Volume 20 Issue 3
Originally issued as H1

Global Journal of Medical Research: H
Orthopedic and Musculoskeletal System
Volume 20 Issue 1 Version 1.0 Year 2020
Type: Double Blind Peer Reviewed International Research Journal
Publisher: Global Journals
Online ISSN: 2249-4618 & Print ISSN: 0975-5888

'Arthrox' an Advanced Ayurvedic Detox Programfor Knee Osteoarthritis- A Case Report

By Smita Naram, Deepak S. Mahajan, Hemang Parekh & Ronak naik

Ayushakti Ayurveda Pvt Ltd

Abstract- Reported case was a 68 years old Male with Early-stage Osteoarthritis of both knees (Sandhigata Vata), accompanied by reduced medial joint spaces bilaterally, marginal osteophytes. Initially, VAS scale rating was poor. Proven herbal formulations like Painmukti MJ, Painmukti Sandhical, Painmukti cream along with Advance Virechana (Arthrox), Knee Dhara, Yogbasti, and Matrabastitwice a week was given for 16months.Visual analog scale for knee pain and an Ayurveda clinical assessment criteria used to evaluate the effects of Treatment and Herbal remedies monthly basis. After a treatment of 30 days of Advance Virechana (Arthrox), Knee Dharaand Yogbasti, Pain, movement, and stability of the joint was improved at an excellent level. During follow up visit with the help of Matrabasti twice a week, Pain, movement of joint and stability, and even X-ray reading were change. In conclusion, this knee osteoarthritis patient's quality of life improved by Advance Virechana (Arthrox).

Keywords: *osteoarthritis, arthrox, sandhigatvata, virechana.*

GJMR-H Classification: *NLMC Code: WE 348*



Strictly as per the compliance and regulations of:

© 2020. Smita Naram, Deepak S. Mahajan, Hemang Parekh & Ronak naik. This is a research/review paper, distributed under the terms of the Creative Commons Attribution-Noncommercial 3.0 Unported License http://creativecommons.org/licenses/by-nc/3.0/), permitting all non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

‘Arthrox’ an Advanced Ayurvedic Detox Program for Knee Osteoarthritis- A Case Report

Smita Naram [α], Deepak S. Mahajan [σ], Hemang Parekh [ρ] & Ronak naik [ω]

Abstract- Reported case was a 68 years old Male with Early-stage Osteoarthritis of both knees (Sandhigata Vata), accompanied by reduced medial joint spaces bilaterally, marginal osteophytes. Initially, VAS scale rating was poor. Proven herbal formulations like Painmukti MJ, Painmukti Sandhical, Painmukti cream along with Advance Virechana (Arthrox), Knee Dhara, Yogbasti, and Matrabastitwice a week was given for 16months.Visual analog scale for knee pain and an Ayurveda clinical assessment criteria used to evaluate the effects of Treatment and Herbal remedies monthly basis. After a treatment of 30 days of Advance Virechana (Arthrox), Knee Dharaand Yogbasti, Pain, movement, and stability of the joint was improved at an excellent level. During follow up visit with the help of Matrabasti twice a week, Pain, movement of joint and stability, and even X-ray reading were change. In conclusion, this knee osteoarthritis patient's quality of life improved by Advance Virechana (Arthrox).

Keywords: osteoarthritis, arthrox, sandhigatvata, virechana.

I. Background

Pain have been regarded as a symptom of an underlying condition.[1]Pain is the main causative factor that forces a person to visit a doctor immediately. The most common symptom as joint pain and stiffness is a diseased condition called Osteoarthritis. Initially, symptoms may occur only following exercise, but over time may become constant. Other symptoms may include joint swelling, decreased range of motion[2].Osteoarthritis is also erroneously called degenerative joint disease, which mostly affects cartilage. Cartilage is the slippery tissue that covers the ends of bones in a joint. Healthy cartilage allows bones to glide over each other, absorb the shock of movement. In osteoarthritis, the top layer of cartilage breaks down and wears away. This breakdown of cartilage allows bones under the cartilage to rub together. The rubbing causes pain, swelling, and loss of motion of the joint.[3]

