

## **A REVIEW STUDY ON AVABAHUKA (FROZEN SHOULDER) AND ITS MANAGEMENT BY SHUCHIVEDHAN**

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### **ABSTRACT**

Shoulder joint has the greatest range of motion among all joints in the human body, and Avabahuka is a disease of Amsa sandhi i.e. shoulder joint and it has been described under eighty type of vata vyadhi by acharya sushruta. Trauma on Amsa Marma same lakshana is seen as like Avabahuka. In the references of ayurveda frozen shoulder is closely related to Avbahuka. It is one of the commonest musculoskeletal disorder visited in clinics. Modern medical science plays very less role in the management of frozen shoulder. In Ayurveda various para-surgical procedures were mentioned for diseases of vata kapha in which suchivedh is one amongst them, that has been recommended in various musculoskeletal disorders hence a study was conducted to evaluate the effectiveness of suchivedh in

Avabahuka.

**KEYWORDS:** Avabahuka, Suchivedh, Asma Marmabhighat, Frozen Shoulder.

### **INTRODUCTION**

Human shoulder is the most mobile joint in the body. Shoulder is a complex functional unit with numerous tissues capable of causing pain and joint dysfunction. Shoulder pain is next to back and neck pain in frequency and poses as a significant disabling musculo-skeletal handicap.<sup>[1]</sup> The shoulder is the most complex structure (anatomically) that allows movement in many planes. We generally don't think about the importance of the shoulder joint until its

functions are hampered. Then it becomes obvious that how crucial it is for many essential activities.

Avabahuka 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 textual references of Ayurveda, the disease Frozen Shoulder is closely related to Avabahuka.

Siravedha is a broad term used for removal of blood. It could be of any type, venesection, leech, horn and gourd, scarification or even an prick<sup>2</sup>. When siravedh is performed, the most vitiated dosha i.e. rakta is released, similarly on suchividdha the most vitiated dosha is released.<sup>[3]</sup>

## Literature review

### Avabahuka

The condition Avabahuka is named so, as it affects Amsa Sandhi. Similar descriptions are found in other samhitas of charaka and vagbhata. The condition resembling frozen shoulder is Avabahuka.

- Acharya Sushruta<sup>[4]</sup> And Acharya Vagbhata<sup>[5]</sup> mentioned Avabahuka as a Vata Vyadhi.
- Acharaya Charaka has not mentioned it as Bahudosha in Vata Nanatamaja Vikara.<sup>[6]</sup>
- Charaka called such condition as Bahusirshagata Vata.
- According to Madhukosha Tika Avabahuka is the combination of shleshaka kapha Shosha and Shoola during movement, restricted movements. Amsa Shosha is preliminary stage of Avabahuka, in which Shleshaka Kapha Shosha occurs in Amsa Sandh.<sup>[7][8]</sup>

### Nirukti paribhasha

**Avabahuka comprises two words i.e. 'Ava' and 'Bhuka'.**

**Ava-** Viyoga/Vikratou, which means dysfunction or separation. It can be taken as deterioration or dysfunction.

**Bahuka-** ending of Bahu (the arm). Bahuka is a muscular gender. Avbahuka means stiffness in the arm or bad arm.

### Nidan

**There can be two types of hetu causing Avabahuka which are as follows**

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 Abhyantara hetu. This may be again- Bahya Aabhighataja(external cause) and Dosha Prokopajanya ( Samshraya)

Bahya Abhighataja- which manifests Vyadhi or the disease first. Whereas, the other is Dosha Prokopajanya (Samshraya) which in turn leads to Karmahani of Bahu.

