



## CASE STUDY ON AVASCULAR NECROSIS W.S.R PANCHKARMA

Dr. Snehal R. Marodkar\*<sup>1</sup>, Dr. Shubhangi D. Chandanpat<sup>2</sup>, Dr. Anupama P. Kale<sup>3</sup>

<sup>1</sup>Assistant Professor, Dr.Rajendra Gode Ayurved College, Amravati.

<sup>2</sup>Assistant Professor, Shri K.R.Pandao Ayurved College and Hospital, Nagpur.

<sup>3</sup>Assistant Professor, Dr.Rajendra Gode Ayurved College, Amravati.

\*Corresponding Author: Dr. Snehal R. Marodkar

Assistant Professor, Dr.Rajendra Gode Ayurved College, Amravati.

Article Received on 17/01/2023

Article Revised on 07/02/2023

Article Accepted on 27/02/2023

### ABSTRACT

Avascular Necrosis is the death of Bone tissue due to loss of blood supply. It also here it as osteo necrosis, Aseptic necrosis or Ischemic bone necrosis. In Ayurveda it can be correlated with "Asthi kshaya or Asthi majjagat vata due to similar sign and symptoms. According to modern medicine AVN treatment includes medication as steroid, NSAIDs, surgery, physiotherapy. Present case study was aimed to evaluate the result of Ayurvedic procedure in the conservative management of AVN. Patient was observed for symptomatic improvements based on sign and symptoms before and after treatment.

### INTRODUCTION

Avascular Necrosis is the death of Bone tissue due to loss of blood supply. It also here it as osteo necrosis, Aseptic necrosis or Ischemic bone necrosis. In Latin "Bone death" is perceived for Osteonecrosis. AVN of Femoral head is most common type of necrosis affecting bones. AVN of Femoral head present with groin pain that radiates down towards anteromedial thigh. It generally affects people between age of 30 to 50 yrs. In AVN of femoral head the arteries become occluded the reason behind it is not identified. This state can be correlated with Asthi kshaya or Asthi majjagat Vata due to similar sign and symptoms.

**Case Report:-** This is a case report of 63 yrs. male patient ( Dated 1/9/2022 OPd No-G12653 Ipd No - 1087 ) Reported to DRGACH, Amravati, from L.K. Purna Dist. Amravati with following complaints,

- B/L Hip joint pain and stiffness
- B/L Knee joint pain
- Difficulty in walking, climbing stairs since last 1 year
- Difficulty in doing normal activities.
- Improper Gait
- Painful internal rotation of lower limbs (L>R)

Patient was fine 1 year back and gradually started suffering from above complaints. He consulted various Orthopaedic Surgeons for the same and was diagnosed Avascular Necrosis of B/L Femoral Heads (Stage II). He was advised Analgesics, Calcium supplements along

with surgical intervention, but the patient was unwilling for surgery, and approached us for Ayurvedic treatment.

1. MRI of Both Hip Joints
  - Findings are s/o of Stage II AVN of B/L femoral heads.
  - Disc Bulges at L4, L5
2. X-ray
  - Rt and Lf. Hip joint space reduces ( more in Lf hip joint with improper femoral head edges)

### Personal History

- Diet- Veg
- Appetite- low
- Bowel-Normal
- Bladder-Normal
- Sleep-Disturbed
- Addiction-No any
- Past illness-Not K/C/O any major illness
- Family History-Nil
- Surgical History-Nil

### Local Examination

- Significant loss in range of movement.
- Painful internal rotation
- No any changes in dimensions of both the legs was observed.
- Crepitus-Absent

**Table1: Ashtavidha Pariksha (General Examination).**

1	Nadi	Vata-Kaphaj,88/minute,regular
2	Mala	Prakrut
3	Mutra	Prakrut
4	Jivha	Ishat Saam
5	Shabda	Spashta
6	Sparsha	Samsheetoshna
7	Drika	Prakrut
8	Aakriti	Dirgh

