



AN APPROACH TO SANDHIGATA VATA CLASSICAL REFERENCES AND THEIR
CLINICAL APPLICATIONS

Review article

¹Pooja Parashar, ²Nisha Gupta, ³Vidydhish Kashikar, ⁴Vaibhav Bapat, ⁵Garima Bhamu

¹MD scholar samhita and maulika siddhanta NIA Jaipur)

²Professor samhita and maulika siddhanta NIA Jaipur)

³Assistant professor samhita and maulika siddhanta NIA Jaipur)

⁴Panchakarma vaidya panchakarma department NIA Jaipur)

⁵MD scholar samhita and maulika siddhanta NIA Jaipur)

ABSTRACT

Sandhigata vata is most prevalent articular ailment. It is a form of *Vatavyadhi* that mostly affects people in older age because of deficiency in all *Saptadhatus* (*Dhatukshaya*). Ultimately, deterioration of immunity (*Ojakshaya*), which restricts basic actions like walking, putting on clothes, and laundering, making the patient crippled or handicapped. Osteoarthritis, the most common articular ailment, starts to show symptoms asymptotically in the second and third decades and is highly common by the time a person reaches the age of 70. In *Sandhigata vata*, these signs and symptoms include *Shotha* (swelling), *Prasarakuncanayosavedana* (pain on flexion and extension of the joints), *Sandhisula* (pain in joints), *SandhiVichyuti*, *Atopa*, and *Vatapurradtisparsha* (feels like a bag full of air). Numerous works of literature and Samhitas discuss *Sandhigata vata* and its treatment basically, *Vatadosha* which is *Ruksha* (dry) *Laghu* (light), *Sheeta* (cold), *Daruna* (hard), *Khara* (rough), *Vishad* (clear), *Guna* dominates in this kind of circumstance. This *Guna* is responsible for both *Vatavridhi* and *Prakopa*. With the *Tila Taila* possessing these qualities, *Vataprashaman* is opposing *Guna*, including *Snigdha* (oily) *Guru* (heavy), *Ushna* (hot) *Shlakshan* (smooth), *Mradu* (soft), and *Pichichhal* (sticky) *Ghan* (colloid). However, the requirement is consistent use or application of *Taila* at the working part. Aim is to find out etiopathogenesis of *Sandhigata vata* and their line of treatment which can be practically implemented in present scenario. For this Classical Ayurveda texts like *Charak Samhita*, *Sushrut Samhita*, *Ashtanga Hridayam* and textual material are examined.

Keywords: *Dhatukshaya*, *Maharoga*, *Osteoarthritis*, *Sandhigata vata*, *Vatadosha*, *Vatavyadhi*

INTRODUCTION: Eight diseases are referred to in *Ayurveda* as *Maharoga*¹ and are known to have a serious impact on a person's health. According to the sequence, *Vatadosha*, the most potent of the *Tridosha*, is considered to be the cause of *Vatavyadhi*, which has been named first. *Dhatukshaya* and *Avraṇa* cause *Vataprakopa* and make a person susceptible to *Vatavyadhi*. *Sandhigata vata*, which is characterized by pain, swelling,

and restricted movement of the joints, is the result of this *Vata* lodging (*Sthanasamshraya*) in the *Sandhi*. This particular variety of *Vatavyadhi* is most prevalent in *Vridhdhavastha*. All *Dhatus* undergo *Kshaya* in *Vridhdhavastha*, which results in *Vataprakopa* and makes people more susceptible to a wide range of illnesses. The first on the list is *Sandhigata vata*. In India, osteoarthritis occur in 12% of population. The most

prevalent articular condition, osteoarthritis, manifests asymptotically in the second and third decades and is very prevalent by the age of 70. By the age of 40, almost everyone has some kind of degenerative alteration in a weight-bearing joint, with 16% of men and 25% of women having symptomatic osteoarthritis.ⁱⁱ

Definition of Sandhigatavata

The first mention of Sandhigatavata was made by Acharya Charakaⁱⁱⁱ and Vagbhaṭa, who described Sandhigata Anila as having the symptoms of Vatapurṇadṛtisparshaḥ (feels like a bag filled with air), Shotha, Prasarakuncanayoḥsvedanaḥ (pain on flexion and extension of the joints), Sandhisula (pain in joints)^{iv}.

