Raga (redness of affected joints)
- (c) Kaphanubandha- Stimita (lack of mobility), Guruta (heaviness), Kandu (itching)
- (d) VataPittanubandha- Ruka(pain), Daha (burning sensation), Raga(redness of affected joints)
- (e) VataKaphanubandha Ruka (pain), Stimita (lack of mobility), Guruta (heaviness), Kandu (itching)
- (f) KaphaPittanubandha- Stimita (lack of movility), Guruta (heaviness), Kandu (itching), Daha(burning sensation), Raga(redness of affected joints)
- (g) Sannipataja- Symptoms for all three doshas

IV. PravriddhavasthaLakshana (Clinical features in aggravated condition):

- (a) Agnidaurbalya (lack of digestive capacity)
- (b) Praseka (excessive salivation)
- (c) Aruchi (anorexia)
- (d) Gaurava (heaviness of body)
- (e) Vairasya (improper taste sensation)
- (f) *Ruja* and *shotha* in *Hasta*, *Pada*, *Shiro*, *Gulpha*, *Trika*, *Janu*, *UruSandhi* (pain and swelling in hands, legs, head, ankle, lowback, knee, hip joints)
- (g) Vrishchikadamshavatavedana (scorpion bite like pain)
- (h) Utsahahani (lack of enthusiasm)
- (i) Kukshikathinya (tightness in abdomen)
- (j) Kukshishula (pain in abdomen)
- (k) Vibandha or Vidvibaddhata (constipation)
- (l) Antrakujana(borborygmi)
- (m)*Anaha* (bowel and urine not clear)
- (n) *Chhardi*(vomiting)
- (o) *Hridgraha*(pain in precordial region):
- (p) Jadyata(less physical activity or stiffness of the body or immobility)
- (q) Bhrama(vertigo): It is due to vitiation of vayu, pitta and raja.
- (r) Murchcha (lack of sensory &motor functions):
- (s) Nidra-viparyaya (disturbed sleep):
- (t) Daha(burning sensation) It is due to vitiation of Pitta

(u) *Bahumutrata*(polyuria)

Criteria to Diagnose Rheumatoid Arthritis:

As per American Rheumatism Association (1988) the following criteria has been laid down¹²:

- 1) Morning stiffness
- 2) Arthritis of three or more joints areas
- 3) Arthritis of hand joints
- 4) Symmetrical arthritis
- 5) Rheumatoid nodules
- 6) Rheumatoid factors
- 7) Radiological changes
- a) Here first four criteria should be present for 6 weeks or more.
- b) Diagnosis of Rheumatoid Arthritis is made with four or more criteria.

Discussion:

Amavata has been nomenclature on the basis of two predominant pathological factors i.e. Ama and Vata having their important role in Nidana (etiology), Rupa/Lakshan (clinical features) and Chikitsa (treatment). Digestive mechanism at the level of G.I.T. and metabolism in the tissue and cellular level are hampered due to Mandagni and it is largely responsible for the formation of Ama. Vitiation of Vata is another important causative factor for Amavata. Both Ama and Vata are important responsible factors for manifestation of Rupa/Lakshan (clinical features) of Amavata. According to clinical manifestation and pathogenesis Amavata is more similar to Rheumatoid arthritis. Pratyatma Lakshana or cardinal clinical features of Amavata are Sandhi Shula(Joint-pain), SandhiShotha(Joint-swelling), Sandhi Stabdhata(Stiffness of joint), Sandhi Sparshasahyata(Tenderness over joint). These cardinal features due to affection of joints mainly with Ama and vitiated vatadosha. Samanya Lakshana orgeneral clinical features of Amavata are Angamarda (bodyache Aruchi(anorexia), Trishna (thirst), Alasya (laziness/lethargy), Gaurava (heaviness of body), or malaise). Jwara (fever), Apaka (indigestion), Angashunata (Oedema of deferent parts of body including joints). Angamarda is occurred due to vitiation of rasadhatu and vyanvayu with ama. Aruchi is due to vitiation of bodhakkapha with ama. Trishna is manifested due to udakvahasrotodusti with ama. Alasya is occurred due to aggravation of *tama* and vitiated *kapha* with *ama.Gaurava* is occurred due to vitiation of *kapha*.

