



ABSTRACT

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Case Study

A CASE STUDY ON AVBAHUKA W.S.R TO FROZEN SHOULDER

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KEYWORDS:

Avbahuka, Agnikarma, Bala, Frozen shoulder. Avbahuka is a disease caused by vitiation of Vatadosha in the Ansa Pradesha or Ansa Sandhi (shoulder joint). It affects the *Bahugata Siras* by constricting them, further causing *Shoola* (pain), and Bahupraspanditahara (stiffness) causing restriction in the motion of shoulder joint. The symptomatology of disease Avbahuka closely resembles frozen shoulder or adhesive capsulitis in modern medical science. The hallmark sign of this disease is severe pain especially when the patient moves the affected arm. Also, gradually there is restriction in the range of motion of shoulder joint. This is a disease that highly hampers one's way of living by causing hindrances in personal and professional life both. So, there is a need to find immediate relief as well as long lasting effective treatment for the patient. The present single case study was done to evaluate the efficacy of Agnikarma and Balamoolghanvati in the treatment of disease Avbahuka. The study was carried out at Shalya Tantra OPD of Gurukul Campus, Haridwar, Uttarakhand. A female patient came up with complaint of pain and stiffness along with loss of motion of right shoulder joint since last 1 year. After taking the history and doing the necessary investigations she was diagnosed as a case of frozen shoulder. Agnikarma and Balamoolghanvati was advised to patient for duration of 2 months. Proper assessment before, during and after treatment was done with follow up period of 1 month. Patient got significant relief just after the treatment only and after 15 days the range of motion gradually increased without much pain in the joint. The symptoms almost got dwindled after the 2 months of study with contentment to the patient.

INTRODUCTION

According to Ayurveda, *Vata* is responsible for all the movements in our body ^[1]. When *Vata Dosha* is in equilibrium state in our body along with other *Dosha* the body functions properly but when the *Vata Dosha* get vitiated or there is dominance of disturbed *Vata Dosha* it causes *Vatavyadhi. Acharya Sushruta* mentioned that "*Vatadrute Naasti Ruja*" that means without *Vata* or *Vikrita Vata* there cannot be pain in the body ^[2]. This line very well states the importance of *Vata* in the pain management.

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Avbahuka is one among the Vata Vyadhis described in our Ayurveda classics. Acharya Charaka in Sutra Sthan mentioned the term Bahushosha under Vata Nanatmaja Vyadhis ^[3] and Bahuvata in Chikitsa Sthan instead of Avbahuka ^[4].

According to Acharya Madhava Avbahuka is Dwandaja which means that it involves two Doshas Vata and Kapaha. He was the first one to differentiate Ansa Shosha from Avbahuka and so considered them two different diseases^[5]. Nowadays generalized hypermobility associated with occupation that involves heavy weight lifting, carrying heavy loads, twisting, trauma, etc contributes to increase in Vata Dosha and manifestation of Vata Vyadhi called Avbahuka. The vitiated Vata Dosha affects the Ansa Pradesh constricts the Bahugatasiras which causes pain, stiffness and restricted movement of shoulder joint ^[6]. The disease Avbahuka is correlated with frozen shoulder or adhesive capsulitis. Frozen shoulder results from gradual loss of movement in the shoulder

joint or glenohumeral joint. The three hallmarks of frozen shoulder includes insidious onset of shoulder stiffness, severe pain specially at night and partial or complete loss of passive and active external rotation of the shoulder joint [7]. This disease has unknown aetiology however some probable risk factors have been recognized which includes, diabetes mellitus, shoulder injury, dupuytren disease, complex regional syndrome, thyroid disorder, pain etc. The pathophysiology of disease can be understood as fibrotic, inflammatory contracture of rotator interval capsule and ligaments. The pathology which is commonly recognized is cytokine mediated synovial inflammation with fibroblastic proliferation based on arthroscopic observations. There are also adhesions around the rotator interval caused by increased collagen and nodular band development [8]. Frozen shoulder has three phases of clinical presentation that represents the disease progression. First phase is early phase or freezing phase with duration of 2 to 9 months. It is initially painful and the pain gets worse at night with gradual rise in glenohumeral joint range of motion restriction. Second is frozen stage with duration of 4 to 12 months. In this stage the stiffness gets dominant over the pain and there is persistent limitation of glenohumeral joint movement. The third phase is thawning or recovery phase with duration of 12 to 42 months. This phase comes with gradual return of range of motion of shoulder joint [9].

