



Scope Of Integration In Rheumatology

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ABSTRACT-

Rheumatology is a branch of Medical Science which includes various joint disorders like Rheumatoid arthritis, Osteoarthritis, Lumbar Spondylosis and spondylitis, Ankylosing Spondylitis, Cervical Spondylosis and Spondylitis and etc. In Modern Medicine that is Allopathy there are many limitations regarding Symptomatic Treatment which includes Adverse Drug Reactions, Contraindications, Overdosage and Systemic complications. Hence to overcome these limitations there is a great scope for Integration in AYUSH (Ayurveda, Yoga, Unani, Siddha, Homeopathy) System of medicine in Rheumatology. Ayurveda plays an important role in prevention as well as treatment of joint disorders. Yoga showcases varied asanas and postures advised in joint disorders. Unani plays an important role in following the principles of The Hellenistic origin of Unani medicine is still visible in its being based on the classical four humours: phlegm (*balgham*), blood (*dam*), yellow bile (*safrā*) and black bile (*saudā*), but it has also been influenced by Indian and Chinese traditional systems. The principle of treatment aims at restoring the normal temperament, and correcting the imbalance in the *Khilt* (humour) through *Imala* (Diversion of morbid material) and *Istifraagh* (Evacuation of morbid material). Siddha also has an important role to play in joint disorder as Siddha practitioners believe that five basic elements— earth, water, fire, air, sky – are in food, "humours" of the human body, and herbal, animal or inorganic chemical compounds, such as sulfur and mercury, used as therapies for treating diseases. Homeopathy is one of the most popular holistic systems of medicine that

includes the theory of individualization and symptoms similarity by using holistic approach. This paper intends to explore the scope of integration in Rheumatological disorders.

Keywords: *Amavata, Sandhigatavata, Vatavyadhi*, Rheumatology, Ayurveda, Yoga, Unani, Siddha, Homeopathy

INTRODUCTION-

Rheumatology is a branch of medical science that involves the various disorders of joint like Rheumatoid Arthritis (*Amavata*), Osteoarthritis (*Sandhigatavata*), Ankylosing Spondylitis, Lumbar spondylitis, Cervical Spondylitis, Systemic Lupus Erythomatosus, Osteoporosis, Osteopenia, Gout, Gouty arthritis, Autoimmune disorders, Avascular Necrosis of femur Head and etc. It can also be considered as a branch of science concerned with medical disorders of locomotor system is called rheumatology, which can be divided into three categories; Arthritis, Back pain and soft tissue Rheumatism. The signs and symptoms in joint disorders are mainly related to joints such as pain, inflammation, infection, temperature, crepitations, swelling, immobility or disability, erythema as well as systemic symptoms like prolonged morning stiffness, fever, weight loss, fatigue. The Diagnosis is done with the help of many factors like History, Physical examination and laboratory testing such as Complete Haemogram, tests for serum autoantibodies, synovial fluid examination, ASO titres, HLA-B27, Protein electrophoresis, serum uric acid as well as Radiology and Imaging techniques such as Joint X-ray, Ultrasonography, Radioisotope bone scan, CT Scan, MRI Scan, DEXA Scanning, Positron emission tomography, Arthroscopy depending on the causative factors and the joints involved. The goal of therapy in Rheumatology Practice is Control of pain and inflammation, protection of articular structures, maintenance of joint functions and control of systemic manifestations. The main aspects of medical treatment includes use of NSAIDs, DMARDs while surgical intervention includes arthroplasty, total joint replacement, synovectomy depending on the aetio-pathogenesis. Physiotherapy and rehabilitation along with exercise therapy is also fruitful in joint disorders.

The treatment modalities in allopathy have many limitations in itself. Long term use of NSAIDs may cause adverse drug reactions in gastrointestinal tract like gastritis, stomatitis, ulceration in small bowel, peptic ulceration, bone marrow like thrombocytopenia, integument system like rashes, erythema, renal system like ARF, electrolyte disturbances, oedema, CNS involvement like headache, tinnitus, insomnia, interactions with antihypertensive drugs. The long-term use of DMARDs also causes various adverse drug reactions like retinopathy, pruritis, cytopenias, alopecia, oral ulcers, infections, diarrhoea, hair loss, neuropathy, proteinuria, malignancy, neutropenia, septicaemia and etc. Thus, the quality of life is compromised greatly allopathy management of joint disorders in the long term.