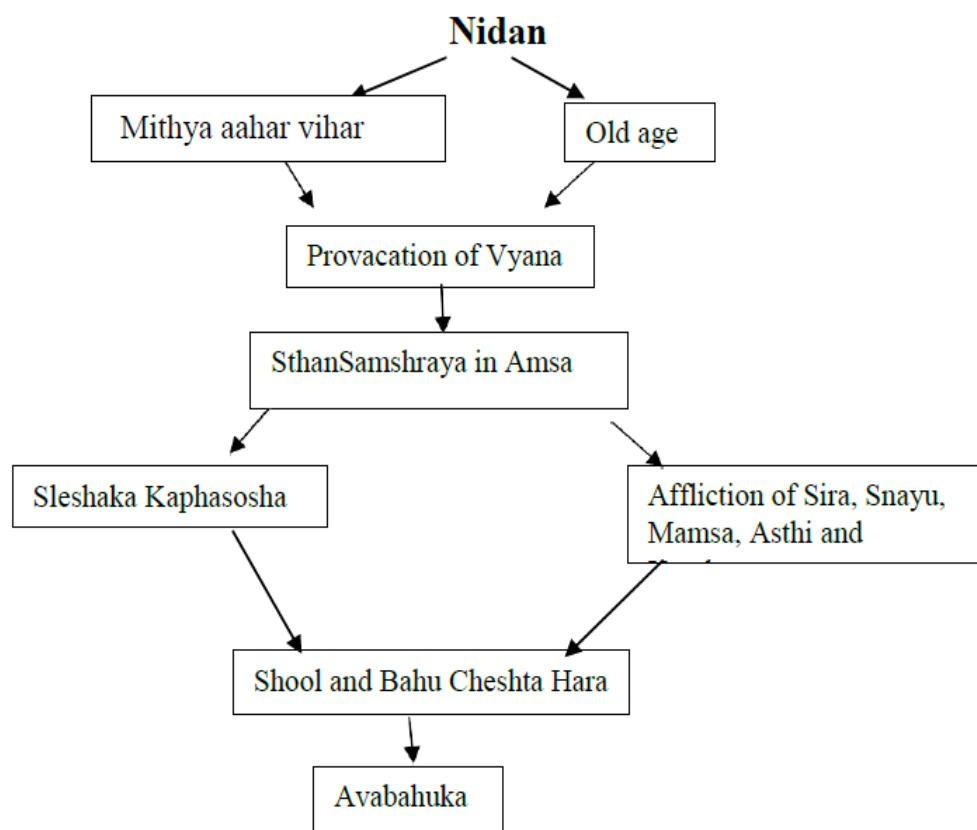
As the disease come under Vatavyadhi, the Nidana of the Vatavyadhi can also be the Nidan of Avabahuka.<sup>[9]</sup>

The cause of Vata Vyadhi are- Dhatu Kshaya

Aavrana

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

### Samanya samprapti



### Lakshan

- Bahu Prasandida 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 Avabahuka.<sup>[4]</sup>

The same definition has been explained by Acharaya Vaghabata in nidan sthana that vitiated Vayu when goes to Amsa-moola Pradesha, it causes constriction of Sira of that Sthana. This result in loss of movements of the Bahu (arm). This contidition is called Avahuka.<sup>[5]</sup>

In Madhav Nidana, two different conditions are explained related to shoulder. These two conditions are Amsa Shosha and Avabahuka. Amsa Shosha is the condition when vayu situated in the Amsa Pradesha causes Shoshana of Amsa Bandhana. The condition

Avabahuka is called when Aakunchana of the Sira present in the shoulder region occurs.

As the shoulder joint is a type of Snayu Marma, it is easily vitiated by Vata. If vitiated Vata goes to the snayu, it causes restricted movements, tremors and pain.<sup>[10]</sup>

### **Frozen shoulder**

Frozen Shoulder syndrome causing stiff and painful shoulder is a common disability in the middle aged population. The diagnosis is often used for any painful shoulder condition associated with a loss of motion but it is important to understatnd the cause of symtoms in order for treatment to proceed effectively. Adhesive capsulitis or Frozen Shoulder has uncertain etiology. It is present with restriction of active and passive motions, accompanied by sever pain usually.<sup>[11]</sup>

**The definition of Frozen Shoulder is also defined by lundberg is,**

- ✓ Shoulder joint elevation of <135
- ✓ Restriction of motion is localized to the glenohumeral joint
- ✓ History, clinical and radiological examination show no other explanation.

