

**MANAGEMENT OF KATIGRAHA WITH ERANDAMOOLADI NIROOHAVASTHI
AND AGNIKARMA - A SINGLE CASE REPORT.**¹Krishna Priya R, ²P. Srikanth Babu

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**ABSTRACT**

Low back ache is a common complaint in the present era irrespective of age and gender. It can be correlated with the *Katigraha* concept in Ayurveda. The patient feels pain and stiffness in the lumbar region, which affects the person's everyday activities. The causes for this are postural irregularities and nutritional deficiency. A 42-year-old male patient working as a restaurant employee has complained of backache and stiffness for three months. He had taken allopathic medications, but the result was unsatisfactory. This case was diagnosed as *Katigraha* and was treated with *Erandamooladi Niruha Vasti*¹ in *Yoga vasti*² pattern and *Agnikarma*³, three sittings with a three-day gap. The result of the treatment was encouraging. Hence, the study concluded that *Katigraha* can be managed with *Erandamooladi Niruha Vasti* and *Agni karma*.

Keywords: Ayurveda, *Katigraha*, *Erandamooladi niruha vasti*, *yoga vasthi*, *Agnikarma*.**INTRODUCTION**

Kati is derived from the root “*kat in,*” meaning *sareera vishesham*. In Amarakosha, the word meaning of *kati* is “*katau vastra varanau,*” the part of the body covered by clothes. “*Graha*” means holding. It is derived from

the *dhatu* “*graha upadan,*” which gives support. Thus, *Katigraha* is a disease with pain and stiffness in the back. In Ayurveda, the *stana* of *vata dosha* is *Pakwa-*

*saya, kati, sakthi, srotra, asthi, sparsanendriya*⁴. *Brihatrayi* did not elaborate on *Katigraha* as a *Swatantra vyadhi*, but we can find references as a symptom in *Vata jwara, Vrukka vidradhi* and *Pakwasaya gata vata*.

Pakwasaya and *kati* are the *Vata stana*: the symptoms are pain and stiffness. This area indicates the involvement of *Vata dosha*. *Vasti* can act directly, and *Agnikarma* helps to manage the pain.

3. PATIENT AND METHODS

3.1 CASE REPORT

A 42-year-old male patient had complaints of low back pain and stiffness for three months. The patient took some medication but could not get any relief. Therefore, the patient came to Government Ayurveda Hospital, Eragadda, for further management. He does not have a known case of DM, HTN, Asthma, trauma, or any other illness or surgical history. The patient works as a restaurant employee and has to do weightlifting, climbing steps, long-standing work hours, and holding urges. Investigations such as an MRI of the lumbar spine with a screen of the whole spine and a report

from a radiologist were brought by the patient from Lucid Diagnostics, done on 22/04/22. Report was- I am straightening of lumbar lordosis.

Early marginal osteophytes at all levels.

Type 2 Modic changes (vertebral bone marrow signal intensity changes seen on MRI) at the end plate of L4 and L5.

Disc desiccation changes at L4-L5 & L5-S1 levels.

Diffuse disc bulge associated postero central broad-based disc protrusion causing thecal sac compression and bilateral moderate to severe neural foraminal narrowing at L4 and L5.

The patient was treated with *Erandamooladi niruhavasti* in *Yogavasti* pattern and *Agnikarma*.

3.2 DIAGNOSIS AND ASSESSMENT CRITERIA

1) The symptoms are pain (*katisoola*)-which was assessed by grading pain on the visual analogue scale (VAS)

On the day of admission, the patient was in distressing, miserable pain with a VAS score of 5.

2) Stiffness of the lower back (*katigraha*)-was assessed by grading of Range of Motion (ROM) by using the Oswestry Disability Index (ODI)

| PAIN(VAS) | Scale | Grade |
|--|--------|-------|
| No pain | 0 to 1 | 0 |
| Mild, annoying pain | 2 to 3 | 1 |
| Nagging, Uncomfortable, troublesome pain | 4 | 2 |
| Distressing, miserable pain | 5 | 3 |
| Intense, Dreadful, Horrible | 6 to 9 | 4 |

Table 1: Pain scoring by VAS



Visual analog scale – VAS

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Table 2: Assessment and grading of stiffness

| STIFFNESS (ROM) | Grade |
|--|-------|
| No stiffness | 0 |
| With up to 25% impairment in ROM of the joint, the patient can perform daily work without any difficulty | 1 |
| With up to 25% - 50% impairment in ROM of the joint, the patient can perform daily work with mild or moderate difficulty | 2 |
| With up to 50% - 75% impairment in ROM of the joint, the patient can perform daily work with moderate or severe difficulty | 3 |
| With up to 75% impairment in ROM of joint and patient unable to perform daily routine work | 4 |

On the day of admission, the patient had 50 % – 70% impairment of motion and did his work with mild to severe difficulty, having a score of Oswestry disability index 3.

3) Investigations:

MRI of the Lumbar spine done with a report from a radiologist was brought by the patient. Report was.

