

**MANYASTAMBHA AND ITS MANAGEMENT USING AYURVEDA CHIKITSA SIDDHANTA****<sup>1</sup>Vd. Shankar Mane, <sup>2</sup>Vd. Deepak Parida, <sup>3</sup>Vd. Shital Mane**

<sup>1</sup>Ph.D. (Sch.), Dept. of Panchakarma, Loknete Rajarambapu Patil Ayurvedic Medical College and Hospital, Post Graduate Institute and Research Centre, Islampur, Dist. Sangli, Maharashtra, India.

<sup>2</sup>HOD and Professor, Dept. of Panchakarma, Loknete Rajarambapu Patil Ayurvedic Medical College and Hospital, Post Graduate Institute and Research Centre, Islampur, Dist. Sangli, Maharashtra, India.

<sup>3</sup>Asso. Professor, Dept. of Rognidan Evam Vikriti Vigyan, Hon. Shri Annasaheb Dange Ayurvedic Medical College, Post Graduate and Research Center, Ashta, Dist- Sangli, Maharashtra, India.

**\*Corresponding Author: Vd. Shankar Mane**

Ph.D. (Sch.), Dept. of Panchakarma, Loknete Rajarambapu Patil Ayurvedic Medical College and Hospital, Post Graduate Institute and Research Centre, Islampur, Dist. Sangli, Maharashtra, India.

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**ABSTRACT**

Manyastambha (Cervical Spondylosis) a Vatavyadhi described in Ayurveda is characterized by Manya Graha (Stiffness) and Shoola (Pain), significantly impairing quality of life. It arises from vitiated Vata or Vata-Kapha Dosha due to lifestyle, dietary, and psychological factors. This review consolidates classical Ayurvedic concepts, etiopathogenesis, clinical features, and management approaches. Ayurvedic management emphasizes Nidana Parivarjana, Shamana, Panchakarma/Shodhana, and Rasayana therapies, offering a holistic framework for addressing root causes and preventing recurrence. Integrating these principles can provide sustainable, patient-centered solutions for managing Manyastambha.

**KEYWORDS:** Ayurveda, Vatavyadhi, Manyastambha, Cervical Spondylosis, Panchakarma.**INTRODUCTION**

Most of the people in the modernized society are living a busy and stressful life. The advancement of busy professional and social life comprises the improper diet, improper sitting and standing posture in house and in offices or factories, shift duties, travelling etc., along with the need of the hour (Lockdown in pandemic) and rising trend in young age group; using laptop, smart phones, sedentary habits, poor body posture.

As all these factors create undue pressure and stress injury to the spine; which plays an important role in manifestation of degenerative disorder. Cervical Spondylosis is a term that encompasses a wide range of progressive degenerative changes that affect all the components of Cervical spine i.e. intervertebral discs, facet joints, joints of Luschka, ligamenta flava and laminae. It commonly presents as pain and stiffness in neck, radiating pain, tingling etc.

In the general population the point prevalence of neck pain ranges from 0.4% to 41.5%. The 1 year incidence

ranges from 4.8% to 79.5% and life time prevalence may be as high as 86.8%.<sup>[1]</sup> In a study, the prevalence of Cervical Spondylosis was 13.76%. Moreover it was higher in females than males (16.51% vs. 10.49%). The highest prevalence was in the age group from 45 to 60 years old.<sup>[2]</sup>

The description which resembles with Cervical Spondylosis is not available precisely as a separate disease entity in any of the major Ayurvedic texts. Any degenerative type of disorder in body can be considered under the Vata vyadhi. As in Cervical Spondylosis there is pain, stiffness in the neck etc, the same Lakshanas like Stambha etc seen in Manyastambha<sup>[4]</sup>; so Cervical Spondylosis can be considered under Manyastambha.

The Manyastambha is the clinical entity in which the back of the neck becomes stiff or rigid & movements of neck are restricted due to Shleshmanavritta Vata told by Sushrutacharya.<sup>[5]</sup>

मन्यास्तम्भं प्रकुरुते स एव श्लेष्मणावृतः॥ (सु.नि.१/६७)

### Review Method

The review based on Samhitas (Brihatrayi & Laghutrayi etc.) and along with their Tika (commentaries), supplemented by relevant secondary sources and published literature Manyastambha, Cervical Spondylosis etc. This Review comprises of Hetu, Purvarupa, Rupa, Upashaya & Anupashaya, Samprapti, Chikitsa/ Chikitsa Siddhanta of Manyastambha.

### Etiopathogenesis (Hetu) of Manyastambha

Manyastambha results from vitiation of Vata Dosha in association with Kapha or separate entity only with Vata Dosha as Nanatmaja Vata Vyadhi.<sup>[6]</sup> A classical text identifies multiple Nidanas differentiated in Samanya and Vishesh Hetu.

