"A Comparative Study On Ruksha And Snigdha Virechana In The Management Of Amavata (Rheumatoid Arthritis)"

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Abstract:

Amavata (Rheumatoid arthritis)is one of the most common Rheumatological problem and is most frequent joint disease with prevalence approximately 0.8% of the population (range 0.3to 2.1%). Women are affected approximately three times more than men in India. This is the most common cause of locomotor disability in the elderly. On the other hand Ayurveda has realized this problem in ancient era and has enumerated various treatment modalities both internal and external, out of which one of the most important one remains Virechana Karma. 30 patients of Amavata (Rheumatoid arthritis) were randomly selected from the IPD of Panchakarma, SDM College of Ayurveda and Hospital, Hassan. These patients were divided in to two groups, i.e. in Group A the patients were subjected to Snigdha Virechanawith Pachana, Snehana, Vishrama Kala, Virechanwith Eranda Tailaand Samsarjana Krama was advised whereas and in Group B the patients received Pachana, Snehana, Vishrama Kala and Samsarjana Krama same as mentioned in the Group A, whereas for Virechana Trivrit Choorna 30gm along with Ushna Jala was given. In Snigdha Virechanagroup i.e. in Group A 66.6% of the patients had good improvement, 36.6% with moderate improvement and 6.6% with mild improvement. None of the patients was found unchanged. In Ruksa Virechana group i.e. in Group B 76.6% of the patients had moderate improvement and 3.3% with mild improvement. It is concluded that on comparing the effect of therapy, following conclusion may be drawn: Ruksha Virechana Group has provided better relief (percentage wise) than Snigdha Virechana Group in most of the signs and symptoms of the disease.

Keywords:

Virechana, Amavata, Snigdha Virechana, Ruksa Virechana, Ayurveda, Panchakarma, Rheumatic Arthritis.

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