



## Efficacy of Abhyanga of Nirlajja Taila in Sandhishula.

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**Abstract :-Background**-Today's life-style is the root cause of many diseases. We are crazy for fast food, cold drinks, travelling on bike .Due to this change in life-style , every class of society is prone to suffer from joint-pain . .In Ayurveda, there are many diseases in which Sandhishula, is cardinal symptom e.g. .Sandhiwata, Asthimajagata vata, Amavata, Kroshtukshirsha, Vata-rakta. According to modern medicine also, the diagnosis may be Arthrities, -(OA or RA ) or Gout , joint pain is common symptom in all these diseases. **Aims and Objects**- The task of medicine is to preserve and restore health and to relieve suffering. Understanding pain is essential to both these goals. Because , pain is universally understood as a signal of disease. It is the most common symptom that pt .to a physician's attention. If we are able to treat "pain" we will certainly conquer one part of sadness. Efforts are made to overcome this joint -pain by all branches of medicine. For the same purpose, trial drug has been selected. It was our try to study this un explored herb. Oil is most balancing substance for vata. .Hence taila -kalpana was selected. **Result**- Ayurvedic abhyanga has many advantages ever any other oriental. it improves circulation in the body .Cleanse and open channels of circulation and elimination . It increases the secretion of hormones from skin.

**Introduction** :- Joint-pain is very wide complaint irrespective of disease. It hampers day to day activities .In the golden older days, before the invention of HI- Tech chemicles and pharmaceutical laboratories, 'Nature' was the only doctor available. It was with the use of various forms of these natural herbs that doctors began the art of medicine. In Ayurveda, there is deep study of Abhyanga (External Oleation) . Abhyanga is ancient treatment used for healing , relaxation and also to treat various dieases. This local therapy is an important part of treatment..

KEY WORDS – Sandhishula , Abhyanga, Taila., Nirlajja

### Materials and Methodology

Trial Drug : Nirlajja Taila.

#### Preparation of Nirlajja Taila \_:

Kalka of Nirlajja patra -1part i.e.fresh leaves of the plant are finely crushed with water.

Sneha (oil) -4parts

Liquid- 16 parts .Dravyas are taken in above quantity and are boiled on low flame until the liquid part get vapourised.

**Drug Review**:-The drug is mentioned in Vridha -vaidyaprampara.

Botanical Name :-Ipomea fistulosa.

Family :- convolvulacea.

Regional Name :- Besharam ,Nirlajja, Andi.

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*Ipomea fistulosa* is a species of – *Ipomea carnea*. Leaves are heart shaped and rich green, 6-9 inches long. It can be easily grown by seeds which are toxic and can be hazardous to cattle. The toxicity is related to the bio-accumulation of selenium species in leaves but mostly in seeds. The plant is also of medicinal value. It contains a component identical to marsilin, a sedative and anticonvulsant. A glycoside has been purified from *I. Carnea* with anti carcinogenic and oxytocic properties.

### Study design :

**No. of patients** - 30

**Medicine** – Nirlajja Taila

**Dose** – As per requirement .

**Kala** –In the morning ,before bath.

**Duration** -21 days.

### Criteria of Inclusion of patients :-

Patients of both sexes were selected ageing from 10 Yrs up to 60 Yrs. A special case proforma has made. Patient subjected for the clinical research have been selected with main complaint of sandhishula. The pt.s may have diagnosis of following diseases.

- Sandhigataavata.
- Vata-Rakta.
- AsthimajjagataVata.
- Kroshtuksirsha.
- Amavata. According to Ayurveda, indications for abhyanga are- Swedya, Karshya, Vatavikar, Nidranash etc.  
For standard pain assessment we took only knee-joint pain.

### Criteria of Exclusion of patients:

Those patients having permanent joint damage, pregnancy, Diseases like Hypertension, diabetes mellitus, cardiac disease, paralysis, old age ( above 60 yrs), Steriod dependant pt.s were excluded. According to Ayurveda, contra-indications for abhyanga are Ajirna, After shodhan treatment, Amadosha,

30 patients were selected for the study. Abhyanga of Nirlajja Taila was done on affected joints. Change in severity index was the prime criteria of assessment .

