

An Ayurvedic Approach to Post Chikungunya Sequels (Aamavata): A Paediatric Case Report

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Abstract

Chikungunya is an acute disease it is mean doubling up. Which results in fever, arthritis & skin rashes because of severe arthritic symptoms fever rises abruptly to 103-104F is accompanied by rigors joint pain appears suddenly & often very severe the arthritis mainly affects small joints of hands, wrist ankle feet & less involvement in larger joints the joint pain may continue for many months after illness. It can be nearly compared with the *samasannipataja jwara* the *lakshana* later stage of chickengunya is nearly compared with the *aamavata lakshana* which includes the *shoola*, *shotha*, *ruja* & *raga* over the *sandhi* along with the restricted range of motion in later condition pain will be like *vrischikadamshavata* the treatment modalities such as *rksha swedana* such as *valuka swead* even *shodhana* like *vaitarana basti*, *kshara basti* & *virechana* are also prime line of treatment along with topical application such as *kumaribandha* & *parisheka* helps in relieving the *sotha* & *stabhata* in these cases. A paediatric case of post chikungunya mimicking the *lakshana* of *aamavata* is being presented here.

Keywords: Chikungunya; Aamavata; Samasannipataja Jwara; Basti.

Introduction

Chikungunya is an acute disease it is mean doubling up [1].

Which results in fever, arthritis, & skin rashes because of severe arthritic symptoms the disease is given the Swahili name of *chikungunya* (that which bends up). Remerging of *chikungunya* disease occurred in India during the 2005-2006, causing 1.3 million cases in the state chiefly Andhra Pradesh & Karnataka [2].

The rural cycle of *chikungunya* transmission involves *Aedes Africanus* & urban cycle involves *A. aegypti* outbreaks occurs typically in rainy season [3].

The disease has sudden onset with a incubation

period of 2-12 days infection is characterized by fever headache fatigue nausea vomiting muscle pain rash & joint pain. Fever rises abruptly to 103-104F is accompanied by rigors joint pain appears suddenly & often very severe the arthritis mainly affects small joints of hands, wrist ankle feet & less involvement in larger joints [4].

The joint pain may continue for many months after illness & it is having no any specific treatment [5,6].

It can be nearly compared with the *samasannipataja jwara* the *lakshana* told for it almost mimics with the *chikungunya* even stills disease clinical features mimics with the *samasannipataja jwara lakshana* [7].

Those are *kshane daha* *kshane seeta* *asthisandhisiro ruja*, *kothanam shyavaraktanam mandalamcha darshanam* etc [8].

Later stage(sequels) of *chikungunya* is nearly compared with the *aamavata lakshana* which includes the *shoola*, *shotha*, *ruja* & *raga* over the *sandhi* along with the restricted range of motion(*prasarana akunchana savedana*) in later condition pain will be like *vrischikadamshavat* [9].

It is disease mainly produced by the *aama* along with the *vata* get lodges over in joints & produces the *lakshana* which requires the treatment modalities such as *rksha swedana* such as *valuka swead* as in

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case of *aamavata* the vitiated *vata* came dislodges in *sandhi* i.e *kapha sthana* [10].

So *ruksha sweda* told even *sodhana* like *vaitarana basti*, *kshara basti* & *virechana* [11] are also prime line of treatment along with topical application such as *kumaribandha* & *parisheka* helps in relieving the *sotha* & *stabhata* in these cases. A paediatric case of post *chikungunya* mimicking the *lakshana* of *aamavata* presenting over here .

Case Report

A 7 years male child brought by the parents to the *Kaumarbhritya OPD* of *KLEU ayurvedic hospital* of *sahapur Belagavi* with following complaints.

Chief Complaints

pain in multiple joints along with the swelling since 2 years associated with *aruchi*.

History of Present Illness

The child was said to be asymptomatic before 2 years one day he got fever along with chills which is associated with the severe joint pain for that he was treated by local physician diagnosing as *chikungunya*



Image 1: X-ray of both hands



Image 2: Abhyanga



Image 3: Abhyanga



Image 4: Parisheka

later there were reduction in fever & chills but the pain in the joints continue along with severe stiffness in the morning & pain for that he was treated by rheumatologist by steroids for the duration of six months, child use to get relief when he is on medications later same complaints get used to repeat for the same complaints they consulted our hospital for further management.

Investigations

General & Systemic Examination Findings

All findings are within normal limit.

Developmental & Vaccination History

All milestones achieved in appropriate age & vaccination completed as per the schedule.

Niruha Basti with Erandamooladi Niruha Basti

Sr. No	Contents of Niruha Basti	Quantity
1	Makshika	15gm
2	Lavan	3gm
3	Sneham - brihasaindhavadi taialm	15ml
4	Kalka	10gm
5	Kwaath	200ml
Total =230 ml		

Days	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
Basti	AB	NB	AB	NB	AB	NB	AB	AB

