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Complementary/alternative medicine Section

Ayurvedic Management of Avascular Necrosis of head of Femur: A Case Report

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ABSTRACT

Avascular Necrosis (AVN) is a pathological condition characterised by a reduction in the blood supply to the subchondral bone, leading to the degenerative condition of the bone, marked by the death of cellular components of the bone. It is also known as osteonecrosis. The epiphysis of long bones at weight-bearing joints is typically affected. All of these conditions have a poor prognosis. In Ayurveda, it corresponds to *Asthivahastrotodushtivikara* (musculoskeletal disorder) as there is *kshaya* (necrosis) of *asthi* (bone) and *Majja* (bone marrow) *dhatu* (major structural components of the body). In modern medicine, AVN is managed by the use of corticosteroids and many surgical procedures such as drilling, insertion of prosthetics, or bone grafts. Therefore, *Ayurveda* provides a conservative line of treatment based on the principle of *Asthi-majjagatkashaya* (decalcification of bone) caused by *abhighatajanyavataprakopa* (trauma). A case of AVN with the right femoral head was treated with *shaman* (oral medications), *Sodhana* (bio-purification), and *bruhmana* (rejuvenation) procedures. The therapy provided significant improvements in pain and range of movement of the hip joint, based on the patient's signs and symptoms before and after treatment. Conservative treatment can give outstanding results, improve the quality of life, halt disease progression, and help manage AVN by tissue regeneration without harmful effects.

Keywords: Asthi dhatu, Bruhmana, Kshaya, Musculoskeletal disorder, Sodhana

CASE REPORT

A 36-year-old female reported to the outpatient department of Kayachikitsa with complaints of pain in the right hip joint, difficulty in walking, standing for long periods, sitting, and climbing stairs for one month. She had a history of a fall one month prior, after which she began experiencing mild pain in her right hip joint. After a few days, her pain gradually aggravated for which she consulted an orthopaedic surgeon who diagnosed her with AVN of the right femoral head with joint effusion based on Magnetic Resonance Imaging (MRI). She was advised for surgery but as she was not willing, she sought *Ayurvedic* management from this department. Clinical examination was done based on *Ayurvedic* parameters [Table/Fig-1,2].

S. no.	Examination	Observation
1	Nadi (pulse rate)	72/min
2	Mala (bowel)	Once in a day, regular, <i>Nirama</i> (no mucous present)
3	Mutra (frequency of urine)	5-6 times per day
4	Jivha (tongue)	Nirama (not coated)
5	Shabda (speech)	Spasta (clear)
6	Sparsha (touch)	Anushnasheeta (normal)
7	Drika (vision)	Prakrita (No pallor/Icterus present)
8	Akriti (body built)	Madhyam (medium)

[Table/Fig-1]: Ashtavidha Pariksha (eight fold of examination)

She was a vegetarian with a normal appetite, and her bowel habits were normal, but her sleep was disturbed due to pain. On clinical examination, mild tenderness was noted in the right hip region, along with a decreased range of movement in the hip. Internal rotation of the hip joint was painful on the right-side. Investigations like Complete Blood Count (CBC) and blood sugar levels were within normal limits.

Assessment Criteria

 The pain was assessed using the Visual Analogue Scale (VAS) [1], which scored an eight. The Straight Leg Raising (SLR) test was

S. no.	Examination	Observation		
1	Prakruti (constitution of the patient)	Vata-Pitta		
2	Vikruti (pathological variations)	Vatadosha, Asthi-Majja dhatu, Raktavaha strotodushti		
3	Sara (quality of tissues)	Madhyam (average)		
4	Samhain (built of the body)	Madhyam (average)		
5	Praman (anthropometric measurements)	Weight-45 kg Height-5 feet 2 inches BMI- 18.1 kg/m ²		
6	Satmya (adaptability)	Madhyam (average)		
7	Satva (mental strength)	Pravar (high)		
8	Aahar Shakti (food and digestion capacity)	Madhyam (average)		
9	Vyayam Shakti (exercise capacity)	Avar (Poor)		
10	Vaya (age)	Yuva Avastha (young age)		
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[Table/Fig-2]: Dashvidhapariksha (Ten folds of Examination)

positive. After abduction of the hip joint up to her total capacity, the distance from the right toe to the left toe [Table/Fig-3] was 53 cm with pain.

2) Internal rotation of the right hip joint was painful up to 60°, and external rotation of the right hip joint was also painful up to 60°.



Timeline of Treatment

She was diagnosed as a case of Asthi-Majja-gata Vata and was treated according to Ayurveda treatment principles for five months. Medicines and Basti (medicated enema) treatment were administered for Strotoshodhan (detoxification of body channels) to improve local blood circulation and nourish the Asthi Dhatu (bone) [2]. According to Acharya Vagbhata, in Asthi Kshaya, Basti containing Ksheer (milk), Ghrita (clarified butter), and Tikta Rasa (bitter taste) should be administered [3].

