

CONCEPTUAL ANALYSIS OF NASYA KARMA YOGAS IN BAHUGATA VIKARA

¹Dhanya Ravindran, ²Shaiju Krishnan. P¹PG Scholar, ²HOD & Professor.

Dept. Of Panchakarma, MVR Ayurveda Medical College and Hospital, Parassinikadavu, Kannur, Kerala.

Corresponding Author: dhanyaravindran012@gmail.com<https://doi.org/10.46607/iamj1411122023>

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ABSTRACT

In *Ayurveda*, Pioneers have used all the possible routes of drug administration in different treatments, even from the era when the other medical sciences had not yet evolved. Among them, *Nasya Karma*, the non-invasive drug administration route with transmucosal nasal drug delivery, is a unique detoxification therapy in *Panchakarma* that aims at the alleviation of disorders that are related to the head and neck region. *Bahugata Vikara* is one of the most common neuromuscular ailments that hampers the day-to-day routine of an individual due to impairment of the upper limb. Even with advanced allopathic treatment modalities, patients are not getting satisfactory relief where *Nasya karma* is the prime treatment modality, especially for *Urdhwajatrugata* and *Bahushirsagata Roga*. It acts on higher centers of the brain, controlling different neurological, endocrinal, and circulatory functions, thus showing local and systemic effects. This article attempts to compile the various types of classical *Nasya* formulations specifically indicated in *Bahugata Vikara* by different *Acharyas* from *Ayurveda* classical texts, relevant information from previous research, and published materials from reputed sources.

Keywords: *Nasya*, *Bahugata Vikara*, *Urdhwajatrugata*, *Bahushirshagata*.

INTRODUCTION

In this current era, busy professional working styles like improper sitting, over-exertion, jerking move-

ments during traveling, sports, increasing computerization trends, increasing body weight, and mental

stress create many musculoskeletal and neurological ailments in people. Among these, *Bahugata Vikara* is one of the most common painful conditions that restricts an individual's day-to-day routine due to the impairment of the function of the upper limbs. *Acharya Sushruta* emphasized the significance of the Hand, quoting this statement "*hastameva pradhan-tam yantranam,*" as *Bahu* exhibits the most fantastic range of motion, and all the works or tasks are mainly dependent on it. According to *Acharyas*, *Bahu* is one among the *Shadangas* extending from *Kaksha to Anguli*¹ and most of the neuromuscular diseases of the upper limb are mentioned in the context of *Vatavyadhi*. It includes *Amsa Shoola*, *Amsa Sosha*, *Apabahuka*, *Viswachi*, *Koorpara Shoola*, *Manibandha Shoola*, etc. *Amsa Sosha* or *Bahu Sosha* can be considered as the preliminary stage of the disease, where loss or dryness of *Shleshaka Kapha* from *Amsa Sandhi* occurs due to vitiated *Vata*, which causes *Soshana* of *Sira* and *Snayu* that binds the *Amsa* and hamper the range of motion of *Amsa Desha*². *Acharya Susruta* and *Yogaratanakara* considered this as a significant *lakshana* in the case of *Apabahuka* that *Kupita Vata Dosha* causes localized around the *Amsa Pradesha* causing *Shoshana* of the *Amsa Bandana*, thereby leading to *Akunchana* of the local *Sira* and results in *Bahupraspandanhara*³. According to *Vangasena* in *Vata Vyadhi Adhikara*, *Vedana* is the primary symptom of *Apabahuka* and is still a feature practically seen in patients. *Madhukosha Teeka* mentions that *Amsa Sosha* or *Bahu sosha* is produced by *Dhatukshaya*, *ShuddhaVata Janya*, and *Apabahuka* is *Vata Kapha Janya*. *Viswachi* shows a close resemblance to that of *Apabahuka*. Still, the typical presentation is signs and symptoms of *Chestahani* and *Karmakshaya* of *Bahu* due to affliction of *Khandara* of *Hastatala*, *Bahuprishta*, and *Anguli*⁴. *Koorpara Sandhi Shoolam* and *Manibandha Shoolam* are the other *Bahu Vikara* where the patient cannot grip ob-

