

**MANAGEMENT OF LUMBAR SPONDYLOSIS WITH AGNIKARMA THERAPY:
CASE STUDY ARTICLE****Bharti Mahor¹, Himani Yadav², K.K Sharma³, Nitesh Kumar Anand⁴**

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Article Received: 30/06/2022 - **Peer Reviewed:** 05/07/2022 - **Accepted for Publication:** 16/08/2022**ABSTRACT**

Agnikarma (therapeutic heat burns) is the treatment modalities mentioned in Ayurveda texts to combat the clinical condition of *Sandhigata Vata* (osteoarthritis) which occurs due to provoked *Vata Dosha* (*Vyana Vayu*) overlapped with *Kapha*. Lumbar spondylosis is a degenerative disorder presenting with lower back pain, stiffness, numbness, difficulty in movement, etc., with evidence of osteophytes and reduced disc height in plain film radiograph. *Maharshi Sushruta* told *Agnikarma* as a parasurgical procedure and it is superior to all parasurgical procedures. Many references are available in *Sushruta Samhita* regarding *Agnikarma*. *Dahanupakarana* is the instrument to produce therapeutic burns during *Agnikarma chikitsa*. It can be done in selected shapes and sizes as per *Acharya Sushruta*. Many small surgical disorders and pain due to *Vata* can be easily cured by *Agnikarma*.

Keywords: *Agnikarma*, Lumbar spondylosis, *Dahanupakarana*.**INTRODUCTION**

In Ayurveda treatment with heat burn is called *Agni Karma*. It is also called *Dahan karma*. Various painful conditions like joint pain. Lower back pain, Headache, Muscular pain anywhere in the body & few

convulsive disorders like epilepsy & psychosomatic disorder can be treated with his intentional heat burn therapy.

क्षारादग्निग्रीयान् क्रियासु व्याख्यातः, तदध्यानां
रोगाणामपुनर्भविन्द्रेषजशस्त्रक्षारैरसाध्यानां तत्साध्यत्वाच्च¹ || (सु.सू. १२/३)

According to *Acharaya Sushruta*, a Patient treated with the *Agnikarma* procedure never suffers from the same disease again, i.e it never reoccurs. Thus, *Agni Karma* cures the disease completely, Hence *Agnikarma* is said to be superior then other therapeutic procedures like oral medicine, *Kshara karma*, or even surgery. In modern terminology *Agnikarma* therapy can be termed as International therapeutic heat burns

तद्यथा- पिप्पल्यजाशकृद्गोदन्तशरशलाकाजाम्बवौष्ठेतरलौहाः क्षौद्रगुडस्नेहाश्च² |
|| (सु.सू. १२/४)

The process of Dahan Karma is normally done by using Pippali, hot honey & oil, gold, hot jiggery, Silver, Panchadhatu Shalaka, Loha Shalaka, etc.

Lumbar spondylosis can be described as degenerative conditions affecting the discs, vertebral bodies, and associated joints of the lumbar vertebrae³. It (degeneration of the lumbar spine) generally initiates from the intervertebral disc. At this level progressive biochemical and structural changes take place leading to a modification in the physical properties of elasticity and mechanical resistance⁴. Disc lesions cause pathological changes in the vertebral bodies, where osteophytes appear⁵. The prevalence of Lumbar spondylosis is 13% in the third decade, rising to nearly 85% by age of 70 years in both men and women, ranging from 15% in the fourth decade to 80% in those older. It affects approximately 60–85% of adults at some point in their lives. The impact of this disorder on quality of life and economic implications are considerable. Regarding management, it includes a number of conservative modalities like Transcutaneous electrical nerve stimulation (TENS), Lumbar supports, Traction, Spine manipulation then Injection therapy, Intradiscal nonoperative therapies for discogenic pain, and if still it persists surgery is the last option². 60 years. The highest incidence age group is 45 to 65 years⁶. In Allopath Transcutaneous electrical nerve stimulation (TENS), Lumbar supports, Traction, Spine manipulation then Injection therapy, Intradiscal nonoperative therapies NSAIDS steroids, and surgery is the line of treatment. However, there remains controversy as to the efficacy of these procedures in re-

solving chronic low back unresponsive there is no complete cure for this condition and has many untoward effects such as drugs-induced gastritis, etc. Similarly, the surgery itself is destructive to the innocent tissue and hence, thereby increases morbidity. Hence, there is a need do explore alternative/Ayurvedic treatments for the holistic management of Lumbar Spondylosis (*Katigata vata*). Further based on resemblance in clinical features of Lumbar Spondylosis can be correlated with *Katigata Vata*⁷. Ayurvedic intervention in the early stages of the illness can be highly beneficial and further progression of the illness can be prevented. The specific treatment mentioned for vitiated *Vata* in Ayurveda includes *Panchkarma* modalities like *Snehana*, *Swedana*, *Basti* (Systemic and local), *Sthaniklepa*, *Nasya*. Similarly, *Agnikarma* (intentional heat burn therapy) is also practiced in treating *Asthigata-Vata* induced by vitiated *Vata* with instant pain management⁸. Though it has been practiced for thousand of years, this ancient method of *Agnikarma* consists of limitations like dependency on a poor heat source(flame), intermittent heating of *Shalaka* (heat delivering probe), and fluctuation of temperature and due risk of iatrogenic burns. Hence, to overcome these limitations, the conventional *Agnikarma* device is modified with a temperature controlling unit and *Panchadhatu Shalaka* is used to do *Agnikarma* treatment. which proved significant in relieving symptoms of *Katigata Vata* such as Pain with walking, local tenderness, restricted movements of joints, stiffness. However, to establish the treatment, further study with a large sample size