Treatment of this disease includes medications like NSAIDS, intra articular steroids, physiotherapy, hydrodilation, etc. The surgical intervention includes manipulation under anaesthesia and Arthroscopic selective capsular release. Having so many treatment of this disease practitioners are still failing to provide efficient management of disease which is cost effective as well provide easy treatment without any side effects. Ayurveda surely provide answers to all these queries regarding the treatment. Acharva Sushruta has mentioned one of the best ways to treat Vata Kapha predominant disease with Agnikarma that is helpful in treating the Ruja or pain associated with Vata Dosha and stiffness caused by Kapha Dosha. Hence for disease like Avbahuka where there is dominance of Vata and Kapha Agnikarma is one of the best choices of treatment. Acharya Sushruta established the eminence of *Agnikarma* by saying that there is no reoccurrence of disease once they are treated with Agnikarma [10]. Acharva Chakrapani Dutta is a renowned name in field of Ayurveda and is known by his significant contributions to the Ayurveda system of medicines. In his text he stated that consuming *Balamool kwath* in Vatavyadhi named Avbahuka for one month can make Bahu as strong as Vajra ^[11]. Bala has Snigdha and Madhura Guna which makes it a Vata Shamaka drug.

Also it has *Balya, Brimhaniya, Vednasthapan* and *Shothhar* effects making it a potent drug for *Vata* disorder like *Avbahuka*^[12].

Case report

A 45 yrs old female patient visited *Shalya Tantra* OPD of Gurukul campus, Haridwar on 30/9/2021 with following details:

Patient name: XYZ

OPD no: 3991

DOA: 30/9/2021

DOD: 30/9/2021

Address: Bahadurpur

Chief Complaint

Pain and stiffness in right shoulder joint since one year.

Difficulty in performing shoulder movements since one year.

H/O Present Illness

According to patient she was asymptomatic before one year then she gradually developed symptoms like pain in the shoulder joint with stiffness. Also, she was unable to do shoulder movements that caused her difficulty to perform daily chores. For these complaints she took allopathic medicines that gave her relief only for few days without any recovery so she then visited *Shalya Tantra* OPD, Gurukul campus hospital for the ayurvedic management of the disease.

Past History

N/H/O DM / HTN

N/H/O Trauma or fall

N/H/O/ Thyroid

Personal History

- Diet mixed
- Appetite normal
- Bowel constipated

Micturition – normal (5-6 times a day)

Sleep – normal (7 hrs in a day)

Astavidha Pariksha

Naadi - Vata-Kaphaj Mala - Niram Mutra - Niram Jihva - Swach Shabda - Prakrita Sparsha - Ushna, Mridu Drik - Shukla Akriti - Madhvama

Nidan Panchaka

- *Hetu* (etiology): All *Vata Vardhaka Ahara* and *Vihar*
- *Purvaroopa* : not observed
- **Roopa:** Shoola (pain) in Ansa Prasdesh (shoulder region), Bahupraspandita hara (stiffness in shoulder joint).
- Upshaya: By movement of shoulder joint

Systemic Examination

- **CNS:** conscious and well oriented to time, place and person
- **CVS:** S1 and S2 heard normally
- **RS:** Normal sound heard no added sound present
- ▶ **P/A:** NAD

Symptom	BT (Rt)	BT (Lt)	AT (Rt)	AT (Lt)
Shoulder muscle wasting	Absent	Absent	Absent	Absent
Muscle power	Active movement against gravity but not resistance	Absent	Active movement against gravity with full resistance	Absent

Sensory System

Motor System

Samprapti

Sensory symptom	В	Т	A	Т
	R	L	R	L
Superficial stimuli (soft touch)	Absent	Absent	Absent	Absent
Deep stimuli (Pain sensation)	Present	Absent	Absent	Absent
Temperature	Absent	Absent	Absent	Absent

Specific Examinations (Shoulder Joint) Inspection

- Swelling- Absent
- Wasting of Hands- Absent

Palpation

Crepitation during flexion and extension: Absent

Nidana Sevan

Ш

Vatvridhi

Vayu gets seated in Ansamool

Constriction of Bahugata Siras leading to **Bahupraspanditahara**

Avbahuka

Symptom	В	Т	AT		
	R	L	R	L	
Tenderness	Present	Absent	Absent	Absent	
Swelling	Absent	Absent	Absent	Absent	
Wasting of Shoulder muscle	Absent	Absent	Absent	Absent	

