



An Integrated Approach To *Kampavata* With Special Reference To Parkinsons Disease : A Case Study

Prof. Dr. Sachinkumar Sahebrao Patil,^{1*}

Ph.D. (*Kayachikitsa*), M.D. (*Kayachikitsa*), M.B.A. (H.R.), M.A. (*Sanskrit*), P.G.D.E.M.S., D.Y.A.

Professor and H.O.D., Ph.D. Guide, M.D. Guide, Department of Kayachikitsa, M.A.M.'s Sumatibhai Shah
Ayurveda Mahavidyalaya Malwadi, Hadapsar, Pune-411028, Maharashtra State, India.

Abstract

Parkinson's disease is a progressive degenerative neurological disorder which mainly affects the motor system of body and it is characterized by resting tremors, slowness of movements, rigidity, gait disturbances/postural instability. It is correlated with *Kampavata* [Disease associated with tremors in body] in *Ayurveda*, as it is characterized by *Sarvanga Kampa* / *Shiro Kampa* [tremors all over body or tremors in head]. It is a *Vata Vyadhi* which occurs due to pathological increase of *Chala Guna* of *Vata*. Treatment consists of both internal and external administration of different forms aimed to reverse pathology of *Vata* imbalance. Here, a case of 67 years male patient presented with tremors in both hands and neck, unable to walk without support since 6 years. Patient was treated with Panchakarma therapies; like *Sarvanga Abhyanga*, [External oil massage] *Bashpa Sweda*, [sudation therapy] , *Shiro Pichu* [Oil soaked cotton pad putting on head] and *Shamana Aushadhis* like *Tab Vatavidhwansa Rasa*, *Kapikachu Beeja Choorna* [*Mucuna pruriens*], *Ashwagandha Choorna*, [*Withamnia somnifera*] for 1 month. The patient got remarkable relief in symptoms with above *Panchakarma* and Ayurveda medicines.

Keywords: *Parkinsons disease, Parkinsonism, Kampavata, Kapikachu Beej*

Introduction

Parkinson's disease is a long term degenerative neurological disorder that mainly affects motor system. The mean age of onset of this disease is 60 years. It is estimated that, there are 5 million people all over the world suffering from this disease.¹ The clinical features are resting tremors, cog wheel rigidity, bradykinesia & postural instability. It is caused by deterioration of neurons in an area of brain known as substantia nigra. These neurons produce dopamine which helps in communication between substantia nigra and other areas of brain. The communication coordinates smooth and balanced muscle movements. Lack of dopamine results in abnormal nerve toning, causing symptoms of the disease. In early stages symptoms like tremors, rigidity, gait impairment, difficulty in walking are seen and in later stages dementia, sleep disturbances, speech difficulties, dysphagia, constipation, urge incontinence and nocturia are seen.

In Ayurveda due to similar disease presentation Parkinson's can be compared with *Kampavata*. *Kampavata* has been described under *vataja nanatmaja vyadhi* in Ayurveda. *Kampavata* is described with symptoms like *karapadatala kampa* (upper lower limbs tremors), *Stambha* (rigidity), *chestasangha* (bradykinesia & akinesia), *vakavikruti* (disturbance in speech).

CASE REPORT

A 67 years old male patient came to Kayachikitsa (Medicine) OPD of Sane Guruji Hospital, Malwadi, Hadapsar, Pune on 30th May 2024.

Patient name – xyz,

Age/ sex – 67/M,

Chief Complaints –

- Difficulty in walking without support
- Involuntary tremors in both upper limbs and neck
- Sleep disturbances
- Difficulty in speech since 6 years.

History of present illness - Patient was asymptomatic 6 years ago, he developed tremors in both of upper & lower limbs and neck, difficulty in walking without support, and gradually he developed difficulty in sleep initiation & difficulty in speech.

No history of any other major medical or surgical illness.

Family history – Positive for Parkinsonism.

