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A Critical Analysis of *Baluka Sweda* in *Amavata* Management

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ABSTRACT

Amavata, described in Ayurveda, closely resembles rheumatoid arthritis (RA) in presentation. RA affects 0.75% of the Indian population and is characterized by chronic joint pain, swelling, and stiffness. Ayurveda attributes *Amavata* to *Agnimandya* leading to *Ama* accumulation in joints. *Baluka Sweda* (dry sand fomentation) is recommended for *Ama*-origin disorders due to its *Ruksha* (dry) and *Ushna* (hot) properties. A literature review from Ayurvedic classics, PubMed, and national research databases was conducted. The therapy involves heating clean, dry sand, tying it in a cotton bolus, and applying it to affected joints for 15–30 minutes to induce sweating, improve circulation, and digest *Ama*. Reported effects include *Ama Pachana* (toxin digestion), *Shotha Harana* (swelling reduction), *Vata-Kapha Shamaka* (dosha balance), and *Shoola Hara* (pain relief). It improves joint mobility, prevents deformities, and promotes vasodilation with enhanced lymphatic drainage. By targeting *Ama* and *Vata-Kapha* imbalance, *Baluka Sweda* aligns with *Samprapti Vighatana* (breaking pathogenesis). It is cost-effective, safe, and suitable for integration with conventional RA care. *Baluka Sweda* is an effective non-invasive therapy for early and inflammatory stages of *Amavata*, offering symptomatic relief and improved function. Clinical trials are needed for further validation.

Key Words *Ama, Amavata, Juvenile rheumatoid arthritis, Baluka Sweda*

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INTRODUCTION

Amavata is a disease of joints explained in Ayurvedic texts; *Amavata's* clinical manifestation is very similar to that of rheumatoid arthritis. Rheumatoid arthritis (RA) is the most common persistent inflammatory arthritis, occurring throughout the world and in all ethnic groups. Between 0.3% and 1% of people worldwide are thought to have RA, which is most frequently found in women in wealthy nations. The estimated prevalence in India is 0.75%¹. Juvenile rheumatoid arthritis (JIA) is the most frequently seen form of arthritis in children. Worldwide, the

prevalence of JIA is around 1 in 1000 to 1 in 2500 children². In India, JIA affects approximately 0.07% to 0.2% of children below 16 years³. It is a chronic condition marked by joint pain, swelling, and stiffness. This condition is classified as an autoimmune disorder, where the body's immune system wrongly targets its own cells and tissues, treating them as if they were harmful invaders⁴. The habitual intake of incompatible food items, along with engaging in strenuous physical activity immediately after consuming fatty foods, can disrupt the digestive process, leading to indigestion. This impaired

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digestion results in the formation of *Ama*—a toxic by product—which is circulated throughout the body by *Vyana Vayu*. Over time, *Ama* tends to localize in the *Shlesmasthanas*, particularly accumulating in the *Shleshaka Kapha* located in the joints, thereby initiating the pathological process. As a result, symptoms such as joint pain, loss of appetite, fever, fatigue, excessive thirst, and a general sense of heaviness may manifest, indicating systemic involvement⁵. *Aacharya Chakradutta* included *Langhana*, *Swedana*, *Basti Karma*, and *Saindhavadi Anuvasana Basti* as treatments for *Amavata* in Ayurveda⁶. For this reason, this study incorporates *Ruksha Swedana (BALUKA SWEDA)* to effectively control *Amavata*. *Ruksha Sweda* has been given importance as *Shamshamaneeya sweda* in *Saama Dosha* condition⁷. one of the *Ruksha* types of *Sweda* is *Baluka Sweda* (sand fomentation). it is used extensively in conditions of *Ama* origin, *Urusthamba*, *Medoroga*, and other conditions as well as in *kaphaja* disorders^{8,9}

AIMS AND OBJECTIVES

- To review the effect of *Baluka sweda* in *janu sandhi shula*, *shotha* and *stabdata of amavata*.
- Understanding *Amavata* in relation to Rheumatoid arthritis and need of ayurveda over the conventional treatment.

MATERIALS AND METHODS

This study is design from literature search, critical review, various medical research data base like PubMed, and another national research database.

