

ROLE OF VIDHDHA AGNIKARMA THERAPY IN AVABAHUKA WITH SPECIAL REFERENCE TO FROZEN SHOULDER – A CASE REPORT

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ABSTRACT:

The *Avabahuka* is a *Vata Vikara* which similar to the frozen shoulder of modern science. The classical sign of *Avabahuka* as well as frozen shoulder are *Shoola*(pain), *Stambha* (stiffness) & decreased range of motion of the shoulder joint. Various treatment procedures are available for *Avabahuka* but *Vidhdha Agnikarma* is more and instant effective procedure among all. *Agnikarma* is an important Ayurvedic procedure, is basically heat therapy used to treat diseases caused by *Vata Kapha Dosha*. In *Avabahuka* mainly *Vata Prakopa* is there, so by *Agnikarma* with Ayurvedic Medicine adopted to treat this case

Material & method: In the present study, we collected and compiled references regarding classical Ayurvedic texts, research papers in peer reviewed journals & related data of different websites have critically reviewed.

Aim: The aim of the treatment plan in this case study for *Avabahuka* is to reduce severity of symptoms, improve the quality of life and to explores the role of Ayurveda management in a *Avabahuka*

Discussion & conclusion: We often choose allopathic solutions for most of our problems, but in Ayurveda treatment modalities can be the better and effective solution of *Avabahuka*.

Keywords: *Avabahuka*, Frozen Shoulder, *Vidhdha Agnikarma*, *Panchakarma*, *Shamana Chikitsa*.

INTRODUCTION:

“If your lifestyle does not control your body, eventually your body will control your life style”-This is a very relevant quote concerning the young generation. Stressful life, job pattern, travelling, workouts or ageing; all these can lead us to one most common health problem, i.e. frozen shoulder. It is one health issue that makes us restless and if not taken care of, results in making our routine terrible. Shoulder pain is the third most common cause of musculoskeletal consultation. In primary care Incidence rate of this disease is 3-5% in general citizens. It increases up to 20% with diabetic patients.

Frozen shoulder clinically known as adhesive capsulitis^[1], is characterized by pain, stiffness, and decrease range of motion. Idiopathic adhesive capsulitis result from a chronic inflammatory response with fibroblastic and limited function of the glenohumeral joint, which adversely affects the entire upper extremity. In this condition shoulder capsule becomes adherent to the humeral head that's why it is termed as “Adhesive capsulitis”. The exact cause of this pathology remains elusive. There are two types identified are primary (idiopathic) and secondary proliferation, which may actually be an abnormal response from the immune system. Secondary adhesive capsulitis occurs after a shoulder injury or surgery, or may be associated with another condition such as diabetes, rotator cuff injury cerebrovascular accident. There are two principal characteristics of frozen shoulder-pain and contracture (loss of range of movement). Pain associated with it is progressive and initially felt mostly at night. The contracture of the shoulder ligaments decreases the volume of the capsule, thus limiting range of motion.^[2] The most common limitation in range of motion are flexion, abduction, and external rotation.^[3] A number of treatment modalities are recommended for the management of frozen shoulder. These include pain management through analgesics, anti-inflammatory, steroid injections.^[4,5] Physiotherapy, which commonly involves active and passive stretching and joint mobilizations.^[6] In severe cases of restriction, orthographic distension,^[7] surgical capsular release,^[8] or manipulation under anaesthetics^[9] have been advocated.

In *Ayurveda*, this condition mimics with *Avabahuka*. This named because of it affects the *Amsa Sandhi*. According to *Acharya Sushruta*, when *Vata Dosha* gets vitiated at *Amsa Sandhi*, it leads to exploitation and constriction of vessels. This condition is known as *Avabahuka* ^[10]. It is one of the 80 types of *Vatarogas*.

In Ayurveda, there are many methods for treatment of *Avabahuka*. eg. *Siravedha*, *Agnikarma*, *Basti chikitsa*, *Nasya*, *Snehana*, *Swedana* and oral medication. But *Vidhdha Agnikarma* is considered as best therapy to pacify *Vata-Kapha Doshas*. Due to its *Ushana*, *Sukshma*, and *Ashukari Guna*. Therefore, *Vata- Kapha* pacifying management was planned for the present study. *Vidhdha Agnikarma* in the management of frozen Shoulder is a new thrust area

AIM:

To Study the effect of *Vidhdha Agnikarma* in Frozen shoulder.

