



Review Article

SYSTEMATIC REVIEW OF AMAVATA W.S.R. TO RHEUMATOID ARTHRITIS

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ABSTRACT


The main aim of Ayurveda is to maintain the health of the healthy person and to cure the disease of a diseased person. In the present era *Amavata* is the most prevalent and debilitating form of joint illness. *Amavata* term is derived from two words *Ama* and *Vata*, the condition which is caused by accumulation of *Ama* and *Vata* and it is a *Madhyam Roga Marga Vyadhi*. Due to *Hetu Sevan* when circulating *Ama* combines with vitiated *Vata* and get accumulated in *Sandhis*. *Vata* acts as an *Avaraka* and blocks *Shrotas* the pathogenesis of *Amavata* occurs. *Amavata* is a disease of *Rasvaha Shrotas* and the clinical presentation of *Amavata* like pain, swelling, stiffness, fever, redness, general debility, fatigue, closely mimics with the special variety of rheumatological disorders called rheumatoid arthritis. In *Vedic Kala*, only *Atharva Veda* mention the *Sandhi* related *Vyadhis*. In various *Samhitas* the fragmented description of *Amavata* is available. But only in *Madhav Nidan* separate chapter is mentioned about the etiology, clinical features, types and prognosis of *Amavata*. In the disease of *Amavata* due to *Agnimandhya*, *Amotpatti*, and *Sadhivikriti* occurs. The therapy which normalizes *Agni*, metabolizes *Ama*, and regulates *Vata* and maintains healthy *Sandhi* and *Sandhistha shleshma* will be the supreme one of this disease. As per Ayurveda, the line of treatment for the management of *Amavata* as described by *Chakradatta* are *Langhana*, *Swedana*, *Tikta*, *Deepaniya*, *Katu* drugs and other *Panchakarma* procedures like *Virechana*, *Snehpana*, *Basti Karma*, *Saindhvadi Anuvasana Basti* etc. So, the present study deals with the systematic review of *Amavata*, from all the classics of Ayurveda, and its management.

INTRODUCTION

Ayurveda promotes a variety of preventative, curative, and promoting practices^[1]. The majority of food habits (*Viruddhahara*), social structures, lifestyles, and environment, have changed over time. One of the effect of this change is the widespread occurrence of *Amavata*, which presents a challenge to doctors due to its apparent chronicity, incurability, complications, and morbidity. *Amavata* is one of the commonest disorders caused by the impairment of *Agni* (digestive fire), formation of *Ama* and vitiation of *Vata Dosha*. It is the commonest among chronic inflammatory joint disease in which joints become swollen, painful and stiff. Due to its chronicity and complications, it has taken the foremost place among the joint disease.

Amavata is made up of two words *Ama* (Undigested or unprocessed matter) and *Vata* (major cause of movement in body). The concept of *Ama* is unique in Ayurvedic science and this *Ama* is the main cause of various disorders. Due to *Alpa bala* of *Ushma*, *Rasadhatu*, which is initially created stays undigested, goes through petrification and remains in *Amashaya* this *Rasa* state is referred to as *Ama*.^[2] The *Ama* is transmitted by exaggerated *Vata* is accumulated in *Sleshmasthan*, where it produces features like *Sandhiruk*, *Sandhishoth*, *Stabhdatta*, *Angamarda*^[3] etc. It is a disease of *Rasavaha Shrotas* and was first explained as independent disease in *Madhav Nidana* and can be correlated with rheumatoid arthritis due to its similar clinical presentation.

Rheumatoid arthritis is a chronic autoimmune joint disease associated with deforming symmetrical poly-arthritis and systemic involvement^[4]. Common symptoms of rheumatoid arthritis include morning stiffness of the joint for more than 30 minutes, fatigue, fever, weight loss, and rheumatoid nodule. Rheumatoid

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arthritis is affecting 1% of population worldwide. It is more common in females than in males, female to male ratio is 3:1^[5]. When disease becomes chronic and the patient develops deformity in the joints such as *Sandhisankoch* (joint stiffness), *Akarmanyata* (limited movements) etc cannot be corrected with medicines alone.