jects adequately with the affected hand. The overall prevalence of *Bahugata Vikara* is 3-5% in the general population, and females are affected more than males. In the Contemporary system of medicine, it may be correlated to bursitis, tendinitis, rotator cuff injury, cervical spondylosis, frozen shoulder, etc., and administration of muscle relaxants, NSAIDs, corticosteroids, etc, gives only temporary relief from pain in these conditions. Diagnostic imaging may be indicated in patients with severe symptoms who fail to respond to conservative care for 6-8 weeks. In these conditions, surgery might be considered where *Acharyas* have mentioned *Nasya Karma* with classical formulations as the prime modality in managing *Urdhwajatrugata* and *Bahushirshagata Vatavikara*. According to *Acharya Vaghbata*, "*Nasa Hi Shiraso Dwaram,*"⁵ as *Nasa* is the central doorway to the brain, so *Dravya*, when administered through *Nasa* in a specific manner, enters *Shringataka Marma* from where *Nasya Dravyas* spread into various *Srotas* in the *Uttamanga* and eliminates the morbid *Doshas* accountable for producing the disease. So, *Nasya Karma*, especially the *Brumhana* type of *Nasya* that provides nourishment, is generally told to treat *Bahushirshagata Vatavikara* like *Manya gata*, *Amsa gata*, and *Bahugata Roga*.

Aims and Objectives: An attempt has been made to compile various types of classical *Nasya* formulations specifically indicated in *Bahugata Vikara* by different *Acharyas*.

Materials and Methods: The materials and methods adopted for this article have been collected from *Ayurveda* classical texts, various scientific sources such as previous research conducted on the topic, and published materials from reputed sources and contemporary science books of the concerned subjects were referred to and critically analyzed.

Some Classical *Nasya* formulations indicated in *BahugataVikara* by different *Acharyas*.

	NASYA YOGAS	INDICATIONS	REFERENCE
1.	<i>Gudadi Nasya</i>	<i>ManyaHanuGaloth Bhootath</i> <i>Nashyanti Bhuja Prishtaja</i>	<i>Nasya Vidhi. Sharangadhara.Samhita 8/18-19</i> <i>Nasyadhikara,VangasenaSamhita28/86</i>

