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APPLICATION OF PANCHKARMA IN MUSCULOSKELETAL DISORDERS

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ABSTRACT

Musculoskeletal disorders impact people of all ages and in all parts of the world. According to the Global Burden of Disease study, musculoskeletal problems are becoming an expanding healthcare issue and the second leading cause of disability. Pain, limits in mobility, dexterity, and functional capacity describe musculoskeletal problems, which impair a person's ability to work and engage in society, affecting mental well-being as well. MSD is characterized by pain and limited movement, and the medications utilized in modern medicine include analgesics, NSAIDs, corticosteroids, and others, many of which have long-term side effects. MSDs can be linked to the different disorders outlined under Vatavyadhi in Ayurveda Classics. Basti is the most effective therapy for all forms of Vataja problems. According to the traditional literature, the Basti reaches Pakawashaya and then operates on all the organs due to the Virya (potency) found in Basti dravyas.

Key-words - Vatavyadhi, Panchakarma, neuro-muscular and joint disorders, Musculoskeletal disorders, Basti chikitsa

Introduction

The Tridosha idea is a cornerstone of Ayurvedic science. Vata is the most important of these Tridoshas since it is self-governing, everlasting, and all-encompassing in nature. In a typical human organism, the three Doshas, namely Vata, Pitta, and Kapha, collaborate. Normal Vata Dosha encourages the other two Doshas to operate normally. In an exacerbated Kupita state, Vata directs the other two Doshas into aberrant routes and channels, initiating the disease-formation process. Any imbalance in Vata Dosha might result in Vatavyadhi illnesses. According to Samprapti Bheda, there are two varieties of Vatavyadhi: Dhatukshayajanya and Margavrodhajanya. Dhatukshayajanya Vatavyadhi is characterized by degradation of bodily tissues, whereas Margavrodhajanya Vatavyadhi is characterized by blockage in the body's route. Pakshaghata (stroke), Sandhigata Vata (osteoarthritis), Katigata Vata (spondylosis), Gridhrasi (sciatica), Asthimajjagata Vata (ankylosing spondylitis), and Vatarakta (gout) are the most common Vatavyadhis in today's world.

Musculoskeletal disorders (MSDs) are injuries or discomfort that affect the human musculoskeletal system, which includes joints, ligaments, muscles, nerves, tendons, and structures that support the limbs, neck, and back. MSDs are a growing health-care concern worldwide, accounting for the second biggest cause of disability, whereas lower back pain remains the single greatest cause of disability. Pain (often persistent pain) and limitations in mobility, dexterity, and functional ability characterize

musculoskeletal conditions, reducing people's ability to work and participate in social roles, with associated effects on mental well-being and, at a broader level, impacts on community prosperity. Osteoarthritis, back and neck discomfort, fractures due to bone fragility, injury, and systemic inflammatory disorders such as rheumatoid arthritis are the most frequent musculoskeletal ailments. The most prevalent symptom of musculoskeletal illness is pain and limited mobility, with pain generally persisting for lengthy periods of time. MSDs are classified as Vatavyadhi in Ayurveda, which includes all sorts of musculoskeletal illnesses.

According to various scholars

Acharya Charaka- Sankoch (muscle contraction), Parva sthambha (stiffness in joints), Parvabheda (pain in joints), Pani, Prishtha and Shirograha (stiffness in hand, back and head), Khanja (lame), Pangulya (paraplegia), Kubjatava (hump back), Anga shosha (muscular atrophy), Gatra spandan (feeling of something moving in body), Gatra suptata (numbness in whole body), Greeva hundan (cracking of scalp and pain in temporal region), Bheda, Toda (types of pain), Akeshapa (convulsions), Moha (loss of sensorium), Aayasa (feeling of exertion). Along with that they also described concept of Dhatugata vata, and Avritta vata. They mentioned disease with their specific names like; Ardita (facial palsy), Manyasthambha (torticollis), Bahiraayama (opisthotonos), Hanusthambha (temporal mandible joint dislocation), Dandak (stiffness in whole body), Pakshaghata (paralysis), Gridhrasi (Sciatica).

Acharya Sushruta – He mentioned some extra disease along with the above

mentioned these are; Angashosha, Khalli, Vishvachi, Kalaya khanja.

