

ORIGINAL RESEARCH ARTICLE - CLINICAL STUDY

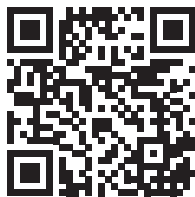
A Clinical Study To Evaluate The Efficacy Of *Yashtyadi Niruha Vasti* in *Vatarakta*

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ABSTRACT

'*Vatarakta*' is a one type of *Vatavyadhi*, which is caused due to vitiated *Vata* and *Rakta*. The main pathology of the disease is *Marga – Avaradh* (Obstruction of channels). Here *Vata* and *Rakta* are aggravated and vitiated by their etiological factors and ultimately *Vayu* gets obstructed by vitiated *Rakta*. This complete process is known as *Vatarakta*. The etiological reactions and symptomatology of gout is very much similar to *Vatarakta*. Gout is caused due to deposition of mono sodium urate crystals in joints and surrounding tissues. It is characterized by acute pain, swollen joints, tenderness and stiffness of mainly small joints (metatarsophalangeal joints). Increased serum uric acid level is hallmark of the disease. It is very common disease prevailing in today's era. In the present clinical study, 40 patients fulfilling the diagnostic criteria of *Vatarakta* were selected randomly from the O.P.D & I.P.D of Gurukul Campus, U.A.U, Haridwar and were randomly divided into two groups (20 patients in each). Out of which 3 patients went to LAMA. Group A was treated with *Yashtyadi Niruha Vasti* which was given in schedule for 2 courses of 10 days and with a gap of 7 days. Group B was given *Kaishore Guggulu* 500 mg BD for 30 days. The therapeutic effect of the treatment was assessed in both the groups based on both sign & symptoms and laboratory investigations. In Group A 10 patients showed moderate improvement (58.82%), 5 patients showed marked relief (29.41%), and 2 patients showed complete relief (11.76%). In Group B, 8 patients showed marked relief (40%), 7 patients showed moderate relief (35%), 3 patients showed complete relief (15%) and 2 patients showed mild relief (10%). Both the groups showed good effect by reducing the sign and symptoms of *Vatarakta* and reducing serum uric acid. *Yashtyadi Niruha Vasti* reveals encouraging results then *Kaishore Guggulu* by providing relief in symptoms of *Vatarakta*, and by reducing the serum uric acid level significantly.



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relief (15%) and 2 patients showed mild relief (10%). Both the groups showed good effect by reducing the sign and symptoms of *Vatarakta* and reducing serum uric acid. *Yashtyadi Niruha Vasti* reveals encouraging results then *Kaishore Guggulu* by providing relief in symptoms of *Vatarakta*, and by reducing the serum uric acid level significantly.

Keywords : Gout, *Vata*, *Rakta Vatarakta*, *Yashtyadi Niruha Vasti*.

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Introduction:

Adaptation of sedentary life style and neglecting the basic principles of *Dincharya* and *Ritucharya*, is causing a number of disease like *Vatarakta*, *Prameha*, *Sthoulya* etc. Among these various diseases *Vatarakta* is considered as a chronic illness which is commonly seen affecting nearly 14-17 percent of population every year. Prevalence of this disease is increasing and hence there is a need to cure it completely. Due to consumption of *Vatakara* and *Rakta Prakopak Nidana*, *Vata* gets aggravated, being obstructed in its course by vitiated *Rakta*, *Vata Dosh* vitiates the entire *Rakta Dhatu* and the disease thus called *Vatarakt*^[1]. First its *Sthanasamshrya* takes place in *Hasta* and *Padamoola* then it spreads to other parts of the body. According to *Ayurvedic* texts it has 2 *Avasta* or *stages*^[2] i.e *Uthana Vatarakta* and *Gambhira Vatarakta*.

Characteristics of *Vatarakta* mostly resembles to Gout. Gout is a disorder of purine metabolism and occurs when small crystals of uric acid in form of mono-sodium urate precipitate and deposit in joints or surrounding tissues^[3]. It occurs due to overproduction or less excretion of uric acid in the body. Under excretion has been found out to be the primary cause of hyperuricemia in almost about 90% of cases, while overproduction is the cause of less than 10%^[4]. It is mostly likely to affect the smaller joints, specially the metatarsophalangeal joint of the big toe. Uric acid is derived from exogenous sources, especially cellular protein foods such as liver, kidney, sweetbread, fish, pulses etc. The normal man excretes uric acid and urates through the renal glomeruli but reabsorbs 90% in the tubules; there is no evidence in the early stages of the disease of any impairment of renal function although this does occur later when secondary renal damage occurs and hence glomerular filtration becomes inefficient which results in under excretion of uric acid and the excess uric acid in the blood is deposited as sodium biurate. Gout tends to shorten life mainly due to cardiovascular changes and kidney diseases.