Note : AB: Anuvasana Basti & NB: Niruha Basti

Sr. No.	Day of treatment	Treatment modalities	Medicine	Retention time	Complications
1	1 st day	Kostasodhana	Gandharvahastadi tailam 30 ml with 50 ml of milk	12 hours	No any
2	2 nd day	Anuvasana basti	Brihatasaindhavadi tailam - 20ml	7 hours	No any
3	3 rd day	Niruha basti	Erandamooladi	9 min	No any
4	4 th day	Anuvasana basti	Brihatasaindhavadi tailam - 20ml	8 hours	No any
5	5 th day	Niruha basti	Erandamooladi	7 min	No any
6	6 th day	Anuvasana basti	Brihatasaindhavadi tailam - 20ml	12 hours	No any
7	7 th day	Niruha basti	Erandamooladi	10 min	No any
8	8 th day	Anuvasana basti	Brihatasaindhavadi tailam - 20ml	9 hours	No any
9	9 th day	Anuvasana basti	Brihatasaindhavadi tailam - 20ml	8 hours	No any

Note : basti fitness is obtained from shalyatantra OPD of our hospital, child was fit for basti

Other Accessory Treatment Modalities

Sr. No	Days of Treatment	Treatment Modalities Given	Duration
1	7 days	Parisheka with eranda , guduchi & nirgundi kashaya over joints	20 min
2	7 days	Kumari & haridra bandha over joints	6 hours

Pathya during the Treatment

Sr. No	Pathya	Dose
1	Panchakola phanta	10 ml TID
2	Eranda , guduchi & amalaki kashayam	10 ml TID

Sr. No	Shaman Given	Dose	Duration
1	Vidangarist	10 ml TID	1 month
2	Rasnasaptaka kashayam	10ml TID	1 month
3	Punarnava mandur	1 BD	1 month
4	Guduchi , nirgundi , eranda kashayam	10ml TID	1 month
5	Lepavati choorna	L/A	1 month

Finding before & after Treatment

Range of Motion at Various Joints Accessed by Goniometry: before & after

Sr. No	Level of angle measurement	Movements	BT	AT
1	At poplital angle	Flexion	130	160
2	At hip joint	Flexion	80	50
3	At elbow joint	Flexion	90	70
4	At phalangeal joints	Flexion	130	70

Inflammation is Accessed by using Measuring Tape Over Joint, Above Joint, & below Joint

Joints	Side	Level of Joints	BT	AT
knee joint	Right	Above	26cm	24cm
		Over	29cm	26cm
		Below	26cm	25cm
	Left	Above	25cm	23cm
		Over	29.5cm	24cm
		Below	26cm	24cm
Elbow joint	Right	Above	17cm	15cm
		Over	19cm	16cm
		Below	16cm	15cm
	Left	Above	17cm	15cm
		Over	18cm	15cm
		Below	17cm	14.5cm
Ankle joint	Right	Above	19cm	16cm
		Over	23cm	20.5cm
		Below	18cm	16cm
	Left	Above	18cm	16cm
		Over	23cm	20.5 cm
		Below	19cm	17.5cm
Wrist joints	Right	Above	15cm	13cm
		Over	16cm	14cm
		Below	14cm	12.5cm
	Left	Above	15.5cm	13cm
		Over	16cm	13 cm
		Below	15cm	13.5cm

Treatment Given

Sarvanga abhyanga with sahacharadi tailam for 20 min Nadi sweda for 10 min.

Parisheka with eranda, guduchu & nirgundi kashaya over joints.

Kumara with haridra bandha over joints yoga basti planned.

Anuvasana with brihasaindhavadi tailam 20 ml.

Discussion

- The sequels of chikungunya lakshana mimics with the aamavata lakshana amavata line of management was adopted.
- Aam in sarvanga sharira & in sthanika is less so yogabasti was planned by niruha basti with erandamooladi & anuvasana with brihatsaindhavadi tailam along with the sthanika parisheka with eranda, nirgundi & guduchi kashaya was planed.
- To reduce sarvadhaka aam panchakola phanta was given in 10ml in TID dose along with aamalaki, guduchi & eranda kashaya in 10ml in TID dose
- To improve ROM by reducing the sotha kumari along with haridra choorna was tied over joints.
- The there three stages of aamavata those are aama pradhana, pachyamana & niram avastha this case nearly to the niramavastha & just crosses the pachyamana avastha so basthi was planned.
- Sarvanga abhyanga is done with the sahacharadi tailam which helps in improving the ROM as name itself indicates one which helps in sahachara (movement) f/b nadi sweda does relieves the sotha, sthamba, gaurava as properties of swedana is stambhagaurava sithagnam sweadanam swedakarakam [12].
- Parisheka over joint with eranda, guduchi, nirguindi might helps in relieving the inflammation & facilitated in movements as these drugs are vatagna in property & it has been said that erandamoola vataharanam shreshtam [13], also simily is given like gajakesari [14] to treat amavata. Guduchi does the sthanika sothahara & aamahara property.
- Kumari bandha along with haridra might be helped in relieving the inflammation.
- Yoga basti : in this alternatively anuvasana basti with brihatsaindhavadi taila & niruhabasti with erandamooladi is given erandamooladi niruha

basti does the vatanushamana well as anuvasana basti too.

10. Pathya given during the treatment was panchakola phanta which is said as good in aamavata by chakradatta [15] also said as sarva dhaihika aama pachana.

11. During the treatment the diet given was laghu & meidu supachita aahara such as kichadi etc. Which takes care of agni during the treatment & does mentainance in agni .

Conclusion

Understanding of samprapti is very important in every disease sampraptivighatana helps in planning the treatment in better way single follow up of post chikungunya sequels relives in one sitting of yoga basti up to 80% by aamvata line of treatment .

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