

## CLINICAL EFFICACY OF JANU BASTI IN THE MANAGEMENT OF JANU SANDHIGATA VATA: A CASE STUDY

<sup>1</sup>Dr. Ganashree S., <sup>2</sup>Dr. Tukaram Lamani and <sup>3</sup>Dr. Priyanka Hebballi

<sup>1</sup>Assistant Professor, Department of Kayachikitsa, Shri S.B. Siddalinga Shivacharya Swamiji Ayurvedic Medical College & Hospital, Mundaragi, Karnataka, India.

<sup>2</sup>Assistant Professor, Department of Rasashastra and Bhaishajya Kalpana, Shri S.B. Siddalinga Shivacharya Swamiji Ayurvedic Medical College & Hospital, Mundaragi, Karnataka, India.

<sup>3</sup>Assistant Professor, Department of Kayachikitsa, Shri S.B. Siddalinga Shivacharya Swamiji Ayurvedic Medical College & Hospital, Mundaragi, Karnataka, India.

*Article Received: 11 May 2025 // Article Revised: 31 May 2025 // Article Accepted: 23 June 2025*

**\*Corresponding Author: Dr. Ganashree S.**

Assistant Professor Department of Kayachikitsa, Shri S.B. Siddalinga Shivacharya Swamiji Ayurvedic Medical College & Hospital, Mundaragi, Karnataka, India. DOI: <https://doi.org/10.5281/zenodo.15774456>

**How to cite this Article:** Dr. Ganashree S., Dr. Tukaram Lamani and Dr. Priyanka Hebballi (2025) CLINICAL EFFICACY OF JANU BASTI IN THE MANAGEMENT OF JANU SANDHIGATA VATA: A CASE STUDY. World Journal of Pharmaceutical Science and Research, 4(3), 1204-1209. <https://doi.org/10.5281/zenodo.15774456>



Copyright © 2025 Dr. Ganashree S. | World Journal of Pharmaceutical Science and Research.

This work is licensed under creative Commons Attribution-NonCommercial 4.0 International license (CC BY-NC 4.0)

### ABSTRACT

Sandhigata vata is one among the vatavyadhis. But it is not included in 80 types of nanatmaja vata vikaras. Though sandhigata cripples a large number of people it rarely kills any person. Because of the tendency to cripple it stands at the head of the list of chronic diseases.<sup>[1]</sup> As per a study analysing data from 1990 to 2019 reported that the number of individuals affected by OA which closely resembles to sandhigata vata in India increased from approximately 23.46 million in 1990 to 62.35 in 2019.<sup>[2]</sup> Specifically, 11% of adults with knee OA require help with personal care, and 14% need assistance with routine needs.<sup>[3]</sup> Janu basti is effective in Sandhigata Vata (knee osteoarthritis) because it directly addresses the root cause of the condition – the imbalance of Vata dosha. Janu basti is effective in Sandhigata Vata (knee osteoarthritis) because it directly addresses the root cause of the condition – the imbalance of Vata dosha. Along with local procedures, internal medication with Dashamoolarishta was administered to reduce systemic Vata and inflammation.

**KEYWORDS:** Janu basti, sandhigata vata, OA.

## INTRODUCTION

Sandhigata vata is one among the vatavyadhis. But it is not included in 80 types of nanathmaja vata vikaras.

The term sandhigata vata has its origin from three words,

1. Sandhi
2. Gata
3. Vata

1. **Sandhi:** According to vachaspathyam, the word sandhi is derived from the root “Dha” a prefix ‘sam’ and a suffix of ‘ki’. “sam dadhati iti sandhi” which means the joint or union.
2. **Gata:** It is derived from the root ‘Gam’ which means gone to, arrived at, situated in, directed to etc. so, from the above word two meanings can be derived ,one in relation with the movement and the other is related with the site.
3. **Vata:** The term vata is originated from “va gati gandhanayoh” with a suffix of ‘ktan’.it means to blow, to go, to move, to smell, to strike etc. thus sandhigata vata means ,provoked vata located in sandhi.

Epidemiology; As per a study analysing data from 1990 to 2019 reported that the number of individuals affected by OA which closely resembles to sandhigata vata in india increased from approximately 23.46 million in 1990 to 62.35 in 2019.

### Line of treatment

कुर्यात् सन्धिगते वाते दाहस्वेदोपनाहकान्।

शूलशोथहरान् सिद्धान् तैलांश्च परिमार्जनैः॥ yogaratnakara.<sup>[4]</sup>

### Janu basti

Janu Basti mainly comprises 2 Sanskrit words; where 'Janu' refers to 'Knee joint' and 'Basti' signifies 'Holding', thus describing the process in which warm, medicated oil is poured and pooled for a selective period in a pocket around the knee joint using a dough made of wet black gram flour.

Janu basti is effective in Sandhigata Vata (knee osteoarthritis) because it directly addresses the root cause of the condition – the imbalance of Vata dosha – by providing localized snehana (lubrication) and swedana (sudation) to the affected knee joint. This helps to reduce pain, stiffness, swelling, and improve joint mobility, all common symptoms of knee osteoarthritis.

Janu Basti was selected based on its site-specific action, ability to directly pacify aggravated Vata in the knee joint, and its compatibility with the patient's Bala and condition. Janu basti is effective in Sandhigata Vata (knee osteoarthritis) because it directly addresses the root cause of the condition – the imbalance of Vata dosha.

## MATERIALS AND METHODS

### Study Design

A single-case interventional clinical study was conducted on a diagnosed patient of Janu Shula (Sandhigata Vata), treated in the Kayachikitsa department of S.B. Siddalinga Shivacharya Swamiji Ayurvedic Medical College & Hospital, Mundaragi.

