



Case Study

SIGNIFICANCE OF *MARMA* THERAPY IN THE MANAGEMENT OF *AVABAHUKA* (FROZEN SHOULDER)

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ABSTRACT

Avabahuka, described under *Vata Vyadhi* in Ayurveda, is characterized by pain and restricted movement of the shoulder joint and is comparable to adhesive capsulitis (frozen shoulder) in modern medicine. The condition leads to significant functional limitation and reduced quality of life. Contemporary management often focuses on symptomatic relief, thereby necessitating safe, effective, and holistic therapeutic approaches. *Marma* Therapy, an important modality of Ayurveda, involves stimulation of vital anatomical points to restore physiological balance and promote healing. The present study aims to evaluate the significance of *Marma* Therapy in the management of *Avabahuka*. It is based on a conceptual review of classical Ayurvedic literature supported by a clinical case study. A 52-year-old male patient presenting with pain and restricted shoulder movement was treated with *Marma* Therapy by stimulating *Amsa*, *Amsaphalaka*, and *Kakshadhara Marma* points using gentle pressure along with the application of *Mahanarayana Taila* for 21 days. Assessment was carried out using the Visual Analog Scale (VAS), range of motion (ROM), and functional parameters. The intervention resulted in significant improvement, with pain reducing from 8/10 to 2/10 on VAS and marked enhancement in shoulder mobility, including abduction and flexion. Functional activities such as dressing and overhead movements also improved considerably. The findings suggest that *Marma* Therapy is a safe, cost-effective, and non-invasive treatment modality that effectively reduces pain, improves joint mobility, and restores functional capacity in *Avabahuka* by addressing underlying *Vata* imbalance.

INTRODUCTION

Ayurveda, the science of life, provides a comprehensive understanding of health and disease based on the principles of *Tridosha*, *Sapta Dhātu*, and *Srotas*. Diseases occur due to imbalance of *Doshas*, leading to structural and functional derangement in the body. Among these, disorders caused by aggravated *Vata Dosha* are considered particularly significant due to their chronicity, degenerative nature, and impact on quality of life.

Avabahuka is one such disorder described in Ayurvedic classics under the category of *Vata Vyadhi*. It primarily affects the *Amsa Sandhi* (shoulder joint), leading to pain (*Shoola*), stiffness (*Stambha*), and restricted movement (*Bahu Praspanidita Hara*)^[1]. The condition arises due to vitiation of *Vata Dosha*, often associated with *Dhatu Kshaya* and *Margavarodha*, resulting in drying and degeneration of joint structures^[2].

The shoulder joint is one of the most mobile joints in the human body, allowing a wide range of movements essential for daily activities. Any impairment in its function significantly affects an individual's independence and quality of life. In modern medicine, frozen shoulder or adhesive capsulitis is a chronic inflammatory condition characterized by progressive pain and stiffness of the

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shoulder joint^[3]. It commonly affects individuals between 40–60 years and is frequently associated with systemic conditions such as diabetes mellitus and thyroid disorders.

The pathophysiology of frozen shoulder involves synovial inflammation, capsular thickening, fibrosis, and adhesions, leading to decreased joint volume and restricted mobility^[4]. The condition progresses through three stages: freezing (painful), frozen (stiffness), and thawing (recovery). Despite various treatment options, including NSAIDs, physiotherapy, corticosteroid injections, and surgical interventions, complete recovery may take months to years, and recurrence is not uncommon.

Ayurveda offers several therapeutic modalities for the management of *Avabahuka*, including *Snehana*, *Swedana*, *Nasya*, *Basti*, and *Marma* Therapy. Among these, *Marma* Therapy has gained increasing attention due to its non-invasive nature and profound therapeutic effects.

Marma are vital points in the body where *Mamsa*, *Sira*, *Snayu*, *Asthi*, and *Sandhi* converge and are considered seats of *Prana* (vital life force)^[5]. There are 107 *Marma* points described in Ayurveda, each having specific anatomical and functional significance. Injury or stimulation of these points can produce systemic effects.

Marma Therapy involves gentle stimulation of these vital points to regulate *Prana*, balance *Doshas*, and restore physiological functions. In musculoskeletal disorders like *Avabahuka*, stimulation of specific *Marma* points helps in relieving pain, improving circulation, reducing stiffness, and enhancing joint mobility.

Given the increasing burden of musculoskeletal disorders and limitations of conventional therapies, there is a need to explore effective alternative approaches. This study aims to evaluate the significance of *Marma* Therapy in the management of *Avabahuka* with special reference to frozen shoulder, integrating classical Ayurvedic concepts with modern clinical understanding.

AIMS AND OBJECTIVES

- To evaluate the role of *Marma* Therapy in *Avabahuka*.
- To assess improvement in pain and range of motion.
- To correlate Ayurvedic concepts with modern pathology of frozen shoulder.
- To understand its mechanism in relieving pain and stiffness.

MATERIALS AND METHODS

This is a conceptual and clinical review based on:

- Classical Ayurvedic texts such as *Sushruta Samhita* and *Charaka Samhita*.
- Modern medical literature on frozen shoulder.
- Clinical experience in *Marma* therapy.

