

## A LITERARY REVIEW ON THE AYURVEDIC LINE OF MANAGEMENT OF APABAHUKA

Tripathi Joydip<sup>1</sup>,

Vashishth Rishi<sup>2</sup>,

Bhola Sonal<sup>3</sup>

<sup>1</sup>M.D. (Ayu) Kayachikitsa, Lecturer, Department of Kaumar Bhritya, Raghunath Ayurveda Mahavidyalaya & Hospital, West Bengal, India.

<sup>2</sup>M.D. (Ayu) Kayachikitsa, Lecturer, Department of Kayachikitsa, GNAMC&RI, Ludhiana, Punjab, India.

<sup>3</sup>M.D. (Ayu) Dravyaguna, Lecturer, Department of Dravyaguna, GNAMC&RI, Ludhiana, Punjab, India.

### ABSTRACT

Shoulder joint has the greatest range of motion among all joints in the human body. If it gets afflicted with the any ailment then it hampers the day to day activities. *Apabahuka* is a condition characterized by pain and stiffness of shoulder joint leads to restricted movements of the hand. It is caused by the vitiation of *vata dosha*. In other sciences its line of management is very symptomatic and prognosis is not satisfactory. In this study we have put an effort on the Ayurvedic principles of line of management of *apabahuka* by thorough studying of its *nidana, rupa, samprapti ghataka* etc

**Keywords:** *apabahuka, vata dosha, Ayurvedic principles etc.*

**INTRODUCTION:** Among all the joints of the human body the shoulder has the greatest range of motion. This allows complex movements and functions to be carried out in day to day life. *Apabahuka* as an ailment was first introduced by *Susruta* (500 B.C.) where pain and stiffness of shoulder joint leads to severely restricted movement of the hand. This problem puts a huge amount of strain on patients interfering productivity of the life. *Apabahuka* is a condition caused by vitiated *vata dosha*, localizes in *amsapradesa* (shoulder region) that results in the *samkocha* of *siras* leading to the manifestation of *bahu praspandana haratvam*.

#### **Nirukti (Derivative significance) of Avabahuka / Apabahuka**

*Apabahuka* is composed of two words “*Apa*” and “*Bahuka*”<sup>1</sup>

The very word *Apa* means ‘*Viyoga*’ ‘*Vikrutau*’ which means separation or dysfunction

and the very word ‘*Bahu*’ meaning the upper limb which is one among the *sadangas*.

According to *Sanskrit* literature the word *Apabahuka* means as bad stiffness and muscle spasm in the arm<sup>2</sup>. The prefix ‘*Ava*’ is used instead of ‘*Apa*’ of the words *Apabahuka*. *Apabahuka* and *Avabahuka* literally bear the same meaning.

#### **Paribhasha of Apabahuka (Definition)<sup>3</sup>**

“*Amsadesasthita vayu soshayitvasambandhanam Siraschakuncha tatrastha janayetavavahukam*”

*Apabhuka* is a disease caused by *kupita vata dosa* localizing around the *amsa pradesa* causing the *shoshana* of *amsa sandhis*, thereby leading to *akunchana* of *sira* at that site and giving rise to *bahupraspandana haratwam*.

#### **REFERENCES OF APABAHUKA IN VARIOUS TREATISES**

*Charak Samhita(1000 BC)* – A detailed description about *Vata* is explained in

*Sutra sthana* and *chikitsa sthana* of *Charak samhita*<sup>4, 5</sup>. In the eighty different *nanatmaja vatavyadhi* *Apabahuka* is not mentioned but in the *sutra sthana* citation of *bahu* is available. In *chikitsasthana* *bahu* treatment is mentioned.<sup>6</sup>

### ***Susruta Samhita (500 BC)***

*Apabahuka* is mentioned in *Susruta samhita*<sup>7</sup> alongwith the *samprapti* and *rupa* in *nidana sthana*. *Rakta mokshana* and *ruksha sweda* are cited as treatment of choice for *apabahuka*.<sup>8</sup>

### ***Ashtanga Hridaya (400 AD -600 AD)***

In the *nidana sthana* of *Astanga hridaya* description of *Apabahuka* is available.<sup>9</sup>

