Pain management in Avabahuka

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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 Stabdhatra at Amsa Sandhi. Charaka used the word Bahushosha and Bahusheersha Gata Vata instead of Avabahuka. In other Samhitas like Sushruta, Vagbhata, Yogaratnakara, 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.

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 in Sushruta we get detailed explanation regarding Avabahuka. In Vagbhata Samhita also Nidan Panchaka of Avabahuka is available. Dalhana, Arunadatta and Hemadri tried to analyze Avabahuka in detail. In Laghutrayee like

Key words: Pain Management, Avabahuka, Frozen Shoulder.

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, Nasaapana, Agnikarma, Siravyadhha, etc.

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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 privilaged 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]
   - Uttararbhatika Snehapana[10]

Nidana

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

**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**

Dr. Prashanth AS et.al. Pain management in Avabahuka

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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
- Vyakastasthana - 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 - Jatraggni 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.

Marmabhhigatha Samprapti

Due to the above said causative factors and due to Bahya Abhigatha there is Amsa Marmabhhigatha which affects Sira Snayu Asthi and Kandara which provokes Vata Dosha resulting in Bahu Chestahara exhibiting the symptoms of Avabahuka.

Cardinal features of Avabahuka

Bahupraspandidahara \(\rightarrow\) in the present context this may be difficulty in the movement or impaired or loss of movement of the upper limb.\[14\]

Amsabandhana Shosha \(\rightarrow\) Sushruta considered this as a major Laxana. But, this is practically seen in the later part of the disease.\[15\]

Shool\(\rightarrow\) Although any of the classic do not mention about the Shoola as a Laxana of Apabahuka, 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 Uttarabhouktika Snehabana are mentioned accordingly.

Sushruta Samhita - Avabahuka Chikitsa

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

Charaka Samhita - Bahusirsha Gata Vata

The treatment of Bahusheershagata Vata simulates as that of Avabahuka treatment i.e. Nasya and Uttarabhouktika Snehabana.

Samanya Chikitsa

- Vatavyadhi - Snehana, Swedana, Mrudusamshodhana, Vasti, Sirovast, 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 - Vatavyadhi 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
- Marmabhiggata 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.

Marmabhiggata Chikitsa
- When there is Marmabhiggata of Amsa Marma leading to Avabahuka prime importance is given for Marmabhiggata 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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