

EUROPEAN JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.ejpmr.com

Review Article
ISSN (O): 2394-3211
ISSN (P): 3051-2573

A CRITICAL REVIEW OF LITERATURE ON APABAHUKA WITH SPECIAL REFERENCE TO FROZEN SHOULDER

1*Dr. Krushna Shivshankar Shinde, 2Dr. Sarthak Prakash Pawar, 3Dr. Vaishali Dhotre

¹Assistant Professor in the Department of Shalyatantra at Aditya Ayurved College and Research Centre, Beed. ²Assistant Professor in the Department of Shalyatantra at Saptshrungi Ayurved College and Hospital, Nashik.

³Assistant Professor in the Department of Kaumarbhritya at Aditya Ayurved College and Research Centre, Beed.



*Corresponding Author: Dr. Krushna Shivshankar Shinde

Assistant Professor in the Department of Shalyatantra at Aditya Ayurved College and Research Centre, Beed.

DOI: https://doi.org/10.5281/zenodo.17275423

Article Received on 17/08/2025

Article Revised on 07/09/2025

Article Accepted on 27/09/2025

INTRODUCTION

Apabahuka is one such disease that hampers the day-to-day activity of an individual. The fact that Vata vyadhi is one among the Ashta maha gada, is itself explanatory, with regard to the consequences caused by Apabahuka. Even though a definite factor responsible for the manifestation of this disease is not mentioned, a set of etiological factors can be interpreted. On analyzing the etiopathology, it may be interpreted that the disease Apabahuka manifests due to the depletion of tissue elements (dhatu kshaya) as well as Samsrushta dosha.

The knowledge of Ayurveda has been passed down to us in sootras or small phrases and the wisdom they contain is to be unlocked by the enquiring mind. The knowledge contained in it deals with the nature, scope and purpose of life. It embraces both the meta-physical and physical, health and disease, happiness and sorrow, pain and pleasure. It defines life as the expression of cosmic consciousness as exemplified by the entire sphere of creation. Stated simply, the purpose of life is to know or realize the creator and to express this divinity in one's daily life.

Generally, in the body vata is considered as a chief factor for physiological maintenance. So factors provoking it results in instantaneous manifestation of diseases, which can prove even fatal. There fore vataja nanatmaja vyadhis have utmost importance than the vyadhis produced by other two doshas. Contradictory approaches to pacify this vitiated state have to be resorted to maintain the equilibrium. In the modern point of view under vata vyadhi, the diseases involving neurological, musculo-skeletal, psychosomatic and gastro-intestinal system disorder can be considered. It indicates the wideranging involvement of vata in various systems of body.

Economy of country relies on its work force. Apabahuka is one of such disease which hampers the day to day activity of an individual. The fact that Vata vyadhi is one amongst the asta-maha gada makes it self-explanatory regarding the consequences caused by Apabahuka. Even though a definite factor responsible for the manifestation of this disease is not mentioned, however a set of etiological factors can be interpreted. On analyzing etio-

pathology, it may be interpreted that the disease Apabahuka manifest due to the dhatu kshaya as well as samsrusta dosha.

Apabahuka is considered as a disease that affects usually the amsa sandhi and is produced by the vata dosha. Even though the term Apabahuka is not mentioned in the nanatmaja vata vyadhi, Acharya Susruta and others have considered Apabahuka as a vata vyadhi. In Madhava nidana two conditions of the disease has been mentioned - Amsa shosha and Apabahuka. Amsa shosha can be considered as the preliminary stage of the disease where loss or dryness of Sleshaka kapha from amsa sandhi occurs. In the next stage i.e., Apabahuka, due to the loss of shleshaka kapha symptoms like shoola during movement, restricted movement etc are manifested. While commenting on these in Madhukosha teeka it is mentioned that Amsa shosha is produced by dhatu kshaya i.e., sudha vata janya and Apabahuka is vata kapha janya. Considering these facts an attempt is made to study the disease Apabahuka in detail and to counter act the disease process by adopting suitable therapies.

