

PAIN MANAGEMENT IN OSTEOARTHRITIS (*SANDHIGATA VATA*) THROUGH AYURVEDIC TREATMENT: A SINGLE CASE STUDY

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ABSTRACT

Osteoarthritis (OA) is a common degenerative joint disorder characterized by pain, stiffness, and restricted movement, significantly affecting quality of life. In Ayurveda, osteoarthritis closely resembles *Sandhigata Vata*, a condition caused by vitiation of *Vata Dosha* leading to degeneration of *Asthi* and *Sandhi*. Modern management mainly focuses on analgesics and anti-inflammatory drugs, which provide symptomatic relief but are associated with long-term adverse effects. Ayurveda offers a holistic approach emphasizing *Vata Shamana*, *Brimhana*, and *Vedana Sthapana*. The present case study evaluates the effectiveness of Ayurvedic management using *Mahayograj Guggulu*, *Agnitundi Vati*, *Arogyavardhani Vati*, and external application of *Mahanarayan Taila* in a patient suffering from osteoarthritis. Significant improvement was observed in pain, stiffness, and functional mobility, suggesting the potential role of Ayurvedic therapy in osteoarthritis pain management.

KEYWORDS: Osteoarthritis, Sandhigata Vata, Ayurvedic management, Pain management.

INTRODUCTION

Osteoarthritis is a chronic degenerative joint disease affecting articular cartilage, subchondral bone, and synovial membrane. It commonly involves weight-bearing joints such as the knee, hip, and spine and is one of the leading causes of disability among the elderly.^[1,2] According to modern medicine, osteoarthritis is associated with aging, mechanical stress, obesity, and metabolic factors.^[3,4]

In Ayurveda, osteoarthritis can be correlated with *Sandhigata Vata*, described under *Vatavyadhi*. Classical Ayurvedic texts describe symptoms such as *Sandhi Shoola* (joint pain), *Shotha* (swelling), *Stabdghata* (stiffness), *Vatapurna Druti*

Sparsha, and restricted joint movements.^[5] The pathology involves aggravation of *Vata Dosha* along with *Dhatukshaya*, particularly of *Asthi Dhatu*.^[6]

Ayurvedic treatment principles include *Vata Shamana*, *Agni Deepana*, *Ama Pachana*, and the use of *Sneha* both internally and externally.^[7,8] The present study highlights the effectiveness of selected Ayurvedic formulations in the management of osteoarthritis pain.

CASE PRESENTATION

A 58-year-old female patient attended the outpatient department with complaints of pain in both knee joints for the past four years. The pain was gradual in onset and aggravated during walking, climbing stairs, and other weight-bearing activities, and was partially relieved by rest. The patient also complained of morning stiffness lasting for 20–30 minutes and difficulty in squatting. There was no history of trauma or major systemic illness. The patient had previously been treated with analgesics intermittently, which provided temporary relief.

On general examination, vital parameters were within normal limits. Appetite was irregular, and bowel habits revealed mild constipation. Local examination of both knee joints showed tenderness, mild swelling, crepitus on movement, and reduced range of motion. Radiological examination of the knee joints revealed joint space narrowing with osteophyte formation, suggestive of osteoarthritis. Based on clinical features and Ayurvedic principles, the condition was diagnosed as *Sandhigata Vata*.

Ayurvedic Diagnosis

The condition was diagnosed as *Sandhigata Vata* with *Vata Pradhana Dosha* involvement affecting *Asthi* and *Majja Dhatu*, along with vitiation of *Asthivaha Srotas*.

Treatment Protocol

Internal Medications

Mahayograj Guggulu was administered in a dose of two tablets twice daily after food with lukewarm water. It is known for its *Vata Shamana*, *Shothahara*, and *Vedana Sthapana* properties and is widely indicated in *Vatavyadhi* and joint disorders.^[9]

Agnitundi Vati was given two tablet twice daily after food to enhance *Jatharagni*, promote *Ama Pachana*, and correct *Vata-Kapha* imbalance.^[10]

Arogyavardhani Vati was prescribed in a dose of two tablets twice daily after food for its role in improving metabolism, correcting *Agni*, and supporting tissue nourishment.^[11]

External Therapy

External application of *Mahanarayan Taila* was performed over both knee joints once daily, followed by mild *Swedana*. This therapy helps pacify localized *Vata*, reduce stiffness, and alleviate pain.^[12]

Duration of Treatment

The total duration of treatment was 45 days.

Assessment Criteria

The patient was assessed before and after treatment based on pain intensity using the Visual Analogue Scale (VAS), degree of joint stiffness, range of motion, and difficulty in walking and performing daily activities.

RESULTS

After 45 days of treatment, significant improvement was observed. Pain intensity reduced markedly, with the VAS score decreasing from 8 to 3. Morning stiffness was significantly reduced, joint mobility improved, and the patient was able to walk longer distances without discomfort. No adverse drug reactions were observed during the treatment period.

DISCUSSION

Sandhigata Vata is primarily caused by *Vata Prakopa* and *Dhatukshaya*, leading to degeneration of joint structures.^[6] *Mahayograj Guggulu* acts as a potent *Vatashamaka* and *Rasayana* for musculoskeletal disorders and helps reduce pain and inflammation.^[9] *Agnitundi Vati* improves *Jatharagni* and prevents *Ama* formation, which plays a crucial role in the pathogenesis of chronic joint disorders.^[10] *Arogyavardhani Vati* supports metabolic balance and enhances tissue nourishment.^[11]

External application of *Mahanarayan Taila* provides *Sneha* to affected joints, reduces stiffness, and alleviates pain by pacifying localized *Vata Dosha*.^[12] The combined internal and external Ayurvedic approach addresses both the root cause and clinical manifestations of osteoarthritis.

CONCLUSION

This single case study demonstrates that Ayurvedic management using *Mahayograj Guggulu*, *Agnitundi Vati*, *Arogyavardhani Vati*, and *Mahanarayan Taila* is effective in reducing pain and improving functional capacity in osteoarthritis (*Sandhigata Vata*). Ayurveda offers a safe and holistic alternative for long-term pain management in osteoarthritis. Further clinical studies with larger sample sizes are recommended to substantiate these findings.

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