Conceptual Study

Avabahuka in Ayurveda

Avabahuka is caused by:

- *Vata prakopa*
- *Dhatu kshaya*
- *Margavarodha*

Lakshanas (Symptoms)

- *Bahu shoola* (pain in shoulder)
- *Stambha* (stiffness)

Alpachesta or *Nishkriyata* (restricted movements)

Frozen Shoulder (Modern Perspective)

Frozen shoulder progresses in three stages:

- Freezing stage (pain dominant)
- Frozen stage (stiffness dominant)
- Thawing stage (gradual recovery)

Pathologically, it involves:

- Synovial inflammation
- Capsular fibrosis
- Adhesion formation

Mode of Action of *Marma* Therapy^[6]

Marma therapy works through:

1. ***Prana* flow regulation**
2. ***Vata* pacification**
3. **Improved circulation**
4. **Neuromuscular relaxation**
5. **Removal of *Srotorodha* (channel obstruction)**

It stimulates the body's natural healing mechanisms by activating energy pathways.

Therapeutic Effects

- Reduces pain (*Shoola*)
- Improves range of motion
- Relieves stiffness
- Enhances muscle strength
- Prevents chronic disability

Case Report

A 52-year-old male patient presented to the OPD with complaints of:

- Pain in the right shoulder for 4 months.
- Progressive restriction of shoulder movements.
- Difficulty in combing hair, dressing, and overhead activities.
- The pain was insidious in onset and aggravated at night. There was no history of trauma.

Clinical Findings

- **Inspection:** No visible swelling or deformity.
- **Palpation:** Tenderness over anterior and lateral shoulder.

Range of Motion (ROM)

- Abduction: Restricted to 70°
- Flexion: Restricted to 80°

Treatment Protocol⁷

S.No	Marma points	Stimulation time	Marma therapy sittings	Total time period
1	Amsa Marma	0.8sec	Twice daily	21 days
2	Amsaphalaka Marma	0.8sec	Twice daily	21 days
3	Kakshadhara Marma	0.8sec	Twice daily	21 days

- Gentle pressure applied using thumb/fingers
- Application of *Mahanarayana Taila*
- Duration: 10 minutes per session
- Frequency: Twice daily

Duration of Treatment: 21 days

Associated Therapy

Mild *Abhyanga* followed by *Nadi Swedana*

Assessment Criteria

1. Pain (Visual Analog Scale – VAS)
2. Range of Motion (ROM in degrees)
3. Functional Assessment (Shoulder Disability Score)

OBSERVATIONS**Pain Assessment (VAS Score)**

Day	VAS Score
Day 1	8/10
Day 7	6/10
Day 14	4/10
Day 21	2/10

Range of Motion Improvement

Movement	Before Treatment	After 21 Days
Abduction	70°	140°
Flexion	80°	150°
External Rotation	20°	60°

Functional Improvement

Parameter	Before	After
Overhead Activity	Severe difficulty	Mild difficulty
Dressing	Moderate difficulty	No difficulty
Pain at Night	Severe	Mild

RESULT

- Significant reduction in pain.
- Marked improvement in range of motion.

- External Rotation: Severely restricted

Special Tests: Painful arc test positive

Diagnosis

Based on clinical features, the condition was diagnosed as:

- *Avabahuka* (Ayurveda)
- Frozen Shoulder (Modern correlation)

- Enhanced functional ability
- No adverse effects observed

DISCUSSION

The present case demonstrates that *Marma* therapy provides rapid and sustained relief in *Avabahuka*. The stimulation of *Amsa* and *Amsaphalaka Marma* likely improved:

- Local blood circulation
- Neuromuscular coordination
- *Vata* Dosha balance

The use of *Mahanarayana Taila* further potentiated the therapeutic effect due to its *Vata-shamaka* and *Brimhana* properties.

The improvement observed may be attributed to:

- Release of muscular spasm
- Reduction in capsular stiffness
- Activation of healing pathways

This supports the integrative role of *Marma* therapy in managing musculoskeletal disorders like frozen shoulder.

The pathogenesis of *Avabahuka* involves aggravated *Vata* leading to *Rukshata* and *Stambha*. *Marma* Therapy provides *Snigdha Sparsha* and stimulates energy pathways.

From modern perspective:

- Activates mechanoreceptors
- Reduces pain signals
- Improves circulation

Thus, it bridges Ayurveda and modern science.

CONCLUSION

- The addition of clinical evidence highlights that *Marma* therapy is not only theoretically significant but also clinically effective in *Avabahuka*. It offers measurable improvements in pain, mobility, and function, making it a valuable modality in Ayurvedic practice.

- *Marma* therapy plays a significant role in the management of *Avabahuka* (frozen shoulder). It offers a safe, effective, and holistic approach by addressing the root cause- *Vata* imbalance- while improving joint function. Integrating *Marma* therapy into clinical practice can enhance patient outcomes and reduce dependency on pharmacological interventions.
- *Marma* Therapy is an effective, safe, and economical modality in *Avabahuka*. It addresses root cause (*Vata*) and improves functional outcomes.

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