There is no complete cure for it in modern science/allopathy they only gives symptomatic relief and

symptoms again arises when favorable conditions come. In contemporary medical science, management of Gout is carried out with the usage of NASIDS, Colchicines, Glucocorticoids, Xanthine oxidase inhibitor, Uricosuric drugs^[5]. Long lasting usage of these drugs produces adverse effects and also reduces the effectiveness of the therapy. Whereas in *Ayurveda*, it has been explained in all the three *Brihatary* is along with the treatment. Both *Charaka* and *Vagbhata* explain *Ksheeravasti* as one of the main lines of treatment of *Vatarakta*.

Material and Method

Plan Of Study

I. Clinical study -

(A) Selection Of Patients - Patient's having symptoms regarding *Vatarakta* were subjected to laboratory investigation and the patients found with raised serum uric acid level were selected for the study. Total 40 patients were selected from the O.P.D. / I.P.D. of Hospital of Gurukul Campus of Uttarakhand Ayurved University, Haridwar and were randomly divided in two groups A and B (20 patients in each). The details of patients were recorded with the help of special Performa prepared for this purpose.

(B) Selection Of Drug

1. *Yashtyadi Niruha Vasti* And *Murchit Til Tail Anuvasana Vasti*
2. *Kaishore Guggulu*

(C) Duration Of Study - 30 days

(D) Drug Trial Schedule

GROUP A-

Therapy - *Yashtyadi Niruha Vasti* and *Murchit Til Tail Anuvasana Vasti*

Quantity of *Vasti Dravya* – *Yashtyadi Niruha Vasti* in dose of 400 to 700ml, empty stomach

- *Murchit Til Tail Anuvasana Vasti* in dose of 100 to 200 ml, after light intake of food. (Variable according to the constitution, strength and age of the subjects)

Duration - Two courses of 10 days scheduled with

interval of 7 days.

Vasti was given in this format:-

1 st Day	<i>Anuvasan Vasti</i>	6 th Day	<i>Niruha Vasti</i>
2 nd Day	<i>Niruha Vasti</i>	7 th Day	<i>Anuvasan Vasti</i>
3 rd Day	<i>Anuvasan Vasti</i>	8 th Day	<i>Niruha Vasti</i>
4 th Day	<i>Niruha Vasti</i>	9 th Day	<i>Anuvasan Vasti</i>
5 th Day	<i>Anuvasan Vasti</i>	10 th Day	<i>Anuvasan Vasti</i>

***Yashtyadi Niruha Vasti* and its method of administration:**

Preparation of *Vasti Dravya*

1. Preparation of *Yashtimadhu ksheerapaka*

400gms of *Yashtimadhu Yavkuta* is taken to this 400ml of milk, 1600ml of water is added and boiled and reduced to *Ksheera Avashesha* (400ml). This was freshly prepared for each procedure. (Prepared by method mentioned in *Charak Sidhi Sthana 3/46* (8 Pala *Yashtimadhu* + 8 Pala milk + 32 Pala water---reduced to 1/4th i.e. 8 Pala).

2. Preparation of *Yashtyadi Niruha Vasti*: (ref. C. Sa. Siddhi 3/46)

यष्ट्याह्वयस्याष्टपलेन सिद्धं पयः शताह्वाफलपिप्पलीभीः ।

युक्तं ससर्पिमधु वातरक्तवैस्वर्यवीसर्पहितो निरूहः ।। च.सि 3/46

The different components of *Vasti* are mixed in following way.

First 50 ml *Madhu* was taken, then 4 gm *Saindhava Lavana* was added and triturated thoroughly with a help of wooden churner, to this warmed 50 ml *Go-Ghritha* was slowly added and mixed well, then 25 gm *Kalka* made of *Sataha*, *Pippali* and *Madanaphala* was added; now 400ml *Yashtimadhu Ksheerapaka* which was freshly prepared was added. All the ingredients were thoroughly mixed and a preparation without sedimentation was obtained, this was made *Sukhoshna* by keeping it over *Ushna Jala*. The total amount of *Vasti* prepared was 500 ml. This proportion was taken as it is and the dose of *Vasti* was changed according to the patient.

