

A CASE STUDY ON AYURVEDIC MANAGEMENT OF MANYASTAMBHA WITH
SPECIAL REFERENCE TO CERVICAL SPONDYLOSIS*¹Dr. Shraddha Saraf and ²Dr. Swati Nagpal¹PG Scholar, ²Reader

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ABSTRACT

Cervical spondylosis is a degenerative condition of cervical spine and due to current lifestyle it is occurring in early to middle aged persons. It is a degenerative condition that affects the vertebrae and soft tissues in the cervical portion of the spine. The edges of the vertebrae often develop small rough areas of bone called osteophytes. It can lead to bouts of stiffness and neck pain. All the degenerative conditions are classified in Ayurveda under Vata disease. Different diseases described in Charak Samhita, Susrutha Samhita and Ashtanga Hridaya like Viswachi, Manyastambha, and Greevagraha, etc have one more symptom similar to Cervical spondylosis. A patient aged 51 years came to our institute with the complaints of pain and stiffness in the cervical region from 6 months and pain radiating to right upperlimb with tingling from 2 months. She was diagnosed as a case of cervical spondylosis. MRI report suggested right foraminal protrusion at C4/5 level, diffuse disc bulge at C5/6 and C6/7 level impinging upon bilateral existing nerve roots. In Ayurveda, the traditional Panchakarma treatments are the best to reduce neck pain and disc compression. Effect of sarvang patra pinda swedan, Manyabasti and kala basti karma along with shaman aushadhi was observed in the patient. There was marked improvement in pain and full range of movement was reported. The case study shows that cervical spondylosis may be successfully managed with Ayurvedic medicine with Panchakarma treatment.

KEYWORDS: Cervical spondylosis, Manyastambha, Manyabasti and Yog basti.

INTRODUCTION

Cervical Spondylosis is a general term for age-related wear and tear affecting the spinal disks in your neck. As the disks dehydrate and shrink, bone spurs and other signs of osteoarthritis develop. Cervical spondylosis is a chronic degenerative condition of the cervical spine that affects the vertebral bodies and intervertebral disks of the neck as well as the contents of the spinal canal. It may also include the degenerative changes in the facet joints, longitudinal ligaments, and ligamentum flavum. Spondylosis progresses with age and often develops at multiple interspaces.^[1]

Cervical spondylosis is very common and worsens with age. There also appears to be a genetic component involved because some families will have more of these changes over time, while other families will develop less.

Cervical Spondylosis may affect males earlier than females. 66% of adults experience neck pain in their lifetime and 5% are highly disabled by it.^[2] By age 60, 70% of women and 85% of men show changes consistent with Cervical Spondylosis on X-ray.

In Ayurveda Vatavyadhis is a group of diseases manifested by *dhatu kshaya* or *margavarana* and those are classified according to hetu, sthana and lakshana. In the classification of dhatukshayajanya vatavyadhis, many degenerative conditions are considered. Cervical spondylosis can be considered one among them and can be compared with 'manyastambha'.

At CHARAKA, the treatment for Cervical Spondylosis is comprehensive and may include Ayurveda internal medicines & external applications for mild cases and along with these, Ayurveda Panchakarma therapies in severe cases. Diet and lifestyle modifications are applied in both the scenarios. Panchakarma therapies like Abhyanga swedan, Nasyam, shirodhara, Sarvangadhara, Greeva basti, Vasti are usually done based on the persons presentation and severity of the disease.

CASE REPORT

Name - XYZ

Age - 51 years Sex - female

UHID - 29836

IPO no. - 2021898

Chief Complaints

1. Pain and stiffness in the back of neck region. Pain is radiating to rt upper limb with tingling sensation from 6 months.
2. Mild shoulder pain and headache
3. Difficulty in movement of the neck for 2 months.

History of Present Illness

The patient was asymptomatic before 6 months then she starts pain and stiffness in the back of her neck due to weightlifting, after a few days pain starts radiating to rt upper limb with tingling sensation. Then after four months she developed mild pain in bilateral shoulders with difficulty in movement of the neck and mild headache.

History of Past Illness

No significant illness was found

Personal History

Diet – Mix
Appetite – Normal
Micturition – Normal
Bowel – normal
Sleep – Improper

On Examination

General condition - Moderate, Afebrile
Pulse rate - 78/min
B.P. - 130/80 mm of Hg
R.R. - 18/min

Range of motion

Flexion – Painful
Extension – Painful
Neck- stiffness was present with decrease range of cervical movement.

Investigation

Magnetic resonance imaging (MRI) of cervical spine that was done on December 12, 2022; revealed right foraminal protrusion at C4/5 level, Diffuse disc bulge at C5/6 and C6/7 level indenting anterior subarachnoid space and bilateral exiting nerve roots (right>left).

Treatment plan

Greevastambha comes under Urdhjatrugat roga^[3] and Nanatmaj Vata Vyadhi (~ various musculoskeleton and neurological disorder). In Ayurveda general line of management of Urdhjatrugata roga & Nanatmaj Vata vyadhi such as Abhyanga, Swedan and Basti procedure were adopted for the case.^[4]

Intervention plan

Deepan and pachan is done with *lahsunadi vati* in dosage of 250 mg twice a day with lukewarm water for 3 days before the commencement of interventions to the patient. For next 16 days, *sthanik patra pind Sweda* along with *greeva Basti* (with saindhavadi tail) and *kalabasti* (anuvasan basti with erand tail and eranmuladi niruh basti) were administered. Followed by *shirodhara* by ksheer bala tail for 3 days. Along with these *Panchkarma* intervention combinations of oral medicines were prescribed -*Ashwagandha churna*, *Shatavari churna*, *prasarini churna* with lukewarm water in dose of each 2gm, *rasnadi guggulu* and *purannavadi guggulu* each 2 tablet with *Dashmool kwath* in a dose of 10 ml. All these drugs were prescribed for twice a day. These oral medications were continued in following 1 months after the completion of *Panchkarma* schedule.

