VIDDHAGNII KARMA IN ACHILLES TENDINITIS – A CASE STUDY

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ABSTRACT

‘Viddha’ is a Sanskrit word, meaning to pierce or penetrate something. Agnikarma is the procedure of cauterization. Viddhagni is fusion procedure of Viddha (Vyadhana) and Agnikarma. It is effective in both acute and chronic pain. Achilles tendinitis is a condition characterized by pain and swelling over the Achilles tendon area. Achilles tendinitis is most found in individuals aged 30-40 years. The prevalence of Achilles tendinitis varies among different ages and groups of people. The management of Achilles tendinitis involves rest, non-steroidal anti-inflammatory agents and finally tendon repair. The conservative treatment as well as surgery has disadvantaged incomplete pain relief. This condition can be correlated to Vata kantaka in Ayurveda. Agnikarma is indicated in sira, snayu, sandhi and asthigata rogas¹. Agnikarma is described as most effective therapy in the management of painful conditions especially musculoskeletal disorders. Viddhagni karma is the modification of Agni karma. The pain is strong, stimulus. If body gets still stronger stimulus destructs the attention of the senses and one feels better. This action is obtained by Viddhagni karma. In this case study, a 28-year-old female diagnosed with Achilles tendinitis was administered with Viddhagni karma for 3 sittings with an interval of 7 days. Assessment was done for pain, tenderness, movement and swelling. Significant improvement was observed after treatment.

Keywords: Achilles tendinitis, Viddhagni, Agnikarma

INTRODUCTION

Achilles tendon disorders are a nemesis to both the patient and physician. Different treatment strategies may be required for seemingly identical symptoms in two individuals. One may respond within a matter of days while another may require a prolonged convalescence to fully alleviate the symptoms. Poor gastronomius/soleus flexibility and faulty footwear are two commonly accepted etiological factors in Achilles tendinitis. Other risk factors include little exercise, high heel shoes, rheumatoid arthritis, and medications of fluoroquinolone or steroid class⁵. This condition can be correlated to Vata kantaka in Ayurveda.

The earliest reference about the condition “Vata kantaka” is available in Sushrutha samhitha (1500 B.C.). In the context of Vata vyadhi Sushrutha quotes ‘ny-asthe tu vishamam paade rujaha kuryaath sameernaha’² due to the improper walking, there will be Vata prakopa in the Paada which leads to the manifestation of pain in the heel region.
Achilles tendinitis treatment involves rest, non-steroidal anti-inflammatory agents and finally tendon repair. The conservative treatment as well as surgery has disadvantages that incomplete pain relief. In the context of Vata vyadhi chikitsa, Sushrutha quotes ‘snahopanaaha agnikarma bandhana unmardanani cha | snayu sandhi sira prapte kuryath vayavatandritaha | Sneha (oleation), Upanaha (poultice application), Agnikarma (cautery), Bandhana (bandaging), and Unmardana (massages) are beneficial in the management of Snayu (ligaments), Sandhi (joints), Sira (vein) vikaras.

In the context of Agnikarma, while explaining Daha-nana Upakarana Acharya Sushrutha quotes, ‘Ksaudra, Guda and Sneha in the management of Sira, Snayu, Ashthi, Sandhigata vikaras. As it is difficult to practice, the modified Agnikarma is used in the current study.

Viddhagni karma is a unique combination of two ancient, different Ayurvedic techniques namely, Vyadhana karma and Agnikarma. Agnikarma is described as most effective therapy in the management of painful conditions especially musculoskeletal disorders. Viddda karma is a sterile procedure wherein hollow needles are pierced at specific points on the body to provide pain relief by releasing endorphins. Viddda therapy having its root back in the ancient agenda at yet its current new form has 2 distinct formats,

1) Indian method
2) Chinese method

The Chinese postulated that there is an energy flow in every living being that is responsible for life. They called this energy the ‘Chi’ force. This energy is analogues to the Indian concept of ‘Prana’ or life force and permeates all creation. The ‘Chi’ flows through the body in channels called acupuncture meridian. Acharya Sushrutha quotes, Agnikarma in the management of Snaayu vikara’s. Vidhagni karma is the modification of Agnikarma and it works on the principle of Acupuncture. Hence viddhagni karma is used in the current study.

CASE REPORT –
A 28-year-old female, married, teacher by profession presented with complaints of pain and swelling in right Achilles tendon area since 1 week, visited at shalya tantra OPD of SJIIM hospital, GAMC, Bengaluru.

Interrogation revealed that the patient had taken AN-ALGESICS but did not get any relief and approached for better management.

Patient is not a known case of Diabetic mellitus and Hypertension or underwent any surgery.

On physical examination pulse rate was 78/min, regular with normal volume. Blood pressure was 110/80 mmHg.

Systemic examination -
- Cardiovascular system- s1 s2 heard, no added sounds.
- Central nervous system- conscious, oriented
- Respiratory system- bilateral air entry clear
- Per abdomen- soft, non-tender.

Local examination -
On inspection- mild swelling in right Achilles tendon area, redness – present.

On palpation- tenderness at right Achilles tendon area

Investigations -
Hb%- 14.6 gm %; ESR- 34mm/hr; RBS- 96mg/dl; CT- 2‘4’’; BT- 4’2’’; HIV- NR; HbsAG – Negative.

Nidana –
- Ahara – ruksha ahara, alpa ahara sevana
- Vihara – ratri jagarana
- Manasika – chinta, krodha

Samprapti –
Due to the Nidana sevana there will be Vata prakopa in the Riktha srotas which causes Pada ruja and is named as Vata kantaka.

