

EFFECT OF *BRIMHANA NASYA KARMA* IN THE MANAGEMENT OF *AVABAHUKA* – A CASE STUDY

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ABSTRACT

Avabahuka is one many of the *Vata vyadhi* that influences the characteristic of *Amsa sandhi*. *Avabahuka* is taken into consideration to be an ailment that influences the *Amsa sandhi* (shoulder joint) and is due to the *Vata Dosha*. Even aleven though the term *Avabahuka* isn't always noted withinside the *Nanatmaja Vata Vyadhi*, *Acharya Sushruta* and others have taken into consideration *Avabahuka* as a *Vata Vyadhi*.^[1] AAcharya Vagbhata has describe *Nasya karma* in management of *Avabahuka*.^[2] Here we strive to record a case of *Avabahuka* and its management with *Nasya karma*. A 34-year-female having signs and symptoms of *Avabahuka* i.e. pain in left shoulder joint, stiffness and pain in neck since about 2 years. There turned into

no such sizeable beyond records of some other persistent illness. The patientturned into dealt with with *Panchkarma* i.e. *Nasya Karma* accompanied through oral medications. A significant consequence has located after treatment and patientget alleviation in his signs and symptoms.

KEYWORDS: *Avabahuka*, *Vata vyadhi*, *Amsa sandhi*, *Nasya karma*, *urdhvajatrugata Panchakarma*.

INTRODUCTION

Vata Dosha is deliberated to be the important thing aspect for the physiological renovation of the body. Factors initiate *Vata* which leads to immediately manifestation of diseases.

Avabahuka is one in every of such ailment that commonly influences the joint of the shoulder and hinders the daily operation of the person.

It is caused through the *Kupita Vata Dosha* located across the *Amsa Pradesha*, which reasons the *Shoshana* of *Amsa sandhi* inflicting the *Vedana*(Pain), *Stambha* (stiffness) and *Bahuspanditahara* (constrained movement). *Amsa shosha*(dryness of shoulder joint)(shoulder joint) may be taken into consideration because the initial level of the ailment in which loss or dryness of the *Shleshaka Kapha* from the shoulder joint happens. The subsequent level, that is, *Avabahuka*, happens because of the lack of *Shleshaka Kapha* and signs and symptoms like shoola throughout movement, constrained movement, and so on, are manifested. Even as that is commented on within side the *Madhukosha teeka*, it's far noted that *Amsa shosha*(dryness of shoulder joint) is produced through *dhatukshaya*, that is, *shuddha Vata janya*, and *Avabahuka* is *Vata Kapha janya*. However *Avabahuka* isn't laid out in *Nanatmaja Vata Vyadhi*, *Acharya Sushruta* and others taken into consideration *Avabahuka* under *Vata vyadhi*. Cause of *Avabahuka* is especially *Vata dosha* as it's far defined under *Vatavyadhi* and in later level *Kapha Dosha* is likewise related to *Vata dosha*.^[3] *Amsa shosha*(dryness of shoulder joint) may be known as an initial level of the ailment wherein the absence or dryness of *Shleshaka Kapha* from *Amsa sandhi* happens. As *Avabahuka* is a *Bahushirshagata roga*, *Nasya Karma* must be the primary treatment of choice. *Acharya charaka* has also describe *vatahara taila nasya* in *avabahuka*.^[4] Also the ailment manifestation is because of *Dhatu Kshaya Brihmana Nasya Karma* goes to be useful in management of the *Avabahuka*. *Aacharya vrindamadhava* has mention *dvitiya brhimhana mamsa taila* in management of *Avabahuka*.^[5]

CASE STUDY

A 38-year-female registered through the O.P.D NO 20017771 at the date of 28/11/2020 got here to the O.P.D. no. 105 of Parul Ayurveda Hospital with c/o pain and stiffness in left shoulder joint and pain in neck since about 2 year. Patient were given admitted in *Panchakarma* Department; with IPD No 201992.patient's element is as below.