**Patient Information**

Name: Shantamma

Age: 43 years

Sex: Female

OPD No.: 2511562

Address: Belagatti, Karnataka

Occupation: farmer

Diagnosis: Janu Sandhigata Vata – OA of the right knee joint.

**Chief Complaints**

Pain in the right knee joint

Swelling around the right knee joint since 2 months

Associated complaints-difficulty in movements of the right knee for flexion and extension

**On examination**

Positive signs of tenderness and crepitus

Feeling of warmth in right knee joint

Vital signs: BP – 118/78 mmHg, Pulse – 78/min

**Past history**- not a known case of Diabetes and hypertension

**Materials Used**

1. Kottamchukkadi Taila – for external application
2. Dashamoolarishta – 25 ml twice daily after food with equal water
3. Dhanwantara Taila – used for Janu Basti
4. Hot fomentation – pps
5. Ice pack -30 min before therapy

**Intervention (Procedure)**

- Janu Basti was administered using dhanwantara Taila for 7 consecutive days.
- The oil was retained over the knee joint for 30 minutes using a prepared dough ring (made with black gram flour).
- Prior to Janu Basti, local massage was done using Kottamchukkadi Taila to stimulate blood flow.
- After the procedure, patra pinda sweda (steam) or hot fomentation was applied for better absorption and Vatahara effect.
- Along with local procedures, internal medication with Dashamoolarishta was administered to reduce systemic Vata and inflammation.

**OBSERVATION AND RESULTS**

The patient underwent Janu Basti with dhanwantara taila for 7 consecutive days along with internal administration of Dashamoolarishta and local application of Kottamchukkadi Taila. The observations noted during and after the treatment are as follows:

**Day 1 to 3**

Mild reduction in pain and stiffness. Swelling persisted, but the patient reported slight ease in joint movement.

**Day 4 to 5**

Noticeable reduction in joint swelling. Pain during movement reduced considerably. The patient began walking with less discomfort.

**Day 6 to 7**

Significant improvement observed in mobility. The patient reported relief from pain, could walk more comfortably, and perform daily activities that were previously restricted due to knee pain.

**Post-Treatment Outcome**

- **Pain:** Reduced markedly
- **Swelling:** Substantially reduced
- **Tenderness:** Mild to nil
- **Crepitus:** Still present but decreased
- **Range of Motion:** Improved
- **Daily Activities:** Patient was able to walk and perform routine household work with ease.

Before treatment



During treatment



After treatment



## DISCUSSION

Sandhigata Vata, one among the Vatavyadhi, presents clinically with symptoms like Shoola (pain), Shotha (swelling), Atopa (crepitus), and Stambha (stiffness) in the affected joints. According to Ayurvedic classics, Snehana, Swedana, and Basti are the prime modalities to pacify vitiated Vata and relieve symptoms.

In this case, the patient presented with classical symptoms of Sandhigata Vata in the Janu Sandhi (knee joint). The selection of Janu Basti with Dhanwantara Taila was based on its properties of Vatahara, Balya, and Shoola-hara. Dhanwantara Taila is well-known for its effectiveness in musculoskeletal and neuromuscular disorders due to its Snigdha, Ushna and Vatashamaka qualities.

Patra Pinda Sweda was selected as a supportive therapy due to its anti-inflammatory and Vata-kapha pacifying action, helping reduce localized swelling and stiffness. It enhances circulation, relieves muscle spasm, and supports better absorption of medicated oil.

The internal use of Dashamoolarishta played a supportive role in alleviating systemic Vata imbalance and acted as an anti-inflammatory agent.

The results observed post 7 days of treatment — marked reduction in swelling, pain, improved joint movement and ability to walk without support — strongly support the classical Ayurvedic approach in managing Janu Shula or Sandhigata Vata.

## CONCLUSION

The combined approach of Janu Basti with Dhanwantara Taila, Patra Pinda Sweda, and appropriate internal medication provided significant relief from the symptoms of Janu Shula (Sandhigata Vata) in this patient. This treatment not only reduced pain and swelling but also improved the patient's functional mobility and quality of life within 7 days.

Thus, Ayurvedic interventions, when applied with proper clinical judgment, can effectively manage early-stage osteoarthritic changes in joints and improve patient outcomes without the need for modern pharmacological

interventions. Further studies with a larger sample size and longer follow-up are suggested to substantiate the efficacy of this approach.

#### REFERENCES

1. Mhatre AH, Hande S, Joglekar N. A Text Book of Kayachikitsa Part II. Mumbai: Susharma Book Depot, 2018; 7(302).
2. Singh A, Das S, Chopra A, Danda D, Paul BJ, March L, et al. burden of osteoarthritis in india and its states ,1990-2019;findings from the globel burden of diseases study 2019.osteoarthritis cartilage, 2022 aug; 30(8): 1070-8.
3. Cieza A, Causey K, Kamenov K, Hanson SW, Chatterji S, Vos T. Global estimates of the need for rehabilitation based on the Global Burden of Disease study 2019: a systematic analysis for the Global Burden of Disease Study 2019. Lancet, 2020 Dec 19; 396(10267): 2006–17.
4. Yogaratnākara. Yogaratnākara with Vidyotini Hindi Commentary. 1st ed. Vaidya Lakshmipati Shastri, editor. Varanasi: Chaukhambha Prakashan; 2014. Chikitsa Sthana; Sandhigata Vata Chikitsa: p. 321.shloka no 4.