Diagnosis – Vata kantaka /Achilles tendinitis

Treatment Given-

Poorva karma –
- Right heel is cleaned with surgical spirit using sterile gauze.
- Earthing plate/ cautery plate is kept under the patient thigh.
- Most tender points were marked.
**Pradhana karma**

- 26 g surgical needle was pierced about 0.5 cm through the skin of the heel at points of maximum tenderness.
- Using a monopolar cautery machine, a minimum setting of 0.50 mHZ and maximum of 2 mHZ is administered to each needle shaft for 2-5 seconds, depending upon the capacity and pain threshold exhibited by the patient.
- This cycle is repeated 2 more times after a 2-5 minutes interval depending upon the capacity of individual patients.

**Paschath karma**

- Needles were removed.
- Part cleaned with surgical spirit using sterile gauze.
- Hemostasis assured.
- Sterile dressing done.
- Patient is asked to take rest for an hour.

**Viddhagni karma** is administered for 3 sittings with an interval of 7 days.

**Criteria for Assessment**

1) Visual analogue scale was used to get an assessment of pain relief after each sitting. Visual analogue scale noted as,

0------1------2------3------4------5------6------7------8------9------10

0-no pain, 1-3 is mild pain, 4-7 moderate pain, 8-10 severe pain.

**Observation and Result**

1) **Pain**

<table>
<thead>
<tr>
<th></th>
<th>BT</th>
<th>1st sitting</th>
<th>2nd sitting</th>
<th>3rd sitting</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>4</td>
<td>2</td>
<td>0</td>
<td></td>
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</tbody>
</table>

2) **Tenderness**

<table>
<thead>
<tr>
<th></th>
<th>BT</th>
<th>AT</th>
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<tbody>
<tr>
<td>Present</td>
<td></td>
<td>Absent</td>
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</table>

3) **Swelling**

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<th>BT</th>
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<tbody>
<tr>
<td>Present</td>
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<td>Absent</td>
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**4) Range of movement:**

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<th></th>
<th>BT</th>
<th>AT</th>
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</thead>
<tbody>
<tr>
<td>Plantar flexion</td>
<td>30°</td>
<td>50°</td>
</tr>
<tr>
<td>Dorsi flexion</td>
<td>10°</td>
<td>20°</td>
</tr>
</tbody>
</table>

Clinical examination of the patient revealed regression of symptoms with treatment on 1st sitting itself. On 8th day there was mild pain, swelling, tenderness and painful movements at the Achilles tendon area. On the last day of treatment patient had no symptoms and was completely cured.

**DISCUSSION**

Achilles tendinitis has been compared with Vata kantaka. According to Ayurveda, Vata is responsible for the manifestation of Vata kantaka. Agnikarma is Vata and kaphahara. Viddhagni karma is the modification of Agnikarma. Hence, Viddhagni karma is taken in current study. “Viddhagni” is first line pain management procedure. Whenever painful points are selected for this treatment, there is quick response from the body and pain is relieved. When needle is inserted and heat is applied, the local tissues are dried off. The heat evaporates the water molecule in those tissues, making them dry and shrinks. This brings in new possibility as the cell shrinks and new circulation comes to wash off the cellular waste. This also brings in endorphin for healing. Thus, helping new efficient tissue formation. Thus, helping in long term / permanent reversal of local pathology.

**CONCLUSION**

In this case study, the patient has shown encouraging results during the management of Vata kantaka. Based on the clinical observation and discussion it may be concluded that there is significant result of Viddhagni karma in the treatment of Achilles tendinitis and gives complete relief from the pain, swelling and tenderness. There was no adverse treatment reaction seen during the period of the trial and it is safe and cost effective. It is very effective to terminate the chance of reoccurrence of disease.
REFERENCES

1) Acharya Sushruta: Sushruta Samhita by Sushruta with Nibandha Sangraha Commentary of Sri Dalhanacharya and Nyayachandrika Panjika of Sri Gayadasacharya on Nidana sthana, Edited by Vaidya Jadavji Trikamji Acharya from the beginning to the 9th adhya of chikitsasthana and the rest by Narayan Ram Acharya Kavyatirtha, Published by Chaukhamba Surbharati Prakashana, Reprint 2008, sutra sthana 12th chapter, verse 4

2) Acharya Sushruta: Sushruta Samhita by Sushruta with Nibandha Sangraha Commentary of Sri Dalhanacharya and Nyayachandrika Panjika of Sri Gayadasacharya on Nidana sthana, Edited by Vaidya Jadavji Trikamji Acharya from the beginning to the 9th adhya of chikitsasthana and the rest by Narayan Ram Acharya Kavyatirtha, Published by Chaukhamba Surbharati Prakashana, Reprint 2008, nidana sthana 1st chapter, verse 79

3) Acharya Sushruta: Sushruta Samhita by Sushruta with Nibandha Sangraha Commentary of Sri Dalhanacharya and Nyayachandrika Panjika of Sri Gayadasacharya on Nidana sthana, Edited by Vaidya Jadavji Trikamji Acharya from the beginning to the 9th adhya of chikitsasthana and the rest by Narayan Ram Acharya Kavyatirtha, Published by Chaukhamba Surbharati Prakashana, Reprint 2008, chikitsa sthana 4th chapter, verse 8

4) Viddhagni an innovative ayurvedic pain management technique, by Dr. Uday V. Kulakarni, publisher-Ayurvarta Prabhodini 2017.


Photographs –

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