The management of Osteoarthritis includes Lifestyle management, Physiotherapy, and Medication. The effectiveness of NSAIDs varies substantially. Paracetamol is clinically in effective in symptomatic the treatment of Osteoarthritis, nsaids such as naproxen, while more effective in severe cases, are associated with greater side effects, such as gastrointestinal bleeding.[4] Another class of NSAIDs, COX-2 selective inhibitors (such as celecoxib) are equally effective, and have lower rates of adverse gastrointestinal effects, but higher rates of cardiovascular disease such as myocardial infarction[5] Because oral medication often does not lead to an adequate clinical response in OA, non-pharmacological therapies such as exercise, weight reduction, and physical therapies play role in the long-term management of osteoarthritis and are recommended. In addition, complementary and alternative medicine (CAM) treatments such as acupuncture or herbal medicines are used frequently by OA patients.

Acharya Charaka mentioned Sandhigatavata, which can be compare with Osteoarthritis. *Shula* (pain) is the cardinal feature of the disease associated with *Sandhishotha* (joint inflammation), *Vatapurna-drati-sparsha* (edema palpable as air-filled sac), *Prasaraṇa-akuncanasavedana* (painful movement of the joints), and in the later stage *Hantisandhi* (restricted joint movements).[6]

II. Case Report

Reported case was a 68 years old Male with Early-stage Osteoarthritis of both knees (Sandhigata Vata), accompanied by reduced medial joint spaces bilaterally, marginal osteophytes, Tibia spiking,and Patellar breaking. When the patient was 65 years old, they developed pain in the right knee, at the age of 65.6 years in the left knee. At the age of around 66 years, he had an X-ray with a diagnosis early-stage osteoarthritis. Therefore the patient took NSAIDs and received conservative treatment and Physiotherapy. However, knee pain increases progressively along with weight; on the other hand, his daily living activities stared decreasing with age. At the age of 68 years, this patient visited Ayushakti Ayurveda Pvt Ltd outdoor unit in Thane, Mumbai, Maharashtra, India branch with a complaint of both knee pain while walking and climbing. The patient got his self-reported visual analog scale (VAS) pain score in-between 8 and 9. On clinical examination, both knees showed mild detectable effusion. As per clinical symptoms and X-ray reporting patient diagnosed as having Osteoarthritis of both knee joints. The patient was convinced to undergo Advance Virechana (Arthrox),*Knee Dhara, Yogbasti,* and Herbal formulations for 20 days, followed by *matrabasti*(60 ml oil enema) twice a week for 12 months along with Herbal formulations. All the test drugs (table- 01)Pain Mukti MJ 400 mg twice a day after food, Pain MuktiSandhical 720

Author α σ ρ ω: Ayushakti Ayurveda Pvt Ltd.
e-mail: drdeepakm@ayushakti.com

© 2020 Global Journals

mg twice a day after food, Pain Mukti Cream for local Applicationwere prepared byAyushakti Ayurveda Pvt Ltd pharmacy, Plot number 78, Stice, Musalgaon, Sinnar, Nashik- 422112.

Table 1: Formulas for the test drug shown in table-01

Pain Mukti MJ		Pain MuktiSandhical		Pain Mukti Cream	
Ingredients	Quantity	Ingredients	Quantity	Ingredients	Quantity
NirgundhiGhan (Vitexnirgundo)	50 mg	Guggul(Commiphoramukul)	150mg	Mahanarayan oil	10%
Rasna Ghan (Pluchealanceolata)	100mg	Asthishrunkhlaghan (Cissusquadrangularis)	100 mg	Lavang oil (Eugenia aromatica oil)	0.5 %
ShallakiGhan (Boswelliaserrata)	100mg	Lajjalughana (Mimosa Pudica)	30 mg	Twak oil (Cinnamomum Zeylanicum oil)	0.5 %
RaktaPunarnavaGhan (Boerhaviadiffusa)	40mg	Lakha (Lacciferalacca)	20 mg	Pudinaphool (Menthaspicata)	5 %
Shunthi powder (Zinziberofficinalae)	25mg	Aswagandha (Withaniasominfera)	20 mg	ShuddhaGuggul (Balsamodendronmukul)	1 %
Musta powder (Cyprus rotandus)	75mg	Mukta	400 mg	Marich ark (Capsicum extract)	0.1 %
				Gandhapurapo oil (Winter green oil)	10 %