Administration of *vasti*

On the day of *Niruha Vasti* - Patients were advised to come

empty stomach, after confirming digestion of previously taken food and before developing hunger every patient was given *Mridu Abhyanga* with lukewarm *Murchit Tila Taila* and *Nadi Sweda* locally over abdomen, buttocks and on thighs. Patient was asked to lie on the *Panchakarma Droni* in *Vama Parshwa* (left lateral position with right leg flexed); *anus* and *Vasti* nozzle was lubricated with oil and 500 ml *Sukoshna Vasti Dravya* was administered slowly with the help of *Vasti Netra* fitted with enema bag. Patient was asked to lie in supine position and to defecate on developing urge. The time of administration, the time of retention, *Pratyagamana Kala* & any complications if present was recorded.

Pathyapathya during treatment period

To prevent the adverse effects of *Vasti*, patients were advised to avoid *Katu-Tikta-Kashaya-Rooksha Ahara*, sexual intercourse, suppression of natural urges, excessive exercise, excessive speech, uneven sitting and lying postures, exposure to wind, cold, heat, dust, anger and grief. Patient was advised to drink hot water.

***Anuvasan Vasti* and Its Method of Administration:**

***Pradhana Karma*:**

On the day of *Anuvasan Vasti* - Patients were advised to carry some light food with him, after confirming digestion of previously taken food, every patient was given *Mridu Abhyanga* with lukewarm *Murchit Tila Taila* and *Nadi Sweda* locally over abdomen, buttocks and on thighs. Just before the administration of the *Vasti* patient was asked to eat some light food and lie on the *Droni* in *Vama Parshwa* (left lateral position with right leg flexed); *anus*

and catheter was lubricated with oil and 120 ml *Sukoshna Murchit Tila tail* was administered slowly with the help of catheter attached with syringe.

Paschaat Karma:

Patient was asked to take rest in supine position for about 30 minutes and then do daily activities as usual. Patients were advised not to retain or defecate by own but to defecate on developing urge.

Group B-

Therapy - Kaishore Guggulu (shrn/madym/7/70-81)

Dosage – 2 Tab B.D. (each tab of 250 mg) after meal

Duration - 30 days.

Collection of drug- Kaishore guggulu was used in Group B and was taken from Shree Dhootpapeshwar Limited.

(E) Assessment & follow up

The assessment of the patients was done before and after the complete course of treatment. Follow-up was done for 15 days after completion of treatment.

Inclusion criteria

1. Increased serum uric acid level more than 7mg/dl in male, more than 6mg/dl in female
2. Age group between 20-70 years.
3. Patients will be selected irrespective of sex, religion, occupation, habitat etc.
4. Patients fit for *Vastikarma*
5. Sign and Symptoms of *Vatarakta* i.e in *Sandhis* of *Paada* or *Hastha*, patients complaining of *Kandu*, *Daha*, *Ruka*, *Akunchan Prasaran Vedana*, *Sandhi Sotha*, *Sthabdhta*, *Supti*, *Sparshashatwa*, *Mandoulpatti*, *Shyavarakta Twak*, *Kathinya*, *Paka*, *Guruta*, *Bhed*.

Exclusion criteria

1. Atisthula and Atikrisha patients.
2. Patients with long standing use of corticosteroids.

3. Patients with severe toxicity.
4. Patients having serious systemic disorders (like chronic heart diseases, chronic renal disorders).
5. Patients with autoimmune diseases.
6. Pregnant female and lactating mother
7. Arthritis other than gout.

Criteria for withdrawal

1. Personal matters
2. Aggravation of complaints
3. Inter current illness
4. Leave against medical advice

Criteria for assessment

Assessment of the effect of treatment was done on the basis of following objective & subjective criteria before & after the treatment schedule.

Subjective parameters-

1. *Kandu*- Itching
2. *Daha*- Burning sensation
3. *Ruk*- Pain
4. *Aakunchana prasaran vedana*- Pain on flexion and extension
5. *Sandhisotha*- Oedema
6. *Stabdhta*- Stiffness
7. *Supti* – Numbness
8. *Sparshasahatwa*- Tenderness
9. *Mandalouttpati*- Circular patches over the body
10. *Shyava rakta tvak*- Brownish black, red coloration of the skin
11. *Kathinya*- Hardness
12. *Paka* – Suppuration of the joints.
13. *Guruta*- Heaviness
14. *Bhed*- Breaking pain

Objective parameters-

Biochemical Tests-

1. Serum uric acid
2. Hb %
3. T.L.C
4. D.L.C
5. E.S.R

These investigations were done in all the patients before and after completion of treatment to rule out changes and any other pathological condition.