2.	<i>Pippalyadi Nasya</i>	<i>ManyaHanuGaloth Bhootath Nashyanti Bhuja Prishtaja</i>	<i>Nasya Vidhi. Sharangadhara. Samhita 8/18-19 Nasyadhikara, Vangasena Samhita 28/86</i>
3.	<i>Mashabaladi Nasya</i>	<i>Jayeth Ardita Vata cha Manyasthamba Apabahuke</i>	<i>Nasya Vidhi. Sharangadhara. Samhita 8/36-37.</i>
4.	<i>Svalpam Masha Tailam</i>	<i>Bahushirshagate Nasyam</i>	<i>Vata Vyadhi Adhikara , Bhaishajya Ratnavali 26/555, Chakradutta 22/155</i>
5.	<i>Sapta Prastam Masha Tailam</i>	<i>Hasta Kampe Shirah Kampe Bahusoshe Avabahuke Vishwacha Arditha Kubje Gridhrasi Apatanake</i>	<i>Vatavyadhi Adhikara, 22/181-185. Chakradutta .</i>
6.	<i>Maha Masha Tailam</i>	<i>Kalaya Khanje Pangulye Gridhrasyama Apabahuke</i>	<i>Vatavyadhi Adhikara, 22/165-171. Chakradutta</i>
7.	<i>Niramisham Maha Masha Tailam (Niramisham)</i>	<i>Apabahuka Viswachyo Khanja Pangulyorapi</i>	<i>Vatavyadhi Adhikara, 22/172-180 Chakradutta .</i>
8.	<i>Dasamoolabaladi Nasya</i>	<i>Sayam Bhuktva Pibeth Nasyam Vishwachyam apabahuke.</i>	<i>Vatavyadhi Adhikara, 22/26 Chakradutta</i>
9.	<i>Balamooladi Nasya Chaturstayam</i>	<i>Vajra Samaanabahu</i>	<i>Vatavyadhi Adhikara, 22/172-180 Chakradutta</i>
10.	<i>Jingini Guggulu Nasyam</i>	<i>Paramaoushadham Apabahukam Manyasthamba Urdhwajatrugata Roge</i>	<i>Vatavyadhi , 28/119 Vangasena Samhita.</i>
11.	<i>Suka Simbi Moola Nasyam</i>	<i>Apabahuka Kandarapeeda</i>	<i>Vatavyadhi 28/120. Vangasena Samhita.</i>
12.	<i>Kakodhumbari dugdha Nasyam</i>	<i>Apabahujam Peedam</i>	<i>Vatavyadhi Vangasena Samhita 28/121.</i>
13.	<i>Prasarini Tailam</i>	<i>Prayuktam Vatajaan Rogaan Sarvanapi Vinashayeth Gadgadavacha Viswachi Manyastamba Apabahukau.</i>	<i>Vatavyadhi adhikara, Chikitsa prakaranam 24/32-42 Bhavaprakasham.</i>
14.	<i>Parinatakeraksheeradi Tailam</i>	<i>Tailam Apabahukam Jayati</i>	<i>Sahasrayogam (Taila Prakaranam)</i>
15.	<i>Karpasastyadi Tailam</i>	<i>Visheshath Apabahum cha Pakshaghata Arditam Hareth</i>	<i>Sahasrayogam (Taila Prakaranam)</i>

Some Classical Nasya formulations are indicated in Bahugata Vikara by different Acharyas-some Research Updates.

The review is based on information from a total of 6 interventional studies by critically analyzing them to verify the necessity and assess the role of Nasya Karma with classical formulations in Bahugata Vata-vikara.

1. MS Gayathry · 2015 ⁶ **A Clinico Analytical Study on Parinatakeraksheeradi Tailam as Nasya Yoga in the management of frozen shoulder**-32 patients of Frozen shoulder were taken in an open-labeled single group clinical study with Nasya Karma with Parinata Keraksheeradi Tailam in a dosage of 8 Bindu for each nostril for seven consecutive days between 7 am to 9 am in empty stomach along with analysis of the compound drug. Most of the Parameters

showed gradual improvement during *Nasya* with *Parinatakeraksheeradi Tailam*. It was observed that pain, stiffness, tenderness, abduction, adduction, flexion, extension, external rotation, and internal rotation were not significant during the 3rd of treatment. Statistically, it was analyzed as substantial on the 6th day, after treatment, and after the follow-up period of *Nasya* treatment. Based on the results obtained from this study, *Parinatakeraksheeradi Tailam Nasya* can be adopted for treating Frozen Shoulder.