In contemporary science glucocorticoids, DMARDs, NSAIDs and immunosuppressive treatments are used to treat rheumatoid arthritis. Despite this modern science still lacks a suitable treatment. As per *Ayurveda*, the line of treatment for the management of *Amavata* as described by *Chakradatta* are *Langhana*, *Swedana*, *Tikta*, *Deepaniya*, *Katu* drugs and other *Panchakarma* procedures like *Virechana*, *Snehapana*, *Basti karma*, *Saindhavadi Anuvasana Basti* etc.

AIM AND OBJECTIVES

- To understand *Amavata* in detail in comparison with rheumatoid arthritis.
- To understand the pathophysiology and symptomatology of *Amavata*.
- To understand treatment and its efficacy in *Amavata*.

MATERIAL AND METHODS

In this study information collected from the available Ayurvedic *Samhitas* and few elementary texts books, published research papers, previous work done and related research works were searched to get comprehensive knowledge about the disease *Amavata* as well its line of management.

Historical Review

Madhava Nidana^[6]

Amavata as a separate disease entity was described for the first time in detail by Acharya Madhava who described a full chapter of *Amavata* in his book named *Madhav Nidanam*. In this chapter etiology, pathogenesis, signs symptoms classification and prognosis are described in *Purvardha* (Chapter 25).

Chakradatta

- Acharya Chakradatta firstly described the *Chikitsa sutra* and management of the disease *Amavata* in detailed in *Chakradatta Samhita* (Chapter 25), and also described *Vaitran Basti* in *Basti* (Chapter 76/18).
- The *Amavata* is not described as separate diseases in *Charak Samhita*, *Sushruta Samhita*, *Astang Sangraha* and *Astang Hridaya*.

Charak Samhita

The word *Amavata* has been mentioned in many contexts e.g., therapeutic indication of the *Kansa Haritaki* (Ch.Chi. 12/25) and *Vishaladi Phanta* (Ch. Chi.16/61-63) explanation of *Avarana* of *Vata* by *Acharya Charka*.

Ashtang Hridaya

There is no detail explanation about *Amavata* in this text. But while explaining the therapeutics uses of *Vasakadi Yoga* and *Vyoshadi Yoga* the word *Amavata* has been mentioned.

Bhavaprakasha

Amavatadhikar (Chapter 26) *Lakshan* and *Chikitsa* of *Amavata* described by Acharya Bhavaprakasha.

Sharangdhara

In *Purvakhanda* (Chapter 7), types of *Amavata* were described by *Acharya Sharangdhara*.

Bhaisajya Ratnavali

In (Chapter 29). *Chikitsa* of *Amavata* was described by Acharya Govind das Sen in *Bhaisajya Ratnavali*.

Vangasena

Nidana and *Lakshana* of *Amavata* in (Chapter 3) by Acharya Vangasena.

Nirukti of Amavata

Amavata is made up of two distinct words, *Ama* and *Vata*, which represent the two main pathogenic components involved in the disease process. Both of these words have significant meanings that are crucial to comprehending the *Vyadhi Amavata*.

Definition^[7]

युगपत्कुपितावन्तस्त्रिकसन्धिप्रवेशकौ ।

स्तब्धं च कुरुतो गात्रमामवातः स उच्यते ॥ (Ma.Ni 25/5)

Amavata is named after two word- *Ama* (immature *Dosha*, *Dhatu* or *Mala*) and *Vata* (major cause of movement in body). When *Ama* and *Vata* collectively goes to *Sleshma Sthana* cause stiffness in body results in *Amavata*.

Nidana (Etiology)^[8]

Viruddha Ahara (Incompatible food)- Food that agitates the *Doshas* without causing them to leave the body is referred to as *Viruddha*. For example, blending milk and fish in a diet. *Viruddha ahara* is a key factor in causing *Ama*.

Viruddha Cheshta (Improper physical activity) - *Viruddha Cheshta* refers to physical exercise that does not follow proper procedures. For example, physical activity while a person is already suffering from ***Ajeerna. Viruddha cheshta-Agnimandhya-*** *Ama visha. Mandagni* (decreased digestive power)- *Amavata* is produced due to *Madagni*.

