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ROLE OF AYURVEDIC NEURO THERAPY IN LUMBAR SPINE STENOSIS: CASE REPORT

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ABSTRACT

The human spine is held together by a series of ligaments which add strength, stability, and flexibility. These include the thoracic ligaments, five lumbar ligaments, five sacral, and coccygeal ligaments, which help to maintain the alignment and function of the vertebral column. In today's age, lumbar spinal injury and disease incidence is on the rise. One particularly notable example is a degenerative disease known as Lumbar Spinal Stenosis (LSS), characterized by the narrowing of the lumbar spinal canal and compression of lumbar spinal nerve roots. Symptoms include lower back pain, tingling, stiffness, difficulty in walking and numbness, etc. Pain tends to worsen when standing or walking, and ease with sitting or bending forward. Through a classical Ayurveda lens, Spine Stenosis coincides closely with the Ayurvedic condition known as Kati Grah, which is considered as Vata Nanatmaja Vikara, characterized primarily by Grah and Stambha all in relation to the bony and neurological muscular structures. The vitiation of Vata Dosha leads clinical manifestations such as pain, disruption of mobility of the affected structure and neurological symptoms, etc. This article presented a case report of woman came with severe low back pain with stiffness, tingling, numbness, radicular pain in both legs, and decreased ability to walk. Imaging showed narrowing of the lumbar spinal canal in the anteroposterior dimensions causing nerve root compression leading to ischemia in the lumbar region, intervertebral disc herniation and hypertrophy of paravertebral joints. Ayurvedic Neurotherapy was employed to treat this case of Lumbar Spine Stenosis. This case study observed improvement in circulation, reduction in pain and inflammation after the implementation of prescribed Ayurvedic Neurotherapy.

KEYWORDS: Lumbar Spine Stenosis, Kati Grah, Neurotherapy, Vata Nanatmaja Vikara.

INTRODUCTION

Sedentary modern lifestyle and demanding work culture creates many health issues like lumbar spine stenosis. This condition is considered as one of the most common causes of severe lower back pain. Many of the world's population suffer lower back pain with associated pain down the legs that is often exacerbated with increase in spinal load and rotation. The clinical symptoms generally involve pain in the back and buttock region, unilateral or bilateral low back pain, numbness or parasthesia in the back, leg, thigh, or foot region, and in the most severe cases, loss of bladder and bowel control. Etiological contributors to lumbar spine stenosis include age, poor

posture, spinal trauma, and congenital defects, etc. The key clinical findings include back pain, nerve root compression, sensory disturbances, trouble walking and disability. Diagnosis generally made through physical examination, medical history and imaging investigations. Repeated physical stress has increases incidences of such cases in recent years.

According to Ayurveda, lumbar spine stenosis is classified as a *Vata-stha*, falling under the general classification of *Vata Nanatmaja Vikara*. The situation occurs with the presence of vitiated *Vata Dosha* localized in the *Parshva Pradesha* along with the

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manifestation of symptoms consistent with the disorder. Because the lumbar region is the main site of *Vata*, vitiated *Vata* aggravates the *Sphik*, *Kati*, *Uru*, *Janu*, *Jangha* and *Pada*. The main symptoms as described by Ayurvedic principles are depicted in **Figure 1**.

Ayurvedic Neurotherapy represents a boon for those who had lost hope in conventional medical treatment. Ayurvedic Neurotherapy functioning as a separate, unique, and integrative system of healing based upon traditional Ayurvedic principles, including Dinacharya, Ratricharya, Ritucharya, Achar Rasayana, Ahara, Nidra and Aushudi Panchakarma. This therapy is based on solid principles of human anatomy and physiology and unites ancient Ayurvedic wisdom with current ideas about the nervous system and health of the spine. While it is primarily aimed at addressing lifestyle-related disorders and neuromuscular conditions, especially those involving the nerves and spine, Ayurvedic Neurotherapy works on the whole body including the brain by restoring the flow of Prana Vayu and optimizing the seven Chakras.

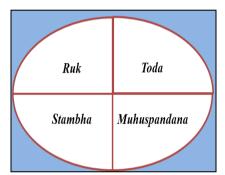


Figure 1: General symptoms of lumbar spine stenosis according to Ayurveda.

