

VATAKANTAKA AND PLANTAR FASCIITIS- A CRITICAL REVIEW

Ananda.K.V¹,

Katti Anand²

¹PG Scholar, ² Asso, Prof. and Head, Department of Samhita&Siddhanta, Government Ayurveda Medical College, Bengaluru, Karnataka

ABSTRACT

The term “*Vatakantaka*” denotes a disease of *Vata* in which the pain is experienced at heel of the foot by the person. “*Shoolamnartheanilath*” – it is said that there is no pain without the involvement of *vata dosha*. “*Vatakantaka*” has been mentioned under *Vatavyadhi*, but the *Samprapti Ghataka* and detailed pathogenesis is not available in any classical text. Such details are very much essential for proper planning of treatment. *Vatakantaka* is a painful condition of heel caused by its improper placement of foot on the ground. Pain beneath the heel is seen in plantar fasciitis. Plantar fasciitis is a common cause for pain in the heel region, which occurs in about 10% of the general population and represents 10–15% of foot problems requiring professional care. *Vatakantaka* is very common condition that affects normal routine work.

Keywords: *Dosha, Dhatu, Mala, Vatakantaka.*

INTRODUCTION: *Tridosha* are the basic concepts of both health and illness. An individual's basic *DoshaPrakruti* plays a key role in predisposition and prognosis of diseases, as well as for treatment. So, for diagnosis and treatment the importance should be given on *dosha, dhatu & mala*. The health condition of an individual depends upon the equilibrium state of these. *Dhatu* and *Mala* attain the state of *Vaisamya* due to vitiation by *Dosha*. The term *Vaisamya* refers to either *Vrudhi* or *Kshaya*(qualitatively or quantitatively). Similarly the equilibrium state of *Doshas* results in the equilibrium state of *Dhatu* and *Mala*. Among the *tridosha*, *vata* is most important as it causes many diseases. *Vatakantaka* = *Vata + Kantaka*

Vata- Mainly denotes that which has *Gati* (movement).

Kantaka- Means point of a needle which is like a thorn, which becomes troublesome and produces a sharp stinging pain.

According to Vagbhatacharya, *Vata* getting localized in the ankle joint (*Vatenagulfamaashrityahatamaahurvataka*

ntakam) either by placing the foot improperly (while walking or by over exertion to the feet) produces pain in the ankle joint. This is called as *Vatakantaka*^[1]. According to Sushrutacharya, When the foot is kept on the ground irregularly, *Vata* localized in the *Khuda(khadula)kashritaha* gets aggravated and produces pain, this is known as *Vatakanta*^[2].

This article is aimed at –Understanding of *Vatakantaka* in relation to Plantar Fasciitis and to evaluate status of *Dosha* and *Dushya* in the manifestation of *Vatakantaka*.

SAMPRAPTI OF VATAKANTAKA

Dosha is qualitative and functional, hence cannot be quantitatively determined. For harmonious well-being of human body the state of equilibrium of three *Doshas* are required because disequilibrium may cause ill health or even death. ^[3,4,5]Placing the legs in an irregular surface or in an irregular fashion (position) leads to *prakopa* of *vata* which takes *sthanasamshraya* in *pada* which gives rise

to *kantaka* type of pain, which is called as *vatakantaka*.

AsthiToda : *Asthi Toda* is because of loss of strength of *Asthi*, which creates *Toda* in the *Asthi*. *Asthi Toda* is mainly because of abnormal function of *Vata Dosha* and *Asthi Dhatus*. Here *Vata Vruddhi* and *Asthi Kshaya* are seen, which proves the *Ashraya Ashrayee Bhava*. So, *Vata Vruddhi* definitely indicates that there is *Kshaya* of *Dhatu*. So it can be definitely said that *Asthi Toda* is indicative of *Vata Vruddhi* as well as *Asthi Dhatus Kshaya*.

Bhedana: Here the suffering is such that the body part is subjected to forceful shearing apart of the components. This

may be intermittent with gradual increase and decrease in each bouts of pain. *Bhedana* is classically mentioned in the features of *Vata Prakopa*. Since *Prakopa* is a state of *Vruddhi* of *Dosha* itself, *Bhedana* is because of *Vata Vruddhi*.