DISEASE REVIEW NIRUKTI AND PARIBHASHA

Before proceeding to Apabahuka it is better to deal with the nirukti and paribhasha of Vata vyadhi as it is one of the vata vyadhi –

"Vikrita vata janito asadharana vyadhi vata vyadhi" Extra- ordinary disease resulting from vikrita vata is known as vata vyadhi. Apabahuka comprises of two words 'Apa' and 'Bahuka'.

APA means

- Viyoga, vikratou Viyogaou means dysfunction, separation
- Upasarga vishesha, Bhramsa, Vairoopyam, Tyaga iti durgadasa
- Apakristarthah, viyoga, viparyaya, vikruti, chourya iti medina
- Bhramsa apa shabdasyat, that is dislocation

'Ava' used as alternate for 'Apa' in some texts gives the following meaning.

- a) 'Ava' as a prefix to verbs and verbal norms that express of, away or down. Thus in the present context the 'Ava' or 'Apa' can be taken as deterioration or dysfunction. The word 'Bahuka' means,
- a) Bahuka Muscular gender
- b) Bahu Bahu prabahu cha koorparasya urdhwadha bhagou iti ... (Vishnupurana)

Thus Apabahuka can be defined as,

- 1. Bahustambho Apabahuka
- 2. Bad arm, stiffness in the arm joint

To summarize the above discussion and considering the relevant clinical feature, the term Avabahuka or Apabahuka would mean "dysfunction of bahu (stiffness or disability in the arm) i.e, bahu praspanditahara.

DISCUSSION

NIDANA

The factor, which is responsible for the causation of disease, is nidana.

Proper awareness about the factors responsible for the disease becomes very helpful in determining the line of treatment, prognosis and diagnosis.

- **Aharaja**: Katu, tikta, kashaya rasas, laghu sukshma, sheeta guna causes vitiation of vata.
- ➡ Viharaja: These either directly or indirectly causes abhigata to the marma present in the amsa desha resulting in Apabahuka.
- ♣ Vyayama: Those exercises directly or indirectly influencing the shoulder or amsa desha should be considered here.
- Plavana: Results in vata kopa due to over exertion in sandhi
- **♣ Bharavahana**: Carrying heavy loads over shoulder will cause vata prakopa and deformity in the joint capsule. This leads to disease formation.
- **Balawat Vigraha**: Wrestling with a person who is more powerful will cause agahata to amsapradesha and vataparkopa takes place. This manifests the disease.
- Dukha Shayya: Improper posture that gives more and more pressure over the amsasandhi will disturb the muscular integrity and provokes vata. This manifests the disease. Other viharaja nidana told in vatavyadhi context may influence the condition by provocating vatadosha. To summarize, the above said nidanas mentioned under vihara especially involving amsa sandhi and marmabhighata to amsa leads to the development of Apabahuka.

SAMPRAPTI GHATAKA

- Dosha Vata (vyana vata) Kapha (sleshaka)
- ♣ Dushya Mamsa, meda, sira, snayu, kandara,
- Srotas Mamsavaha, medovaha, astivaha, majjavaha.
- Srotodustiprakara Sanga
- ♣ Rogamarga Madhyama
- Adhisthana Amsadesha
- ♣ Vyaktasthana Bahu
- Vyadhi swabhava Chirakari

POORVAROOPA

Before the actual onset of disease, some symptoms develop and they give clues about the forth coming disease. Such symptoms are called prodromal symptoms or poorva roopa. Pathological process of every disease starts before the clinical manifestations of a disease. Due to the on going pathological process certain features will develop, though a complete clinical picture is not manifested In Ayurveda, these lakshanas were considered as poorva roopa. In the present context the poorva roopa of Apabahuka which is a vata vyadhi may be "Avyaktam laxanam tesham poorvaroopamiti smrutam"

• ROOPA

The fifth stage of kriya kala is the vyakta stage, where the vaguely appeared signs and symptoms of the disease seen in poorva roopa or 4th stage will be exhibited in a fully manifested form and this particular stage is called roopa. [34] Here in this stage, the dosa-dooshaya sammoorchana gets completed with the manifestation of all the lakshanas of vyadhi including the the pratyatma linga, which are essential for the diagnosis of the disease.

