

Ayurveda Management of *Kampavata* with special reference to Parkinson's Disease- A Single Case Study

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Abstract:

Parkinson's disease is a progressive degenerative neurological disorder which mainly affects the motor system of body and it is characterized by resting tremors, slowness of movements, rigidity, gait disturbances/postural instability. It is correlated with *Kampa Vata* [Disease associated with tremors in body] in *Ayurveda*, [Indian ancient science for healthy life] as it is characterized by *Sarvanga Kampa* / *Shiro Kampa* [tremors all over body or tremors in head]. It is a *Vata Vyadhi* [principal element of body which caused diseases] which occurs due to pathological increase of *Chala Guna* [Moving property] of *Vata*. [Principal element of body] Treatment consists of both internal and external administration of different forms aimed to reverse pathology of *Vata* imbalance. Here, a case of 57 years male patient presented with tremors in both hands and neck, unable to walk without support since 12 years. Patient was treated with *Panchakarma* therapies; like *Sarvanga Abhyanga*, [External oil massage] *Nadi Sweda*, [sudation therapy] *Shiro Abhyanga* [Head massage], *Shiro Pichu* [Oil soaked cotton pad putting on head] and *Shiro Basti* [Retention of oil on head] and *Shamana Aushadhis* like *Tab Vatachintamani Rasa*, *Kapikachu Beeja Choorna* [*Mucuna pruriens*], *Ashwagandha Choorna*, [*Withamnia somnifera*] *Cap Ksheerabala* 101, *Avipatikara Choorna* for 1 month. The patient got remarkable relief in symptoms with above *Panchakarma* and Ayurveda medicines.

Key Words: *Kampavata*, Parkinson's disease, Tremors, Vata.

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Introduction:

Kampavata is one among *vataja nanatmaja vyadhi* explained by Acharya Charka in *sutrasthana*.^[1] *Kampa* is the prominent feature in *kampavata* which is mainly caused by the vitiation of *vata*. In early stages it can be managed with combined approach of *shodhana* like *virechana* [Medicated purgation therapy], *vasti* [medicated enema], *nasya* [Nasal drops], *Murdhni taila* [4 specific treatment of head told for diseases related to head],^[2] along with *shamana* drugs like *Kapikacchu*, *Ashwagandha*, *Bala* [*Sida cordifolia*] and *Brumhana* drugs. *Murdhni Tailas* which are known as *Shirastharpana* are the process of applying medicated oil to the *Murdha* [Head] for a stipulated time period. Head is considered as *Uttamanga* in *Shareera* by *Acharyas* so, it is essential to protect the head from any sorts of disease attacks. *Taila* is the best source for curing/ balancing the abnormal *Vata Dosha*. So, by means of *Murdhni Taila* we can achieve a drastic control over *Vataja* disorders mainly related to *Murdha Pradesha*. *Murdhni Tailas* are of four types which show a progressive mode of action in ascending order and is as follows:-

1. *Shiro Abhyanga* - Massaging of head by using medicated oil.
2. *Shiro Dhara* - Pouring of medicated oil /buttermilk, *Kashaya* etc. over forehead for a stipulated time period.
3. *Shiro Pichu* - It is the procedure of applying medicated oil to the vertex using a cotton pad impregnated with suitable medicated oil.
4. *Shiro Basti* - Here, the medicated oil is poured over the head and is allowed to remain there for certain time period and it is having the ultimate effect while comparing to all the above 3 procedures.

^[3]

All the above procedures hold an undefined role in the treatment of *Kampavata* and among that *Shiro Basti* was having the miraculous power to give relief for the patient.

Parkinson's disease is a progressive neurodegenerative disorder which mostly affects older adults making them crippled as the disease progresses. Parkinsonism is typically characterized by fine pin rolling tremors which is progressive in nature, rigidity in extremities, difficulty in walking, unable to balance the body and slow walk/ short shuffling gait. The incidences and prevalence of Parkinson's disease increase with advancing age found in 1% of people over the age of 64 years.^[4] This disease can be correlated as *Kampa Vata* in Ayurveda. Previous case study showed significant improvement in patients who are treated with *Moolakadi Taila Nasya* and *Matra Vasti* for the period of 16 days.^[5] Another study also showed *Sarvanga abhyanga* with *Ksheerbala taila*, *swedana*, *Yapana Vasti*, *Nasya* helps to improve patients' diseased condition of parkinsonism.^[6] So depending upon above findings treatment has been planned in this patient.

