

A CLINICAL STUDY TO EVALUATE EFFECT OF NASYA WITH SHUDHABALA TAILA IN APABAHUKA w.s.r. to FROZEN SHOULDER

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ABSTRACT

Nasya Karma is a treatment procedure in which the medicine is administered through nostrils. As nose is the gateway of head the medicines administered through it reaches head and spreads through the channels and cures the diseases above shoulder and thus it is specially indicated in *Urdwajathrugata Rogas*. In *Phalasaruthi* it is mentioned that the skin, shoulder, neck, face and chest become developed. *Apabahuka* is a *Vatavyadhi* in which the vitiated *Vata* lodges in *Amsa pradesha* leading to *shosha* of muscles of that region producing symptoms like *Shoola*, *Bhahupraspandithahara*, which disturbs the day to day activities of the individual. Main treatment modality mentioned for *Apabahuka* is *Nasya* and *Uttarabhaktika Snehapana*. *Apabahuka* is included among the indications of *Bruhmana Nasya*. Considering the facts, present study was conducted to assess the efficacy of *Nasya* with *Shudhabala Taila* in *Apabahuka*. 30 patients of *Apabahuka* were taken in an open label single group clinical study for *nasya* with *Shudhabala Taila*. Results of this study showed that *Nasya* with *Shudhabala Taila* was effective in relieving the symptoms of *Apabahuka* and found statistically significant.

Keywords: *Nasya Karma*, *Bruhmana Nasya*, *Apabahuka*, *Shudhabala Taila*, Frozen Shoulder.

INTRODUCTION

Nasya Karma is one of the therapies which is an important *Chikitsa* for *Urdwajatru Rogas*¹. In *Nasya Phalasaruthi* it is mentioned that the skin, shoulders, neck, face and chest become thick, well developed and bright; the body parts and the sense organs become strong and disappearance of grey hairs will be

obtained by person who are habituated to nasal medication².

Among the category of diseases our *Acharyas* have considered *Vatavyadhi* as an important entity. *Apabahuka* is one among those *Vatavyadhi* where vitiated *Vata Dosha* lodges in *Amsa Pradesha* and leads

to *Akunjana* of *Siras* and *Shoshana* of *Amsabandana*³. In *Madhava Nidana*, two conditions have been mentioned *Amsasosha* and *Apabahuka*. *Amsasosha* may be considered as a preliminary stage of disease where loss or dryness of *Sleshaka Kapha* occurs and symptoms like *Shoola*, restricted movements are manifested.

Apabahuka in Western medical science can be correlated to frozen shoulder. It is common but ill understood affliction of Gleno-humeral joint without the radiographic changes: characterised by pain and restriction of all the shoulder movements. It is often said that the pain is often severe enough to disturb the sleep⁴.

Chikitsa Sutra mainly includes *Nasya* and *Uttara-baktika Snehapana*⁵. *Shudhabala Taila*⁶ which contains *Balamoola*, *Ksheera* and *Tila Taila* as ingredients are having properties of *Vatahara* and *Balya*⁷ which can act as *Bruhmana* over the *Shoshana* of *Amsa Bandana*. Therefore this study is undertaken to evaluate whether *Shudhabala Taila Nasya* is effective in the management of *Apabahuka*.

OBJECTIVES:

To evaluate the effect of *Nasya* with *Shudhabala Taila* in the management of *Apabahuka*

MATERIALS AND METHODS:

Clinical Study

30 Patients who fulfil the inclusion criteria in the duration of study period were selected. Each patient was subjected to *Nasya Karma* with *Shudhabala Taila*.

- Duration – 7 days
- *Matra* – 8 *bindus* in each nostril in continuous flow (*Avichinnadhara*)

Diagnostic Criteria

Clinical symptoms of *Apabahuka* like

- *Amsasandhi Shoola*
- *Amsasandhi Stabdatha*
- *Bahupraspandithahara*

Inclusion Criteria

Patients with *Apabahuka* of either sex and age group of 20-60 years were taken for the study irrespective of caste, religion etc.

Exclusion Criteria

- Patients suffering from any other local shoulder pathology, dislocation and systemic disorders which would interfere with the present study.
- Pregnant and Lactating mothers.

Intervention

30 Patients who fulfil the inclusion criteria in the duration of study period were selected. Each patient was subjected to *Nasya Karma* with *Shudhabala Taila*.

- Duration – 7 days
- *Matra* – 8 *bindus* in each nostril in continuous flow (*Avichinnadhara*)

Procedure

The whole procedure was under three steps, *Purva*, *Pradhana* and *Pashchat Karma*.

Purva Karma

Patients were instructed not to suppress the natural urges and go through the normal routines. Patients were intimated, not to take any food immediately before taking *Nasya Karma*. Then, patients were taken to a comfortable room, devoid of dust, extreme breeze and sunlight. *Abhyanga* is done over *Jatrurwa Pradesha* with *Moorchitha Tila Taila*, followed by *Bashpa Sweda*. Care for Patient's eyes was taken by closing with gauze.

