

"MANAGEMENT OF CERVICAL SPONDYLOSIS THROUGH AYURVED - A CASE STUDY"

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ABSTRACT:

Cervical Spondylosis is a common age-related condition that affects joints and disk of Cervical Spine. It is a degenerative condition and due to current life-style it is occurring in early to middle aged persons. Cervical osteoarthritis is also known as cervical spondylosis. A 45-year male patient came to my opd with complaint of Pain and Stiffness in the Cervical region since from 2 years, radiating pain to both upper limbs (R>L) since from 1 year and Numbness in right hand specially at night. As he is already diagnosed Cervical Spondylosis since from 2 year ago. MRI report suggest Disc Protrusion C4-C5 level asymmetrical. Ligamentum flavum thickening causing thecal sac indentation and compression of nerve roots. According to Ayurved Cervical Spondylosis can be co-related with Griva stambha, a type of vata vyadhi. Here the presenting case of Cervical Spondylosis which was treated with Panchakarma procedure such as Nasya, Manyabasti, Karma & Yog basti along with shaman aaushadhi. The case study show patient got complete relief in Pain and Stiffness along with numbness in the Cervical region.

KEY WORDS:- Cervical Spondylosis, Cervical Osteoarthritis, Panchakarma, Nasya, Manyabasti, Karma & Yog basti, shaman aaushadhi. Vurveda & Yoga

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INTRODUCTION

Cervical Spondylosis is a degenerative condition of Cervical Spine. Now a day it is common due to current lifestyle like lack of exercise, working on computer/laptop, continue standing posture or sitting posture. It also common in early to middle aged person. 85% of people over the age of 60 year are affected. Common cause of Cervical Spondylosis is trauma, ligament stiffness, herniated disk, dehydrated spinal disk etc. Cervical Spondylosis can be correlated with Griva stambha in Ayurved & it is one of the eight type of Vaath Vyadh.¹

Pathophysiology-

The pathology characterized by degenerative process that affect the intervertebral disc, vertebra, facet joints & ligaments. The cumulative result of these changes is mechanical instability, never pain, radiculopathy & myelopathy.²

Occupation -

Certain occupations are known to increase the risk of developing Cervical Spondylosis due to repetitive strain, prolonged posture or heavy physical demand. 4

Eg- a) Desk job & official work

- b) Drivers
- c) Workers
- d) Professional Athletes
- e) Gym trainer

Risk Factor Darshan

Age is the most common risk factor, mostly middle & old age patient. Trauma over Neck region. ⁵

Genetics-

A family history of Cervical Spondylosis.

Treatment part-

1} According to modern medicine -

Physiotherapy, exercise along with life style modification – posture correction with medication like analgesic, muscle relaxants & corticosteroids. ³

2} According to Ayurved-

- a) Panchakarma Nasya, Manyabasti & yog basti
- b) Abhayantar Medication As describe followed

MATERIAL AND METHOD:

A 45-year-old male patient, leactural by occupation, consulted in OPD with a complaint of pain and stiffness in the cervical region since the last 2 years along with radiating pain (R>L) in the in the upper limb with numbness in the right hand, specifically at night since the last 1 year. As he has already been diagnosed with cervical spondylosis since 2 years ago. He visited the nearest orthopaedic doctor in Nagpur and asked for advice for surgical intervention, which he was refused. His advice is to take NSAIDs to reduce pain and inflammation. There was a history of hypertension on regular medication (Tab-Telma 40 mg) once a day in the morning after breakfast. No relevant hereditary, congenital, or surgical illnesses were found. On physical examination, GC-Good, T-98.2, P-87/min, BP-120/80 mmhg, RBS-109 mg/dl, RR-21/min. The tongue and voice are clear. Bowl and bladder habits are normal. He had Vata-Pitta Prakruti waith madhyam vayah (medium age), madhyam sara, satva, satyma. Sama Praman, Madhyam Aahar, and Vihar Sakthi. Weight: 62 kg, Height: 5.9 feet. The patient had a normal gait. The active movements of the cervical spine were restricted. Pain aggravated while moving back. On examination, tenderness was found over the cervical vertebra from C3 to C7. Cervical nerves are normal in condation. All blood investigations were normal within limits. Radiological investigation of the L-S spine done on (05-06-2022) suggests asymmetric disc protrusion on C4-C5 level. Ligamentum flavum thickening, causing compression of the nerve root.

After thorough examination, a diagnosis of Manyagat Vata or Cervical Spondylosis has been established, and patient advice for Ayurved Panchakarma along with Ayurvedic shaman aaushadhi.

Treatment Plan -

National Journal of Ayurveda & Yoga

In this presenting case three Panchakarma were used to treat this patient. ⁶

- Manya Basti with Balashwagandadi tailam for 14 days
- Nasya karma by Anu tail for 56 days
- Yogabasti for next 8 days

Along with administered of combination of oral medication-

- A) Panchamrut loha Guggul 250 mg (twice a day after meal with lukewarm water)
- B) Yograja Guggul 250 mg (twice a day after meal with lukewarm water)
- C) Combination of Prataplankeshwar rasa (28tab)+ Bilva (1 tsf)+ Ashwagandha(1tsf)+Trivanga (1/2tsf)+ Koshta(1tsf) + Gokshura (1tsf) 5 mg (twice a day after meal with lukewarm water)
- D) Maharasnadi kadha (decoction) (twice a day after meal)

All above treatment for next 14 days along with Panchakarma therapy.

