



REVIEW ARTICLE

EFFECT OF EXTERNAL OLEATION THROUGH RETENTION OF BARLERIAPRIONITIS OIL ON
KNEE IN THE MANAGEMENT OSTEOARTHRITIS OF KNEE

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ABSTRACT

SahacharanAyurvedic herb has primarily been used to cure all types of Arthritis. Janu means knee and Basti signifies retaining something inside or containing something. Thus JanuBasti is the Ayurvedic therapy where hot medicated oil is made to retain on the surface of the knee portion of body. At present, there is no cure for OA of Knee. The management of OA of Knee is broadly divided into non-pharmacological, pharmacological, and surgical treatments, which are highly symptomatic and commonly associated with troublesome side effects. These treatments are either expensive or not available for common people in developing countries. AcharyaSushrutahas explained Vayu entrapped in Snayu (muscles), Sandhi (joint) & Asthi (bone) which should be treated with Janubasti with SahacharTaila(BarleriaPrionitis). Hence the patient should be kept under Janubasti therapy. 50 pts.were selected from the Dept. of Panchakarma OPD BharatiVidyapeeth Ayurveda Hospital Pune. Sahachar Tail wasPurchased fromAgsati Pharmaceutical's Pune. Janubasti with Sahachar Tail was done dailyonce for 30 minutes for 7 days and f/u were taken on 15th and 30th day. Janubasti reduces all signs and symptoms of OA of Knee i.e. pain, swelling, Tenderness, Pain during extension and flexion, tenderness, difficulty during walking without any treatment-emergent adverse effect. Janubasti with SahacharTailashown significant results (i.e. P value is <0.05) in cardinal signs and symptoms of osteoarthritis of Knee.

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INTRODUCTION

Osteoarthritis of knee is more prevalent in Indian population. This disease simulates to the SandhigataVata. It is one of the degenerative Joint Disease characterised by breakdown of joint cartilage. Osteoarthritis is the 2nd most common disease in the world population i.e. 30%.Knee joint is the most affected site. The major risk factors associated with Knee joint are old age, obesity, occupational knee bending etc. which makes it an important cause of disability. SandhigataVata to be caused by the excessive intake of VataVrudhikaraAharalike Katu, Tikta, Kashaya Rasa PradhanaDravya And Ativyayama (excessive strain or stress to the joints) or Abhighata (injuries) (YadavajiTrikamaji, 2011). Osteoarthritis is a degenerative joint disease due to the degradation of the joints, the articular cartilages and subchondral bone. It is caused by the mechanical stress to the joints and produces the symptoms like joint pain, swelling, stiffness etc. Even though the disease effects any joint in the body, most commonly involved joints are major joints and weight bearing joints of the body like hip and knee

joint. Due to the life style, Indians suffers from knee joint osteoarthritis whereas western country suffers from hip joint osteoarthritis commonly. The incidence of this disease increases with the age and the prevalence is more in females (25%) when compared to the males (16%). (<http://en.wikipedia.org/wiki/Osteoarthritis>). Almost all persons by Age 40 have some pathologic change in weight bearing joint. The reported prevalence of Osteoarthritis from a study in rural India is 5.78%. Obesity, Occupational knee bending, Physical labour etc., are some of the predisposing factors for the disease.

Need of the Study

No satisfactory, comprehensive & time bound treatment schedule for JanusandhigataVata is available at present. Even other treatments have their own limitations in the management of this disease. Other systems of medicine can provide either conservative or surgical treatments which are highly symptomatic and commonly associated with troublesome side effects. Whereas such type of conditions can be better treatable by the management and procedures mentioned in Ayurvedic classics (YadavajiTrikamaji, 2010). AcharyaSusharuta has

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explained Vāyu entrapped in Snāyu, Sandhi & Asthi which should be treated with Snehan, Swedan, Upanaha, Agnikarma, Bandhanand Mardana (YadavjiTrikamji, 2010). These treatments are economical and they have long lasting effects and the chances of recurrence are less. Hence we took Janubasti with Sahachar Tail for this study.

Hypothesis

Ho: There is no significant effect of Janubasti with SahacharTail in JanusandhigataVata.

H1: There is significant effect of Janubasti with SahacharTail in JanusandhigataVata.

Lacuna: Previously works had been done on the effect of Janubasti and other procedures in the management of JanusandhigataVata (Srikantha and Murthy, 2000). But there is no work done on Janubasti with SahacharTail (Ali Guermazi *et al.*, 2012) in JanusandhigataVata. Thus, by considering all these factors, this study was undertaken with following Aim and Objectives.

Aim

To study the efficacy of Janubasti with SahacharTaila in Janusandhigata Vata (OA of Knee).

