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# A classical review on *Avabahuka* (Frozen Shoulder)

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## ABSTRACT

*Avabahuka* is one among the *Vataja Nanatmaja Vyadhis* which affects the normal functioning of upper limbs there by affects the normal routine lifestyle of an individual. It is caused mainly by the *Vyana Vata* vitiation and gets *Sthana Samshraya* in the *Amsa Pradesha*. There it does the *Shoshana* of *Shleshaka Kapha*, *Mamsa*, *Sira*, *Snayu* leading to *Bahupraspanditaharatwam*, *Shoola* and *Stambha*. These clinical features closely resemble with painful stiffness and loss of motion of shoulder. After completion of treatment, significant improvement was observed in the parameters like *Bahu Shoola*, *Stambha* and Range of Movements. In *Ayurveda Acharya's* have mentioned the specific line of treatment of *Avabahuka* are *Agnikarma*, *Nasya*, *Swedana*, *Shamanoushadhis*.

**Key words:** *Avabahuka*, *Frozen Shoulder*, *Vataja Nanatmaja Vyadhis*

## INTRODUCTION

Most of the diseases are not life threatening but hamper day to day life of human. "*Avabahuka*" is one among such diseases. This condition affects the normal functioning of upper limbs there by it affects normal routine lifestyle of an individual. In contemporary medical science the condition Frozen shoulder seems to be very similar to *Avabahuka*. The prevalence of Frozen shoulder in the general population is reported to be 2%, prevalence of 11% in unselected individuals with diabetes. Frozen shoulder may affect both shoulders, either simultaneously or sequentially, the frequency of bilateral Frozen shoulder is higher in

subjects with diabetes than in those without diabetes. It occurs most frequently in 5<sup>th</sup> and 6<sup>th</sup> decades of life.<sup>[1]</sup>

Management of Frozen Shoulder is by Analgesics, local intra articular injections of corticosteroids in glenohumeral joint followed by physiotherapy and surgical intervention.<sup>[2]</sup>

*Agnikarma* is one among the para- surgical procedures. *Agnikarma* increases local *Dhatwagni* and thus helps curing diseases well as reducing the chance of recurrence.<sup>[3]</sup>

*Swedana* is said to be the best form of treatment in expelling *Pradushita Vata* and *Kapha*. *Acharya Charaka* very clearly states that the *Swedana Karma* is the procedure which relieves *Stambha* (Stiffness), *Gourava* (Heaviness) and *Sheetagnam* (Cold).<sup>[4]</sup>

### *Nirukti and Paribhasha*

*Avabahuka* comprises of two words "*Ava*" and "*Bahuka*". *Ava* states *Viyoga* or *Vikratou*, which means dysfunction or separation. It can be taken as deterioration or dysfunction. *Bahuka* word states the ending of *Bahu* (the arm). *Bahuka* is a muscular gender. Thus, *Avabahuka* can be defined as

बाहो स्तम्भौ अवबाहकम्

It means bad arm or stiffness in the arm.

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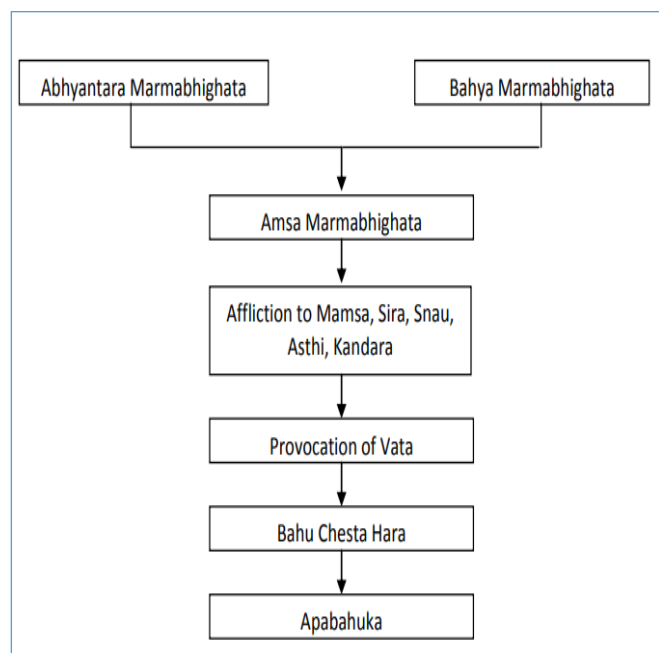
**Nidana**

There can be two types of *Hetu* causing *Avabahuka* which are as following

1. *Bahya Hetu* - causes that lead to injury to the *Marma* or the region surrounding that.
2. *Abhayantara Hetu* - indulging in *Vata Prakopa*. The *Nidana* leading to vitiation of *Vata* in that region are *Abhayantara Hetu*. This may be again
  - a) *Bahya Aabhighataja* (external cause)
  - b) *Dosha Prakopajanya* (*Samshraya*)

*Bahya Aabhighataja* which manifests *Vyadhi* or the disease first. Whereas, the other is *Dosha Prakopajanya* (*Samshraya*) which in turn leads to *Karmahani* of *Bahu*. As the disease come under *Vatavyadhi*, the *Nidana* of the *Vatavyadhi* can also be the *Nidana* of *Avabahuka*.<sup>[5]</sup> The causes of *Vata Vyadhi* are - 1) *Dhatu Kshaya*, 2) *Aavarana*

Out of these two causes, *Aavarana* seems be the cause of *Avabahuka*.

