ABSTRACT:

Plantar fasciitis describes as Vatkantaka in Sushrut Samhita Nidan sthan chapter 1st “Vatavyadhinidhanam”. Acc to sushruta Vankantaka is a vat-vyadhi which is situated in khudakasthi. In morden aspect we correlate Vatkantaka with Plantar fasciitis. Its common symptoms is pain in heel. Heel pain is major concern which interfere in daily routine life and occasionally presents diagnostic dispute and in many cases the management of this disease suffers from lack of awareness of the diverse treatment modalities. In plantar fasciitis new studies suggests improvement in the way of treatment. This new way of treatment helps medical practitioner (doctor, physiotherapist etc.) in Identifying and treating plantar fasciitis. It gives an appreciation of possible differential diagnoses and all treatment modalities like Panchakarma therapy(snehan, swedan, abhayang), Siravedhan, Agnikarma, physical therapy, minimally invasive treatments. Unmanageble cases treated with surgical procedure. this article on vatkantaka may help the medical practitioner in simplifying this disease treatment.

Keywords: vat-kanthak, agnikarma, heel pain, heel spur, orthotics, retro calcaneal brusitis
How to Cite the Article, Dr. Shipra Mishra, Dr. Rajesh Kumar Gupta, Effect Of Parasurgical Methods In The Treatment Of Vatakantaka – A Critical Review, IRJAY, October: 2020 Vol- 3, Issue-10; 194-200

Doi: https://doi.org/10.47223/IRJAY.2020.31024

INTRODUCTION-

Vatakantaka is a disorder describe by Acharya Sushruta in Sushrut samhita nidan sthan chapter 1st “Vatavyadhi nidhanam”. In Gulpha sandhi it is a common condition of pain which feel in khudkaasthi. Proceed with long standing work life (like Industrial work, Ticket collector, heavy weight lifting, transportation) and injury etc. are commonly affected to this disease. In ‘Vatvyadhi’ Acharya includes all the osteoarthritis diseases. Vatakantaka can be described as Plantar fasciitis in modern science. Pain is commonly seen in infra calcaneum bursitis under the heel. The plantar fascia is a netlike broad ligament which support plantar side of foot (arch of foot). Plantar fascia acts as a floor cushion for absorbing shock and helps in walking. According to Current resources this disease is more accurately termed Plantar fasciosis1 as a result of evidence of degeneration more than inflammation and disease chronicity.

Heel pain is most common illness in orthopedic OPD. Plantar fasciitis affects both sports people and sedentary life style. It affects commonly women rather than men.

CAUSE-

According to samhitas vatkantaka is a vat- vyadhi which is situated in khudakasthi. According to Acharyas Vat is a main cause for Asthi-sandhi roga.

- strain injury
- heel cords (tight Achilles tendons).
- Spend many hours standing each day
- middle age generation (40-70)
- obese persons
- Soft soles and Week arch slipper
- improper fitting of foot wear and improper placement of foot on the ground

**SYMPTOMS**-

Acc to Sushruta Samhita if foot is placed on Visham Bhumi then patient feel Vedana in khudakasthi (heel) and it is also known as Sprain Ankle. Acc to Sushruta Samhita Dalhan Tika if foot is placed on Visham Bhumi then patient feel Vedana in Pada-jangha asthi. According to Acharya Vagbhatt pain feel in gulf sandhi.

- Stabbing pain (across the plantar aspect of the foot) and Triggered by long periods of standing and pain worsen in cold weather. Sometimes feel in ankle & knee joint also when pain is worsen.

- Heel tenderness mainly in morning after wake up
- Foot tingling or burning sensation
- Limping (walk with difficulty)
- Morning stiffness (worst with the first few steps of the day or after periods of inactivity)

**DIAGNOSIS**-

1- Personal history and **physical analysis**-

a) location of pain

b) areas of tenderness in foot.

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a- Main sites of pain

b- Tenderness site in heel
- Diagnostic test-
  
  - X-ray - a section of bone (spur) pushing out from the heel bone.
  