DISEASE PRESENTATION

General examination

Weight – 57 Kg

Height – 5.8 ft.

BP – 110/70 mm of hg

Pulse – 78/min

Respiratory rate – 18/min

Pallor – no

Appetite – reduced

Bowel/bladder habit – constipation on / off with increased micturition

Sleep- reduced sleep with increased episodes of wakefulness

Systemic Examination

Respiratory system – No added sound

Cardio vascular examination – s1, s2 was normal, no murmur was found

Locomotor examination – Patient was unable to walk properly without support. Festinating gait with tremors in both upper and lower limb was found.

CNS Examination

Higher mental function – slow, slurred speech

Muscle movements Coordination – poor

Tandem walking - normal

Romberg's sign – normal

Finger to nose test –Negative, patient was not able to do it perfectly due to tremors.

Involuntary movements – resting tremors in both upper & lower limbs were found.

ASHTAVIDHI PARIKSHA

1. Nadi Vataj

2. Mala Niram

3. Mutra Muhurmuhu Mutra Pravrutti

4. Jiwha Saam

5. Drika Samanya

6. Shabda Ksheena, Aspashtha

7. Sparsha Khara

8. Akruthi Krisha

Laboratory investigations Values

Hematological investigations

WBC	11700 /uL
Neutrophils (%)	60.3
Lymphocytes (%)	27.1
Monocytes (%)	6.7
Eosinophils (%)	5.2
Basophils (%)	0.7
Haemoglobin (g/dL)	13.7
Platelets (lac/uL)	3.28
ESR (mm/h)	22

Biochemical investigations

Blood urea (mg %)	14.4
Serum creatinine (mg/dL)	0.52
Liver function test	
SGOT (IU/L)	16
SGPT (IU/)	13.1
Alkaline phosphate (IU/L)	127.2

USG (Abdomen and Pelvis) – NAD

ECG – Sinus rhythm

2D ECHO – Normal echo study

Urine analysis (routine and microscopic) Within limits

Serology - Negative

TREATMENT

Medicines	Dose, time & anupan	Total duration
<i>Kapikachu Beeja Choorna</i> (<i>Mucuna Pruriens</i>) + <i>Ashwagandha Choorna</i>	5gm each in morning time with milk	1 month
<i>Shiro Abhyanga</i>	<i>Brahmi Taila</i>	15 days
<i>Sarvanga Abhyanga</i> followed by <i>Bashpa Sweda</i>	<i>Til Taila</i>	15 days
<i>Shiro Pichu</i>	<i>Brahmi Taila</i>	From 11th day to 20th day
<i>Tablet Vatavidhwansa Rasa</i>	2 tab (250mg) three times a day daily with <i>koshna jala</i>	30 days

Tablet Syndopa Plus 1 tab daily Was continued
(Levodopa 100mg ,
Carbidopa 25mg)

DISCUSSION

The patient showed mild to moderate improvement in his clinical symptoms. He was able to walk without support after one month of treatment and also his tremors were significantly reduced. His sleep was more proper and the episodes of wakefulness also became less.

As *Kampavata* is a *Vata Vyadhi*, which is a progressive neurological disorder due to impairment in *Chala Guna* of *Vata*, so that *Vatahara* treatment should be adopted for this, both external as well as internal. When *Vata* is vitiated to its peak level, it tends to deplete all the tissues in the body; the *Pitta* and *Kapha Doshas*, the immunity and life span of an individual. Thus, control of *Vata* is the only key in treatment of Parkinson's disease. Hence, removal of *strotodushti*, *Vata Shamana*, *Vatanulomana* and *Rasayana* therapy by the administration of effective medication and treatment will lead to effective cure of Parkinson's disease and also have to avoid *Vata Prakopakara Ahara* and *Vihara*.