### **Types**

- **Primary frozen shoulder** – The primary idiopathic frozen shoulder is a distinct pathological condition identified by global limitation of glenohumeral motion, with loss of compliance of the shoulder capsule, with no specific underlying cause found.
- **Secondary frozen shoulder-** A secondary stiff shoulder or secondary frozen shoulder, typically presents after injury or surgery.

## Sign and Symptoms

Sign and symptoms of frozen shoulder include, Pain, Stiffness, and loss of range of motion of shoulder joint.

Frozen shoulder also known as Peri-arthritis or Adhesive capsulitis, causes a significant loss of motion. This typically occurs in cycle of 3 stages, painful phase, stiff phase and thawing stage.<sup>[12]</sup>

## Relevant anatomy

This is an involvement of the capsule in the glenohumeral joint and rotator cuff muscle with tendon. The capsule volume is reduced and this is the cause for the restricted range of motion. (Itoi and Tabata 1992) critical to the understanding of frozen shoulder is the concept that shoulder function involves not only the glenohumeral joint but also scapulothoracic articulation.

Clinicians must understand the essential role that the scapula plays in facilitating glenohumeral motion. Scapulothoracic and glenohumeral motion occurs simultaneously following initial arm abduction. With arm abduction in individuals who are healthy, approximately one third of elevation is attributed to scapulothoracic motion, while two thirds of elevation is provided by glenohumeral motion.

The glenohumeral joint is enclosed by joint capsule and is surrounded by two sleeves of muscles. The capsule normally is a loose structure with a surface area nearly as large that of the humeral head. The rotator cuff tendon adjacent to the joint capsule thicken the capsule anteriorly, posteriorly and superiorly, while the glenohumeral ligaments represents further areas of joint capsule thickening. Histologically, the capsule consist of bundles of type I collagen. Synovial cells line the inner surface of the capsule and enclose the long head of biceps tendon.

## MANAGEMENT

The standard line of treatment described in ayurveda for different Vata Vyadhis is Snehan Swedana, Mrudusamshodhana, Basti, Sirobasti, Nasya, and so on.<sup>[13]</sup>

## Ayurvedic classics explain the chikitsa of avabahuka as follows

Ashtanga Hrudya- has explained Nasya karma and Uttarbhaktikam in Avabahuka.<sup>[14]</sup>

Ashtang Sangraha mentions Navana Nasya and Sneha Pana for Avabahuka.<sup>[15]</sup>

Sushruta Acharya advises Vata vyadhi chikitsa for Avabahuka, expect Siravedha.<sup>[16]</sup>

But in Sharir Sthana mentioned Siravedha at Bahumadhya in Avabahuka.<sup>[17]</sup>

Chikitsa sara sangraha advises Nasya, Uttarabhaktika Snehapana and Sweda for the treatment of Avabahuka.

Brumhana Nasya<sup>[18]</sup> is indicated in Avabahuka by Sharangdhara.

In Sushruta Samhita, there is a conflict regarding treatment of Avabahuka as in Sharir Sthana there is indication of Siravedha but in Chikitsa Sthana, Sushruta stated that all the procedures indicated in vata Vyadhi Chikitsa can be done expect Siravedha. So it is matter of thinking that whether Siravedha Can be done in Avabahuka or not. That's why; Suchivedhan seems to be better in this condition.

### **Suchivedhan**

In Sushruta Samhita, "Siravyadha Vidhi Adhyaya" has been explained in which Vyadha of specific Siras for a Specific disease is mentioned.

### **The word 'Vyadhya' has so many meaning which is as follows**

- To bore a hole to drain.
- To let out entrapped Vayu.
- To let out entrapped circulation in blood vessels.
- To let out fluid in jatodaka and Mutravrudhhi
- To let out pus in Vidradhi.

