



ISSN 2456-3110

Vol 3 · Issue 3

May-June 2018

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS



Charaka
Publications

Indexed

Pain management in *Avabahuka*

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ABSTRACT

In the process of evolution from quadrupeds to bipeds, the forelimbs developed into upper limbs. In quadrupeds they serve the purpose of weight bearing and attack. In bipeds they serve fine functions, holding an object, attack and defense. It has been estimated by research group that the hand performs approximately thousand different functions in an ordinary day today's activity. *Apabahuka* is one such disease which hampers most of the foresaid functions of the hand. Although any of the classics do not mention about the *Shoola* as a *Laxana* of *Apabahuka*, it still is a feature practically seen in *Avabahuka* patients. *Chikitsa Sara Sangraha* and *Nidana Sara*, clearly mentions about *Svedana* as a predominant *Laxana* of *Avabahuka*, along with other *Laxana*. It is often said that 'the pain is often severe enough to disturb the sleep'. *Amsa Marma* is primarily involved in *Avabahuka*, it is a *Snayu Marma* and one of *Vaikalyakara Marma*, any trauma to this will produce disability or deformity of the shoulder joint. Management of pain is facilitated by *Marma Chikitsa* i.e. *Nidana Parivarjana*, *Abhyanga*, *Swedana*, *Uttarabhaktika Snehapana*, *Vata Hara Oushadha Sevana*, *Marmabhighata Chikitsa*, *Brumhana*, *Nasya*, *Lepa*, *Seka*, *Nasya*, *Nasaapaana*, *Agnikarma*, *Siravyadha*, etc.

Key words: Pain Management, *Avabahuka*, Frozen Shoulder.

INTRODUCTION

Apabahuka is considered as a disease that affects usually the *Amsa Sandhi* and is produced by the *Vata Dosha*. *Nanatmaja Vata Roga* may be classified under the following principal headings, *Akarmanyata Pradhana* e.g. *Pakshaghata*, *Shoola Pradhana* e.g. *Grudrasi*, *Shosha Pradhana* e.g. *Amsa Shosha*, *Bahu Shosha*, *Sthamba Pradhana* e.g. *Apabahuka*.

Apabahuka being a *Nanatmaja Vata Vyadhi* is characterized by *Shoola* and *Stabdhatata* at *Amsa Sandhi*. *Charaka* used the word *Bahushosha* and

Bahusheersha Gata Vata^[1] instead of *Avabahuka*. In other *Samhitas* like *Sushruta*, *Vagbhatta*, *Yogaratanakara*, *Vangasena*, *Bhavamishra* and *Sharangadara*, we get the detail explanation of *Nidana Panchaka* and *Chikitsa*.

Arunadatta, *Dalhana* and *Hemadri* tried to analyze *Apabahuka*. In *Madhava Nidana* 2 Stages of the disease *Avabahuka* have been mentioned i.e. *Amsa Shosha* and *Apabahuka*.^[2]

Amsa Shosha is the preliminary stage of the disease where there is loss or dryness of *Sleshaka Kapha* and *Apabahuka* is the next stage where in there is loss of *Shleshaka Kapha* as a result *Bahupraspandita Haram* and *Shoola* are seen. In *Madhukosha Teeka* it is said that *Amsa Shosha* is produced by *Dhatu Kshaya* i.e., *Shudha Vata Janya* and *Apabahuka* is *Vata Kapha Janya*. *Charaka* didn't coin the term *Avabahuka* but used the word *Bahusirshagata Vata* for similar presentation like *Avabahuka*.^[3] In *Sushruta* we get detailed explanation regarding *Avabahuka*.^[4] In *Vagbhatta Samhita* also *Nidan Panchaka* of *Avabahuka* is available.^[5] *Dalhana*, *Arunadatta* and *Hemadri* tried to analyze *Avabahuka* in detail. In *Laghutrayee* like

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Submission Date : 14/05/2018 Accepted Date: 23/06/2018

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.v3i3.12885

Madhava Nidana and *Yoga Ratnakara* a compiled explanation of *Avabahuka* is available.

Madhavakara is the first to differentiate it from *Bahushosha*. In *Bhavamishra* and *Sharangadhara* various *Rasoushadhis* have been explained in the context. In *Vangasena Chikitsa* is told with different *Yogas*.

Avabahuka comprises of two words 'Ava' and 'Bahuka'.

Ava means 'Viyoga' or 'Vikratou' which means dysfunction or separation. It can be taken as deterioration or dysfunction.

Bahuka - at the end of a compound - bahu - the arm.
Bahuka - Muscular gender.

Thus *Avabahuka* can be defined as, *Bahustambho Avabahuka* Bad arm, stiffness in the arm joint.^[6]

In modern medicine shoulder joint is privileged as the most mobile joint. More mobility implies more vulnerable for diseases. In frozen shoulder the movements of the shoulder joint are compromised and the symptoms like pain, stiffness, weakness and substantial disability affects ability to carry out daily activities including eating, dressing, personal hygiene and work.

Among these the four most common causes of shoulder pain and disability in primary care are Rotator cuff disorders,^[7] Glenohumeral disorders, acromioclavicular joint disease, and referred pain from other structures.

