

LITERATURE STUDY OF EFFICACY OF NASYA IN AVABAHUKA**¹*Dr. Asavari Rayate, ²Dr. Rashmi Kuravar**¹PG Scholar, Panchakarma, SMBT College of Ayurveda, Igatpuri, Nashik.²MD Panchakarma, SMBT College of Ayurveda, Igatpuri, Nashik.

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ABSTRACT

Nasya Karma is one of the prime treatments of *Avabahuka*. It is especially indicated for the diseases of the parts in and above the shoulders. In *Nasya Karma*, medicine is administered through nostrils to the head and it spreads through the channels and cures the disease. In *Nasya Phalasruti* it is mentioned that the skin, shoulders, neck, face, chest become well developed. So *Nasya* helps in developing strength of muscles in shoulder region. *Avabahuka* is a condition in which vitiated *Vata* lodges in *Amsa Pradesha* and by contracting leads to the *Shosha* of the muscles of the shoulder and upper arm. This disease disturbs the day-to-day activities of an individual and makes him dependent and very much depressed. Even with advanced allopathic treatment modalities, patients are not getting static and satisfactory relief.

KEYWORDS: *Nasya, Avabahuka, Ayurveda.***INTRODUCTION**

Acharya Charaka has mentioned five types of *Panchakarma* which is *Vamana, Virechana, Asthapana [Niruha], Anuvasana & Nasya*. Among them *Nasya* is important *Panchakarma* in *Urdhavajatrugata Roga*.^[1] It is a method of eliminating vitiated *dosha [Vaikarika]* and also useful for detoxification.

Nasya is administered through nasal cavity which reaches *Shirosthana*. Acharya Vagbhata mentioned three types of *Nasya* i.e. *Virechana, Bruhana, Shamana*.^[2] According to *Sharangdhara*, *Nasya* is divided into two types *Marsha* and *Pratimarsha*.^[3] *Marsha Nasya* is mainly based on *Sneha dravya* in *Bahudosha avastha* while *Pratimarsha Nasya* used in daily

practice as per *Vividhakala*. It is also used in *Kamartha purusha*.

Avabahuka is major rising problem in society due to its irregular diet, improper posture, daily travelling, stress, strain, in which *Amsasthita Vayu* is vitiated along with *Shleshma*. It has *Avarodhatmaka Samprapti* in which *Vata dosha* is vitiated due to *Ruksha*, *Laghu Guna* & *Dhatukshaya* and *Shleshma* also. It mainly affects the *Amsa Sandhi*. Hence *Sira akunchana* takes place. So, the pathogenesis of *Avabahuka* produced by the *Vatakapha*.

Avabahuka Vyadhi can be correlated with frozen shoulder as per modern science. Frozen shoulder is a condition in which upper arm pain occur that progress over four weeks before receding over a similar time course. It is a descriptive term used to represents a symptom where the patient has abnormalities around the joint surface, fracture or dislocation. The capsular and synovial thickening mainly cause due to non-specific chronic inflammatory reaction in sub-synovial tissue.

Acharyas have mentioned almost similar management for *Avabahuka* in *Samanya Chikitsa* of *Vatavyadhi* i.e. *Snehana*, *Swedana*, *Abhyanga*, *Nasya*, *Snehapana* etc.^[4] *Avabhavuka* is a diseases that usually affect shoulder joint in which *Amsasandhi shoola* is produced due to *Sirakshaya*^[5], *Vata dosha* is vitiated round *Amsa Sandhi*. *Shosha* can be considered as preliminary stage of disease were *Kapha Kshaya* occur and it is produced by *Dhatukshaya*, i.e. *Shuddha Vatajanya* but *Avabahuka* is *Vata kaphajanya*.^[6]

METHODOLOGY

Paribhasha of Avabahuka

Avabahuka is a disease which is characterized by aggravated *Vata dosha* localizing around the *Amsa pradesha* thereby causing *Amsabandhana Shoshana*, *Akunchana* of *Sira* at this site leads to *Bahuprasapnda hara* i.e. restricted movements.^[7]

Nidana of Avabahuka^[8,9]

It includes various *Aaharaja Nidanas* like *Vataprakopaka*, *Ruksha*, *Sheeta Aahara*, *Alpamatra*, *Atimatrayukta Aahara*, *Mithya Aahara*, etc. *Viharaja Nidanas* like *Mithya Vihara*, *Karmendriya Atiyoga*, *Aghatadi Agantuja Nidana*, *Chinta*, *Krodha*, etc *Manasika Nidanas* and *Marmabhighata* as *Amsa Marmabhighata*.

