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Case Report

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# EFFECT OF VIDDHA KARMA IN MANAGEMENT OF AVABAHUKA (FROZEN SHOULDER) - A CASE STUDY

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## **ABSTRACT**

According to Ayurveda, the functioning of the mind and nerves is dependent upon Vayu or Vata. Vayu (Vata) is most important, because it controls all types of sensations and motor actions – i.e. Sangnavaha and chestavaha Karmas, which are the functions of the nerves – controlled by the mind. In short Vayu is responsible for all Neuromuscular and mind activities. Vata aggravated brings about contractions of the Siras (nerves) of the arm and produce the disease Avabahuka (frozen shoulder) then occurs pain and loss of movement of the arm. Modern medicine has NSAIDs, steroids for such condition but it is costly, have much side effects and gives temporary relief. A 55 years female arrived at OPD, with main complaints of left shoulder pain, stiffness, restricted movements, associated with disturbed sleep due to the pain since 15 days. Siravedha is indicated for treatment purpose, but Suchivedhana was done which is one of the forms of Siravedha as it indicated where sira is not clearly visible. It is suggested commonly for instant pain relief, safe and cost effective. Hence, this case study was carried out using Suchivedhana karma and got results in minimal time and cost-effective management.

KEYWORDS: Ayurveda, Frozen shoulder, Avabahuka, Suchivedha, Viddha karma.

## INTRODUCTION

Shoulder pain is a common complaint in both genders over the age of 40, and is most often due to degenerative disease of tendons in the rotator cuff. Frozen shoulder present with upper arm pain that can progress over 4-10 weeks before subsiding over a similar time course. According to modern treatment anti-inflammatory drugs (NSAIDs) and steroidal injection at local site are given for reliving the symptoms of frozen shoulder syndrome. [1]

In general population prevalence rate is about 3%-5% and up to 20% in those with diabetes. It is peak in between the ages of 40-60 years and is more common in women. [2]

Avabahuka is considered to be a disease that usually affects the shoulder joint (amsa sandhi) and is produced by the Vata dosha. Even though the term Avabahuka is not mentioned in the nanatmaja Vata vyadhi, Acharya Sushruta and others have considered Avabahuka as a Vata vyadhi. [3]

It is mainly caused by vitiation of Vyana Vata vitiation

and gets *Sthana Samsraya* in the *Amsa Sandhi* (shoulder joint). There it does the *Shoshana* of *Shleshaka Kapha*, *Mamsa*, *Sira*, *Snayu*, leading to *Bahupraspandita Haratwa* (restricted movements of affected shoulder), *Shoola* (pain), *Sthambha* (stiffness). [4]

Ayurveda (the science of life) has described effective remedies for such illness such as Nasya, Uttarabhakthika Snehapana, Swedana, Shamanoushadies. [5] Acharya Sushruta talked about the treatment of Avabahuka in Shareersthana. In this, they described Siravedha but in Chikitsasthan they excluded Siravedha for Vatavyadhi treatment. Hence, we used Suchivedha, modified form of Siravedha in Avabahuka. [6] This case report highlighted the effect of Viddha Karma in treating a patient having Avabahuka.

# **CASE STUDY**

**Centre of study:** OPD of Kayachikitsa Department, Chandrashekhar Singh Ayurved Sansthan, Prayagraj, Uttar Pradesh.

Case Report: A female patient of age 55 years came to OPD of Kayachikitsa Department, Chandrashekhar

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Singh Ayurved Sansthan, Prayagraj, Uttar Pradesh.

With chief complaints since 15 days-

- 1) Vama Amsa sandhi shoola (pain in left shoulder joint)
- 2) Vama Amsa sandhi graha (left Shoulder stiffness)
- 3) Bahupraspandita hara (Restriction in shoulder joint range of motion).

**History of Present illness:** Patient was apparently normal before 15 days gradually she developed pain in the left shoulder joint, restricted movements, associated with disturbed sleep due to pain. She was unable to do movements of same joint which caused her to limit the daily performance. For these complaints she took allopathic medicine which has given her relief for few days. Later on, complaints of pain, restricted movements reoccurred which made her to visit the hospital. Treatment started on 24/02/2025 to 26/02/2025.

Aggravating factors: Work and strenuous activities.

**History of past illness:** She is a known case of Hypertension, under regular medications, but there was no any past history of Diabetes mellitus or thyroid illness.

Family history: No member of family had such illness.

Personal history

Diet – Vegetarian Micturition- 4-5 times in a day 0-2 times in night Appetite – Moderate

Sleep – Reduced Bowel – Normal Addiction – No any

# On examination

Pulse – 94/minutes BP – 150/90 mmHg Weight - 65 kg Icterus-Not Found Pallor- Not found Lymphadenopathy- Not found.

