



Research Article

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MANAGEMENT OF CERVICAL SPONDYLOSIS THROUGH AYURVEDA: A CASE STUDY

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ABSTRACT

Cervical spondylosis is a common spinal problem seen now a day. Though degeneration of cervical vertebrae is mostly seen in elderly people but its prevalence is increasing in early or middle age also. In the present case study, a diagnosed case of cervical spondylosis has been included for its ayurvedic management. Chief complains were pain and stiffness over the neck since 5 months and pain over the neck was radiating towards the right arm. Degenerative changes with osteophytosis at C5-C6 vertebrae with nerve compression were reported in her MRI- cervical spine. Effect of Griva basti (external therapy) and Nasya (Internal therapy) along with oral medication of Trayodashanga guggulu and Dashmoola Kwatha on cervical spondylosis had been evaluated. Different parameters have been assessed during and after the treatment schedule. There is a complete relief in the parameters like neck pain & stiffness whereas the parameters like pain in arm & vertigo has also shown significant improvement.

Keywords: Cervical spondylosis, Grivabasti, Nasya, Trayodashanga guggulu, Dashmoola Kwatha.

INTRODUCTION

Continuous sitting or standing posture, working on computers perpetually and lack of exercise are some of the atrocious components of current lifestyle. The prevailing consequences of such lifestyle appear in numerous problems like metabolic, musculoskeletal etc. Degenerative diseases which are mainly seen in elderly persons are now becoming common in early or middle age persons also. Low backache and neck pain are the most common spinal problems and cervical spondylosis is a common in >30 age group ¹. Recent studies depicted that cervical spondylosis increases with aging before age 50 years and decreases with aging after age 50 years ².

Disease review

Cervical spondylosis or osteoarthritis of the cervical spine produces neck pain radiating to the shoulders or arms with headache (posterior occipital region). Narrowing of the spine canal by osteophytes, ossification of the posterior longitudinal ligament or a large central disk may compress cervical spinal cord ³. Age, gender and occupation are the main risk factors for cervical spondylosis ⁴.

In Ayurvedic perspective, grivastambha is one of the eighty types of vatavyadhi which is characterised by stambha (stiffness) in the neck region ⁵, which is commonly seen in cervical spondylosis. Cervical spondylosis may also be considered as grivagata (neck region) sandhivata, especially in degenerative condition. Pain during the flexion – extension of a joint along with swelling and coarse crepitations on joint movement is the typical clinical features of sandhivata⁶. Acharya sushruta has described manyastambha which is caused by diwaswapna (sleeping during daytime), using pillows inappropriately during sleeping and constant gazing in upward

direction, leading to the vitiation of vata and kapha dosha. Such condition may simulate with the condition of cervical spondylitis or acute stage of cervical spondylosis⁷.

MATERIAL AND METHODS

Case study

This study has been registered with ctri and under review procedure with reference no. REF/2017/05/014262.

It is to mention that prior informed consent has been obtained from the patient and study has been carried out as per International conference of Harmonization-Good Clinical Practices Guidelines (ICH-GCP) or as per Declaration of Helsinki guidelines.

A 41 years old female, security personnel by profession, has visited OPD on 25.09.2016 with chief complains of pain and stiffness over the neck since 5 months. Pain over the neck is radiating towards the right arm. She is also having tingling sensation over the neck and arm, especially after waking up in the morning. After standing or sitting for a long duration, she also experiences giddiness or vertigo frequently. She is also suffering from incomplete evacuation of bowels. After consulting an orthopedician for the same problem, she did her MRI- cervical spine which reported degenerative changes with osteophytosis at C5-C6 vertebrae with nerve compression. She was diagnosed as a case of cervical spondylosis with radiculopathy. She is advised to take analgesics and anti-inflammatory medicine regularly for some initial time period, followed by their occasional use (when needed). She had also undergone physiotherapy session for about 15 days and got mild relief in symptoms. As a known case of hypothyroidism, patient was taking tablet eltroxin, 25 mcg, once daily since one year. Other investigations like Haemogram, ESR, L.F.T, K.F.T, Lipid profile, Thyroid profile etc. are within normal limits.

On examination, patient is having tenderness over the neck. Neck pain is increasing with forward and backward movement of shoulder but relieves on abduction. After thorough examination, a diagnosis of grivagata vata vis-à-vis cervical spondylosis has been established and patient is advised for griva basti, nasya with oral ayurvedic medication.

Following materials were required in this case study -

- Masha (black gram) flour – 500 grams
- Mahanarayana taila – 500ml
- Dashmoola kwath – 2 litres (for *nadi swedana*),
- Spatula – 01
- Small piece of sponge – 01
- Water – as per requirement
- *Nadi swedana* yantra (Local steam apparatus) – 01

Treatment plan – A schedule has been planned with two therapy sessions of *griva basti* and *Nasya* (6 days in each session) and 7 days gap in between each session. Along with this, patient is advised to take following ayurvedic medicines throughout the treatment schedule:

Name of the medicine	Dose
Trayodashanga guggulu	500 mg, twice a day with lukewarm water
Dashmoola kwatha	20 ml, twice a day, empty stomach

Griva basti

Griva basti is a distinctively developed ayurvedic procedure which is done primarily to pacify aggravated doshas in the neck region, especially in chronic cases.