As the name itself indicates, in "Apabahuka," the term itself is self explanatory. Mainly it gives rise to local symptoms as –

- Bahupraspandita harana
- Shoola
- Amsashoshana
 Bahupraspandita hara: The term bahupraspandita hara has three words.
- Bahu upper limb,
- Praspandana praspandana shareerasya chalanam idam vyanasya karmam. Means movement or chalana, considered to be a normal function of vyana vata.

Shoola or Vedana

Shoola is one among the symptom in Apabahuka. In Anjana nidana it is told that "Amoola eka bahoschet vyathasyath apabahukaha"

The Amsa marma being a snayu marma, when it is injured or get afflicted by vata will produce shoola, because Shoola is one of the symptoms of snayu gata vata. Recent Ayurvedic text like Chikitsa sara sangraha clearly mentions about Vedana, as a predominant lakshana of Apabahuka, along with other lakshanas. It is

to be noted that vata is responsible for the production of

Thus, pain is considered as a prominent symptom in this study.

Amsa shosha

Amsa shosha means drying up of the kapha in amsa pradesha or atrophy caused by lack of nutrition. From the reference given by the Acharya Susruta, it can be interpreted that Amsa shosha also occurs as a lakshana of Apabahuka. This can be considered as muscle wasting around the joint due to lack of nourishment and disuse atrophy. It can also be interpreted from the reference by Sushruta that Amsa shosha can lead to Apabahuka.

There are some clinical conditions of modern science, which may be compared with that of Apabahuka. These may be categorized as follows.

- Periarthritis or frozen shoulder or adhesive capsulitis.
- ii) Incomplete rupture of supraspinatus tendon
- iii) Lesions of the rotatory cuff
- iv) Sub acromial or subdeltoid bursitis
- v) Sub coracoid bursitis
- vi) Painful shoulder
- vii) Bicipital tendinitis
- viii) Osteo arthritis of shoulder joint
- ix) Brachial plexes neuropathies.

UPASHAYA AND ANUPASHAYA

In the process of investigating a disease, occasionally upashaya and anupashaya method i.e., therapeutic trials with certain diet, drugs and viharas are also considered as a diagnostic tool in some cases.

In case of Apabahuka, use of shoulder joint during physical work provokes the problem. On the other hand hot fomentation and rest gives relief. So the factors aggravating vata are said to be Anuupashaya and pacifying factors of vata are Upashaya.

UPADRAVA

The occurrence of another disorder on the wake of a primary disease is termed as upadrava. Sushruta has upadravas of Mahagadas including vatavyadhis. They are Pranakshaya, Mamsakshaya, Jwara, Atisara, Murcha, Trisna, Hikka, Chardi and Swasa. He further specifies the upadravas for vatavyadhis as Shosha, Kampa, Supta twacha, Adhmana, Bhanga and Antah ruja. According to Dalhana 'Pranakshaya' means 'Utsahakshaya', mamsakshaya means Upachayakshaya, Supta tvacha means 'Badhira twacha' Bhanga means Vedanatrutitam and Antah ruja means Gambhira vedana.

Among various musculo-skeletal disorders of the shoulder joint explained earlier and even Brachial plexus neuropathies, if left untreated may result into local

muscular atrophy. This may cause permanent disability of that particular arm.

SAPEKSHA NIDANA

There are many diseases having close resemblance. After the complete manifestation of disease, it should be differentiated from its allied one. This is being done based on the cardinal features of the disease. In the present context, same thing is discussed. Apabahuka is to be differentiated from the following disease conditions that affect the upper limb.

- Vishwachi
- Amsa shosha
- Ekanga vata

SADHYASADHYATA

After the diagnosis and before starting the treatment it becomes essential to know the prognosis of a disease. Next few paragraphs will explain about the sadhyasadhyata of Apabahuka.

The sadhyasahdyata of Apabahuka is not mentioned anywhere in the classics. Even the recent scholars of Ayurveda have not mentioned about its prognosis. But however, following points are necessary to be considered while dealing with prognosis of Apabahuka.

As Apabahuka is considered as Vatavyadhi which is a 'Maharoga' inspite of effective treatment, will not yield results. when it is associated balamamsakshaya

Yogaratnakara says that vatavyadhi is sadhya, if it is of recent onset and if the patient has good bala.

In Madhava nidana, it is said that if patient is strong and without any complications then the patient should be treated, as it is sadhya for chikitsa.