Chief complain- Pain in left shoulder,

Stiffness in left shoulder,

Pain in neck region

Duration-2 year

Associated complaints-No such history

Past History- No H/O- DM, HTN or Surgical Procedures Or injury

Family history- No significant history found

Personal history

Addiction-tea

Bowel habit-regular

Micturition-1-2 day/1-2 nights

Sleep-sound

Vitals

- Pulse rate: 76/min
- B.P: 130/90 mm of Hg
- R.R: 18/min
- H.R: 76/min.

Astavidh pariksha

Table 1- Astavidh pariksha.

1	Nadi	VataKaphaj
2	Mala	Samyak
3	Mutra	Samyak
4	Jihva	Niram(Alipta)
5	Shabda	Prakrut
6	Sparsha	Mridu
7	Drik	Prakrut
8	Akruti	Madhyam

Dashvidh pariksha

Table 2- Dashvidh pariksha.

1	Prakruti	VataKapha
2	Vikruti	Vama amshasandhi shola
3	Sara	Madhyam
4	Samhanana	Madhyam
5	Pramana	Madhyam(Ht-155cm,wt-70kg)
6	Satva	Madhyam
7	Satmya	Madhyam
8	Aaharshakti	Madhyam
9	Vyayamshakti	Madhyam
10	Vaya	Madhyam(35yr)

Systemic examination

- Respiratory System: B/L Chest clear, Airway entry, Breathing entry Clear

- Cardiovascular System: S1 S2 found, normal
- CNS: Patient is conscious and well oriented. All sensory and motor system was normal.
- GIT: Abdomen-soft, Bowel sound heard. No organomegaly detected

Local examination

Inspection-No swelling/edema/redness/scar

Palpation-Temperature –normal,

No any abnormal growth palpable

ROM- Left shoulder joint is as bellow

Table 3- ROM- Left shoulder joint.

Abduction	70 ⁰
Flexion	70 ⁰
Extension	30 ⁰
Internal rotation	40 ⁰
External rotation	50 ⁰

Investigation

CBC-2/11/2020

Hb-11.9 g/d l

Total wbc count-8200/cmm

Differential wbc count

Polymorphs-70%

Lymphocytes-21%

Eosinophiles-5%

Monocytes-4%

Basophils-00%

Platelet count-273000/cmm

Rbs-127mg/dl

X ray left shoulder joint ap & lateral view-2/11/2020

Joint space appears normal, No any abnormality detected.

Samprapti Ghatak

- *Dosha- vyana Vata, shleshakKapha*
- *Dushya- shira, snayu, mAmsa, kandara*
- *Srotas- Rasavaha, Raktavaha, MAmsavaha, Svedavaha*

- *Srotodushti- Sanga*
- *Ama- Sama*
- *Udbhavasthana- Amashaya*
- *Vyaktisthana-*

Treatment protocol: After proper clinical examination, patient was diagnosed with *Avabahuka* and was advised to undergo *Nasya Karma*.

Nasya karma^[6]

Poorva Karma

- After doing *Atura Pariksha* and *Sambhar Sangraha* in room having enough day light and without direct atmospheric impacts like dust.
- The patient is recommended to lie down in supine position on Droni.
- *Mukhabhyanga* is accomplished first with lukewarm *Murchhita tila taila*, followed by *Sthanika Bashpa Swedana* (after covering eyes with gauze piece dipped in water)

Pradhana Karma

- Once the *Poorva Karma* has been done, the patient's head is then lifted and prolonged backward (45° angles from fringe of the table)
- *Madhyam matra* (eight bindu) of *Dvitiya brumhanamasha tail* become instilled into each nostril one after the other.
- The other nostril being closed whilst the drug is brought in a single nose.
- Patient become told to inhale deeply and the secretions gathered in Oropharynx become requested to spit out by turning head to each side in to a spittoon kept beside head. Since taking the drug, patient become strictly recommended now no longer to ingest the medicine.
- The spit become being performed till the patient heady fragrance and flavor of the drug fades from the throat.
- Then become allowed to relaxation in the same pose for a hundred *Matrakala* (30 – 32 seconds) without going to bed.

