



## MANAGEMENT OF KAMPAVATA WITH AYURVEDIC TREATMENT MODALITY- A CASE REPORT

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### ABSTRACT

*Kampavata* is described under *Vatavyadhi* in *Ayurveda* classical books, on the basis of signs and symptoms it is named as *Kampavata* or *vepathu*. This disease is can be correlated with Parkinson's disease in modern medicine on the basis of the signs and symptoms of the disease. This disease is a neurological disorder affecting 1% of the population, it is considered as degenerative disorder of the nervous system affecting the motor system of the body. There is no such satisfactory treatment for this disease in modern medicine, but in *Ayurveda* it can be treated to a much greater extent. Here is a case

report of 62 years female patient attended Kayachikitsa OPD of AIIA with complaints of tremors all over the body with stiffness and pain since 2 years, patient was taking allopathic treatment but could not get relief, so she was admitted and treated with ayurvedic treatment. Nasya therapy, Abhyang and Swedana along with oral medicines was given and the overall condition of the patient was assessed. After 15 days of the treatment patient got relief in all the symptoms and signs, tremors and pain was reduced.

**KEYWORDS:** *Kampavata*, *Vatavyadhi*, *Ayurveda*, Parkinson's disease, Nasya therapy.

### INTRODUCTION

Incidence of *Kampavata* or Parkinson's disease is increasing day by day due to the modern lifestyle and the treatment modality is not so effective nowadays. This disease mainly occurs in the oldage. This is one of the most common extra-pyramidal crippling disease. It is a syndrome consisting of classical triad of resting tremor, bradykinesia and rigidity. This triad does not include the equally important gait and postural stability problems which also constitutes the syndrome. It is a disease of elderly and its prevalence increases from 1% in

people over the age of 65 years to 5% in people over the age of 80 years and affects men and women equally. It is characterized by the degeneration of dopaminergic neurons in the substantia nigra of the brain, resulting in reduction and imbalance with neurotransmitter like acetylcholine and dopamine. Patients are now opting for Ayurveda due to dissatisfactory treatment in contemporary medicine. Parkinson's disease is a progressive disease leads to crippling of patient. Its conventional treatment includes Levodopa preparations, anticholinergic drugs etc. which gives more or less temporary relief. As per Ayurveda Kampavata is described under vatavyadhi. Due to various lifestyle and dietary habits vata in the body vitiated and this vitiated vata then overflow in the circulation and this Vata may relocate to any dhatus that are weak. When a preexisting weakness resides in the tissue of the brain, this becomes the site of relocation, and thus we have a condition of vata (prana, samana and vyana) in the majja dhatu, damaging portions of the brain stem and causing altered coordination and tremors. As vata increases it dries out the kapha portion in the cellular structure of the brain which enhances the degeneration process of the brain. According to modern pathogenesis there is a degeneration of cells in the brain which produces the neurotransmitter dopamine and various drugs which blocks the functions of dopamine and causes the Parkinson's disease. The most common recognizable symptom of Parkinson's disease is known as a "pill rolling tremor." In this condition, the thumb and fingers move uncontrollably in a manner resembling the rolling of a pill between the fingers. Tremors most commonly appear in the hands, arms, and legs, though other areas may be affected. Small movements of the hands and fingers may eventually be difficult. This condition, called micrographia, can make ordinary daily activities such as buttoning a shirt very difficult. Another symptom is stambha (rigidity), in which movement becomes slow and difficult to initiate. Sensory examination and reflexes are usually normal. The most common signs and symptoms of Parkinson's disease are Tremors, Muscular Rigidity, Mask Face/Staring, and Festinating Gait. Treatment given in Ayurveda for this disease is mainly vata shamak which includes Abhyang, Swedana, Basti treatment and various oral medication. Here is case report of known case of Parkinson's disease.

### **Case Presentation**

A 62 years old female patient(UHID no:283215) came to Kayachikitsa OPD of AIIA hospital on 22 May 2018 with complaints of tremors over bilateral upper and lower arms and neck (on and off) since two years, backache and stiffness all over the body(mostly in the morning) since one year. She got admitted on the same day in the AIIA hospital. History of Present

illness:According to the patient she was asymptomatic before 2 years then gradually she developed weakness all over the body and mild tremors over bilateral upper arms, she took allopathic treatment for this but could not get satisfactorily relief, so she came to All India Institute of Ayurveda(AIIA) for her better management.