Acharaya Madhav- Along with all these disease one extra disease mentioned that is Vepathu (tremors).

Pathogenesis of Musculoskeletal disorders

Nidana sevana - It includes excessive use of dry, cold, less and light diet, excessive coitus, night awakening, not following diet and regimen after therapy, excessive expulsion of bio humors or blood, due to Langhana (prolong fasting), swimming, excess use of vehicles, sitting in wrong postures, stress, sorrow, anger, day sleeping, fear, suppression of natural urges, external trauma or injury, avoidance of food intake, injury to Marma points (vitals points), falling off from certain heights.

Vata vyadhi is the term which is applied to the specific disorders produced by vata. All disorders are of two types:

- I. Samanyaj Vyadhi
- II. Nanatmaj Vyadhi

Samanyaj vyadhi is a common condition that is created by various doshas as well as vata in some situations. Nanatmaj vyadhi is a special one caused exclusively by vata by aberrant unique qualities. Vata is associated with dryness, coolness, lightness, clarity, mobility, invisibility, and instability. When they are harmed, it results in sublimation, dislocation, contraction, attraction, laxation, tremor, circular movement, motion, pricking pain, harshness, dehydration, agonizing pain, numbness, contractions, stiffness, and other symptoms. Given the connection of these syndromes, the disease should be diagnosed as a vata disorder.

In vata vyadhi khanja, pangu, Avabahuka, Bahu sosha, Amsa sosha,

pada bhansa, Janu vislesa, uru sada, sroni bheda, trika grahan, parswa avamarda, Ekanga roga, Sarvanga roga are diseases characterized by partial or full paralysis of the These disorders are said to occur based on the location of the dosha and the involvement of a certain area of the nervous system. For example, Khanja and pangu are conditions produced by vata when they are positioned in kati (katigat vata), Bahu shosha, Amsa sosa, and Ava bahuka are conditions that occur when they are placed in the cervical region of the spinal cord.

All of these things contribute to Vata vitiation, but they can also be related with Pitta and Kapha.

Various treatment modalities

➤ **Snehana**

Massage, in general, is used to induce relaxation as well as to tone the muscles. Although massage is conducted to enhance circulation, the following factors must be considered during massage treatment. Muscle origin and insertion, lymphatic drainage, circulation status, important parts/joints/muscles/hearts Massage entails applying pressure to the body in many ways: organized, unstructured, stationary, and with mechanical help. Massage can be performed with one's hands, fingers, elbows, knees, forearms, feet, or a massage equipment. Massage is used to promote relaxation and well-being, and it is effective in healing sports injuries and other disorders affecting the muscles of the body, such as postural misalignment and numerous painful conditions, depending on the application and method utilized.

➤ **Swedana**

Swedana is a process to induce sweating artificially in a patient who had already undergone Snehana, etc. Swedana liquifies the doshas, clears the obstruction of channels of circulation and directs the doshas to selective places from where they can be expelled easily. A dry or wet method of sweating is called swedana. It may be full body steam therapy. Special herb decided on the basis of nature and intensity of doshas are fused into the steam and together the heat and herbs dilate the channels allowing the stored ama (toxins) to move back into the digestive system. In swedana the body is made to perspire to loosen and excrete the toxins. By this method it is easy to remove toxins from the body through panchakarma (shodhana therapy).

Management of musculoskeletal disorders

Ayurvedic treatment of MSDs (vata vyadhi) is based on the cause of the disease, which is either an aggravation of vata dosha or a depletion of Dosha. When there is an accumulation of morbid Doshas, shodhana treatment should be performed, and in a kshaya state, Brihana chikitsa should be performed. Panchakarma is a specific subject in Ayurveda that consists of five therapeutic procedures: vamana, Basti, Nasya, and Raktamokshan. Among them, Basti is a medicinal treatment in which medicated substances are delivered via anal channel using the Basti yantra. According to Acharya Charak, Basti is the finest therapeutic treatment for treating all forms of diseases. Basti can be classed in a variety of ways based on location, quality, quantity, action, nature, medications, and so forth. It contains mixture of madhu, sneha, saindhav, kalka and decoction. It is called so as it expels

out morbid dushas from the body. Various synonyms have been mentioned for Niruha basti like Madhutailik, yapana, yuktaratha and siddhabasti. Anuvasana basti is one which predominantly contain medicated sneha is used and required in lesser quantity than niruha.