2. Suhasini Biradar(2021)⁷-**A Single Armed Clinical Study to Evaluate Efficacy of Navana Nasya with Brihatkalyanaka Ghrita in Apabahuka w.s.r to Frozen Shoulder.** 30 Patients who fulfilled the inclusion criteria during the study period were selected. Each patient was subjected to *Nasya Karma* with *Brihatkalyanaka Ghrita* with *Matra 8 Bindu* in each nostril in continuous flow(*Avichinnadhara*) for seven days. Results were obtained within the group, and the data was observed in BT (On the 0th Day), AT (On the 8th Day), and FU(On the 23rd Day). Analysis of treatment showed clinically and statistically significant results.
3. Conception Costa(2020)⁸-**Comparative Clinical Study on the efficacy of Nasya with Pinyaka/Panchamula Taila and Swalpa Masha Taila in Apabahuka w.s.r to Frozen Shoulder.** It was a single-blind randomized clinical study in which 40 patients of *Apabahuka* were enrolled and divided into two groups - Group A was treated with *Pinyaka / Panchamula Taila Nasya*, and Group B was treated with *Swalpa Masha Taila Nasya* with 8 *Bindu* in each nostril for seven days in each group. Statistically, Group A showed better results in Pain (51.2%), Stiffness (48%), and Tenderness (58.33%), with improvement in goniometric readings of shoulder ROM than Group B in Pain (39.4%), Stiffness (40.9%), Tenderness (58%). Thus, it was concluded that Group A *Nasya* with *Pinyaka Taila* showed a better effect than Group B *Nasya* with *Swalpa Masha Taila*.
4. Sanjay Anant Dhurve(2023)⁹- **A Comparative Clinical Study of Mocharasa Siddhataila and Mahamasha Taila Nasya in managing Viswachi.** Patients of *Viswachi* satisfying inclusion criteria were selected for the study. In Group A(Trial group), *Mocharasa Taila* was given to 20 patients with two drops in each nostril after meals. In Group B, *Mahamasha Taila*(Control group) was given to 20 patients, with two drops in each nostril after meals. Statistical analysis shows that *Mocharasa Taila* and *Mahamasha Taila* are equally effective in symptoms such as *Bahu Shoola & Bahu chesta apaharana*.
5. Nirbhaya Gupta¹⁰(**A Clinical Study to Evaluate the Efficacy of Dashanga Taila Nasya Karma in Cervical Spondylosis w.s.r Viswachi.** A single-blind clinical study was planned where 20 patients with Cervical Spondylosis were subjected to *Dashanga Taila Nasya Karma* with eight drops in each nostril for seven days. The relevant data were collected before the treatment, and patients were assessed on the first day of treatment, after the treatment, on the 7th day, and after a follow-up of 7 days. After a course of the *Nasya Karma*, the analysis of the patients revealed that significant improvement was observed in neck pain, pain, and paraesthesia in the upper limbs. The overall effect of the therapy showed that 10 % of patients had 50-75% improvement, and 5% each had improvement between 76-80% and 80-90%. Hence, *Dashanga Taila Nasya Karma* is therapeutically effective in treating *Viswachi* due to Cervical Spondylosis.
6. A.H.S Lankani(2018)¹¹- **Effect of Sri Lankan traditional medicine Jathiphalaadi Lepa and Heen Demata Yusha Nasya on Manibandha Shoola [Carpal Tunnel Syndrome]- A Case Report.** It was a single study; a 47-year-old female patient suffering from CTS was treated with *Heen Demata Yusha Nasya* 6 drops in each nostril for three days around 10.00 a.m., followed by applying *Jathiphalaadi Lepa* for 14 days. The total duration of the treatment was 17 days and progress of the treatment evaluated through

symptomatic relief. After completing the entire treatment, it was observed that sleeplessness and the pain extending from fingers to shoulder were utterly relieved. Pain and paraesthesia on the palmar aspect of the hand and fingers were partially relieved (66.67%). 50% relief was observed in the hand's tingling sensation and pain extending from fingers to forearm or arm.

DISCUSSION

The success of the treatment depends on the *Chikitsa Chatuspada*, among which one-fourth of the credit goes to the drug used for the procedure. So, the reference to the classics is considered scientific even today. Depending on the effect required, the medication and its formulation dosage differ. Properly administered *Nasya Karma* cures head disorders and strengthens the neck and shoulders. Previous studies concluded that *Nasya Yoga* offers therapeutic benefits in managing *Bahu Vikara*. Various *Taila* formulations have been used in research as *Taila* has both the action of *Brumhana* and *Karshana* properties. With these properties, *Taila* will help in *Brumhana* in *Vataja* condition and *Karshana* if it is *Vata Kaphaja*. The lipid contents of the *Tailam* may pass through the blood-brain barrier easily, and some of the active principles may reach certain levels in the nervous system where they can exert their *Vataghna* property.