Assessment of effect of the treatment on symptoms

The result obtained from individual patient was

categorized according to the following grades:

Complete cure	100%
Marked relief	≥ 75-99%
Moderate relief	≥51-74%
Mild relief	≤ 50 %
No relief	0%

Clinical assessment

The changes observed in the sign and symptoms were assessed by adopting suitable scoring method and the objective signs by using appropriate clinical tools.

The details of scoring pattern adopted for the assessment of clinical sign and symptoms are as follows.

SR. NO	PARAMETER	OBSERVATION	SCALE
1	<i>Kandu</i> (itching)	No itching	0
		Mild itching	1
		Moderate itching	2
		Severe itching	3
2.	<i>Daha</i> (burning sensation)	Absent	0
		Transient, no approach for its aversion	1
		Frequent , self approach for its aversion	2
		Regular seeking medical advice	3
3	<i>Ruka</i> (pain)	No pain	0
		Pain on movement, not during rest	1
		Pain during movement and rest	2
		Severe pain throughout the day, & disturbs the sleep	3
4	<i>Akunchan Prasaran Vedana</i> (pain on flexion and extension)	Not seen	0
		Mild pain on flexion and extension	1
		Moderate pain on flexion and extension	2
		Severe pain on flexion and extension	3

5	<i>Sandhisotha</i> (swelling in joints)	No swelling	0
		Swelling but not apparent	1
		Swelling obvious in 1 to 3 joints	2
		Swelling obvious on 4 or more joints	3
6	<i>Sthabdhta</i> (stiffness)	No stiffness	0
		Stiffness sometimes	1
		Stiffness quite often	2
		Stiffness continuous whole day	3
7	<i>Supti</i> (numbness)	No numbness	0
		Numbness off and on	1
		Numbness more often	2
		Numbness affecting daily activity	3
8	<i>Sparshasahatwa</i> (tenderness)	No tenderness	0
		Tenderness to palpation without grimace or flinch	1
		Tenderness with grimace or flinch to palpation	2
		Tenderness with withdrawal	3
9	<i>Mandlotpatti</i> (circular patch)	No Circular patch	0
		Circular patch < 5mm	1
		Circular patch <20mm	2
		Circular patch >20 mm	3
10	<i>Shyava Rakta Twak</i> (blackish red in colour)	Not seen	0
		Brownish black coloration of affected part	1
		Dark Reddish coloration of affected part	2
		Blackish red coloration of affected part	3
11	<i>Kathinya</i> (hardness)	No hardness	0
		Mild hardness	1
		Moderate hardness	2
		Severe hardness	3
12	<i>Paka</i> (supporation)	No paka	0
		Joint involved with paka	1
		Joint involved with paka and affect day today activity	2
		Joint involved with paka and part is not able to move	3

13	<i>Guruta</i> (heaviness)	No heaviness	0
		Mild heaviness, comes occasionally	1
		Moderate heaviness, but slight difficulty in joint movements	2
		Severe heaviness, more difficulty in moving the joint	3
14	<i>Bhed</i> (breaking pain)	No pain	0
		Slight breaking pain	1
		Pain affecting day today activity	2
		Pain associated with immobilization of particular part.	3

Observation and result

**Table No. I Effect Of *Yashtyadi Niruha Vasti* On Sign And Symptoms Of *Vatarakta* In Group A
(Wilcoxon Matched-Pairs Signed Rank Test)**