Line of treatment of *Apabahuka* collectively from all classics

1. *Samanya Chikitsa* - *Vata Upakrama*

2. *Vishesha Chikitsa* - *Chikitsa Sutra*

- *Nidana Parivarjana*
- *Abhyanga*^[8]
- *Swedana*^[9]
- *Uttarabhaktika Snehapana*^[10]
- *Nasyakarma*^[11]

- *Nasapana*^[12]
- *Shamanoushadhi*

Amsa Sandhi Rachana^[13]



- This is a major joint of upper limb.
- This is one type of *Chala* and *Ulookhala Sandhi*.
- This is formed by the combination of *Pragandasthi*, *Akshakasthi* and *Amsaphalakasthi*.
- *Pratanavati* type of *Snayu* cover this *Sandhi*.
- *Shleshaka Kapha* present in this joint acts as lubricant and helps in protection and movement of the *Sandhi*.
- The *Amsa Marma* - head (*Murdha*), neck (*Greeva*) and the arm (*Bahu*).
- Formed by the union of *Amsa Peetha* (glenoid) and the *Skanda* (acromio clavicular joint).
- This is a *Snayu Marma* to a length of half finger's width (1cm).
- *Amsa Marma* consists of *Mamsa*, *Sira*, *Snayu*, *Sandhi* and *Asthi*. But it is a *Snayu Marma*.
- It is one of *Vaikalyakara Marma*, any trauma to this will produce disability or deformity of the shoulder joint.

Nidana

Bahya Hetu - causing injury to the *Marma* or the region surrounding that.

Abhyantara Hetu - indulging in *Vata Prakopaka Nidana* leading to vitiation of *Vata* in that region.

This may be again of *Bahya Abhigataja* (External cause) which manifest *Vyadhi* or disease first and the other is *Dosha Prakopajanya (Samshraya)* which in turn leads to *Karmahani* of *Bahu*.

Samprapti Ghatakas

- *Udbhavasthana - Amapakwashaya*
- *Sancharasthana - Rasayanis*
- *Adhisthana - Amsa Pradesha*
- *Vyaktasthana - Bahu Pradesha, Amsasandhi*
- *Dosha - Vata predominant (Vyana and Prana), Anubandha Dosha - Kapha (Sleshaka).*
- *Dooshya Pradhanataha - Asthi, Majja, Rakta, Mamsa.*
- *Upadhatu - Sira, Snayu, Kandara.*
- *Agni - Jataragni and respective Dhatwagnis*
- *Ama - Jatraagni mandyajanya Ama and respective Dhatwagni Mandyajanya Ama*
- *Srotas - Asthivaha, Majjavaha Srotas*
- *Srotodusti Prakara - Sanga*
- *Roga Marga - Madhyama*
- *Roga Avastha - Chirakari*
- *Vata Vyana - Chalagunataha Kshaya, Vyanavayu Ruksha Gunataha Kshaya.*
- *Prana - Karmataha Kshaya.*
- *Kapha Sleshakha - Dravyataha Kshaya.*
- *Avalambaka - Supports the Srotas of the Kapha by virtue of its Ambukarma.*
- *Pitta Pitha Dushti* because of *Asraya-Asrayi Bhava* of *Rakta*, due to *Sira, Snayu Vishosha*.

Marmabhighata Samprapti

Due to the above said causative factors and due to *Bahya Abhighata* there is *Amsa Marmabhighata* which affects *Sira Snayu Asthi* and *Kandara* which

provocates *Vata Dosha* resulting in *Bahu Chestahara* exhibiting the symptoms of *Avabahuka*.

Cardinal features of Avabahuka

Bahupraspandihara → in the present context this may be difficulty in the movement or impaired or loss of movement of the upper limb.^[14]

Amsabandhana Shosha → *Sushruta* considered this as a major *Laxana*. But, this is practically seen in the later part of the disease.^[15]

Shoola → Although any of the classic do not mention about the *Shoola* as a *Laxana* of *Avabahuka*, it still is a feature practically seen in *Avabahuka* patients.^[16]

Chikitsa Sara Sangraha and *Nidana Sara*, clearly mentions about *Savedana* as a predominant *Laxana* of *Avabahuka*, along with other *Laxana*.

Chikitsa Sutra

Ashtanga Hrudaya - Avabahuka Chikitsa

Nasya and *Uttarabhuktika Snehapana* are mentioned accordingly.

Sushruta Samhita - Avabahuka Chikitsa

Initially *Sushruta* says *Samanya Vata Vyadhi Chikitsa* should be adopted except *Siravyadha*, but later on when all the *Snehaadi* measures fail to reverse the *Smaprapti*.

Charaka Samhita - Bahusirsha Gata Vata

The treatment of *Bahusheershagata Vata* simulates as that of *Avabahuka* treatment i.e. *Nasya* and *Uttarabhuktika Snehapana*.