AYURVEDA-

Ayurveda plays an important role in prevention as well as treatment of joint disorders. Ayurveda is a holistic science based on the principles of *Tridosha*, *Sapta Dhatu* and *Trimala*. It diagnoses and treats the disease conditions on the basis of *Ashtavidha Pariksha* and *Dashavidha Pariksha* and *Panchabhoutik Gunas*. Rheumatology is classified as *Vatavyadhi* according to Ayurvedic *Granthas*. They have subclassified *Vatavyadhi* as *Upasthambhit* and *Nirupasthambhit* in other words nothing but *Avaranjanya Vatavyadhi* and *Dhatukshayajanya Vatavyadhi*. According to Ayurveda *Vata Dosha* and *Asthi Dhatu* have *Ashrayashrayi Bhavas* which means the general line of treatment in *Vatavyadhi* is *Vatashamaka* and *Asthiposhaka Chikitsa*. *Nidanaparivarjan*, *Shodhana* and *Shamana Chikitsa* are the mainstay of treatment. According to *Charaka Samhita* 28th chapter the *Samanya Chikitsa* of *Vatavyadhi* is *Parishek*, *Abhyanga*, *Basti with Sarpi*, *Taila*, *Vasa*, *Majja*. *Bahya Snehana and Nadi*, *Prastara and sankara sweda*, *madhura*, *amla*, *lavana rasasevana*, *brimhana and rasayana chikitsa*. The various *Pathya Apathya* that is routine dietary regimens is advised in *Vatavyadhis*. Thus, ayurvedic management of *Vatavyadhi* includes preventive as well curative aspect. The Classical Ayurvedic Medicines used in the treatment of Rheumatic Disorders are *Yogaraj Guggulu*, *Mahayogaraj Guggulu*, *Vatavidhwansaka rasa*, *Mahavatavidhwansaka rasa*, *Brihatvatachintamani rasa (Plain and with Gold)*, *Rasnadi Guggulu*, *Vatari Guggulu*, *Dashamoolarishta*, *Maharasnadi Kadha*, *Rasnasaptaka Kadha*, *Rasnapanchaka Kadha*, *Ashwagandha Churna*, *Rasna churna*, *Lakshadi Guggulu*, *Trayodashanga Guggulu*.

YOGA-

Yoga showcases varied asanas and postures advised in joint disorders. Yoga, a mind-body discipline which originated in India some 5000 years ago, has become one of the most popular forms of exercise and fitness activity since 2008. As an exercise activity, it is generally composed of postures, breathing and meditation or relaxation and research on its health benefits has increased over the years. Yoga is an ancient Indian science intended to help an individual to advance spiritually. According to the eight limbs of yoga of the sage Patanjali the techniques prescribed begin with following certain ethical principles 1) *Yamas* and 2) *Niyamas*. After this, a practitioner performs specific physical postures 3) *Asanas* which allows the practitioner to remain in the same posture without moving which is considered necessary before meditation, practices voluntarily regulated yoga breathing practices. 4) *Pranayamas*, withdraws the mind from sense objects. 5) *Pratyahara*, practices concentration. 6) *Dharana* and Meditation 7) *Dhyana*. At this stage the practitioner is supposed to attain a state of self-realization. 8) *Samadhi or Nirvana* in Buddhist Philosophy. In Rheumatology the Asanas like *Bhujangasana*, *Shalabhasana*, *Sharir-Sanchalana*, *Bramhamudra*, *Akarna Dhanurasana*, *Dhanurasana*, *Chakrasana*, *Halasana*, *Matsyasana*, *Sarvangasana*, *Gomukhasana*, *Shavasana*, *Virasana*, *Natarajasana*, *Setubandhasana*, *Vrukshasana*, *Siddhasana*. The Yogic *Kriyas* like *Kapalbhati* and *dhouti* have significant benefits in *yogasanas*.