#### • सामान्य वातव्याधी हेतु<sup>[7]</sup>

रुक्षशीताल्पलघ्वन्नव्यवायतिप्रजागरैः।  
विषमादुपचाराच्च दोषामृक् स्रवणादति॥  
लङ्घनप्लवनात्यध्वव्यायामतिविचेष्टितैः।  
धातुनां संक्षयाच्चिन्ताशोकरोगातिकर्षणात्॥  
दुःखशय्यासनात् क्रोधाद्द्विवास्वप्राद्भ्रयादपि।  
वेगसन्धारणादामादभिघातादभोजनात्  
मर्मावाधाद्गोष्ट्राश्रयशीघ्रयानापतंसनात्।  
देहे स्त्रोतांसि रिक्तानि पुरयित्वाऽनिलो बलि॥  
करोति विविधान् व्याधिन् सर्वाङ्गैकाङ्गसंश्रितान्॥  
(च.चि.२८/१५-१९)

Likewise detail Hetu's explained by Brihatrayee & Laghutrayee. We can conclude that Samanyaja Vataprakopaka Nidana can be broadly classified into four groups;

- Aharataha (diet factors) like Ruksha, Sheeta, Laghu Ahara etc.
- Viharataha (behavioral factors) such as Atiprajagarana, Vikrit Asana etc.
- Mansika (mental factors) means Krodha, Bhaya etc
- Anya Hetu's (miscellaneous causes) are Abhighata, Vega sandharana etc.

#### • ववशेष मन्यास्तम्भ हेतु<sup>[8]</sup>

दिवास्वप्नासनस्थानविकृतोर्ध्वनिरिक्षणैः।  
मन्यास्तम्भं प्रकुरुते स एव  
श्लेष्मणावृतः॥ (सु.नि.१/६७)

### The Specific Hetu's mentioned by Acharya Sushruta as follows;

- Diwaswapnam - Diwaswapnam causes Kapha prakopa which is involved in Samprapti of Avrittatva of Vata leads to Manyastambha.
- Vikrita Asana - which means the postural disturbance specifically with reference to sitting. Persons sitting or even lying down in bad postures, which in turn leads to improper positioning of cervical vertebrae, this puts uneven pressure over the spinal nerve roots producing different signs and

symptoms.

- Urdwa Nirikshana - Dalhana clarifies that by looking upwards continuously is vakra position of manya leads minor trauma and precipitates the symptoms. In Charaka Samhita abhighathwam of siras has told one of the reasons for Manyastambha.

### Premonitory Symptoms (Purvarupa)<sup>[9]</sup>

अव्यक्तं लक्षणं तेषां पूर्वरूपम् इति स्मृतम्॥ (च.चि.२८/१९)

According to Ācārya Charaka, before a disease fully manifests with clear and definite clinical features, it passes through an early phase in which symptoms are vague, mild, and non-specific. These early, incompletely expressed symptoms are termed Pūrvarūpa. At this stage, the Doṣas are beginning to get vitiated, but the disease has not yet attained its full expression. Hence, the symptoms do not clearly indicate a particular disease, yet they serve as a warning signal of an impending illness.

### Clinical Features (Rupa)

#### • सामान्य वातव्याधी रूपः<sup>[10]</sup>

सङ्कोचः पर्वणां स्तम्भो भेदोऽस्थानां पर्वणामपि॥  
लोमहर्षः प्रलापश्च पाणिपृष्ठशिरोग्रहः।  
खाड्यपाङ्गुल्यकुब्जत्वं शोषोऽङ्गानामनिद्रता॥  
गर्भशुक्ररजोनाशः स्पन्दनं गात्रसुसता।  
शिरोनसाक्षिजत्रुणां ग्रीवायाश्चापि हृण्डनम्॥  
भेदस्तोदातिराक्षेपो मोहश्चायास एव च।  
एवंविधानि रूपाणि करोति कुपितोऽनिलः॥ (च.चि.२८/२०-२३)

This verse explains the general signs and symptoms of Vāta disorders as described by Ācārya Charaka. When Vāta doṣa becomes aggravated, it affects the musculoskeletal, nervous, and systemic functions of the body, producing symptoms such as stiffness and constriction of joints, rigidity, piercing or splitting pain in bones and joints, gooseflesh, tremors, numbness, spasms, and various types of pain.

It may lead to lameness, paralysis, and deformities like hunchback, wasting of body parts, insomnia, fatigue, and mental disturbances such as confusion or irrelevant speech. Involvement of the head, neck, sense organs, and back results in pain and stiffness in the head, eyes, nose, neck, and shoulders, while impairment of reproductive tissues may cause loss of semen, menstrual irregularities, or pregnancy-related issues. Thus, the verse concludes that all such degenerative, painful, and neurological manifestations are produced by an aggravated Vāta Doṣha.

#### • विशेष मन्यास्तम्भ रूप<sup>[11]</sup>

मन्ये संश्रित्य वातोऽन्तर्यदा नाडीः प्रपद्यते।  
मन्यास्तम्भं तदाकुर्यादन्तरायामसंनितम्॥  
अन्तरायम्यते ग्रीवा मन्या च स्तम्भ्यते भृशम् ॥  
(च.चि.२८/४३-४५)

The specific clinical features of Manyastambha (neck

stiffness) caused by aggravated Vāta Doṣha. When vitiated Vāta localizes in the Manyā region (the lateral parts of the neck) and enters the internal channels and nerves, it produces Manyāstambha, a condition characterized by severe stiffness and rigidity of the neck. Due to this involvement, the neck (grīvā) and the manyā region become tightly constricted and painfully stiff, leading to marked restriction of neck movements, as if the neck is being forcibly held or pulled inward. The verse emphasizes that this intense stiffness and restricted mobility are the result of Vāta-induced internal contracture (Antarāyāma) affecting the neck structures.