### ***Madhava Nidan (900 AD)***

Description of *vataja* and *vata kaphaja* types of *apabahuka* is found in *Madhavakara*

*Madhukosha vyakhyā*.<sup>10</sup>

### ***Adhunik Kala (900 AD to till date)***

#### ***Chakrapanidutta (1100 AD)***

Different effective formulae are mentioned or the disease *Apabahuka*.<sup>11</sup>

#### ***Sharangdhara Samhita (1300 AD)***

*Apabahuka* is mentioned as one of the eighty *nanatmaja vatavyadhis*.<sup>12</sup>

#### ***Vangasena (1300 AD)***

Description of *Apabahuka* is available. *Vedana* has been portrayed as a major symptom.<sup>13</sup>

#### ***Bhavaprakash (1600 AD)***

*Apabahuka* is mentioned as one of the eighty *nanatmaja vatavyadhis*.<sup>14</sup>

#### ***Bhaisajyaratnavali (1800 AD)***

Some effective treatment regarding *Apabahuka* is available.<sup>15</sup>

*Arunadutta, Dalhana* and *Gayadas acharya* have commented on *samprapti, lakshana* and *chikitsa* of *Apabahuka* in their works.

### **AIM AND OBJECTIVES:**

1. To study and understand the pathology of the disease.
2. To analyse the Ayurvedic line of management on the basis of *samprapti vighatana* of the disease.

### **MATERIALS AND METHODS:**

Classical texts and commentaries were studied to understand the underlying pathology of *apabahuka* and the treatment principle of *apabahuka* i.e., *oushadha* and *pathya* along with do's and don'ts.

#### ***NIDANA: Ayurvedic Etiopathogenesis :***

No specific *Nidana* for *Apabahuka* is mentioned separately. Being one of the *vataja nanatmaja vikara* *Apabahuka* holds the same *nidana* of *vatavyadhi* in general. All the *nidana* are subdivided into 1. *Aharaja* e.g. *Ruksha anna, Sheetā anna, Langhana, Katu, kashaya, tikta rasa* etc. 2. *Viharaja* e.g. *Ativiyavaya, Ativiyayama, Marmabhighata* etc. 3. *Agantuja* e.g. *Sheetā kala, Aparahana* etc. 4. *Manasika* factors e.g. *Chinta, Shoka, Krodha* etc.

*Marmabhighata* is one of the causative factors of the *vatavyadhi*. According to *susruta marmabhighata* to the *amsamarmas* make the upper extremities stiff and leads to loss of movement capacity which mimics the *lakshanas* of the disease *Apabahuka*.<sup>16</sup>

*Marmabhighata* (Direct / Indirect trauma) may occur by *Ativiyayama* – Violent exercises, *Plavana* - causing over exertion, *Bharavahana* – carrying heavy loads *Dukha shayya* – Improper postures.

Aforementioned etiological factors may lead to the pathological conditions of “*Dhatukshaya*” or “*Margavarana*” or both at a time, which in turn cause the provocation and vitiation of *vata dosha*.

#### ***SAMPRAPTI***

Here indulgence of *vatika nidana sevana* leads to accumulation of *vata dosha* in the

*Amsapradesha* where ‘*khavaigunya*’ has already occurred and leads to *dosa dusya sammurchana* thus causing the *shoshana* of the *Amsabandhana* or *sira akunchana* that leads to *kevala vatajanya Apabahuka*.<sup>17</sup>

Sometime *Dhatu kshaya* causes *vataprakopa* leading to *Amsashosha* i.e. *Dhatukshaya janya Apabahuka* takes place. Sometimes aggravated *kapha* in the *sandhi* leads to obstruction of *vatadosa* causing *kaphavrita vatajanya Apabahuka*.

### ***Samprapti Ghataka***

*Dosha – vata & kapha*

*Dushya – sira, snayu, kandara, rasa, rakta, mamsa, asthi*

*Srotasas – rasa, rakta, asthi, mamsa*

*Srotodusti - sanga*

*Sancharasthana – Sira, snayu, kandara*

*Adhisthana – Amsapradesha*

*Rogamarga – Bahya & madhyama*

### ***Poorva Roopa***

In *Apabahuka* *poorva roopa* can be taken as a minor symptom of the disease

That surface before the actual manifestation of this disease. Mild or vague shoulder pain, movement restriction, occasional stiffness of the upper extremities might be taken into consideration as the *poorva roopa* of *Apabahuka*.