Nischalatwa (Lack of physical activity)- *Nischalatwa* causes *Kaphavridhi* which ultimately leads to *Agnimandyan*. In today's life, our ways of living have changed with the change of time and era. People who use *Guru Snigdha ahara* and due to computerization of entire works and business is the main source of income, they spend all their time in stressful situation i.e., sedentary lifestyle due to which blood circulation is reduced and secretion of digestive

enzymes is low, Agni prevents the generation of Ama occurs disease like Amavata.

Snigdham Bhuktavato Vyayaamam- Performing physical exercise just after intake of heavy food causes Ama in the body.

Purvarupa of Amavata

As the Poorvarupa of the disease are not directly indicated the Samanya lakshans of Amavata

like Angamarda, Aruchi, Trishna, Alasya, Gourava, Jwara, Apakati and Angashunata in a mild manner can be considered as poorvarooopa.

Roop of Amavata^[9]

Lakshanas of Amavata can be grouped under 4 headings i.e., Pratyatma Lakshan, Samanya Lakshan, Doshanubandha Lakshana, Pravridha Lakshana.

Pratyatma	Samanya	Pravridha	Doshanubandha		
Sandhishoola	Angamarda	Vrischikvat Vedana	Vata	Pitta	Kapha
Sandhishotha	Aruchi	Agnidourbalya	Shoola	Daha	Staimitya
Stabdhatta	Trishna	Praseka		Raga	Guruta
Sparshasahatva	Alasya	Nidra viparayaya			Kandu
	Gouravata	Vidvibaddhata			
	Jwara	Vairasya			
	Apaka	Daha			
	Shunata anganam	Bahumutrata			

Roop of Amavata According To Different Achyaras

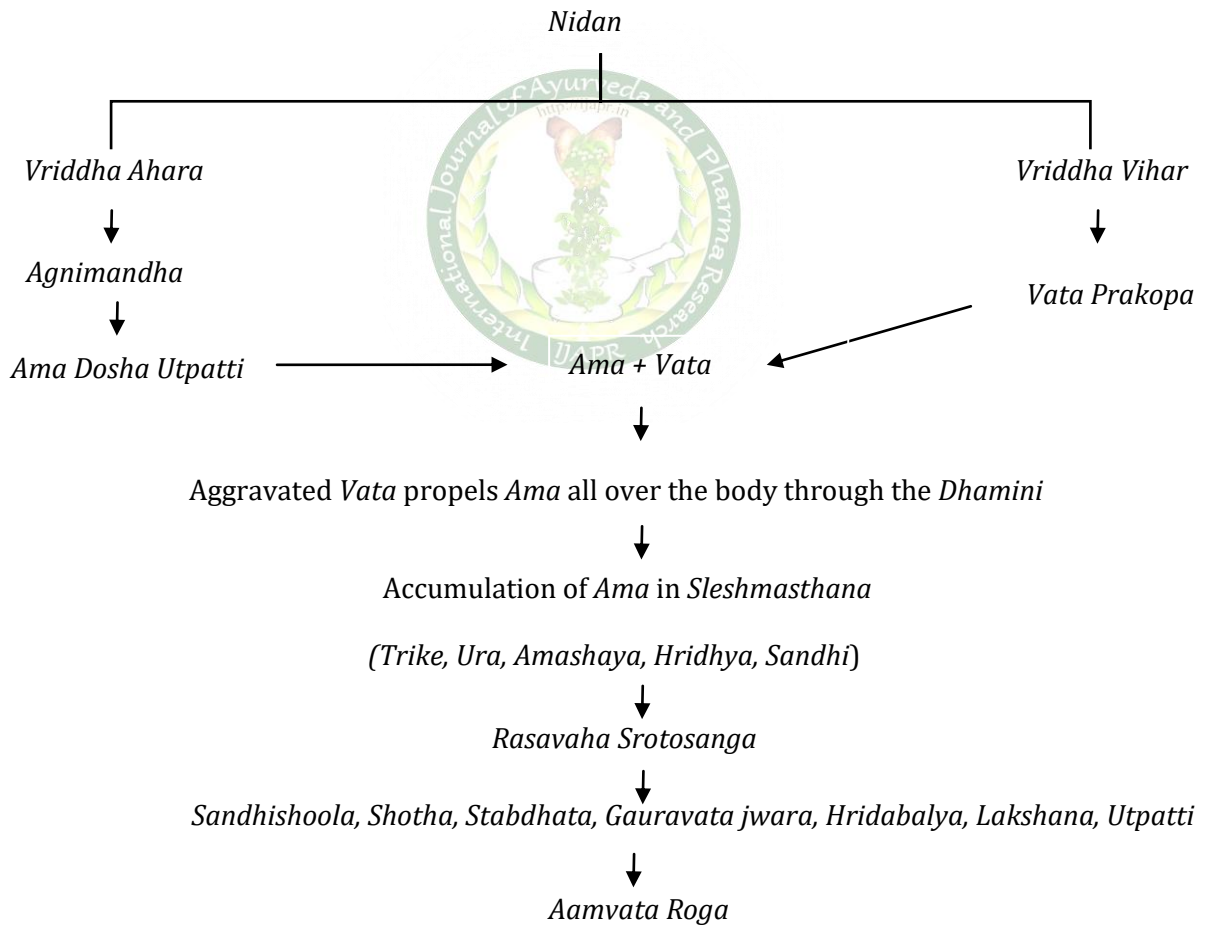
Roop	M.N	Y.R	H.S	Ga.Ni	B.S	V.P.	R.R.S
Angamarda	+	+	-	+	+	+	-
Aruchi	+	+	-	+	+	+	-
Trishna	+	+	-	+	+	+	-
Alasya	+	+	-	+	+	+	-
Gourava	+	+	-	+	+	+	-
Jwara	+	+	+	+	+	+	-
Apaka	+	+	-	+	+	+	-
Shunatwaanganam	+	+	-	-		-	-
Amatisar	-	-	+	-	-	-	-
Sandhishoth			+				+
Prishtha, Manna, Tripida	-	-	+	-	-	-	-
Manna, Pristha, Kati, Jannu, Trik, Sandhikunchan	-	+	-	+	-	-	-
Jathargni Dourbalya	-	+	-	-	-	-	-
Katishula	-	-	-	-	-	-	+