UNANI-

Unani plays an important role in following the principles of The Hellenistic origin of Unani medicine is still visible in its being based on the classical four humours: phlegm (*balgham*), blood (*dam*), yellow bile (*ṣafrā*) and black bile (*saudā*), but it has also been influenced by Indian and Chinese traditional systems. The principle of treatment aims at restoring the normal temperament, and correcting the imbalance in the *Khilt* (humour) through *Imala* (Diversion of morbid material) and *Istifraagh* (Evacuation of morbid material). In Unani system of medicine, Arthritis is described under a broad term *Waja-ul-Mafasil* which encompasses entire joint disorders like inflammatory, non-inflammatory, infectious, metabolic and other musculo-skeletal disorders. On deep insight of Unani literature, arthritis can be correlated with various types of *Waja-ul-Mafasil* in resemblance to the predisposing factors, aggravating factors and pattern of joint involvement. The aim of treatment for patient with *Waja-ul-Mafasil* is to reduce morbidity and disability. The principle of treatment aims at restoring the normal temperament and correcting the imbalance in the *Khilt* (humour) through *Imala* (diversion of morbid material) and *Istifraagh* (Evacuation of morbid material). The treatment of *Waja-ul-Mafasil* in unani system of medicine is carried out by using one of three modes or with combination of *Ilaj bit Tadbeer wa Ilaj bit taghzia* (Regimental therapy and Dietotherapy), *Ilaj bid Dawa* (Pharmacotherapy), *Ilaj bid Yad* (Surgical therapy).

Keeping in view side effects of current treatment modalities of arthritis, it can be concluded that Unani mode of treatment provides an alternate method of treatment, being both economical and free of side effects to a maximum level. The general line of treatment in Unani medicine for Arthritis is Analgesia and Anti-inflammatory Drugs to relieve signs and symptoms, *Ta 'deel-e-Mijaz* (Correction of deranged temperament), *Tanqiya-e-Madda/ Istifragat-e-Madda* (evacuation of morbid material), via *Fasd* (Venesection), *Hijamah* (Cupping), *Munzij-wa-Mus'hil* therapy (concoction and purgatives), *Mo'ariqat* (diaphoretics), *Muddirat* (diuretics) and *Muqqiyat* (emetics), Strengthening of *Quwat-e-Mudabbira-e-Badan* (medatrix naturae), *Tabreed* (cold sponging), *Nutool* (pouring of decoction of drugs), *Bukhoor* (Vaporization), Aabzam (feet bath), Riyazat (exercises). Roghaniyat (Oils). Some of the Compound Unani Formulations (Murakkabat) are Habb-e-Suranjan, Habb-e-Asgandha, Jawarish Jalinoos, Jawarish Safarjali, Majoon Ushba, Majoon Najah, Tiryaaq-e-Kabir, Tiryaaq-e-Farooque. Unani Formulations used for Local Application are Roghan-e-Suranjan, Roghan-e-Qust, Roghan-e-Kuchla, Roghan-e-Hanzal and etc.

SIDDHA-

Siddha also has an important role to play in joint disorder as Siddha practitioners believe that five basic elements– earth, water, fire, air, sky – are in food, "humours" of the human body, and herbal, animal or inorganic chemical compounds, such as sulphur and mercury, used as therapies for treating diseases. Since time immemorial Siddha system of medicine, the heritage of the family practice of South India is a special scientific significant most respectable and of high order one. Herbs, minerals and products of animal origin are basic raw materials of the Siddha system. Siddha system of medicine caters a totality of herbs, and is unique in exhibiting fewer side effects. Secondly Siddha Medicine has a better answer for curing refractive