Jwara is manifested due to rasadusti with ama.Apaka is due to mandagni and Angashunata is occured due to srotorodha with ama and vimarggaman of vitiated vayu, pitta, rakta and kapha.

According to Doshanubandha (Dosha predominance) Lakshana/Rupa(clinical features) of Amavata are manifested as Vatanubandha, Pittanubandha, Kaphanubandha, Vata Pittanubandha, VataKaphanubandha, Kapha Pittanubandha and Sannipataja. Pravriddhavastha Lakshana (Clinical features in aggravated condition) of Amavata are Agnidaurbalya (lack of digestive capacity), Praseka (excessive salivation), Aruchi (anorexia), Gaurava (heaviness of body), Vairasya (improper taste sensation), Ruja and shotha in Hasta, Pada, Shiro, Gulpha, Trika, Janu, UruSandhi (pain and swelling in hands, legs, head, ankle, lowback, knee, hip joints), Vrishchikadamshavatavedana (scorpion bite like pain), Utsahahani (lack of enthusiasm), Kukshikathinya (tightness in abdomen), Kukshishula (pain in abdomen), Vibandha or Vidvibaddhata (constipation), Antrakujana(borborygmi), Anaha (bowel and urine not clear), Chhardi(vomiting), Hridgraha(pain in precordial region), Jadyata (less physical activity or stiffness of the body or immobility), Bhrama(vertigo), Murchcha (lack of sensory & motor functions), Nidra-viparyaya (disturbed sleep), Daha(burning sensation), Bahumutrata(polyuria). Agnidaurbalya is occurred due to vitiation of bodhakkapha with ama.Gaurava is manifested due to vitiation of kapha with ama.Vairasya is

due to samarasa and vitiated bodhakaKapha with ama.Ruja and Shotha in Hasta, Pada, Shiro, Gulpha, Trika, Janu, UruSandhi is occurred due to vitiation of vayu, kapha and srotorodha with ama. Vrishchikadamshavatavedana is occurred due to presence of ama at the site of pain.Utsahahaniis due to insufficient nutrition of dhatusand decrease of raja.Kukshikathinya is due to vitiated samana and apanavayu along with the ama. Kukshishula is occurred due to srotorodhawithama causes obstruction to normal movement of vitiated samana and apanavayu. Vibandha or Vidvibaddhatais due to vitiation ofapanavaya.Antrakujana is due to movement of vitiated vayu in to abdomen. Chhardiis due to continuous formation of dosha leading to excitation of Amashaya with vitiated vayu. Hridgrahais occurred due to rasavahasrotodushti and vitiation of vayu and avalambakakapha. Jadyata is due to ama and vitiation of vayu and kapha.Dahais due to vitiation of indriyas are disturbed. Nidra-viparyaya is occurred due to vitiation of vayu and kapha.Dahais due to vitiation of Pitta. Bahumutrataoccurs to excrete excess kledafrom the body and kleda (waste material) is increased in to body in Amavata.

Conclusion:

Ama (biotoxin) and *Vata* (biophysical force or kinetics) both are important causative factors for*samprapti* (pathogenesis) and *lakshan/rupa* (clinical features) of *Amavata*(Rheumatoid arthritis).On the basis of clinical features and pathogenesis *Amavata*is more similar to Rheumatoid arthritis. *Pratyatma Lakshana* or cardinal clinical features of *Amavata*are *Sandhi Shula*(Joint-pain), *SandhiShotha*(Joint-swelling), *SandhiStabdhata*(Stiffness of joint), *SandhiSparshasahyata*(Tenderness over joint).

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