



## APABHAHUKA: A CASE STUDY

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### ABSTRACT

*Apabahuka* has been described as one among the *Vataja Nanatmaja Vyadhi*. The aggravated *Vata*, which takes *StanaSamshraya in AmsaMoola*, where there is already *Shleshaka KaphaK shayacauses the Sirasankocha* locally and produces *Praspandanaharatha of Bahu*, manifesting as *Apabahuka*. *Madhukosha explained two types i.e., Vata and Vata-Kaphaja*.

There are many clinical conditions described in the medical texts, which involves the shoulder joint, from which the most common condition is Adhesive Capsulitis or Frozen shoulder. Frozen shoulder causes restricted active and passive gleno-humeral movements in the shoulder joint and produce pain and stiffness in the shoulder. Over the time the shoulder becomes very hard to move. Physical therapy with a focus on shoulder flexibility is the prime treatment for this. Frozen shoulder most commonly affects people between the ages of 40 and 60 and it is more common in women than men, in addition people with Diabetes are at increased risk for frozen shoulder. It can also develop after the shoulder has been immobilized for a period of time due to surgery or a fracture or other injury.

A 45 year old female patient came to our KC OPD (19066) with chief complaint of pain and stiffness in the shoulder joint, patient is unable to lift her right hand also with numbness, weakness of upper limb. In this case Ayurvedic formulations like *Prasarinyadikashyam, Maharaja Prasarini tablet, Kathakakhadiradikashayam, Karpasahasthyaditailam and Nishamalakichoornam* prescribed and got good result. The improvement provided by this therapy is assessed on the basis of signs and symptoms before and after the treatment. This medication is safe and effective in controlling signs and symptoms of *Apabahuka* and improving the condition of shoulder. Ayurvedic formulations are very effective in this conditions. In the present case study proves the effectiveness and potential of Ayurvedic medicine in management of life style disease like frozen shoulder.

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### INTRODUCTION

*Apabahuka* is formed from word *Ava* and *Bahuka*.<sup>1</sup> *Ava* means as away or down. *Apa* is used as alternate for *Ava* in some *Samhithas*. It indicates dysfunction or stiffness of joints. *Bahuka* means according to *Susrutha* has considered *Bahu* is apart between *Amsa* and *Koorpara Sandhi*. *Apabahuka* can be defined as *Bahu Stamba Apabahuka*. *Amsa* is the major joint in the upper limb and it is *Chala* type and *Ulookhala Sandhi*. This is formed by the combination of *Pragandasthi* and *Akshakasthi* and *Amsaphalakasthi*. *Shleshmadhara Kala* which is seen in the joints produces *Shleshka Kapha*.<sup>2</sup>

*Apabahuka* can be compared with frozen shoulder in contemporary science. The etiology of frozen shoulder is unclear. This disease process particularly affects the antero-superior joint capsule and the coraco-humeral ligament. Frozen shoulder is a condition that causes restricted active and passive gleno-humeral movements in the shoulder joint.

Frozen shoulder is one of the musculoskeletal complications that can affect people with diabetes. It is postulated that excess glucose impact the collagen in the shoulder. Collagen is

a major building block in the ligament that holds the bone together in a joint. When sugar molecules attach to the collagen, it can make collagen sticky. The buildup then causes the affected shoulder to stiffen and the pain prevents it from moving the arm. Frozen shoulder is estimated to affect about 20% people with diabetes, compared with only 5% of people without diabetes. So high blood sugar is a risk factor.<sup>3</sup>

For any *Roga* the knowledge of *Nidana* is important for proper understanding of the disease. Even though a specific *Nidana* have not been mentioned for *Apabahuka*, the general *Vathavyadhi Nidana* can be considered. Like *Aharaja, Viharaja, Manasika, Aganthuja* etc.<sup>4</sup> *Purvarupa* indicates the impending diseases. No specific *Purvarupa* of *Vatavyadhi* has been given in literature of Ayurveda, but it is clearly mentioned that the *Avyaktha Lakshanas* are the *Purvarupa* of *Vatavyadhi*.<sup>5</sup> Chakrapani says *Avyaktha* means *Alpa*. *Vijayarakshita* gives meaning like symptoms that are not clearly exhibited,<sup>6</sup> so in *Apabahuka* also, *Poorvarooopa* can be taken as minor symptoms of disease produced before actual manifestation of the disease like vague shoulder pain, mild stiffness in the upper extremities, mild restricted movements

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and similar other symptoms of *Apabahuka* in its minimal severity may be considered as *Purvarupa*. *Susruthanar* rating about the disease *Apabahuka* mentions that the vitiated *Vata* causes the *Shoshana* of *Amsa Bhandana* and *Sankocha* of *Sira* and *Kandara* of the *Amsa Pradesa* leading to *Stamba* and *Bahu Praspandana Hara*.<sup>7</sup> Here the aim of the treatment is to normalize the imbalanced *Vata* and *Kapha*, Along with controlling the sugar levels and strengthening the shoulder joint.