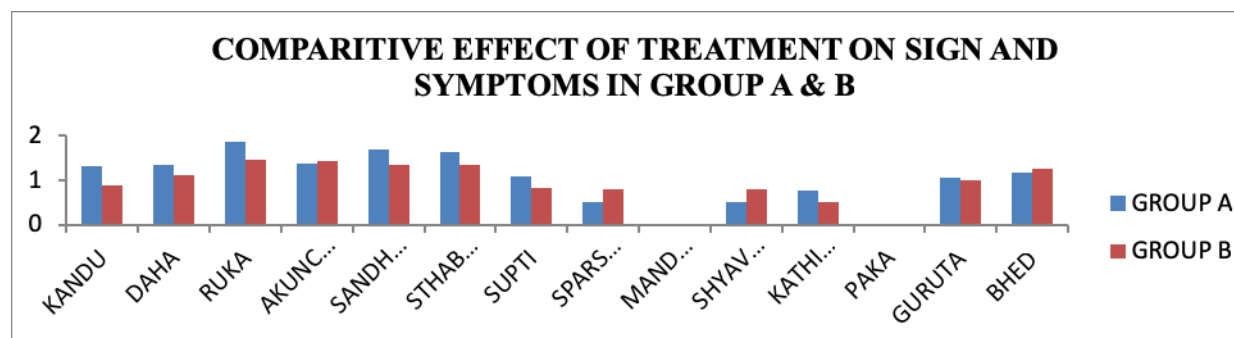
<i>Sign And Symptoms</i>	n	Mean		Mean Diff.	% Re-lief	SD±	SE±	P Value	S
		BT	AT						
<i>Kandu</i>	9	1.556	0.2222	1.333	85.71	0.5000	0.1667	0.0039	VS
<i>Daha</i>	6	1.833	0.5000	1.333	72.72	0.5164	0.2108	0.0313	S
<i>Ruka</i>	16	2.500	0.6250	1.875	75	0.5000	0.1250	<0.0001	ES
<i>Akunchan</i>	16	2.000	0.6250	1.375	68.75	0.5000	0.1250	<0.0001	ES
<i>Prasaran</i>									
<i>Vedana</i>									
<i>Sandhisotha</i>	13	2.077	0.3846	1.692	81.48	0.7511	0.2083	<0.0002	ES
<i>Sthabdhta</i>	17	2.118	0.4706	1.647	77.77	0.6063	0.1471	<0.0001	ES
<i>Supti</i>	11	1.455	0.3636	1.091	75	0.5394	0.1626	0.0020	VS
<i>Sparshasa-hatwa</i>	4	1.250	0.7500	0.5000	40	0.5774	0.2887	0.5000	NS
<i>Mandalotut-patti</i>	0	---	---	---	---	---	---	---	---
<i>Shyavarakta</i>	4	1.750	1.250	0.5000	28.57	0.5774	0.2887	0.5000	NS
<i>Twak</i>									
<i>Kathinya</i>	9	1.333	0.5556	0.7778	58.33	0.4410	0.1470	0.0156	S
<i>Paka</i>	0	---	---	---	---	---	---	---	---
<i>Guruta</i>	16	1.375	0.3125	1.063	77.27	0.5737	0.1434	0.0001	ES
<i>Bhed</i>	17	1.941	0.7647	1.176	60.60	0.3930	0.09531	<0.0001	ES

Table No. II Effect Of *Kaishore Guggulu* On Sign And Symptoms Of *Vatarakta* In Group B

(Wilcoxon Matched-Pairs Signed Rank Test)

Sign And Symptoms	n	Mean		Mean Diff.	% Relief	SD±	SE±	P Value	S
		BT	AT						
<i>Kandu</i>	9	1.222	0.3333	0.8889	72.72	0.3333	0.1111	0.0078	VS
<i>Daha</i>	9	1.667	0.5556	1.111	66.66	0.6009	0.2003	0.0078	VS
<i>Ruka</i>	20	2.250	0.7000	1.550	68.88	0.5104	0.1141	<0.0001	ES
<i>Akunchan</i> <i>Prasaran</i> <i>Vedana</i>	18	2.000	0.5556	1.444	72.22	0.6157	0.1451	<0.0001	ES
<i>Sandhisotha</i>	14	1.500	0.1429	1.357	90.47	0.8419	0.2250	0.0002	ES
<i>Sthabdhta</i>	18	1.722	0.3889	1.333	77.41	0.6860	0.1617	<0.0001	ES
<i>Supti</i>	11	1.182	0.3636	0.8182	69.23	0.4045	0.1220	0.0039	VS
<i>Sparshasahatwa</i>	5	1.400	0.6000	0.8000	57.14	0.8367	0.3742	0.2500	NS
<i>Mandalotutpatti</i>	0	---	---	---	---	---	---	---	---
<i>Syavarakta</i> <i>Twak</i>	5	1.400	0.6000	0.8000	57.14	0.8367	0.3742	0.2500	NS
<i>Kathinya</i>	6	1.167	0.6667	0.5000	42.85	0.5477	0.2236	0.2500	NS
<i>Paka</i>	0	---	---	---	---	---	---	---	---
<i>Guruta</i>	13	1.077	0.1538	0.9231	86.66	0.2774	0.07692	0.0005	ES
<i>Bhed</i>	19	1.895	0.6316	1.263	66.66	0.4524	0.1038	<0.0001	ES

Comparitive Effect Of Treatment Of Sign And Symptoms In Group A & B (Mann-Whitney Test)



On comparing both the groups statistically using Mann-Whitney Test symptom like ruka showed significant result (P value-0.0377). Other symptoms like *kandu*, *daha*, *akunchan prasaran vedana*, *sandhisotha*, *sthabdhta*, *supti*, *sparshasahatwa*, *shyavaraktatwak*, *kathinya*, *guruta* and *bhed* were found not significant statistically. Comparison between both the groups on *Vatarakta lakṣaṇa* indicates that Group A has given more relief on the symptoms than Group B.