Objectives

- To evaluate the effect of Janubasti with SahacharTaila on symptoms of JanusandhigataVataviz-. Shula (pain) Shotha (Swelling), Sparshasahatva (Tenderness), Akuncanjnya-Prasaranjnya Vedana(Pain during extension and flexion), Sandhisputan (Creptus). And Sakasthatachalan (difficulty during walking).
- To determine the effect of JanuBasti with Sahachar Taila in JanusandhigataVata.

a) SahacharTaila



c) Procedure of Janubasti



MATERIALS AND METHODS

The clinical study was done on 50 patients coming under inclusive criteria. 50 patients of JanusandhigataVata were selected on the basis of clinical examination selected from OPD of Panchakarma Dept. BVMF Ayurveda Hospital, Pune-43. A Special case Performa containing details necessary for study was prepared. SahacharTaila was purchased from Pune market (Agasti Pharmacy-Batch No.13068) and Standardization was done in Late Principal Bhide Lab. Pune. Patients were subjected to X-ray Cervical spine AP and Lateral View for confirming diagnosis.

Treatment Scheduled

- Janubasti - 50 pts.
- Purvakarma:-Cleaning of Janusandhi with lukewarm water and prepare Mashpishti, steel rim.
- PradhanaKarma :- Janubasti with Sahachar tail 120 ml for each Janusandhi up to level of 2 Angula.
- Time :- After Breakfast
- Duration:- 30 minutes
- PashyataKarma :-Remove the steel rim/ Mashapishti and clean area with lukewarm water.
- Assessment Day-0 day & 7th day
- Follow Up :-15th & 30th Day from the 1st day of Janubasti.
- Pathya-Apathya -Was advised to avoid exposure air.

Observations and Results

It includes Observations on demographic data's with their graphical representation and Results of individual symptoms followed overall response of the treatment.

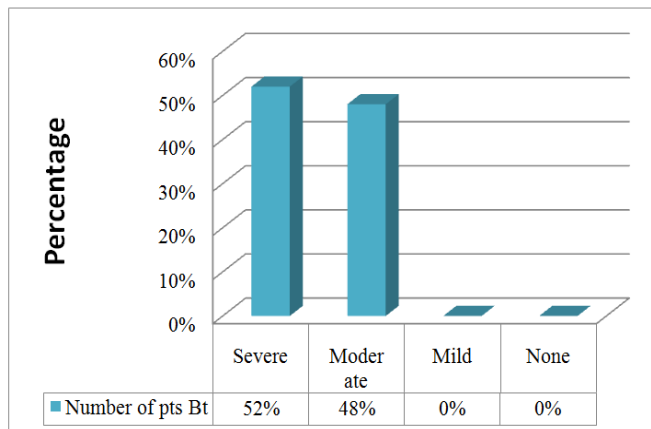
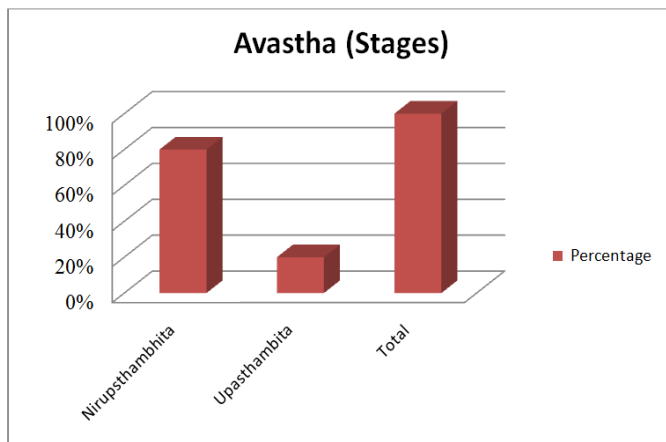
b)Goniometer



d) Goniometer Assessment of Knee



1) Percentagewise distribution of patient according to Avastha (Stages): 2) Assessment criteria before treatment of Janubasti