Shula and Shotha were also mentioned by Acharya Sushruta^v in relation to this illness that causes a reduction in joint movement (Hantisandhin).

Madhavakara adds Atopa (crepitus in the joint) as a further symptom.

Sandhivichyuti has been described by Acharya Bhela.

The course of treatment has been mentioned by Acharya Harita.

In the chapter of Vata vyadhi Nidanam, Yogaratnakara is referred to as Sandhigatavata, and HantiSandhigata is also mentioned.

Osteoarthritis and Sandhigatavata are related. Osteoarthritis is a chronic degenerative illness with a multifactorial origin that is characterized by periarticular bone response, bone enlargement at the margins, and loss of articular cartilage.

The Asthi (bone), Sandhi (joint), Mamsa (muscle), and Snayu (ligament) are all affected by the pathology of this disease, which is attributed to the aberration of Vata and Kaphadosha.

Table no 1: Risk factors for Osteoarthritis-according to contemporary science

Age	Age-related increases, with a peak incidence after 70 years old
Trauma	Any Joint fracture and injuries
Occupation	The incidence is higher in people performing strenuous physical work
Exercise	common in sports person
Gender	Men under the age of fifty and women who have reached menopause
Genetics	increased in progeny of parents with OA with early onset
Obesity	increase the potential risk of OA
Diet	increased risk in those with lower blood levels of vitamins C and D

Material: Literature review was conducted to find out the references related to Sandhigatavata /Asthikshaya in Brihatriya (Charak Samhita, Sushrut Samhita, Ashtanga Hridayam) and other Samhita (Bhelasamhita, Haritasamhita, Yogaratnakara, Madhava Nidana).

Method: On the basis of collected references data related to causative factor (Nidana), etiopathogenesis and line of treatment each designed.

Table no 2 :Nidana Panchaka of Vatavyadhi^{vi}:

Aahara Nidana	Vihara Nidana	Other
<ul style="list-style-type: none"> • <i>ruksha</i>, which means "dry," "sheet," "cold," "alpa" in a small amount," and "laghu" • <i>Vataprakop</i> is caused by the following factors: <i>agnimandhya</i>, <i>tikta</i>, <i>katu</i>, <i>kashay</i> <i>rasa</i> (diet), <i>vatakarakahar</i>, <i>abhishyandiaahar</i> and production of <i>aama</i> (a byproduct of faulty digestion and metabolism). • It results in <i>Vatavyadhi</i>'s creation. 	<ul style="list-style-type: none"> • excessive indulgence in sex. • Excessive nocturnal wakefulness. • Inappropriate treatment approaches. • Using treatments that result in a disproportionate amount of dosha removal • In excess the fasting. • Swimming excessively. • Getting to excessive exercise, jogging, and other physical activity. • Sitting over uncomfortable beds while sleeping. • Anger, daytime sleeping, fear, and suppressing natural urges. • Falling from the seats of an elephant, camel, horse, or fast-moving vehicle while being driven over by one of these animals or vehicles. 	<p>Suffering from trauma and abstinence from food.</p> <p>injuries to <i>Marma</i>.</p> <p>loss of <i>dhatu</i>.</p> <p>• Excessive emaciation because of worry, grief, and affliction by diseases</p> <p><i>Viruddhannasevan</i></p> <p><i>Utpeshan</i>, <i>Abhighat</i>, <i>prapidan</i></p>

Samprapti (Pathogenesis)