Methodology

Agnimandya is the underlying cause of *Amavata's* pathogenesis. *Agnimandya* causes the production of

ama, which in turn causes *vata prakopa* and other *dosha* impairment. Thus, any dietary, environmental, or psychological factor that impairs *agni* is accountable for the production of *ama*, which lodges in *sleshma sthanas*, particularly in the *sandhis* (synovial joints), and results in a variety of *Amavata* symptoms. Among five types of *vata*, *vyana vayu* and *samana vayu* which are responsible for the circulation of *rasa dhatu* and control *agni* respectively are mainly vitiated in *Amavata*¹⁰.

Baluka sweda is a form of *ruksha swedana* (dry sudation therapy) used in ayurvedic practice, particularly effective in *amavata* (rheumatoid arthritis) where symptoms like pain, swelling, and stiffness are present. To begin, clean, dry sand (preferably from a riverbed) is collected and sieved to remove any dust or sharp particles. The sand is then heated evenly in an iron or mud vessel until it reaches a comfortably warm temperature. The hot sand is tied into a thick cotton cloth bolus (called *pottali*), ensuring the heat is tolerable to the skin. The temperature is tested by the therapist before application. The patient is made to sit or lie in a comfortable position. The heated sand bolus is applied to the affected joints using gentle circular or stroking movements. The application continues for about 15 to 30 minutes, or until profuse sweating occurs in the affected region. After the procedure, the area is wiped with a dry cloth, and the patient is advised to rest. *baluka sweda* is usually administered daily for 7–14 days, depending on disease severity¹¹.

DISCUSSION

Discussion on Procedure

Vaishwanara Churna is a good *deepana* and *pachana* drug indicated in *amavata rogadohikara*. It checks the

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formation of *ama* by increasing the *agni* and digests the *ama* which is already formed. *Baluka Sweda*, also known as *ruksha* or dry *sweda*, is used in *kaphaja* disorders and in the disease that developed from *ama*. Almost all of the authors who have written about it have specifically mentioned it in relation to *Amavata* disease. *Baluka* means sand. *Baluka Sweda* is a process in which the fine white cloth, tied properly as bolus, with sand in it and it is to be warmed and applied over the affected part of the body. According to Charaka, it is a type of *sankara sweda*. As it is *ruksha* type, since the used material is sand, it comes under “*ruksha sankara sweda*”¹². According to Sushruta, it is a type of *tapa sweda*, where in the *Baluka* will be sufficiently warmed and then applied on the affected part of the body. It is type of “*Ekanga sweda*”¹³. According to Dalhana, the commentator of Sushruta, *Baluka sweda* may be included under “*samshamaneeya sweda*”, as this *sweda* is used for *pachana kriya* or for the digestion of *sama doshas* and it is dry in nature, it stimulates the *agni* (*dhatwagni*) and clears the *srotas* from *malas*¹⁴. According to Yogaratnakara, *Baluka* is *ruksha* in *guna* and is mentioned in the *amavata* as a *ruksha sweda*. *Baluka* has got good heat holding capacity and is helpful in reduction of *kapha* and *vata*¹⁵.

Effect of *Baluka Sweda*: (Figure 01)

1. *Ama Pachana* (Digestion of Toxins): The heated sand's *ushna* (heat) quality improves the local digestive fire, or *agni*, and aids in the *pachana* (digestion) of *Ama* that has collected in tissues and joints. helps to restore normal tissue function by reducing the stickiness and heaviness brought on by *Ama*¹⁶.

2. *Shotha Harana* (Reduction of Swelling): Applying heat locally encourages vasodilation, or the expansion of blood vessels, which enhances lymphatic drainage and blood flow. This lessens edema and swelling by removing collected fluid from the swollen joints¹⁷.

3. *Vata-Kapha Shamaka*, or the Balancing of *Vata* and *Kapha*: *Baluka Sweda*'s hot and dry properties help *sootha* agitated *vata* (by warmth) and *kapha* (by dryness), which lessens joint discomfort, stiffness, and heaviness¹⁸.

4. *Swedana Karma* (Induction of Sweating): Sweating helps open microcirculation, eliminates metabolic waste products through the skin, and clears blockages in minute channels (*srotorodha*). This increases mobility and reduces stiffness¹⁹.

5. *Shoola Hara* (Pain alleviation Action): This has an analgesic effect (pain alleviation) by relieving pressure on local nerve endings through increased circulation and decreased edema²⁰.

6. Improvement in Range of Motion: Patients might regain functional movement more quickly when joint flexibility increases as pain, edema, and stiffness decrease²¹.

7. Disease Prevention Progression: *Baluka Sweda* avoids the long-term joint damage and deformities linked to advanced *Amavata* by eliminating local *Ama* and balancing doshas early²².