Classification of Amavata^[10]

Dosic involvement (Anubandha) According to Madhav Nidan	<ol style="list-style-type: none"> 1. Anubandha of one Dosa <ol style="list-style-type: none"> a) Vataja Amavata b) Pittja Amavata c) Kaphaja Amavata 2. Anubandha of two dosa <ol style="list-style-type: none"> a) Vatapittaja Amavata b) Pittakaphaja Amata c) Kaphajavataja Amavata 3. Anubandha of all Dosa <ol style="list-style-type: none"> a) Tridosaja Amavata
As per severity	A) Samnaya Amavata

	B) <i>Pravridha Amavata</i>
As per chronicity	A) <i>Navina Amavata</i> B) <i>Jeerna Amavata</i>
As per <i>Sadhyasadhyatva</i>	A) <i>Sadhya</i> i.e., <i>Ekdosaja</i> B) <i>Yapya</i> i.e., <i>Dwidosaja</i> C) <i>Krichhasadya</i> i.e., <i>Sannipatik</i>
As per <i>Dosic</i> predominance	A) <i>Vattollan</i> B) <i>Pittolan</i> C) <i>Kafollan</i> D) <i>Sannipataja</i>
As per treatment action	A) <i>Asukari</i> (acute phase) B) <i>Chirakari</i> (chronic phase)
As per nature specific	A) <i>Vistambhi Amavata</i> B) <i>Gulmakrit Amavata</i> C) <i>Snehi Amavata</i> D) <i>Pakva Amavata</i>
As per involvement of Joints all over the body	A) <i>Sarbanga Gata Vata</i>