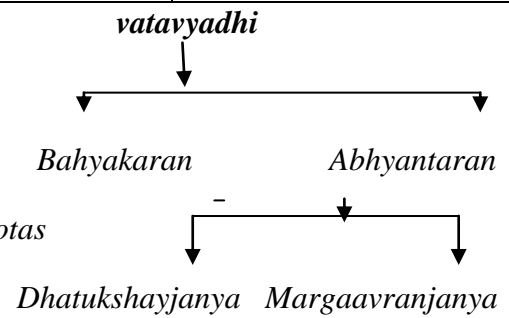
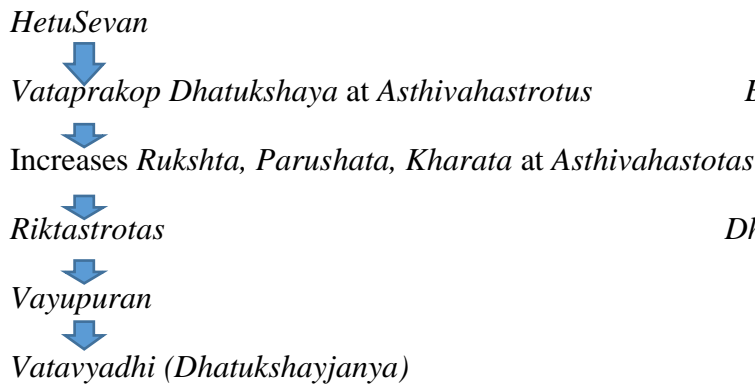
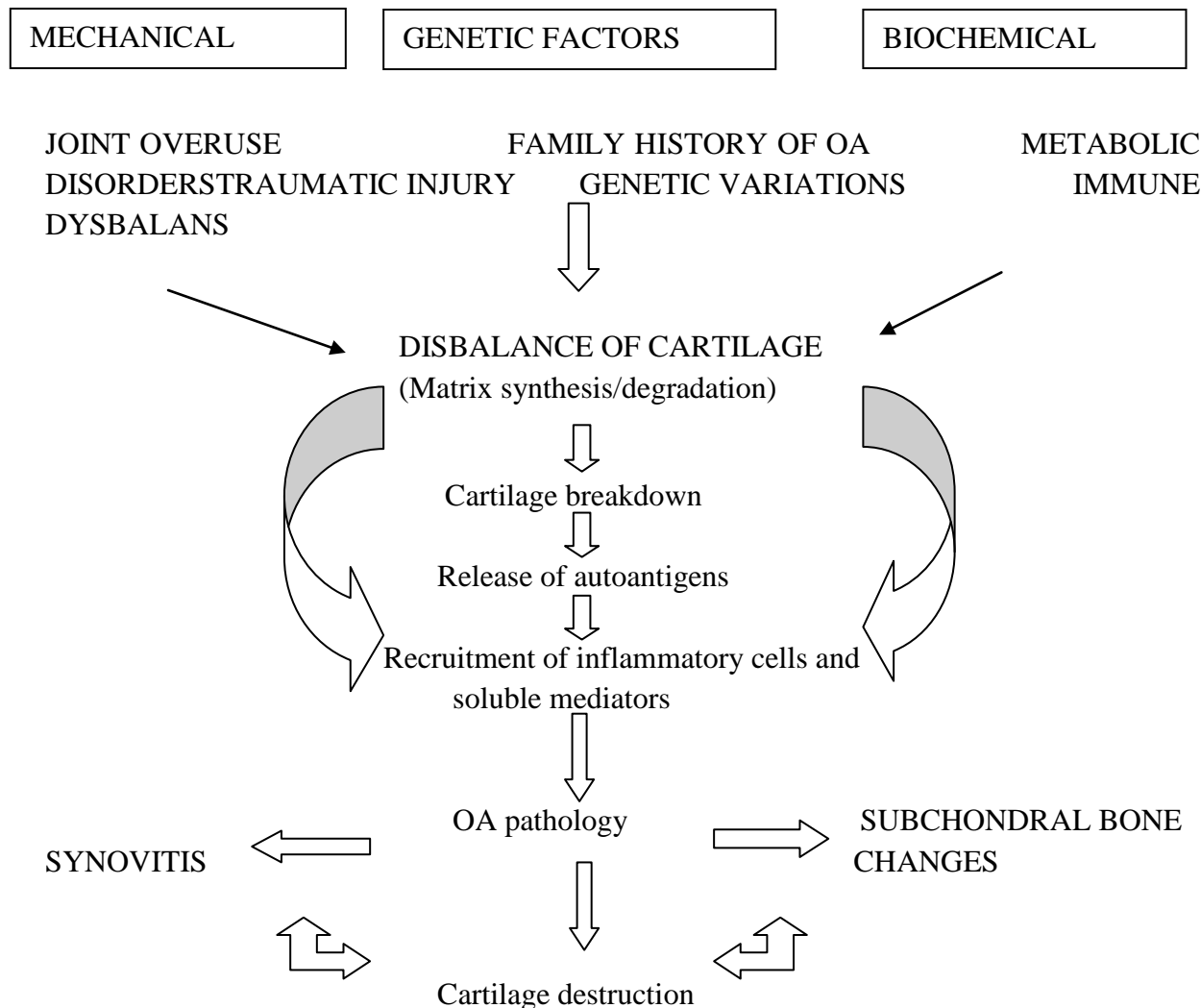