Pradhana Karma

Patients were made to lie down on the table in supine position with legs slightly raised and head slightly lowered. Eyes of the patients were covered with gauze, then the *Sudhabala Taila*, which was slightly warmed with the help of hot water, was taken in *Gokarna* and 8 *bindhu* of *Taila* was instilled into each nostril. The other nostril was closed while administering the medicine. The medicine was instilled slowly as "*Avichinnadhara*" i.e as a continuous stream. The same procedure is repeated in either of the nostrils and care was taken not to shake the

head during the procedure. After instilling, soles, neck, palms, ears etc. will be massaged mildly and then patients were asked to turn to sides and spit out the phlegm. After the administration of the medicine, patients were advised not to swallow the medicine but should spit it out. It was done till the smell and taste of the medicine disappears. Then, the patients were allowed to relax in same posture for 100 *Matra Kala* without going to sleep.

Paschat Karma

Dhumapana with *Haridra Choorna* and *Kavala* with *Sukoshna Jala* were given to the patient. After the *Nasya Karma*, Patients were advised to Stay in windless place, Drink lukewarm water, Avoid Dust, Avoid Smoke, Avoid Sun shine, Avoid Anger, Avoid *Divaswapna*.

Assessment Criteria

The assessment is based on the effect of the therapies and will be given suitable scores by application of clinical tools, *Samyak Lakshanas* of *Nasya*, changes in signs and symptoms of *Apabahuka*. Subjective parameters like *Amsasandhi Shoola*, *Amsasandhi Stabdhattha*, Tenderness and objective parameters like range of motion (ROM) including Abduction, External Rotation, Flexion, Extension were assessed by using Goniometer.

Grades of Assessment Parameters

Subjective Parameters

1) Amsasandhi Shoola

- 00-No pain at all
- 01-Mild pain, can do strenuous work with difficulty
- 02-Moderate pain can do normal work with support
- 03-Severe pain, unable to do any work at all

2) Amsasandhi Stabdhattha

- 00-No stiffness
- 01-Mild, has difficulty in moving the joints without support
- 02-Moderate, Has difficulty in moving, can lift only with support
- 03-Severe, unable to lift

Objective Parameters

1) Tenderness

- 00: No tenderness
- 01: The patient says the joint is tender
- 02: The patient winces with pain
- 03: The patient winces and withdraws the affected part
- 04: The patient does not allow the joint to be touched

RANGE OF MOVEMENTS (ROM)

1) ABDUCTION

- Up to 90° - 00
- 60° - 01
- 30° - 02
- Cannot abduct - 03

2) EXTERNAL ROTATION

- Up to 90° - 00
- 60° - 01
- 30° - 02
- Cannot rotate externally - 03

3) FLEXION

- Up to 90° - 00
- 60° - 01
- 30° - 02
- Cannot flex - 03

4) EXTENSION

- Up to 90° - 00
- 60° - 01
- 30° - 02
- Cannot extend - 03

STATISTICAL EVALUATION

Statistical analysis was carried out using the graph pad In Stat Software. Test was paired 't' test. Mean score BT, AT and FU, SD, SEM, d, % of relief and 't' was noted, After obtaining 't' value the corresponding 'P' value against particular degree of freedom was noted on the Table of 't'. P value < 0.05 was considered as statistically significant, P < 0.01 very significant, P < 0.001 and P < 0.0001 was considered as extremely significant. P value > 0.05 was considered as statistically insignificant.

OBSERVATIONS AND RESULT**OBSERVATIONS****Table 1:** Showing the Demographic Data

Parameters	Maximum Incidence	No: of Patients
Age	41-50	11
Sex	Male	16
Socio-Economic Status	Upper Middle	13
Occupation	Professional	11
Duration of Illness	1-3 Years	15
Affected Side	Left	14
Mode of Onset	Gradual	22
Sleep	Disturbed	20
<i>Kosta</i>	<i>Madhyama</i>	18
<i>Agni</i>	<i>Vishama</i>	18
<i>Prakruti</i>	<i>Vata Kapha</i>	15
<i>Dosha</i>	<i>Vata Kapha</i>	16
<i>Satwa</i>	<i>Madhyama</i>	14
<i>Satmya</i>	<i>Madyama</i>	20
<i>Lakshana of Nasya</i>	<i>Samyak</i>	23

RESULTS:

Results were obtained within the group and the data observed in BT (On 1st Day), AT (On 8th Day) and FU (On 21st Day) are compared by

using Paired 't' test and the effect of treatment is analyzed in each subjective and objective parameters. Statistical analysis was done using the graph pad In Stat software.

