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Case Study

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## Ayurvedic treatment modalities in Ankylosing Spondylitis – Case report

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### ABSTRACT

Ankylosing Spondylitis is one of the most common chronic inflammatory Rheumatic disease that primarily affects the spine and sacroiliac joints causing pain, stiffness and a progressive Thoracolumbar kyphotic deformity. It affects young adults and are strongly associated with genetic predisposition identifiable by the antigen HLA-B27. Ayurveda, the system of Indian medicine is heritage of our country and a time tested ancient science. After going through the whole symptomatology of Ankylosing Spondylitis, it is found that it resembles with disease Amavata described in Ayurveda. The Term Ama means anything which is not completely digested and metabolised and “Vata” is one of the three basic functional units of the body that is Vata, Pitta and Kapha. The basic concept of the treatment of this disease is to correct the metabolism and bring about the equilibrium in three basic functional units especially Vata and prevent the production of Ama. The prime aim of the treatment is reduction of pain and stiffness and to prevent Thoracolumbar Kyphotic deformity or at least minimize progression. To achieve this objective various Ayurvedic procedures were adopted like Langhanam, Swedanam, Virechanam, Basti, Oral medications and specific diet regime. In the present case a young boy of age 25 years came to the hospital with the symptomatology of Ankylosing Spondylitis and HLA-B27 positive. He was given the said line of treatment until getting him symptom free. From last four years he is living his normal life without any symptoms of the disease Ankylosing Spondylitis.

**Keywords:** Ayurveda, Amavata, Langhanam, Swedanam, Virechanam, Basti

### INTRODUCTION

Ankylosing Spondylitis (AS) is one of the most common inflammatory Rheumatic disease. It primarily affects the spine and sacroiliac joints causing pain, stiffness and a progressive Thoraco-lumbar kyphotic deformity. This Auto-immune disease usually begins in the second or third decade (young adult) of life. The prevalence in men is

approximately three times more than in women. Ankylosing Spondylitis is considered the prototype of Spondyloarthropathy that shares certain clinical features like Inflammatory Axial Arthritis, generally Sacroiliitis and Spondylitis, Oligoarthritis, Enthesitis, Anterior Uveitis. Patients are strongly associated with a genetic predisposition identifiable by the antigen HLA B-27. The symptomatology of Ankylosing Spondylitis resembles with the disease

*Aamvata* described in *Ayurveda*. It says that *Aamvata* is a disease which mainly affects *Triksandhi* causing pain and stiffness of joints along with systemic features. An *Ayurvedic* Treatment Protocol (AYTP) developed in our hospital comprising of Classical Herbomineral Formulations(HMFs) along with the panchakarma therapies, exercise, regulated diet and life style modification was tried for AS treatment with encouraging results.

## MATERIAL AND METHOD

### Case history

A Hindu, unmarried 25 year old, young male patient working in cloth shop visited Mrityunjay Ayurveda Hospital & Research Centre in Bhopal on 23/08/14 with complaint of low back pain and stiffness since two month, morning stiffness for more than 1hr, pain increased on movement or changing position like walking, can't change side while sleeping due to severe pain, increased pain on bending, pain and tenderness in right sacroiliac joint, pain in lateral side of right knee. Pain around perineum and referring to outer part of right thigh going downwards in a straight line which increases while walking. Pain, swelling and tenderness on left temporo-mandibular joint(jaw joint), could not open mouth or chew with pressure, had to take soft diet.

### Personal history

The patient is vegetarian with regular habit of intake of home-made food, bowel habit is regular and urge of defecation is once/day, frequency of micturition is 7-8 times/day, normal sleep of 6 hours daily and having no addiction.

### Past history

No history of Diabetes Mellitus and Hypertension.

### Family history

No family history of Ankylosing Spondylitis.

### Investigation

Diagnostic test done on 31/10/2017 implies that HLA-B27 was positive (Thyrocare lab) and ESR done on 17/11/2017 was 66 mm after 1 hour (Wintrobe), RA factor was negative, Serum Calcium was 9 mg/dl. Other Haematological parameters were within normal range. Based on clinical presentation patient was diagnosed as a case of Ankylosing Spondylitis.

### Management

The patient was treated with internal and external medications.