### Case Report

A 45 year old female patient came to KVG Ayurveda College OPD with chief complaint of pain and stiffness of shoulder joint, since 6 months. She is unable to lift her Right hand. Patient was apparently well before 6 months and gradually developed pain and stiffness and she took Allopathic medicines but she didn't get a satisfactory relief and pain is increased. Now she is unable to do her day to day activities so she came for Ayurvedic treatment. Patient is known case of diabetes and under allopathic medication since 6 years.

Past history: Diabetic since 6 years, Blood pressure is normal, no history of any accident or trauma

Family history: H/o Diabetic

Treatment history: Pain used to get relieved by taking analgesic.

### Personal history

Diet: Mixed

Micturation: 5 to 6 times per day, yellowish

Appetite: Normal

Habit: taking tea 3 or 4 times per day, using thick pillows while sleeping

Bowel habits: Constipated

Sleep: Disturbed due to pain

### Ashtasthanapareeksha

- *Nadi: Vata, Pitta.*
- *Mutram: 5 to 6 times*
- *Mala: Constipated*
- *Jihwa: Aliptha*
- *Sabda: Vyaktha*
- *Sparsha: Anushna, Sheetha*
- *Drik: Samanya*
- *Akriithi: Madhyama*

### Dasavidhapareeksha

- *Prakrithi: VataKapha*
- *Vikriti : Mamsa, Asthi, Sira, Snayu*
- *Satwa: Madhyama*
- *Sara: Madhyama*
- *Samhanana: Madyama*
- *Satyama: Sarvarasa*
- *Aharashakthi : normal*
- *Vyayamashakthi : Hina*
- *Vaya: 45 yrs*

### Nidanapanchaka

*Nidana:* improper *Ahara Vihara (Ruksha, improper time, carrying heavy loads, heavy works)*

*Purvarupa:* mild pain and stiffness in right shoulder joint

*Rupa:* *Stamba, Bahu Praspandanahara, vyadha.*

*Upashaya:* Rest

*Anupashaya:* Analgesics

*Samprapti:* *Nidana* aggravation of *Vata (vyana)* Decrease of *Shleshaka Kapha Vyaktasthan a APABHAHUKA*

### Samprapti Gadakas

- *Dosha: Vyana Vata*
- *Shleshaka Kapha*
- *Dushya: Sira Snayu Kandara Asthi Mamsa Meda Raktha*
- *Srothas: Rakthavahasrothas, Mamsavahasrothas, Medovaha, Asthivaha*
- *Dushti: Sanga*
- *Udbhavastana: Pakwashaya*
- *Adhishtana: Amsa Pradesa*
- *Vyaktha: Bahu and Amsa*
- *Rogamarga: Bahya and Madhyama*

### General Examination

- Built: Moderate
- Pallor: Absent
- Icterus: Absent
- Cyanosis & Clubbing: Absent
- Lymphadenopathy: Absent
- Tongue coating: Mild coating
- Pulse rate: 74/min
- Bp: 130/90 mm Hg

### Systemic Examination

CVS: S1, S2 heard

RS: NBVS, no added sounds.

P/A: No organomegaly and no tenderness.

### CNS

Higher mental functions

Sensory system

Cranial nerves

} NAD Clinically

### Higher mental functions

Consciousness: well conscious

Orientation: well oriented to person, time, place

Memory: Intact

Speech: Normal

### Musculoskeletal examination

Range of movement

### Shoulder joint: (Right)

Flexion

Extension:

Abduction:

Adduction:

Internal rotation:

External rotation:

} painful and restricted

### Inspection

Swelling: Absent

Redness: Absent

Deformities: Absent

### Palpation

Tenderness: present, at right scapular region

Temperature: present at right shoulder and elbow joint.

## Special Tests

Spurling test + ve (Right side)

### chikitsa

First 15 days

- 1) *Prasarinyadikashayam*:- 15ml *kashayam* with 60ml lukewarm water morning, empty stomach.
- 2) *KathakakhadiradiKashayam*:- 15ml *kashayam* with 60ml lukewarm water in the evening on empty stomach.
- 3) *KarpasahasthyadiTailam*( external use)after mild heating

Next follow up

- 1) *PrasarinyadiKashayam*:- 15 ml *kashayam* with 45ml luke warm water on empty stomach.
- 2) *NishamalakiChoornam*:- 1tsp with hot water morning and evening
- 3) *Maharaja prasarini tablets*:- 1tablet morning and evening each
- 4) *KarpasahasthyadiTailam* for *Nasyam* (8 drops in each nostril) and *Abhyanga*

Along with medicines, Exercises & diet control also advised.