Role of Ayurvedic Neurotherapy

Directed therapeutic postures might also be used as an important part of the therapy, such as *Sarpasana* and *Bhujangasana*, which help to support Ayurvedic Neurotherapy and improve post-therapy outcomes. Directed therapeutic postures improve spinal pliability and elasticity, build vertebral column strength, and help support nerve regeneration, all of which can produce exceptional results and outcomes in the management of spinal and vertebral disorders.

Mechanism of Action

Ayurvedic Neurotherapy works by increasing the circulation of oxygen throughout the body's tissues, stimulating metabolic activity, and stimulating cellular regeneration, which leads to the establishment of new tissue, improved organ function and increase overall vitality and health in the body. The therapy improves immune response and activates the innate self-healing mechanisms in the body. The various techniques of Ayurvedic Neurotherapy are depicted in **Table 1**, which offers benefits in different neurological and painful conditions.

Table 1: Various techniques of Avurvedic Neurotherapy.

Technique	Procedure	Benefits
Hot Cupping	Ghati Yantra are heated to create a vacuum and applied on affected areas.	Relieves pain, reduces inflammation, improves blood flow, metabolism, and promotes deep tissue healing.
Vacuum Cupping	Performed using vacuum guns for 3 minutes to create suction.	Eases pain, enhances circulation and metabolism, reduces inflammation, and promotes relaxation.
Agnikarma	Heated <i>Ashtadhatu Shalaka</i> applied to pain sites in dots or lines.	Destroys pathogens, relieves severe pain, controls bleeding, and prevents recurrence.
Basti Therapy	Dough ring filled with warm medicated oil placed on affected area for 40–45 min.	Relieves stiffness, nourishes tissues, enhances nerve and blood function.
Raktamokshana	Vacuum cupping or leech application to remove impure blood.	Detoxifies, improves circulation, relieves pain and inflammation, promotes healing.
Snehana Abhyanga	Performed using thumb tips and palms with medicated oils.	Opens nerve blockages, reduces pain, improves mobility and flexibility.
Swedana	Hot medicated steam applied via tubes over the body.	Opens pores, pacifies Vata, relieves stiffness, and restores vitality.
Lumbar Spine Therapy	Specialized Ayurvedic Neurotherapy for spinal stenosis.	Reduces pain and compression, restores flexibility, and improves nerve function

This article presented a case report of woman came with symptoms of Lumbar Spine Stenosis and successfully

treated with Ayurvedic Neurotherapy as mentioned below.

CASE REPORT

The 46-year-old woman came from Ranchi, Jharkhand with the presentation of severe back pain, numbness, stiffness, inflammation and difficulty in sitting and walking. Her dignosis included X-ray, MRI and CBC which showed lumbar spine stenosis with narrowing of the spinal canal with diameters; L3–L4: 0.67 mm, L4–L5: 0.52 mm and L5–S1: 0.76 mm, as well as nerve root compression and obesity of joints and ligaments.

Treatment Protocol

The treatment plan involved Ayurvedic Neurotherapy (Lumbar Therapy) administered twice daily for seven days with both oral medications and a dietary regimen. The prescribed medications were Cap Nerobhi Plus (1 BD), Tab *Amarsundari Vati* (1 BD), *Vishmushtyadi Vati* (1 BD), AO3 oil (at night with milk) and *Dashmool Kwath* (taken in morning and night).

Procedural Protocol for Ayurvedic Neurotherapy (Lumbar Therapy)

The patient was laid in a prone position on the therapy table while a pillow was placed under the abdomen to help with spinal positioning. The next step consists of gentle *Abhyanga* over the back for approximately two minutes while medicated oil, was utilized for enhanced circulation, relaxation of muscles, and preparation of the body for interventions. The next procedure was *Jwala Dhvani Yantra Vidhi*, which was conducted on the back, arms, and legs for 5–10 minutes. This involves using heated, vacuum cups to create suction by flame, relieving tension and improving metabolic function of tissues. Vacuum Cupping was engaged to facilitate detoxification, lymphatic drainage, and muscle relaxation

using suction devices. *Sukshma Agnikarma*, *Basti* therapy and *Swedana* also recommended as treatment process for relieving disease symptoms.

Dietary Advices

The recommended diet was alkaline-based food stuffs; mostly raw, green leafy vegetables, fresh fruit, while avoiding salty, sour, fried, processed and packaged foods.

