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# Enlightening the concept of *Snayugata Vata* and its management through Ayurvedic aspect in correlation to Tennis Elbow

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## ABSTRACT

In Ayurveda, *Snayugata Vata* is explained under the concept of *Vatavyadhi*. The *Vata Dosha* vitiation occurs which settles down in the *Snayu* of the *Sharira*. In *Snayugata Vata*, there is the *Shoola*, *Kampa*, *Stambha* in the *Kurpara Sandhi*. Tennis elbow is the condition in which there is a torn tendon of the elbow joint due to excessive work load which leads to the pain in elbow joint and loss of strength in holding the things. The incidence rate of tennis elbow is 4.5 per 1000 persons in a year. It not only affects the tennis players but also the other persons those who are working with the heavy tools and even play without proper techniques. According to the *Lakshanas*, we can correlate it to *Snayugata Vata* in Ayurveda and tennis elbow in Modern science. According to different *Acharyas* *Snehana Karma*, *Swedana Karma*, *Upanaha*, *Bandhana*, *Agnikarma* are explained under the treatment modalities for *Snayugata Vata* which is cost effective and thereby beneficial for the welfare of the mankind.

**Key words:** *Snayugata Vata*, *Vatavyadhi*, *Tennis Elbow*.

## INTRODUCTION

The term *Vata* is derived from the root “*Va*” with “*Kta*” *Pratyaya*. And meaning of “*Va Gatigandhanayo*” is to move, to enlighten.<sup>[1]</sup> The term “*Gata*” is derived from the root “*Gam*” which means gone to, arrives at, situated in, directed to and the “*Vata*” is denoted as the physiological aspect of the body. *Snayu Gatavata* is explained under the concept of “*Vata Vyadhi*” in *Samhita*'s.<sup>[2]</sup> *Snayu* is considered as a fibrous tissue and is a part of the body which acts

to bind.<sup>[3]</sup>

*Vayus Tantra Yantra Dharaha* which states that *Vata* in its normal state sustains all the organs of the body and its functions.<sup>[4]</sup> It is mainly responsible for normal functioning of all the vital structures of the body with its unique quality i.e. *Chalatwa* (movement). In almost each and every *Vata Vyadhi*, there is involvement of the *Chala Guna* of *Vata*. If *Vata* is vitiated, then it can result into the manifestation of certain diseases. *Vata* due to various *Aharaja*, *Viharaja*, *Karmaja* and *Manasika Hetu* gets *Dushita*. The *Prakupita Vata* moves and gets localized in the specific *Sthanas* leading to the disturbance in the normal functioning of that *Sthanas*.<sup>[5]</sup> This concept can be correlated to *Snayugata Vata* in which there is vitiation of *Vayu* due to various *Nidana Sevana* and this vitiated *Vata* gets *Ashrita* in *Kurpara Sandhi*.

*Vata*, particularly *Vyana Vayu*, has a close relationship with *Snayu* as *Vyana Vayu* controls all the functions of the body like *Gati*, *Akshepaṇa*, *Utkshepaṇa*, *Nimesha* and *Unmesha*.<sup>[6]</sup> As these functions are mainly concerned with the joints, the *Vyana Vata Dushti* can

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disturb the functions of joints.<sup>[7]</sup> Hence, as *Snayu* are present in close relation with *Sandhis* (bony joints), the disturbed *Vyana Vayu* can disturb the functions of *Snayu* also, due to which there is *Utpatti* of “*Snayu Gatavata*”.

The *Lakshanas* of *Snayu Gatavata* are explained differently by various *Acharyas*. The *Lakshanas* of *Snayugatavata* explained by *Acharya Sushruta* are *Shoola*, *Stambha* and *Kampa*<sup>[8]</sup> which can be correlated with the signs and symptoms of “*Tennis Elbow*”. If the *Snayu* of one joint is effected, then it is known as *Ekanga Roga*; if the multiple joints are involved then it is known as *Sarvanga Vata* and there is no other disease which plays a role in the manifestation of the *Snayugata Vata*, so it is considered as *Swatantra Vyadhi*. The *Acharyas* have mentioned various treatment modalities to treat *Snayugata Vata* like *Snehana*, *Swedana*, *Upanaha*, *Bandhana*, *Mardana* and *Agnikarma*.<sup>[9],[10]</sup>

