



# AYURVEDIC MANAGEMENT OF SNAYUGATA VATA ROGA WITH SPECIAL REFERENCE TO CLENCHED FIST SYNDROME-A CASE REPORT

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## Abstract

*Snayu* is one such term which is well described in classical texts still it is required to know exact structure related to it in human body. It is mentioned as a structure which aids in binding the joints, also in weight bearing of the body while structurally it has been mentioned something similar to a fibrous in nature. *Acharya Susruta* mentioned about the formation of ligaments/tendons/aponeurosis because of their structural and functional resemblance with *snayu*. In *Ayurveda*, *Snayugata vata* is explained under the concept of *Vatavyadhi*. The *Vata dosha* vitiation occurs which settles down in the *Snayu* of the *sharira*. In *Snayugata vata* there is *shoola*, *kampa* and *stambha*. Due to signs and symptoms of *Snayugata vata* similar to Clenched Fist Syndrome maybe correlated.

A 28year old female subject, complaints of stiffness in the both the hands unable to open the fingers with pain. Swelling is present in bilateral hands. Subject received *Sarvanga Abhyanga*, *Sthanika Patrapottali sweda*, *Bhashpa sweda* and *Avapeedana nasya* which follows *Samanya chikitsa* of *Vatavyadhi*.

**Key words:** *Snayugata vata*, *patrapottali sweda*, *sarvanga abhyanga*, *bhaspa sweda*, *avapeedana nasya*

## Introduction

*Sharira Rachana* is one of the basic subjects for the fundamentals of *Ayurveda*. Before treatment one must be aware of constituent's structures of human body and this particular branch that is *Sharira Rachana* deals with the structures of a human body, its applied aspects and clinical importance. *Snayu Sharira* is one such area which requires much more research. *Snayu* is explained in following manner. *Acharya Sushruta* being one of the pioneer scholars of *Ayurveda* has described various anatomical structures their position and function in body in *Sharira sthanam*. He has narrated formation of *Snayu* in the 4<sup>th</sup> chapter of *Sharira sthana* and in the fifth chapter, he told the clinic-anatomical importance of *Snayu*. The contribution of *Snayu* as structural constituent as a vital part of the body is well described in *Sushruta samhita* and its various other *Ayurveda* literature. The *prakupita vata* moves and gets localised in specific *sthanas* leading to disturbance in the normal functioning of that *sthanas*<sup>6</sup>.

*Vayus tantra Yantra Dhara*<sup>11</sup> which means *Vata* in its normal state bears all the organs of the body and its functions. If *Vata* get vitiated, can lead to the manifestation of certain diseases. The *Prakupita Vata* moves and gets confined in the specific *Sthana* causing disturbance in the normal functioning of that *sthanas*.

This thought can be correlated to *Snayugata vata* in which due to various *Nidana sevana prakupita vata* gets situated in *Snayu*. *Snayugata vata-Snayu*<sup>5</sup> is considered as a fibrous tissue and is part which acts to bind. According to *chakrapani* these *Snayu*, *Sira* etc. Are binding structure of the body. These are prepared by essence part of food. *Snayu* binds the *Mamsa*, *Asthi* and *Meda* powerfully and as these are stronger than are stronger than *Sira*, can bind the joints also very strongly. *Bahya abhyantara aayam* (opisthotonus and emprosthotonus)-backward or forward bending of the body, *Khalli* (neuralgic pain in feet, shoulders etc), *Kubjatva* (hunchback) and other vata diseases pertaining to the entire body or a part there of. According to *Sushruta*<sup>8</sup> the *lakshana* are *Stamba*, *Kampa*, *Shoola* and *Akshepa*.

The clenched fist syndrome<sup>12</sup> is an entity in which patient keeps one or both hands tightly clenched. It is seen in all groups; hand dominance or compensation is not a factor. It usually follows a minor inciting incident and is associated with swelling, pain and paradoxical stiffness.

#### **Nidana<sup>1</sup>:**

Intake of *Ruksha* (dryness), *Sheeta* (Cold), *Alpa* (less quantity) and *Lagu anna* (light to digest food), *Prajagara* (Remaining awake at night in excess), *Atiplavana* (Excessive swimming), *Ati laghana* (Excessive fasting), *Atydhva* (Walking for long distance), *Ati vyayama* (Resorting to wayfaring, exercise and other physical activities in excess), *Dhatu Samkshayaat* (depletion of body tissues, loss of *Dhatu*s), *Chinta shoka karshana* (Excessive emaciation because of affliction of diseases), *Vega vidharana* (suppression of natural urges).