### ***ROOPA***

Its cardinal features are:-

1. *Bahupraspandihara*
2. *Amsabandhana shosha*
3. *Sira Akunchana / Stambha*
4. *Shoola*

**Table no.1**

<i>Apabahuka</i>	<i>Bahu praspanana hara, shoola &amp; stambha</i>
<i>Vishwachi</i>	Palm & fingers are affected. Pain starts from the upper arm radiates to forearm & fingers ( <i>anguli</i> )
<i>Ekanga vata</i>	Weakness with mild touch sensation ( <i>ishat sparsha</i> ) in the upper limb.

*Dalhana*’s commentary suggests that the *praspanana* means *chalana* or movement, which is considered as *samanya karma* of *vyana vata*. The word *hara* means impaired or loss. In the present study ‘*bahu praspanana hara*’ may be taken up as difficulty or impaired or loss of movement of upper limb. And the function of *sandhi* like *utshepana*, *prasarana* & *akunchana* will be affected in *Apabahuka*. *Amsa* is also termed as *skanda*, *bahu sira*, it is one of the *Marma*. *Amsabandhana* denotes *amsagata shleshma* or *sira* present around the *amsapradesha*. The *shosana* of these is termed as *amsabandha shosha* which is a major *lakshana* of *Apabahuka*. And *samkochana* of the *siras* around the *amsasandhi* leads to *Apabahuka*.

### ***Upashaya And Anupashaya:***

*Upashaya* is an important diagnostic tool especially when all other methods fail to establish the diagnosis of the diseases. Therapeutic trial with *ausadha*, *Anna*, *vihara* can be termed as *upashaya*. Administration of medicines when produces a negative effect or aggravates the illness is known as *Anupashaya*.

### ***Upadrava:***

Not mentioned in the texts but from practical point of view there may be muscle atrophy around the shoulder, upper part of the arm and severe movement restriction.

### ***SAPEKSHA NIDANA:***

For differential diagnosis of the diseases *Apabahuka* can be elicited through the Table below:

<i>Amsa shosha</i>	<i>Mamsa kshaya &amp; shosha in amsa pradesha only.</i>
--------------------	---

**SADHYA ASADHYA:** Acharya Susruta counted *vatavyadhi* as *mahavyadhi / mahagada*. According to *Susruta*, if *vatavyadhi* affected patient develops complication like *sunam* (edema), *suptatva* (tactile senselessness), *Bhagna* (fracture) *kampa* (tremor) *Adhmana* (Distension of abdomen with tenderness) and pain in internal organs then the patient, does not survive. According to *Ashtanga hridaya*, if *vatavyadhi* is connected with *shosha* (emaciation),

*akshepaka, samkoca, stambha, swapana, kampana, ardita, khanja, panguta, khuddavata, sandhi chyuti, pakshaghata, meda majja asthigata vata roga*, then these are usually cured with difficulty or are incurable.

Though no specific prognosis is being told about *Apabahuka*, based upon these if *Apabahuka* develops *shosha* (emaciation), *samkocha* (stiffness of the hand) then it is cured with difficulty. Thus, *Apabahuka* in the initial stage will become *sadhy*a and *kricchrasadhy*a or *asadhy*a after certain time or period.

#### **PATHYA APATHYA PATHYA: Table no.2**

<i>Rasa</i>	<i>Madhura, Lavana, Amla</i>
<i>Shuka dhanya</i>	<i>Godhuma, Rakta shali</i>
<i>Shamidhanya</i>	<i>Masha, Kulattha</i>
<i>Mamsa Varja</i>	<i>Jangala mamsa, kukkantha, tittira, barhi, chataka</i>
<i>Matsya Varga</i>	<i>Shilindhra, Parvata, Nakra, Gagrara, Khudisha, Shasha</i>
<i>Saka Varga</i>	<i>Patola, Shigru, Vartaka, Kushmanda, Karavellaka, Mulaka, Tikta, Surana, Tarkari</i>
<i>Phala Varga</i>	<i>Dadima, Parushaka, Badara, Draksha</i>
<i>Gorasa Varga</i>	<i>Ghrita, Dugdha, Kilata, Dadhi, Kurchika</i>
<i>Anya Dravya</i>	<i>Lasuna, Tambula, Matsyandika, Punarnava, Krishna, Vatsaka, Murdi, Jinaka</i>
<i>Karma</i>	<i>Swedana</i>

