

Role of Panchakarma & Kapikacchu Beeja Churna in Kampvata

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Abstract: To assess the effect of Panchakarma & Kapikacchu Beeja churna in kampvata one male case was observed. 21 days course was design that included Sarvanga Snehana, Nadi sweda, Mashadi Taila Matra Basti & Ksheer Bala Taila Nasya. This combine therapy was effective as patient got significant relief from it.

Keywords: Kampvata, Matra Basti, Nasya Ksheerbala taila, Nadi sweda.

1. INTRODUCTION

Kampvata is one of the vataj nanatmaj vyadhi, resembles Parkinson's disease is a type of movement disorder. *Kampavata* is slowly progressive disease of adult life and is one of the most prevalent neurological disorder. The most common form of parkinsonism is a chronic, progressive degenerative disorder of the central nervous system usually seen at the 6th decade of life. It is characterized by these major systems: tremors, rigidity, akinesia/bredikinesia, postural instability associated with gait and speech disturbances. The reference of certain disorders similar to parkinsonism are available in ayurvedic classics they include sira kamp, vepatu and kampa vata in the chapter of kiyanta sirasiya, Charaka enlists sirakampa as one among important sira rogas like arditā or ardvabhedaka. In Siddhi sthan of Charaka Samhita, sirakampa⁽¹⁾ cause by vitiation of vata by aggravation of ruksha guna is explained vepathu is enlisted under one among the 80 nanatmaja vikaraks of vata. Madhav defined vepatu as generalised vata vikara with sarvang kampa.

In Parkinson's disease the basic pathologic changes is degeneration of a group of nerve cells deep within the centre of brain in an area called substantia nigra. These cells use Dopamine as their neurotransmitter to signal other nerve cells. As these cells degenerate & stop functioning, Dopamine fails to reach the areas of brain that affect motor functions. No satisfactory treatment is seen in modern system of medicine for Parkinson's disease. In this therapy *kapikachhu beej* contains Levodopa which is indicated in Parkinson's disease and *Basti chikitsa* is useful in all *Vatavyadhis* & *Nasya* affects the group of degenerated nerve cells of substantia nigra.

Case report – A male patient aged 48 years visited Panchakarma O.P.D. of D.Y.Patil Ayurved hospital Nerul, Navi Mumbai. He was having Hast Kampa & shirhakamp since 3 years, developed slowness in daily activity. On examination while sitting his body was leaning to one side & while walking his gait was shuffling, steps were short & slow. Marked Rigidity of upper & lower limb was noted. When asked the patient to write his name 1st letter was greater then gradually letters became smaller in size. He was on Tab. Levodopa & Vitamin A, E. Parkinson's disease was diagnosed 3 years back. He was admitted in Panchakarma I.P.D. of D.Y.Patil Ayurved hospital Nerul, Navi Mumbai. During the trial this treatment was stopped & Kapikacchu Beejchurna 4 gm twice in a day & Panchakarma was started.

1.1. AIM

- To study the effect of sarvanga snehana, swedan followed by Mashadi Taila Matra Basti & Nasya karma with Ksheera Bala Taila in the management of Kampvata.
- To evaluate the effect of Kapikacchu beej churna in the management of Kampvata.

1.2. Diagnostic Criteria

Diagnosis was made based on clinical symptoms of *Kampavata* (Parkinson's disease)

i.e.

Rigidity-*Stamba*

Bradykinesia-*Chestsanga*

Gaitabnormalities-*Gatisanga*

Postural abnormalities- *Avanaman*

1.3. Treatment Planned

- *Sarvanga snehan with Mash tail⁽¹⁾ for 21 days.*
- *Sarvanga Nadi sweda with Dashmoola for 21days.*
- *Masha taila 60 ml matra basti .for 14 days*
- *Nasya Karma – with Ksheera Bala Taila 8-8 drops for 7 days (after completion of matra basti course).*
- *Kapikachhu beej churna 4 gm twice daily with lukewarm water for 21 days.*

2. METHOD OF MATRA BASTI

Basti Procedure can be divided into three stages-

- Pre Procedure of Basti Management – The patients were instructed to come after taking light diet& after elimination of stool& urine. Preprocedure was carried out with sthanic snehan with mashataila & swedan with Dashmoola nadi sweda.

Position of Patient: Patient was advised to lie down on left lateral position on the basti table with left lower extremity straight & right lower extremity flexed at knee & hip joint. The patient was asked to keep his left hand below head.

- Main Procedure of Basti: Lukeworm 60 m.l. Mashataila was filled in the syringe. Simple rubber catheter of size 10 was attached to the nozel of the syringe. The piston of the syringe was pushed forward gently so that extra oil & the air from the catheter gets off 2-3 m.l. of Masha oil was applied to anal opening & to the catheter tip with a piece of cotton soaked in it. The patient was asked to take deep breath (inspiration) so as to help him to relax the anal opening & facilitate the entry of catheter. The catheter was introduced per rectum up to length of 4 fingers & piston of the syringe pushed gently to deliver oil.
- Post Procedure: Patient has to maintain left lateral position & gently tapped over the hips (tadan karma at pristha, nitamb, sphika) was done so that matra basti may retain for required period. Then the patient was kept comfortably in the supine position for 10 minutes. After that patient was advised to take rest. Basti pratyagam kala was noted.

3. METHOD OF NASYA KARMA

Purva Karma – Mukhabhyanga (face massage) with Ksheerabala Taila, and Nadi Sveda was done for 10 minutes.