## Systemic examination

RS-AEBSE, bilateral clear CVS- S1S2 normal CNS – conscious, oriented.

## Local examination

Muscle tone: Normal

Deformity Left shoulder joint- Absent Muscular atrophyabsent

Tenderness- severe

Local temperature- Normal

Restriction of movements with severe pain Restriction

range of Movements: Abduction-  $60^{0}$ Flexion-  $45^{0}$ 

Extension-  $40^{\circ}$ 

Table 1: Diagnosis of Avabahuka.

S. No.	Signs and Symptoms	
1.	Amsa sandhi shoola (Pain - in shoulder region)	Present
2.	Amsa sandhi graha (Shoulder stiffness)	Present
	Bahupraspandita hara (Restriction in shoulder joint range of motion)	Present
4.	Amsa Sosha (muscular atrophy)	Absent

## Table 2: Assessment Criteria.

S. No.	Signs and Symptoms	
	Amsa sandhi shoola (Pain in	0-absent 1-mild
	shoulder region)	2-moderate 3-severe
	Amsa sandhi graha (Shoulder	0-absent 1-mild
	stiffness)	2-moderate 3-severe
3.		0-absent 1-mild
	in shoulder joint range of motion)	2-moderate 3-severe
		0-absent 1-mild
		2-moderate 3-severe

# Investigations

- Hb- 12.7gm%
- WBC- 6800/cu mm
- RBC- 4800 millions/mm3
- Blood sugar level (random)-115 mg/dl
- HbsAg- Non-Reactive
- HIV- Non-Reactive
- RA Factor-Normal

- ESR- 13 mm/hr
- X ray (AP) Left Shoulder joint- Normal.

## Management

Suchivedhana karma (Viddha karma) was done as per following.

## **Purvakarma** (Pre-Operative)

Informed written consent was taken. 6 points on left

shoulder was marked having more tenderness (Cephalic Vein at midpoint of arm) and 3 points along the supraspinatus muscle. This area was to be dried with the help of sterile gauze piece.

## **Pradhana karma** (Operative)

By using *Suchi* (Sterile Disposable Needle No. 26), *Viddhakarm*a was done on the marked points in *Ardha-Yava Matra* (Depth 6-8 mm).

## Paschata karma

Then local area cleaned, again with dry gauze. Needle was discarded and no need of dressing needed.

Table no. 3.

S. No.	Signs and Symptoms	Grades before treatment	grades after treatment
1	Amsa sandhi shoola	Present (grade 3)	Reduced (grade1)
2	Amsa sandhi graha	Present (grade 3)	Reduced (grade 1)
3	Bahupraspandita hara	Present (grade 3)	Relieved (grade 1)
	Angles Abduction	$60^{0}$	$150^{0}$
	Flexion	45 <sup>0</sup>	$100^{0}$
	Extension	$40^{0}$	$60^{0}$
4	Amsa Sosha	Absent	Absent

## DISCUSSION

In this study, we have treated a patient who had left shoulder pain related to numbness and stiffness. According to Ayurveda, different treatment methods are used for the treatment of this condition, which are: Bheshaja (internal medicine), Snehana (oleation therapy), Swedana (sudation therapy), Sira Vedhana (bloodletting), Agni Karma (cauterization) and Basti Karma (medicated enema). [7] Bloodletting by doing the Viddha Karma was the principal procedure which was applied in this patient's treatment. Viddha Karma is a derived treatment procedure from Sira Vedhana, and in this study, we have conducted the Viddha Karma to remove a small amount of blood (5-10 ml) by pricking it with a dry needle. The theory behind Viddha Karma on tender points indicates that central fibers are primarily responsible for transmitting pain impulses. Moreover, this is similar to counter-irritation or hyperstimulation techniques such as locally applied pressure, fine needle combination with thermal stimulation (Moxibustion), piercing deeper tissues (Delchi), and Acupuncture. In the Viddha Karma, sterile procedurespecific points may release the channels of obstructed Vata by Shonitha and trigger the reduction of pain by subsiding obstruction. [8] After doing three settings of pricking the vein, the patient got more relief for symptoms of pain, stiffness of shoulder joint, and movement.

## **CONCLUSION**

This case study demonstrated that *Ayurvedic* management of *Viddha Karma* seems very effective for the treatment of *Avabahuka* i.e., frozen shoulder and this attempt was made to provide safe and effective treatment to the patient within short period. From the above case, it can be said that *Avabahuka* i.e., frozen shoulder can be successfully managed through *Viddha Karma* along with

**Duration:** 3 Settings were done, One per day, consecutively.

## OBSERVATIONS AND RESULTS

Assessment before and after treatment. Results are mentioned in Table 3.

Shamanoushadi.

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