Effect on serum uric acid level

On comparison of both the groups in Serum Uric Acid, Group A (*yashtyadi niruh vasti*) showed better results in lowering the serum uric acid with a Mean value 2.994. While in Group B, Mean value is 2.579. There was overall better results seen in Group A

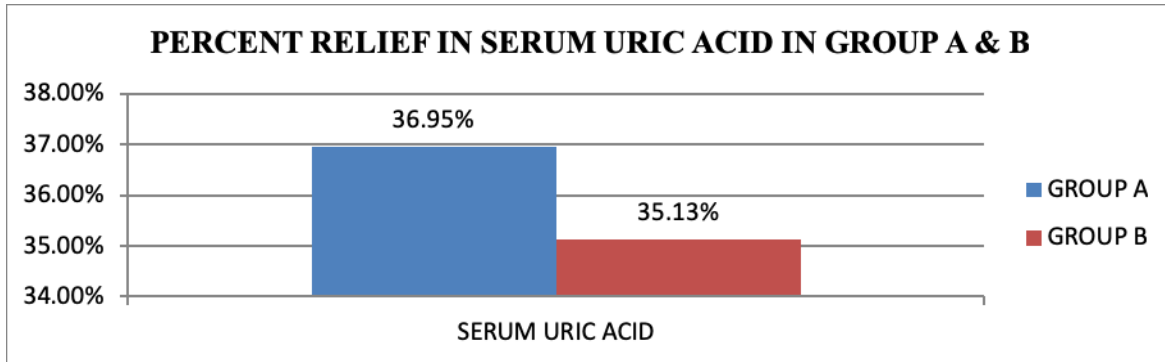
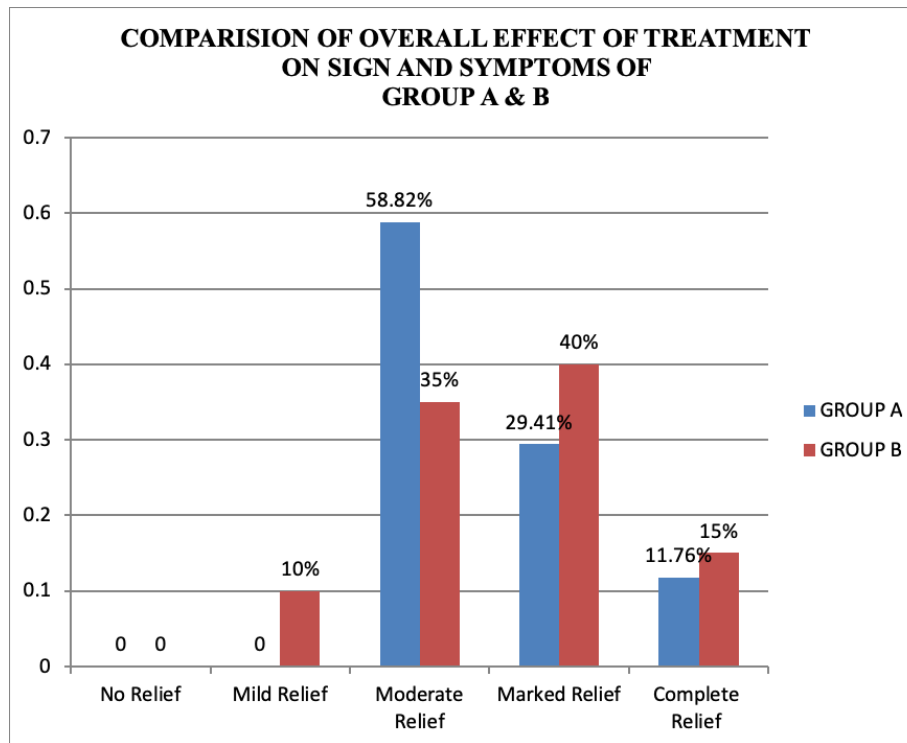


Table No. III Percent Relief In Sign & Symptoms In 37 Patients In Group A & B
(Total Bt- Total At)*100/ Total Bt)