*Prasarinyadi kashayam*<sup>8</sup> is indicated for frozen shoulder, cervical spondylosis and it is *VataKaphahara* and *Brumhana*, Directly indicated for *Apabahuka* and *Vatavyadhi*. In clinical experience, this medicine is very effective in diseases occurring in neck region (*VathaKaphaDosa* predominance).

*Kathakakhadiradi kashayam*<sup>9</sup> is useful for treating all types of *Prameha*. It regulates the secretions of pancreas and maintains blood glucose level. It balances the *Vata* and *Kapha*. *Karpasahasthyadi Tailam*<sup>10</sup>:- *Nasya* and *Abhyanga* with this oil are best for *Vathavyadhi*, *Apabahuka*, *Pakshaghatham* and *Arditha*. *Nasya* is very effective in all *Urdhwajathrugata Vikara*. In *Apabahuka*, *Nasya* and *Utharabakthika Snehapana* are very effective. *Sringadakarman* is a *Siramarma* situated at the site of union of *S iras*, supplying to nose ear, eyes and tongue. *Nasya* drugs usually act through absorption by *Shringadaka Marma*, after absorption of drug It act on the disease of *Sakanda*, *Amsa* and *Greeva* and the *Dosas* are expelled from the *Sirapradesa*. *Brumhana* or *SnehanaNasya* gives strength to all the *Dhatus* and works as *Dathuposhana*.

*NishamalakiChoornam* is the combination of *Hardra* and *Amalaki*. It is effective in the clinical management of *Madhumeha*, *Prameha* and diabetes. *Nishamalakiim* proves insulin sensitivity, increase glucose uptake by skeletal muscle and is beneficial in management of *Madhumeha*, *Prameha* and Diabetes as well as its complications. <sup>11</sup>*Maharajaprasarini tablets*<sup>12</sup> is useful in all *Vathaja* condition and neurological conditions and it is a rejuvenating agent.

## RESULT

- Pain and stiffness reduced.
- She was able to lift her hand and do her house-hold works.
- Sugar level came under control with no weakness.
- After the treatment, patient's overall condition of body and mind got improved.

## DISCUSSIONS

*Apabahuka* is a *Vatapredo* minant disease, *Sula* and *Sosha* at the shoulder joint indicate the morbidity of *VyanaVata*, and this is true in case of *Dhatukshaya* and *Swanidanaja Apabahuka*. *Kaphaplays* and important role in case of *Margavarodhadhaja Apabahuka*, this pathogenesis leads to development of *Kaphavrithaor kaphaja Apabahuka*. Impairment of *Bahuprasandana* is one of the cardinal features in *Apabahuka* and this affects *Utkshepana*, *Apakshepana*, *Prasarana* and *Akunchana* etc activities of shoulder joint. These are the activities of *VyanaVata*.<sup>13</sup> Hence among the 5 types of *Vata*, *Vyana* is the primary cause of this disease in levels and *Swanidanaja Apabahuka*. *AmsaSandhi* is the union of *Asthi*, *Sira*, *Snayu* and *Mamsadhatu*. *Mulasthan* of *Mamsa* is *Snayu* and is an *Upadhatu* of *Meda*.<sup>14</sup> *Sira* and *Kandara* are the *Upadhatu* of *Raktha Dhatu* which is responsible for the *Akunjana* and *Prasarana*. Thus *Meda* and *RakthaDhatu* are also involved in the *Apabahuka*. As the *Prakopana* of *Vata* and *Avarana* of *Vata* interfere with the *Rasa Dhatu*, it is also considered as the *Dushyain* the initial or later stages of the disease *Apabahuka* respectively in the form *Amsasosha*. The concept of *Asrayaasrasyi Bhava* between *Asthi* and *Vata* is evident in the long run of the disease. Thus the *Shula* and *Sosha* are also common in the later stages of the disease. The invariable involvement of *Vata Dosha* in the pathogenesis of *Apabahuka* reveals that the disease originates from *Pakwashaya* and *Dhatukshayaja Apabahuka* from *Amashaya*. *Apabahuka* should be differentiated from *Ekangaroga*, *Vishwachi*, *Amsashosha*. In modern Bursitis, Tendonitis, Rotator cuff injury and cervical spondylosis. Frozen shoulder is associated with diabetes so maintenance of blood sugar is important. In the present case study shows Ayurveda can effectively manage cases like these. Herbal formulations like *Prasarinyadikashyam* etc are very effective in management of frozen shoulder, without any difficulties. Along with medicine yoga and exercise are best to get good result.

## CONCLUSION

Ayurvedic treatment is safe and effective in controlling signs and symptoms of *Apabahuka*. Medicine helps to correct *VyanaVata* and *Shleshakakapha* also to improve general condition of the patient. *Apabahuka* is a *VataKaphaja* disease and *Oushadi* which is able to manage *Vata* and *Kapha*, and normalize the *Tridosha* is important here. Along with herbal medicine, practice of mild yoga and exercise always gives better results.

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