#### **APATHYA :Table no.3**

<i>Rasa</i>	<i>Kasaya, Tikta, Katu,</i>
<i>Anna</i>	<i>Anashana</i>
<i>Jala</i>	<i>Tataka, Tatinijala, Pradushta Salila</i>
<i>Shamidhanya</i>	<i>Mudga, Syameka Curna, Kuruvinda, Kalaya, Canaka</i>
<i>Shaka Varga</i>	<i>Alabu, Ervaru, Vimta</i>
<i>Anya Dravya</i>	<i>Kshudra, Tikta, Nimba</i>
<i>Vihara &amp; Karma</i>	<i>Vyavaya, Yana, Chinta, Chankramana, Prajagara, Vegovidharana, Shrama, Langhana, Abhyanga</i>

#### **PRINCIPLES OF TREATMENT IN AYURVEDA (CHIKITSA SUTRA):**

1. *Charaka* – *Nasya* & *uttarbhaktika snehapana*

2. *Ashtanga sangnaha* mentions *Navana Nasya & snehapana*  
 3. *Susruta* advices *vatayadhi chikitsa* except *siravyadha*

4. *Chikitsa sara samgraha* advices *Nasya, uttarbhaktika snehapana* and *sweda*.
5. *Brimhana Nasya* is indicated in *Apabanuka* by *Vaghbhatta*.

So, from the above mentioned treatment schedules it can be concluded that the line of treatment might be like following :

- i) *Nidana Parivarjana*
- ii) *Abhyanga*
- iii) *Swedana*
- iv) *Uttarbhaktika Snehapan*
- v) *Nasya*
- vi) *Samsamana aushadhi*

#### **DISCUSSION:**

*Apabahuka* is a disease caused by *kupita vata dosa* localizing around the *amsa pradesha* causing the *ssoshana* of *amsasandhis*, thereby leading to *akunchana* of *sira* at that site and giving rise to *bahupraspandana haratwam*. In consideration to the *ayurvedic* etiopathogenesis of the disease it reveals that the *vataprakopaka* etiology in general are mainly responsible for the genesis of the disease. The specific etiology like weight lifting, excessive movements of the hands, *Dukkha shayya* (mal sleeping posture) particularly hand under the head during sleeping are the main causative factors. Aggravate *vata* spreads all over the body (*prasara*) but specially at the area of *amsasandhi* (*sthana samsraya*) due to the prior '*khavaigunya*' and leads to *dosa dusya sammurchana* at the said place caused by *abhigata* or other etiologies mentioned earlier.

In *Ayurveda* there are several medications as well as purificatory therapy (*shodhana*) and *rasayana* therapy are indicated in *vata* predominant diseases in general. As the disease is purely caused by affliction of *vayu* and the symptoms come due to the aggravation of *vayu*, so *vatanasak* therapy may be advocated as a

remedy of the same. The reduction of flexion, extension, internal rotation, external rotation and abduction are the usual findings and as pain and stiffness are the intensive features, so aims and objective of the treatment is to provide relief to the patient by reducing the complaints. The line of management in the *ayurvedic* therapy is *Brumhana nasya, paschadbhakta ghrutapana, swedana, abhyanga* etc.

*Sneha dravya* and *brumhaniya dravya* having *guru, snigdha, sara, manda, drava* properties which are called as *posakaguna*, may pacify *vata* by its *poshaka* and *snehana guna*. As *Apabahuka* takes place in shoulder region (*amsasandhi*) so *vyana vayu* is mainly responsible for the genesis of the disease. So *nasyakarma* has been taken into consideration. Aggravated *vayu* dried up the *slesmak kapha* of *amsandhi* and leads to *apabahuka*. In consideration *gunakarmayog snehanaguna* and *nasyakarma* could pacify *vata* by reducing *rukshaguna*. So, *brumhaniya vatanasak dravya* can cure the disease *apavahuka* in its application through nasal route.