Table no 3 :Samprapti Ghataka of Sandhigatavata-

Dosha	In <i>Kshayajanya-Vata</i> In <i>Upstambhit-Vatakapha</i> (according to <i>Sushrutasamhita</i>)
Dushya	<i>Rasa</i> , <i>Rakta</i> , <i>Mamsa</i> , <i>Asthi</i> , <i>Shira</i>
Agni	<i>Pacakagni</i> and <i>Dhatvagnimanda</i>
Srotas	<i>Asthivahasrotas</i>
Srotodushti	<i>Vimargagamana</i> , <i>Sanga</i>

Udbhavsthan	<i>Pakwashya</i>
Adhishthan	<i>Sandhi</i>
Vyadhimarga	<i>Madhyammarga</i> ^{vii}

Samprapti (Etiopathogenesis)^{viii}:



Purvarupa of Vatavyadhi^{ix}

The *Sandhigata vata Purvarupa* is not described in any detail. *Avyaktanamlakshana* of *Vatavyadhi*

Rupa of vatavyadhi :

The stage where signs and symptoms are clearly expressed is called *Rupa.Laghuta* (lightness) of these signs and symptoms indicates that the disease is going to be cured^x.

Sandhigata vata:

1. *Sandhisula* (Pain in joint)
2. *Sandhishotha* (swelling in joint)
3. *Vatapurṇadrtisparshaḥ* (nonpitting edema)
4. *Prasarankunchanayoḥsavedanaḥ* (pain during movement like flexion and extension of joints)
5. *Sandhinhanti* (restricted or loss, movement of joints)

6. Aṭopa (crepitus produced on joint movement)^{xi}

Table no 4 : Differential diagnosis

Factors	Sandhigatavata	Amavata	Vatarakta	Koshtrukashirsha
<i>Ama</i>	No	Yes	No	No
<i>Jwara</i>	No	Yes	No	No
<i>Hridagaurava</i>	No	Yes	No	No
<i>Prone age</i>	Old	Any age	-	-
<i>Shoṭha</i>	Vatapurnadritisparsha	Angmarda, Sandhigata	Mandalyukta	Koshtrukashirshvat
<i>Vedana</i>	Prasaranaakunchanapravritti	Vrischikdamshavat and Sanchari	Mushikadamshavat vedana	Tivra
<i>Sandhi</i>	Weight bearing	Big joint	Small joint	Only Janu
<i>Upashaya</i>	Abhyanga	Rukshaswedana	Raktashodhan	Raktasodhan

Table no 5 : Other references::