Pain Assessment Score

Pain Scale (VAS Score)	Pain Intensity
0 - 3	Mild
3 – 5	Moderate
5 – 10	Severe

RESULTS AND OBSERVATIONS

On assessment with the Visual Analog Scale (VAS), she showed marked improvement; her pain level was reduced from 9 (severe) to 1 (mild), stiffness and inflammation were completely resolved, and she was able to regain the ability to walk and sit without discomfort (Table 2). The numbness completely resolved. An interval MRI at the three-month mark displayed an increased spinal diameter (L3-L4: 21.6 mm, L4-L5: 11.4 mm, L5-S1: 9.5 mm) with complete resolution of nerve root compression and hypertrophy of joints and ligaments (Table 3). Collectively statistical analysis demonstrated a sharp reduction in all symptoms and a marked improvement in lumbar spine anatomy (Figure 2), confirming the benefit of Ayurvedic Neurotherapy in the management of lumbar spine stenosis.

Table 2: Effects of therapy on disease symptoms.

Therapies Evaluation Symptoms	Before Ayurvedic Neurotherapy	After Ayurvedic Neurotherapy (at 7 th day)
Pain(VAS Scale)	9	1
Stiffness	Grade 2	absent
Inflammation	Grade2	Absent
Difficulty in walking	Not able to walk	Freely walk without any difficulty
Difficulty in sitting	Pain while sitting	absent
Numbness	Present	Absent

Table 3: Effects of therapy on anatomical parameters of disease.

MRI Reports	Before Ayurvedic Neurotherapy	After Ayurvedic Neurotherapy (MRI after 3 months)
	L3-L4-0.67mm	L3-L4-21.6mm
Spine diameter	L4-L5-0.52mm	L4-L5-11.4mm
	L5-S1-0.76mm	L5-S1-9.5mm
Nerve Root Compression	Present	No compression
Hypertrophy of joints and ligaments	Present	No signs of hypertrophy

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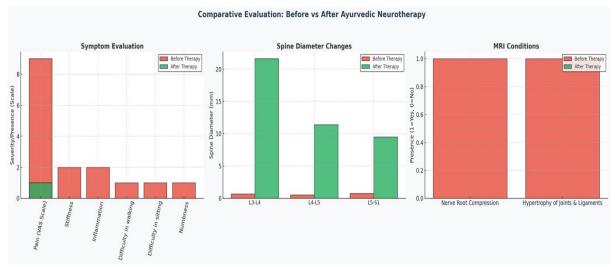


Figure 2: Comparative evaluation before and after treatment.

DISCUSSION

Notable progress was documented in both the physiological and anatomical features of lumbar spine stenosis case. The patient initially evaluated on grading scale when reporting significant pain. However, there was progressive relief of pain when reporting mild (considered 1 to the scale) pain afterwards. Before treatment, the patient had limited joint movement (stiffness), numbness, and felt pain radiating into the legs. Following a regimen of Ayurvedic Neurotherapy for seven days, the patient was able to demonstrate improved flexibility, greater smoothness of movement, demonstrated therapy's ability to manage the pain and restore functional movements. Three months later, MRI studies revealed significant increases in spinal diameter that were achieved through Ayurvedic Neurotherapy without surgical intervention, further confirming the effectiveness of Ayurvedic Neurotherapy in treating lumbar spine stenosis. In summary, the MRI findings demonstrated complete resolution of nerve root compression, with hypertrophy of the joints and ligaments completely resolved, indicating that degenerative and inflammatory changes could reverse.

CONCLUSION

In this case the diagnosis and treatment of lumbar spine stenosis was made using the principles of Ayurvedic Neurotherapy and the patient underwent a defined Ayurvedic Neurotherapy program two to three times a day for a period of seven days. The therapy was shown to be highly effective for spinal compression disorders. In just a week's time, there was a remarkable decrease in pain (the VAS score dropped from 9 to 1) while stiffness, inflammation, numbness, and mobility limitations disappeared, demonstrating clinical efficacy in the treatment.

Follow up MRI three months after therapy showed that the diameters of the spinal canal increased significantly (L3–L4: 0.67 mm to 21.6 mm; L4–L5: 0.52 mm to 11.4 mm; L5–S1: 0.76 mm to 9.5 mm) and that any nerve root

compression had come completely. Furthermore, there was norm towards resolution of joint or ligament hypertrophy. This suggests that Ayurvedic Neurotherapy results not only in relief of symptoms, but also in structural recovery. Thus, it could be viewed as a highly efficient mode of treatment for spinal disorders, including lumbar spinal stenosis.

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