



# Understanding Apachi with Special reference to Lymphoma

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## Abstract

*Apachi* is a disease presenting itself with knot-like swelling occurring in different parts of the body. It could be in response to inflammatory processes going in the body as in case of the *Rajyakshma*, *Visarpa* and others which is commonly termed as reactive lymphadenitis. Or it could be due to malignant pathology such as Lymphoma. The understanding of the same in Ayurveda is understood under various types of *Apachi* in relation to *Granthi*, *Arbuda*. The treatment of the same includes multitude of treatment depending on the various aspects of the disease ranging from Surgical as well Medical Management. Judicial use of the treatment ensures good results.

Keywords: Apachi, Granthi, Arbuda, Reactive Lymphadenitis, Lymphoma

## Introduction

*Apachi* is the Nodular swelling that occur in any part of the body. *Apachi* usually occur in the joint areas of the body. This can be compared to the Lymphadenitis due to various causes in allied sciences. In a prevalence study of lymphadenitis in india Out of the 99 selected patients, 45% of subjects were diagnosed with tuberculous lymphadenitis, followed by 27% with reactive lymphadenitis, 16% with non-specific lymphadenitis, 9% with metastatic deposits, and 2% with suppurative lymphadenitis.

The word meaning of *apachi* is that *granthi* which increases in its size. *Granthi* means knot. Here the meaning of the *granthi* is that knot like structure present in the body. But specifically in the context of the *apachi* *granthi* refers to knot-like structures present in the joint areas of the body<sup>1</sup>. *Apachi* are nothing but *granthi* which are round or oval in shape, firm and soft and induce minimum pain on palpation<sup>2</sup>. Physiologically there are knot-like structures in the body which we call them as

lymph nodes which are the gateways of the lymphatic circulations which are present in the various parts of the body. Some lymph nodes are present deep inside the body which are not palpable but many are present in the periphery and superficially that is in the joint areas like axillae, neck, temporomandibular joint, inguinal area near hip joint<sup>3</sup>.

Again *Apachi* is defined on its pathophysiological state as the *granthi* that which does not attain Suppuration but drains and vanishes or subsides and again occurs at same place or other place and chronic persisting<sup>4</sup>. Further it is said that the variant form *Apachi* which is in the form of garland like interconnected around the neck is called *Gandamala*. Thus it is understood that which is enlarged lymph *granthi* in one area but may have association with another and not in the neck in the form of garland is identified as *Apachi*<sup>5</sup>.

There are nearly 600 lymph nodes in the body, varying in size which may range from less than 1 mm to 1 to 2 cm in size. These lymph nodes mechanically filter the lymph stream, removing cellular debris, foreign particles, and bacteria which may have gained access to the lymph from the various structures drained by the lymph channels. In the normal individual very few lymph nodes are palpable, even on careful physical examination. Some lymph nodes which are present deep inside such as mediastinal lymphoma and coeliac group of lymph nodes are only visible on radiological or sonological investigation<sup>6</sup>.

## Classification

*Apachi* is classified into different varieties depending on various parameters such as involvement of Dosha, Site of the occurrence & depending on prognosis. Enlargement of the *granthi* may be purely local, or it may be widespread but always the pathological process will be occurring because of Morbid *Shleshma* and *Mehda Dhatu*. But many times there may be the possibility of involvement of the *Pitta* and *Vata* producing its own symptom which makes it easy for the diagnosis<sup>7</sup>.