Sr. No	Symptoms of <i>Vatarakta</i>	Group A (% Relief)	Group B (% Relief)
1	<i>Kandu</i>	85.71	72.72
2	<i>Daha</i>	72.72	66.66
3	<i>Ruka</i>	75	68.88
4	<i>Akunchanprasanran vedana</i>	68.75	72.22
5	<i>Sandhisotha</i>	81.48	90.47
6	<i>Sthabdhta</i>	77.77	77.41
7	<i>Supti</i>	75	69.23
8	<i>Sparshasahatwa</i>	40	57.14
9	<i>Mandloutpatti</i>	---	---
10	<i>Shyavarakta twak</i>	28.57	57.14
11	<i>Kathinya</i>	58.33	42.85
12	<i>Paka</i>	---	---
13	<i>Guruta</i>	77.27	86.66
14	<i>Bhed</i>	60.60	66.66

Comparison Of Overall Effect Of Treatment On Sign And Symptoms Of Group A & B



On the basis of the specific scoring pattern adopted, the total effect of therapy had been carried out which shows that in Group A 2 patients (11.76%) showed complete relief (100% relief), marked relief ($\geq 75-99\%$ relief) in 5 patients (29.41%), moderate relief ($\geq 51-74\%$ relief) was seen in 10 patients (58.82%). In group B, 3 patients (15%) showed complete relief, 8 patients (40%) showed marked relief, 7 patients (35%) showed moderate relief, mild relief ($\leq 50\%$ relief) was seen in 2 patients (10%).

Discussion

Vatarakta is caused by *Vata Prakopaka Hetu* & *Rakta Prakopaka Hetu*. This *Prakupita Vata* along with *Rakta Dushti* moves throughout the body and takes *Sthanasamshraya* at the *Padangustha Sandhi* due to its *Vyadhiprabhava*. *Vatarakta* is considered as *Avaranjanya Vatavyadhi*. Due to properties like *Sukshmatva* (subtle) and *Saratwa* (fluidity) of *Vayu*, *Dravatwa* (liquidity) and *Saratwa* (fluidity) of *Rakta* they spread all over the body. The spreading is facilitated by *Vyana Vayu*. The *Doshas* get lodged in *Sandhies*. The main and first site of manifestation is *Pada Mula* (1stmetatarsophalangeal joint) and then *Hasta* and *Pada*

and from there onwards spread upwards. The process of spreading of manifestations can be understood similar to that of rat poison.

According to *Acharya Charak*, *Vasti* is the best remedy for the disease *Vatarakta*. As the disease affects the leg, indicative of predominant of *Vata* vitiation, *Vasti* is the best option. So, in this study *Yashtyadi Niruha Vasti* which have main ingredient of *Yastimadhu* and *Dugdha* have been selected.

Probable mode of action of *Yashtyadi Niruha Vasti*

The disease *Vatarakta* originates in *Pakwasaya*, so it is the nearest way to expel the *Doshas* through *Vasti*. In the context of *Vatarakta Chikitsa* both *Acharya Charaka* & *Vagbhata* have explained administration of *Sagritha Ksheera Vasti* & *Ksheera Vasti* in the management of this disease.

Though, *Ksheera Vasti* is administered continuously it will not aggravate the *Vata Dosha* because it contains *Ksheera* as the main ingredient having the properties like *Madhura Rasa*, *Snigdha Guna* & *Sheeta Veerya*. It acts

as *Mridu Niruha Vasti* which acts as a *Dosha Shaman* and *Brimhana Vasti*. The ingredients used in *Yashtyadi Niruha Vasti* have following properties which helps in *Samprapti Vighatana* and hence curing symptoms of *Vatarakta*.

1. *Madhu*- Increases general metabolism, it is *Yogvahi* and hence acts as a carrier for the drug, because of its *Sukshma Guna* it reaches the micro channels, in turn carries the drug (potency of the drug) at the molecular level through micro channels
2. *Saindhav* – Acts as laxative and liquefies the morbid *Dosha Sangathna* and breaks it into smaller particles by the virtue of its *Ushna* and *Tikshna Guna*. Also helps in carrying the active principles of the drug to actual site of *Dosha Dushya Sammurchana*.
3. *Go - Ghrita*- Because of being *Yogavahi*, removes toxic substance from the body. Owing to the *Snigdha Guna*, it produces unctuousness in the body in turn helps in easy elimination and *Sukshma Guna* it help the drug (potency of the drug) to reach into micro channels. It also protects the mucous membrane from untoward effect of irritating drugs in the *Vasti Dravya*.
4. *Kalka Dravya*-
 - a. *Pippali* – *Madhura* and *Anushna Sheeta* properties helps in *Raktashodhan*, *Shoolprashman*, *Vatanuloman*.
 - b. *Madanphala* - *Sothahara*, *Vednasthapak*, *Raktashodhak*, *Kusthghna*, *Asthapnopaga*
 - c. *Sataha*- *Sheeta Virya* , *Madhura Vipaka* cures burning sensation and inflammation.
5. *Yashtimadhu*- *Dahashamaka* due to *Sheeta Virya*, *Madhura Rasa* and it is *Vatapitta shamaka*, *Sothahara*, *Kandughna*.
6. *Go - Dugdha* - *Madhura Rasa* and *Sheeta Virya* acts as *Vatapitta Shamaka*.