**Classical descriptions and modern observations align in highlighting**

- Neck pain and stiffness
- Reduced range of motion
- Heaviness or rigidity in the cervical region
- Radiation of discomfort to shoulders or occipital area
- Muscle tenderness and spasm
- Occasionally, associated headaches
- In severe cases, nerve root involvement may present as radiating pain, paresthesia, or mild weakness in upper limbs.

**Pathogenesis of Manyastambha (Samprapti)**

- सामान्य संप्राप्ति:<sup>[12]</sup>

देहे स्रोतांसि रिक्तानि पूरयित्वाऽनिलो बली।  
 करोति विविधान् व्याधीन् सर्वाङ्ग एकाङ्ग संश्रितान्॥  
 (च.चि.२८/१८-१९)

The pathogenic role of aggravated Vāta doṣa in the causation of diseases. Ācārya Charaka states that when

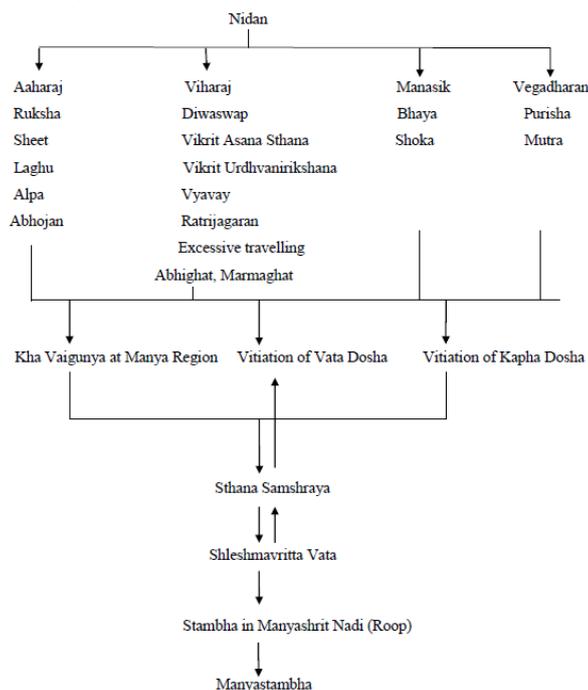
Vāta (Anila) becomes powerful and aggravated, it tends to occupy and fill the empty or depleted channels (rikta srotāṁsi) of the body. Because of its mobile, subtle, dry, and penetrating nature, aggravated Vāta easily enters these weakened or vacant channels and tissues, disturbing their normal functions. As a result, Vāta produces a wide variety of diseases, which may involve the entire body (sarvāṅga) or may be localized to a single organ or limb (Ekāṅga). This verse highlights that tissue depletion and channel emptiness create a favorable environment for Vāta aggravation, and once lodged, Vāta becomes the primary cause of degenerative, painful, neurological, and functional disorders, either generalized or localized in nature.

- विशेष संप्राप्ति<sup>[13]</sup>

मन्ये संश्रित्य वातोऽन्तर्यदा नाडीः प्रपद्यते।  
 मन्यास्तम्भं तदाकुर्यादन्तरायामसंनितम्॥  
 (च.चि.२८/४३)

The specific pathogenesis (Viśeṣa samprāpti) of Manyāstambha (neck stiffness) as According to Ācārya Charaka, when Vāta Doṣha becomes aggravated and localizes in the manyā region (the sides of the neck), it enters and affects the internal nāḍīs (channels, nerves, or pathways) present there. Due to its drying, constricting, and contractile properties, the aggravated Vāta produces a condition of internal contraction (Antarāyāma), resulting in Manyāstambha, which is characterized by marked stiffness, tightness, and restricted movement of the neck. Thus, the verse highlights that the lodging of vitiated Vāta in the neck channels is the key mechanism responsible for the development of neck stiffness in Manyāstambha.

**Hypothetical Samprapti Chart of Manyastambha**



### Management of Manyastambha in Ayurveda

Manyastambha is a *Vatavyadhi*, classically characterized by stiffness and pain in the neck region. According to Ayurveda, management involves a holistic approach targeting *Vata* vitiation, relieving stiffness, restoring movement, and correcting underlying causes.

- सामान्य चिकित्सा:

- क्रियामतः परं सिद्धां वातरोगापहं शृणु।  
केवलं निरुपस्तम्भमादौ स्नेहैरुपाचरेत्॥  
वायुं सर्पिर्वसातैलमज्जपानैरनंरं ततः।  
स्नेहकलान्तं समाश्रास्य पयोभिः स्नेहयेत् पुनः॥  
युषैर्ग्राम्याम्बुजानूपरसैर्वा स्नेहसंयुतैः।  
पायसैः कृशरैः साम्ललवणैरनुवासनैः॥  
नावनैस्तर्पणैश्चात्रैः सुस्निग्धं स्वेदयेत् ततः॥<sup>14</sup>

(च.चि.२८/७५-७८)

