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Agnikarma with Kshoudra for pain management in De Quervain's Tenosynovitis - A Single Case Study

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ABSTRACT

De Quervain's disease, also called gamer's thumb or mother's thumb, is a common pathological condition of the wrist. It is commonly known as de quervain's tenosynovitis a repetitive use of wrist and thumb lead to an inflammation of the Abductor Pollicis Longus and Extensor Pollicis Brevies tendon and all the layers of their associated tendon sheath. The overall incidence of De Quervain's tenosynovitis is 0.9/1000 person. As per Ayurvedic parameters this condition can be correlated to *Snayugata Vikara*, which usually presents with *Sthambha*, *Shula*, and *Kriyavasakthi*. According to Ayurveda, *Snayugata Vata - Snehana*, *Upanaha*, *Agnikarma*, and *Bandha* are the treatments advised. *Agnikarma* with "*Kshoudragudasnehacha*" is mentioned is *Sandhiasthsirasnayugatavikara*. *Kshoudra* is mentioned as *Dahanopakarana* for *Sira-Snayu-Asthi Sandhi* because of penetration to the deeper structures. Till date splinting, systemic anti-inflammatories and corticosteroid injection are the most frequently utilized non-surgical treatment options and if these processes are ineffective, the tendon sheath of the 1st dorsal compartment is surgically released. This study includes a case study of a gentle man of 34 years who gradually developed pain over base of right thumb and wrist joint since 1 month. *Agnikarma* with *Kshoudra* was performed in 4 sittings, with a gap of 7 days and assessment was done with subjective and objective parameters. The therapeutic effects of *Agnikarma* with *Kshoudra* resulted in relief of pain and muscle spasm, acceleration of healing, promotion of resolution of inflammation and painless range of movement of joint. *Kshoudra Agnikarma* is cost effective, easy to perform with better aesthetic outcome.

Key words: De quervain's tenosynovitis, Kshoudra, Agnikarma, Pain, Case Report.

INTRODUCTION

De-Quervain's disease, also called gamer's thumb or mother's thumb, is a common pathological condition of the wrist. Wrist pain is a very common complaint that can have dramatic changes on the people productivity at work, sporting, artistic pursuits and daily activity of living, nowadays it is more common,

especially the people using mobile phoset more than 5 to 6 hours in a day or repetitively use of hand and wrist. It is commonly known as de quervain's tenosynovitis a repetitive use of wrist and thumb lead to an inflammation of the abductor pollicis longus and extensor pollicis brevis tendon and all the layers of its associated tendon sheath. The overall incidence of De Quervain's tenosynovitis is 0.9/1000 person. The estimated prevalence of de Quervain's tenosynovitis is about 0.5% in men and 1.3% in women with peak prevalence among those in their forties and fifties. A thorough history and physical examination and maneuvers including the Finkelstein test, can help differentiate between these causes.^[1]

According to Ayurveda, *Snayugata Vata - Snehana*, *Upanaha*, *Agnikarma*, and *Bandha* are the treatments advised. *Agnikarma* with "*Kshoudra Guda Snehacha*" is mentioned in *Sandhi Asthi Sira Snayugata Vikara*. *Kshoudra* is mentioned as *Dahanopakarana* for *Sira-*

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Snayu-Asthi Sandhi because of penetration to the deeper structures.^[2]

The therapeutic effects of *Agnikarma* with *Kshoudra* includes relief of pain and muscle spasm, acceleration of healing, promotion of resolution of inflammation and increase in the range of movement of joint.^[3] Till date splinting, systemic anti-inflammatories and corticosteroid injection are the most frequently utilized non-surgical treatment options and if these processes are ineffective, the tendon sheath of the 1st dorsal compartment is surgically released.^[4]

CASE REPORT

A 34-year-old male patient with no significant medical history, presented with chief complaints of pain over base of right wrist and thumb which affected his routine work and job for more than 1 month.

On physical examination, inspection revealed mild swelling, tenderness noted as severe with Grade 8 (VAS) and range of movements was painful on palpation.

Positive Finkelstein's test on right wrist confirmed the diagnosis of De Quervain's tenosynovitis.

MATERIALS AND METHODS

Materials Required

1. Kshoudra
2. Borosil glass pipette
3. Stove
4. Sterile Ladle
5. Mixture of Madhu -Sarpi (Equal quantity)
6. Sterile cotton balls

Duration of study

Duration of treatment - 21 days

Agnikarma sittings were performed on 0th, 7th, 14th and 21st day

Follow up - 28th day & 35th day

Preparation of Kshoudra & procedure for Agnikarma Poorvakarma

1. Study was done after obtaining an informed consent from the patient.
2. Arrangement of materials

Pradhanakarma

1. Patient is allowed to sit in comfortable position and instructed to extend the elbow with fist ed arm
2. The tender points were marked using a pen.
3. Heating of *Kshoudra*
4. Using a Borosil Pipette *Kshoudra* was sucked, dropped over the marked site for 1 to 2 seconds.

Paschatkarma

1. Application of *Madhu - Sarpi* mixture done

RESULTS

Assessment was carried out before and after treatment for Relief of Pain, Range of Movements of right wrist and Special Tests / Diagnostic Tools.

By the end of the stipulated four sittings of *Agnikarma* using *Kshoudra*, it was seen that there was satisfactory improvement in the complaints of pain and range of movement in the subjects. This result was assessed using VAS for Pain and Stiffness with Range of movements reduced from severe to mild. The therapeutic effect of *Agnikarma* with *Kshoudra* showed significant results during follow up with no recurrence.

Criteria	1 st Sitting	2 nd Sitting	3 rd Sitting	4 th Sitting
Pain	8	6	4	1
Range of Movements	Severe Pain	Moderate Pain	Moderate Pain	Mild Pain
Finkelstein Test	Positive	Positive	Positive	Negative

Follow Up

Criteria	1 st Follow Up	2 nd Follow Up
Pain	1	0
Range of Movements	Mild Pain	Absent

Finkelstein Test	Negative	Negative
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OBSERVATION

The final result of the case was observed with no scalds and with better cosmetic outcome.



Arrangements of materials



Heating of Kshoudra



0th day - Using pen tender points were marked



Dropping of Heated Kshoudra over tender points for 1-2 sec



Madhu Gritha Abhyanga after Agnikarma



21st day - Using pen tender points were marked



Dropping of Heated Kshoudra over tender points for 1-2 sec



Madhu Gritha Abhyanga after Agnikarma

DISCUSSION

Probable mode of action of Agnikarma with Kshoudra

Due to the less heat dissipation of *Kshoudra*, along with its *Yogavahi* and *Ashukari* properties, it was equally effective in clearing *Srota Avarodha* by *Ama Pachana*.

Kshoudra possess *Vata-Kapha Shamana*, *Ushna*, *Tikshana*, *Laghu*, *Ruksha*, *Sukshma Guna* when employed for *Agnikarma* reduces local inflammation; thus results in reduction of pain (*Shoola*) and improves the range of movements (*Kriyavasakthi*).

If the *Agnikarma* with *Kshoudra* over the base of thumb exceeds more than 2 seconds it will lead to scald formation.

CONCLUSION

Wrist pain is a very common complaint that can have a dramatic change on the people productivity at work,

sporting artistic pursuits and activity of daily living. *Agnikarma* using *Kshoudra* acted by the penetration of heat through *Sukshma Sira*. Heat of *Kshoudra* travelled in *Dhatwagni* level which acted as *Ama Pachana* and pacified both *Vata* and *Kapha*, and removed *Srota Avarodha* which resulted in pain relief with better aesthetic outcome.

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