#### **Poorvarupa<sup>1</sup>:**

*Avykta Lakshana* (indistinct manifestations) [191/2-1/220]

#### **Rupa<sup>1</sup>:**

*Sankocha* (Contraction), *Parvanam stambha bheda* (stiffness of joints and pain), *Khanjya-Pangulya-Kubjatva* (lameness of hands and feet, hunchback, shortness), *Anganam sosha* (Atrophy, emaciation of limbs), *Anidra* (insomnia), *Spandana gatra suptata* (twitching sensation and numbness in the body).

#### **Samprapti ghataka<sup>1</sup>:**

<i>Dosha:</i>	<i>Vata- vyana,</i> <i>Kapha- Sleshaka</i> <i>Pitta- Pachaka</i>
<i>Dushya:</i>	<i>Rasa, Meda, Majja</i>
<i>Upadhatu:</i>	<i>Sira, Snayu</i>
<i>Dhatu mala:</i>	<i>Kapha</i>
<i>Agni:</i>	<i>Jataragni and Dhatvagni</i>
<i>Agnidushti:</i>	<i>Mandagni</i>
<i>Ama:</i>	<i>Agnijanya</i>
<i>Srotas:</i>	<i>Annavaha, Rasavaha, Asthivaha</i>
<i>Srotodushti:</i>	<i>Sanga</i>
<i>Udbhavasthana:</i>	<i>Amashaya. Pakvashaya</i>
<i>Sancharasthana:</i>	<i>Annavaha srotas, Dhamani, Kaphasthana</i>
<i>Adhisthana:</i>	<i>Kaphasthana like sandhi, Amashaya</i>
<i>Vyaktasthana:</i>	<i>Sandhi, amashaya, uras</i>
<i>Svabhava:</i>	<i>Chirakari, kashtasadhya</i>
<i>Rogha marga:</i>	<i>Madhyama</i>

**Samprapti<sup>1</sup>:** No specific samprapti has been explained by Acharyas for *Snayugata Vata*. So, we conclude the Samprapti of *Vatavyadhi* as the Samprapti of *Snayugata vata*<sup>10</sup>

*Nidana sevana* (*viruddha ahara, mandhachesta* etc)

Vata dosha vikriti along with other dosha which produced in the body

Through srotas, siras and dhamanis

Sthanasamshraya in fingers bilateral

Karma kshaya, Shotha, stabdhata

**Snayugatavata roga (fingers bilateral)****Patient details:****Pradhana vedhana**

A 28year old female subject complaints of stiffness in the both the hands unable to open the fingers with pain. Visited *Kayachikitsa* department with OPD NO.-9440 and IPD NO.-514. Swelling is present in bilateral hands. Subject was quiet okay before 8days and the very next she find the other hand was too stiffened and was not able to open the hand with force subject experienced pain. Hence subject came to our hospital for *Ayurvedic* management as advised by others. We treated subject on OPD base and advised subject to get admit to hospital for *panchakarma* procedure. Subject was not planned hence they asked for a week time. After a week subject came to our hospital. We carried out *Ayurvedic* treatment on daily observation.

**Chikitsa vrittanta**

For this condition patient received Allopathic line of treatment for 8 days.

**Kautumbika vrittanta**

All family members are said to be healthy.

**Clinical examination****Ashtavidha pariksha**

*Nadi* (Pulse): 70b/min, *Mala pravrutti* (Stool): 1time/day, *Mutra pravrutti* (Urine):4-5times a day, *Jihwa* (Tongue): *Aliptata*, *Shabda* (Hearing): *Prakritha*, *Sparsha* (Skin): *Shitoshna*, *Druk* (Eyes): *Prakrita*, *Akriti* (Stature): *Madhyama*

**Systemic Examination**

CVS: S<sub>1</sub>, S<sub>2</sub> heard

RS: NVBS

CNS: Conscious, oriented

O/E: Supinator reflexes absent, Swelling, Pain on forceful extension of fingers.