Vyadha: *Vyadha* is a continuous aching type of localized pain over an area. *Vyadha* is classically mentioned in the features of *Vata Prakopa*. Since *Prakopa* is a state of *Vruddhi* of *Dosha*, *Vyadha* is because of *Vata Vruddhi*. Here this symptom is due to *Vata Prakopa* by *Vata Vruddhikara Nidana Sevana*, so it can be definitely said that *Vyadha* is indicative of *Vata Vruddhi*.

Table .1 Involvement of Dosha and Dushya in the causation of Vatakantaka:

<u>Symptoms</u>	<u>Doshainvolvement</u>	<u>Dushyainvolvement</u>
<i>Asthi Toda</i>	<i>VataVruddhi</i>	<i>AsthiKshaya</i>
<i>Bhedanam</i>	<i>VataPrakopa</i>	<i>AsthiKshaya</i>
<i>Vyadha</i>	<i>VataPrakopa</i>	<i>AsthiKshaya</i>

Vatakantaka is a *Vataja Vyadhi*. *Vata* is a *Dosha* which denotes movement and is responsible for all actions of the body. *Kantaka* means pointed object (a needle or thorn). *Vatakantaka* denotes a sharp stinging pain (as if needle or thorn is injected) which is troublesome. The basic pathogenesis of the disease is *Vata Dosha*, getting localized at ankle joint and producing pain. *Vata* is the main factor for pain, without *Vata* involvement, pain will not manifest. Causes of this disease have been mentioned as, placing the foot improperly on the ground (while walking or running) or over exertion to the feet. When the foot is kept irregularly on the ground, *Vata Dosha* gets localized in the *Khuda pradesha*, gets aggravated and produces pain.

Nidana- Improper placing of foot, placing foot on uneven surface,
Shrama, Vishamapada

Poorvarupa- Padavedana- Mild pain in foot

Roopa- Needle type pricking pain.

Upashaya- Vatashamanaupachara

Samprapti- Vitiated vata takes ashraya in the gulfasandhi and causes needle type pricking pain in gulfasandhi.

SampraptiGhataka of Vatakantaka:

Dosha- Vata

Dushya-Rasa dhatu and Asthidhatu

Agni- Jatharagni, dhatwagni

Agnidushti- Mandagni

Srotas- Rasavahasrotas

Vyaktasthana- Snayu, Khandara, Sandhi

Swabhava- Chirakari, Ashukari

Rogamarga-Abhyantara.

Vatakantaka has two causes:-

- *Abhighata*
- *Shrama*

Abhighata: *Abhighata* is in the form of keeping the foot on an uneven surface or accidentally keeping the foot unevenly on

the surface of ground. This may lead to injury to *Gulpha Sandhi*. This will lead to pain. This pain is having characteristic feature of *Toda* as if pricked by thorn. This occurs because of acute or chronic injury to the *GulphaSandhi*.

Shrama: Due to *Shrama*(excess pressure on feet) there will be *Kshya* or *Shosha* of *Dhatu* at *GulphaSandhi*. Excess work by feet will be a local causative factor. Here *Samanya Vata Prakopa Nidana* should also be considered eg. *Ativyayama.Dhatukshaya* occurs with *Rasa Dhatu* in general all over the body and locally there will be *Kshaya* or *Shosha* of *Mamsa*, *Asthi* and *Majja Dhatu*. This *Kshaya* is also seen in relation to *Shleshaka Kapha*. Because of all these factors there will be aggravation of *Vata* which lead to pain.