The first regimen of Advance Virechana (Arthrox) was started for the patient after his informed written consent for the procedure, all the do's and don'ts, all the possible complications during Advance Virechana (Arthrox) procedure explained thoroughly.

III. Treatment Plan Advance Virechana (Arthrox)

The procedure of Advance Virechana (Arthrox) performed in three steps.

1. *Poorvakarma, ie. Preparatory procedures*- This was performed before therapy, which includes *Deepana* (Appetising drugs) and*Pachana* (Digestive drugs), which was then followed by *Snehapana,*ie. Oral administration of medicated ghee) for 4 days, planned after the examination of *Kostha* (nature of bowels) of the patient until achieving the symptoms of Adequate oleation (Internal consumption of mediacated ghee). Simultaneously *Abhyanga* (external application of Oils) and*Swedana* (Steam) was given for five days.
2. *Pradhankarma, ie. Main procedure*- This was the actual administration of Advance Virechana (Arthrox) herbs, as per *Bala* (Strength*) Kostha*(nature of bowels)of the patient. The herbal combination used was tablet virechana four tablets, manufactured by Ayushakti Ayurveda.
3. *Paschatkarma,ie. Post mainprocedure*- As per the number of bouts of bowel evacuated after giving Advance Virechana (Arthrox), *Sansarjanakrama* with *Mand, Peya*, and *Vilepee* advised for three days.

The assessment of Advance Virechana (Arthrox)based on various parameters termed as*Shuddhi* (cleansing) criteria like *Vaigiki*(number of bouts of stool passed), *Maniki* (quantitative measurements of stool), *Laingiki* (Symptoms), and *Antyaki* (assessment based on end points of purgation).This particular patient had Madhyamshudhhi. In the second regimen, the Advance Virechana (Arthrox) procedure was followed by *Yogbastikrama* (8 enemas) and *Knee Dhara* (pouring of oil on knee anterior and posterior aspect) with *Mahanarayan oil* for eight days. All the test drugs Pain Mukti MJ 400 mg twice a day after food, Pain MuktiSandhical 720 mg twice a day after food, Pain Mukti Cream for local Application was kept continue after that for 16 months. Matrabastitotal of 60 ml (*Mahanarayan oil*-20 ml, *Balada oil*-20 ml, *Jivanyaghrut*-20 ml) twice a week advised for 16 months.

Table 2: Schedule of administration of treatment

Days	Treatment	Drug	Duration
1-5 days	Dry pindsweda	Shunthi powder (Zinziberofficinalae), Ajwain powder Trachispermumammi	20 mins
6-10 days	Internal and external snehana (Oleation), Swedana (Steam)	Internal- Mahatiktaghruta External- Mahanarayan oil	20 mins
12th day	Virechana (Detox)	Special virechana tablet	
13-15 days	Sansarjankrama	Mand, Peya, Vilepee	
13-20 days	Yogbasti Knee dhara	Knee dhara- Mahanarayan oil	20 mins
Onwards	Matrabasti	(Mahanarayan oil-20 ml, Balada oil-20 ml, Jivanyaghrut -20 ml)	Twice a week

The overall improvement observed with symptoms like Pain (table-3), Swelling (table-4), Akunchana Prasarane Vedana (table-5) difficulty in Walking (table-6) and difficulty in climbing (table-7) and were grades like following-

© 2020 Global Journals

Table 3: Pain scale

Symptom	Grade
No Pain	0
Mild pain of bearable nature, comes occasionally	1
Moderate pain- Slight difficulty in joint movements due to pain , requires medication and may remain throughout the day	2
Severe Pain- More difficulty in moving the joints and disturbing sleep and requires strong analgesics	3

