



A CLINICAL STUDY ON THE EFFICACY OF SALLAKI, HARIDRA AND GUDUCHI KASAYA IN NON-SPECIFIC KNEE EFFUSION

Dr. Durga Katarmal^{*1}, Dr. P. Hemantha Kumar² and Dr. Narinder Singh³

¹Final year P.G. Scholar, National Institute of Ayurveda, Jaipur.

²Professor & Head, National Institute of Ayurveda, Jaipur.

³Asst. Prof, P.G. Dept. of *Shalya tantra*, National Institute of Ayurveda, Jaipur.

*Corresponding Author: Dr. Durga Katarmal

Final year P.G. Scholar, National Institute of Ayurveda, Jaipur.

Article Received on 25/09/2017

Article Revised on 16/10/2017

Article Accepted on 06/11/2017

ABSTRACT

Purpose of the study: Non-Specific knee effusion - a life style disorder, can be defined as the abnormal accumulation of the fluid in the knee capsule or the adjoining supra-patellar bursa. It may result from trivial injuries of sub-acute strength. Symptoms include pain, swelling and stiffness. Contemporary science deal this disorder with the help of NSAIDS, crepe bandage application but this provides only temporary results along with established potential side effects of long term use of side effects of NSAIDS. In the present study, an attempt has been made to establish the combination that can be an effective conservative management for the patients suffering from Non-specific knee effusion. **Methods:** On the basis of clinical features and routine investigations, 25 patients suffering from Non-specific knee effusion were selected from the OPD and IPD of PG Department of *Shalya tantra*, N.I.A., Jaipur. Patients were administered dried crude extract of *Sallaki* (*Commiphora wightii*) 500 mg and *Haridra* (*Curcuma longa*) 500 mg in separate capsules along with *Guduchi Kashaya* (*Tinospora cordifolia*) 50 ml in decoction form twice a day continuously for 2 months orally. Patients were advised to use crepe bandage in their routine life. **Result:** Data obtained was statistically analysed and it was observed that combination under consideration provides permanent relief in mild and moderate grades of Non-specific knee effusion. **Conclusion:** Hence both the combination –*Sallaki along with Haridra and Guduchi Kasaya* can be successfully used in the management of Non-specific knee effusion.

KEYWORDS: Non-specific effusion, Sallaki, Hardira, Guduchi.

INTRODUCTION

Non-Specific knee effusion, a life style disorder is a disease secondary to degenerative changes/excessive body weight/excessive wear tear/trivial or evident trauma to the knee joint or condition associated non-specific arthropathies. The condition can be defined as the abnormal accumulation of the fluid in the knee capsule or the adjoining supra-patellar bursa secondary to the irritation/inflammation of sub - acute strength in the joint synovium. The vitiation of *Vata* and *Rakta Dosha* is considered to be the main pathogenesis in concern to this condition. *Acharya Sushruta* has described *Aaghat* (trauma), *Amyat*, *Sandhivat* (non specific arthropathies), *Updandsh* (infective arthropathies) as its aetiological factors and *Shoth* (inflammation), *Maharuja*, *Pida* (pain) as the main clinical features of this condition.¹ While describing treatment, stress has been given on the pacification of vitiated *Vata* and *Rakta Dosha* through *Vatasanshman* (anti-inflammatory measures) and *Siravedha*.² Contemporary science deal this disorder with the help of NSAIDS, crepe bandage application but

this provides only temporary results along with established potential side effects of long term use of side effects of NSAIDS.

There is a need of management which provides permanent relief to the patient from above said symptoms of Non-specific knee effusion. *Dravyas* like *Sallaki*, *Haridra* and *Guduchi* have wide acceptance as alternatives of NSAIDs without side effects³. This study an attempt has been made to establish the combination comprising of *Sallaki*, *Haridra* along with *Guduchi kasaya* that can be an effective conservative management for the patients suffering from Non-specific knee effusion.

AIMS AND OBJECTIVES

To assess the therapeutic efficacy of crude extract of *Boswellia serrata* and *Curcuma longa* along with decoction of *Tinospora cordifolia* on Non-specific knee effusion.

MATERIALS AND METHODS

Selection of the patients- 25 clinically diagnosed patients of Non-specific knee effusion has been selected from the OPD & IPD units of P.G Dept. of *ShalyaTantra*, NIA, Jaipur. Crude extract of separate capsules of *Sallaki* (*Boswellia serrata*) and *Haridra* (*Curcuma longa*) 500mg each with decoction of *Guduchi* (*Tinospora cordifolia*) (50 ml), twice a day. Simultaneous crepe bandage application was advised to the patients with standard instructions.

