



Full Length Research Article

A PHARMACO CLINICAL STUDY OF SHUNTHI (ZINGIBER OFFICINALE ROXB) IN THE MANAGEMENT OF AMAVATA W.S.R TO RHEUMATOID ARTHRITIS

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ABSTRACT

Introduction: Amavata occurs in all over the world in all races, sexes, age and climates and is equated with Rheumatoid Arthritis. It is one of the main ailments of modern era of sedentary life style due to its crippling, lingering and relapsing nature. According to Modern system of Medicine, Amavata can be compared to Rheumatoid Arthritis (R.A.). R.A is auto immune disease
Aim: To evaluate the role of Shunthi Churna in the disease Amavata.

Material and Methods: Total 30 patients of age group 20-60 years were registered in Group A. Assessment was done based Classical signs and symptoms of the disease according to Ayurveda as well as modern medical science will be consider like Jones criteria (Major and minor) for Rheumatoid arthritis. The data obtained in clinical study was analysed by using Paired t test.

Result: In Sandhi ruja percentage of Reduction is 37.03%. , In Sparshasahatva percentage of Reduction % is 41.45%. In Stabdhatva percentage of Reduction % is 40.32%., for Walking time percentage of Reduction % is 38.65%. ,for VAS(Visual Analog Scale) percentage of Reduction % is 28.8%

Conclusion: Sunthi churna with Anupana of Ushna Jala shows significant effect in Amavata.

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INTRODUCTION

Every person have right to live happy and healthy life. According to AYURVEDA and W.H.O the concept of healthy person is not restricted only on physical or body level but the physical, mental and spiritual- all the three states must be in proper condition i.e. the equilibrium state of a person. In this fast era, no one has sound health due to their changed dietary habits like junk food and irregular timing of taking meal & even irregular sleeping time, lack of exercise, social structure, life style, mental stress etc. Because of all these, there is remarkable increase in stress and strain. That creates indigestion and ultimately leads to MANDAGNI and that creates various diseases as mentioned. Mandagni results in formation of "Ama" in the body which is the basic concept of Ayurveda in several disease formation like Atisara, Visuchika, Alasak etc. AMAVATA is one of the most important Roga which leads to "Ama" formation. It's a challenging diseases for the physician owing to its chronicity, complications, difficult to cure, morbidity, and crippling nature. Our ancient Acharyas like Charaka, Sushruta, Vagbhatta didn't mention Amavata as a separate

disease entity, but Acharya Madhava, in 7th ct. described Amavata as specific Roga in Madhava Nidana first time. Other Samhitas like Yoga-ratnakara, Bhavaprakasha, Bhaishjyratnavali moreover, Acharya Chakradatta had also described Amavata very well. The signs & symptoms of Amavata resembles more or less with Rheumatoid Arthritis. The word "RHEUM" refers to the stiffness, body aching, fatigue, which is usually present in arthritis. It is a systemic disease. The etiology of R.A. is still unknown but most theories to date either advocate an autoimmune mechanism or an infectious agent which indirectly caused by erroneous life style. The R.A exists all over the world and affects men and women of all races. In the U.S alone, about two million people suffer from this disease. Women are three times more likely than men to have R.A. About 80% of people with R.A are diagnosed between the ages of 35-50. R.A appears to run in families, although certain factors in the environment may also influence the development of the disease.

Hypothesis

Null hypothesis: Shunthi churna is not effective in the management of Aamvat.

Alternative hypothesis: Shunthi churna is effective in the management of Amavata.

Aims and Objectives

- To identify the drug from authentic source.
- To study the drug Pharmacognostically
- To evaluate the role of Sunthi Churna in the disease Amavata.

MATERIALS AND METHODS

Selection of the patients

Patients will be selected irrespective of caste, sex, profession etc. from O.P.D. and I.P.D. of Parul Sevashram Hospital, Limda, Ta-Vaghodia Dist.-Vadodara.