**Samprapti**

It is one of the *Vatakapha Pradhana Vata Vyadhi*, Due to *Nidana Sevana*, *Vyana Vata* vitiation occurs and gets *Sthana Samshraya* in the *Amsa Pradesha*. There it does the *Shoshana* of *Shleshaka Kapha*, *Mamsa*, *Sira*, *Snayu* leading to *Bahupraspanditaharatwam* (restricted

movement of affected shoulder), *Shoola* (pain), *Stambha* (stiffness).

**Samprapti Ghataka of Apabahuka**

- *Nidana* : *Vataprakopaka Nidan*
- *Dosha* : *Vata-Vyana* (*Chala Gunata Kshaya*), *Kapha-Shleshaka* (*Dravyata Kshaya*)
- *Dushya* : *Asthi*, *Majja Sira*, *Snayu*, *Kandara*
- *Srotas* : *Asthivaha*, *Majjavaha*
- *Agni* : *Jataragni*, *Asthi-Dhatvagni*
- *Ama* : *Jataragni* & *Dhatvagnijanya*
- *Roga Marga* : *Madhyama*
- *Udbhavasthana* : *Pakwashaya*
- *Sancharasthana* : *Sarvashareera Rasayani*
- *Adhisthana* : *Amsa Pradesha*
- *Vyaktasthana* : *Bahu*
- *Swabhava* : *Chirakari*

**Rupa**

- *Bahu Praspanidita Hara* - Lost / diminished movement of the upper limb
- *Amsa Bandhana Shosha* - Muscle wasting
- *Shoola* - Pain

According to *Acharya Sushruta*, when *Vata* gets vitiated at *Amsa Sandhi*, it causes wasting of the *Amsa Bandhana* and *Sira Aakunchana*. Such condition is called as *Avabahuka*.

The same definition has been explained by *Acharya Vagbhata* in *Nidana Sthana* that vitiated *Vayu* when goes to *Amsa-Moola Pradesha*, it causes constriction of *Sira* of that *Sthana*. This results in loss of movements of the *Bahu* (arm). This condition is called *Avabahuka*.

**Treatment in Ayurveda**

*Acharya Sushruta* has described the treatment for *Amsasandhi Sangha* as follows: one should treat the *Vayu*, vitiated in *Sandhi*, *Asthi* and *Snayu*, by using and *Agni Karma* (therapeutic cauterization).<sup>[6]</sup>

The standard line of treatment described in *Ayurveda* for different *Vata Vyadhis* is *Snehan Swedana*, *Mrudusamshodhana*, *Basti*, *Sirobasti Nasya*, and so on. *Snehana* is described as of two types viz.<sup>[7]</sup>

1. *Bahya* (external)
2. *Abhyantara* (internal)

*Acharya Charaka* further states that, each patient should be given specific therapies depending on the *Dushya* (tissue element vitiated by *Vata*) and location. In the *Urdva-Jatrugata Vatavyadhis*, *Acharya Vagbhata* has mentioned *Nasyakarma*.<sup>[8]</sup>

Three major approaches are followed in the management of *Vata Vyadhi*.

1. Treatment of *Kevala Vata*
2. Treatment of *Samsrusta Vata*.
3. Treatment of *Avruta Vata*

## DISCUSSION

*Ayurvedic* classics explain the *Chikitsa* of *Avabahuka* as follows- *Sushruta Acharya* advises *Vatavyadhi Chikitsa* for *Apabahuka*, except *Siravedha*.<sup>[9]</sup> But in *Sharira Sthana*, mentioned *Siravedha* at *Bahumadhya* in *Avabahuka*.<sup>[10]</sup> *Ashtanga Hrudya* - has explained *Nasya Karma* and *Uttarbhaktikam* in *Avabahuka*.<sup>[11]</sup> *Ashtang Sangraha* mentions *Navana Nasya* and *Snehapana* for *Avabahuka*.<sup>[12]</sup> If we try to read in between the lines, we get to understand the paradoxical statement quite clearly. *Raktamokshana* is advised in *Avabahuka*, but care must be taken in order to ensure that the amount of blood drawn does not cause any *Dhatu Kshaya* symptoms in the patients.

## CONCLUSION

*Avabahuka* is one among *Vatavikara* which involves vitiation of *Asthi* and *Majja Dhatu*; *Sira*, *Snayu*, *Khandara Upadhatus*. It is one of the *Vyana Vata* and *Shleshaka Kapha Pradhana Vatavikara*. It is characterized by *Bahupraspanditaharatwam* (restricted movement of affected shoulder), *Shoola* (pain), *Stambha* (stiffness). Based on the similar clinical features, *Avabahuka* can be closely compared with Frozen Shoulder. *Chikitsa Upakramas* described in

*Ayurveda* like *Agnikarma*, *Swedana* are effective in management of *Avabahuka*.

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