ABSTRACT
Shoulder joint has the greatest range of motion among all joints in the human body. If it gets afflicted with any ailment then it hampers the day to day activities. Apabahuka is a condition characterized by pain and stiffness of shoulder joint that leads to severely restricted movements of the hand. It is caused by the vitiation of vata dosha. In other sciences its line of management is very symptomatic and prognosis is not satisfactory. In this study we have put an effort on the Ayurvedic principles of line of management of apabahuka by thorough studying of its nidana, rupa, samprapti ghataka etc.

Keywords: apabahuka, vata dosha, Ayurvedic principles etc.

INTRODUCTION: Among all the joints of the human body the shoulder has the greatest range of motion. This allows complex movements and functions to be carried out in day to day life. Apabahuka as an ailment was first introduced by Susruta (500 B.C.) where pain and stiffness of shoulder joint leads to severely restricted movement of the hand. This problem puts a huge amount of strain on patients interfering productivity of the life.

Apabahuka is a condition caused by vitiated vata dosha, localizes in amsapradesh (shoulder region) that results in the samkocha of sira leading to the manifestation of bahu praspandana haratvam.

Nirukti (Derivative significance) of Apabahuka / Avabahuka
Apabahuka is composed of two words “Apa” and “Bahuka”\(^1\)
The very word Apa means ‘Viyoga’ ‘Vikrutau’ which means separation or dysfunction and the very word ‘Bahu’ meaning the upper limb which is one among the sadangas.

According to Sanskrit literature the word Apabahuka means as bad stiffness and muscle spasm in the arm\(^2\). The prefix ‘Ava’ is used instead of ‘Apa’ of the words Apabahuka. Apabahuka and Avabahuka literally bear the same meaning.

Paribhasha of Apabahuka (Definition)\(^3\)
“Amsadesasthita vayu soshayitvasambandhanam Siraschakuncha tatrastha janayetavavahukam”

Apabhuaka is a disease caused by kupita vata dosa localizing around the amsa pradesa causing the shoshana of amsa sandhis, thereby leading to akunchana of sira at that site and giving rise to bahu praspandana haratvam.

REFERENCES OF APABAHUKA IN VARIOUS TREATISES
Charak Samhita (1000 BC) – A detailed description about Vata is explained in
Sutra sthana and chikitsa sthana of Charak samhita⁴,⁵. In the eighty different nanatmaja vatavyadhi Apabahuka is not mentioned but in the sutra sthana citation of bahusosa is available. In chikitsasthana bahusirsagata vata treatment is mentioned.⁶

**Susruta Samhita (500 BC)**
Apabahuka is mentioned in Susruta samhita⁷ alongwith the samprapti and rupa in nidana sthana. Rakta mokshana and ruksha sweda are cited as treatment of choice for apabahuka.⁸

**Ashtanga Hridaya (400 AD -600 AD)**
In the nidana sthana of Astanga hridaya description of Apabahuka is available.⁹

**Madhava Nidan (900 AD)**
Description of vataja and vata kaphaja types of apabahuka is found in Madhavakara Madhukosha vyakhya.¹⁰

**Adhunik Kala (900 AD to till date)**

**Chakrapanidutta (1100 AD)**
Different effective formulae are mentioned or the disease Apabahuka.¹¹

**Sharangdhar Samhita (1300 AD)**
Apabahuka is mentioned as one of the eighty nanatmaja vatavyadhis.¹²

**Vangasena (1300 AD)**
Description of Apabahuka is available. Vedana has been portrayed as a major symptom.¹³

**Bhavaprakash (1600 AD)**
Apabahuka is mentioned as one of the eighty nanatmaja vatavyadhis.¹⁴

**Bhaisajyaratnavali (1800 AD)**
Some treatment regarding Apabahuka is available.¹⁵

Arunadutta, Dalhana and Gayadas acharya have commented on samprapti, lakshana and chikitsa of Apabahuka in their works.

**AIM AND OBJECTIVES:**
1. To study and understand the pathology of the disease.
2. To analyse the Ayurvedic line of management on the basis of samprapti vighatana of the disease.

**MATERIALS AND METHODS:**
Classical texts and commentaries were studied to understand the underlying pathology of apabahuka and the treatment principle of apabahuka i.e., oushadha and pathya along with do’s and don’ts.

**NIDANA: Ayurvedic Etiopathogenesis:**
No specific Nidana for Apabahuka is mentioned separately. Being one of the vataja nanatmaja vikara Apabahuka holds the same nidana of vatavyadhi in general. All the nidana are subdivided into 1. Aharaja e.g. Ruksha anna , Sheeta anna, Langhana, Katu, kashaya, tikta rasa etc. 2. Viharaja e.g. Ativyayava, Ativyayama, Marmabhighatata etc. 3. Agantuja e.g. Sheeta kala , Aparahana etc.4. Manasika factors e.g. Chinta, Shoka, Krodha etc.