Ethical clearance

As this was a clinical research, Institutional Ethics Committee (IEC) approval was taken prior to initiation of research vide its letter No.3 DATED 01/05/2015. Adverse drug reaction (ADR) if any was duly noted and reported. Written consent of the present of each patient was taken before starting the treatment. Basic information of the disease and treatment was given to the patient. This trial is also registered in Clinical Trial Registry of India (CTRI), ref. No. CTRI/2017/04/008419 [Registered on: 26/04/2017]

Inclusion Criteria

- Patients with age group of 20-60 years, irrespective of sex and occupation.
- Patients having classical signs and symptoms of Amavata will be selected for study.
- Jones criteria (Major and minor) for pain, fever, morning stiffness, inflammation for Rheumatoid arthritis will be considered.

Exclusion Criteria

- Age group below 20 and above 60 years.
- Patients with severe deformities of limbs.
- Chronicity of the disease more than 10 years.
- The patient who are suffering from systemic disorders like Cardiac disease, DM, HTN, Cancer, Tuberculosis, Respiratory Disease and other disease which may lead to fetal condition for the patient at any time will be excluded
- Patient suffering with Asadhya lakshan as "Sarva Dehchara Shoth" etc. given in Ayurvedic classics will be excluded.

Plan of study

The selected patients who fulfilled the inclusive criteria in following Group A.

Group-A

The trial drug will be administered 2 gm of Sunthi churna (*Zingiber officinalis Roxb.*) in 2 divided doses in a day, before meal, with Anupana of Ushnodak.

Criteria for Assessment

- By observing Clinical improvement in signs & symptom of the disease mentioned in Ayurvedic classics as well as books of modern medical science.
- By observing improvement in the above mentioned investigations before & after treatment with Quantitative R.A. test, E.S.R. and Serum C.R.P

Statistical analysis

The information gathered on the basis of above observations was subjected to statistical analysis. The Paired t- test was carried out for all parametric data to analyse the effect of individual therapy in the both groups.

The obtained results were interpreted as

- Insignificant-p>0.05
- Significant-p<0.05
- Significant-p<0.01
- Highly significant-p<0.001

RESULTS

In Sandhi ruja percentage of Reduction % is 37.03%. In Sparshasahatva percentage of Reduction % is 41.45%. In Stabdhatva percentage of, Reduction % is 40.32%. In Walking time percentage of Reduction % is 38.65%. In VAS (Visual Analog Scale) percentage of Reduction % is 28.8%

DISCUSSION

Ama and Vata are the chief pathogenic factors, the disease represents the vitiation of Tridosha. The affliction of Sandhi (of which Asthi is a component) by Vata and association with Ama, reflects the role of homogenous Dosa and Dusya (Tulya Dosa Dusya) in the causation of this disease. Moreover, the chief pathogenic factors i.e. Ama and Vata being contradictory in character, so difficulty in planning the line of treatment. Shunthi have Katu rasa - Amapachak, Laghu guna- Reduces guru guna of ama, Ruksha - Reduces snigdha guna of Kapha, Ushna virya - Amapachak, Madhur vipaka - Vata shamak, Katu rasa + laghu guna = Amapachak, Madhura vipaka + snidgha guna = Vata shamak so the above all properties Shunthi chosen for Amavata.

Conclusion

Shunthi is the main trial drug for this study. Ama is the chief pathogenic factor in causation of Amavata and it is the resultant of jatharagni as well as Dhatavagni Mandya. Shunthi has ushana Virya and Katu Rasa properties. By virtue of these properties, The state of Mandagni might have improved. So when the Agni is improved the further production of Ama is checked at root level. Moreover, these above mentioned properties were very helpful in digestion of Ama, by virtue of its above properties might have improved the Agni, checked the formation of Ama and did pachana of existing Ama. In Sushutra Samhita, Shunthi mentioned in Trikatu. So property of this gana is Deepana and Pachana which improved the Agnimandya and did Pachana of Ama on the affected site, thereby the obstruction to vata was removed. The second most important pathogenic factor was Vata. Though

vitiation of all the Dosha is there but vitiation of Vata plays the dominant role in Amavata. Shunthi is Vata and Kapha Shamaka. Shunthi has Snigdha guna, Madhura vipaka & ushana Virya in nature. These all properties might have corrected the vitiation of Vata and brought it to normal position. Shunthi chuma along with ushana jala served as Vatanulomaka drug. At the end of this study conclude that null hypothesis (H₀) is rejected and alternative hypothesis (H₁) is accepted. There is effect of Shunthi in the management of Amavata.

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