METHODOLOGY

This is a single case study conducted at Rishikul Govt. Ayurvedic college & Hospital, UAU University, Haridwar, Patient having I.P.D no. 3311/20157 was treated with a specific regimen & prognosis was assessed. After proper counselling, the line of treatment was explained

Case History

Study in which a 32-year-old female patient. Who had apparently been normal 3 years back? Gradually she noticed pain in the lower back region with difficulty walking. After sometimes pain got aggravated

and found difficulty in standing & walking with severe stiffness. She was managed according for a week with Allopathic medicine but did not get any relief. After that She visited O.P.D no 20 Panchkarma dept. of Rishikul campus for further management with diagnosed as having Lumbar Spondylosis.

Chief complaint

The onset of symptoms developed around 4 years back. However, the symptoms such as pain in the

lower back region, Severe stiffness in the lower back region, and difficulty in both lateral movement and Flexion and extension movement of the Rt leg.

H/O past illness

No H/O of HTN, DM, Thyroid

No H/O any Surgery

Family History

No family history found

Table 01: Personal History

Diet	Non- vegetarian, preferred spicy food
Appetite:	Good,
Thirst	Adequate
Sleep:	Reduce
Addiction	no specific addiction
Micturition	3-4 times per day
Bowel	Irregular, occasional constipation

Table 02: General Examination

Pallor	Absent,
Icterus	Absent,
Clubbing	Absent
Cyanosis	Absent
Edema	Absent
Pulse	84/min
B.P. – 120/80 mm of Hg.	120/80 mm of Hg.
Respiratory Rate	18/min

Systemic examination

Locomotor examination-

Inspection- Curvature of Spine – NAD, No visible Injury, mass, and scar mark. Palpation- Local Temperature Slightly raised, Tenderness-- L3 to L-4, Lumbar, and Sacral Region. Tingling Sensation- mild lower limb. Movements Lumbar: Lateral Movements -Restricted Backward bending – Painful, Complete, Forward bending – Painful, Complete Gait- Limping gait, Arm- B/L normal range of movement (Active,

passive), Legs- B/L Restricted rang of active & passive movement

Test

SLR Test – Positive in Rt leg 60°, Radiographic investigations, Xray Lumbosacral Spine –Degenerative changes at L3 & L4 vertebral body., Degenerative Osteophytes were noted in L3 & L4 regions.

Investigations: The investigations had the following finding

DIAGNOSIS

Table 03: The patient was diagnosed with a case of *Katigata Vata* (Lumbar Spondylosis)

Blood Hg%	12.1 g/dl
ESR	10mm/1hr
DLC	Neturo-75%, Lympho-20.9%, monocyte-2.3%, Eosinophils-4%
Blood sugar	F-98 mg/dl, P/P-124mg/dl
CRP	21.2mg/dl
Anti-CCP	20µ/m

TREATMENT

Agnikarma Chikitsa

Purva Karma: It includes proper assessment and preparation of the patient and instrument required for the procedure. Informed consent of the patient should be taken prior to the procedure. A routine investigation should be performed. **Pradhan Karma:** The patient was kept in a suitable position before starting the procedure. Conformation of the site for *Agnikarma* is done by choosing the site where there is more pain and tenderness. Proper cleaning of the area. with the help of Panchadhatu *Agnikarma Shalaka Agnikarma* is performed on the most tender point as marked and Bindu dot type of Varna *dagad*. and *Shalaka* is kept in contact with the skin for a duration of 10 sec. *Agnikarma* is performed at the still until

Samyak Twaka Dagad Lakshan appears proper space should be maintained between two *Samyak dagad Vranas* During the procedure patient kept being consoled and held comfortably by the assistants.