Table 4: Swelling scale

Symptom	Grade
No Swelling	0
Minimal edema only in joint Capsule	1
Edema in dependant parts	2
Massive edema in the limb	3

Table 5: Akunchana Prasarane Vedana

Symptom	Grade
No Pain	0
Pain without wincing of face	1
Pain with wincing of face	2
Prevent complete flexion	3
Does not allow passive movement	4

Table 6: Difficulty in Walking

Symptom	Grade
No Effect	0
Needs Minimal Assistance / Can Stand or walk for 1 Hour	1
Needs Maximum Assistance / Can Stand or Work for less than 30 Minutes	2
Almost Not Standing or Walking or Bed Ridden	3

Table 7: Difficulty in climbing

Symptom	Grade
No Effect On Climbing	0
Needs Minimal Assistance	1
Needs Maximum Assistance	2
Almost No Climbing or Bed Ridden	3

IV. Results

During the treatment of the first 30 days, patient experienced gradual improvement. All the symptoms were around 50 % reduced except climbing in first 30 days only (table-8). After the successful completion of all the arthrox treatment patient experienced 100 % relief in all the symptoms. His VAS scale reading was improved significantly. When the patient had his both knee X-ray after 13 months, it showed no abnormality except mildly reduced joint space in medial compartments of both knees (image-1 and image-2).

Table 8: Showing difference in symptoms in the first 30 days

Symptom	BT	AT	Relief in %
Pain scale	3	2	33.33333
Swelling	2	0	100
AkunchanaPrasaraneVedana	3	1	66.66667
Difficulty in Walking	2	1	50
Difficulty in climbing	2	2	0



Image 1: Before treatment



After treatment

V. Discussion

Osteoarthritis *(Sandhigatvata)* is commonly known as wear and tear arthritis. In this natural cushion between the joints, cartilages wears away[7]. There may be inflammation in the joint spaces, which causes symptoms like Pain initially,later Swelling. Due to lack of this cushion and absorption material, inflammation, in Sandhigatvatathe mobility of joints is restricted at the initial stage, and later it is aggravated by anatomical changes in the articular surfaces and joint capsule and the ligamnets[8]. When the patient wants to move his knee

© 2020 Global Journals

in his regular daily activities, he experiences the pain, which may cause wincing of the face. All the signs and symptoms noted for the patient, and the assessment was done. The symptoms assessed before starting treatment, after one month, three months, six months and final visit were after twelve months.

The two main events in any degenerative disease described by our Achary as are *Asthidhatukshyaya* and *Vataprakopa*, and according to Samhitas, *Vata* and *Asthi* have *Ashrayaashrayi-sambandh*(connection) in which the herbs are causing *Kshaya* of *Vata* are responsible for *Asthidhatuvriddhi* and vice versa[9].Bastichikitsa is the best panchakarma treatment for vitiated Vata[10]. According to Acharya CharakPanchakarma procedure of Basti is called Ardhchikitsa (Half treatment) for Vata[11]. Virechana increases the absorption of basti to achieve a target of pain relief in a short period. *Virechana* evacuates all morbid *Doshas* from all micro to macro *Dhatu* channels and regulates *Vata*, thus decreasing all symptoms of on *Srotasa* level[12].Painmukti MJ and Painmukti Sandhical are moderately effective and safe herb in chronic arthritic conditions along with painmukti cream for local application and used as an alternative to NSAID's without side effect[13]. Cissusquadrangularis present in Painmukti Sandhicalcan stimulate osteoblastogenesis[14]. Boswelliaserrata blocks an enzyme 5-lipooxygenase that plays a role in the formation of leukotrienes, which stimulates inflammation[15].

VI. Conclusion

Arthrox plan can be used successfully in knee osteoarthritis for the long term; it can give better relief in Symptoms of Osteoarthritis as well as can reverse the early degenerative changes in X-ray readings.