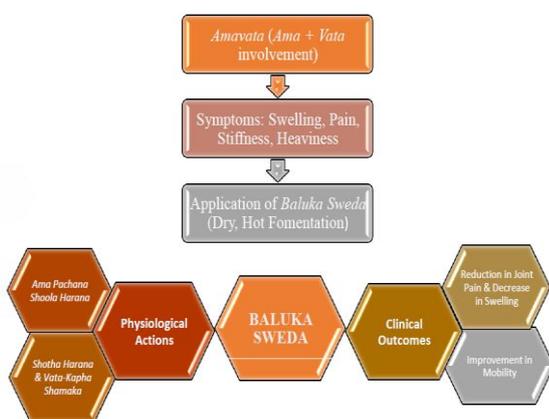


Figure 1 Effect of *Baluka Sweda*

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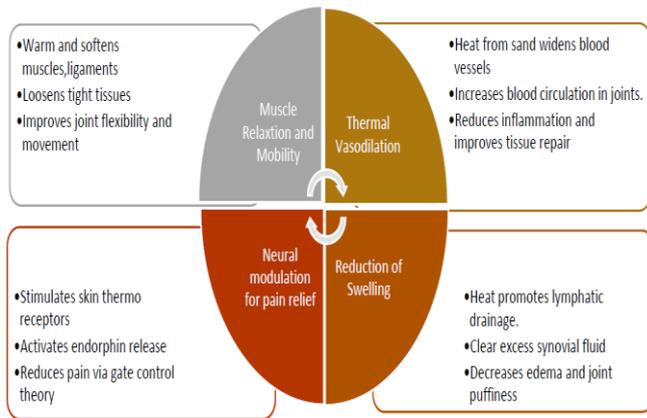


Figure 2 Possible Working principles of Baluka Sweda²³

FUTURE PROSPECTS -

1. Scientific Validation through Clinical Trials-

There is a clear need for randomized controlled trials (RCTs) comparing Baluka Sweda with standard treatment of RA or other Ayurvedic interventions.

Parameters such as VAS (Visual Analogue Scale) for pain, CRP (C-reactive protein), ESR, and RA factor can provide measurable outcomes.

2. Standardization of Procedure-

Currently, variations exist in the sand used, temperature, and treatment duration.

Future work should focus on standard operating protocols (SOPs) regarding:

Type of sand (preferably coarse-grained and moisture-free),

Temperature maintenance (~40–45°C),

Duration (30–45 minutes per session),

Number of sittings.

3. Mechanistic Studies-

Future studies should explore: Thermal effect on local vasodilation, Modulation of inflammatory cytokines (IL-6, TNF- α), Effect on synovial fluid dynamics and lymphatic drainage.

4. Technological Integration-

Development of portable heating pads or *Baluka Sweda* units with temperature control for use in OPDs and rural areas.

Home-based therapy kits can increase access and compliance in chronic patients.

5. Integration into Modern Clinical Practice-

In the future, *Baluka Sweda* can be used along with modern medicines (like DMARDs) to help manage joint diseases more effectively. It may: -

Improve joint movement and flexibility.

Reduce the need for painkillers (NSAIDs).

Lower the risk of side effects from long-term use of modern drugs.

This shows that *Baluka Sweda* can become a helpful supportive therapy in modern treatment plans for joint-related disorders.

6. Curriculum and Research Expansion-

Inclusion of *Baluka Sweda* modules in *Panchakarma* and *Kaumarabhritya* training.

Encouraging PG thesis work and PhD research on *Amavata* and *Ruksha Swedana* therapies.

CONCLUSION

Baluka Sweda proves to be a significant therapeutic modality in the management of *Amavata* especially in its early and inflammatory stages. As a form of *Ruksha Swedana* (dry sudation), it effectively counteracts the *Snigdha* (unctuous), *Guru* (heavy), and *Śita* (cold) qualities of *Ama* and *Vata*, which are the primary pathophysiological factors in *Amavata*. By promoting *Ama Pachana* (digestion of metabolic toxins), reducing *Sotha* (swelling), and alleviating *Sula* (pain), *Baluka Sweda* enhances joint mobility and prevents the progression of joint deformities²⁴.

Thus, *Baluka Sweda* serves as a safe, non-invasive, and cost-effective intervention that aligns with the

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principles of *Samprapti Vighatana* (breaking the pathogenesis), providing symptomatic relief and improving the quality of life in *Amavata* patients²⁵.

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