- Straightening of lumbar lordosis.
- Early marginal osteophytes at all levels
- Type 2 medic changes at endplate of L4 and L5

- Disc desiccation changes at L4-L5 and L5-S1 levels.
- Diffuse disc bulge associated posterocentral broad-based disc protrusion causing thecal sac/nerve root compression and bilateral moderate to severe neural foraminal narrowing at L4-L5 and L5-S1 levels.

4) Clinical examinations –

The straight Leg Rising test (SLR) was positive at 50 degrees on the right and 40 degrees on the left. Forward bending is 40 degrees, and backward bending is 30 degrees.

3.3 TREATMENTS GIVEN

Erandamooladi Niroohavasthi was given in *Yogavasti* format.

Agni Karma was given three episodes on an interval of 3 days.

Table 3: Ingredients of *Erandamooladi Niruhavasthi*.

| S.No | Sanskrit name | Botanical name | Proportion |
|----------------|---------------------|----------------------------------|------------|
| Kwatha dravyas | | | |
| 1 | <i>Eranda moola</i> | <i>Roots of Ricinus communis</i> | 46.5gms |
| 2 | <i>Palasa</i> | <i>Butea monosperma</i> | 15.5gms |
| 3 | <i>Salaparni</i> | <i>Desmodium gangeticum</i> | 15.5gms |
| 4 | <i>Prishniparni</i> | <i>Uraria picta</i> | 15.5gms |
| 5 | <i>Brihati</i> | <i>Solanum indicum</i> | 15.5gms |
| 6 | <i>Kantakari</i> | <i>Solanum xanthocarum</i> | 15.5gms |
| 7 | <i>Gokshura</i> | <i>Tribulus terrestris</i> | 15.5gms |
| 8 | <i>Rasna</i> | <i>Aipin</i> | 15.5gms |
| 9 | <i>Ashwagandha</i> | <i>Withania somnifera</i> | 15.5 gms |
| 10 | <i>Atibala</i> | <i>Abutilon indicum</i> | 15.5 gms |
| 11 | <i>Guduchi</i> | <i>Tinospora cordifolia</i> | 15.5 gms |

| | | | |
|----------------------|----------------------------|-----------------------------------|----------|
| 12 | <i>Punarnava</i> | <i>Borrhavia diffusa</i> | 15.5 gms |
| 13 | <i>Aragwadha</i> | <i>Cassia fistula</i> | 15.5 gms |
| 14 | <i>Devadaru</i> | <i>Cedrus deodara</i> | 15.5 gms |
| 15 | <i>Madana phala</i> | <i>Randia dumetorum</i> | 15.5 gms |
| <i>Kalka dravyas</i> | | | |
| 1 | <i>Satapushpa</i> | <i>Anethum graveolens</i> | 6.66 gm |
| 2 | <i>Hapusha</i> | <i>Juniperus communis</i> | 6.66 gm |
| 3 | <i>Priyangu</i> | <i>Callicarpa macrophylla</i> | 6.66 gm |
| 4 | <i>Pippali</i> | <i>Pipper longum</i> | 6.66 gm |
| 5 | <i>Madhuka</i> | <i>Glycyrrhiza glabra</i> | 6.66 gm |
| 6 | <i>Bala</i> | <i>Sida cordifolia</i> | 6.66 gm |
| 7 | <i>Rasanjana</i> | <i>Berberis aristata</i> | 6.66 gm |
| 8 | <i>Vatsaka</i> | <i>Holarrhena antidysenterica</i> | 6.66 gm |
| 9 | <i>Musta</i> | <i>Cyperus rotundus</i> | 6.66 gm |
| Other ingredients | | | |
| 1 | <i>Murchita tila taila</i> | Sesame oil | 180ml |
| 2 | <i>Saindhava</i> | Rock salt | 12gms |
| 3 | <i>Madhu</i> | Honey | 120ml |
| 4 | <i>Gomootra</i> | Milk | 120ml |

This helps to relieve the vitiated *vayu* in *katipradesa*.

| Time of administration | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 |
|------------------------|-------------------------|---|---|---|---|
| 8 am | | | <i>Nirooha vasthi</i> | <i>Nirooha vasthi</i> | <i>Nirooha vasthi</i> |
| 2 pm | <i>Anuvasana vasthi</i> | <i>Anuvasana vasthi with Tila taila</i> | <i>Anuvasana vasthi with Tila taila</i> | <i>Anuvasana vasthi with Tila taila</i> | <i>Anuvasana vasthi with Tila taila</i> |

Table 4: Administered pattern of *Yogavasti*

AGNI KARMA

He has done it for three days over the *kati pradesa* to control pain.

Poorva karma:

Snigdha and *Picchila* diet on the day of *Agnikarma*

The local area was painted with betadine solution.

Pradhana karma:

10 to 12 pain points were marked: 2cm away from L1,4cm away from L2,8cm away from L3,9cm away from L4, and 6cm away from L5 on both sides of the lumbar spine.

Samyak dagda can be identified by *Twak sankocha*, *stabda pradurbhava* and *durgandha*. All points were approximately one *angula* gap over *Kati pradesa*.

