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POST VIRAL ARTHRALGIA IN AYURVEDA: A CLINICAL STUDY

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ABSTRACT

Acharya Charaka (1500BC - 400AD) the great physician of Ayurveda has mentioned epidemic conditions under the head 'Janapadodhwamsa" (Ch.S.Vimana Sthana-2) and dedicated a separate chapter on epidemic disorders named as Janapadodhwamsa Vimanam. The symptoms of Vata Pitta Jvara and Vata Kapha Jvara are similar to the symptoms of Chikungunya fever to some extent. The description of Sandhigata Sannipata Jvara mentioned by Bhava Prakkasha (1550AD) can be equated with Chikungunya fever. The principle of Ayurveda in such type of infections is that of Immunomodulation. In addition to symptomatic relief the immunomodulatory drugs help to reverse the inflammatory process as well as prevent the tissue damage. Also this autoimmunity can be correlated to the concept of AmaRasa in Ayurveda, so Deepana, pachana, agnivardhaka chikitsa is the basis of treatment in Ayurveda. Combination of Shothahara, shoolahara, agnivardhaka, and immunomodulatory drugs are effective in post viral Arthralgia as per the principles of Ayurveda.

KEY WORDS : Chickengunya fever, arthralgia, sandhigatasannipatajwara, immune-modulatory, rasayana.

INTRODUCTION¹

Chickungunya is a viral disease transmitted to humans by the bite of infected mosquitoes. The disease was first observed during the outbreak in 1952 on the Markonde Plateau, along the border between Tanganyika and Mozambique. The term " Chickungunya " which means " to become contorted" or more specifically to say " which bends up " which reflects the posture of patient suffering from the arthritic symptoms. This disease is almost always self-limited and rarely fatal.It usually starts with sudden onset of fever, chills, headache , nausea , vomiting , joint pain with or without swelling and rash which is very similar to that of Dengue fever . Unlike dengue there is no haemorrhagic or shock syndrome.

ETIOLOGY²

Chickengunya virus (CHIKV) belongs to the family Togaviridae, is member of geus Alphavirus. The vector is same as that of Dengue and yellow fever i.e Aedes mosquito.

CLINICAL FEATURES³

The incubation period of chickengunya is 2-12 days . After an incubation period there is sudden onset of fever (> 40°C) , chills , arthralgia ,rash , nausea , vomiting , headache , conjunctival suffusion , mild photophobia . The joints of the extremities are swollen and tender. Some patients may have incapacitating arthralgia , which may last for weeks to months.

Acute Chickengunya lasts for few days, but some patients may complaint prolonged fatigue which lasts for several weeks. In the recent out-break in Andhra Pradesh, the fever and crippling joint pain is the prevalent complaint. Fever lasted for 2 days but joint pains, intense headache, insomnia and an extreme degree of prostrations lasts for variable period, usually for 5-7 days.

DIAGNOSIS⁴

Diagnosis of Chikungunya is mainly made when the epidemic disease occurs with the of fever, rash and rheumatic triad manifestations. Viraemia present in most of the patients during the first 48 hours and in some cases it may be detected after 4 days also. Virus specific IgM antigens are readily detected by capture ELISA in patients recovering from Chikungunya fever and they persist in excess for 6 months. Haemagglutination inhibition (HI) antibodies appear with cessation of viremia. All the patients will be positive by day 5-7 of illness. IgM capture ELISA is the main diagnostic tool to distinguish from Chikungunya.

TREATMENT⁵

There is no specific management for Chikungunya in modern system of medicine. Vaccine is under investigation and not available. Symptomatic treatment is recommended. The line of management is usually rest, Intravenous fluids, anti-pyretic, anti-inflammatory, analgesic agents. Aspirin should be avoided.

Acharya Charaka (1500BC - 400AD) the great physician of Ayurveda has mentioned epidemic conditions under the head 'Janapadodhwamsa" (Ch.S.Vimana Sthana-2) and dedicated a separate chapter on epidemic disorders named as Janapadodhwamsa Vimanam. The factors are- Jala (water), Vayu (air), Desha (place) and Kala (season), vitiation of these factors are considered to be responsible for the production of communicable diseases which can be well correlated with modern science⁶.

Though there is no direct reference of Chikungunya, but it can be equated with the condition when Jvara is associated with arthritis. In Ayurveda literature, we can find such references where fever is associated with arthralgia/ arthritis. The symptoms of Vata Pitta Jvara and Vata Kapha Jvara are similar to the symptoms of Chikungunya fever to some extent⁷. The description of Sandhigata Sannipata Jvara mentioned by Bhava Prakkasha (1550AD) can be equated with Chikungunya fever. Sandhigata Sannipata Jvara is characterised by fever, joint pains and swelling, sleeplessness, cough etc⁸. Bhela Samhita (Sutra Sthana, 13) has mentioned Sharada jvara – a seasonal fever that occurs preceeding the rainy season, usually attributable to viral fevers. The overall literary survey on Krimi reveals that wherever the symptomatology consists of jvara, atisara, puya, sotha, sula etc., the presence of invasion by krimis (microbes), should be considered and the line of treatment should be planned accordingly.

