A Case Study of *Marma Chikitsa* in Tennis Elbow

Shailesh Singh,¹ Purushottam Das Sharma,² Shri Ram Sharma,³ Dinesh Kumar Sharma,⁴ Deepa⁵

1. P.G. Scholar, P.G. Department of Rachana Sharir, M.M.M. GOVT. Ayurved College, Udaipur, Rajasthan, India
2. Associate Professor, Department of Panchkarma, M.M.M. Govt. Ayurved College, Udaipur, Rajasthan, India
3. Associate Professor, Department of Rachana Sharir, M.M.M. GOVT. Ayurved College, Udaipur, Rajasthan, India
4. Assistant Professor, P.G. Department of Rachana Sharir, M.M.M. GOVT. Ayurved College, Udaipur, Rajasthan, India
5. Lecturer, Department of Rachana Sharir, M.M.M. Govt. Ayurved College, Udaipur, Rajasthan, India

**ABSTRACT:**

Tennis elbow is a painful condition and causes restricted movement of forearm which requires treatment for long period. Till date only symptomatic treatments are available in modern science like use of anti-inflammatory, analgesic drugs, steroids injection, physiotherapy, exercise etc. But none of these provide satisfactory permanent result. Long term use of modern treatment causes adverse effects. Usually, ‘wait-and-watch policy’ of treatment guideline is recommended in most of medical texts. This guideline made it worsen day by day. According to *Ayurveda*, *Snayugata vata* can be correlated with the condition of tennis elbow. In the field of *Marma Chikitsa*, this condition can be treated without oral use of any chemical compound which helps the individual to prevent adverse effect of modern medicine. Hence, in this study a case of tennis elbow (*Snayugata vata*) was treated by *Marma Chikitsa* for a period of 15 days. This therapy provided considerable relief in pain and movement of the elbow joint.

**Keywords:** *Marma chikitsa*, *Snayugata vata*, tennis elbow.

**INTRODUCTION**

Tennis elbow is a painful forearm disease that can develop as a result of non-specific inflammation near the origin of the forearm's extensor muscles.¹ It is clinically diagnosed by pain and discomfort at the lateral epicondyle of the humerus that worsens when the wrist and fingers are resisted dorsiflexed.² Tennis elbow (lateral epicondylitis) affects 1-3 percent of the population.³ The biggest occurrence is found in the young age group, specifically between the ages of 40 and 60. Between the ages of 42 and 46, the incidence rises in women to 10%,⁴⁵ Overuse of the forearm/minor trauma/unrecognized trauma,⁶ weight lifting, and other factors are all common causes of tennis elbow. Previously, the condition has been discovered in athletes, particularly tennis players.⁷ However, it is reported to affect painters, plumbers, carpenters, and drivers in modern practice. Automobile workers, cooks, and even butchers are more likely than the general population to develop tennis elbow, according to studies. The dominant arm is injured much more frequently than the non-dominant arm.

Tennis elbow can be linked to the *Ayurvedic* ailment known as *Snayugata Vata* (*S. Vata*) based on its signs and symptoms. *S. Vata* develops when the *Vata Dosha* becomes aggravated as a result of *Atichesta, Ativyayam,*
and other factors and becomes localized in the Snayu of the Kurpara Sandhi. The Vayu which commands of this function, is Vyanvayu. It is eventually unable to carry out the Kurpara Sandhi (elbow joint) and Hasta Pradesha (forearm) functions smoothly. In this region, symptoms such as discomfort, stiffness and restricted movement occurs. These symptoms may also develop due to Kaphavritta Vyana Vayu. As a result, it’s also thought to be a major role in the development of S. Vata. Anti-inflammatory analgesic medications, corticosteroid injections, physiotherapy, exercise, and other symptomatic therapies are available, each with its own set of limits and side effects. Anti-inflammatory analgesics and steroid injections are not without side effects when used long term. Currently there is no effective treatment for tennis elbow. Snehana, Upaya, Agnirana, and Bandhana are some of the therapy techniques proposed by Acharya Sushruta in Ayurveda for S. Vata.