O/E-

BP -130/90 mm Hg

HR – 82/min

P/A-Soft, non-tender

**Table2: Samprapti Ghatak.**

1	Dosha	Vata,Kapha
2	Dushya	Vyan Vayu, Shlesha Kapha, Asthi,Majja,Sandhi,Rakta,Sira,Snayu
3	Srotas	Asthivaha,Majjavaha, medovaha
4	Srotodushiti	Sanga
5	Rogamarga	MarmasthiSandhi
6	Adhistan	Asthi,Sandhi
7	Udbhavasthana	Ama-Pakwasaya(Kostha)
8	Vyaktasthana	Asthi,Sandhi
9	Agni	Mand
10	RogaPrakrti	Chirkari

**Management**

Oral Ayurvedic medicine were administered along with panchkarma procedure . the details are mentioned below

**Table3: Oral Ayurvedic Medicines (Shaman Chikitsa).**

Sr.No.	Drugs	Dose	Time	Anupana	Duration
1	Tryodashang Guggule	250mg each -2TDS	After Food	Lukewarm water	21 days
2	Guduchi Ghan Vati	250mg each -2 BD	Before Food	Lukewarm water	21 days
3	Ekangveer Rasa	250 mg each 1TDS	After Food	Lukewarm water	21 days
4	Panchsakar churn	5 gm Hs	After Food	Lukewarm	21 days

**Table 4: Purification Therapy (Shodhan Chikitsa).**

Sr.No.	Procedure	Dravya	Duration(Days)
1	SarvangSnehana	Bala Taila	21
2	Sarvanga Swedana(PetiSweda)	Dashmool Kwath	21
3	Panchatikta Ksheera Basti	150 - 200 ml	21

**Table 5: Comparison of symptoms.**

Sr. No.	Symptoms	Before Treatment (Day0)	During Treatment (Day 10 )	After Treatment (Day 21)
1	Stiffness	++++	++	Nil
2	Tenderness	++++	++	Nil
3	Pain	+++++	+++	+
4	Muscle power	Grade3	Grade4	Grade5
5	Gait	Improper	Improving	Improving

**Table 6: Observations (Before and After Treatment).**

Sr. No.	SIGNS	Before Treatment	After Treatment
1.	Medial Rotation	No	Mild
2.	Lateral Rotation	No	Mild
3.	Flexion (of Hip Joint)	No	Moderate
4.	Extension (of Hip Joint)	No	Moderate
5.	Abduction (of Hip Joint)	No	Mild
6.	Adduction (of Hip Joint)	No	Moderate

**Mode of action**

1. Troyodashang Guggulu- It is a combination of 13 herbs including guggule process in ghee, such constituents rejuvenates and provide strength, to Dhatu, content like shunthi, ajmoda improve jatharagni, and guggule have specially action on Asthi Dhatu.

2. EkangveerRasa- we are considering this vyadhi as a vata vyadhi and in the samprapti of AVN many times there is strotorodh of Rakt Dhatu and Dhatukshay. Ekangveer RAs acts as Vatashamana. Also ingredient of Ekangveer Ras would be helpful in restoring gati (Motor activities) and Sensation.

1) **Guduchi Ghana Vati**-As Guduchi is having bitter Taste;Light(laghu), Unctousness (Snigdha) properties which will help to increase indigestive capacity, anti-inflammatory, gives strength to muscles, relieves muscular and joint pain. Guduchi Also works on Rakt Dhatu.

2) **Snehan** (oil massage)- Clinical presentation of AVN is resembles like Asthimajjagat vata and also with Asthikshay. And for treating these condition both types of Snehan, Bahya and abhyantar is important. Bahya Snehan helps in reducing heaviness, stiffness, and also increase blood circulation. As oil get deeply absorbed into skin and Strengthening the affected part.

3) **Swedan** (Fomentation)- Fomentation has qualities to pacify Vata dosha. Fomentation helps to balance digestive fire,cleanses the channels and help to pacify the pain. Also fomentation

4) **Pancha tikta ksheera basti**- In AVN of Femoral Head indicates Vata Dosha prokop leading vikruti of Asthi Dhatu. IN AVN due to margavroadh the Blood Supply to femoral head decreased ultimately leads to ischemia causing necrosis and margaoroadh also aggravates vata dosha. In classics BAsti has been described as first line of treatment of vata dosha as well as Pitta, kapha, and Rakt also. Tiktsheer basti is very useful in Asthiashrit vyadhi. It also works on vata, pitta and Rakt dosha. Basti eliminates these Dosha by balancing the vata in pakvasaya. And doing bruhan of affected bone

This Basti karma alongwith Bahya Snehan and Shaman shows significant improvement in AVN.