<u>Manya Basti</u>- It is a specialised type of external oleation therapy, primarily aggravated doshas from the neck region. It was done for the next 14 days by using Balashwagandadi tail. Use mostly cervical spondylosis and stiffness in the neck.

<u>Nasya karma</u> – In Ayurveda, the primary line of treatment for urdhwajatrugat rog is Nasya (drug administration through the nose), which is used in this case. In this case, we use Anutail 2 drops on each nostril twice a day after a meal for the next 56 days.

<u>Yoga basti (Medicated enema)</u> – It is typically administered over an 8-day cycle, consisting of a combination of Anuvasan Basti (an oil-based enema) and Niruha Basti (a decoction enema). During this period, Sarvadayak snehan and Swedan were done.

Day 1,3,5,7- Anuvasan Basti (oiled based enema i.e Dhanvantara tail 80 ml)

Day 2,4,8- Niruha Basti (decoction based enema i.e Dashmool Kwath 700 ml)

Day 8- Final Anuvasan Basti (oiled based enema i.e Dhanvantara tail 80 ml)

Day	1	2	3	4	5	6	7	8
Type of Basti	A	N	A	A	A	N	A	A

Assessment criteria-

1. Neck pain-

0- Absent, 1- Mild & Intermittent pain, 2- Moderate & Bearable pain, 3- Severe unbearable pain

National Journal of Ayurveda & Yoga

2. Neck Stiffness

0- Absent, 1- Mild & Intermittent pain, 2- Moderate & Bearable pain, 3- Severe unbearable pain

3. Radiating pain in both limb

0- Absent, **1-** Mild & Intermittent pain, **2-** Moderate & Bearable pain, **3-** Severe unbearable pain

4. Numbness at Night

0- Absent, **1-** Mild & Intermittent pain, **2-** Moderate & Bearable pain, **3-** Severe unbearable pain

<u>Parameters</u>	Before treatment	After treatment		
1. Neck pain	3	0		
2. Neck stiffness	3	0		
3. Radiating pain in both limb	3	0		
4. Numbness at Night	3	1		

DISCUSSION

The pathogeneses (samprapti) of cervical spondylosis are mostly associated with the cervical vertebral coloum. Shleshak kapha work is to lubricate, but if shleshak kapha does not work properly, it results in irritation, compression, or inflammation in the cervical area. Therefore, local snehan followed by swedana is very effective in cervical spondylosis to increase shleshaka kapha.

<u>Manya basti</u>- Is the one of the procedures that have both properties of snehan and swedan, respectively. Snehan karma (massage) lubricates the strotas used to relieve tension and induce elasticity in the body. Preaper smooth passages for the elimation of vitiated doshas during Swedhana therapy. Swedan karma (sudection formentation heat) induces sweating and removes body toxins, i.e., srotoshuddhi, which causes relaxation of muscles and tendons. It relieves pain, swelling, tenderness, and stiffness.

<u>Nasya</u> - With Anu Taila, it helps in the elimination of vata-kapha dosha and clears obstruction in the channels.

<u>Basti</u> (Medicated enema) is the best treatment for vatavyadhi. Yogabasti karma with Anuvasan and Niruha basti play a role in eliminating vata very effectively.

I.e. Anuvasan Basti (oiled based enema i.e Dhanvantara tail)

Niruha Basti (decoction based enema i.e Dashmool Kwath).

Oral medication⁸

1) Panchamrut Loha Guggule – By following ingridents Panchamrut Loha Guggule balancing the vata and kapha dosha.

- a. Guggule- help to reduce inflammation and pain
- b. Loha bhasma support bones and joint health
- c. Abhrak bhasma- enhance straightening and regeneration power in tissue
- d. Suddha shilajit help in rejuvenating
- e. Vanga bhasma- support nerve system and help to reduce nerve related problem.

- 2) Yograj Guggule It is a special ayurvedic formulation for vatavyadhi. It contains guggule, ajwain, chitrak, musta, pippali which help to reduce inflammation, detoxifies the body, balance the doshas and gives strength to musculoskeletal system.
- 3) Maharasnadi Kwath- reduce inflammation, relax muscles, balance vata dosh, and give strength to the musculoskeletal system, leading to relief from pain and improvement in mobility.
- **4) Combination of** Prataplankeshwar rasa + Bilva + Ashwagandha +Trivanga + Koshta + Gokshura. Help to detoxifies the body, enhance straightening, balance the doshas and reduce nerve related problem

CONCLUSION

In the above chosen case of Cervical Spondylosis by using Ayurveda medicine along with panchakarma intervention clinical improvement seen.

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