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Conceptual study of vatakantaka

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Abstract

Pain is that one feature which can interfere with daily activities such as working, having a social life, taking care of oneself and others. Several problems can cause pain to develop in the back of the heel. Plantar fasciitis is one of the most common causes of heel pain. Plantar fasciitis is estimated to affect 1 in 10 people at some point during their lifetime and most commonly affects people between 40 and 60 years of age. Vatakantaka is a Sanskrit compound consisting of the terms vata and kantaka which means a particular pain in the ankle. Walking in irregular or uneven ground, the structural deformity of foot or excessive strain on foot lead to provocation of vata and brings about severe pain in ankle joint which is referred to as Vatakantaka. Through this article an attempt is made to understand the nidana, samprapti, purvarupa, lakshana of vatakantaka which contributes in its manifestation. Snehana, swedana, virechana, raktamokshana, agnikarma are line of treatment explained in ayurveda.

Keywords: Plantar fasciitis; Vatakantaka; Snehana; Swedana; Agnikarma; Raktamokshana.

1. Introduction

The foot is really unique to human being. The structure of the foot allows the foot to sustain large weight bearing stresses under a variety of surfaces and activities that maximize stability and mobility. Structural abnormalities can lead to altered movements between joints & contribute to excessive stresses on tissues of the foot and ankle that result in injury. Plantar fascia acts like a shock-absorbing bowstring, supporting the arch in foot. But if any tension on that bowstring becomes too great, it can create small tears in the fascia; repetitive stretching & tearing can cause the fascia to become irritated or inflamed leading to plantar fasciitis. Plantar fasciitis is also known as a "heel spuer"¹.

It has been reported that plantar fasciitis occurs in two million Americans a year and in 10% of the U.S. population over a lifetime. It is commonly associated with long periods of weight bearing. Among non-athletic populations, it is associated with a high body mass index. The pain is usually felt on the underside of the heel and is often most intense with the first steps of the day².

Most people who have plantar fasciitis recover in several months with conservative treatment, such as icing the painful area, stretching, and modifying or staying away from activities that cause pain. Analgesics have been used in practice by modern practitioners to give immediate relief to patients from pain. Therapies like physical therapy, night splints, orthotics, walking boot, canes or cutches are advised for some patient. Steroid injections, Ultrasonic tissue repair, surgery are also used by modern practitioners³.

Vatakantaka is mainly vyadhi of vitiated vata dosha. Acharya charaka has mentioned it under Vatavyadhi chikitsa adhyaya⁴. The local Vayu enraged by making a false step on an uneven ground, finds lodgment in the region of the ankle (Khudaka, instep according to others), thus giving rise to a disease which is called Vata Kantaka⁵. Treatment explained

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in Ayurveda for Vatakantaka are Bahya and Abhyantara Chikitsa such as Snehana, Upanaha, Agnikarma, Raktavsechana, Bandhana Suchikarma(Viddhakarma) and Abhyantartaha Erandsnehapaana⁶.

1.1. Nidana

Which gives complete knowledge about disease is called Nidana. Nidana can be Aharaja, Viharaja, Manasika. In vatakantaka along with aharaja nidana, viharaja is also considered to be the main cause. According to acharya vagbhata nidana for vatakantaka is excessive shrama⁷. Acharya sushruta quotes that keeping the foot on uneven surface is nidana for vatakantaka. Some of the other causes for vatakantaka are,

- -Structural deformity of foot, causes increased pressure on heels.
- -Standing or walking for long
- Usage of hard footwears
- -Prolonged pressure over the heel or ankle joint.

1.1.1. Poorvarupa

In classics there is no reference regarding poorvarupa of vatakantaka is available. Acharya charaka says that avyakta lakshana is considered to be the poorvarupa for all vatavyadhi⁸. According to Vijaya-rakshita in commentary on Madhava nidana Avyaktham means 'Na Ati Abhivyaktham' and those symptoms which are not exhibited clearly are known as Poorvaroop. So mild symptoms of vatakantaka can be considered as purvaroop⁹.