The more mercyfull aspact of Chickengunya is its post fever severe arthralgia. This is due to the response of body's own immune system to the body's own cells i.e self antigen leading to Autoimmunity. Wherever these autoimmune complexes deposit leading to inflammatory changes.

The principle of *Ayurveda* in such type of infections is that of Immunomodulation. In addition to symptomatic relief the immunomodulatory drugs help to reverse the inflammatory process as well as prevent the tissue damage. Also this autoimmunity can be correlated to the concept of *AmaRasa* in *Ayurveda*, so *Deepana*, *pachana*, *agnivardhaka chikitsa* is the basis of treatment in Ayurveda. Combination of *Shothahara*, *shoolahara*, *agnivardhaka*,

and immunomodulatory drugs are effective in post viral Arthralgia as per the principles of *Ayurveda*.

MATERIALS AND METHODS Case report

A female patient aged about 44yrs with OPD No: 783 visited OPD of Kayachikitsa, Chaudhary Brahma Prakash Ayurveda Charaka Sansthaan presenting with chief complaints of multiple joints pain along with swelling of joints since 8 months.

History of present illness

8 months before, the patient had an Acute sudden onset of fever $(> 40^{\circ}C)$, chills, pain in joints, nausea, vomiting, headache. At that time she went to some govt. hospital was diagnosed and as a case of Chickengunya fever. She took the allopathic treatment from there and the fever went off after 15 days. But joints pain did not subsided. There was pain and swelling in both the knee joints . Gradually pain and swelling developed in B/L wrists joints, bilateral elbow joints, finger joints, B/L ankle joints ,toes. The pain was so severe that it was associated with swelling and felt difficulty while initiating any action and aggravated on exposure to cold. The symptoms subsided by application of heat. She took allopathic treatment from many doctors but situation became worsened day by day. She felt comfortable after taking Ayurveda medicines from pvt Ayurveda practitioner. Hence she came to Chaudhary Brahma Prakash Ayurveda Charaka Sansthaan hospital for better management.

History of past illness

H/o chikunguniya 8 months back.

Treatment history

Took treatment for chikunguniya 8 months back.

H/o taken pain killers and steroids for joints pain complaints.

Personal history

Name :xyz

Age : 44 yrs

Pulse: 68/min Sex : Female

Temperature: 98F

Marital status: Married

Respiratory rate: 18/min

Occupation: House wife

Heart rate: 70/min

BP: 124/78mmHg

Appetite: poor

Bowel: 1- 2times/day

Bladder: 3-4 times/day, 1-2 times at night

Sleep: sound

Allergy: dust

Systemic examination

Musculoskeletal system affected

Inspection: Swelling present on B/L knee joints, B/L elbow and wrist joints.

Palpation: Tenderness present on B/L wrist, knee, ankle and Elbow joints.

The range of Movements – Painful movements of B/L knee joints, B/L wrist joints, B/L elbow, metatarsophalangeal joints, ankle joints, and Metatarsophalangeal joints joint

Investigations

Hb -12.9 g%

S. Uric acid - 3.8 mg/dl TLC – 6300 cells/mm3 RA - 5.4 IU/ml (Normal: <18)

DLC -N- 53, L- 39, E- 6, M-2, B-0

ASO- 18 IU/ml (Normal: <200)

$ESR - 22mm \text{ in } 1^{st} hr$

Ashtavidha Pareeksha

- 1. Nadi (pulse): mandam (slow)
- 2. Mootram(urine): sukha pravrutti (regular)
- 3. Malam (stool): sukha pravrutti (regular)
- 4. Jihwa(tongue): Upalepa (coated)
- 5. Sabda(voice): vyakta (clear)
- 6. Sparsha(touch): sadharana (regular)

7. Drik (eyes): sadharana (normal)

8. Akriti(built): madhyama (moderate) DASAVIDHAPAREEKSHA (10 FOLD EXAMINATION)

- 1. Prakruti (constitution): Vatakapha
- 2. Vikruti(morbidities):Dosha-Vatapradhana tridosha, Dooshya- Rasa
- 3. *Satwa*(psychic conditions): Madhya
- 4. Sara(excellence of tissue elements): Asthi
- 5. Samhanana(compactness of organs): Madhyama
- 6. *Pramana*(measurement of organs): *Madhyama*
- 7. Satmya(homologation): Sarva rasa
- 8. *Aharasakti*(power of intake & digestion of food): *madhyama*
- 9. *Vyayamasakti*(power of performing exercise): avara
- 10. Vaya(age): 44 yrs (madhyama)

TREATMENT

1. *Rasnasaptaka kwatha* 40ml twice a day after meal for 50 days.