The general line of treatment (*Sāmānya Chikitsā*) for *Vātavyādhi* (diseases caused by aggravated *Vāta*), especially when there is no obstruction (*anupastambhita / nirupastambha vāta*). Acharya Charaka advises that treatment should begin with oleation (*Snehana*), as unctuous therapy is the most effective measure to pacify *Vāta*. The patient should first be administered internal oleation using ghee (*sarpi*), muscle fat (*vasā*), oil (*taila*), and bone marrow (*majjā*) according to suitability. After the patient becomes fatigued or saturated with fats, rest is given, and oleation is again continued using milk and milk-based preparations. Further nourishment is provided through unctuous soups (*yūṣa*), meat juices of domestic, aquatic, and marshy animals, along with unctuous foods such as rice cooked with milk (*pāyasa*), *kṛṣāra*, and foods having sour and salty taste, which naturally alleviate *Vāta*. Therapeutic procedures like *Anuvāsana Basti* (unctuous enema), *Nasya* (nasal oleation), and *Tarpana* (nourishing therapies) are then administered. Once the body is well lubricated internally and externally, sudation therapy (*Svedana*) is performed to further relieve stiffness, dryness, and pain. Thus, the verse emphasizes a systematic, nourishing, and unctuous treatment approach as the cornerstone in the management of *Vātavyādhi*.

- स्वभ्यक्तं स्नेहसंयुक्तैः नाडीप्रस्तरसङ्करैः।  
तथाऽन्यैः विविधैः स्वेदैः यथा योगम उपाचरेत्॥  
स्नेहाक्तं स्विन्नम् अङ्गम् तु वक्रं स्तब्धमथापि वा।  
शनैः नामयितुं शक्यं यथेष्टं शुष्कदारूवत्।  
हर्षतोदरूगायामशोथस्तम्भग्रहादयः।  
स्विन्नस्याशु प्रशाम्यन्ति मार्दवं चोपजायते॥<sup>15</sup>

(च.चि.२८/७८-८१)

This verse explains the importance and effects of proper oleation and sudation therapy in the management of *Vātavyādhi*. Acharya Charaka advises that after adequate oil massage, sudation should be administered using methods combined with unctuous substances, such as *nāḍī sveda*, *prastara sveda*, *saṅkara sveda*, and other

suitable varieties of fomentation according to the patient's condition and strength. When the body is well oiled and properly sudated, even limbs that are bent, stiff, contracted, or restricted in movement can be slowly and gently mobilized, just as dry wood becomes flexible after being moistened and heated. As a result of effective sudation, symptoms such as horripilation, abdominal distension, pain, stiffness, spasm, swelling, and restriction of movement subside quickly. The body attains softness, flexibility, and ease of movement, indicating successful pacification of aggravated *Vāta* and restoration of normal function.

- विशेष चिकित्सा:

- मन्यास्तम्भेऽप्येतदेव विधानं,  
विशेषतो वातश्लेष्महरैरन्यै रूक्षस्वेदेष्वुपाचरेत्॥<sup>16</sup>

(सु.चि.५/२०)

The main line of treatment for manyastambha and explains how the disease process is specifically broken through targeted therapeutic procedures. Acharya Sushruta states that the general principles of treatment are applicable in manyastambha as well, but special emphasis should be given to therapies that alleviate both *vāta* and *śleṣma* (*kapha*), as these two *doṣas* are predominantly involved in its pathogenesis. In manyastambha, *kapha* causes heaviness, stiffness, and obstruction in the neck region, while *vāta*, when obstructed by *kapha*, produces pain, rigidity, and restricted movements. Therefore, *nasya* using *vāta-kapha* pacifying medicines is considered a key therapy, as it directly acts on the head and neck region, clears the obstructed channels, liquefies and expels accumulated *kapha*, and restores the normal movement of *vāta*. Along with *nasya*, the use of *rūkṣa svedana* is advised to counteract the excessive unctuousness and heaviness of *kapha*. Dry sudation reduces stickiness, opens the *srotas*, improves circulation, and relieves stiffness and rigidity of the neck muscles. Through these procedures, the underlying *samprapti* is broken by removing *kapha* obstruction, normalizing the flow of *vāta*, reducing coldness and rigidity, and restoring flexibility and functional movement in the cervical region. Thus, *vāta-kapha hara nasya* and *rūkṣa svedana* together form the main and most effective line of treatment in manyastambha.

- दशमूलीकृतं क्वाथं पञ्चमूल्याऽपि कल्पितम्।  
रूक्षं स्वेदं तथा नस्यं मन्यास्तम्भे प्रयोजयेत्॥<sup>17</sup>

(भा.प्र.म.खं.२४/७६)

The specific therapeutic measures recommended in the management of manyastambha with emphasis on reducing stiffness and correcting the underlying *doṣic* imbalance. The decoction prepared from *Daśamūla* and *Pañcamūla* is advised for use, as these formulations possess *vāta-kapha* pacifying properties, anti-inflammatory action, and channel-clearing effects. When administered appropriately, they help in reducing pain, rigidity, and swelling in the neck region. The verse

further emphasizes the use of rūkṣa svedana, or dry sudation, which counteracts the heaviness, coldness, and stickiness caused by aggravated kapha while also facilitating the unobstructed movement of vāta. In addition, nasya therapy is recommended, as medicines administered through the nasal route directly act on the head and neck region, clear kapha accumulation, nourish the tissues, and restore functional mobility of the cervical muscles. Together, the use of Daśamūla and Pañcamūla decoctions, rūkṣa svedana, and nasya effectively break the disease process of manyastambha by removing obstruction in the channels, normalizing vāta, reducing stiffness, and improving flexibility and movement of the neck.