Sushruta and Madhavakara say that shuddha vataja roga is Krichrasadhya, Dhathukshayaja is asadhya and samsargaja is sadhya. Bhava prakasha61 and Vagbhata opines the same.

CHIKITSA

After the diagnosis of a disease, the next step will be its management. In the present chapter, the management of Apabahuka is discussed. The general line of treatment mentioned for vatavyadhi in Ayurvedic classics include Snehana (both internal and external), Swedana, mrudusamshodhana, basti, sirobasti Nasya, etc.

Charaka further says that depending on the location and dushya (tissue element vitiated by vata) each patient should be given specific therapies.

Nasyakarma has been mentioned by Vagbhata in jatroordhva vatavikaras.

Three major approaches are made in the management of vatavyadhi.

Treatment of Kevala vata

- ii) Treatment of Samsrusta vata
- iii) Treatment of Avruta vata

Ayurvedic classics explain the chikitsa of Apabahuka as follows.

- Nasya and uttarabhaktika Snehapana are useful in the management of Apabahuka.
- ii) Astanga Sangraha mentions Navana Nasya and sneha pana for Apabahuka.
- Sushrutacharya advice vatavyadhi chikitsa for Apabahuka, except siravyadha.
- iv) Chikitsa sara sangraha advice Nasya, Uttara bhaktika Snehapana and Sweda for the treatment of Apabahuka.
- v) Brumhana nasya indicated in Apabahuka by Vagbhata

CONCLUSION ON CHIKITSA

As Apabahuka is considered as a vata vyadhi, and Vata has the ashukari guna, the poorvaroopas like bahupraspandita hara and shoola may manifest mildly or are totally absent. However, the above-mentioned symptoms are clearly manifested in the vyaktha avastha or in the roopa avastha of the vyadhis in the vyakta sthana, that is, in the amsa pradesha. In this stage the amsa pradesha gets affected by the aggravated Vata, on account of which Amsashosha occurs in the initial stage by the decrease of the Shleshaka Kapha, which further leads to the manifestation of Apabahuka, with symptoms like bahupraspandita hara and shoola. Therefore, in the Madhukosha commentary of Madhava nidana it is mentioned that amsa shosha and Apabahuka are the two stages of the vyadhi.

By considering the above references, following can be said as the line of treatment of Apabahuka.

- 1. Nidana parivarjana
- 2. Abhyanga.
- 3. Swedana
- 4. Uttarabhaktika snehapana
- 5. Nasyakarma
- 6. Shamanoushadhi.

REFERENCES

- Acharya Vagbhata, Astanga Sangraha with Indu teeka. Edited by Vaidya Pandit Ramachandra Shastry Kinjwadekar, 2nd edition 1990. Srisatguru Publication, Delhi.
- 2. First edition. Varanasi: Chaukhamba Surabharati prakashan; 1986. Madhava nidana, madhukosha commentary, 22/65.
- Anonymous, Yogaratnakara: Vidyotini Hindi commentary by Vaidya Laksmipathi Sastri, 7th edition 1999, Chaukambha Sanskrit Sansthan, Varanasi.
- 4. Ayurvedeeya Panchakarma Vignana by Vaidya Haridas Shridhar Kasture Published by Shree Baidyanath Ayurveda Bhavana Limited, Great Naga Road, 6th edition, 1999.

- Bruhat Nighantu Ratnakara with hindi teeka by shri Datta rama shri Krishnalal Mathur published by Khemraj Shri Krishna Das publication Bombay, 1996.
- Dr.Mahajan B.M Methods in Biostastics, Jaypee Brothers, New Delhi.
- 7. Harisson's Principles of Internal Medicine, 14th edition 1998. International Edition, Ed Anthony Fauci S. et al., 1998.
- 8. Human Anatomy by Dr. B.D. Chaurasia, 2nd edition, Volume I, Published by CBS Publishers and Distributors, Delhi, 1991; 32.
- 9. Siddhinanadan Mishra, Ayurveda Rasashastra, Chaukamba Orientalia, Varanasi, 8th edition., 1998.
- 10. Suresh Babu, Research methodology for Ayurvedic scholars, Chaukamba Orientalia, Varanasi, 1st edition., 2001.