CASEREPORT:

A 61 year-old male patient of *Vata Kaphaja Prakriti* visited the Panchakarma O.P.D, Dhruv Ayurveda hospital, supedi, Rajkot, India on 24th April 2023 with Cr.no:4581, with complaints of *Shoola* (severe pain), *Stambha* (stiffness), over the shoulder joint associated with restricted movement of left hand for two months. There was no obvious history of trauma. He had regular appetite and bowel movement was normal. The pain aggravated during activities, cold climate, especially in the morning or night hours. Patient got mild relief from the symptoms after taking rest and heat application. On examination, it was elicited that the patient had restricted Range of movements (ROM) of the Left shoulder joint and maximum tenderness was noticed at the head of humerus with no obvious swelling.

EXAMINATION:

Local examination

- Muscle tone: Normal
- Deformity Left shoulder joint- Absent
- Tenderness- Mild tender
- Local temperature- Normal
- Restriction of movements with severe pain
- Restriction range of Movements:
- Abduction- 90degree
- Flexion- 45degree
- Extension- 180degree
- Internal rotation: Severe pain with Dorsum of hand touching to L2 only

SYSTEMIC EXAMINATION:

Pulse: 80/Min

B.P.: 130/80 mm/hg

DIAGNOSIS

Left frozen shoulder.

TREATMENT PROTOCOL

1. *Vidhdha Agnikarma*
2. *Nasya* with *Anutaila* 8-8 drops
3. *Navjivan rasa* 1 tab 3 time per day after meal
4. *Mahayogaraj guggulu* 2 tan 2 time per day before meal

Vidhdha Agnikarma Procedure

- *Purvakarma Karma* (Pre-Operative): Informed written consent was taken. one points on left shoulder was marked having more tenderness. It sterile with betadine. This area was to be dried with the help of sterile gauze piece.
- *Pradhana Karma*: Use (*Suchi* (Sterile Disposable Needle No. 26 1 1/2), *Viddhakarma* was done on the marked points in *Ardha-Yava Matra* (Depth 6-8 mm).
- Then cut the upper part of needle by needle cutter and apply hit to end part of needle by using fire gun.
- *Paschata karma* (Post-Operative): Then local area cleaned, again with dry gauze. Needle was discarded and no need of dressing needed.

Duration

4 Settings were done, interval of 7 days

FOLLOWUP:

Advised to follow the Pathyapathya regime for Ahara and Vihara. After completion of the treatment, he had advised to follow up for 1 month at the interval of 7 days.

DISCUSSION:

Agnikarma is unique procedure described in *Ayurveda* for instant relief from pain. It has been mentioned in the *Ayurveda* literature (*Shushrut Samhita*) diseases cured by *Agnikarma* never recur^[11]. *Agnikarma* is indicated in all painful condition which are due to *Vata* and *Kapha*. Frozen shoulder can be correlated with *Avabahuk* as per *Ayurveda*. *Agnikarma* is indicated in *Avabahuka* (i.e.frozen shoulder). *Vata* and *Kapha* both are involved in the pathology of frozen shoulder.

Vidhdha Agnikarma immediately results in pacification of *Vata* and *Kapha*, This gives immediate improvement in symptoms of frozen shoulder. Like there is significant reduction in pain and stiffness resulting in increasing range of mobility.

According to Chemical theory of pain, Endogenous opioid peptides (hormone) are produced by CNS and Pituitary gland. These are nothing but Endorphins, a short form of Endogenous morphine. Its main action is to restrict the flow of pain pathway. After Suchivedhana, these endorphins are generated in the body, which inhibit the communication of pain signals. Hence pain decreases. Several studies on shoulder and other joint pathologies were reviewed.

In present case patient got 50% relief in pain on first day immediately after *Vidhdha Agnikarma*. *Vidhdha Agnikarma* heated till it became warm when it was applied to most tender spot it must have reached to the dipper pathological part of shoulder joint (i.e., joint capsule) there by reliving inflammation and hence resulted in reduction of pain *Agnikarma* is a type of mild fomentation this results in reduction in inflammation.

As the pain was reduced patient was able to do gentle stretching exercises. Gentle stretching exercises within the limit of pain achieves more mobility than aggressive stretching exercise. It results in pacification of *Vata*.

RESULT:

SYMPTOMS	BT	AT
Stifness	+++	-
Range of motion	++	-
Abduction	90 degree	180 degree

CONCUSION:

- Frozen shoulder is one of the most common problems which effect mostly in middle age group of patients.
- After *Vidhdha Agni Karma* there is relief of signs and symptoms of frozen shoulder.
- Local tenderness and stiffness are decreased markedly.
- No adverse effect was observed during the course of treatment.
- The treatment applied was simple, economical and required no hospitalization and could be done at OPD level.

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