A single case study of tennis elbow is reported here in which vitiated Dosha was pacified with the use of Marma Chikitsa. After 15 days, patient got relief from pain, stiffness, and restricted movement of right hand and elbow joint.

**CASE REPORT**

A 46-year-old female patient of Vata Kaphaja Prakriti visited Marma Chikitsa unit on 23rd September 2021 with complaints of Shoola (severe pain), Stambha (stiffness), restricted movement in lateral part of both Kurpara Sandhi (elbow joint), and Hasta, Anguli paradesha (palm) since last 03 months. Patient was unable to wear clothes and even unable to press keys of T.V. remote. There was no obvious history of trauma, except lifting of water bucket, filled pressure cooker by the patient for house hold work. On examination, it was elicited that the patient was unable to hold the object properly by both of the hands and maximum tenderness was noticed at the lateral epicondylar region of humerus with swelling noticed at both elbow joint. Further, it was observed that on full extension of elbow and resisted extension of wrist joint, maximum pain was experienced by the patient. There was a history of treatment for tennis elbow under a private practitioner for last 08 months with no significant relief. On the basis of history, the patient was diagnosed as a case of tennis elbow.

After careful assessment and examination, patient was treated with Marmachikitsa for 15 days. With this short duration of treatment protocol, patient got relief from pain and increased the strength of gripping power in both hands without any untoward effect.

**Procedure**

In this therapy, first of all it is necessary patient relax the patient. Patient should be in proper sitting posture. Because the patient was female, I started giving therapy from the left hand. For this disorder, following Marma were chosen for therapy: Talhridaya, Manibandha, Indrabasti, Kurpara, Aani, Ansa of both hands. In the procedure of Marma stimulation, each Marma was stimulated 12 times in one sitting for first 3 days and then in next 12 days, Marma was stimulated 15 times in one sitting. Patient was advised to avoid excessive household works for 15 days.

**RESULT**

In first sitting, patient got slight relief in left hand but after the 3rd sitting on 4th day patient reported magical changes in both hands. After the 8th day patient got full relief. But the therapy was given to patient for 15 days. Finally, patient can do her work without any pain and she can do every possible natural movement of hands at elbow joint.

**Reports** This therapy gives effect on improving movements of hands. Here, we are focusing only on movements and pain rather than anatomical changes. So we did only Visual Analogue Score(Table 1)

**DISCUSSION**

Tennis elbow can develop due to repeated injury and inflammation added with microscopic degenerative changes encountered at the origin point of tendon of Extensor Carpi Radialis Bravis Muscle and it makes the movements of affected arm restricted and painful. As per Ayurvedic concept, this condition may develop with the vitiation of Vata with Anubandha of Kapha Dosha (one of the responsible factors for production of Ama and Srotovaigunya). Vata and Kapha Doshas have been considered the important factors for causation of Shoth (inflammation) and Shoola (pain) in the body. To treat such condition, the Marma Chikitsa emerged in present days. Therefore, to pacify the vitiated Vata and Kapha Dosha, Marma Chikitsa was done.
CONCLUSION

Hence, this treatment modality can be prescribed as an office procedure considering its effectiveness and safe therapeutic regimen for Tennis elbow. Marma Chikitsa is also known to be effective in other cases of musculoskeletal disorders such as osteoarthritis, cervical spondylosis, lumbar spondylosis, sciatica, frozen shoulder, calcaneal spur, plantar fasciitis, carpal tunnel syndrome, trigger thumb, etc.

Acknowledgements: - Nil
Conflict of Interest – None
Source of Finance & Support - Nil

REFERENCES
Table 1 Visual Analogue Score

<table>
<thead>
<tr>
<th>S. N.</th>
<th>SYMPTOMS</th>
<th>BEFORE TRIAL</th>
<th>DURING TRIAL</th>
<th>Follow-up (AT)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0 day</td>
<td>5th day</td>
<td>10th day</td>
</tr>
<tr>
<td>1.</td>
<td>Visual analogue scale</td>
<td>9</td>
<td>6</td>
<td>3</td>
</tr>
</tbody>
</table>

1 2 3 4 5 6 7 8 9 10

Mild pain          Severe pain