Poorvarupa of Avabahuka

Specific *Poorvarupa lakshanas* of *Avabahuka* are not mentioned, *Poorvarupa* mentioned for

Vatavyadhi are considered as *Poorvarupa* of *Avabahuka*. Acharya Charaka has mentioned that 'Avyakta' Lakshanas as *Poorvarupa* of *Vatavyadhi*.^[10]

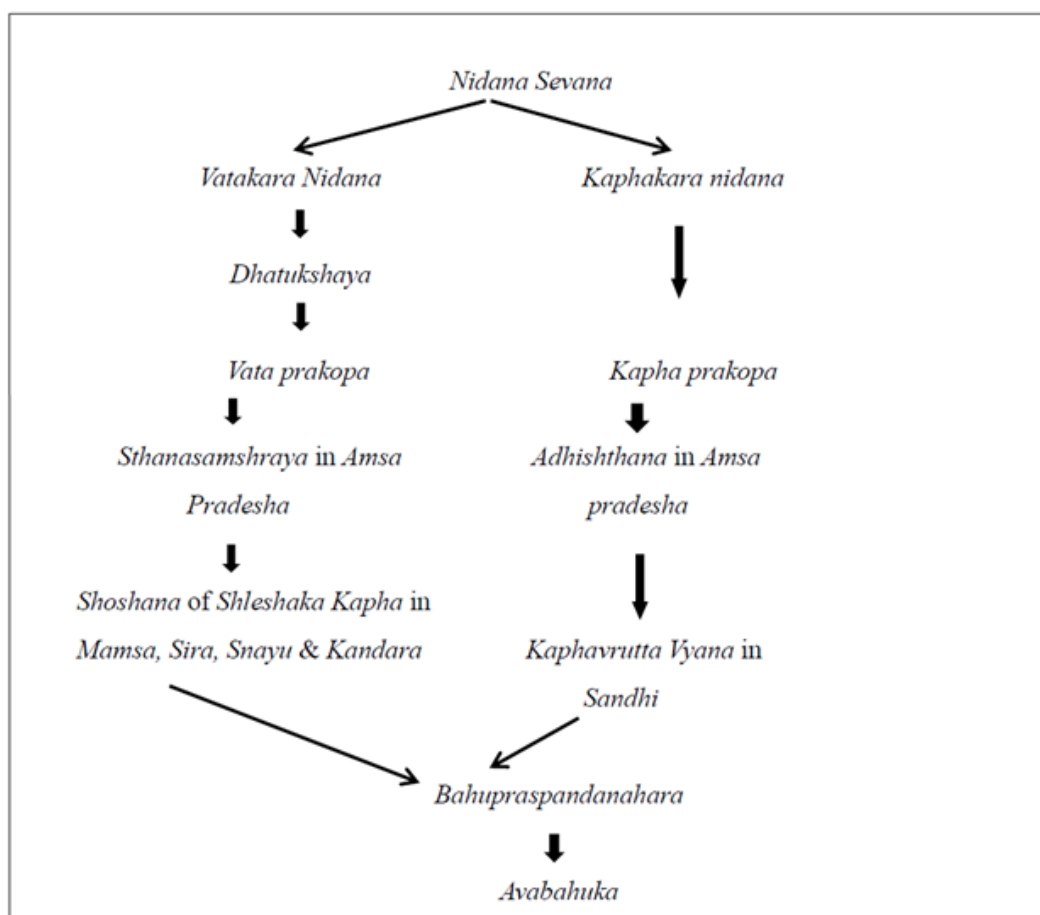
Rupa of Avabahuka

Avabahuka is mainly included under *Stambha pradhana Vatavyadhi*. Acharya Sushruta explains that vitiated *Vata dosha* causes *Shoshana* of *Amsa bandhana* & *Shoshana* of *Sira*, *Kandara* of the *Amsa pradesha* which leads to *Stambha* and *Bahupraspandanahara*. Vagbhata, *Madhavakara*, *Bhavaprakasha* also mentioned the same opinion.