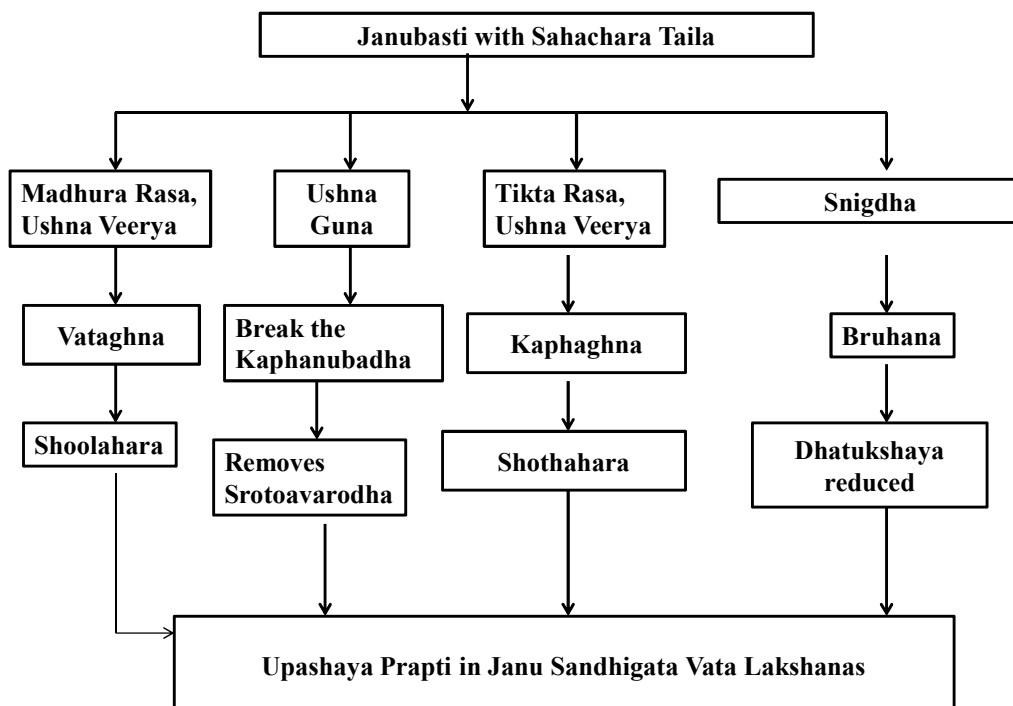


1) For qualitative data: (Shula, Shotha, Sparshasahatva) the obtained information was analyzed statistically by using Friedman test:

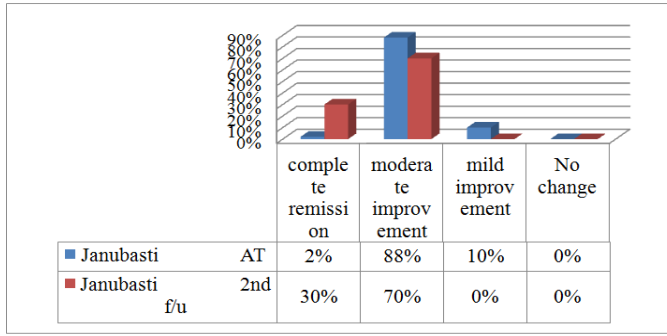
Symptoms	BT	AT	AT 2 nd F/u	Chi Sq	P Value	Result
Shula (Pain)	3	1.5	1.5	92.16	< 0.0003	Significant
Shotha(Swelling)	3	1.79	1.21	93.19	< 0.0001	Significant
Sparshasahatva (Tenderness)	3	1.5	1.5	100	< 0.0003	Significant

2) For quantitative data: (Akunchan- Prasaranjanya Vedna, Sandhisputhan and SkashtaChalana) were statistically analyzed and Mean, S.D., S.E., z value and P value were calculated and t test was carried

Symptoms	BT F	AT F	BT P	AT P Value	Result
AkunchnyjanyaVedana (pain during flexion)	0.94	19.4	0.6	0.0000	Significant
Parasaranjanya Vedana (pain during extension)	1.21	0.94	0.6	0.0000	Significant
Sandhisputhan (Crepitus)	1.62	19.4	0.6	0.0000	Significant
Sakashthalana	1.24	37	00.6	0.0000	Significant



3) Overall effect of Janubasti (external oleation through retention of BarleriaPrionitis oil) on Janusandhigata Vata (osteoarthritis of Knee)



4) Samprapti Ghatak

Nidan	VataprakopakNidan Ch. Chi. 28/15-18
Dosha	Vata and Kapha particularly VyanVāyu & ShleshakKapha
Dushya	Asthi, Majjya & Meda
Strotasa	Asthivaha, Majjyavaha & Medavaha
Strodushti	Sanga, Atipravrti
Jatharagni	Manda
Dhatavagni	Manda
Doshamaya	MarmasthiSandhi Ch.Su.17/112-113
Roga Amaya	Madhyama (Ch.Su. 11/48-49)
Adhishtana	JanuSandhi
PratyatamaLakshana	AnkucanprasaranajanyaVedana, Vatapurnadiritiparsha

DISCUSSION

Discussion on overall Results of the treatment and Probable mode of action of Janubasti.

- “Sahacaram” means walking along with. As sahacar Tail (Ali Guermazi *et al.*, 2012) is having specific property like (Madhur & Tikta Rasa & UshanaViryatamak) GatiVisheshatvam (helps to move) it can be given in condition like the disease having difficulty in walking, pain, swelling, Tenderness and stiffness.
- Bahyasnehan (external application of oil) is mentioned as one of the therapeutic measures in curing various types of Vata disorders. External application of

Sahachara Tail with Janu Basti helps curing Vata disorders quickly and effectively due to its Vatahara as well as Brihmhana (nourishing) and Pachan properties.

- Both Snehan and Swedan can be done by Janubasti.
- SahacharTaila is UshanaVirya in nature, with the help of Bhrajaka Pitta it diminishes vitiated Vata and resolves the symptoms of Janusandhigata Vata.
- All these properties of SahacharTaila help in SampraptiVighatana and prevent KhaVaigunya which is the main factor for Janusandhigata Vata

Conclusion

- Janubasti with Sahacar Taila can be used effectively in JanusandhigataVata.
- Efficacy of Janubasti with SacharTaila in JanusandhigataVata is Statistically significant as $P < 0.0001$ in the symptoms viz-. Shula, Shotha, Sparshasahatva, Akunchan Prasaranjanya Vedana, Sandhisputan and Skashtacalan.
- Janubasti with Sahachar Tail relieving the signs and symptoms of JanuSandhigataVata.

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