  - MRI

**c- X-ray Finding**

**DIFFERENTIAL DIAGNOSIS**-

- Calcaneal stress fracture (small break in the heel bone)
- Tarsal tunnel syndrome (compression on the posterior tibial nerve)
- Atrophy heel bruise (atrophy of the heel pad)
- Calcaneal neuritis
- Inflammatory arthropathies
- Osteomalacia
- Paget disease

**TREATMENT-In Samhitas-According to Acharya Sushruta**-

- Agnikarma - According to Acharya Sushruta in all Para surgical

**d- MRI Finding**

procedure Agnikarma is the superior procedure. Agnikarma is best for eradication of several diseased conditions of Snayu, Sandhi and Sira in which pain is a most important symptom. That why we use agnikarma therapy for treatment of vatakantaka.

According to Sushruta Samhita Dalhan Tika-

- Siravedan karma- In Vatvyadhi acc to disease and patient carefully Siravedan karma is done. Before Siravedan procedure Snehan and Swedan are also indicated in vatakantaka.
At present scenario treatment of Vatakantaka in Ayurveda Therapy—

At present time we use panchakarma therapy and Agnikarma\(^5\) Therapy for treatment of Vatakantaka. According to many Ayurveda Acharyas Nidan Pariversion (elimination of cause) is best treatment for any disease. So firstly we can perform Smanya Vatayadhi Chikitsa for treating Vatakantaka. For this a Ayurveda practitioner can perform Snehana Karma\(^6\) (eranda tail pan), Swedan Karma (Ruksha sweda like baluka sweda) and Abhyanga. After all these vata samak processes for better result we can perform Agnikarma (which is mentioned in sushruta Samhita) and Raktavasechana karma like Siravedan Jaloka which is mentioned in Sushruta Dalhan Tika.

According to modern -

Conservative treatment

- Non-steroidal anti-inflammatory like ibuprofen or naproxen
- icing the area
- night splints (stretch foot)
- physical therapy(stretch fascia and Achilles tendon)
- rest when pain worse

- supportive shoe and insert (thick soles and extra cushioning & Arch supports can distribute pressure)

Surgical or other procedures- when conservative treatment stop working-

- Injections- In this procedure steroid administrated into most affected part like plantar fascia in heel for pain relief. After this patient should be rest at least 2 day. Proper resting may protect fascia rupture.
- Ultrasonic tissue rebuilding (exposure of injured tissues to high frequency mechanical vibrations & its repair soft tissue injury)
- Extracorporeal shock wave therapy (mainly used for musculoskeletal condition)
- Surgery- plantar fascia is detached from the heel bone only when the pain is severe and other treatments have failed.

Supportive treatment-

- Rest
- Stretching or massaging- toe stretch, foot stretch
- Arch supports
- Orthotics\(^7\)
- Night splint
- Change of shoes
DISCUSSION-

Acharya Sushruta described vatkantaka as a vatvyadhi situated in khuddkaasthi describing it as a heel pain or heel spur or ankle sprain. In this article we have discussed about vankantaka prevention and management of this by Parasurgical procedure (Agnikarma and Siravedhan karma), physical therapy and supportive techniques. Todays era due to sedentary life style many of people suffering from heel pain and ankle pain. This type of pain worsen their life style and day to day life so that proper and easy treatment is best choice for this situation. We can manage this pain for using some ayurvedic therapies like Snehan Karma, Swedan Karma, Abhayga, Siravedan & Agnikarma. These procedure are not painfull or less painfull as compare to surgical procedures and give better result. After these Ayurvedic procedure Patient don’t need bed rest and these therapies don’t affect their day to day life.

CONCLUSION-

Acharya Sushruta describe Vatakantaka as a vatvyadhi. It is a common condition of pain which feel in khudkaasthi. It mainly occurs in long standing workers. Pain is commonly seen in infra calcaneum bursitis under the heel. According to Current resources this disease is more accurately termed Plantar fasciosis. Common cause is strain injury, obese persons, improper fitting of foot wear etc. Main symptom is stabbing pain, morning stiffness and heel tenderness etc. According to Acharya Sushrut Agnikarma is best treatment for vatkantaka and according morden science firstly conservative treatment and physical therapy (as a supportive treatment) is given by medical practitioner if conservative treatment is not working properly and patient suffering from severe pain then surgical intervention is necessary for treating plantar fasciitis.

Acknowledgement :- Nil
Financial Assistant:- Nil
Conflict of interest :- Nil
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