Samanya Chikitsa

- *Vatavyadhi* - *Snehana, Swedana, Mrudusamshodhana, Vasti, Sirovasti, Nasya*, etc.
- *Charaka - Sthana, Dushya* - Specific therapies.
- *Vagbhata - Jatroordhva Vatavikaras - Nasyakarma.*
- Three major approaches are made in the management of *Vatavyadhi*.
 - Treatment of *Kevala Vata*

- Treatment of Samsrusta Vata
- Treatment of Avruta Vata

Vishesha Chikitsa

- Ashtanga Hrudaya - Nasya and Uttarabhaktika Snehapana.
- Astanga Sangraha - Navana Nasya and Sneha Pana.
- Sushruta - Vata vyadhi Chikitsa except Siravyadha.
- Chikitsa Sara Sangraha - Nasya, Uttara Bhaktika Snehapana and Sweda.
- Vagbhata - Brumhana Nasya.
- Chakradatta - Nasapana.

Line of Treatment

Samanya

- Nidana parivarjana
- Abhyanga
- Swedana
- Uttarabhaktika Snehapana
- Nasyakarma
- Shamanoushadhi

Vishesha

- Marmabhighata Chikitsa

Mahatwa of Uttara Bhaktika Snehapana



- Acts on Vyana and Prana Vata Shamana
- Acts as Brumhana

- Acts on Urdhwa Jatru Gata Roga
- Does Snehana effect on Sandhi
- Acts on Sleshaka Kapha
- Acts as Snehana on Shoshita Sira, Snayu, Mamsa, Asthi, Kandara.

Marmabhighata Chikitsa

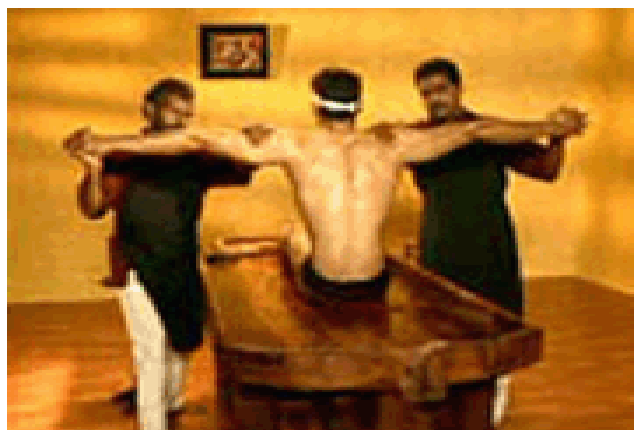
- When there is Marmabhighata of Amsa Marma leading to Avabahuka prime importance is given for Marmabhighata Chikitsa.
- Lepa - Marma Gulika mixed with Murivenna.
- Gandha Taila 10-20 drops internally at bed time with Prasarinyadi Ksheera Kashaya or with Ushna Ksheera Anupana.

Lepa



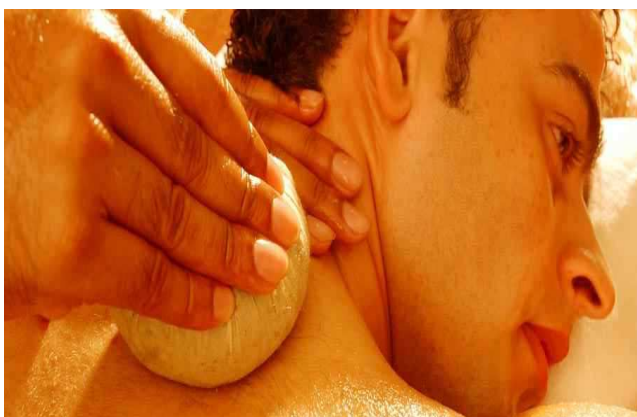
- Vatahara Lepa which are having Brumhana, Ushna can be used.
- Vruddhadarvadi Lepa - Vatahara, Brumhana, Ushna.
- Dasamoola Ksheera Lepa - Brumhana, Vatahara.

Abhyanga



- *Abhyanga* with various *Taila* mentioned for *Avabahuka* like *Mahamasha Taila*, *Parinatakeri Ksheeradi Taila*, *Karpasasthyadi Taila*, *Prasarinyadi Taila* does the action of *Vatahara*, *Brumhana*, brings *Snehana* effect to the *Sandhi*.

Swedana



Swedana by *Jambeera Patrapinda Sweda*, *Shastika Shali Pinda Sweda*, *Kukudanda Sweda*, *Dashamoola*, *Bala Kashaya Nadi Sweda* acts as *Vatahara*, *Rujahara*, *Brumhana*, *Vasodilator*, Improves the circulation.

CONCLUSION

Pain is the first symptom for which many patients seek Ayurvedic intervention. Managing pain without any invasive techniques is need of an hour and Ayurveda as such can provide justice with this ailment. *Marma* is an important aspect in the management of pain. Management of pain is facilitated by *Marma Chikitsa*, and with the above said treatment protocols one can manage pain in *Avabahuka* through *Marma Chikitsa*.

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How to cite this article: Dr. Prashanth AS , Dr. Praveenkumar H. Bagali. Pain management in Avabahuka. J Ayurveda Integr Med Sci 2018;3:119-123. <http://dx.doi.org/10.21760/jaims.v3i3.12885>

Source of Support: Nil, **Conflict of Interest:** None declared.