Marmabhighatata is one of the causative factors of the vatavyadhi. According to susruta marmabhighatata to the amsamarmas make the upper extremities stiff and leads to loss of movement capacity which mimics the lakshanas of the disease Apabahuka.¹⁶

Marmabhighatata ( Direct / Indirect trauma) may occur by Ativyayama – Violent exercises, Plavana - causing over exertion, Bharavahana – carrying heavy loads Dukha shayya – Improper postures. Aforementioned etiological factors may lead to the pathological conditions of “Dhatukshaya” or “Margavarana” or both at a time, which in turn cause the provocation and vitiation of vata dosa.

**SAMPRAPTI**
Here indulgence of vataka nidana sevana leads to accumulation of vata došha in the
Amsapradesha where ‘khavaigunya’ has already occurred and leads to dosa dusya sammurchana thus causing the shoshana of the Amsabandhana or sira akunchana that leads to kevala vatajanya Apabahuka. Sometime Dhatu kshaya causes vataprakopa leading to Amsashosha i.e. Dhatukshaya janya Apabahuka takes place. Sometimes aggravated kapha in the sandhi leads to obstruction of vatadosa causing kaphavrita vatajanya Apabahuka.

Samprapti Ghataka
Dosha – vata & kapha
Dushya – sira, snayu, kandara, rasa, rakta, mamsa, asthi
Srotasas – rasa, rakta, asthi, mamsa
Srotodusti - sanga
Sancharasthana – Sira, snayu, kandara
Adhishthana – Amsapradesha
Rogamarga – Bahya & madhyama

Poorva Roopa
In Apabahuka poorva roopa can be taken as a minor symptom of the disease. That surface before the actual manifestation of this disease. Mild or vague shoulder pain, movement restriction, occasional stiffness of the upper extremities might be taken into consideration as the poorva roopa of Apabahuka.

ROOPA
Its cardinal features are:-
1. Bahupraspandihara
2. Amsabandhana shosha
3. Sira Akunchana / Stambha
4. Shoola

Dalhana’s commentary suggests that the praspandana means chalana or movement, which is considered as samanya karma of vyana vata. The word hara means impaired or loss. In the present study ‘bahu praspandana hara’ may be taken up as difficulty or impaired or loss of movement of upper limb. And the function of sandhi like uktshepana, prasarana & akunchana will be affected in Apabahuka. Amsa is also termed as skanda, bahusira, it is one of the Marma. Amsabandhana denotes amssagata shlesha or sira present around the amsapradesha. The shosana of these is termed as amsabandha shosha which is a major lakshana of Apabahuka. And samkochana of the sira around the amsasandhi leads to Apabahuka.

Upashaya And Anupashaya:
Upashaya is an important diagnostic tool especially when all other methods fail to establish the diagnosis of the diseases. Therapeutic trial with ausadha, Anna, vihara can be termed as upashaya. Administration of medicines when produces a negative effect or aggravates the illness is known as Anupashaya.

Upadrava:
Not mentioned in the texts but from practical point of view there may be muscle atrophy around the shoulder, upper part of the arm and severe movement restriction.

SAPEKSHA NIDANA:
For differential diagnosis of the diseases Apabahuka can be elicited through the Table below:

| Apabahuka | Bahu praspandana hara, shoola & stambha |
| Vishwachi | Palm & fingers are affected. Pain starts from the upper arm radiates to forearm & fingers (anguli) |
| Ekanga vata | Weakness with mild touch sensation (ishat sparsha) in the upper limb. |
**Amsa shosha** | **Mamsa kshaya & shosha in amsa pradesh only.**

**SADHYA ASADHYA:** Acharya Susruta counted vatavyadhi as mahavyadhi / mahagada. According to Susruta, if vatavyadhi affected patient develops complication like sunam (edema), suptatva (tactile senselessness), Bhagna (fracture) kampa (tremor) Adhmana (Distension of abdomen with tenderness) and pain in internal organs then the patient, does not survive. According to Ashtanga hridaya, if vatavyadhi is connected with shosha (emaciation), akshepaka, samkoca, stambha, swapana, kampana, ardita, khanja, panguta, khuddavata, sandhi chyuti, pakshaghata, meda majja asthigata vata roga, then these are usually cured with difficulty or are incurable.

Though no specific prognosis is being told about Apabahuka, based upon these if Apabahuka develops shosha (emaciation), samkocha (stiffness of the hand) then it is cured with difficulty. Thus, Apabahuka in the initial stage will become sadhya and kricchrasadhya or asadhya after certain time or period.