Lakshan	Karana	Sandarbh
<i>Sandhisphutana</i>	Medakshaya, sarvangkupitavata	C.su.17/66 C.ci.28/25
<i>Sandhisunyata</i>	Medakshaya	Su.su.15/13
<i>Sandhivedana</i>	Mansakshaya	A.hr.su.11/18
<i>Sandhishaitihyata</i>	Asthikshaya, kaphakshaya	C.su.17/67 Su.su.15/11 A.hr.su.11/16
<i>Trikavedana</i>	Pakvashyagatavata	C.ci.28/28 Su.ni.1/24
<i>Hantisandhigata</i>	Sandhigatavata	Su.ni.1/28
<i>Sandhinshula</i>	Sandhigatavata Asthimajjagatavata	Su.ni.1/28 C.ci.28/33
<i>Asthishosh</i>	Sandhigatavata	Su.ni.1/28
<i>Asthibheda</i>	Sandhigatavata	Su.ni.1/28
<i>Sandhishopha</i>	Sandhigatavata	Su.ni.1/28
<i>Ashishula</i>	Sandhigatavata	Su.ni.1/28
<i>Vatapurnadritisparsha</i>	Sandhigatavata	C.ci.28/37 A.hr.ni.15/4
<i>Shoṭha</i>	Sandhigatavata	C.ci.28/37
<i>Prasaranaakunchanapravritti</i>	Sandhigatavata	C.ci.28/37
<i>Bhedoasthiparva</i>	Asthimajjagatavata	C.ci.28/33
<i>Asthistaḥsakthisandhyāsthīśūlamtīvram</i>	Asthimajjagatavata	A.hr.ni.15/12

Sadhyasadhyata^{xii} :

Age-related illnesses are *Kastasadhya*. and the disease known as *Janu Sandhigata Vata* affects the elderly. The condition known as *Janu Sandhigata Vata* results in *Madhyamarogamarga*. *Yapya* is a disease seen in *Marma* and *Madhyamarogamarga*. Furthermore, it is challenging to treat *Vatavyadhi* brought on by the vitiation of *Asthi* and *Majja*. When commenting on the word "*KhudaVata*" in the *Ayurveda Dipika* commentary on the *CharakaSamhita*, *ChakrapaniDutta* refers to it as *Gulphavata* or *Sandhigatavata*. *Khuḍavātātāgulphavātātākinvāsandhigata vātātā*. In the *NibandhaSangraha* commentary on the *SushrutaSamhita*, *Dalhana* suggests that the treatment should be provided continually for a longer period of time.

krcchradajamarmasandhyidijam^{xiii}

Chikitsa:

- *Nidanaparivarjanam*
- *Samshaman*
- *Samshodhana*

For the therapy of *Vatavyādhi*, *Acharya Charaka* mentioned *Snehana*, *Swedana*, *Mṛdivirechana*, and *Bastikarma^{xiv}*.

For the management of *Sandhigatavata*, *SushrutaSamhitā^{xv}* and *Astanga Sangraha* mention *Snehana*, *Upanaha*, *Agnikarma*, *Bandhana*, *Mardana*, and *Svedana*.

Bhavaprakasha, *AstangaHridaya^{xvi}*, *Yogaratanakara*, and *BhaishajyaRathnavali* have all mentioned particular lines of therapy. One of the *VataVyadhis*, *Sandhigatavata*, is mostly brought on by *Dhatukshaya* or *Avarana*. *Sandhigatavata* is applicable to *Snehana*, *Svedana*, *Abhyanga*, *Basti*, *Snehavirechana*, and *Vataharaaushadha*, *Ahara*, and *Vihara*. According to commentator *Dalhana* in *NibandhaSangraha*, who is referencing

Bhadrashounaka, the *Dahanakarma* of *Mamsa* is capable of causing relief in *Sira*, *Snayu*, *Asthi*, *Sandhivikara* by itself.