As per above principle, Shaman chikitsa (oral medication) was given for one month while the patient was admitted to the ward. She got mild relief in symptoms. Upon discharge, she was advised oral medication for three months along with Pathya Sevana (healthy regime) [Table/Fig-4].

S. no.	Name of medicines	Duration
1	Cap Ksheerbala once a day before meal in morning	One month
2	Shiv Gutika 500 mg thrice a day after meals, once a day	Two months Three months
3	Panchtikta Ghrita Guggulu 250 mg twice a day after meals	Two months
4	Mahamanjisthadi Kwath 20 mL twice a day after meals	Two months
5	Tab Me-cal 500 mg twice a day after meals	Two months
6	Tab Hadjod 500 mg once at night after meal Two months	
7	Amalaki Rasayana 3 gm once in morning	Three months
8	Lakshadi Guggulu 250 mg twice a day	Three months
9	Guduchi Ghan Vati 250 mg once a day Three months	
[Table/Fig-4]: Shaman treatment plan.		

Shodhana Basti (medicated enema) was given in the form of Manjisthadikwathbasti (therapeutic enema) in a Yoga Basti schedule for 10 days. Shastishalipindsweda (red rice sudation) was given as Brumhanachikitsa (Rejuvenation) for 10 days [Table/Fig-5].

S no.	Shodhana chikitsa	Drugs	Duration
1	Snehan (body massage)	With ksheerbala oil	15 days
2	Pinda swedan	Shastishali (red rice)+ashwagandha Powder+panchtiktaghrita+ milk	10 days
3	Matra Basti (medicated enema)	Ksheerbala oil (20 mL) + Panchtikta ghrita (30 mL)	10 days
4	Niruhabasti	Decoction of Dashmool Bharad 20 gm + Guduchi powder (10 gm)+Kalka of manjistha powder (30 gm) and Arjun powder (20 gm)+Saindhava (10 gm)+Honey (30 mL)+Sahachar oil (50 mL)	10 days
5	Nirgundi Patra pottli swedan	Over lumbar, hip, and thigh region at night	1 month
[Table/Fig-5]: Panchkarma procedure.			

Observation

Clinically, there was a significant improvement in symptoms such as pain and tenderness. The range of motion of the right hip joint showed significant improvement [Table/Fig-6]. But there were no significant changes observed in the MRI report.

Follow-up and Outcome

After 10 days of the Yoga Basti plan, the patient got mild relief in symptoms. She was able to sit in a squat position, and the SLR test increased from 60 to 80°. After follow-up of three months, she got complete relief. Her pain score became zero, she achieved complete flexion and abduction of the leg without pain, and internal and external rotation became painless [Table/Fig-7]. Currently, the patient is off treatment and is keeping well.

Assessments	Before treatment	After treatment
Pain	8	0
Straight Leg Raising (SLR) test	60°	80°
Flexion	With pain	Without pain
Abduction	53 cm	85 cm
Internal rotation	60 (pain)	80 (no pain)
External rotation	60 (pain)	70 (no pain)



DISCUSSION

The AVN is a pathological condition caused by an interruption of subchondral blood supply, which results in degenerative bone condition characterised by the death of cellular components of the bone [4]. It is also known as osteonecrosis, aseptic necrosis, or ischaemic bone necrosis [5]. Typically, the epiphysis of long bones at weight-bearing joints is affected. Common sites of AVN include the femoral heads, humeral head, and knee joints it can affect both the bone and surrounding structures. The aetiology can be traumatic or non traumatic. Non traumatic AVN is caused by the blockage of blood vessels due to intravesicular or outer compression of blood vessels, limiting blood flow to the femoral head [6]. Traumatic AVN is caused by an injury that disrupts blood supply. The most typical type of bone necrosis is AVN of the femur head, manifesting as a radiolucent band with demineralisation of unaffected bone in the fibrous zone and mottled area. The main issue is reduced blood flow to the bone or malnutrition of the bone. The femoral head portion has very little arteries that nourish it, making it more vulnerable to injury and eventual femur disintegration [6]. AVN can be caused by the use of systemic steroids, certain inflammatory diseases like vasculitis, systemic lupus erythematosus, smoking, sickle cell disease, coagulopathy, infections like Human Immunodeficiency Virus (HIV), tuberculosis, and meningococcal infection [7]. It mainly affects people in the age group of 30 to 50 years. Epidemiological data from the United States estimate the prevalence of AVN of the hip joint in the general population to be around 300,000 to 600,000 cases in the early 2000s, with about 10,000 to 20,000 new cases occurring every year [8].