In a study conducted in India over a general population of 144,000 over a period of 13 years, 5,867 persons were identified with Tennis elbow, an overall incidence rate of 4.5 per 1,000 in the year.<sup>[11]</sup> In a recent Finnish population study, in a population sample of 4,783 individuals, about 1.3% population were found to be suffering from lateral epicondylitis.<sup>[12]</sup> The highest incidence is found in the young age group and also between the age group of 40-60 years of life. For Women, the incidence increases to 10% between the age group of 42- 46 years.<sup>[13],[14]</sup> In Tennis elbow, there is damage of the common extensor origin which is attached to the lateral epicondyle of the humerus. By unaccustomed use of this group of muscles, tennis elbow develops which particularly occurs while playing tennis and hence this disease has been named as tennis elbow.<sup>[15]</sup> Also, the person who indulges in the heavy machinery works, manual labourers, smokers and those who repetitively bend / straighten their elbow for more than 1 hour/day and have poor social support have been associated with higher rates of lateral epicondylitis.<sup>[16]</sup> Damage is followed by subsequent adhesions which bind torn to untorn fibres with the joint capsule. This condition is

considered as degenerative tendinitis. The symptoms of tennis elbow are exhibited as pain in the elbow joint, loss of strength to hold the things. In modern science, the treatment modalities are mentioned as rest, injections, frictions, manipulations, surgery.<sup>[17]</sup>

### *Snayu Utpatti*

*Sanati Sudhyati Doshanaya - Sana + Unh = Snayu*

The *Siras* which take *Sneha* part from the *Medas* after which they get ripped and converted into the *Snayu*. The difference between *Siras* and *Snayu* is that the *Paaka* of the *Siras* is *Mrudu* and that of *Snayu* is *Khara*.<sup>[18]</sup>

### *Snayu Sankhya*<sup>[19]</sup>

According to *Acharya Sushruta*, the *Snayus* are 900 in number. In which 600 are present in the *Shakhas*, 230 in *Kostha*, 70 in *Greeva*.

*Shakagata Snayu: Pada-30, Tala -30, Kurcha-30, Gulfa-30, Jangha-30, Janu-30, Uru-40, Vankshan-10*, total of 150 *Snayus* are present in the one feet and total of 600 are present in all *Shakhas*.

*Koshtagata Snayu: In Kati 60, Pristha 80, Parshava 60, Uru 30* and total of 230 are present in *Koshta*.

*Urdhavajatrugata Snayu: In Grivha 36 and Murdha 34* and total of 70 *Snayus* are present in over body.

### *Types of Snayus*<sup>[20]</sup>

*Snayus* are of 4 types

- *Pratanbati, Pratanavathi Snayu* (Ligaments)
- *Vrutha Snayu* (Tendons)
- *Sushira Snayu* (Valvular band of muscles)
- *Prithul Snayu* (Flatted or ribbon shaped)

The *Pratanbati Snayu* are present in the all *Shakhas* and *Sandhis*, *Sushira Snayu* are present in end part of *Amashaya*, *Pakwashya* and also present in *Basti Pradesha*. *Vrutha Snayus* are known as *Kandras* and *Prithul Snayu* is present in *Parshawa*, *Urapradesha*, *Pristha* and *Shira Pradesha*.

According to *Gananatha Sen*, *Snayu* are of two types, *Snayusamhati* and *Snayuvyakti*.

*Snayusamhati* is considered as cluster (*Snayugucha*) which connects bones in joints and provides strength and support to the joints. *Snayuvyakti* (*Tanu* - connective tissue fibres) are mentioned as structures related to *Kandara*, *Amashaya* and *Pakvashaya* etc.<sup>[21]</sup>

#### Functions and importance of *Snayu*

Just as a boat consisting of planks becomes capable of carrying load of passengers in river after it is tied properly with bundle of ropes, similarly all *Sandhis* (bony joints) in human body are tied with *Snayus* by which persons are capable of bearing load.<sup>[22]</sup> All the parts of the human body are compactly held together by *Snayus*.<sup>[23]</sup> The *Maamsa*, *Asthi* and *Meda* of the human body are binded together by the *Snayu*.<sup>[24]</sup> The injury to *Asthi* (bones), *Peshi* (muscles), *Sira* (vascular structure) and *Sandhis* (joints) may not be as severe as compared to *Snayus*.<sup>[25]</sup>

#### *Nidana*

*Acharya* have not mentioned particular *Nidana* for *Snayu Gatavata*, hence the *Vata Vyadhi Nidanans* are to be taken into consideration here.<sup>[26],[27]</sup> Because *Snayugata Vata* is mentioned under the *Vatavyadhi* by all the *Acharyas*.