Samprapti



Samprapti Ghatak

Dosha	Vata: Saman Vayu, Vyan Vayu Pitta: Pachaka Pitta Kapha: Kledaka Kapha, Sleshaka Kapha, Avlamabhaka Kapha
Dushya	Rasa, Mamsa, Asthi, Majja, Mutra, Purisha
Agni	Jatharagni, Dhatvagni
Aam	Jatharagni mandyajanya
Shrotas	Rasavaha, Annavaha, Majjavaha, Asthivaha, Purishavaha, Mutravaha
Shrotodusti	Sanga, Vimargagamana
Udbhavsthana	Amasaya, Pakvasaya
Sancharasthan	Throughout the body-Rasavahini
Adhasthan	Sleshmasthan, Sandhi
Rogmarga	Madhyam sthan
Vyadhi Swabhava	Chirkari

Differential Diagnosis^[11]

S.No	Symptoms	Amavata	Sandhivata	Vatarakta	Kaustuksirsa
1	Pain starting at	Big joints	Janu sandhi or Triak, Kati	Small joints like Pada-angusthmula	Janu Sandhi
2	Jwara	+	-	-	-
3	Sandhi, Shoth, Shula, Stabdhatta	+	Sandhi Shoth	Sandhishula	Janusandhishoth
4	Hridgraha, Hridgaurava	+	-	-	-
5	Dosha involvement	Tridoshaja	Vata	Tridosaja	Vatarakta predominance
6	Type of pain	Vrshchikdangsa nbat Vedana (scorpion sting)	Sandhishula sphutan (bony crepitus)	Mushakdangsanbat Vedana	Sandhishula
7	Character of Disease	Inflammatory joint disease	Degenerative joint disease	Metabolic joint disease	Traumatic joint disease
8	Upasaya/Anupsaya	Pain relief by Snehana (Jeernaavasthi)	+	Pain aggravated by Snehana	Pain aggravated by Snehana
9	Benefit of Raktamokshan	+	-	+	+

Sadhya-Asadhyata^[12]

एकदोषानुगः साधो, द्विदोषो याप्य उच्यते ।

सर्वदेहचरः शोथः स कृच्छ्रः सान्निपातिकः ॥ १२ ॥ (M.N.25-12)

When the disease is produced due to involvement of single *Dosha*, produced by limited number of *Hetu*, when few sign and symptoms are present, then the disease is *Sadhya*.

When the disease is produced due to involvement of two *Doshas*, then it becomes *Yapya*.

Sannipatika Amavata and the disease associated with generalized edema (*Sarvang shotha*) is *Kriccha Sadhya*.

Chikitsa Siddhant (Line of Treatment) ^[13]

लङ्घनं स्वेदनं तिक्तं दीपनानि कटूनि च ।

विरेचनं स्नेहपानं बस्तयश्चाममारुते ॥

सैन्धवाद्येनानुवास्य क्षारबस्तिं प्रशस्यते ॥ (*Chakradatta* 25-1)

The principle treatment of *Amavata* have been first described by *Chakradatta* which are *Langhana*, *Swedana*, drugs which have *Katu-tikta rasa* and *Deepana* action, *Virechana*, *Snehpana* and *Anuvasana* and *Kshar basti*.

Bhavamishra and *Yogratnakara* have mentioned *Upnaha* without *Sneha* to these therapeutic measures

while, *Yogratnakara* also added *Ruksha baluka swedan* in the management of *Amavata*.

Langhana - In Ayurvedic treatment, *Langhana* refers to the therapeutic principle of reducing or lightening the body's burden, which is particularly used in condition like *Aamvata*. *Langhana* is the first line of treatment in *Amavata*. The goal of *Langhana* is to enhance the digestive fire (*Agni*), reduce the burden of *Ama*, and balance *Vata dosha*.

Swedan- *Swedan* is beneficial in managing *Aamvata* because it helps in the elimination of *Ama* and can reduce inflammation in the joints. *Ama* is *Guru*, *Snigdha* and *Sthira* in nature and *Swedan*, *Rookshan Sweda* have opposite qualities reduce *Srotorodha* and thereby relieving pain. *Rooksha sweda* with *Valuka pottali* is recommended in *Aamvata*.

Administration of Tikta, Katu and Deepana Dravyas - These *Dravyas* are used in managing *Amavata*, which helps in *Aampachana* and *Vatanulomana* hence may help in relieving *Shoth* and *Shula*.