By reviewing Ayurvedic classics we can classify Management of Manyastambha based on these core principles such as;

1. Nidana Parivarjana
2. Swedana
3. Shodhana Chikitsa
4. Snehana
5. Sthanika Chikitsa
6. Shamana Chikitsa
7. Rasayana
8. Pathya-Apathya

### The treatment follows

#### 1. Nidana Parivarjana (Avoidance of Causes)

Nidana parivarjana, meaning avoidance of causative and aggravating factors, is the first and most fundamental step in the management of manyastambha. Since manyastambha is primarily a vāta-kapha predominant disorder affecting the neck region, continued exposure to etiological factors leads to persistence of doṣic vitiation, obstruction of channels, and progression of stiffness, pain, and restricted movements. By eliminating these causes, further aggravation of vāta and kapha is prevented, the disease process is arrested at an early stage, and the effectiveness of therapeutic measures such as snehana, swedana, and nasya is enhanced.

Avoidance of improper posture is of prime importance, as prolonged forward bending of the neck, sustained computer or mobile phone use, working in awkward positions, and sleeping with an unsuitable pillow strain the cervical muscles and ligaments, leading to vāta aggravation and kapha-induced stiffness. Excessive exposure to cold wind, air conditioning, and cold water head baths should be avoided, as cold and dryness increase vāta and promote stambha. Suppression of natural urges, especially related to sleep and flatus, and maintaining prolonged static postures without adequate movement also contribute to vāta vitiation and should be corrected.

Dietary nidanas play a significant role in the causation of manyastambha. Intake of dry, cold, light, and stale foods, excessive fasting, irregular meals, and excessive consumption of kapha- provoking foods such as heavy,

oily, sweet, and cold items lead to doṣa imbalance. Therefore, avoidance of incompatible food combinations, excessive refrigerated food, curd at night, and cold beverages is essential. Mental stress, anxiety, and inadequate rest further aggravate vāta and contribute to muscle tension in the neck region, so stress-inducing activities should be minimized.

Thus, nidana parivarjana helps in breaking the samprapti of manyastambha by preventing further vāta-kapha vitiation, reducing mechanical and environmental stress on the cervical region, and creating a favorable internal environment for healing. When causative factors are effectively avoided, symptoms such as stiffness, pain, and restricted movement gradually reduce, and long-term recurrence of manyastambha can be successfully prevented.

#### 2. Swedana (Sudation/Fomentation)

स्तम्भगौरवशीतघ्नं स्वेदनं स्वेदकारकम्॥<sup>[18]</sup> (च.सू.२२/११)

संकोचयामशूलेषु स्तम्भगौरवसुप्तिषु।  
सर्वाङ्गेषु विकारेषु स्वेदनं हितमुच्यते॥<sup>[19]</sup>

(च.सू.१४/२४)

These Shloka highlight the importance of swedana therapy in the management of stambha (stiffness) and other conditions caused by aggravated vāta and kapha. Swedana is described as a therapeutic procedure that relieves stiffness, heaviness, and coldness in the body by inducing perspiration and generating warmth. Since stambha is mainly associated with cold, dry, and rigid qualities, swedana acts by opposing these properties, thereby restoring softness and mobility to the tissues. By improving circulation and opening the body channels, swedana helps in reducing rigidity and discomfort.

Further, Acharya Charaka states that swedana is beneficial in conditions such as contraction, restricted movement, pain, stiffness, heaviness, numbness, and disorders affecting the whole body. It is especially useful in musculoskeletal and neurological conditions where vāta predominance leads to loss of flexibility and functional impairment. Through its warming and penetrating action, swedana alleviates pain, reduces obstruction in the channels, enhances tissue pliability, and facilitates normal movement. Thus, swedana is considered a highly effective supportive therapy in the treatment of stambha and related vāta disorders.

The Manyastambha is the clinical entity in which the back of the neck becomes stiff or rigid & movements of neck are restricted due to Shleshmanavritta Vata told by Sushrutacharya.

मन्यास्तम्भेऽप्येतदेव विघ्नानं,  
विशेषतो वातक्षेप्महरैर्नस्यै रुक्षस्वेदैश्चोपचरेत्॥<sup>[16]</sup>  
(सु.चि.५/२०)

The treatment of Manyastambha includes Panchakarma;

especially Vata Kaphaghna Nasya along with Ruksha Sweda.<sup>[18]</sup> Panchakarma, the inherent & integral part of Ayurveda is contributing a lot in the management of different degenerative, chronic lifestyle disorders which can be correlated with Vata Vyadhi.

Ruksha sweda plays an important role in the management of manyastambha, as the condition is predominantly caused by vāta obstructed by kapha in the neck region. In manyastambha, kapha produces heaviness, coldness, stickiness, and stiffness, which obstruct the normal movement of vāta, resulting in pain and restricted movements. Ruksha sveda, or dry sudation, possesses drying, warming, and channel-clearing properties that directly counteract the snigdha and guru qualities of aggravated kapha. By reducing excess moisture and stickiness, ruksha sveda helps in removing srotorodha, restoring the free movement of vāta, and relieving stiffness and rigidity of the cervical muscles. It also improves local circulation, reduces muscle spasm, and enhances flexibility of the neck, thereby breaking the samprapti of manyastambha.