So, here *Shiro Abhyanga*, *Sarvanga Abhyanga*, *Bashpa Sweda*, and *Shiro Pichu* were adopted to calm the *Prakupitha Vata* as external measures. Here, for *Shiro Abhyanga* and *Shiro Pichu* were done by using *Brahmi Taila* due to its *Medhya Rasayana* and stress relieving action which helps to calm the nervous system as *Kampavata* is a neuro degenerative disease, it is treated by *Rasayana* approach in Ayurveda.; so that, his damaged nerves get proper stimulation by means of proper increase blood circulation to brain which in turn helps in reversing the pathological process to an extent. *Sarvanga Abhyanga* with *Tila Taila* will help in the strengthening of muscles, bones and joints, provides analgesic effect, nourishment of *Sushka Dhathus* and also do *Vatahara* and *Vatanulomana* action by doing *Abhyanga* in *Anuloma Gati* which will also hampers the *Viguna Gati* of *Vata Dosha* in the pathology. *Bashpa Sweda* using *Vatahara Kashaya* will also help in *Vatahara* action and also helps in reducing the stiffness of the body.

Kapikacchu beej (*Mucuna pruriens* seeds) have been reported to be a good source of 3, 4 dihydroxyphenylalanine (L-Dopa). The alcohol extract of *mucuna pruriens* seeds have four alkaloids viz. mucinine, mucinadine, prurienine, prurieninine. The seed extract shows potent antiparkinson effect in mice. The past researches are supporting one of the most potent natural sources for dopamine replacement treatment. *Ashwagandha* has been known for its tranquilizing properties, *Ashwagandha* is also known as *kaphavata hara*, *balya* and *rasayana* in *bhavaprakasha*. It helped in improving sleep index and *bala* of the patient. *Ashwagandha Churna* is also given which is a *Rasayana* drug, as *Rasayana* drugs are essentially nutritional agents and *Medhya Rasayana* are specific nerve tonics with nootropic effect. This is because; Ayurveda considers this type of movement disorders under *Vata Dosha Vikaras* and to overcome the neuro nutrients by *Rasayana* remedies.

Vatavidhwansa Rasa exhibits *Vatahara Rasayan* properties, hence it is used here.

CONCLUSION

Based on clinical signs and symptoms Parkinson's disease can be correlated with *Kampavata*.

Ayurvedic oral medications and *Panchakarma* therapies are found to be beneficial in improving the quality of life of the patient. Line of treatment must be from removing *avarana* to *Shodhana* followed by *shamana* to pacify *vikrutha vata*, although prognosis is not so good but it can be a ray of hope for bed ridden geriatric patients. The results attained were encouraging and were worth documenting.

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Authors short Biography:



Prof. Dr. Sachinkumar Sahebrao Patil M.D. (Kayachikitsa) Medicine, Ph.D. (Kayachikitsa) Medicine, M.B.A. (H.R.), M.A. (Sanskrit), P.G.D.E.M.S., D.Y.A. Professor and H.O.D., Ph.D. Guide, M.D. Guide, Department of Kayachikitsa, M.A.M.'s Sumatibhai Shah Ayurved Mahavidyalaya, Malwadi, Hadapsar, Pune – 411028, Maharashtra State, India. He is working as an Ayurved Physician and Panchakarma Specialist since last 19 Years. He is a FORMER BOARD OF STUDIES MEMBER for Paraclinical Ayurved Board of Maharashtra University of Health Sciences (M.U.H.S.), Nashik. He is a FORMER FACULTY MEMBER for Post Graduate Paraclinical Ayurved Board of M.U.H.S., Nashik. He is working as a Research Faculty for Research Methodology and Medical Statistics for M.U.H.S., Nashik. He is a Ph.D. GUIDE for 08 Ph.D. Kayachikitsa (Medicine) students and M.D. GUIDE for 30 M.D. Kayachikitsa (Medicine) students out of which 24 M.D. Kayachikitsa (Medicine) students have been already passed out. His research experience is 16 Years. His research interests in Anxiety disorder, Diabetes Mellitus, Obesity, Hyperacidity, Diarrhoea, Anaemia, Infertility etc.