Virechana - After *Langhana*, *Swedana*, and *Shamana Chikitsa*, the *Doshas* reach *Nirama* stage, get liquid, and travel to *Koshta*, where they must be removed via the nearest route. As a result, *Virechana*, a type of *Shodhana*, is performed to eliminate *Pitta* and *Kapha Pathyapathya*

Pathaya -Apathya Ahara

Varga	Pathya	Apathya
Anna	Yava, Kulatha, Raktasali, Shyamaka, Kodrava	Masha
Shaka	Vastuka, Shigru, Karvellaka, Patola, Punarnava	Upodika
Dugdha	Takra	Dadhi, Ksheer
Mamsa	Jangala Mamsa	Anupa Mamsa, Matsya
Jala	Ushnodaka	Sheetodaka
Kanda	Ardraka, Takra siddha	
Tail	Erand sneh	
Mutra	Gomutra	
Madya	Purana madya	Naveen madhya

Pathya-apathya vihar

Pathya vihar	Apathya vihar
<i>Ruksha sweda</i> with <i>Baluka pottali</i>	<i>Vegadharan</i>
<i>Langhana</i>	<i>Ratrijagran</i>
<i>Chakraman</i>	<i>Alasya, Chinta, Shok</i>
<i>Mriduvyayam</i>	

DISCUSSION

The condition *Amavata* is difficult to treat due to its chronicity, complications, and morbidity. The description of *Amavata* does not appear to have existed during the *Vedic* or *Samhita* periods. It began to dominate after the medieval period and is currently a widespread horrible disease. For the first time,

and to achieve *Anulomana* of *Vayu*. The complete evacuation of *Doshas* by *Virechana* will prevent the condition from recurring. In *Amavata*, *Eranda Taila* is *Virechana's* preferred medication. It includes *Pachana*, *Virechana*, and *Vataghna* properties. *Sushruta* says it's also *Deepana*.

Basti - *Basti* is the most effective treatment for *vata*-dominant disorders. *Charaka* elaborates on the consequences of *Basti* such as *Vayasthapaka*, *Dhatudhadyakara*, and *Agnivardhaka*, among others. It restores the *Doshas Dhatu*s and *Malas* and cleanses the entire body. *Chakrdutta* recommends *Ksharbasti* and *Annuvasana basti* in *Amavata*.

Commonly Prescribed Medicine in Aamvata

Kwath Dravya- *Maharasnadi kwath*, *Dashmoola kwath*, *Rasnasaptak kwath*, *Punarnavadi kwath*

Vati- *Sanjeevni vati*, *Chitrakadi vati*, *Aamvatari vatika*, *Agnitundi vati*

Gugglu- *Yograj guggul*, *Simgnad guggul*, *Triyodasang guggul*, *Vatari guggul*, *Mahayograj guggu*

Churna- *Ajmodadi churna*, *Pathyadi churna*, *Panchkol churna*, *Trikatu churna*

Asava-arista- *Punarnvaasava*, *Ashwagandharista*, *Dashmoolarista*, *Balaristha*

Chakrapani developed effective medications and treatments for *Amavata*. *Amavata* is a sickness induced by two pathogenic factors: *Ama* and *Vata*. *Agnimandya* (poor digestive fire) produces unripe, undercooked, immature, and undigested material known as *Ama*. *Vatsanabha* and *Ahiphena* are pain relievers that

induce sleep and relax the muscles. Drugs such as *Guduchi*, *Nagara*, *Rasna*, *Musta*, *Pippali*, and *Chitraka* help to improve *Agni*, which aids with *Ama* digestion. *Guggulu's Bhagnasandhankara* property prevents bone degradation, osteoporosis, and joint deformity. It also lowers inflammation of the synovial membrane, connective tissue, and ligaments of damaged joints through its *Shothhara* property.

CONCLUSION

Drugs such as *Nirgundi* and *Shatapushpa* ease pain. Some medications, solely by virtue of *Prabhava*, act as *Amavataghna*. *Amavata* is a debilitating condition because to its chronic nature and complications. NSAIDS and corticosteroids are now the most often used treatments for this illness. However, they have serious side effects and are unsuitable for long-term treatment. To solve these challenges, it is necessary to adopt the *Ayurvedic* medical system, which is widely available and inexpensive.

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