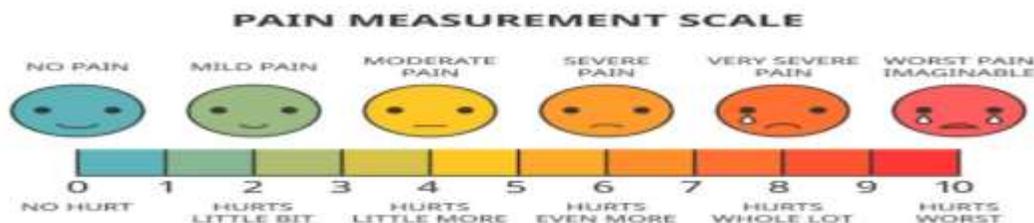
Paschata Karma: Immediately after completion of the procedure *Ghritha and madhu / Gritkumari Pulp & Haridra* should be applied on *Samyaka Dagad Varna* for instant relief from pain and coconut oil & Al-oevera gel should be applied on *Dagad Varma* at nighttime in 2-3 times for 3-4 days for proper healing of the *Varna*.

Proper diet should be advice to the patient *Pathya Apathy* should be advice patient. Complete healing of the *Varna* should be observed.

Agnikarma treatment was given locally 2 times in 15 days.

Table 04: OBSERVATION

Symptoms	Day 1	Day 7	Day 15	Day 30
Pain while walking	4	3	2	0
Tingling Sensation	2	1	1	1
Stiffness	3	2	2	1
Flexion of Spine	3	2	2	1
Extension of Spine	3	2	2	1
Lateral Movement	3	2	2	1



Figur 01:

RESULT

Based on prognosis, Observed Parameters such as Pain with walking which was Grade III on Day 1 (Initial day), was relieved to mild/ Grade (I) on Day 15 & complete relief on Day30. For the Tingling sensation, it was grade III on Day 1st and relived to grade I at 30 days. Also, the parameters such as movements spine like flexion, extension & lateral movement, &stiffness which were Grade III on Day 1 (Initial day), were relieved to moderate/ Grade II on day 15 & mild relieve that is Grade I at Day 30. This

proves the combination treatment (*Agnikarma & Shamana chikitsa*) is effective in the Management of *Katigata Vata* with special reference to Lumbar Spondylosis.

DISCUSSION

In the Present single case study, a patient with a chief complaint such as pain in the lower back region, severe stiffness in the lower back region & unable to do lateral movements, difficulty in walking was diagnosed with *Katigata Vata* (Lumbar Spondylosis) was

taken for the study. The established treatment includes steroids & analgesics along with Surgery having a limited prognosis. In this study, combination therapy was given to the patient & found efficacious in relieving symptoms. *Agnikarma* with modified *Agnikarma* Device 2 times with 15 days

Probable mode of action of *Agnikarma*

Agni possesses *Ushna*, *Tikshna*, *Sukshma*, and *Aashukari Gunas*, which are opposite to *Vata* and anti-*Kapha* properties. Physical heat from red hot *Shalaka* is transferred as therapeutic heat to *Twakdhātu* by producing *Samyak Dagdha Vrana*. From *Twakdhātu* this therapeutic heat acts in three ways. First, due to *Ushna*, *Tikshna*, *Sukshma*, *Ashukari Guna*, removing the *Srotavarodha*, pacifying the vitiated *Vata* and *Kapha Dosha*, and maintaining their equilibrium. Secondly, it increases the *Rasa Rakta Samvahana* (blood circulation) to the affected site. The excess blood circulation to the affected part flushes away the pain-producing substances and the patient gets relief from symptoms. Third, therapeutic heat increases the *Dhatwagni*, so the metabolism of *Dhatu* becomes proper and digests the *Amadosha* from the affected site, and promotes proper nutrition from *Purva Dhatu*. In this way, *Asthi* and *Majja Dhatu* become more stable. Thus, the result is precipitated in the form of relief from all symptoms of *Kativata*. Further, it can be endorsed that the therapeutic heat goes to the deeper tissue like *Mamsa Dhatu* and neutralizes the *Sheeta Guna* of *Vata* and *Kapha Dosha*, and in this way vitiated *Doshas* come to the phase of equilibrium and patients got relief from the symptoms. According to Ayurveda, the basic humor responsible for causation of *Ruka* is *Vata* and pain is a cardinal symptom in most of the *Vatavyadh* is ⁹ *Vata Dosha* is predominantly having *Sheeta Guna* which is exactly opposite to *Ushna Guna* of *Agni*. So, *Agni* is capable of producing relief in pain by virtue of its *Ushna Guna*.

Mode of Action of *Agnikarma*

• On muscles

- Rise in temperature
- Sudden contraction of muscles.
- Followed by relaxation.

Increase in the efficiency of their action.

• On Blood Circulation

- Stimulation of superficial sensory nerves.
- Dilation of local blood vessels.
- Increase in blood circulation.

• On Pain

- Increase in local metabolism.
- Metabolites excreted.
- Blood circulation normalizes.
- Thus, reduction in the intensity of pain

CONCLUSION

Agnikarma provided better relief in *Katishoola* (pain in the lower back) and *Katisuptata* (numbness in the lower back), *Agnikarma* is the best & most effective parasurgical procedure. It acts together as Antiseptic, Haemostatic & Analgesic. *Agni* is considered as life in vedas. In the same way, the karma done by this *Agni* gives new life to the body.

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