S.N.	Procedures	Date & drugs used	Duration	Dosage
1.	Basti Karma <ul style="list-style-type: none"> <li>Kala basti</li> <li>Anuvasan basti</li> <li>Kshar basti</li> <li>Niruha basti</li> <li>Yapna basti</li> </ul>	From 03/11/2014-19/11/2014	16 days	Total-21
2.	Sarvanga tail dhara	<ul style="list-style-type: none"> <li>Kottamchukadi tail</li> <li>Valiya Sahcharadi tail</li> <li>Sarshapa tail</li> </ul>	07 days	30-50 mins/day
3.	Swedana <ul style="list-style-type: none"> <li>Patra pinda pottali Swedana</li> <li>Baluka Swedana</li> </ul>		02 days	
4.	Virechanam	<ul style="list-style-type: none"> <li>Snehana (13/03/2015-16/03/2015)</li> <li>Swedana (17/03/2015-18/03/2015)</li> <li>Virechana yoga (19/03/2015)</li> </ul>	<ul style="list-style-type: none"> <li>Cow ghee</li> <li>Amaltas, Kutki, Nishoth, Guduchi, Triphala, Dashmoola</li> </ul>	Total vega : 11
5.	Yoga Basti Karma <ul style="list-style-type: none"> <li>Anuvasana</li> <li>Niruha</li> <li>Yapana</li> </ul>	30/09/2015 -05/10/2015		Total-7

**External therapies/ panchakarma procedures****Internal medication /oral medication (from 19/11/2014)**

1. Vrihat Vata Chintamani Rasa: 65 mg

Mahavata Vidhvansan Rasa : 250 mg

Swarnamakshika bhasma : 30 mg

Ashwagandha churna : 750 mg

Chopchini churna : 250 mg

Panchakola churna : 500 mg

twice a day

2. Cap Prak : 1 TDS

3. Simhanad Guggulu vati : 2 TDS

4. Agnitundi Vati : 2 BD after meal

5. Tab. Guggulu Tiktam Kwatham : 2BD with 10 drops of Maharaja Prasarini tailam before meal

6. Rasna Saptaka Kwatham with Shunthi churna : 15 ml diluted in 150 ml hot water once at evening (5 pm).

**RESULT & DISCUSSION**

On the first follow up (29/11/2014): After 10 days of treatment all over pain except that of left side jaw and right shoulder joint was reduced. Patient was able to walk more steadily and sit on utkatasana but unable to change side during sleep due to pain.

On the second follow up ( 09/12/2014) patient had no change in left jaw joint pain. Right shoulder pain was reduced and could now change to lateral side while sleeping though having pain.

On the third follow up no improvement was seen in the left jaw joint pain, right heel pain increased , intensity of pain at different joint was variable. Stiffness in joints which used to come while sitting for 15-20 minutes was reduced but stiffness was still felt during standing and walking.

On the fourth follow up (29/12/2014) left jaw pain started reducing and no new pain developed.

On the fifth follow up (09/01/2015) intensity of all pain was reduced.

On the sixth follow up ( 19/01/2015) pain of right heel and right shoulder joint was slightly reduced. No changes in pain at other site was observed. This time medicine was given for 20 days.

On the seventh follow up (13/02/2015) patient could open mouth quite wide, bent in front upto 90 degree , all pain reduced considerably except right heel (according to patient 60 %).

Again oral medication was given for 20 days followed by Virechana which showed 90% relief in pain of all joints according to the patient. After Yoga basti karma and oral medications patient is leading a symptom free normal life. Patient is not taking any medicine since 3 years and having no problem though HLA-B27 was positive when repeated on 26/07/2016.

**Changes in laboratory tests**

S.no.	Lab test	Dates	Findings
1.	ESR	17/11/2014	66 mm/hr
		29/11/2014	55mm/hr
		09/12/2014	10 mm/hr
		29/12/2014	35 mm/hr
		09/04/2015	05 mm/hr
2.	HLA- B27	31/10/2014	Positive
		26/07/2016	Positive

Medicines used in the treatment like Withania somnifera, Ricinus communis, Smilax china, Picrorrhiza kurroo, Boerhavia diffusa, Strychnus nuxvomica, Cassia fistula, Commiphora mukul, Pluchea lanceolata etc. are well known Immunomodulator herbal drugs. Basti (medicated enema), Virechan (strong purgation), Sarvanga dhara (Pizzinhal), Patra pinda pottali swedanam (massage with herbal leaves) are having anti-inflammatory and pain relieving properties. Probably these medicines and various Ayurvedic procedures

correct the metabolism and alters the immune response of the body which results in disappearance of the symptoms of Ankylosing Spondylitis HLA-B27 positive case.

**Need**

The prescribed Ayurvedic treatment is helpful in the management of Ankylosing Spondylitis and further more study is needed following the WHO guideline under

controlled Clinical trial. Further studies should be done to establish MDT safety, efficacy and reproducibility.

## **SOURCES OF FUNDING**

None.

## **CONFLICT OF INTEREST**

None.

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