Procedure for griva basti – Paste of Masha (Black gram flour) is traditionally used to make circular boundary wall in *griva basti*. Whereas in the present case study, plastic griva basti moulds has been used. These moulds are available in different sizes. Patient is asked to lie down in prone position on the table and a towel roll is placed under the chin to make neck region slightly flexed. After this, plastic mould is placed over the neck and its margins are sealed with the masha paste (paste of black gram flour and water). Then it is kept for 5-10 minutes to settle. Now, heated maharanyana oil is poured in this griva basti yantra by using a sponge piece. Precaution should be taken to maintain oil temperature as tolerated by patient and also for leakage of oil for basti yantra. The oil in basti yantra has to be replaced with warm oil at regular interval. After doing this procedure for 30 minutes, oil is drained out and plastic mould is removed. After this, a gentle massage is done over the neck and

upper back region, followed by *nadi swedana* (local fomentation) with dashmoola kwatha.

Nasya

Nasya is one among the five chief purification procedures i.e. Panchakarma. It includes instillation of medicine through nasal route⁸ and it is mainly indicated for the diseases that affects the region above the clavicle bone⁹. It pacifies vata and kapha dosha present in head region.

Procedure for Nasya – After 10 minutes of griva basti, patient is asked to sit on a chair with slightly extended neck. A gentle massage over the forehead, cheeks and sides of nose (region of frontal and maxillary sinuses) is done for 10 minutes by using sesame oil, followed by *nadi swedana*. Then 4-4 drops of anu taila were instilled in each nostril. It is followed by luke warm water gargles.

Assessment parameters

- Neck pain
- Neck stiffness
- Pain radiating in arm
- Vertigo

Table 1: Grading of parameters

S.No	Parameters	Grading	Observation
1.	Neck pain	0	Absent
		1	Mild and intermittent pain
		2	Moderate and bearable pain
		3	Severe and unbearable pain
2.	Neck stiffness	0	Absent
		1	Mild stiffness
		2	Moderate stiffness with partially restricted movement
3.	Pain in arm	0	Absent
		1	Mild intermittent pain over arm
		2	Moderate pain with occasional tingling sensation
4.	Vertigo	3	Severe pain radiating from neck with tingling sensation
		0	Absent
		1	Occasional
		2	1-3 times in a week
		3	> 3 times in a week

OBSERVATIONS AND RESULTS

Observations seen in different parameters before and after the course of treatment are as follows:

Table 2: Observation in different parameters

S.No	Parameters	Before treatment	After I st session	After II nd session
1.	Neck pain	2	1	0
2.	Neck stiffness	3	1	0
3.	Pain in arms	3	2	1
4.	Vertigo	3	1	1

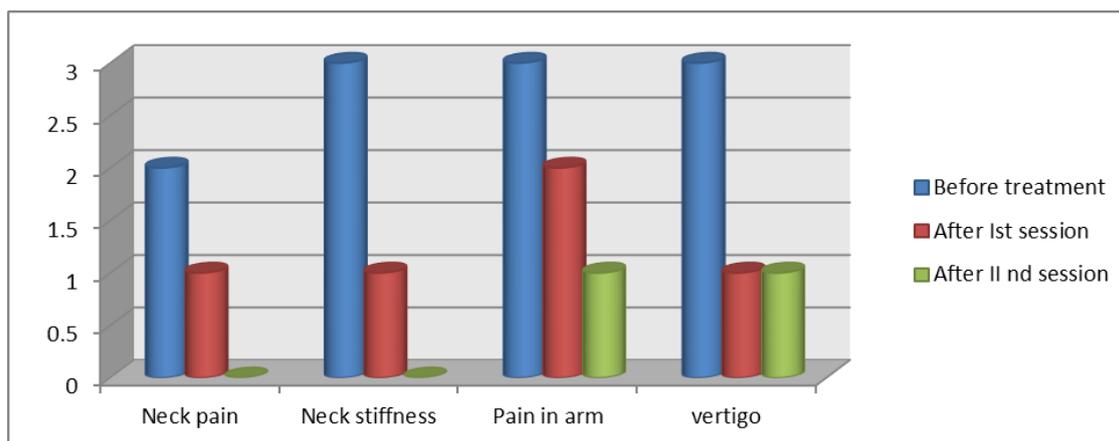


Figure 1: Graphical presentation of changes in different parameters

DISCUSSION

In Ayurveda, the main etiological factor for the development of manyastambha is considered as vitiated vata and kapha dosha. In the present case study, a special schedule has been adopted to manage cervical spondylosis with a prime focus to alleviate vata and kapha dosha. Mahanarayana oil used for griva basti which has been indicated in different types of vatavyadhi¹⁰ and it also provide strengthen to the local soft tissues. Nasya with anu taila helps in elimination of vata- kapha dosha and clears obstruction in the channels. Trayodashanga guggulu is a special ayurvedic formulation for vatavyadhi. It contains drugs like guggulu, rasna, ashwagandha etc which are having vata and kapha, shothhara properties¹¹. Its significant effect has been evaluated in the condition of sandhivata in different studies¹². Dashmoola kwatha is a well known ayurvedic medicine having anti-inflammatory, analgesic effect¹³.

A combination of trayodashanga guggulu and dashmoola kwatha has vata-kapha alleviating, anti-inflammatory and analgesic properties. In this study, the patient was having neck pain with stiffness, which got significant relief after first session. Complete relief in the pain and stiffness has been observed after second session. Others parameters like pain in arms and vertigo has also shown a significant improvement and regularity in the bowel habits has also been observed during the treatment.

CONCLUSION

It is to conclude that combination of ayurvedic therapies like griva basti and nasya along with oral medication of trayodashanga guggulu & dashmoola kwatha has a significant role in the management of cervical spondylosis or osteoarthritis of cervical spine.

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