Different types of ruksha sveda useful in manyastambha include nāḍī sveda performed using dry herbal decoctions or steam without added oil, which provides localized heat to the neck and shoulder region and effectively reduces stiffness and pain. Prastara sveda, where the patient lies on a warm bed prepared with heated dry substances, helps in relieving deep-seated rigidity and heaviness. Saṅkara sveda using dry boluses prepared from sand, brick powder, or dried medicinal herbs is commonly employed; examples include vālukā sveda using heated sand and iṣṭikā cūrṇa sveda using brick powder, both of which are especially effective in kapha-dominant stiffness. Cūrṇa piṇḍa sveda prepared with dry powders of vāta-kapha hara drugs such as kolakulathāḍī cūrṇa or rasnāḍī cūrṇa is also useful in manyastambha. These forms of ruksha sveda, when appropriately selected according to the stage and doṣic predominance, play a crucial role in reducing stambha, restoring mobility of the neck, and enhancing the effectiveness of other therapies such as nasya and basti.

### 3. Shodhana Chikitsa (Purificatory Therapy)

Shodhana chikitsa plays a vital role in the management of manyastambha by eliminating the vitiated doṣas responsible for the disease and by breaking the underlying samprapti at its root. Manyastambha is mainly a vāta-kapha predominant disorder, where kapha causes obstruction, heaviness, and stiffness in the neck region, and obstructed vāta produces pain, rigidity, and restricted movements. Shodhana therapies help in expelling these morbid doṣas from their sites, clearing the obstructed channels, and restoring normal functional movement of the cervical region.

Vamana karma is important in manyastambha when kapha predominance is evident, such as marked stiffness,

heaviness, coldness, and associated symptoms like lethargy and excessive mucus. By expelling aggravated kapha from its primary seat, vamana reduces obstruction in the channels and lightens the body, thereby indirectly facilitating the free movement of vāta. This helps in reducing stiffness and improving neck mobility.

Virechana karma is useful when pitta is associated with vāta and kapha or when there is chronicity with inflammatory changes. Mild virechana helps in cleansing the gastrointestinal tract, regulating agni, and preventing further doṣic accumulation. By correcting digestion and metabolism, it supports long-term relief and prevents recurrence of manyastambha.

Basti karma is considered the most important shodhana therapy in manyastambha due to the predominant involvement of vāta. Anuvāsana basti provides unctuousness and nourishment, counteracting dryness and rigidity, while nirūha basti expels vitiated vāta and kapha from the body. Basti directly controls vāta at its main site and helps in relieving pain, stiffness, and restriction of movement in the neck region, making it the most effective therapy in chronic and recurrent cases.

Nasya karma is especially significant in manyastambha as the disease affects the region above the clavicle. Medicines administered through the nasal route directly act on the head and neck, expel accumulated kapha, nourish the cervical structures, and restore normal sensory and motor functions. Shodhana nasya clears the channels of the neck and head, reduces stiffness, and improves mobility.

Thus, the different types of shodhana chikitsa act in a complementary manner in manyastambha by eliminating morbid doṣas, removing srotorodha, normalizing vāta, and providing lasting relief from stiffness, pain, and restricted neck movements.

मन्यास्तम्भेऽप्येतदेव विधानं,

विशेषतो वातक्षेप्यहरेनस्यै रूक्षस्वेदोपचरेत्॥<sup>[16]</sup>

(सु.चि.५/२०)

The treatment of Manyastambha includes Panchakarma; especially Vata Kaphaghna Nasya along with Ruksha Sweda. Panchakarma, the inherent & integral part of Ayurveda is contributing a lot in the management of different degenerative, chronic lifestyle disorders which can be correlated with Vata Vyadhi.

उर्ध्वजन्तुविकारेषु विशेषात् नस्यमिष्यते।

नासाहि शिरसोद्वारं तेन तत् व्याप्य हन्ति तान्॥<sup>20</sup>

(अ.ह.सू.२०/१)

Nasa is considered as gateway for head. Medicine administered through the nose goes in to head and not only expel vitiated Doshas but also gives Bala to Urdhwajatrugata organs.

#### 4. Snehana (Oleation Therapy)

Snehana plays role in the management of manyastambha, as the condition is predominantly caused by aggravated vāta in the neck region. Vāta, by nature, is dry, light, cold, and rough, and these qualities lead to stiffness, pain, and restricted movements when it becomes vitiated. Snehana, through its unctuous, softening, and warming properties, directly counteracts these qualities and helps in restoring normal function of the cervical region.

Both external and internal snehana are useful in manyastambha. External snehana in the form of abhyanga over the neck, shoulders, and upper back using vāta-kapha pacifying oils such as tila taila, saindhavādi taila, or kṣīrabala taila helps in softening the muscles, ligaments, and tendons. It improves local circulation, reduces muscle spasm, alleviates pain, and prepares the tissues for further procedures like swedana. Internal snehana, when indicated, nourishes the body tissues, reduces dryness, and stabilizes vāta at its root level.

In the samprapti of manyastambha, kapha causes obstruction in the channels, making the tissues rigid and heavy, while vāta produces pain and limitation of movement. Properly administered snehana helps in loosening the adhered doṣas, reducing rigidity, and facilitating their movement from the peripheral tissues toward the gastrointestinal tract for elimination. It also enhances the effectiveness of subsequent therapies such as rukṣa or snigdha swedana, nasya, and basti.

