

CERVICAL SPONDYLOSIS AND ITS PANCHKARMA MANAGEMENT- A CONCEPTUAL STUDY

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ABSTRACT

Cervical spondylosis is a degenerative condition of the cervical spine where there are changes in the intervertebral discs and the protrusion or bony overgrowth of adjacent vertebral bodies cause narrowing of the vertebral canal and of the intervertebral foramina. Nearly 50% of people over the age of 50 and 75% of those over the age of 65 have typical radiographic changes of cervical spondylosis. Cervical Spondylosis can be compared with *Manyastambha* in our classical texts. *Manyastambha* is a *Vatavyadhi* caused by *Kaphavrittha Vata*. *Ruk* and *Stambha* (pain & stiffness) are the only signs & symptoms told in the classics, as symptoms pertaining to the *Manyastambha*. *Greeva Basti* and *Patra Pinda Swedana*, both the procedures are *Snigdha Swedana*. In cervical spondylosis pain and stiffness are present. These two procedures mainly help in reduction in these two symptoms by reducing the nearby muscle spasm. *Nasya karma* is the preferred management in *Urdhwajatrugata Vikara*, so a good indication in cervical spondylosis. The *Panchkarma* procedures like *Greeva Basti*, *Patra Pinda Swedana* and *Nasya Karma* along with palliative medicine can help in the successful management of cervical spondylosis.

Keywords: Cervical spondylosis, neck pain, *Panchkarma*.

INTRODUCTION

Cervical spondylosis is a degenerative condition of the cervical spine where there are changes in the intervertebral discs and the protrusion or bony overgrowth of adjacent vertebral bodies cause narrowing of the vertebral canal and of

the intervertebral foramina.^[1] Nearly 50% of people over the age of 50 and 75% of those over the age of 65 have typical radiographic changes of cervical spondylosis.^[2] Kelly et al^[3] summarised epidemiology studies as "Evidence of

spondylotic change is frequently found in many asymptomatic adults, with 25% of adults under the age of 40, 50% of adults over the age of 40, and 85% of adults over the age of 60 showing some evidence of disc degeneration. Another study of asymptomatic adults showed significant degenerative changes at 1 or more levels in 70% of women and 95% of men at age 65 and 60. The most common evidence of degeneration is found at C5-6 followed by C6-7 and C4-5". In Ayurveda cervical spondylosis can be compared to *Manyastambha*. *Ruk* and *Stambha* (pain and stiffness) are the only signs & symptoms told in our texts. Pain is the main cause for the patient to arrive to the doctor. In Allopathy the management is done with NSAID'S, muscle relaxants, cortico steroids etc, but patient did not find satisfactory relief as all the medicines only give symptomatic relief. Through Ayurveda specially *Panchkarma*, with its holistic approach aims at not only pain management but also works on the etiopathogenesis of the disease and its solution. In Cervical spondylosis, probable management that can be done is *Patra Pinda Swedana*, *Griva Basti*, and *Nasya karma*.

MATERIALS AND METHODS

Source of study material is various Ayurvedic classical texts, textbooks, published papers, internet, previous research works. It is a conceptual work on cervical spondylosis and its *Panchkarma* management.

REVIEW OF THE DISEASE

Cervical spondylosis mainly occurs in people doing constant work in bad sitting posture and it is a degenerative disease. Ageing is the primary cause of the disease, but there is variation in the degree of symptoms and functional disturbance depending upon the location and rate of degen-

eration and it varies from individual to individual. Age, gender and occupation are the risk factors for having cervical spondylosis.^[4] Cervical spondylosis is often diagnosed on clinical signs and symptoms alone.^[5]

Signs:

- Poorly localised tenderness
- Limited range of motion
- Minor neurological changes (unless complicated by myelopathy or radiculopathy)

Symptoms:

- Cervical pain aggravated by movement
- Referred pain (occiput, between the shoulder blades, upper limbs)
- Retro-orbital or temporal pain
- Cervical stiffness
- Vague numbness, tingling or weakness in upper limbs
- Dizziness or vertigo
- Poor balance
- Rarely, syncope, triggers migraine.

Most patients do not need further investigation and the diagnosis is made on clinical grounds alone however, diagnostic imaging such as X-ray, CT, MRI, and EMG can be used to confirm a diagnosis.