Such *Apachi* may be accompanied by all the signs of acute inflammation, such as tenderness and firm and extremely hard fuse or matted together are the signs of involvement of the morbid *vata* involvement<sup>8</sup> and also considered to be dry skin over the nodes and present itself with various pain<sup>9</sup> which may be found in perilymphangitis. Inflammation of the skin overlying the *apachi* identified by various discoloration is usually indicative of an involvement of *Pitta*<sup>10</sup>. Similarly there may rapidly enlarging *Apachi* which likely to be tender usually reflects a involvement of *Pitta* which may be in response to antigen or actual infection within the node and may even ensure rupture of the *apachi* and the formation of a sinus and oozing which is indicative involvement of *Kapha* and *Medha*. The dominance of morbid *Kapha* in pathology may have this disease persisting and adds to its chronicity where *Apachi* will be hard and does not undergo suppuration and most of the time they will be identified deep inside the body<sup>11</sup>. They are Nontender nodes which feel hard and matted together usually contain metastatic carcinoma or a very aggressive intrinsic neoplasm such as reticulum cell sarcoma<sup>12</sup>. Some lymphoma which are situated deep inside the body, This type of

Lymph nodes are understood under the category of non nodal lymphadenopathy mostly identified as mediastinal lymphomas or any other lymphoma of similar category.

Thus *Apachi* can be classified further into two types

1. *Gooda Apachi*
2. *Vyakta Apachi*

1. *Gooda Apachi*: The *Sphota* shotha that spread in the body are considered under *Visarpa*. *Visarpa* can spread faster or slower. The slower ones are those which have predominance of *Kapha dosha*. Those are *Kaphaja Visarpa* and *Granthi Visarpa*. Among them *Granthi* is one phenomenon and it is further termed as *Apachi*<sup>13</sup>. The same is considered as *Goodha Apachi* and are identified deep inside the body and are not palpable<sup>14</sup>.

In the context of *Granthi Visarpa*, involvement of the *Rakta* has been included (*Utsanna Rakta*) which is understood to be the origin of the lymphoma from the Hematopoietic System. This depicts the pathology of the extranodal lymphoma. The extranodal lymphoma can be identified in the chest, brain, orbit, abdomen etc other than nodal areas<sup>15</sup>.

2. *Vyakta Apachi* : The former being mentioned in the classics as that which is hidden. By applying the "*Arthapatti Nyaya*" it can be deduced that other than *Gooda Apachi* all other are *Vyakta Apachi*. These are the *Apachi* that are visible on the surface of the body and are present in the peripheral part of the body as explained earlier such as Axilla, Inguinal area, Temporomandibular joint area and most of them are identified in the joint area<sup>16</sup>.

These are the nodal lymphoma which are identified on the surface of the body. Involvement of the spleen in Hodgkin's Disease is considered as nodal disease but in the case of non-Hodgkin lymphoma the spleen is regarded as an extranodal site<sup>17</sup>.

To sum up *Apachi* is classified into 4 types based on the morbidity of the *Dosha*, they are:

1. *Vataja Apachi*
2. *Pittaja Apachi*
3. *Kapahaja Apachi*
4. *Medoja Apachi*

Here *Medoja Apachi* is also due to involvement of the morbid *Kapha dosha* except it is very soft in consistency<sup>18</sup>. Such enlarged lymph nodes are compatible with Cystic Lymphangiomas.

## Differential diagnosis

All the nodular growth happening in the body is considered for the differential diagnosis of the *Apachi*. In the classics all similar diseases are put together under and differentiation has been elaborated. *Granthi*, *Galaganda*, *Gandmala* & *Arbuda* are the differential diagnosis for the *Apachi*.

1. *Granthi* : are those nodular growths which are round, hard and have thick exudates inside when cut open and they can occur anywhere in the body without following any rule. This is a

very important differentiating feature where *Apachi* will occur in the *sandhi Pradesha*<sup>19</sup>. The various nodular cystic lesions such as dermoid cyst, Lipomas, Pillar, Dermato fibromas can be considered under *Granthi*.

2. *Galaganda* : is the condition where a solitary nodular growth appears on any one side of the neck and most of the time it is rounded protruding out from the neck<sup>20</sup>. This is confined to the neck region, but *Apachi* is not.
3. *Gandamala* : It comprises two words *Ganda* refers to Neck and *Mala* refers to garland. The condition refers to multiple nodular growth occurring only in the neck in the form of garland<sup>21</sup>.