Thus, snehana is an essential preparatory and therapeutic measure in manyastambha, as it breaks the disease process by pacifying vāta, reducing stiffness, improving flexibility, and promoting comfortable and smooth movements of the neck.

#### 5. Sthanika Chikitsa (Localized therapies)

Localized therapies play a significant role in the management of manyastambha by acting directly at the site of pathology, providing rapid symptomatic relief and supporting systemic treatments. Since manyastambha involves stiffness, pain, and restricted movement of the neck due to vāta-kapha vitiation and srotorodha in the cervical region, these local procedures help in breaking the samprapti at the affected site.

**Lepa** is the external application of medicated pastes over the neck region. Drugs possessing vāta-kapha hara, śothahara, and vedanāsthāpana properties reduce local inflammation, pain, and stiffness. The warmth and pharmacological action of lepa improve circulation, soften contracted muscles, and relieve rigidity. It is especially useful in acute pain and tenderness of the neck.

**Upanāha** involves application of warm medicated poultices prepared with vāta-kapha pacifying drugs, often mixed with sour or unctuous substances. The sustained warmth provided by upanāha penetrates deeper

tissues, reduces muscle spasm, alleviates pain, and improves mobility. It is particularly effective in chronic manyastambha with marked stiffness and heaviness.

**Manya basti** is a specialized localized snehana and svedana therapy in which warm medicated oil is retained over the neck region for a fixed duration. This procedure provides continuous warmth and unctuousness, deeply pacifies vāta, nourishes muscles and joints, reduces dryness and rigidity, and improves range of neck movements. It is highly beneficial in chronic, degenerative, and recurrent cases of manyastambha.

**Agnikarma** is the controlled application of therapeutic heat using fire or heated instruments at specific points. It is especially useful in severe pain and stiffness where vāta predominance is marked. Agnikarma relieves pain by counteracting coldness, improving local circulation, and reducing nerve irritation, thereby providing quick and long-lasting relief.

**Viddha karma**, or therapeutic pricking, is performed at selected points to relieve pain and stiffness. It helps in releasing localized doṣic accumulation, reducing muscle tension, and improving circulation. Viddha karma is particularly helpful in acute painful manyastambha with marked restriction of movement.

Thus, localized therapies such as lepa, upanāha, manya basti, agnikarma, and viddha karma are valuable adjuncts in the management of manyastambha, as they directly address local pathology, provide rapid relief from pain and stiffness, and enhance overall treatment outcomes.

#### 6. Shamana Chikitsa (Palliative Therapy)

Shamana chikitsa helps in the management of manyastambha by pacifying vitiated doṣas, relieving symptoms, and preventing progression or recurrence of the disease, especially when shodhana is not indicated or after completion of shodhana therapies. Since manyastambha is predominantly a vāta-kapha disorder, shamana medicines having vāta-kapha hara, śothahara, vedanāsthāpana, and srotoshodhana properties are selected to reduce pain, stiffness, and restricted neck movements.

In **churna form**, medicines such as rasnādi churna, yogarāja guggulu churna, kolakulathādi churna, and gandharvahastādi churna are commonly used. These powders help in alleviating vāta and kapha, improving digestion, reducing stiffness, and relieving pain. They are usually administered with warm water or decoctions to enhance their action.

In **kashaya form**, rasnā saptaka kashaya, daśamūla kashaya, maharasnadi kashaya, and erandamūladi kashaya are widely prescribed. These decoctions possess anti-inflammatory, analgesic, and vāta-kapha pacifying properties and are effective in reducing neck stiffness, pain, and swelling.

In **vati or tablet form**, yogarāja guggulu vati, maharasnadi guggulu vati, simhanāda guggulu vati, and trayodaśāṅga guggulu vati are useful. These formulations act by removing āma, improving circulation, reducing inflammation, and restoring normal mobility of the cervical region.

**Guggulu**-based formulations hold special importance in manyastambha due to their deep-acting, anti-inflammatory, and srotoshodhana properties. Yogarāja guggulu, mahayogarāja guggulu, kaishora guggulu, and punarnavādi guggulu help in relieving chronic pain, stiffness, and degenerative changes associated with manyastambha.

Among other **patented or market-available medicines**, formulations such as Daśamūla arishta, sahararādi taila capsules, and kṣīrabala taila softgel, tab. Flexineck, Cap. Palsinuron etc. preparations are commonly used in clinical practice. These medicines provide convenience of administration while retaining classical therapeutic benefits.

Thus, shamana chikitsa in manyastambha focuses on pacifying vāta and kapha, reducing inflammation and pain, improving neck mobility, and supporting long-term management when selected appropriately according to doṣic predominance and stage of the disease.

### 7. Rasayana (Rejuvenation)

Rasayana therapy has an important supportive role in the management of manyastambha, especially in chronic, recurrent, degenerative, and age-related conditions. Manyastambha is mainly a vāta–kapha predominant disorder, and long-standing vitiation of vāta leads to dhātu kṣaya, reduced tissue strength, degeneration of cervical structures, and poor healing capacity. Rasayana therapy helps by nourishing the tissues, improving strength and stability of the musculoskeletal and nervous systems, enhancing immunity, and preventing recurrence of symptoms.