#### *Aharaja Nidana* (Dietary factors)

*Sheeta*, *Ruksha*, *Laghu Guna*, *Katu Tikta Kashaya Rasa* and indulgence in *Anashana* (fasting), *Alpashana* (low eating), *Vishamashana* (irregular eating), *Adhyasana* (overeating) leads to aggravation of *Vata*.

#### *Viharaja Nidana* (Physical activities)

*Ativyavaya* (excessive indulge in sexual activities), *Atiratrijagrana* (excessive awaking at night), *Vegadharana* (control on the urges), *Palwana* (swimming), *Atidhavana* (excessive running), *Atiucha Bhasanam* (loud speaking), *Atibhara Vahanam* (excessive weight bearing).

*Abhighata* (trauma), *Marmabhighata* (injury in vital organs).

#### *Manasika Nidana* (Psychological factors)

*Ati Chinta* (worry), *Shoka* (grief), *Krodha* (anger), *Bhaya* (fear).

#### *Kalaja Nidana* (Seasonal and environmental)

*Varsha Ritu* (Rainy season), *Shishira Kala* etc.

#### Lakshanas of *Snayu Gata Vata*

##### ▪ According to *Acharya Charaka*<sup>[28]</sup>

*Vahayama*, *Antaryama*, *Khali*, *Kubajta*, *Sarvanga Vata*, *Ekangavata*.

##### ▪ According to *Acharya Sushruta*<sup>[29]</sup>

*Stambha*, *Kampa*, *Shoola* and *Akshepa*

##### ▪ According to *Acharya Vagbhata*<sup>[30]</sup>

*Ghridrasi*, *Ayama*, *Kubjata*

##### ▪ According to *Yoga Ratnakara*<sup>[31]</sup>

*Sarvangavata* and *Ekangavata*

#### *Samprapti* (pathogenesis) of *Snayugata Vata*

No specific *Samprapti* has been explained by *Acharyas* for *Snayugata Vata*. So, we conclude the *Samprapti* of *Vatavyadhi* as the *Samprapti* of *Snayugata Vata*.<sup>[32]</sup>

*Acharya Charaka* has mentioned that *Nidana Sevana* aggravates *Vata* and this *Prakupita Vata* gets accumulated in *Rikta Srotas* and gives rise to various generalized and localized diseases.

Hence, *Samprapti* of *Snayugata Vata*, can be defined as, *Vata Prakopaka Ahara Vihara* can be envisaged as one of the predisposing factor in *Snayugata Vata*. So, Excessive intake of such *Dravyas*'s which have *Gunans* like *Laghu*, *Ruksha*, *Sukshma*, *Khara* etc.<sup>[33]</sup> will lead to increase in *Vata Dosha*, inturn leading to *Shooladi Lakshanas* and also imbibing *Vikruti* in *Meda Dhatu* and it results in *Meda Agni Vaishamyas* (Impairment of *Agni*) which may lead to *Vikrata Snayu* (*Upadhatu*).

On the other hand, *Ativyayama* (excessive exercise), *Atichesta* (Excessive physical exercises/movements) and *Abhighata* (*Kurpara Marma Abhighata*) generally leads to *Sthaniya Vata Dushti* with *Rakta* as the underlying *Dushya*.<sup>[33]</sup> Due to *Dhatuvaishamyas*, the vitiated *Vata* moves in the body and settles down in *Snayu* (due to presence of *Sroto Riktata*) and produces *Shoola*, *Stambhana*, *Kampa* etc.<sup>[34]</sup>

The pathogenesis of *Snayugata Vata* with respect to Tennis elbow can be understood as Excessive physical exercises, overuse or repetitive activities, carrying heavy hand held tools etc. are the etiological factors



will lead to *Dhatuvaishmya* (degenerative changes) and *Tadjanita Shoola* in the Extensor Tendon that results in structural alteration of the tendon (tendon tearing) causing painful and restricted elbow movements.

#### Chikitsa Siddhanta

##### ▪ According to Acharya Charaka<sup>[35]</sup>

Acharya Charaka has not mentioned the specific treatment modality for *Snayugata Vata*. So, the *Chikitsa* according to the *Lakshanas* of *Snayu Gata Vata* is taken.