Sandhigatavata: *Bahya* and *Abhyantarasneha* are utilized in *Sandhigatavata*, where *Asthivahasrotodusti* and *Asthimajjagatavata Chikitsa* are practiced. *Panchakarma Chikitsa*, particularly *Basti* with *Ksheera* and *Sarpi* processed with *Tiktadravyas*, is beneficial when taking *Sandhigatavata* to be considered as *Asthi-Ashrayavatavyadhi*. *Rasayana Chikitsa* is used because *Sandhigatavata* is an age-related illness.

Pathya Aahara-vihara^{xvii}:

The *Sandhigatavata*'s specific *Pathya* and *Apathya* are not explained. *Chaturvidhsneha*, however, is used for *Parisheka*, *Abhyanjana*, *Basti karma*, *Snehana*, *Swedana*, *Nivaatsthana*, *Mansarasa*, *Dugdha*, *Madhuramlalavana Rasa Yukta*, *Aahara* and any other *Brimhanaahardravya* in *Vatavyadhi*

Apathya Aahara-vihara:

Yava, *Kodrava*, *Navamadya*, *ShushkaMamsaAjamutram*, *Jambu*, *KramukaKatu*, *Tikta*, *Kasaya Rasa* *ApathyaVihara*: *Chinta*, *Jagarana*, *Vega* *Sandharana*, *Shrama*, *Anashana*, *Vyavaya*, *Vyayama*, *Pravata*, *Chankramana*, *KathinShayya*, *Yana Gamana* etc.

DISCUSSION:

In *Ayurveda* it is said that treatment (*Chikitsa*) is nothing other than dissolving pathogenesis (*Samprapti Bhanga*) of particular disease. One of the disease's etiological factors, according to *Ayurveda*, is a poor diet and lifestyle. *Bahya* and *Abhyantara Snehana* are utilised in *Sandhigatavata*, where *Asthivahasrotodusti* and *Asthimajjagatavata Chikitsa* are practiced. The *Mool* of *Majjavahsrotas* is *Asthi* and *Sandhi*. *Sandhigatavyadhi* is related to

Asthi and *Majja*. *Panchakarmachikitsa* and *Tiktauphitksheersarpivasti* are indicated for *Asthiashritvyadhi* treatment similar line of treatment can be used for *Sandhigataavata*^{xviii}. Through *Panchakarma* and *Basti Karma*, the toxins in the body are reduced which increases *Agni*. Due to the increase of *Agni*, the absorption of minerals in the bones increases. *Vataprakopnidana* that leads to the *Vatavyadhi* is also taken into account. When the vitiated *Vata* is present at one or more joints, it causes symptoms like *Sandhishoola* (joint pain), *Sandhishotha* (palpable swelling), *Atopa* (crepitus), and *Sandhistabdhatta* (joint stiffness). This group of clinical symptoms is known as *Janu-Sandhigataavata* when it affects *Janu-Sandhi*. *Dhatukshaya* and *Margavarodha* are two potential causes of *Janu-Sandhigataavata*. The ailment *Janu-Sandhigataavata* mostly affects the *Dushya*. It may last lifetime because it is an age-related degenerative condition. In the early stages, one can lessen the symptoms of *Sandhivata* and enhance their quality of life by making lifestyle changes and undergoing therapy.

CONCLUSION: With above discussion it can be concluded that *Sandhigataavata* can be managed well on the basis of *Nidana Parivarjanam*, *Samshaman*, *Samshodhana*. Under the *Samshaman Chikitsa Vataprashaman* is opposing *Guna*, including *Snigdha* (oily) *Guru* (heavy), *Ushna* (hot) *Shlakshan* (smooth), *Mradu* (soft), and *Pichichhal* (sticky) *Ghan* (colloid) and *Samshodhana Karma* in *Tiktauphit Ksheersarpi Basti* and *Panchkarma*.

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Corresponding Author: Dr. Pooja Parashar, MD scholar samhita and maulika siddhanta NIA Jaipur)

Email: vaibhavajitbapat@gmail.com

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