

Case Study: The Efficacy of Vatsadani Kwath in Uttan Vatrakta (Gout)

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INTRODUCTION

Vatrakta, also known as Uttan Vatrakta in Ayurveda, is a Vata-dominant disorder affecting Rakta Dhatu (blood). It closely resembles gout, a metabolic condition characterized by hyperuricemia and the deposition of monosodium urate crystals in joints, causing inflammation and pain. While conventional treatments like NSAIDs and urate-lowering drugs provide symptomatic relief, they often have adverse effects and fail to prevent recurrence. The importance of alternative treatments is increasing, and Ayurveda offers a promising solution with herbal formulations like Vatsadani Kwath. This case study explores the effectiveness of Vatsadani Kwath, an Ayurvedic formulation containing Guduchi (*Tinospora cordifolia*) and Shudh Guggulu (*Commiphora mukul*), in managing Uttan Vatrakta.

CASE PRESENTATION

A 56-year-old male patient presented with symptoms of severe joint pain (Sandhi Ruja), burning sensation (Sandhi Daha), stiffness (Akunchana), and swelling in the joints. Laboratory tests confirmed hyperuricemia with a serum uric acid level of 8.13 mg/dL. The patient had a history of dietary indiscretions (high purine intake) and a sedentary lifestyle, contributing to recurrent gout attacks.

Previous medical history revealed that he had been treated with allopurinol and NSAIDs but experienced gastrointestinal discomfort and recurrence of symptoms. Additionally, his diet primarily consisted of high-protein foods, and he reported stress-related lifestyle factors that could contribute to metabolic imbalances. The patient was seeking an alternative treatment that could provide long-term relief without side effects.

TREATMENT PLAN

The patient was prescribed Vatsadani Kwath, a decoction prepared with 250 mg of Shudh Guggulu and 20 g of Guduchi, administered as follows:

- **Dosage:** 40 mL, twice daily before meals
- **Duration:** 28 days
- **Adjunct:** Lukewarm water post-administration
- **Follow-ups:** Conducted on the 7th, 14th, 21st, 28th, and 30th days
- **Lifestyle Modifications:** The patient was advised to follow a balanced diet, avoiding purine-rich foods such as red meat and seafood. Additionally, he was encouraged to engage in mild physical activity like yoga and meditation to help maintain metabolic balance.

RESULTS AND OBSERVATIONS:

After 28 days of treatment, significant improvements were observed in both subjective symptoms and biochemical markers. The patient reported a drastic reduction in pain, stiffness, and swelling, leading to an overall improvement in joint mobility and daily activity levels. The

relief experienced was progressive, with noticeable changes occurring as early as the second week of treatment.

- **Joint Pain (Sandhi Ruja):** There was an 87.23% reduction in joint pain, allowing the patient to perform daily activities without discomfort. The pain, which was initially persistent and aggravated during movement, became intermittent and mild by the end of the study.
- **Burning Sensation (Sandhi Daha):** The burning sensation in the affected joints was reduced by 78.85%. The patient reported a significant decrease in warmth and tenderness in the joints, which had previously caused extreme discomfort, especially at night.
- **Stiffness (Akunchana):** Joint stiffness was reduced by 84.44%, leading to improved flexibility and ease of movement. Morning stiffness, which had been a major concern for the patient, was nearly eliminated, allowing him to engage in daily activities with minimal restriction.
- **Swelling (Toda):** Swelling was reduced by 85.92%, significantly improving the visual appearance of the joints. The patient reported that shoes and clothing that had previously felt tight due to swelling were now fitting comfortably.
- **Joint Discoloration (Sandhistha Vaivarnya):** There was a 92.31% improvement in joint discoloration. The patient observed a marked reduction in redness and darkening around the joints, indicating improved blood circulation and reduced inflammation.
- **Serum Uric Acid Levels:** The biochemical analysis showed a decrease in serum uric acid levels from 8.13 mg/dL to 6.25 mg/dL, representing a 23.07% reduction. This reduction was within the optimal range, indicating the effectiveness of Vatsadani Kwath in addressing hyperuricemia.

Overall, the patient experienced significant symptomatic relief and biochemical improvements, with no adverse effects reported throughout the study. His energy levels improved, and he was able to resume normal physical activities without discomfort.

DISCUSSION

Vatsadani Kwath demonstrated potent anti-inflammatory, analgesic, and uric acid-lowering properties. Guduchi is known for its immunomodulatory and detoxifying effects, while Shudh Guggulu possesses strong anti-inflammatory and lipid-lowering actions. Together, they help balance Vata and Rakta Doshas, reduce inflammation, and restore metabolic equilibrium.

Compared to conventional treatments, Vatsadani Kwath provided holistic relief without side effects. Unlike NSAIDs, which may cause gastrointestinal issues, and urate-lowering drugs that require lifelong adherence, this Ayurvedic remedy offers a sustainable and natural alternative for managing gout. The study further highlights the importance of integrating dietary regulation and lifestyle modifications with Ayurvedic treatments for long-term effectiveness.

Future research should explore the mechanism of action of Vatsadani Kwath in greater detail, including its effects on inflammatory markers and metabolic pathways. It would also be beneficial to conduct randomized controlled trials comparing its efficacy with conventional allopathic treatments.

CONCLUSION AND RECOMMENDATIONS

Vatsadani Kwath proved to be an effective, safe, and holistic treatment for Uttan Vatrakta. It significantly reduced symptoms and biochemical markers of hyperuricemia without adverse effects. Future studies with larger sample sizes and extended follow-up periods are recommended to validate these findings.

Additionally, integrating Ayurvedic therapies like Vatsadani Kwath with modern medicine could enhance patient outcomes in inflammatory and metabolic disorders. Developing

standardized formulations and clinical guidelines could further support the acceptance and integration of Ayurveda into mainstream healthcare.

Healthcare practitioners should consider recommending Vatsadani Kwath as part of a comprehensive treatment strategy for patients with Uttan Vatrakta, especially those seeking alternative or adjunctive therapies to conventional medications.

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