Paschat Karma

- *Pradhana Karma* followed by *Kavala Graha*. The patient becomes encouraged to obey the processes and regimens.

- The patient told to take *Sukoshna Jala* and *Laghu Ahara*.
- Patients was strictly recommended to keep away from *Sheeta Jala Snana* and *Sheeta Jala Pana* in the course of the entire procedure

Treatment Duration- 7 days.

Medicine prescribed after discharge (9/11/20 to 13-11-20)

1. *Mahanarayana taila* for local application over shoulder region
2. *Yogaraj guggulu* 2-0-2 after meals with heat water

OBSERVATIONS AND RESULT

Significant improvement found in overall function of left shoulder joint becomes determined after treatment. Clinical exams had been crafted from the interrogation and gradation of scoring pattern.

Observations of sign and symptoms earlier than and after treatment are as follow:-

Table no 4- observations.

Sign & symptoms	Before treatment	After treatment
Pain	++++	++
Stiffness	+++	+
Abduction	70 ⁰	150 ⁰
Flexion	70 ⁰	140 ⁰
Extension	30 ⁰	60 ⁰
Internal rotation	40 ⁰	50 ⁰
External rotation	50 ⁰	60 ⁰

DISCUSSION

After right assessment of this situation we've in the end analyzed that, because of *Hetu sevana* like heavy weight lifting, immoderate paintings on computer, inappropriate diet habits vitiation *Vata Dosha* (*vyana vayu*) occurred, flow into in entire body and get accumulated at *Amsa sandhi* which brought on depletion of *Shleshka Kapha* because of which lubrication of joint (loose motion of joint) get restrained which ends up in *stambha*, and *shoola*. *Nasya karma* is one of the *Pancha karma* processes that now no longer most effective alleviates the vitiated *doshas*, however additionally reasons entire eradication of the vitiated *Dosha* and the ailment particularly *urdhvajatrugata vyadhi*. *AAcharya Vagbhata* quoted that “*Naasa hi shirasodwaram*.”^[7] It means nose is the perfect and closest beginning for conveying the efficiency of drug treatments to the cranial cavity. The *Nasya Dravya* to reaching '*Sringataka Marma*' from where it spreads into various *Srotas* (vessels and nerves) and brings

out vitiated *Dosha* from the head. *Acharya* Sushruta opines that the *Shringhataka marma*, is a *sira marma*^[8], located at the site of the union of the *siras*, imparting to the nostril, ear, eye, and tongue. *Acharya* charaka emphasised that the *Nasya* drug normally acts through absorption by the *Shringataka marma*.^[9] After absorption of the drug, it acts at the illnesses of *Skandha*, *Amsa*, and *Greeva* and the *doshas* are expelled from the *shira Pradesha*. *Dvitiya Brihanmasha taila* has qualities like *guru*, *snigdha teekshna*, *ushna veerya*. It has properties like *Vata shamaka*, *Vedana sthapaka*, *shoola hara*, *sadhaneeya*, *bhalya*, *bruhmana*, *shothahara*, *anulomana*, and acts on *dathukshaya*. Most of the components are opposed to *Vedana sthapaka* and *brimhana* facilitates in reinstalling it to normalcy, in this case study patient get significant improvement in sign and symptoms of *Avabahuka* and no any side effect or aggravation of symptoms observed during or after treatment.

CONCLUSIONS

By study this case it can be concluded that, *Avabahuka* can be managed or treated with Ayurvedic Management by *Panchakarma* in form of *Nasya karma*. Successful outcome can be achieved by *Nasya karma* in management of *Avabahuka*.

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