Table 1: Panchkarma Procedures.

| S.no. | Panchkarma Procedure | Duration |
|-------|--|----------|
| 1. | Manyabasti with saindhavadi tail | 16 days |
| 2. | Patra pinda swedan with saidhavadi tail | 16 days |
| 3. | Kala basti plan Anuvasan basti with erand tail 100ML Niruha basti with erandmooladi kwath 400 ML | 16 days |

Table 2: Oral Medications.

| S.no. | Name of drug | Dose | Anupana | Duration |
|-------|--|-----------------------|----------------|----------|
| 1. | Tab Rasnadi guggulu | 250 mg twice in a day | Dashmool kwath | 2 months |
| 2. | Tab Punarnavadi Guggulu | 250 mg twice in a day | Dashmool kwath | 2 months |
| 3. | Ashwagandha churna, Shatavari churna, prasarini churna | 6 gm twice in a day | Lukewarm water | 2 months |

Assessment criteria

1. VAS scale
2. Range of movement (ROM)

RESULT

After completion of *treatment*, the patient condition was reassessed. The patient had no giddiness and neck pain improved, There was no pain and tingling sensation in Rt upper limb. VAS score decreased to 20 and stiffness improved. Spurling sign was negative. The patient was

discharged after 20 days and condition was stable in the follow-up period of 1 months.

Table 3: Visual analogue scale (VAS).

| Before treatment | After treatment |
|------------------|-----------------|
| 40 | 20 |

Table 4: Cervical range of movement(CROM).

| Range of movement | Before treatment | After treatment |
|----------------------|------------------|-----------------|
| Flexion | 20 | 45 |
| Extension | 30 | 50 |
| Lateral flexion (lt) | 25 | 40 |
| Lateral flexion(rt) | 20 | 35 |
| Lateral rotation(lt) | 20 | 45 |
| Lateral rotation(rt) | 25 | 45 |

DISCUSSION

According to Ayurveda Vata, the principle of movement is the predominant function of the skeleto-muscular system and the nervous system. Problems relating to these systems are predominantly caused by vitiated *Vata*.

The commonly occurring pain in the neck region in such conditions are due to spasm of muscles around the area and numbness/tingling sensation in the arm is felt due to the compression of cervical nerves passing through the location. But in Ayurveda Greevatshambha is considered as one among Vatavyadhi. Also 'Shula' (Pain) is the characteristic of Vata. This pain can be produced by only involvement of Vayu or in association with other Doshas (Dosha Avrita Vata).

Manyabasti is a procedure where bahyasnehana and swedana done. Due to warm oil cervical region blood supply of that part is increased and inflammation is reduced. There is degeneration of intervertebral disc and lubrication function of Shleshmaka Kapha is affected, which results in compression and irritation of nerve, resulting in severe pain & muscle spasm. Therefore, local Snehana and Swedana is very effective and gives quick results because they act at the site of Samprapti.

Patra pottali sweda –It is highly effective in pain as local snehan and swedan directly acts at the site of samprapti. This is a procedure in which both snehana and swedan are incorporated. Before patra pottali swedan, abhyanga was done, abhyanga has kapha-vata nirodhan (alleviates vata-kapha dosha) properties. Application of heat causes vasodilation and improves blood circulation. Also swedan, helps eliminating maldravyas (toxins) along with sweat, decreases heaviness and stiffness.

Basti is very useful in painful disorders predominant of vata, anuvasana, and niruhabasti is advised for the management of pain. Asthapanabasti i.e., Niruh Basti with decoction removes vitiated vata thus relieves pain.^[5]

Probable mode of action of Rasnadi Guggulu: The drug Rasna, due to its Tikta Rasa, Katu Vipaka and Ushna Virya, pacifies vitiated Kapha and Aama Dosha. Guru

Guna and Ushna Virya pacifies Vata Dosha resulting in reduction of Toda, Shula and other related symptom. Properties of Guggulu are Vedanasthapaka and Vatashamaka.

Punarnavadi guggul is herbal diuretic formulation primarily indicated for the treatment of edema and other inflammatory conditions. It has Ushna veerya and it Pacifies irregular Kapha and Vata Dosha. It has sothahara and vatahara properties which helps treat the manyastambha. It might have helped to overcome degeneration of disc and vata prakopa.

Ashwagandha possess Rasayana (immuno-modulator) and Brahmana (nourishes the bone and muscles) properties, so it is useful in all types of Dhatukashya(diminished of body tissue).^[6] Shatavari is a promoter of the muscle strengths and health.^[7] Prasarini has anti inflammatory and anti arthritic properties. It is useful to balance the Vata and Kapha doshas in body and their related disorders.

CONCLUSION

In the present study pain in the neck (at rest), headache and pain with neck movements, numbness/tingling sensation with or without weakness of arm and dizziness were the commonly observed symptoms in the patients. Most of the aforesaid symptoms were due to muscle spasm and nerve compression. The results were assessed on the basis of symptomatic improvement using visual analog scale. Improvement was observed in most of the symptoms due to reduction in inflammation and spasm provided by *Vatahara* treatment and *Nadi Sweda* (local heat).

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