Study Design

Sample size: Total 25 patients of Non-specific knee effusion were registered for the trial who fulfilling the all inclusion criteria and given informed consent.

Study type- Interventional.

Informed consent - The study were explained clearly to the subjects and their signed, written informed consent were taken before starting the trial.

Selection Criteria

Inclusion Criteria

- Patients in the age group 15-65 yrs. Of either gender having non-specific knee effusion.
- Patient who were willing for trail and ready to give written informed consent.
- Patients were selected randomly, irrespective of gender, economical, educational & marital status.

OBSERVATION AND RESULTS

The data obtained was statistically analyzed as follows:

Outcome of Statistical Assessment of Sign/Symptoms (By Wilcoxon matched paired test)

S.No.	Assessment Parameters	Mean B.T.	Mean A.T.	Differ-ence	% Relief	S.D.	S.E.	P Value	Result
1.	Pain	3.160	0.880	2.280	72.15	0.791	0.158	<0.0001	ES
2.	Tenderness	1.240	0.160	1.080	87.09	0.493	0.098	<0.0001	ES
3.	Effusion	1.200	0.760	0.440	36.66	0.506	0.101	0.0010	ES
4.	Walking distance	3.040	1.028	1.760	57.89	0.435	0.087	<0.0001	ES
5.	R.O.M.	3.040	4.680	1.640	53.94	0.637	0.127	<0.0001	ES

DISCUSSION

After two months of treatment % relief in pain was 72.15% .Considering the % relief in tenderness, the value was 87.09% .% relief in effusion was 36.66% .Percentage relief in range of movements was 53.94%.% relief in walking distance was 57.89%.

No recurrence of condition as per the presenting features particularly pain, tenderness, stiffness, effusion was observed in follow up period.

Action of Drugs: Anti-inflammatory, anti- arthritic and analgesic activity of *Sallaki* can be attributed to its *Madhura*, *Tikta*, *Kasaya Rasa*, *Laghu* , *Rukhsa Guna*, *Ushna Veerya* and *Katu Vipaka* hence *Kapha Pitta*

Exclusion Criteria

- Patient who were not willing to undergo trial or refused to give informed consent
- Patients below 15 yrs. Or above 65 yrs. Of age.
- Patients suffering from knee effusion but with specific arthritis of knee joints.
- Patient with the history of recent trauma to knees.
- Excessively tense knee effusion.
- Patient having haemarthrosis of knee.

Investigations - X-Ray Knee Joint (AP & Lat View), HB, TLC, DLC, ESR, Blood Sugar (Fasting and PP), R.A. factor, ASLO titre, S. Uric acid, CRP etc.

Time Frame: 8weeks

Follow Up: Patients were called for the follow up every 10^hday up to 4 month after completing treatment to review for the status of the condition understudy.

Assessment Criteria

The following parameters were considered

1. Pain (VAS scale)
2. Tenderness (Ritchie's index)
3. Walking distance 6 minute walking test(6MWT) grading system used by American College of Rheumatology.
4. Swelling (effusion)
5. Improvement in range of movement

Shamaka characters. Anti-inflammatory nature of *Haridra* is due to its *Tikta*, *Katu Rasa*, *Ruksha*, *Laghu Guna*, *Ushna Veerya* and *Katu Vipaka* hence *Vata Kapha Shamaka* character. Anti –inflammatory, anti- rheumatic and rejuvenating activity of *Guduchi* can be attributed to its *Tikta*, *Kasaya Rasa*, *Laghu Guna*, *Ushna Veerya* and *Madhura Vipaka* and hence *Tridosha Shamaka character*.

CONCLUSION

- All three drugs - *Sallaki*, *Haridra* and *Guduchi* under trial exhibit anti-inflammatory, analgesic property.
- The synergic effect of combination is capable of relieving the sign and symptoms of *Krostuksirsa*

(non- specific knee effusion) due to its anti-inflammatory, analgesic, anti-arthritis and rejuvenating activity.

- The combinations under consideration is one of its kind as it is not only curing the entity in question but also restoring the normal physiology of knee joint which makes it stand ahead than the formulations used in contemporary science.

REFERENCES

1. Sushruta Samhita, edited with Sushrutvimarshinee by Vaidhya Anantram Sharma Chaukhambha Sanskrit Sansthan, Nidansthana chapter 1/76, p-469.
2. Chakaradutta edited by Dr. Indradev Tripathi Chaukhambha Sanskrit Sansthan, Chapter 22/62, p-199.
3. The wealth of India (Raw materials volume I and II) Dictionary of Indian raw material and industrial product. Council of scientific and industrial research of India 1948.s