References Références Referencias

1. "International Association for the Study of Pain: Pain Definitions". Retrieved 12 January 2015. Pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage Derived from The need of a taxonomy. Pain. 1979; 6(3):247–8. doi:10.1016/0304-3959(79)90046-0. PMID 460931.
2. "Osteoarthritis". National Institute of Arthritis and Musculoskeletal and Skin Diseases. April 2015. Retrieved 13 May 2015 https://en.wikipedia.org/wiki/Osteoarthritis#cite_note-NIH2015-1
3. P.K.Rai, Efficacy of leech therapy in the management of osteoarthritis (Sandhivata) IP: 182.57.131.202]
4. Flood J (March 2010). "The role of acetaminophen in the treatment of osteoarthritis". Am J Manag Care. 16 (Suppl Management): S48–54. PMID 20297877
5. Chen YF, Jobanputra P, Barton P, Bryan S, Fry-Smith A, Harris G, Taylor RS (April 2008). "Cyclooxygenase-2 selective non-steroidal anti-inflammatory drugs (etodolac, meloxicam, celecoxib, rofecoxib, etoricoxib, valdecoxib and lumiracoxib) for osteoarthritis and rheumatoid arthritis: a systematic review and economic evaluation". Health Technol Assess. 12 (11): 1–278, iii. PMID 18405470. doi:10.3310/hta12110.
6. Charaka Samhita with "Ayurveddipika" sanskrita commentary, Chikitsa 28/37, edited by Vaidya Yadavaji Trikamji Acharya, 2014, Chaukham-basurbharti Prakashana, Varanasi.
7. Osteoarthritis/ostearthritis-of-the-knee-degenerative-arthritis-of-the-knee#1https://www.webmd.com/
8. Perera PK, Parera M, Kumarsinghe N, " Effect of Sri Lankan traditional medicine and Aurveda on Sandhigatvata (Osteoarthritis of knee joint). Ayu 2014; 35:411-5.
9. Naram SP, Parekh H, Mahajan DS, Naik RD. A survey to evaluate the efficacy of virechana, basti and knee dhara in patients with Osteoarthritis of knee joint. Int J Res Med Sci2019;7:xxx-xx.
10. Agnivesh, Charaka Samhita; Pandit Kashinath Shasty & Dr. Gorakhnath Charurvedi, Vol-I, 25th Edition, Reprint 1995; Chaukhamba Bharati Academy, Varanasi; Pp. 1024, Pg. 468. (Ch. Su. 25/40).
11. Agnivesh, Charaka Samhita; Pandit Kashinath Shasty & Dr. Gorakhnath Charurvedi, Vol-II, 25th Edition, Reprint 2009; Chaukhamba Bharati Academy, Varanasi; Pp. 1208, Pg. 971. (Ch. Si. 1/39).
12. Naram SP, Parekh H, Mahajan DS, Naik RD. A survey to evaluate the efficacy ofvirechana, basti and knee dhara in patientswith Osteoarthritis of knee joint. Int J Res Med Sci2019;7:xxx-xx.
13. Munshi Renuka Et Al: An Open, Randomized, Comparative Clinical Study To Assess The Analgesic & Anti-Inflammatory Efficacy Of PainmuktiMj Tablets, Painmukti Cream And Painmukti-Sandhical Tablets In Patients Suffering From Chronic Pain. International Ayurvedic Medical Journal {online} 2017 {cited June, 2017} Available from:http://www.iamj.in/posts/images/upload/1865_1876.pdf
14. Potu BK, Bhat KM, Rao MS, Nampurath GK, Chamallamudi MR, Nayak SR, Muttigi MS.Petroleum ether extract of Cissusquadrangularis (Linn.) enhances bone marrow mesenchymal stem cell proliferation and facilitates osteoblastogenesis. Clinics (Sao Paulo). 2009; 64(10):993-8.
15. an-ayurvedic-approach-to-osteoarthritis https://www.integrativepractitioner.com/practice-management/news/

© 2020 Global Journals