**Table 1: Examination.**

<p><b>General Physical examination:</b>          Appetite:average Bowel:irregular          Bladder:normal Sleep:average          Menstrual history:menopause at 45 years of age.          Blood pressure:130/70 mmHg          Pulse:78/min, regular (Vatapittaj)          Respiratory rate:18/min          Temperature:normal Pallor:absent          Icterus:absent          Lymphadenopathy:none          Clubbing:absent Pedal oedema:not present</p>	<p><b>Dashvidh pariksha:-</b>  <i>Prakriti– Vatapittaja</i>  <i>Vikriti–Vataja, Kaphaja</i>  <i>Sara – Madhyam</i>  <i>Samhana –Madhyam</i>  <i>Ahara Shakti – Madhyam</i>  <i>Abhyarana Shakti – Madhyam</i>  <i>Jarana Shakti – Madyam</i>  <i>Vyayam Shakti – Avara</i>  <i>Vaya – Vridha</i>  <i>Satva – Madhyam</i>  <i>Satmya – Madhyam</i>  <i>Bala – Avara</i></p> <p><b>Ashtavidha pariksha:-</b>  <i>Nadi – 78/min (Vatapittaj)</i>  <i>Jivha – Sama</i>  <i>Mala – Malabaddhata</i>  <i>Mutra – Samyaka</i>  <i>Shabda – Kshin (low tone speech)</i>  <i>Sparsha – Samanya</i>  <i>Drik – Samanya</i>  <i>Akriti – Madhyam</i></p>	<p><b>Systemic examination:</b>          Cardio vascular System: S<sub>1</sub>S<sub>2</sub> normal, no added sounds.          Respiratory System:No abnormality detected.          Gastrointestinal System:No abnormality detected.          Nervous System: Higher function-normal          Motor functions-          Nutrition=normal          Power=Rt upper(4/5) Lt upper(4/5)          Rt lower(3/5) Lt lower(3/5)          Tone=normal(right and left upper lower arms)          Coordination=normal          Reflexes=normal, present.</p>
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***Samprapti Vighatana****Dosha - Vataja Kaphaja**Dushya - Ras, Rakta, Majja**Srotas - Rasavaha, Raktavaha**Adhithana - Shira, Hridaya.*

On the basis of above examination and signs and symptoms the patient was diagnosed with Kampvata or Parkinson's disease.

Table 2: Criteria for assessment based on all the signs and symptoms.

Grading	<i>Kampa</i> /Tremor	<i>Gatisanga</i> /Bradykinesia	<i>Vakvikriti</i> /Speech disturbance	<i>Stambha</i> /Rigidity
0	No tremor	Can walk brisk without aid	Normal speech	No rigidity
1	Unilateral slight tremor present at rest decreased by action, increases by emotion and stress and disappear during night	Can walk without assistance slowly but with shuffling gait	Variable tone of voice, slight slurring of speech	Cog-wheel rigidity feebly present and disappears on continuous examination
2	Bilateral tremor	Can walk without assistance slowly with shuffling with retropulsion/propulsion	No echoing dysarthria present but speech is clearly understandable monotony present	Rigidity Present/demonstrable on any of major joints
3	Tremor not violent But present in less number of organs mentioned above	Can walk slowly But need support, shuffling with retropulsion/propulsion lack of associated movement	Monotonous voice, spilt consonance but understandable	Patients sit properly but Cogwheel rigidity demonstrable in major joints slow eye ball movements without staring appearance
4	Bilateral violent Tremor along with tremor in tongue and / or in eyelids lips and not suppressed or diminished by desired movement	Unable to raise from bed and walk without assistance	Incomprehensive words, monotonous voice, echoing, speaks only on insistence	Marked rigidity in major joints of limbs, patients maintain abnormal sitting postures, stared eyes

### Treatment Protocol

Table 2: A.Oral medication.

S.no	Medication	Dose	Route	Frequency
1	<i>Ashwagandha churna + Vacha churna</i>	3 grams+250mg	Orally	Twice a day
2	<i>Punarnavadi guggulu</i>	2 tablet	Orally	Thrice a day
3	<i>Lasunadi vati</i>	1 tablet	Orally	Twice a day
4	<i>Saptamrit loha</i>	2 tablet	Orally	Twice a day
5	<i>Trinapanchamoola kwatha+Eranda tail</i>	30ml+10ml	Orally	Twice a day

**Table 4: After 3 days the treatment was changed.**

S.no	Medication	Dose	Route	Frequency
1	<i>Ashwagandha churna + Vacha churna</i>	3 grams+250mg	Orally	Twice a day
2	<i>Punarnavadi guggulu</i>	2 tablet	Orally	Thrice a day
3	<i>Lasunadi vati alternate with Sanjeevani vati</i>	1 tablet+1 tablet	Orally	Twice a day
4	<i>Saptamrit loha</i>	2 tablet	Orally	Twice a day
5	<i>Ark Ajmoda</i>	3 teaspoonfull	Orally	Twice a day

**B. Panchkarma treatment**

- *Sarvanga abhyanga* with *Saindhavadi tail* and *Sarvanga abhyanga* with *Dashmoola kwatha*.
- *Marsha nasya* with *Brahmi ghrita* 6 drops per nostrils with increasing dose upto 10 drops per nostril according to the tolerance of the patient followed by *Dhumpana* with *Haridradi varti*.

Panchkarma treatment was done for 10 days.