##### ▪ According to Acharya Sushruta<sup>[36]</sup>

*Snehana, Upanaha, Agnikarma, Bandhana, Mardana*

##### ▪ According to Acharya Vagbhata<sup>[37]</sup>

*Snehana, Daha, Upanaha*

##### ▪ According to Yogaratnakar

*Swedana, Upanaha, Mardana, Snehana.*<sup>[38]</sup>

##### ▪ Some of the Yogas mention in the Samhitas for the Snayu Gatavata

*Trayodashanga Guggulu,*<sup>[39]</sup> *Abhadi Churna*<sup>[40]</sup>

## DISCUSSION

In various *Samhitas*, *Snayugata Vata* is explained under the *Vatavyadhi* as separate disease by different *Acharyas*. In which there is vitiation of the *Vata* due to various *Nidanas*, especially *Vyana Vayu* is responsible for the dysfunction of the *Kurpura Sandhi Samanya Karma* because the *Karma* of the *Vyana Vayu* are *Gati, Akshepana, Utkshepana, Nimesha* and *Unmesha*.

Moreover, *Snayus* are present in close relation to *Sandhis* (bony joint) than the disturbed *Vyana Vayu* can disturb the functions of *Snayus also*. *Asamanaya Karma* of the *Snayu* is the main entity in the *Samprapti* of *Snayugata Vata*. Thus, involvement of *Marma, Vata Dosha* and *Dhatuvaishmya* make disease more *Kashṭa Sadhya*.

Therefore, it is clear that lateral epicondylitis is a degenerative disorder that compromises the extensor tendons originating from the lateral epicondyle, extending in frequently to the joint.

Repetitive contractions, overuse, flexion and extension have been implicated by causing micro trauma to the common extensor origin, with cumulative degeneration leading to pain, disability and others symptoms. Most of the time people think that the name of tennis elbow only suggests the disease of tennis player but it is a wrong assumption. In fact, tennis elbow occurs also in non-athletes peoples, butchers, painters, plumbers, carpenters, drivers, homemakers, cooks etc. The factors that are responsible for the aetiology of tennis elbow involve: Repetitive activity, flexion/extension or pronation/supination of the forearm, overuse of the extensor musculature of the arm, improper techniques. Ignorance may cause as low but gradual deterioration of tendon. According to Ayurveda, in *Snayugata Vata* (Tennis elbow) *Dhatuveshamya* (degeneration) and *Prakupita Vata* plays an important role in precipitation of disease.

Ayurveda treatment modalities such as *Swedana* (Heating therapy) where sweat is induced by giving heat to the affected part and this will help in *Kshapana* and *Shoshana*. *Upanaha* (Poultice): In these, the use of *Vatanashaka Dravyas* are use to reduce the pain and inflammation of the affected part, *Agnikarma* (Thermal cautery) helps in the reduction of the inflammation; *Bandhana* (bandaging) where a bandage is used with medicated paste of *Vatanashaka Dravyas*, it helps in the reduction of the pain, inflammation and even helps in the proper rest of the torn tendons, *Snehana Karma* (Oleation therapy) where the use of *Vatanashaka Sneha Dravyas* for the *Abhyanga*, which helps in the reduction of the pain, inflammation and recovering of the degenerative changes in tennis elbow by rehabilitation, nourishment and strengthens the *Snayus* (tendons).

## CONCLUSION

*Snayugata Vata* is the disorder of *Snayu* and *Vata*. *Ativyayama, Aticheṣṭa* (Excessive physical exercises/movements) and *Abhighata* (*Kurpara Marma Abhighata*) are the major contributory *Nidanas* which leads to the vitiation of *Sthanika Vata*

which further leads to *Dhatuvaishmya* (*Meda* and *Snayu*) and complete the manifestation of the disease. The main component for the occurrence of *Snayugata Vata* are *Vata Prakopaka Nidana*, *Prakupita Vyanavayu*, *Dhatuvaishmya*. Tennis elbow is due to the mechanical overload occurring during sports with improper techniques and heavy machine work. Thus, repetitive activity and over use nowadays are the most common factor for the trauma of the tendon. This condition is considered as degenerative tendinitis. The specific Ayurvedic treatment modalities may help to contribute in the healing and regeneration of tissues which is cost effective and thereby beneficial for the welfare of the mankind.

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