



## Research article

### A pilot study to evaluate the efficacy of a selected treatment module for *Vaatkantak* with special reference to *Agnikarma*

Sudhir Joshi<sup>1\*</sup> and Ashutosh R. Pandya<sup>2</sup>

<sup>1</sup>District Ayurved Officer, Vadodara, Gujarat, India.

<sup>2</sup>Government Ayurved Dispensary Vasvel, Waghodiya, Vadodara, Gujarat, India.

\*Corresponding author: E-mail: [sudhirjoshi5971@gmail.com](mailto:sudhirjoshi5971@gmail.com); Tel: +91-9824221336

#### Article history

Received : January 29, 2019

Accepted : February 18, 2019

#### Keywords

*Agnikarma*  
*Guggulu*  
*Vaatkantak*

#### ABSTRACT

*Vaatkantak*, vis a vis calcaneal spur/ plantar fasciitis, is a common problem affecting the quality of life of people. A specific treatment plan was adopted for its treatment in the present study and the results were evaluated. *Agnikarma*, an external application of *lepa guti* and internal usage of guggulu and kupilu were selected for the pacification of *Vata Dosha*. The duration of treatment was kept for one and a half month. *Agnikarma* was done on weekly basis. A total of 10 subjects were selected for the present study. The treatment protocol-module of the present study was found highly effective in curing *Vaatkantak* as marked improvement was seen in all patients.

© 2019 Global SciTech Ocean Publishing Co. All rights reserved.

## INTRODUCTION

*Vaatkantak* (plantar fasciitis) is a cause for 15% of OPD patients coming for one or other foot problems (Rao and Nischitha, 2013). The disease can become a major cause of disability and has a marked impact on the mobility of the affected person. If untreated, it can become a *vaikalykar* disease. This disease can be found more frequently in youngsters involving runners, aerobic exercise dancers and ballet dancers (Dsouza and Patil, 2019).

## MATERIALS AND METHODS

The patients were selected from the OPD of Vasvel dispensary, Waghodiya, Vadodara, Gujarat. A standard procedure was designed for the study comprising *Agnikarma* with *panch dhaatu shalaka*, application of *lepa guti*, and internal usage of preparation of guggulu and kupilu. The symptoms and morbidity were graded and assessed.

#### Criteria

Patients having a major complaint of pain in heel were selected. X-rays and uric acid reports were welcomed. Being a village place, the majority of the patients stayed aloof from both investigations. The calcaneal spur was diagnosed in one patient with the help of X-rays

## Treatment

The treatment comprised of *Agnikarma* with *Panch dhaatu shalaka*. The reference has been taken from Chakradatta (Rao, 2014).

*Raktavasechanam ..... va dahet suchibhirev va.*  
22/66

*Agnikarma* was done in the affected heel with 3 dots in three lines as shown in Fig. 1. *Twak dagdha* type of *Agnikarma* was done and *samyak lakshana* of *dahankarm* were observed. After *Agnikarma*, *Yashtimadhu churna* was applied locally.



Fig. 1. *Agnikarma* procedure in the affected heel

*Lepa guti* was used for external application which is a specific combination of drugs that are very useful in *Vata-Kapha* dominant conditions. It was advised to patients for local application in the hot state every night and was advised to be kept for the whole night. Internal usage of *Rasnadi gugglu* 2 tabs twice a day and *Vishtinduk vati* 1 tab twice a day was also recommended for subduing *vata dosha*. The gradation of pain and disability symptoms in the heel was given as per Table 1.

**Table 1.** Gradation of pain and disability

Grade	Pain	Disability
4	Severe	Severe
3	Moderate	Moderate
2	Mild	Mild
1	No pain	No disability

**Table 2.** The results of before and after treatment

S.No.	Patient	Sex	Age	Pain		Disability	
				Before treatment	After treatment	Before treatment	After treatment
1	a	m	48	4	1	4	1
2	b	f	55	3	1	3	1
3	c	f	52	4	1	4	1
4	d	f	35	3	1	1	1
5	e	m	50	3	1	3	1
6	f	f	35	4	1	3	1
7	g	m	40	2	1	2	1
8	h	m	45	3	1	3	1
9	i	f	35	3	1	3	1
10	j	m	35	3	2	3	1

Though *Vaatakantak* is not a fatal disease, it is a major cause of disability and pain. A multipronged approach of internal and external medicine, as well as *Agnikarma*, was selected for the treatment of *Vaatakantak* and it was found very fruitful.

All patients were indulged in excessive walking, a cause of *vata vrudhhi*. Most of the females were having overweight in comparison to their height leading to extra pressure on joints. The compact module served very-well in relieving the symptoms right from the first sitting of *Agnikarma*.

**CONCLUSION**

The treatment protocol-module of the present study was found highly effective in curing *Vaatakantak* and a larger study could be established it more firmly.

**ACKNOWLEDGMENT**

We are thankful to the patients who participated in this study.

The duration of treatment was kept for one and a half month. *Agnikarma* was done on weekly basis. A total of 10 subjects were selected for the present study. Out of them, six were female while four were male. All belonged to the age group of 35 to 55 years. Most of the female subjects were little obese when observed with respect to their height. One patient had pain in both the heels while others had unilateral pain.

**RESULTS AND DISCUSSION**

The results obtained from the present study are given in Table 2. It has been observed that one patient got complete relief in a single sitting of *Agnikarma*. A patient whose X-rays showed a diagnosed case of calcaneal spur also got marked relief in pain and disability.

**CONFLICTS OF INTEREST**

The authors declare that they have no conflicts of interest.

**REFERENCES**

Dsouza N, Patil SA (2019). A conceptual study on *Agnikarma* in the management of *Vatakantaka* w.s.r. calcaneal spur. *International Ayurvedic Medical Journal*, 7, 123-125.  
 Rao GP (2014). *Chakradatta*. Chaukamba Orientalia, Varanasi, India, p. 216.  
 Rao VG, Nischitha MS (2013). Ayurvedic management of *Vatakantaka* (Plantar Fasciitis). *International Journal of Ayurvedic Medicine*, 2013, 4, 43-49.

**How to cite this article?**

Joshi S, Pandya AR (2019). A pilot study to evaluate the efficacy of a selected treatment module for *Vaatakantak* with special reference to *Agnikarma*. *Journal of Conventional Knowledge and Holistic Health*, 3 (1), Article ID 193.

\*\*\*\*\*