2. *Giloya sattva* 1gm twice a day

Ashwagandha churna 3gms twice a day *Ajmodadi churna* 3gms twice a day This combination to be taken twice a day after meals with luke warm water for 50 days.

3.*Punarnavadi gugulu* 250mg twice a day (by chewing) taken after meals with luke warm water fore 50 days.

4.*Sootshekhara Rasa* 125mg twice a day before meals with luke warm water for 50 days.

5.*Ekanga veera rasa* 125mg twice a day after meals with Rasnasaptaka kwatha for 50 days.

6.*Panchaguna tail* for local application for 50 days.

Contents of rasnasaptaka kwatha⁹: *Rasna*, *Amrita*, *Aragwadha*, *Devadaru*, *Trikantaka*, *Eranda*, *Punarnava*.

Contents of Ekangaveera rasa :

Shudha Gandhaka. Shudha Parada , Shudha Kanta Loha Bhasm , Vanga Bhasma, Naga Bhasm ,Tamra Bhasma , Abhraka Bhasma , Tikshna Loha Bhasma , Nagaram , Marich ,Pippali. (All in same proportion). Bhawana dravya : Vara (Haritaki, Amalki,Bhibitaka),Trikatu (Nagara,Maricha, Pippali),Nirgundi, Chitrak,Markav, Shigru, Kushtha,Amalki, Kupilu, Arka,Guduchi, Aadraka.

Contents of Ajmodadi churna^{1°} : *Ajmoda*, *Vidang, Pippali, Saindhava , Marich, Devdaru ,Pippalimula, Shatpushpa, Chitraka, Haritki ,Vidhara , Shunthi .*1 **Contents of punarnavadi guggulu¹¹ :** *punarnava*, *triphala*, *trikatu*, *dantimool*, *trivrut*, *shudha guggulu*, *chitrakamool*, *saindhava*, *shudha bhallataka*. Trriturated with decoction of *punarnava*, *shunthi* and *eranda mool*.

Contents of sootshekhara rasa¹² : parada, swarna bhasma, tankana bhasma, shuddha vatsanabha, shunthi, maricha, pippali ,dattura, gandhaka, tamra bhasma, ela ,twaka, patra, nagakeshara, shankha bhasma, bilva, kachura. Trriturated with sufficient quantity of Bhringaraja.

Contents of panchaguna tail¹³ : *triphala*, *nimba*, *nirgundi*, *til taila*, water for decoction

Kalka dravya – madhuchishta , gandhaphiroja , shilarasa Rala , guggulu , karpoora , turpentine oil , eucalyptus oil.

Severity	Grading	
Continuous joint pain with swelling	4	
Continuous pain without swelling	3	
Intermittent pain without swelling	2	
Pain in joints with exertion only	1	
No joints pain	0	

CRITERIA FOR ASSESSMENT

RESULTS

FOLLOW UP	Grading of join	Grading of joints pain and swelling		
	BT	AT		
At 10 th day	4	3		
At 20 th day	4	2		
At 30 th day	4	1		
At 40 th day	4	0		
At 50 th day	4	0		

DISCUSSION

Ayurveda has a lot of potential in treating the post viral arthralgia. Patients after recovery from Chickengunya and other viral fever suffers from severe joints pain . This makes the life of patients hell. Their daily life activities are hampered. In such cases Ayurveda is a boon.Rasnasaptaka kwatha is Shothahara and shoolhara. All the herbs mentioned in this are vaatashamaka, shothahara, and rasayana. Hence it acts as an anti-inflammatory and rejuvenating .Giloya is an immunomodulatory drug, tridoshashaamaka, and rasayana in properties . Ashwagandha boosts the supply of antioxidants, regulates the immune system, combat the inflammation thus helpful in chronic disorders like post viral arthralgia. Ajmodadi churna is Amapachaka , deepana , agnivardhaka , and thus causes srotoshodhana. Punarnavadi gugulu is also shothahara, shoolhara and rasayana. Ekangaveera rasa is vaatashamaka and rasayana.Panchaguna tail abhyangam acts Vaatshamaka (shoolhara as) and shothahara. Ajmodadi churna, and other drugs used in the present study can cause gastritis so Sootshekhara rasa was used to combat the Amlapitta.

CONCLUSION

The present study was intended to find out the safe and effective remedy for post viral arthralgia in *Ayurveda*. Post chickengunya arthritis affecting multiple joints can leave a person debilitated for a very long period of time. The modern system of medicine treats symptomatic for mitigating the pain only. *Ayurveda* has a lot of potential in such diseases.

Present study showed good results of internal medicine administered and *bahya abhyangam* with *panchaguna tail*.

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