PLANTARIS FASCIITIS : *Vatakantaka lakshana* is very much similar to the signs & symptoms of Plantaris fasciitis which has been explained in contemporary medicine system. Plantar fasciitis causes pain in the bottom of the heel^[6]. It is one of the common orthopedic complaints. The synonyms of plantar fasciitis are Jogger's Heel and Tennis Heel. Plantar fasciitis is also referred to as *heel pain syndrome* and *heel spur syndrome*, because the pain is usually localized to the insertion of the plantar aponeurosis at the medial tubercle of the calcaneus. The plantar fascia extends from this tubercle to the metatarsal heads, forming the longitudinal arch that provides support for the foot. The plantar fascia is a thick, web-like ligament that connects heel to the front of foot. It acts as a shock absorber and supports the arch of the foot, which help walking. The plantar fascia ligament experience lot of wear and tear in daily life. Too much pressure on the feet can damage the plantar fascia ligament,

which lead to the inflammation which causes pain in heel and stiffness. The pain in plantar fasciitis is caused by collagen degeneration associated with repetitive micro trauma to plantar fascia. The clinical features of plantar fasciitis include significant discomfort, a limp because of difficulty in bearing weight, achy pain. Plantar fasciitis classically presents as medial heel pain that is sharp and most severe with the first step out of bed in the morning or after prolonged rest. This condition is generally self-limiting. Plantar fasciitis occurs acutely, as with trauma Ex. Athletes. Pain in plantar fasciitis more often presents as chronic plantar foot pain of insidious onset associated with chronic overload in cases of obesity, fat pad atrophy, Shortened Achilles tendon, weak plantar flexor muscles, weak intrinsic muscles of the foot, & Poor footwear, trauma, hard surfaces, walking barefoot, prolonged weight-bearing.

DISCUSSION: Plantaris fasciitis which has been explained in contemporary medicine system. Plantar fasciitis causes pain in the bottom of the heel. It is one of the common orthopedic complaints. The synonyms of plantar fasciitis are Jogger's Heel and Tennis Heel. Plantar fasciitis is also referred to as heel pain syndrome and heel spur syndrome, because the pain is usually localized to the insertion of the plantar aponeurosis at the medial tubercle of the calcaneus. *Ativyayama* leads to *Abhigata* i.e., overuse of the foot leads to repetitive micro trauma to plantar fascia. Collagen degeneration, obesity, weak plantar flexor muscles, weak intrinsic muscles of the foot, hard surfaces, & prolonged weight-bearing leads to *Shrama on pada (gulfa sandhi)*, which in turn leads to *dhatukshaya* which further leads to

vataprakopa which manifests as *toda*, *bhedana* and *vyadya*. Because of *dhatu kshaya*, the shock absorbing ability of the plantar fascia reduces which leads to *vata vruddhi*, in turn manifests as *vatakantaka*. *Sthaulya* (over weight) causes more *Shrama* on the *pada* which leads to *vataprakopa*. By these two factors *sthaulya* leads to *vatakantaka*. Plantar fasciitis becomes self limiting when *nidanaparivarjana* is practiced. Plantar fasciitis classically presents as medial heel pain, that is sharp and most severe with the first step out of bed in the morning. It is seen because morning is the *vata pradhanya kala*, so *vedana* will be felt with the first step out of bed. In the morning there will be more *shitaguna* in *vayu*, *shita* increases *shoola*. So, in *vatakantaka* *shoola* is observed in the morning hours. In *Dinacharya*, *Padabhyanga* and *Padatra Dharana* has been explained which should be practiced to avoid physical injuries to the foot i.e., *abhighattopada*. Not practicing *Padatra Dharana* & *Padabhyanga* leads to *vataprakopa* which leads to *vatakantaka*.

CONCLUSION: *Vatakantaka* is a *Nanatmaja Vyadhi*, involving *Vata Dosha*, *Asthi Dhatu* and *Rasa Dhatu*. The etiopathogenesis establishes the involvement of *Vata Vrudhi* in this disease. The involvement of *Dushya* i.e., *Rasa Kshaya*, *AsthiKshaya*. This suggests that there is predominant involvement of *Asthi* and *Rasa Dhatu* in the pathology. We may infer that *Rasa Dhatu* is involved if pathology is because of *Srama* and *Asthi Dhatu* is involved if injury is the cause of pathology.

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Corresponding Author:

Dr.Ananda.K.V,P.G. Scholar,Department of RogaNidana ,Government Ayurvedic Medical College, Dhanwantri Road, AnandaRao Circle, Bengaluru - 560009, Karnataka, India

E-mail: anandakvkv1974@gmail.com

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