Investigations

CBC: normal

X ray Rt shoulder joint -Ap, lateral: not any deformity RBS: 154.8

Treatment

- 1. *Balamoolghanvati*: One tablet of 500 mg each was given twice a day to the patient for period of 2 months.
- 2. Agnikarma: Under full aseptic condition first Shalaka. Site was cleaned with Triphala Kwath and then Agnikarma was done at the tender points on

the shoulder joint in *Bindu* manner. *Aloe vera* was then applied at the Dahana site and further with turmeric powder dressing was done. Patient was then asked to come continuously for 7 days for dressing. The second sitting was then repeated after 30 days. Follow up was done for 1 month after the completion of treatment.

3. Assessment of patient: It was done on the basis of subjective and objective parameters.

Subjective Parameters

Bahupraspandita Hara (Stiffness)

Observation	Grade	BT	1 st	15 th	30 th	45 th	60 th
			day	day	day	day	day
Nil (total absence of stiffness)	0						0
Mild (stiffness with movement on and off and does not interfere with routine work)	1					1	
	2		2	2	2		
Moderate (stiffness on movements and does not interfere with routine work)	2		2	2	2		
Severe (stiffness on movements as well as on rest which interferes with routine work)	3	3					

Shoola (Pain)

Grade	BT	1 st day	15 th day	30 th day	45 th day	60 th day
0					Nil	Nil
1		1	1	1		
2	2					
3						
	0 1 2	0 1 2 2	day 0 1 1 1 2 2	day day 0 - 1 1 2 2	day day day 0 - - - 1 1 1 1 2 2 - - -	daydaydayday0Nil1122

Tenderness

Observation / S S	Grade	BT	1 day	15 day	30	45	60
	2		day	day	day	day	day
Nil No tenderness	0			Nil	Nil	Nil	Nil
Mild The patient winces with pain	1	1	1				
Moderate The patient winces with pain and withdraws the affected part	2						
Severe The patient does not allow the joint to be touched	3						

Objective Parameters Range of Movements (ROM) by Goniometry

					_				
Flexion	BT	1 st day	30 th day	60 th day	Extension	BT	1 st day	30 th day	60 th day
Upto150°→0					Upto 60°→0				
Upto 90°→1				1	Upto 30°→1				1
Upto 30°→2	2	2	2		Upto 20°→2	2	2	2	
Cannot flex→3					Cannot extend $\rightarrow 3$				

Abduction	ВТ	1 st day	30 th day	60 th day	External Rotation	ВТ	1 st day	30 th day	60 th day
Up to $150^{\circ} \rightarrow 0$					Upto 90°→0				
Up to $90^{\circ} \rightarrow 1$			1	1	Up to $60^{\circ} \rightarrow 1$				
Up to $30^{\circ} \rightarrow 2$	2	2			Up to $30^{\circ} \rightarrow 2$				2
Cannot abduct $\rightarrow 3$					Cannot rotate externally \rightarrow 3	3	3	3	

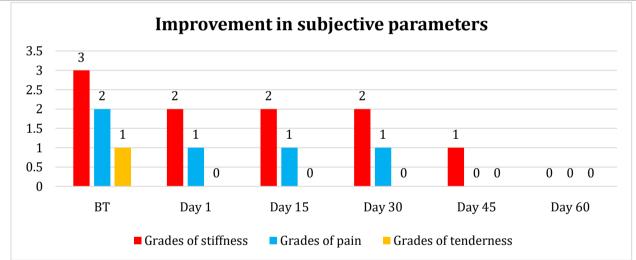
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Shoulder Pain and Disability Index (SPADI) Pain scale (How severe is your pain?)

		BT	AT
At its worst?	0,1,2,3,4,5,6,7,8,9,10	9	2
When lying on the involved side?	0,1,2,3,4,5,6,7,8,9,10	9	1
Reaching for something on a high shelf?	0,1,2,3,4,5,6,7,8,9,10	8	5
Touching the back of your neck?	0,1,2,3,4,5,6,7,8,9,10	9	5
Pushing with the involved arm?	0,1,2,3,4,5,6,7,8,9,10	9	5

Disability scale (How much difficulty do you have?)