Most commonly used Niruha basti are:

- Dashmoola –Vata disorders
- Erandamoola- Sciatica, Lumbago, Radiculopathy
- Sahacharadi-Sciatica, Lumbago
- Mustadiyapana-Paralytic condition.
- Panchatikta Ksheera - Osteoarthritis, Avascular necrosis of head of femur.

- Vaitarana- Backache

Most commonly used Anuvasana basti are:

- Dashmoola taila- Disease of vata
- Bala taila- Sciatica, Lumbago, Disc disease
- Sahcharadi taila - Sciatica, Lumbago, radiculopathy
- Mahanarayan taila-Paralytic condition
- Maha Tiktam ghrita - Osteoarthritis, Avascular,

Discussion

Ayurvedic treatment of MSDs is based on the cause of the ailment, which is either an aggravation of Vata dosha or a depletion of Dosha. So, when there is an accumulation of morbid Doshas, Shodhana treatment and Brihana chikitsa should be performed. Panchakarma is a specialist branch of Ayurveda that consists of five therapeutic procedures: Vamana, Virechana, Basti, Nasya, and Raktamokshan. Among them, Basti is a medicinal treatment in which medicated substances are delivered via anal channel using the Basti yantra. According to Charaka, Basti is the greatest therapeutic method for treating all forms of Vata diseases. They stated

that Basti, like Apatarpana or Santarpana, may be employed in a multifaceted strategy depending on the medications used.

Niruha basti is one that primarily uses Kwath dravya. It is made up of Madhu, Saindhava, Sneha, Kalka, and a decoction. It is so named because it expel morbid Doshas from the body. Niruha basti has several synonyms, including Madhutailik, Yapana, Yuktaratha, and Siddhabasti. Anuvasana basti is one that primarily contains medicinal Sneha, which is utilized and required in less quantities than Niruha. Sushruta further splits it into three categories based on dosages, namely Sneha, Anuvasana, and Matra. When Snehana or Brihana is necessary, this Basti is utilized. After reviewing various research papers, it was discovered that much research work has been done on the role of Basti in musculoskeletal disorders and that Basti therapy is very effective and produces statistically significant results in both subjective and objective parameters assessed on various validated scales.

Conclusion

In Ayurveda, basti treatment is considered Ardha chikitsa, which implies that it has the potential to heal sickness if selected and executed properly according to the nature of the Dosha, Dushya, Vyadhi, and patient. There are few basti which are very efficiently practicing in musculoskeletal disorders these are; vaitaran basti, ksara basti, saindhavadi taila basti and panchamooladi kaal basti in RA, tail basti are specially indicated where vata shaman is required like osteoarthritis, sciatica and disc degenerative disorder, whereas yapana basti is given where

nourishment of dhatus are required like in muscular dystrophy, spondylitic disease, avascular necrosis of femur etc. Panchakarma focuses on boosting blood circulation, relieving congestion, and increasing muscular tone; it is best to employ both therapies together.

Reference

1. French HP, Brennan A, White B, Cusack T (2010). "Manual therapy for osteoarthritis of the hip or knee - a systematic review". *Manual Therapy*. 16 (2): 109–17.
2. Thanki K, Shukla V, Bhatt N. Effect of Kshara Basti and Nirgundi Ghana Vati on Amavata (Rheumatoid Arthritis). *AYU (An International Quarterly Journal of Research in Ayurveda)*. 2012;33(1):50.
3. Gupta A, Thakar A, Shah N. Effect of Majja Basti (therapeutic enema) and Asthi Shrinkhala (*Cissus quadrangularis*) in the management of Osteoporosis (Asthi-Majjakshaya). *AYU (An International Quarterly Journal of Research in Ayurveda)*. 2012;33(1):110.
4. Fernando K, Shukla V, Thakar A. Clinical efficacy of Eranda Muladi Yapana Basti in the management of Kati Graha (Lumbar spondylosis). *AYU (An International Quarterly Journal of Research in Ayurveda)*. 2013;34(1):36.
5. Bhatt N, Ali M, Shukla V, Dave A. A clinical study of Nirgundi Ghana Vati and Matra Basti in the management of Gridhrasi with special reference to sciatica. *AYU (An International Quarterly Journal of Research in Ayurveda)*. 2010; 31(4):456.