Paschat karma:

Application of *Kumari* for instant relief from burning sensation

Application of *Satadhouta ghrta*.



Figure 1: Picture showing the *Agnikarma* location and markings.

4. RESULT:

The patient was treated with the above therapies from 13-07-22 to 23-07-22 and examined before and after treatment.

Table 5: Result of treatment

| Parameter | Observation | | Improvement % |
|----------------------|----------------|----------------|---------------|
| | BT | AT | |
| VAS Score (Pain) | 5 | 1 | 80% |
| ROM Grade(stiffness) | 3 | 1 | 66% |
| ODI | 12 POINTS | 6 POINTS | 76% |
| SLR | RT-50 LT-40 | RT-70 LT-50 | |

Table 5 shows that the patient found significant relief from symptoms after treatment.

Low back pain was reduced by 80%, stiffness by 66%, and the Oswestry Disability Index improved from 12 points to 6 points. SLR increased to 70 degrees from 50 degrees on the right side and 50 degrees from 40 degrees on the left.



Figure 2: Picture showing lumbar extension before and after treatment.

DISCUSSION

Low back pain is a prevalent disease in society. In Ayurveda, it can be correlated with *katigraha*, where the aggravated *vata dosha* moves from its usual place and lodges in *katipradesa*, causing low back pain and stiffness. The patient presented with complaints of *stambha*, *ruk toda*, and constipation, which are relieved by evacuation of the stool. These symptoms suggest a pure involvement of *vata dosha*. *Katigraha* is one among the 80 types of *vataja nanatmaja vikara*. In this case, the patient is a restaurant employee who must work long hours, lift heavy weights, climb steps, eat untimely, hold urges, and improperly eat. These factors lead to *vata dosha* vitiation, which causes pain over the *kati pradesa*. Alternate bowel habits indicate *vata* vitiation in *pakwasaya*. These are the main *stana* of *vata dosha*.

Vasti acts directly in *pakwasaya*, and it is considered the *ardha chikitsa* and *sreshta chikitsa* for pacifying aggravated *vata* disorders. While explaining *vasti*, Acharya Charaka⁵ has explained that there is none other than *vayu*, the most important causative factor of

diseases in *Sakha*, *koshta*, *marma*, *urdhva*, *sarva avayava* and *anga*. *Vayu* combines stool, urine, pitta, kapha, and all other excreta and tissue elements. When this is exceedingly aggravated, there is no remedy other than *basti* for its alleviation. Thus, *vasti* helps to control vitiated *vata dosha* and gives *anulomana*.

Erandamooladi niruhavasthi is indicated in *jangha*, *Uru*, *pada*, *trika*, *prishta soola* and *maruta nigraha*. The main ingredient, *erandamoola* (*Ricinus communis*), has antioxidants, anti-inflammatory, free radical scavenging, central analgesic, and, most importantly, bone regeneration activity⁶. Ayurveda is considered the *sreshta vatahara dravya*. It contains 28 drugs (mentioned in Table no.3), most of them are *vata kapha hara*, *ushna veerya*, *teekshna*, *sookshma gunas* and *anulomana* property. This helps to expel the morbid material from the *srotuses*, and when the path is cleared, it promotes the normal functioning of the *vayu*. Here, the main symptom is pain, which disturbs the patient's daily activities, and it is a classical fact that *Agni karma* helps to relieve pain. The disease cured by *Agnikarma* does not recur. It balances all

three doshas. Agnikarma has done by Panchaloha salaka.

CONCLUSION

Patient of *Katigraha* (low back pain) diagnosed with disc bulge and neural foraminal narrowing treated with *Erandamooladi niruha vasti* in *Yogavasti* pattern and *Agnikarma*. The patient had better relief from pain, stiffness and Oswestry Disability Index (ODI). Thus, it can be concluded that Ayurveda gives simple, safe and effective treatment in diffuse disc bulge associated posterocentral broad based disc protrusion causing thecal sac/nerve root compression and bilateral moderate to severe neural foraminal narrowing at L4-L5 and L5-S1.

REFERENCES

1. R. K Sharma, Bhagavan Dash, Charaka Samhita Sidhistana, chapter 3, Choukhamba Orientalia, Varanasi, 2011 edition, Page no-223, sloka no-38-42.
2. R. K Sharma, Bhagavan Dash, Charaka Samhita Sidhistana, chapter 1, Chaukhamba Orientalia, 2011 edition, Page no-167, sloka no-47-48.
3. K R Srikantha Murthy, Susruta Samhita Sidhistana, chapter 12, Chaukhamba Orientalia, 2023 edition, Page no-70, sloka no-3.
4. K R Srikantha Murthy, Ashtanga Hrudaya Sutrastana, chapter 12, Chaukhamba Orientalia, 2023 edition, Page no-120, sloka no-1.
5. R. K Sharma, Bhagavan Dash, Charaka Samhita Sidhistana, chapter 1, Chaukhamba Orientalia, 2011 edition, Page no-163, sloka no-38-39.
6. <https://in.docwork-space.com/d/sIMGD8aaSAfSJvq0G?sa=00&st=0t>

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