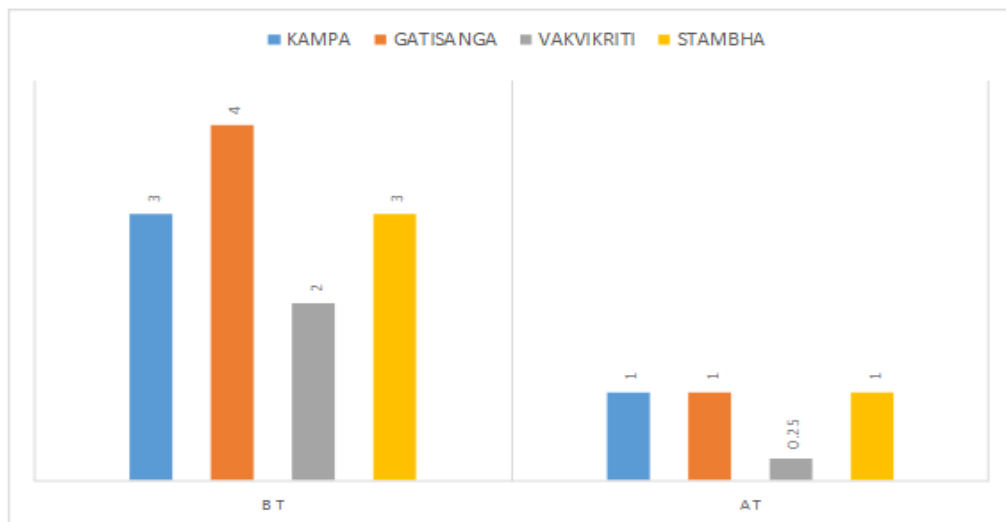
**Nasya therapy****RESULTS**

After the whole course of treatment the condition of the patient was improved.

**Table 5: The overall result is given below in the table.**

S.no	Signs and Symptoms	BT	AT
1	<i>Kampa</i> (tremor)	B/L tremors in upper and lower limbs	Slight tremors are present which decreased by action but increased with emotion.
2	<i>Gatisanga</i> (bradykinesia)	Cannot walk without assistance	Can walk without assistance
3	<i>Stambha</i> (rigidity)	Present	reduced
4	<i>Vakvikriti</i> (disturbance of speech)	Slight slurring of speech	No slurring of speech
5	Sleep	Disturbed sleep	Normal sleep
6	Facial expression	none	Improved

Chart showing results in all the symptoms and signs.



## DISCUSSION

*Kampavata* comes under the nanatmaja vyadhi of Vata dosha. Vata dosha can be vitiated by two major causes due to dhatukshaya or due to avarana. Ayurvedic treatment for this condition mainly based on the treatment of unbalanced Vata. Oleation and Fomentations form basis of the treatment of all the Vatavyadhi. In this disease both dhatukshaya and avarana of vata are the major causes. For the treatment of avarana Acharya Charaka has mentioned Srotoshuddhi, Vatanulomana and Rasayana. According to the ayurvedic texts Svedana, Abhyanga, Niruha, Anuvasana, Shirodhara and Nasya in the management of *Kampavata*. In this case report, considering the dosha and dhatu treatment was given. As it is mentioned in the treatment of *Vatavyadhi* by Acharya Charaka, the first treatment or the basic treatment includes snehana and swedana so here also sarvanga abhyanga and swedana was done, abhyanga was done with saindhavadi tail as it has vata doshahar properties, swedana with dashmoola kwatha which is again vatahara.

Nasya with Brahmi Ghrita was chosen because it is capable to normalize Vata dosha by its Madhur Vipaka and Snigdha, Guru, Vatahara, Vedanasthapana Properties. Sukshma guna of Ghrita helps to reach the micro channels. So drug easily comes into systemic circulation and break Dosha - dushyasamurchna. As Brahmi included under Medhya Dravya. It helps in all condition with deficient Majja dhatu.

Dhumpana was also given after nasya as it is mentioned by Ayurveda acharyas to give dhumpana after giving nasya to combat the kapha which is likely to get vitiated after giving the nasya.

Oral medications or shaman therapy was given according to the disease and condition of the patient. For the first three days trinapanchmoola kwatha along with erand tail was given which helps in vatanulomana which is very important for the treatment of vata dosha, as the pakwashaya is considered the main place of vata dosha so purgating drugs helps in establishing the normal vata dosha, after giving trinapanchmoola kwatha and eranda tail patient experiences motions 6 to 7 times a day after this there is a lot of relief in the signs and symptoms of the disease. Ashwagandha churna along with vacha churna was given as it is balya and both these drugs are nervine tonic and vata doshahar and vacha is particularly given in the kampvata condition. Punarnava guggulu was given for its antiarthritic properties and vatahar karma. Saptamrit loha is given for rakta dosha as in this case rakta dosha was also vitiated. Lasunadi vati was also given for its vata dosha har properties. After 3 days ark ajmoda and sanjeevani vati was given in place of trinapanchmoola kwatha and eranda tail for maintaining agni as deepana pachana dravya.

## CONCLUSION

In above discussion and result we can say that this therapy is effective in Parkinson's disease and it will be done in large population with more objective criterias. This case study not only gives us confidence and better understanding for treating such cases in Ayurvedic hospital but also leads in the direction of further clinical trials to establish cost effective and safe Ayurvedic therapy.

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