Case presentation:

A male patient of age 57 years brought to *Panchakarma* OPD of *Suryansh Arogyashala*, *Jayoti Vidyapeeth Women's University*, *Jaipur* by his relatives complaining of *Sarvanga Kampa* increasing since 12 years, more in head, neck and in upper extremities, difficulty in walking, able to walk with support only, stiffness in whole body, unable to talk properly, unable to have food and drink by hands. History of present illness shows that patient was well before 12 years. Suddenly while travelling, he met with a road traffic accident in which there is blunt trauma to back and head, patient recovered from this with the help of routine treatment given by physician. After six months from this incidence, he developed slight tremors of head and hands which were progressive in nature. Later, after few months, patient was unable to perform his work also. Family history is positive for Parkinsonism from both maternal and paternal side. Patient was non-alcoholic, chronic tobacco chewer but as symptoms appeared he

stopped tobacco chewing. Patient went to take treatment but due to financial crises, he stopped the medicine.

In general examination-BP - 100/76 mm of Hg, PR - 68/min regular, RR - 17/min, Pallor – Presen, Icterus – Absent, Bowel habit - 1 time per day with slight constipation, Micturition - 3 - 4 times per day, clubbing / cyanosis – Absent.

In systemic examination findings were noted as

- Respiratory system :- Chest-bilaterally symmetrical, Air entry- both sides normal, no added sounds heard
- Cardiovascular system :- S1, S2 heard, no Murmur
- Gastrointestinal system :- Per abdomen - soft, no organomegaly, no palpation
- Locomotor system :- Thin built patient, slight kyphosis, unable to walk and balance without support
- Nervous System:- Patient was conscious, oriented about place and time, higher mental functions intact, Pupil – NSERL, tremors present in neck, both hands, grip is present but with tremors.

Reflexes: Planter reflex – Flexor

Ankle jerk – Right ++,
Left ++

Knee jerk- Right ++,
Left ++ ++,

Biceps jerk - Right ++,
Left ++

Triceps jerk - Right ++,
Left ++

Muscle power- Right upper 5/5
Left upper 5/5
Right lower limb 5/5,
Left lower limb 5/5

Muscle Tone, Cog wheel type Rigidity was seen in B/L lower limbs. He had a flexed posture with mask face.

Diagnosis of patient done based upon clinical features and as patient is well diagnosed from 12 years. Patient was assessed using Hoehn and Yahr Scale and Parkinson's disease composite scale [7-8] On the basis of Hoehn and Yahr Scale scale patient was at stage 4 in this assessment (Table-1). On the basis of Parkinson's disease composite scale the assessment was done before and after treatment (Table-2).

Table-1: Hoehn and Yahr Scale:

Stage	Hoehn and Yahr Scale
1	Unilateral involvement only usually with minimal or no functional disability
1.5	Unilateral and axial involvement
2	Bilateral or midline involvement without impairment of balance
2.5	Mild bilateral disease with recovery on pull test
3	Bilateral disease: mild to moderate disability with impaired postural reflexes; physically independent
4	Severely disabling disease; still able to walk or stand unassisted
5	Confinement to bed or wheelchair unless aided

Table-2: Parkinson's disease Composite Scale:

Symptoms	Total Score	Score found in patient during first evaluation	Score after one month
Bradykinesia	4	3	2
Tremors	4	4	2
Gait	4	3	1
Balance /Postural Disability	4	3	1
Freezing	4	0	0
Nocturnal Akinesia	4	2	1
Fatigue	4	2	1
Urinary	4	2	1
Cognitive Impairment	4	1	1
Depression / Anxiety	4	1	0
Symptomatic or Orthostatic Hypotension	4	3	2
Hallucination or thought disorder	4	1	0
Dyskinesia	4	4	2
Dystonia	4	2	1
ON/OFF	4	4	2
Dopamine Dysregulation syndrome	4	0	0
Disability	4	4	2
	68	39	19

Table-3: Therapeutic intervention (Panchakarma and shaman treatment):

Medicines	Dose, time & anupan	Total duration
<i>Kapikachu Beeja Choorna</i> ⁹(Mucuna Pruriens) + <i>Ashwagandha Choorna</i> [10]	5gm each in morning time with milk	1 month
<i>Cap Ksheerabala</i> 101 [11]	1 cap Three times a day after food with plane water	1 month
<i>Avipatikara Choorna</i> [12]	5gm at night time after food with warm water	1 month
<i>Shiro Abhyanga</i>	<i>Brahmi Taila</i> [13]	10 days
<i>Sarvanga Abhyanga</i> followed by <i>Bashpa Sweda</i>	<i>Maha Narayana Taila</i> [14]	1 month
<i>Shiro Pichu</i>	<i>Brahmi Taila</i>	From 11 th day to 20 th day
<i>Tab Vatachintamani Rasa</i> [15]	1 tab two times a day with honey at 8am and 6 pm daily	20 days
<i>Shiro Basti</i>	<i>Moorchita Tila Taila</i> [16]+ <i>Brahmi Taila</i> .	From 21 st day to 30 th day

The patient was followed up along with following medications:-

1. *Kapikachu Beeja Choorna* + *Ashwagandha Choorna* 5gm each in morning time with milk for 1 month
2. *Tab Vatachintamani Rasa* 1 tab two times a day with honey at 8am and 6 pm daily for 1month.
3. *Shiro Abhyanga* [application of oil over head] with *Brahmi Taila*

Outcome and follow-up:

Patient shows mild to moderate degree of improvement in the symptoms. Hoehn and Yahr Scale changes to 3 after 15 days and changed to 2.5 after 1 month. Parkinson's disease Composite Scale also showed some changes which was reduced from 39 to 19. During follow up, patient's symptoms was slightly increased as he discontinued the medications.