Rasayana drugs having vāta-pacifying, balya, brimhana, and anti-degenerative properties are particularly useful. Ashwagandha is a commonly used rasayana that strengthens muscles, ligaments, and nerves, reduces stress-related muscle tension, and supports recovery in chronic neck pain and stiffness. Guduchi acts as a rejuvenator with anti-inflammatory and immunomodulatory properties, helping to reduce chronic inflammation and improve tissue metabolism. Shatavari provides nourishment and stability to tissues and is beneficial when associated weakness or dryness is present.

Chyavanaprasha is a classical rasayana formulation that improves overall vitality, supports tissue nourishment, and enhances resistance against recurrent vāta disorders. Brahma rasayana and Amalaki rasayana are also useful in improving tissue regeneration, reducing oxidative

stress, and supporting long-term musculoskeletal health. Medicated ghees such as kṣīrabala ghr̥ta and ashwagandhādi ghr̥ta act as both vāta–shāmaka and rasayana, nourishing deeper tissues, improving nerve conduction, and reducing stiffness and pain. These are especially beneficial in degenerative cervical conditions presenting as manyastambha.

Thus, rasayana therapy in manyastambha helps in correcting dhātu kṣaya, strengthening cervical structures, improving flexibility and endurance, and preventing recurrence. When administered after shodhana or along with appropriate shamana therapies, rasayana ensures sustained relief and long-term management of manyastambha.

### 8. Pathya-Apathya (Diet and Lifestyle)

Diet and lifestyle play a crucial role in the management and prevention of manyastambha, as the condition is mainly caused by vāta–kapha imbalance affecting the neck region. Proper dietary and lifestyle measures help in pacifying the aggravated doṣas, preventing further progression of the disease, and supporting the effects of therapeutic interventions.

From a dietary perspective, foods that are warm, light, easily digestible, and mildly unctuous are beneficial. Intake of freshly prepared meals, warm milk, ghee in moderate quantity, rice, wheat, green gram, vegetable soups, and foods cooked with vāta–kapha pacifying spices such as ginger, garlic, cumin, and black pepper helps in reducing stiffness and pain. Sour and salty tastes in moderation are useful for vāta pacification, while maintaining proper digestion and metabolism.

Foods that aggravate vāta and kapha should be avoided. These include cold, dry, stale, refrigerated, and packaged foods, excessive fasting, irregular meal timings, and excessive intake of heavy, oily, sweet, and cold items. Curd at night, cold beverages, ice creams, and incompatible food combinations should be strictly avoided, as they increase kapha and lead to stiffness and obstruction in the neck region.

Lifestyle modification is equally important in manyastambha. Maintaining proper posture during sitting, reading, and working on computers or mobile devices is essential to reduce mechanical strain on the cervical spine. Prolonged static postures should be avoided, and short breaks with gentle neck movements should be incorporated during work hours. Exposure to cold wind, air conditioning, and cold water head baths should be minimized, as cold aggravates vāta and kapha and increases stiffness.

Adequate rest, sound sleep, and stress management are important, as mental stress and sleep deprivation increase vāta and cause muscle tension in the neck. Regular practice of gentle exercises, stretching, yoga postures suitable for the neck, and breathing techniques helps in

improving flexibility and circulation. Avoidance of suppression of natural urges and maintaining a disciplined daily routine further supports recovery.

Thus, appropriate diet and lifestyle measures act as a form of *nidana parivarjana* and *shamana*, helping to pacify *vāta-kapha*, reduce stiffness and pain, and prevent recurrence of *manyastambha* when followed consistently.

## CONCLUSION

In conclusion, *Manyastambha* is a *vāta-kapha* predominant disorder characterized by pain, stiffness, and restricted movements of the neck, arising from faulty posture, improper lifestyle, dietary indiscretions, and environmental exposure to cold, and mental stress. The *samprapti* involves obstruction of *vāta* by *kapha* in the cervical region, leading to *stambha*, *gaurava*, and *śūla*. Effective management therefore requires a comprehensive and multidimensional approach rather than symptomatic treatment alone.

Ayurvedic management of *Manyastambha* emphasizes *nidana parivarjana* as the primary step to arrest further *doṣic* vitiation. *Shodhana* therapies such as *nasya*, *basti*, *vamana*, and *virechana* play a crucial role in eliminating morbid *doṣas*, clearing *srotorodha*, and correcting the disease at its root. *Snehana* and *swedana*, particularly *rukṣa swedana* in *kapha*-dominant cases, help in softening tissues, reducing stiffness, and restoring normal mobility of the neck. Localized therapies like *lepa*, *upanāha*, *manya basti*, *agnikarma*, and *viddha karma* provide targeted relief by acting directly on the affected region.

*Shamana chikitsa* with appropriate *churna*, *kashaya*, *vati*, *guggulu* preparations, along with *rasayana* therapy, supports tissue nourishment, reduces degeneration, improves strength, and prevents recurrence, especially in chronic and age-related conditions. Equally important are dietary regulation and lifestyle modifications, which help maintain *doṣic* balance, reduce mechanical strain on the cervical region, and enhance long-term outcomes.

Thus, *Manyastambha* can be effectively managed through an integrated Ayurvedic approach that combines causative factor avoidance, purification therapies, palliative measures, localized procedures, rejuvenation, and disciplined diet and lifestyle. This holistic strategy not only relieves symptoms but also restores functional mobility, improves quality of life, and ensures sustainable prevention of recurrence.

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