2/3rd of Serum uric acid is excreted through the gut and the remaining 1/3rd through the kidneys. The

excretion of uric acid through gut may be hampered in hyperuricemic cases. *Vasti* improves the excretory function of the intestine, thus may be helpful to evaluate uric acid excretion through gut. Along with this high dose administration of *Yashtimadhu*, it act as Analgesic and Anti-inflammatory and reduces the E.S.R values in the patients. *Yashtimadhu* acts on *Vatarakta* with its different properties. The active ingredients of *Yashtimadhu* absorbed through *Vasti*, get dissolved in *Rasa* and *Rakta*. *Yashtimadhu* acts on vitiated *Pitta* and *Rakta* by *Madhura* and *Sheeta Guna* and neutralizes the excessive *Amla Guna* of *Rakta* by *Madhura Rasa*. It also improves the kidney function through its *Mutrala* and *Mutra Virajaniya* properties. These observations suggest that this therapy not only produces symptomatic relief but also control the disease process and may cause long lasting effect.

Probable mode of action of *Kaishore Guggulu*

It is a drug of choice in *Vatarakta* (gout). It corrects the purine metabolism and checks on uric acid production. It also improves the elimination process of uric acid through urine. Anti inflammatory properties of *Guggulu*, *Guduchi*, *Sunthi* and *Trivrit* relieves in inflammation induced by crystals to synovial membrane and adjacent tissues. *Amlaki* and *Sunthi* acts as analgesic relieving in *Ruka* (pain), *Bhed* (breaking pain). *Haritaki* and *Amlaki* has adaptogenic property reducing acute attacks in gout patients. *Danti* and *Pippali* have immunomodulator property, hence reducing symptoms of (*Vatarakta*) gout.

Conclusion

Yashtyadi Niruha Vasti is an effective and safe treatment of *Vatarakta* and reduces elevated serum uric acid efficiently. It is more effective in the management of *Vatarakta* when compared with *Kaishore Guggulu* as there was reduction in most of the signs and symptoms of the disease at significant level. It is an effective, relatively safe and cost-effective treatment modality for management of *Vatarakta*. The effect of *Yashtyadi Niruha Vasti* is due to the special medicinal properties of *Yashtimadhu* such as *Sothahara*, *Vatanuloman*, *Vedanasthapana*, *Dahashaman* & *Rasayan* effect, and due to properties

of other ingredients like *Dahaprashaman*, *Sothahara*,
Raktashodhan, *Vedanasthapan*.

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सारांश:

वातरक्त रोग पाचन क्रिया से संबंधित है। वातरक्त व्याधि में रोगी की पादऽङ्गुल्यास्थि में तीव्र प्रदाह, संधिशोथ एवं रुक् होता है। सामान्य रूप से यह व्याधि आढ्य व्यक्तियों में होती है। वातरक्त व्याधि, आधुनिक मतानुसार गाऊट व्याधि रक्त में युरिक अम्ल की मात्रा बढ़ने के कारण होती है। युरिक अम्ल की बढ़ी हुई मात्रा क्रिस्टल के रूप में अस्थियों के संधि स्थल एवं आस-पास के ऊतकों पर जमा हो जाती है। इस अध्ययन में वातरक्त से पीड़ित 17 रोगियों को यष्ट्यादि निरुह बस्ति दी गई एवं 20 रोगियों को केशोर गुग्गुल का सेवन करवाया गया। दोनों समूहों का अवलोकन शास्त्रोक्त लक्षणों तथा युरिक अम्ल की मात्रा के आधार पर किया गया तथा पाया गया कि समूह ए (यष्ट्यादि निरुह बस्ति) का परिणाम समूह ब (केशोर गुग्गुल) से बेहतर पाया गया।

निष्कर्ष - वर्तमान अध्ययन से स्पष्ट होता है कि यष्टिमधु क्षीरपाक विधि से बनी बस्ति वातरक्त व्याधि को दूर करती है।