Review of the *Panchkarma* Procedures

***Griva Basti*:** It is a type of *Snigdha Swedana*, in which warm medicated oil is retained in cervical region by making a circular frame made of black gram powder and giving heat to that area for specific period of time. It is one of the easiest and best preferred management in cervical spondylosis. The procedure can be done with different medicated oils like *Dashamula taila*, *Dhanvantara taila*, *Mahamasha taila* etc. it should be done for about 30 minutes, in which the oil has to be changed periodically maintaining the temperature and providing consistent

heat to that area. After the procedure, gentle massage is done followed by *Swedana* with towel dipped in hot water and squeezed out. Heat is applied on the cervical area with this towel for about five minutes. After the procedure the patient is advised to take rest for 15 minutes. The procedure can be done from 7 to 21 days depending upon the severity of the condition.

Patra Pinda Swedana: it is a type of *Sankara Sweda*, which is one among the 13 types of *Saagni Sweda* procedures. *Patra Pinda Swedana* is a type of *Pinda Sweda* in which leaves of medicinal plants along with other conventional drugs are roasted in a pan with little oil and a bolus is prepared by tying in the cloth. certain medicated leaves like *Nirgundi* (*vitex nigundo*), *Eranda* (*ricinus communis*), *Datura* (*Datura metel*), *Shigru* (*Moringa oleifera*) etc are finely chopped and fried in medicated oil like *Dashamula taila*, *Dhanwantara taila* depending upon the requirement along with *Ajamoda* (*Carum roxburghianum*), *Rason* (*Allium cepa*), *Saindhava lavana*, lemon, grated coconut etc. This fried content is tied in cotton cloth of around 18 inches length, and made into a *Pottali*. Two *Pottali* are made in the same manner and used for *Patra Pinda Swedana*. For doing the procedure oil is heated in pan and *Pottali* is dipped and heated. In cervical spondylosis patient, first mild *Abhyanga* is done along the cervical region followed by *Swedana* with *Pottali* and it should be done along the effected upper limb portion also. The process should be done for atleast 15 to 20 minutes. After the procedure, patient is advised to take rest for few minutes. Towel dipped in luke warm water and squeezed is used to clean the cervical region. The procedure should be done for minimum 7

days and can be extended to 14 to 21 days depending upon the condition of the patient.

Nasya karma: Administration of medicine through nasal route is known as *Nasya Karma*. The medicine can be medicated oil, *Swarasa*, *Churna* etc depending upon the requirement. *Nasya karma* is the preferred management in *Urdhwajatrugata Vikara*, so a good indication in cervical spondylosis. In the pre procedure *Abhyanga* of the face and neck is done followed by *Swedana*. After that, prescribed dose of the medicated oil is poured in the nostrils. First in one nostril, closing the other and then in another nostril, this is done by tilting the head upto 45 degrees angle. After sometime, the oil may come in the throat, which is spitted out followed by mild *Swedana* of the face. After *Nasya karma*, *Dhoompana* or *Gandusha* are suggested. The procedure can be done for 7 to 21 days depending upon the requirement. These three procedures can be suggested in cervical spondylosis. All the three or any of them can be done depending upon the condition of the patient and severity of the disease.

DISCUSSION

Manyastambha is a *Vatavyadhi* caused by *Kaphavriitha Vata*.^[6] *Greeva Basti* and *Patra Pinda Swedana*, both the procedures are *Snigdha Swedana*. In cervical spondylosis pain and stiffness are present. These two procedures mainly help in reduction in these two symptoms by reducing the nearby muscle spasm. Thus helps in relieving the compression of nerve to some extent and provides relief in radiculopathy. *Snehana* and *Swedana* both are effective management in *Vata* vitiated conditions. The medicated oil used in *Greeva Basti* also helps in nourishment of the degenerative tissues, thus working on the pathology of the disease. Oils

like *Mahamasha taila*, *Mashabaladi taila* are indicated in *Manyasthambha*, which are made of *Brimhana Dravya*. Different kinds of medicated leaves used in *Patra Pinda Swedana*, have analgesic and anti inflammatory properties, which help in relieving pain, stiffness and swelling. *Nasya karma* has been mentioned as line of management in *Manyastambha*, as it belongs to the upper portion of the body. *Gudadi Nasya*, *Mashabaladi Nasya*, *Mahamasha Taila Nasya* is mentioned in our classics.

CONCLUSION

Cervical spondylosis is a degenerative disease of spine causing pain, stiffness and associated radiculopathy affecting the quality of life of the patient. The *Panchkarma* procedures like *Greva Basti*, *Patra Pinda Swedana* and *Nasya Karma* along with *Shaman Aushadi* can help in the successful management of cervical spondylosis.

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Source of Support: Nil

Conflict Of Interest: None Declared

How to cite this URL: Sangeeta Sharma Et Al: Cervical Spondylosis And Its Panchkarma Management- A Conceptual Study. *International Ayurvedic Medical Journal* {online} 2017 {cited November, 2017} Available from: http://www.iamj.in/posts/images/upload/4157_4160.pdf