**PATHYA APATHYA PATHYA:** Table no.2

<table>
<thead>
<tr>
<th>Rasa</th>
<th>Madhura, Lavana, Amla</th>
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<tbody>
<tr>
<td>Shuka dhanya</td>
<td>Godhuma, Rakta shali</td>
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<tr>
<td>Shamidhanya</td>
<td>Masha, Kulattha</td>
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<tr>
<td>Mamsa Varja</td>
<td>Jangala mamsa, kukkuta, tittira, barhi, chataka</td>
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<tr>
<td>Matsya Varga</td>
<td>Shilindhra, Parvata, Nakra, Gagrara, Khudisha, Shasha</td>
</tr>
<tr>
<td>Saka Varga</td>
<td>Patola, Shigru, Vartaka, Kushmanda, Karavellaka, Mulaka, Tikta, Surana, Tarkari</td>
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<tr>
<td>Phala Varga</td>
<td>Dadima, Parushaka, Badara, Draksha</td>
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<td>Gorasa Varga</td>
<td>Ghrita, Dugdha, Kilata, Dadhi, Kurchika</td>
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<tr>
<td>Anya Dravya</td>
<td>Lasuna, Tambula, Matsuandika, Punarnava, Krishna, Vatsaka, Murdi, Jinaka</td>
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<td>Karma</td>
<td>Swedana</td>
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**APATHYA : Table no.3**

<table>
<thead>
<tr>
<th>Rasa</th>
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<tr>
<td>Anna</td>
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<td>Jala</td>
<td>Tataka, Tatinijala, Pradushta Salila</td>
</tr>
<tr>
<td>Shamidhanya</td>
<td>Mudga, Syameka Curna, Kuruvinda, Kalaya, Canaka</td>
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<tr>
<td>Shaka Varga</td>
<td>Alabu, Ervaru, Vinta</td>
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<tr>
<td>Anya Dravya</td>
<td>Kshudra, Tikta, Nimba</td>
</tr>
<tr>
<td>Vihara &amp; Karma</td>
<td>Vyavaya, Yana, Chinta, Chankramana, Prajagarag, Vegovidharana, Shrama, Langhana, Abhyanga</td>
</tr>
</tbody>
</table>

**PRINCIPLES OF TREATMENT IN AYURVEDA (CHIKITSA SUTRA):**

1. Charaka – Nasya & uttarbhaktika snehapana

2. Ashtanga sangnaha mentions Navana Nasya & snehapana

3. Susruta advices vatayadhi chikitsa except siravyadha

5. Brimhana Nasya is indicated in Apabanuka by Vagbhatta.

So, from the above mentioned treatment schedules it can be concluded that the line of treatment might be like following:

i) Nidana Parivarjana
ii) Abhyanga
iii) Swedana
iv) Uttarbhaktika Snehan
v) Nasya
vi) Samsamana aushadhi

DISCUSSION:
Apabahuka is a disease caused by kupita vata dosa localizing around the amsa pradesha causing the ssoshana of amsasandhis, thereby leading to akunchana of sira at that site and giving rise to bahupraspandana haratwam. In consideration to the ayurvedic etiopathogenesis of the disease it reveals that the vataprapakopaka etiology in general are mainly responsible for the genesis of the disease. The specific etiology like weight lifting, excessive movements of the hands, Dukkha shayya (mal sleeping posture) particularly hand under the head during sleeping are the main causative factors. Aggravate vata spreads all over the body (prasara) but specially at the area of amsasandhi (sthanasamsraya) due to the prior ‘khavaigunyaa’ and leads to dosa dusya sammurchana at the said place caused by abhighata or other etiologies mentioned earlier.

In Ayurveda there are several medications as well as purificatory therapy (shodhana) and rasayana therapy are indicated in vata predominant diseases in general. As the disease is purely caused by affliction of vayu and the symptoms come due to the aggravation of vayu, so vatanasak therapy may be advocated as a remedy of the same. The reduction of flexion, extension, internal rotation, external rotation and abduction are the usual findings and as pain and stiffness are the intensive features, so aims and objective of the treatment is to provide relief to the patient by reducing the complaints. The line of management in the ayurvedic therapy is Brumhana nasya, paschadbhakta ghrutapana, swedana, abhyanga etc.

Sneha dravya and brumhaniya dravya having guru, snigdha, sara, manda, drava properties which are called as posakaguna, may pacify vata by its poshaka and snehana guna. As Apabahuka takes place in shoulder region (amsasandhi) so vyana vayu is mainly responsible for the genesis of the disease. So nasyakarma has been taken into consideration. Aggravated vayu dried up the slesmak kapha of amsandhi and leads to apabahuka. In consideration gunakarmayog snehanaguna and nasyakarma could pacify vata by reducing rukshaguna. So, brumhaniya vatanasak dravya can cure the disease apavahuka in its application through nasal route.

CONCLUSION:
Aggravated vata spreads all over the body (prasara), but it takes place specially at the area of Amsasandhi(sthanasamsraya) due to the prior “khavaigunya” and leads to dosa dusya sammurchana at the said place caused by abhighata or other etiologies.

- Any snehaika taila is a potent vatanashaka and rasayana dravya that have the property of pacifying vatika disorders.
- Nasya karma specially pratimarsa nasya with snehaika taila could cure apabahuka in a dose of 2 drops twice into each nostril.
REFERENCES:

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