Washing your hair?	0,1,2,3,4,5,6,7,8,9,10	BT	AT
Washing your back?	0,1,2,3,4,5,6,7,8,9,10	9	5
Putting on an undershirt or jumper?	0,1,2,3,4,5,6,7,8,9,10	8	5
Putting on a shirt that buttons down the front?	0,1,2,3,4,5,6,7,8,9,10	6	2
Putting on your pants?	0,1,2,3,4,5,6,7,8,9,10	6	2
Placing an object on a high shelf?	0,1,2,3,4,5,6,7,8,9,10	8	5
Carrying a heavy object of 10 pounds (4.5 kilograms)	0,1,2,3,4,5,6,7,8,9,10	9	5
Removing something from your back pocket?	0,1,2,3,4,5,6,7,8,9,10	9	5



Improvement in subjective parameters

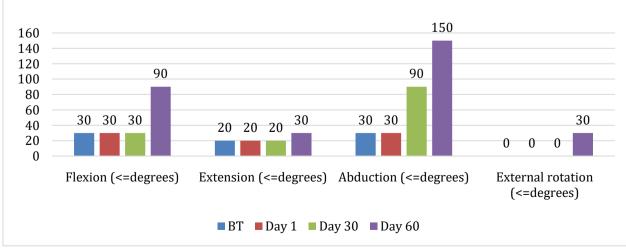


Figure 1 and 2: Graphical representation of Subjective and Objective parameters AYUSHDHARA | March-April 2022 | Vol 9 | Issue 2

Interpretation of Scores

Total Spadi score (BT): 99/130 x 100 = 76% **Total Spadi score (AT):** 47/130 x 100 = 36% **OBSERVATION AND RESULT**

After completion of treatment that was of 2 months patient got significant relief. Agnikarma gave instant effects in terms of pain and stiffness. The pain during movement and that was getting worse at night got diminished after the first sitting of *Agnikarma*. The range of motion of the shoulder joint also got improved. The assessment of the patient was carried out by specific subjective, objective criteria and the and Disability Shoulder Pain Index (SPADI) questionnaire mentioned in the above tables. Parameters shows remarkable improvement and there is significant decrease in SPADI score where overall total scale range from 0 to 130 with a percentage score of 0 indicating less shoulder disability and 100 indicating more shoulder dysfunction. According to patient she was now able to do the daily routine activities without much discomfort.

DISCUSSION

Acharva Sushruta in Sutrasthan has mentioned that if there is severe pain in Twaka, Mansa, Sira, Snayu, Asthi or Sandhi then in all these condition Agnikarma can be done ^[13]. So in Avbahuka where Ansa sandhi gets affected to an extent that it loses its movement either partially or completely Agnikarma should be indicated. Among all Dahan Kriyas, Acharya Sushruta and Acharya Vagbhatta both have given superior place to Agnikarma. Agni possesses Tikshna, Sukshma and Laghu Guna that removes the Avarodh from the Srotas caused by Vitiated Vata and Kapha and hence brings Doshas into Samyawastha. Agnikarma not only proves itself as a boon in pain management but also has anti inflammatory properties too. According to Vant Hoff's principle the basal metabolism of the body increases by certain percentage for every 1 degree rise in body temperature. Rise in temperature induces relaxation of muscles and hence muscle spasm with inflammation and pain gets reduced. Muscle relaxes most readily when tissues are warm which in turn reduces the spasm, inflammation and pain. [14] Bala is a potent herb that is used generally for Vata disorders. Acharya Charaka has mentioned that Bala has Rasayana (rejuvenative) properties that essentially nourishes the body at all level from macro to micro cellular level and so strengthens the muscle tissue (Mansa Dhatu) and muscular system (Mansvaha Srotasa). In this case study both the treatments showed significant results by removing the stiffness and pain of shoulder joint and regaining its movements. Patient was fully satisfied with treatment as the discomfort she was facing while performing day today activities was no more present.

Providing a pain free life to people has always been a rewarding experience for all health care practitioners as it is very well said that "we must all die. But I can save him from days of torture, that is what I feel as my great and ever new privilege. Pain is a more terrible lord of mankind than even death itself ".^[15]

CONCLUSION

Avbahuka or frozen shoulder can be successfully managed with the Ayurvedic treatment after proper assessment of the disease. Agnikarma procedure is economical and simple and can be performed at OPD level without necessarily asking for any hospitalization. If performed under skilled guidance it gives best results in terms of pain management. Also, Bala is easily available and economical drug and when used in proper dosage it shows significant results. So, both these treatment can be implemented in case of Avbahuka without using any allopathic interventions or surgical intervention that is not as simple and economical like the above mentioned Ayurvedic treatment.

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