**CONCLUSION**

This is a single case study, where patient got 75% relief in signs and symptoms without any complications till date. Further rejuvenation was done by using the Panchakarma procedure along with treatment of avascular necrosis of head of femur. AVN is a

challenging condition today due to the non-availability of treatment plan except surgery in modern medicine. The case study reveals victorious management of AVN of head of femur. Patient started having relief in symptoms from day 5 itself. The primary goal is to slow down progress of avascular necrosis. "Pancha tikta ksheera basti" Various Panchkarma procedure like Basti Karma along with Bahya Snehana and shaman Chikitsa has played a key role in treating AVN.

**REFERENCES**

1. Pt.Bhisagacharya Hari sastru edited Astangahridaya Sutrasthana 11 sloka 4 reprint 2000,pub:Krishnadas Academy Varanasi pg.no183.
2. AcharyaYT,editor,ShriChakrapanidatta,commentator,Agnivesha,CharkaSamhita,Chikitsasthana;Vatavyadhichikitsa Adhyaya28/33,Chaukhamba Surbharati Prakashan,Varanasi,2014;page617.
3. Vagbhata,Ashthanga Hridaya with Sarvaanga Sundara of Arunadatta and Ayurvedarasaayana of Hemadri - Dr. Anna Moreshwar Kunte and Krishna Ramachandra Shastri reprint of 6thedt.1935 Choukamba Surabhaarati Prakashana Varanasi Su.11/26.
4. Agnivesha, CharakaSamhita revised by Charaka and Dridhbala with "Ayurveda Deepika" commentary,by Chakrapanidatta, edited by Vd.Yadavaji Trikamaji Acharya, Chaukhambha Surabharati Publications,Varanasi-221001,reprint2002,Sutrasasthan17/4.
5. Shastri, Ambikadutta, Ayurvedatvasandeeepika vyakhya, Sushruta Samhita, Sutra Sthana Dosha Dhatu Mala Kshaya vridhhi vijaniyam Adyaya 15/24, chaukhanbasanskrita Sansthana.
6. Agnivesha,"CharakaSamhita",revisedbyCharakaand Dridhbalawith"Ayurveda Deepika" commentary, by Chakrapanidatta, edited by Vd.Yadavaji Trikamaji Acharya, Chaukhambha Surabharati Publications,Varanasi-221001,reprint2002, Sutrasthana28/27.
7. Vagbhata,AshthangaHridayawithSarvaangaSundara ofArunadattaandAAyurvedarasaayana of Hemadri - Dr. Anna Moreshwar Kunte and Krishna RamachandraShastrireprint of 6th edt.1935 Choukamba SurabhaaratiPrakashana
8. YP Munjal, editor in chief, API Textbook of Medicine, systemic Lupus erythematous, chapter9, jaypeebrothersmedical publishers(p) LTD.,10 thedition, page 2527.
9. Chaganti S Sanipeti RV,Joshi SS. An approach to

- Avascular necrosis by Saghrtkashir Basti. *Anc. Sci. Life* 2013; 33: 45-48 VaranasiSu.11/31.
10. *Ibidem*(5)CharakaSamhita, SutraSthanaVividhashitapitiyadhyaya(28/27-28), with 'AyurvedDipika' sanskritcommentary, ChakrapaniDutt, editedby YadavjiTrikamjiAcharya, Choukhamba Orientalia Varanasi; edition, 2011; 180.
  11. Agnivesa,Caraka,Drdhabala,Carakasamhita,Ayurved adipika commentary of Cakrapanidatta, Vatashonita Chikitsa Adhayaya, Chikitsasthana, chapter 29, verse 88, Edited by Vaidya Yadavji TrikamjiAcharya, Varanasi:ChaukhambhaSurbharatiPrakashan; 2016; 631.
  12. Meena, Ram & Bhatted, Santhosh & Dharmarajan, Prasanth & Meena, Nilam & Kumar, Jitender & Nirmal, Hanumant & Scholar, Pg. (2017). Management of Avascular NecrosisthroughAyurveda-ACaseStudy. *JournalofResearchin TraditionalMedicine*. 3: 123-128.
  13. NIAMS.October2015. Archivedfromtheoriginalon9August2017. This article incorporates text from this source, which is in thepublicdomain.