Sira always carry all Doshas i.e. Vata, Pitta and Kapha, along with Rakta.<sup>[19]</sup>

Physiological and mental functions go well when Prakruta Vayu is moving in its own direction. Vitiated Vayu moving in Sira produces different Vata Vyadhi. Vedhan indicates deranged or vitiated Vayu and this is the indication for Vidhha Karma.<sup>[20]</sup>

When Siravedha is performed, the most vitiated Dosha i.e. Rakta is released, similarly on Suchivedha the most vitiated Dosha is released.<sup>[21]</sup> A simple puncture also bleeds which is not revealed.<sup>[22]</sup>

Suchivedha removes obstruction of blood vessels and establish normal circulation. It reduces

the load of pathogens circulating in blood. It lets out the most vitiated Dosha first.

Depth of Vyadha Karma- Acharya Sushruta has described a depth of level of vyadha karma according to the area are as follows-

Mamsal Pradesha- 1 Yava

Ashti Pradesha - Ardha Yava Matra.

Tawk Pradesha –Ardha Yava Matra/ Vrihi Matra

The instrument should be used Vrihimukhen Yantra for Vyadhan in Mamsal Pradesha.

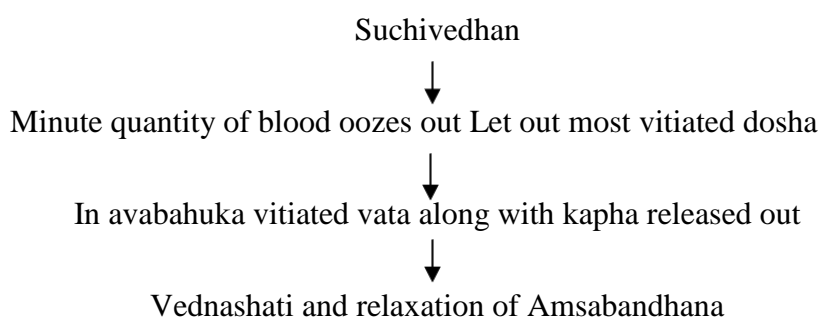
Kutharika Yantra is to be used for Asthi-Vyadhana.<sup>[23]</sup>

**Acharya sushruta mentioned various instrument for vyadhan karma are as follows**

सुचिवेधन- कुठारिकाव्रीहिमुखारावेतसपत्रकाणिव्यधनेसुचीच । सु.सू.८/४

For Suchivedhan we use Insuline needle no 26. This needle's length is exactly matches with length of Vrihi i.e. 13mm, and 0.45mm breadth. So it should be pierced 2mm to 4mm for skin, 4mm to 6mm for Mamsa and 6-10mm for Snayu, Asthi and Sandhi.<sup>[25]</sup>

### Samprapti bhang



### DISCUSSION

Frozen Shoulder syndrome causing stiff and painful shoulder, is a common disability in the middle aged population. The diagnosis is often used for any painful shoulder condition associated with a loss of motion, but it is important to understand the cause of the symptoms in order for treatment to proceed effectively.

Siravedha is a broad term used for removal of blood. If the blood vessels is visible and large, the blood can be evacuated i.e. visravana can be done. But if vessels is non-visible, it is to be pricked by needle till it bleeds i.e. only vedhan can be done there.

In Suchivedhan very minute quantity of blood comes out. Though the quantity of the oozing blood is very low, it may be sufficient to expel out the most vitiated Doshas. So, in

Avabahuka the vitiated Doshas Vata and Kapha may be released out after Suchivedhan, resulting in Vednashaman and relaxation of Amsabandhana.

## CONCLUSION

Suchivedhan is effective in reducing pain in Avabahuka.

The Suchivedhan procedure is somewhat neglected by para-surgical physicians it needed to be explored more. It is cost- effective and gives immediate pain relief. It is simple in management of Avabahuka.

Suchivedhan Anuloman Gati to vitiated Vata Dosha by removing Kapha Awarana in Avabahuka.

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