In Ayurveda, there is no direct reference to AVN as a specific ailment. It may correspond to Asthi-majja-gata-vata (musculoskeletal disorder), elucidated under Vatavyadhi. Its symptoms include Bhedoasthiparvanam (bone-breaking pain), Sandhi Shula (joint pain), Mamsakshaya (muscle wasting), Balakshaya (weakness), Aswapna Santataruka (disturbed sleep due to continuous pain), Sandhi Shaithilyam (loosening of joints), and Shiryantiva Cha Asthi nidurbalani (generalised weakness due to destruction of bony tissue) [9]. Asthi-majja-vahastrotodushti (musculoskeletal disorder) may occur due to abhighata (trauma) or margavrodha (obstruction), resulting in bone necrosis. In modern medicine, AVN is managed by the use of corticosteroids many surgical procedures such as drilling, insertion of prosthetics, or bone grafts. These procedures are costly and often have a poor prognosis. Therefore, a conservative treatment approach was chosen based on the principle of Asthimajja-gata-kashaya (decalcification of bone) caused due to abhighatajanya-vata-prakopa (trauma). It was considered that there is an involvement of Vata dosha, asthi-majja dhatu vikriti, and raktavaha-strotodushti. This case of AVN in the right femoral head was treated with shaman (oral medications), Sodhana (biopurification), and bruhmana (rejuvenation) procedures [10].

Chaturvedi A et al., conducted a study on AVN in which Shodhan and Shaman Chikitsa was given [10] but no Brumhaniya Chikitsa was used to give strengthen the bones, which is a unique aspect of this study. In present case, there was a history of a fall considered as traumatic aetiology, due to trauma, the patient started experiencing pain in the hip joint. Therefore, this case was treated based on the classical principles of Avurveda, considering the Kashya of Asthi Dhatu, Brumhaniya Therapy, and Rasayana Therapy. Strotoavarodha (microchannel blockages), Ayurveda, can be used to explain pathogenesis due to the lack of blood flow to the hip joint or the head of the femur. Ayurveda claims that this condition is similar to Asthi-majja-gata-vata (AVN). Joint pain may gradually worsen, limiting one's range of motion. The first line of treatment for Vata Dosha, (the regulating functional element responsible for movement and cognition) the dosha responsible for movement and digestion, is "Basti" (medicated enema). Additionally, it is explained for Rakta, (the body's blood-regulatory functional factor) Kapha Dosha, and Pitta (the factor in charge of regulating body temperature and metabolic activity) [11]. Along with Srotoshodhana (detoxification), Dosha Vilyana (releasing of toxins) takes place, which aids in reducing Margavarana of Vata. It enters the minute pathways of Srotasas (channels), hence pacifying Vata Dosha. The qualities of Ushna (hot), Ruksha (dry), and Tikshna (strong) serve to appease Sheeta (cold) and Snigdha (soothing) of Kapha [12]. Keeping the above Ayurvedic principles in mind, the following treatment was planned and significant results were shown in this case. The patient's quality of life improved, and she was able to perform her daily chores without any discomfort. Pain and tenderness disappeared, and the range of motion of the right hip joint also improved after treatment. However, there was no significant improvement shown in the X-ray and MRI reports.

Cap Ksheerbala is an excellent medicine for rejuvenation that fortifies the bones and joints, specifically calming the Vata and Pitta doshas [13]. Shiv Gutika contains Shilajatu (Asphaltum Punjabianum) as its main content, helping to strengthen the bones by increasing the uptake of minerals like calcium, magnesium, and phosphate into the tissues of the bones and muscles. It reduces the risk of bone fragility and fractures. Humic acid, a key component, greatly reduces blood lipids, preventing fat deposits in the blood arteries and heart vessel obstruction. The reference for Shiv Gutika comes in the Shilajatu Prakarana of the Chakradutt book, where Lord Shiva revealed this Rasayana to Lord Ganesha, hence the name Shiv Gutika [14]. Panchtikta Ghrita Guggulu has a Katu (pungent) and Tikta (bitter) taste, is Laghu (easy to digest), Rooksha (dry), Vishada (brings clarity), Sukshma (microscopic), Sara (brings movement), Katu (pungent), Vipaka (post-digestive effect), and hot in potency. Guggulu, on the other hand, has Lekhana (scraping and clearing the channels) properties, balances Tridoshas, and increases digestive power. It is extremely helpful in treating diseases like Asthikashaya and Asthi-Majjagat Vata (musculoskeletal disorders) as it serves as a "Srotoshodhak" (purifying agent) [15]. Mahamanjisthadi Kwath is an Ayurvedic supplement that helps purify the blood, effectively maintaining Pitta vitiation and balancing Vata and Kapha doshas [16]. Tab Me-cal is a unique blend of calcium, magnesium, strontium, and protein with Kukkutandtwak (eggshell) as its main content, stimulating chondrocyte differentiation and cartilage growth. It reduces pain, osteoresorption, and increases bone density in cases of osteoporosis and senile osteoporosis [17]. Tab Hadjod (Cissus quadrangularisaids) speeds up the healing of fractures by lowering pain, oedema, and fracture mobility [18]. Amalaki Rasayana, made from Embilica officinalis, includes all Rasas (tastes) except Lavana Rasa (salty taste), Laghu (light), Ruksha (dry) gunas qualities, Madhura (sweet) Vipaka (post-digestion effect), and Sheeta (cooling) Virya (effect). Rasayana is a form of Swathsyaurjaskara Bheshaja (rejuvenating medicine) that works to improve health by boosting immunity and treating ailments. Rasayana aims for achieving great Rasa and other Dhatus, long life, youthfulness, memory, immunity, intelligence, strength of body organs, and intelligence [19].