## Nature & Prognosis of the Apachi

*Apachi* is a disease due to predominance of the involvement of *Kapha Dosha* and *Medo Dhatu*. Like most of the diseases with involvement of the *Kapha Dosha* is considered to be long standing. Similarly here it is considered to be Chronic in nature<sup>22</sup>. *Apachi* that specifically causes difficulty in breathing, Pain, cough, Fever and Vomiting is considered to be incurable or with poor prognostic Value.

## Treatment

The Treatment of *Apachi* include *Shodhana*, *Shamana* & *Shashtra Karma*. Depending on the *Roga Bala* and *Rogi bala*, above said treatment can be selected.

1. *Shodhana Karma*: the purificatory procedure such as *Vamana*, *Virechana*, *Nasya* is best indicated in the *Dushta Apachi*<sup>23</sup>. Here it can be considered as the infected lymphedema or lymphadenopathy secondary to the infection such as reactive lymphedema. *Vamana* can be given with *Jeemutaka*(*Luffa echinata* Roxb), *Koshataki*(*Luffa acutangula*) etc. *Virechana* is administered by *Trivrut*(*Operculina turpethum*), *Danti*(*Baliospermum montanum*) & *Dravanati*(*Chlorophytum tuberosum*). *Murdha Virechana* is best administered with *Kaidarya*(*Murraya Koenigii*), *Bimbi*(*Coccinia indica*) & *Karaveera*(*Nerium Indicum*) Processed oil. *Vairechanika Nasya* is administered with *Shakitaka Swarasa* Processed oil. *Madhuka*(*Madhuca longifolia*), *Apamarga*(*Achyranthes aspera*) Kalka can be used for *Avapeeda Nasya*.
2. *Shamana*: Various external as well as internal methods of the *Shamana* treatment have been advised. *Parishechana* with processed *Gomutra*(cow's Urine), *Dashamoola Taila*. Lepa with *Bibhitaki*(*Terminalia bellirica*) *Tvak kalka*, *Bhallataka*(*Semecarpus anacardium*) and *Kasisa*(hydrous ferrous sulphate) *lepa* & *Ashwagandha*(*Withania somnifera*) *Lepa*. And in the same context *shastra karma* and *vrauna Chikitsa* is also mentioned<sup>24</sup>. After the *shodhana* or the *shastra karma* one can give *paneeya Kshara* such as *Ingudi*(*Terminalia catappa*) *kshara* and *taila* which is prescribed in *Shleepada*<sup>25</sup>.
3. *Shashtra Karma*: As *apachi* is due to morbidity of the *Medo Dhatu*, *Granthi Chikitsa* can be followed where one has to check for whether it is infected or not. If *Apachi* is not infected then *Shastrakarma* can apply for the removal of the *Apachi* and if infected one can it is opened

and drained with *Gomutra Prakshalana* and then packed with *kshara taila* processed with *Sovarchika*, *Yava*(*Hordeum vulgare*) *Kshara*, *Saindhava*(*Rock Salt*). Further *Dvikaranja taila* is used for the *Vrana Ropana*<sup>26</sup>.

## Conclusion

*Apachi* is the disease which is considered to *tridosha pradhana Vyadhi* with predominant morbidity of the *Kapha Dosha and Medo Dhatu*. Usual site of occurrence is the *Sandhi Pradesha* which is also considered to be *Kapha Sthana* and it is also the area for the various regional Lymph Nodes. The *Granthi* Occurring in these areas are considered as the *Apachi*. According to *Chakrapani* it is Spreading in nature hence considered as *Granthi Visarpa*. From the pathological point of view, Involvement of the Hematopoietic system and enlargement of the lymph nodes is called Lymphoma and related conditions. It can be identified as Nodal and Extranodal Lymphoma which is understood as *Goodha Apachi and Vyakta Apachi*. Further it is classified depending on the Lakshana, *Vataja*(perilymphangitis), *Pittaja*(Reactive Lymphedema), *Kaphaja and Medoja*(Hodgkin's and Non Hodgkin's Lymphoma). Treatment of the *Apachi* follows three main modalities, *Shodhana, Shamana & Shastra Karma*.

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