- In *Parinatakeraksheeradi Taila*, the ingredients such as *Parinatakeraksheeradi*, *Jambeera*, *Tilataila*, etc., help to combat the *Prakupita Vata* by its *Vatashamana* and *Brumhana* property. Hence, the study concluded that *Parinata keraksheeradi Tailam Nasya* can be adopted to treat Frozen shoulder.
- *Nasya Karma* with *Brihatkalyanaka Ghritha* mentioned in *Vangasena Samhita* showed relieving symptoms of *Apabahuka* by its qualities such as *Brumhana*, *Vata Shamaka*, *Vedana Sthapaka*, *Shoola Hara*, *Sandhaneeya*, *Balya*, *Shothahara* and *Anulomana* effect.
- In *Amsa Stabdatha*, due to *Sira Sankocha* and in *Amsabandhana Shosha*, *Nasya* with *Pinyaka Taila* provided relief, which contains *Pinyaka*

which has *Ruksha Lekhana* property but also *Madhura*, *Pushti Balakaraka* thereby provides nourishment and *Snigdhatta* to the *Sira Sankocha* by removing stiffness and tenderness.

- *Swalpa Masha Taila* mentioned in *Bhaishajya Ratnavali* is also indicated for *Amsa Sosha* and *Apabahuka* and gives relief in pain as *Masha* does *Brumhana Karma* due to its *Madhura Rasa* and *Saindhava* is *Shoolahara* because of *Ushna Tikshna* properties.
- *Mocharasa* is considered a drug of choice, according to *Acharya Vagbhata*, for relieving pain in *Skandha*, *Amsa*, and *Bahu*. *Mocharasa Taila* has properties *Snigdha*, *Picchila*, and *Madhura Rasa* and acts as *Brumhana Vedanashamaka* and has shown very effective results in *Viswachi*.
- *Mahamasha Tailam*, mentioned in *Bhaishajyaratnavali*, which has 36 ingredients, has properties such as *Snigdha*, *Guru*, and *Shukshma*, and its *Brumhana* property is beneficial in *Viswachi*.
- *Dashanga Taila* mentioned in *Gada Nigraha* is *Vata Shamaka* and specifically indicated in *Viswachi* revealed significant improvement observed in neck pain, radiation of pain, movement of neck, neck stiffness, weakness, and *paraesthesia* in upper limbs.
- *Heena Demata Yusha Nasya* is beneficial for diseases originating by vitiation of *Vata*, including *Manibandha Shoola*. *Ayurveda* pharmacodynamic properties of *Gmelina asiatica* should be described in authentic texts. *Sesamum indicum* possesses *Madhura Rasa*, *Guru-Snigdha Guna*, and *Ushna Veerya*. Hence, it pacifies vitiated *Vata-Dosha*. Antioxidant Analgesic and Anti-inflammatory properties of ingredients of *Heena Demata Yusha Nasya* are scientifically proven. Based on the research undergone, the procedures, properties & conducts explained for each *Nasya* formulation in *Nasya Karma* are vital in drug absorption & transportation.

CONCLUSION

Amongst *Panchakarma*, *Nasya Karma* carries importance as it deals with the most critical body part,

Shiras. Nasya Karma is a valuable approach for *Bahushirshagata Vikara* with varied classification and vast action. Various *Nasya* formulations are mentioned in classics under *Bahugata Vikara*. The efficacy of some *Nasya yogas* mentioned in classics has been proven through previous studies, and some more *Nasya yogas* compiled by Acharyas under *Bahu Vikara* are yet to be confirmed. So let this study serve as a preliminary step towards conducting more research on *Nasya yogas* in the Ayurvedic System of Medicine, which is the need of the hour so that once we know the excellence of *Nasya yogas*, we can completely cure *Bahu Vikara* through *Ayurveda* without any surgery or without relying on other system of medicine.

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