Pradhana Karma – Patient was asked to lie in supine position, in a room devoid of breeze. The legs were slightly raised and head slightly tilted upwards, then KsheeraBalaTaila slightly warmed with the help of hot water was taken in Gokarna and 8 Bindu Taila was instilled into each nostril alternately keeping the other closed. After instilling the drops into the nostrils, the soles, neck, palms, ears etc. were gently massaged and then the patient was asked to turn to a side and spit out the phlegm. Then the patient was asked to lie with face upwards for 2 minutes and wash the mouth with lukewarm salt water. Pradhana Karma – Patient was asked to lie in supine position, in a room devoid of breeze. The legs were slightly raised and head slightly tilted upwards, then KsheeraBalaTaila slightly warmed with the help of hot water was taken in Gokarna and 8 Bindu Taila was instilled into each nostril alternately keeping the other closed. After instilling the drops into the nostrils, the soles, neck, palms, ears etc. were gently massaged and then the patient was asked to turn to a side and spit out the phlegm. Then the patient was asked to lie with face upwards for 2 minutes and wash the mouth with lukewarm salt water.

Paschat Karma: After Nasya, Dhumapana with Haridravarti was given.

3.1. Assessment Criteria

To assess the efficacy of treatment ,thesymptoms of Kampavata(Parkinson's Disease)such as tremor,bradykinesia, rigidity etc were noted carefully before the commencementof treatment(1st day) and after treatment(21st day).United Parkinson'sDisease rating scale was applied to measure the degree of improvement.

3.2. Tremor

T0- Absent

T1- Slight and infrequent, not bothersome to patient

T2- Moderate, bothersome to patient

T3- Severe, interferes with many activities

T4- Marked, interferes with all activities.

3.3. Rigidity

R0- Absent

R1- Slight or only with activation

R2- Mild / Moderate

R3- Marked, full range of motion

R4- Severe.

3.4. Bradykinesia

B0 – None

B1 – Minimal slowness, could be normal, deliberate

B2 – Mild slowness, poverty of movement

B3 - Moderate slowness, poverty or small amplitude

B4 – Marked slowness

3.5. Gait

G0 – Normal

G1- Walks slowly may shuffle short stepsno festination or propulsion

G2 – Walks with difficulty little or no assistance

G3 – Severe disturbance, frequent assistance

G4 – Cannot walk.

3.6. Posture

P0 –Normal erect

P1 – Slightly stooped

P2 – Definitely abnormal, moderatelystooped, may lean to one side

P3 – Severely stooped with Kyphosis

P4 – Marked flexion with extreme abnormality of posture.

In this case above said symptoms were in following grade –

Sr. No.	Symptom	Before Treatment	After Treatment
1	Tremor	T2	T1
2	Rigidity	R1	R0
3	Bradykinesia	B3	B2
4	Gait	G1	G1
5	Posture	P2	P1

4. RESULT & DISCUSSION

With the help of this treatment patient got significant relief in rigidity, tremor, bradykinesia & posture i.e. earlier patient used to lean one side while sitting posture but It was improved a lot after treatment. Gait was still shuffling; slow that shows patient needs 2nd course of panchakarma after a gap of 15 days.

Kapikacchu (*Mucuna Pruriens*) seed powder is used in vataj vyadhi like Kampvata (Parkinson's disease), Ardita (Facial palsy) etc. ⁽³⁾

Kappikacchu (*Macuna pruriens*) contains Levodopamine or L-dopa within its seeds. L-dopa is precursor of dopamine the neurotransmitter which is absent, or decreased in Parkinson's disease. In addition it contains serotonin, 5 HTP, Nicotine it could potentially have psychedelic effects. ⁽⁴⁾ Levodopa resolves Rigidity, Tremor first, then gradually improves posture, gait, mood, handwriting etc. ⁽⁵⁾

Kampavata is considered as one of the diseases provoked by vata due to dhatukshaya, oleation through sarvanga snehan, nadi sweda & mashadi taila matra basti are useful in pacifying vata & building ojas and also plays a nourishing action on the nervous system. Acharya Charak has introduced the importance of Snehan, Swedan in Vataj vyadhi it removes rigidity & makes the body flexible (6). Action of Matra Basti is possibly by Anupravaranbhava of bastidravya i.e. sneha moves easily up to grahani, nabhi, katipradesh & kukshi. It spreads all over the body to drain out the morbid dosha. Veerya of sneha enters into systemic circulation & may show their action in Mastishka may help in arresting the disease process.

As per Charaka Samhita, Nasya is one of the main treatment modalities when Vata is lodged in between Head and Shoulders. (7) Ksheerabala Taila is very effective in all 80 types of Vata vitiated conditions. It can be used as Nasya, Abhyanga, Pana, and Basti. (8) It acts as Rasayana, Indriyaprasadana, Jeevana, and Brumhana (9). It contains Bala Moola, Ksheera and Tila Taila. Bala Moola (*Sida cordifolia*) has the qualities like Snigdha, Pichchila and is Vata Shamaka and indicated in Vata Vyadhi (10). Ksheera is Brumhaniya and Vata Pitta Shamaka (11). Tila Taila (*Sesamum indicum*) is considered to be the best among oils (12). In the pathology sequence kaphavrutavata manifest symptoms of stambha, chestasanga, postural & gait disturbances. sarvanga snehan, swedan, matra basti & nasya helps in breaking down the samprapti (pathogenesis).

5. CONCLUSION

This study shows improvement in rigidity, tremor, bradykinesia & posture i.e. earlier patient used to lean one side while sitting posture but it was improved a lot after treatment. Even in the earlier stage, the disease is krcchratamsadhya (prognosis only on strenuous management strategies) hence patient is required repeated course of Panchakarma.

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