Discussion:

As *Kampa Vata* is a *Vata Vyadhi*, which is a progressive neurological disorder due to impairment in *Chala Guna* of *Vata*, so that *Vatahara* treatment should be adopted for this, both external as well as internal. When *Vata* is vitiated to its peak level, it tends to deplete all the tissues in the body; the *Pitta* and *Kapha Doshas*, the immunity and life span of an individual. Thus control of *Vata* is the only key in treatment of Parkinson's disease. Hence, removal of *strotodushti*, *Vata Shamana*, *Vatanulomana* and *Rasayana* therapy by the administration of effective medication and treatment will lead to effective cure of Parkinson's disease and also have to avoid *Vata Prakopakara Ahara* and *Vihara*.^[17] So, here *Shiro Abhyanga*, *Sarvanga Abhyanga*, *Bashpa Sweda*, *Shiro Pichu* and *Shiro Basti* were adopted to calm the *Prakupitha Vata* as external measures. Here, for *Shiro Abhyanga*, *Shiro Pichu* and *Shiro Basti* were done by using *Brahmi Taila* due to its *Medhya Rasayana* and stress relieving

action which helps to calm the nervous system as *Kampa Vata* is a neuro degenerative disease, it is treated by *Rasayana* approach in Ayurveda.; so that, his damaged nerves gets proper stimulation by means of proper increase blood circulation to brain which inturns help in reverse the pathological process to an extent. *Sarvanga Abhyanga* with *Maha Narayana Taila* will helps in the strengthening of muscles, bones and joints, provides analgesic effect, nourishment of *Sushka Dhathus* and also do *Vatahara* and *Vatanulomana* action by doing *Abhyanga* in *Anuloma Gati* which will also hampers the *Viguna Gati* of *Vata Dosha* in the pathology. *Bashpa Sweda* using *Vatahara Kashaya* will also help in *Vatahara* action and also helps in reducing the stiffness of the body.^[18]

Internally, *Kapikachu Beeja Churna* was given which contain natural source of I-dopa. It replenishes depleted stores of striatal dopamine.^[19] *Ashwagandha Churna* is also given which is a *Rasayana* drug, as *Rasayana* drugs are essentially nutritional agents and *Medhya Rasayana* are specific nerve tonics with nootropic effect.^[20] This is because; Ayurveda considers this type of movement disorders under *Vata Dosha Vikaras* and to overcome the neuro nutrients by *Rasayana* remedies. *Avipathikara Churna* was given for the attaining the *Anuloma Gati*^[21] of *Mala* and also for correction of *agni* as it is told that "Sarve Roge Api Mandhagnau" in Ayurveda and also for the treatment of any disease, *Agni* should be proper first.^[21] *Vata Chintamani Rasa* was also given as it is a yoga which contains *Roupya Bhasma*, *Abhraka Bhasma*, *Loha Bhasma*, *Rasa Sindura*, *Pravala Bhasma* and *Moti Bhasma* which was having rejuvenating, catalytic, antioxidant, immune modulating, and strength promoting action along with *Vatahara Rasayana* property. So, it is used in treatment of *Kampavata*.^[22]

Conclusion:

Kampavata can be compared with Parkinson's diseases depending on symptomatology of patient. Panchakarma can create miracles in one's own life along because of ability of evacuation, superiority of efficacy and enormity of the procedures to target *dosha* eradication. *Murdhni Taila* along with rasayana drugs shows its ultimate action in this case. *Abhyanga*, *Swedana*, *Nasya*, *Niruha*, *Anuvasana*, *Virechana* and *Shiro Basti*, are the useful measures that can increase the life expectancy of the patient. So, it can be concluded that both *Samshodana* and *Samshamana Chikitsa* plays an excellent role in improving the day-to-day activities of a *Kampa Vata* patient if adopted properly and regularly.

Limitation of the study:

Parkinson's disease is progressive neurodegenerative disorder so difficult to comment about absolute treatment in such short period of time. Further more studies with large sample size along with control group are needed for establishment of action of *Panchakarma* in this disease condition.

Consent of patient:

A written consent was obtained from the patient and patient's relative before starting of the *Panchakarma* treatment and before writing case report of the patient.

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