1.1.2. Roopa:

Pain is considered as the main clinical feature in vatakantaka.

Nyaste tu vismam paade rujah kuryaat samiranna

Vatakantak itiyesa vigyeya khudakashritah (Su.Ni.1/79)

Sushruta opines that the disease Vatakantaka is caused due to vitiated Vata Dosha because of constant standing and walking on uneven surface resulting into pain in foot. It is characterized by shoola (pain) and shotha (Inflammation) in Heel which is Snayu Asthi Sandhi Ashrita¹⁰.

Samprapti:

Nidana sevana

↓

Vitiation of vata and kapha

↓

Stana samshraya in gulpha sandi

↓

Severe pain in the pada

↓

Vatakantaka

Dosha	Vata
Dooshya	Mamsa, Rakta
Srotas	Raktavaha, Asthivaha

Srotodushti	Sanga, Vimargagamana
Agni	Raktadhatwagni
Rogamarga	Madhyama
Udbhavasthana	Pakwashaya
Vyakthasthana	Gulphasandhi, Padatala

Samprapti Ghataka:

Sadhya Asadhyata:

The prognosis of any disease, usually depends on several factors namely the strength of the causative agent, degree of dosha vitiation, the site of the disease, severity of the disease and the chronicity of the disease along with other factors like age, strength of the patient, lifestyle. According to acharya yogarathnakara Vatavyadhis are said to be asadhya and it should be managed without giving any assurance. According to acharya charaka, recent origin vata vyadhis without any complications in strong patients are said to be curable.

Upasaya:

There is no particular upashaya and anupashaya is mentioned for vatakantaka. Since Vatakantaka is comes under Vatavyadhi ushna upachara may gives relief to the patient. And considering nidana shrama, vishrama may give upashaya to the pain.

Investigation:

- Laboratory investigation performs to rule out underlying endocrine and inflammatory conditions.
- X-rays are required to rule out other causes of heel pain, specifically calcaneal stress fractures.
- MRI is performed on patients who are resistant to treatment, to exclude alternative diagnosis that were not observed on the X-ray, such as a calcaneal stress fracture, calcium deposit, or soft-tissue tumour.

Samanaya Chikitsa

The general treatment protocol is explained for the vyadhavyadhis in all the Ayurvedic classical texts.

The general line of treatment given for Vatavyadhis are Snehana, svedana, and basti. Charaka has advised dravyas with madhura, amla, lavana, snigdha and ushna properties and upakramas like snehana, swedana, asthapana and anuvasana basti, nasya, abhyanga, etc. Among all of the above asthapana and anuvasana basti is said to be the best treatment for vata¹¹.

Veshtana, trasana, madya, sneha siddha with deepana and pachana drugs, mamsarasa and anuvasana basti pacify the vata. In Ashtang Samgraha ritucharya of Hemant ritu is indicated in vatavyadies¹².

Vishesha chikitsa:

In Vangasena Samhita, Chakradatta, Gadanigraha and Bhaishjyarnatnavali. They have stated Rakthamokshana, Eranda thaila pana and Dahana with Soochi as line of treatment of Vatakantaka^{13,14,15}.

Siraveda is considered as a treatment of Vatakantaka by Acharya Susrutha and Vagbhata. Siraveda is done 2 Angula above Kshipramarma with Vreehimukha Shastra¹⁶.

According to Acharya Dalhana after common Vatavyadhi Chikitsa, In Charaka Samhitha, Sweda is indicated in Vatakantaka.

According to Ayurveda, Vatakantaka Vyadhi is due to vitiation of Vata with Anubandha of Kapha Dosha which is responsible for Shoola (pain), Stambha (stiffness) and Shotha (Inflammation) at the heel. Acharya Charaka described Agnikarma is best management for decreasing pain¹⁷.

2. Conclusion

Vatakantaka a disease which comes under vatavyadhi. The causes for vatakantaka is improper placing of foot on the ground, which leads to pain in heel region. It vitiates vata and due to repeated abhighata because placing foot on uneven surface.