6. Wadhawa R, Role of Dashmooladi tail Matra Basti in Janu Sandhigata Vata. Unique journal of Ayurveda and herbal medicines.2015;03(2)::51- 54. 31. R. J, Rao VG, Nagalikar J. Ayurvedic management of Ducchén's Muscular Dystrophy - A Case report. Journal of Ayurveda and Integrated Medical Sciences (JAIMS). 2017;2(4).

7. Katariya A, Jogalekar N. Basti chikitsa in Vatarakta w.s.r.to Hyperurecemia- a pilot study. Unique journal of ayurveda and herbal medicines. 2015;03(04):58-60.

8. Imblikuba MA Mahesh MP.Lohitha. Sinha K.Clinical efficacy of madhughritadi yapan basti (enema) in the management of Vayaj gridhrasi (sciatica). International Journal Ayurvedic medical. 2016;1(1):01-07.

9. Vats A. Bhardwaj S.Sharma S. Richa. The Role of Matra Basti with Bala taila in Sandhigata Vata w.s.r to ability to Climbing stairs in patients of osteoarthritis - Knee Joint. International journal of Ayurvedic medicine.2015;6(3),262-266.

10. "Soft Tissue Sports Massage". The Treatment Table. The Treatment Table. Retrieved 2016-06-07. 11. Paul van den Dolder, Paulo Ferreira, and Kathryn Refshauge. "Is soft tissue massage an effective treatment for mechanical shoulder pain? A study protocol". National Institutes of Health. US National Library of Medicine. Retrieved 2016-06-07.

11.Charaka samhita, chikitsa sthana of agnivesha revised by charaka and drudabala with the Ayurveda deepika commentary of chakra panidutta and with hindi commentary, written by

Brahamanand tripathi, published by chaukhamba Sanskrit samsthan, Varanasi edition 2007 chapter 28page no. 939 verse no.23/24.

12. Ashtangahrudayam, uttarsthana of vagbata by Brahmanand tripathi chaukambaparakashana, edition 2008, chapter no.31verse no.30.

13. Sushruta samhita, uttar tantra of maharshi sushruta edited ayurveda tattva, sandeepika by kaviraj deva gupta, chaukambaparakashana Varanasi, edition 2010chapter no.1page no.14 verse 25.

14. Charaka samhita, chikitsa sthana of agnivesha revised by charaka and drudabala with the Ayurveda deepika commentary of chakra panidutta and with hindi commentary, written by Brahamanand tripathi, published by chaukhamba Sanskrit samsthan, Varanasi edition 2007 chapter 28page no.949verse 62.

15. Charaka samhita, chikitsa sthana of agnivesha revised by charaka and drudabala with the Ayurveda deepika commentary of chakra panidutta and with hindi commentary, written by Brahamanand tripathi, published by chaukhamba Sanskrit samsthan, Varanasi edition 2007 chapter 28page no.951verse no.75.

16. Bhavamishra, bhavaprakash edited by prof.K.R. Srikanthamamurthy 1st edition reprint in 2004, published by chaukhambha krishandas academy Varanasi, chapter 5th verse no.212.

17. Agnivesha, Charaka Samhita with Charaka Chandrika Hindi Commentary by Dr. Brahmanand Tripathi, Part 1, Sutrasthana 20/11, 1st Edition (reprint), Varanasi: Chaukhamba Krishnadas Academy;2009: p. 389.

18 Sharma PV editor, Sushruta Samhita, Nidanasthana; Vatavyadhi Nidana

Adhyaya. 1/74, Varanasi, India: Chaukhamba surabharati; 2013. p. 468.

19. Pandit P Shastri edited, Sharngadar Samhita of Acharya Sharangdhar, Purvakhandha, Chapter-5/25, Chaukhamba Orientalia, Varanasi, Reprint., 2008 p 50.