Lakshadi Guggulu: Due to its anti-inflammatory characteristics, Guggulu (Commiphora wightii) has properties such as Shothahara (anti-inflammatory) and Bhagna Sandhanakara (fracture mending), while Laksha (Lacifer Lacca) has properties such as Bhagnasandhana (bone healing) and Vranaropaka (wound healing). Additionally, Guggulu preparation eases discomfort by pacifying vitiated Vata dosha.

Guduchi Ghan Vati: Guduchi (Tinospora cordifolia) has a bitter flavour, light (*Laghu*), and unctuousness (*Snigdha*) qualities, which aid in boosting digestive capacity and acting as an anti-inflammatory, giving muscles power and relieving joint and muscle discomfort.

Snehan (body massage): Massage is said to help both *Vata* and *Kapha dosha*, as described by Acharya Sushrut in *Chikitsa Sthana*. Oil massage aids in pacifying the *Doshas* because *Asthikshaya* is mostly due to the predominance of *Vata* and *Kapha Doshas*.

Swedan (sudation therapy): Shastishali (red rice) + Ashwagandha (Withania somnifera) powder + Panchatikta Ghrita + milk Pinda Sweda. It is a type of Brimhana (bulk-promoting), Vatahara, and Balya (strengthening) Sweda. By virtue of its contents, including Godugdha (cow's milk) and Shashtikashali, it provides nourishment to nervous tissues and gives muscles power. Following the administration of therapeutic heat, vasodilation occurs, which improves blood circulation and aids in the removal of waste materials. Anabolism increases as tissue gets the nourishment and oxygen. Sudation can alleviate tension and increase the range of motion by reducing stiffness and increasing tissue elasticity. The Shashtikashali Pinda Sweda technique increases tissue strength, resulting in more fluid motions [20].

Matra Basti (unctuous enema) is considered the best treatment mentioned in Chikitsa for Vata Rogais Basti. The major component of Kshir Bala Tail is Bala (Sida cordifolia) which is a strong neuroprotective herb that soothes pain and muscle stiffness, making it highly beneficial in Asthikshaya. Acharya Charak mentioned that 'in diseases of Asthi, Basti should be given using Tikta Rasatmaka Aushadhi Dravya (bitter-tasting medicine) along with Ghrut (clarified butter) and Ksheer (milk) that is Saghrit Tikta Ksheer Basti.' Tikta Rasa (bitter taste) is predominantly composed of the physical elements Vayu (air) and Akash (ether/space). It contains Tikta Rasa Pradhan Dravyas, a substance with Prithvimahabhuta (earth physical element), which aids in the growth and nourishing of bones. It has been shown to be helpful in Asthikshaya (bone decalcification) since it is snigdha (soothing), balya (strengthening), and brumhan (increasing bulk) [21].

Niruhabasti (decoction enema) consists of a Decoction of Dashmool Bharad (20 gm), Guduchi (Tinospora cordifolia) powder (10 gm), Kalka (paste) of Manjistha (Rubia cordifolia) powder (30 gm), Arjun (Terminalia arjuna) powder (20 gm), Saindhava (rock salt) (10 gm), honey (30 mL), and Sahachar oil (50 mL) for effective illness control, bone strengthening, healing, and to prevent relapse. The therapy provided significant improvements in pain and the range of movement of the hip joint.

Based on the patient's signs and symptoms before and after treatment, symptomatic improvement was seen. Conservative treatment gave outstanding results and improved the quality of life.

CONCLUSION(S)

Panchkarma therapy may be an alternative for AVN management without surgical intervention. Through Ayurveda, early diagnosis can be made, increasing the likelihood of a better prognosis.

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