The treatment told in classics are raktamokshana, agnikarma, sweda. Nowadays lot of scope in treating the disease and being a medium to serve humanity.

References

- [1] <https://www.mayoclinic.org/diseases-conditions/plantar-fasciitis/diagnosis-treatment/drc-20354851>.
- [2] <https://www.slideshare.net/mittal87/plantar-fasciitis-final>
- [3] <https://www.slideshare.net/scottz16/plantar-fasciitis-18129750>
- [4] Agnivesha, Charaka Samhita with Ayurvedadipika commentary edited by Vaidya yadavjitrkamji Acharya, Varanasi, Chaukambha Sanskrit Sansthana, Chikitsasthana, 28.
- [5] Sushruta, Sushruta Samhita with the Nibandhasangraha commentary of Sri Dalhanacharya and Nyayachandrika paanjika of Sri Gayadasacharya on Nidana Sthana edited by Vaidya Yadavji Trikamji Achary; Choukhamba surabharati prakashan, Varanasi; Reprint 2008, Nidana sthana, Chapter -1st, Shloka-83.
- [6] Sushruta, Sushruta Samhita, with Nibandhasangraha & Nyayachandrika commentary, edited by Yadavji trikamji, Veena G Rao etal, Ayurvedic Management of Vatakantaka (Plantarisfacitis), chaukamba surbharati prakashan, Chikitsa sthana, 4/8 2008; page. No-420.
- [7] Hari sadashiva shastri paradakar, Ashtanga hridaya with sarvanga Sundari of Arunadatta and Ayurveda raayana of Hemadri, Edition-2010, Varanasi, Chaukambha surabharati prakashan, page.no-535.
- [8] Charaka, Jadavaji Trikamji, Charaka Samhita with Ayurveda Dipika commentary of Chakrapanidatta, Chaukhamba Surbharati Prakashan, Varanasi, Edition: Reprint, 2011; Page.no- 617.
- [9] Maadhavakara, Sudarshana shaastri, Madhavanidanam with Madhukosha commentary of Vijayarakshit and Shrikanthadatta, Chaukhambha Sanskrit sansthan, Varanasi. Edition -29th, 1999; Page.no-410.
- [10] Yadavji Trikamji Acharya, Sushruta Samhita with commentary of Dalhanacharya, Nidana sthana 1, Chaukambha surabharati prakashan Varanasi 2003, Page.no-269.
- [11] Vagbhata, Ashtanga hridaya Chikitsa sthana, Arunodaya bhasha Vyakhyana Malayalam of P.M Govindan vaidyan, reprint 13, Devi book stall kodungallur, 2008; 583.
- [12] Vagbhata, Ashtanga Sangraha Sutrasthana English translation and commentary by K.B Shrikantha murthy, Chaukhambha oriyantaliya, 381.
- [13] Chakrapanidatta, Ramanath Dwivedy, Chakradatta with Vaidyaprabha commentary of Indradeva Tripathi, Chaukhambha Sanskrit Sansthan, Varanasi; Edition 4th 2002; Page.no- 133.
- [14] Govinda Das, Brahmashankara Mishra, Bhaishajyaratnavali with Vidyotini commentary of Ambikadatta Shaastri, Chaukhambha Prakashan, Varanasi; Edition 19th 2008; Page.no- 529.
- [15] Acharya Vangasena, Chikitsa sara sangraha with Hindi comentory of Dr. Rajivkumar Rai, edited by Dr Ramkumar Rai, published from Prachya prakashana Varanasi, Page.no-268-269.
- [16] Sushruta, Jadavaji Trikamji, Sushruta Samhita with Nibandhasagraha commentary of Dalhanacharya, Chaukhambha Surbharati Prakashan, Varanasi, Edition: Reprint, 2010; Page.no-381.
- [17] Anantkumar V Shekoker, "To study the efficacy of Agnikarma in Vatakantaka w.s.r. to Plantar fasciitis," AYUSHDHARA, 2016; 3(6): 919-28.