diseases like arthritis, cancer, bronchial asthma, etc. The name Siddha owes its origin to medicinal ideas and practices of a class of Tamil Sages called the Siddhar-perfected or holy immortals, who had firm faith in the deathless physical body being in tune with the spiritual immortal soul. Originally diseases are classified according to the three humours as *vali noi*, *azhal noi* and *iyya noi*. *Yugimamunivar* have classified diseases authentically on the basis of clinical signs, symptoms, humoral and regional pathology. siddha literature claims that there exist 80 varieties of *vali* diseases. The nomenclature of *vali* disease is based on the concerned organ/system associated with clinical signs and symptoms along with the vitiated humours namely *vali*, *azhal* and *iyyam*. *Vali* disease is a generic name comprising a number of clinical entities associated with deranged *vali* humour, pain, loss of function etc. the examples of *vali* disease that can be compared to current day clinical manifestations are psoriatic arthritis (*Kalanjagam*), synovitis or synovial arthritis (*Narithalai vali*) and inflammation of the origin of joint (*Uthiravatha sronitham/vali Azhal keel Vayu*). In general among the Indian systems of medicine, siddha uses herbs prominently.

Accordingly, it is advised to administer first pure herbs in the form of liquid, powder, pill or paste. If it is not controlling then the physician use mixture of herbs, metals, minerals and animal products in addition to herbs. In siddha pharmacopoeia various herbs and their parts have been widely used for the different types of *keel vayu* since 5000 years. In siddha system, equal importance has been given to internal as well as external medicine because siddha medicine advocates 32 types of internal and 32 types of external medicines with their shelf life. Medicated powder from herbs is a common type of internal medicine and is used as a baseline treatment for all ailments including arthritis. For eg-root of *withania somnifera dunal* powder (*choornam*). Another type of internal medicine is potion, which gets absorbed quickly within our system and facilitates faster action that is of greater importance in arthritis treatment. Eg seed of *Cuminum cyminum* Linn. Potion (*kudineer*). Furthermore, internal medicines are administered in the form of pill (*Mathirai*), electuary (*Legiyam*), oil (*Ennai*), ghee (*Nei*) etc. eg-fruit of *piper nigrum* Linn-pill, seed of *Terminalia chebula* Retz-oil seed of *Semicarpus anacardium* Linn ghee. External therapy includes fomentation (*Ottradam*), poultice (*Patru*), oilation (*Thailam*), etc. This type of therapy is applied to the skin to release swelling or pain so as to alleviate the deranged *vali* humour by bringing in fresh energy by improving cutaneous circulation and neural conductivity, eg leaf of *Vitex negundo* Linn-fomentation, root of *Zingiber officinale* Roxb-poultice and seed of *Strychnos nux-vomica* Linn-oleation.

HOMEOPATHY-

Homeopathy is one of the most popular holistic systems of medicine that includes the theory of individualization and symptoms similarity by using holistic approach. Homeopathy is one of the most popular holistic systems of medicine. The selection of remedy is based upon the theory of individualization and symptoms similarity by using approach. This is the only way through which a state of complete health can be regained by removing all the signs and symptoms from which the patient is suffering. The aim of homeopathy is not only to treat rheumatoid arthritis but to address its underlying cause and individual susceptibility. The unique physical, emotional and mental expression of illness is characteristic and is used to channel the course of homeopathic treatment. The remedies work by stimulating the body's natural ability

to heal itself, acting as a catalyst for healing. As far as therapeutic medications is concerned, several well-proved remedies are available for rheumatoid arthritis which can be selected on the basis of cause, location, sensation, modalities and extension of the complaints. Some of the common and important homeopathic remedies are Aconite, Actea spicata, Arsenicum, Belladonna, Bryonia, Calcaria Fluoride, Causticum, Medorrhinum, Natrum Muriaticum, Rhus Tox and Salicylic acid.

CONCLUSION -

Rheumatology deals with various aspects of varied joint disorders. The Allopathy medicine in chronic phase of joint disorders management has many untoward effects that can affect the quality of life. Hence a sincere attempt has been made by illuminating the facts in Indian System of Medicine (I.S.M.) Literature or AYUSH literature regarding the integrated approach towards disease management. AYUSH System of Indian Medicine not only has curative aspect but also preventive role in its management and plays a vital role in improving the quality of life in the diseased person.

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Disclosure of conflict of interest

The authors declare that there was no conflict of interest regarding the publication of manuscript.

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