The symptoms of Avabahuka are

- *Bahupraspandanahara*^[11] [Stabdhata]
- *Shoola*^[12]

Samprapti^[13]



Upadravas

The *Upadravas* of *Avabahuka* are specifically not mentioned in *Samhitas*. Hence, the general *Upadravas* of *Vatavyadhi* are considered as *Upadravas* of *Avabahuka*. Acharya Sushruta has

explained *Upadravas* of *Mahagada* including *Vatavyadhi*^[14] are mentioned as follows; *Pranakshaya*, *Mamsakshaya*, *Jwara*, *Atisara*, *Shosha*, *Trishna*, *Murccha*, *Hikka*, *Chardi*, *Shwasa*.^[15]

Chikitsa

Nasya in *Avabahuka* *Chikitsa*

- ❖ *Nasya Karma* has been mentioned by *Vagbhata* in *Jatrurdhva Vata Vikaras*.^[16]
- ❖ *Ashtanga Hridaya* explains *Nasya* and *Uttara Bhaktika Snehapana* as useful in the management of *Avabahuka*.^[17]
- ❖ *Sushruta Acharya* explains on *Siravyadha* in *Avabahuka* to be done “*Amsayoranthare*”^[18]
- ❖ *Ashtanga Sangraha* explains *Nasya* for *Avabahuka*. It also explains *Uttara Bhaktika Snehapana*.^[19]
- ❖ *Vangasena* advises *Nasya*, *Uttarabhaktika Snehapana* and *Sweda* for the treatment of *Avabahuka*.^[20]
- ❖ *Nasya Karma* gives strength to neck, shoulders, chest and increases vision^[21], thus *Nasya* is useful in *Avabahuka*.

DISCUSSION

Probable mode of action of *Nasya*

The mode of administration of *Aushadha* through *Nasya Karma* is having several advantages. The rich vascular plexus of the nasal cavity provides a direct route into the blood stream for medications that easily cross mucous membranes. While instillation of medicine of *Nasya* the patients head should be in *Pralambita* it should not be excessively flexed and extended, so in this position nasal medication will reach to the desired target and helps to facilitates the vitiated doshas.

This direct absorption into the blood stream avoids gastrointestinal destruction and hepatic first pass metabolism (destruction of drugs by liver enzymes) allowing more drug to be cost-effectively, rapidly, and predictably bioavailable than if it were administered orally.

According to Anatomical Aspects

The *Sringataka Marma* has been explained by recent authors as the middle cephalic fossa of the skull consisting of meningeal vessels, paranasal sinuses and nerves. One can see the truth of the narration made by *Vagbhata* here - the drug administered enters the paranasal sinuses, that is, the *Sringataka*, where the ophthalmic vein and the other veins spread out. The sphenoidal

sinuses are in close relation with the intracranial structures. The mentioning of the *Sringataka* in this context seems to be more reasonable. As the procedure of *Nasya* involves *Mukhabhyanga* and *Sveda* over many *Marmas* existing on the face and head, these also help in alleviation of *Marmaksobha* and *Vatashamana*. *Brumhana Nasya* provides nourishment to the *Shiras* and other Supra clavicular organs there by alleviates the vitiated *Vata*. Hence, it is useful in *Vatajanya* ailments.

According to Absorption in Nasal Epithelium

The richly supplied vascular nature of the nasal mucosa coupled with its high drug permeation makes the nasal route of administration attractive for many drugs, especially lipids, and lipid soluble drugs. Lipid soluble substances have grater affinity for passive absorption through the cell walls of nasal mucosa, thus *Navana Nasya* may be superior to all the varieties. The cilia of the olfactory cells and perhaps the portions of the body of the olfactory cells contain relatively large quantities of lipid materials; this could explain why a substance must be lipid soluble to cause stimulation of olfactory cell and further the *Mukhabhyanga* and *Svedana* helps in vasodilatation and there by increases the rate and area of absorption.

CONCLUSION

In *Vatavyadhi* Aches and Pains in muscles and joints surface at all ages, though the causes may differ. It is only when these minor problems become major, people realizes the importance of addressing and attending to these health issues. Amongst the category of diseases our *Acharyas* have considered *Vatavyadhis* as an important entity. They have mentioned these *Vatavyadhis* under the heading of *Ashtau Mahagadas*. *Avabahuka* is one among the *Vatavyadhi*. In a developing country like India where agriculturists and labours form a major population, the incidence of *Avabahuka* is more. Even though this disease not a life threatening one, but it hampers the daily activity of the upper limb. *Acharya Vagbhata* advises *Bruhmana Nasya* in *Avabahuka* as *Shoshana* of *Shleshaka Kapha* and vitiation of *Vata Dosha* occurs.

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