Abdomen: Soft, NAD

**Materials and Methods****Treatment plan**

- *Sarvanga abhyanga*
- *Sarvanga bhaspa sweda*
- *Sthanika patrapottali sweda*
- *Avapeedana Nasya*
- *Shamanaushadhi*
- *Pathya-Apathya palana*

**Table 1: Showing schedule/Intervention**

Date	Treatment <sup>7</sup>	Medicine/Procedure
16/3/23- 23/3/23	<i>Sarvanga abhyanga</i> <i>Sarvanga bhaspa sweda</i> <i>Sthanika patrapottali sweda</i>  <i>Avaapeedana Nasya</i>	<i>Mahavishagarbha taila</i> <i>Vatahara dravya (Eranda patra etc) used for Sweda</i> <i>Eranda patra, Nimbu, Arkapatra, Grated coconut, Haridra</i> <i>Yashtimadhu choorna, Trikatu choorna, Tulasi patra, Ksheera</i>
16/3/23- 23/3/23	<i>Shamanaushadi</i> <i>Pathya-Apathya</i>	Tab Rheumacalm 1tab thrice a day - After food <i>Ekangaveera rasa</i> 1 tab thrice a day- After food <i>Vaishwanara Choorna</i> - 12gms- two times a day- After food <i>Rasnaerandadi Kashaya</i> - 15ml- two times a day- Before food

		<i>Vajigandhadi yoga- 2tab- twice a day- After food</i>
	<i>Apathya</i>	<i>Apathya ahara- Potato, Bringal, Sprouted grains and grains, curd, non-veg, Chillies, Fried food etc Apathya vihara- Divaswapana, Cold water, Chinta, Exposure to Air etc</i>
	<i>Pathya</i>	<i>Pathya Ahara- Ganji, Kichidi, Rice and Rasam Pathya vihara- Early sleep at 8:00pm after one hour after food, Excercise intermittent of 3 hours for hand, Luke warm water etc</i>
16/3/23-23/3/23		Excercise
24/3/23	<i>Shamanaushadhi For 15 day follow up</i>	<i>Tab Rheumacalm- 1tab- thrice a day- After food Tab Ekangaveera rasa- 1tab- thrice a day- After food Tab Vajigandhadi Yoga- 2tab- twice a day- After food</i>

**Table 2: Assessment of Results**

<b>Features</b>	<b>BT</b>	<b>AT</b>
<i>Hastha sandi shoola (hand joint pain)</i>	Present +++	Absent
<i>Shotha (Swelling)</i>	Present	Absent
Closed fist	Present	Absent

**Showing images before and after treatment**

**BEFORE TREATMENT**  
Pictures captured on 16/3/23

**DURING TREATMENT**  
Picture captured on 19/3/23

**AFTER TREATMENT**  
Picture captured on 24/3/23





**Absence of extension of fingers**



**Partial extension of fingers**



**Complete extension of fingers**

### Probable mode of action

- *Amapachana dravya* helps in maintenance of *agni* and do *agni sandeepana karma*.
- Both *Snehana* and *Swedana* help in the movement of *Dosha* and *Dosha sithilikarana* and bring *Doshas* from *Shakas* to *Koshta*.
- *Vyavayi* property of *Nasya* is responsible for quick absorption, while *Vikasi guna* causes softening and loosening of the bond by *Dhatu shaaitilyakarana*.
- Due to *Ushna guna dosha sanghata* is liquified.
- *Tikshnaguna* of *Nasya* produces due to *snehana of dosha* which are already softened due to *snehana* and *Swedana* so liquefied *Dosha* dragged to *Koshta* and eliminate from the body.
- *Patra-pottali sweda* due to *ushna guna*, *vatahara patra* helps in alleviation of *vata dosha*, *shotha* and *shula hara*.
- *Pathya-apathya* helps to regulate the physiological functions of the body.

### Discussion:

- *Snayu* is a structure which binds the *Anga-Pratyanga Sandhi* together.
- *Pratana* means a tendril or a shoot or a spreading creeper. These are said to be present in *Shanka* and all *sandhi*. So *Pratanavati* type of *Snayu* supposed be present in all the joints of body and extremities also they should be having branching pattern and like creeper. So, the structure which resembles *pratanavati snayu* are Ligaments and Nerves.
- *Vrutta snayu* as *kandara* which is *Mahasnayu*. It is cord like structure which is similar to *snayu* but large in size. They resembled by Tendons and Large Nerves cords.
- Subject has Irregular intake of food and food habits and mentally disturbed due to stress, over thinking due to family issues.
- Depending on *lakshanas* and *nidanas* according to *Charaka samhita* treatment is planned accordingly considering the *roga* and *rogi bala, prakriti* etc
- *Panchakarma* intervention and at earlier stage prognosis is *sadhya*.

### Conclusion:

- *Snayu* is an entity which accomplishes the function of holding and binding the various structures of human like bones, muscles and adipose tissue.
- Subject condition improved with complete extension of fingers, no swelling, pain and stiffness.
- *Pathya* and *apthya* has been advised with *shamanaushadis* for 15 days.
- Subject was satisfied with the treatment and felt happy.

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