Assessment of patient was done with the help of changes in gradations of Oxford pain chart & Visual Analog Scale.

Relief Criteria is divided into 3 grades.

Fair	-	Relief 70% and above.
Moderate	-	Relief 50% and above.
Poor	-	Relief below 50%

Pain relief in patient is given 0-4 Nos.

- 0 - None
- 1 - Slight Relief
- 2 - Moderate Relief
- 3 - Good Relief
- 4 - Complete Relief

### OBSERVATIONS :

The assessment was carried out before and after treatment to evaluate the total effect of treatment.

- SEX :-** Incidence is higher in females, probable reason being females have greater exposure towards etiological factors like diet and to do physical work, deliveries .

Male-	11	33.33%
Female	23	66.67%

- AGE :** In 30 cases of study highest no. of patients are 51-60 yrs of age group (60%) .41-50 yrs-.9pt.s(30%) ,30-40yrs -3pt.s -10%

- Prakriti:-**Vata prakriti is more towards vitiation of vata.

Vata	16	53.28%
Pitta	5	16.62%
Kapha	9	30%

**Relief gradation of Pain According to Oxford pain chart.**

Severity of Pain	Gradation
Mild Pain	1
Moderate Pain	2
Severe Pain	3
No pain	0

**Severity of Pain Before Treatment**

Severity of Pain (Grade)	No. of Patients	Percentage
<b>1</b>	<b>2</b>	<b>6.66%</b>
<b>2</b>	<b>22</b>	<b>66.66%</b>
<b>3</b>	<b>6</b>	<b>19.98%</b>

**Severity of Pain After Treatment**

Severity of Pain(Grade)	No. of patients	Percentage
<b>1</b>	<b>15</b>	<b>50%</b>
<b>2</b>	<b>6</b>	<b>20%</b>
<b>0</b>	<b>9</b>	<b>30%</b>

**STATISTICAL ANALYSIS**

Null hypothesis has been tested by means of sample results. Here ,we have selected 30 pt.s and single blind study data were qualitative in which the character remains same. To assess efficacy of drug standard error of proportion is used. To show the statistical significance of the study "z" test is applied to data.

P: Proportion in sample  $11/30 = 0.36$ .

$H_0 : P = 0.75$  Vs  $H_1 : P > 0.75$

S. E. P. =  $0.36 \times 0.64/30 = 0.08$

$Z = \frac{P - P_0}{S.E.P.}$

$= \frac{0.36 - 0.75}{0.08}$

$= -0.39/0.08$

$= -4.8$

$\alpha = 0.05$

ZTABLE = 1.64

ZCAL > ZTABLE

$4 > 1.64$

Rejection  $H_0$

Hence result is significant.

**DISCUSSION**:- When vatavyadhi become chronic they are difficult to treat .Irrespective of disease pt.s with chronic sandhishula have less result

In pt.s of Amavata , there was pain relief from grade-3 to grade-2.

We have not found pt.s of Vata-Rakta and Kroshtuk-Shirshak .In polyarthralgia we got less result as compared to mono arthralgia.

No adverse effect was observed. There is wide scope for further study.

**Conclusion**: \_ Sula is because of vata, snehachikitsa is best chikitsa of vata-vyadhi. Nirlajja is Ushnavirya which directly acts on vatadosha . Abhyanga help to re-establish proper circulation and nervous system activity. When we rub and press the body ,it helps to break up the accumulated toxins and impurities that are localized in the tissues. The motion also creates heat and increases the flow through the blood and lymph vessels. During Abhyanga warm oil is absorbed by the skin, it prevents dryness of skin. Classic symptoms of vata are fatigue and lack of mental clarity. When the body surface absorb this medicated oil, it gives evenness, strength and stability during the day. Abhyanga, increases the secretion of growth hormones and endomorphins.

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