#### **CONCLUSION:**

Aggravated *vata* spreads all over the body (*prasara*), but it takes place specially at the area of *Amsasandhi* (*sthana samsraya*) due to the prior "*khavaigunya*" and leads to the *dosa dusya sammurchana* at the said place caused by *abhigata* or other etiologies.

- Any *snehaika taila* is a potent *vatanashaka* and *rasayana dravya* that have the property of pacifying *vatika* disorders.
- *Nasya karma* specially *pratimarsa nasya* with *snehaika taila* could cure *apabahuka* in a dose of 2 drops twice into each nostril

## REFERENCES:

1. Bahaadur Radhakanthadeva, Shabdakalpadruma, Pp565, p 62, NAG publishers, 1987, Delhi.
2. Kaviraj sen Nagendranath, Vaidyak shabda sindu, Pp1212, p 39, choukhamba orientalia, fourth edition, Varanasi.
3. Dr Sharma Anantaram, Susruta samhita, p 470, Pp 600 chaukhamba surabharati prakashana, Varanasi 2012,
4. Acharya jadavji trikamji, Agnivesa, Charaka samhita, sutrasthana ,p 78, Pp 738, chaukhamba publication, 2001, Varanasi.
5. Acharya jadavji trikamji, Agnivesa, Charaka samhita, sutrasthana, p 616, Pp 738, chaukhamba publication, 2001, Varanasi.
6. Acharya jadavji trikamji, Agnivesa, Charaka samhita, sutrasthana, p 113, Pp 738, Chaukhamba publication, 2001, Varanasi.
7. Acharya jadavji trikamji, Susruta samhita, nidansthana, chap.1, sloka 82,p 269, Pp 824 chaukhamba orientalia, 2003, Varanasi,
8. Acharya jadavji trikamji, Susruta samhita, chikitsasthana, chap.5, p 428, Pp 824, chaukhamba orientalia, 2003, Varanasi.
9. Pandit Bhisagacharya H P vaidya, Vagbhatacharya, Ashtanga hrudaya, nidansthana, chap 15, p 530, Pp 956, nirnay sagar press, 2002, Varanasi.
10. Prof Srikantamoorthy K, Madhavakara, madhava nidanam, vatavyadhinidan, chapt 22, sloka 64, Pp 329, p 404, Chaukhamba orientalia, 1993, Varanasi.
11. Khemraj Shrikrishnadas Chakrapanidutta, Chakradutta, Pandit Jagannathsharma Bajpeyee, Pp 343, P32, 2002, Bombay.
12. Vaidhyasagar pandit Parasuram sastri, Sharangadhara, Sharangdhara samhita, Pp398, p 103, Chaukhamba orientalia, 2002, Varanasi.
13. Saxena Nirmal, Vangasena, Vangasena Samhita, Pp 669, p 403, Chaukhamba Sanskrit series office, first edition, Varanasi.
14. Pandey GS, Bhavamishra, Bhava Prakash Nighantu, Pp 984, P226 ,Chaukhamba Bharati Academy, 2004, Varanasi.
15. Govindadas, Bhaisajya ratnavali, Pp 891, P 373, Chaukhamba Sanskrit samsthan, Varanasi.
16. Dr Sharma Anandaram, Susruta, susruta samhita, p-97, Pp 610 Chaukhamba surabharati prakashana, Varanasi.
17. Acharya jadavji trikamji, Susruta Samhita, p -269, Pp 824, Chaukhamba orientalia, 2003, Varanasi.

### Corresponding Author:

Dr. Joydip Tripathi , M.D. (Ayu) Kayachikitsa, Lecturer, Department of Kaumar Bhritya, Raghunath Ayurveda Mahavidyalaya & Hospital, West Bengal, India.

Email: drjoydip.t@gmail.com

Source of support: Nil

Conflict of interest: None

Declared

Cite this Article as : [Tripathi Joydip et al : A Literary Review on the Ayurvedic Line of Management of Apabahuk] [www.ijaar.in](http://www.ijaar.in) : IJAAR VOLUME III ISSUE XI NOV-DEC 2018 Page No:1552-1557