Subjective parameters:**Table 2:** Showing effect on Subjective parameters

Parameters		Mean	Diff d	Paired t				Significance
				SD	SEM	t value	p value	
Shoola	BT	2.23						
	AT	0.96	1.27	0.55	0.10	13.32	<0.0001	Highly Significant
	FU	0.40	1.83	0.49	0.09	16.95	<0.0001	Highly Significant
Stabdatha	BT	2.23						
	AT	1.06	1.17	0.58	0.10	13.85	<0.0001	Highly Significant
	FU	0.46	1.77	0.10	0.09	19.19	<0.0001	Highly Significant

Objective Parameters**Table 3:** Showing effect on Objective parameters

Parameters		Mean	Diff d	Paired t				Significance
				SD	SEM	t Value	P Value	
TENDERNESS	BT	2.23						
	AT	0.96	1.27	0.55	0.10	13.32	<0.0001	Highly Significant
	FU	0.40	1.83	0.49	0.09	16.95	<0.0001	Highly Significant
ABDUCTION	BT	2.23						

	AT	1.06	1.17	0.58	0.10	13.85	<0.0001	Highly Significant
	FU	0.46	1.77	0.10	0.09	19.19	<0.0001	Highly Significant
EXTERNAL ROTATION	BT	2.40						
	AT	1.03	1.37	0.61	0.11	12.17	<0.0001	Highly Significant
	FU	0.40	2	0.50	0.09	15.76	<0.0001	Highly Significant
FLEXION	BT	2.23						
	AT	1.17	1.06	0.53	0.10	16	<0.0001	Highly Significant
	FU	0.43	1.50	0.50	0.09	20.36	<0.0001	Highly Significant
EXTENSION	BT	2.23						
	AT	1.20	1.03	0.55	0.10	13.67	<0.0001	Highly Significant
	FU	0.47	1.76	0.51	0.09	19.19	<0.0001	Highly Significant

SD- Standard Deviation, SEM- Standard Error Mean, t-Test of significance, P- Probability, >- More than, <- Less than, N- Sample size, %- Percentage, Diff d- Difference, BT- Before Treatment, AT- After Treatment, FU- Follow Up.

Probable mode of action

Mode of Action of Nasya

Nasa is the gateway to *Shiras*. *Shudhabala Taila* administered through the nose reaches *Sringataka Marma* which is present in the middle of *Siras* which give nourishment to *Ghrana*, *Srotra*, *Akshi* and *Jihwa*. *Taila* spreads in the *Moordha* and reaches *Siramukha* of *Netra*, *Karna* and *Kanda* and removes the morbid *Doshas* present in *Urdwa Jatru Pradesha* and expels them from *Uttamanga*.

As the procedure of *Nasya* involves *Moorchitha Tila Taila Abhyanga* over *Urdwa Jatru Pradesha* and *Bashpa Sveda* it helps in *Vatashamana* and *Dosha Vilayana*. *Nasya* with *Shudhabala Taila* provides nourishment to the *Shiras* and *Urdwa Jatru Pradesha* there by alleviates the vitiated *Vata*. Hence, it is useful in *Vatajanya* ailments including *Apabahuka*.

Mode of Action of Shudhabala Taila

Shudhabala Taila having ingredients as *Bala Moola*, *Ksheera* and *Tila Taila* has the properties like *Rasayana*, *Indriyaprasadana*, *Jeevana*, *Brumhana*, *Vata Shamana*. *Bala Moola* (*Sida cordifolia*) is having the qualities like *Guru*, *Snigdha*, *Pichchila* and is *Vata Shamaka*. *Tila Taila* (*Sesamum indicum*) is considered best among the oils. It is having the qualities like *Snigdha*, *Ushna*. *Taila* has got both the action of *Brumhana* and *Karshana*. By these proper-

ties *Taila* will help in *Brumhana* in *Vataja* condition of *Apabahuka*, and also *Karshana* if it is *Vata Kaphaja*. *Shudhabala Taila* acts as an anti-inflammatory and provides nourishment and there by helps for the recovery.

DISCUSSION

Indulgence in various etiological factors leads to the accumulation of the *Vata Dosha* in the *Amsapradesha* and cause the *Shoshana* of the *Amsabandha* and *Siraakunchana*, which in turn leads to manifestation of *Kevala Vataja Apabahuka*. Further *Kshaya* of the *Dhatu* causes the *Prakopa* of the *Vata* and then leads to the *Amsa Shosha*.

The lipid contents of the *Shudhabala Taila* may pass through the blood-brain barrier easily due to their transport. Some of the active principles may reach certain levels in the nervous system where they can exert their *Vataghna* property. *Shudhabala Taila* on its nasal administration reaches different *Shirogata Indriyas* providing *Brumhana* and *Vatashamana* effect and there by relieving the symptoms of *Apabahuka*.

CONCLUSION

Nasya Karma is very easy and effective procedure which can be adopted in treatment of *Apabahuka*. *Shudhabala Taila Nasya* can be effectively and safely administered without any adverse effect. *Nasya* with *Shudhabala Taila* is cost effective. *Shudhabala Taila* having *Balya*, *Vatahara*,

Bruhmana properties is very much effective in treatment of *Apabahuka* where there is *Shoshana* of *Amsa Bandana*. So it can be concluded that *Nasya* with *Shudhabala Taila* can be used as the treatment modality of choice in the management of *Apabahuka*. Treatment at O.P.D level may also be considered depending on convenience of patient but strict *Pathya* should be followed.

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