



## EFFICACY OF DASHAMoola KWATHA SWEDANA AND USHNA JALA SWEDANA FOR NASYA KARMA IN CERVICAL SPONDYLOSIS- A COMPARATIVE STUDY

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### ABSTRACT

Pain in the neck is common after 40 years of age. Bones in the neck region progressively degenerate as age advances. Arthritis of the neck (Cervical spondylosis) may result from bony spurs and problems with ligaments and discs. The spinal canal may become narrow and compress the spinal cord and nerve roots emerging out of it. The pain that results may range from mild discomfort to severe, crippling dysfunction. Pain may be at different sites having different origins but for the effective remedy of pain, man is still searching around. The present lifestyle has the sedentary nature of working in front of computers for hours, having no concern about overeating or traveling in jerky conditions all these contribute to the problems of the cervical spine, and many people are prone to it. After 40 years of age, Ishat Parihani Avastha starts which results in the natural process of degeneration leading to manifestation like Spondylosis. For this purpose, 40 patients with Cervical Spondylosis were treated in two groups each comprising 20 patients. Group A was treated with Dashamoola Kwatha Nadi Swedana followed by Nasya Karma with Prasarini taila while the other Group was treated with Nadi Swedana with Ushna Jala followed by Nasya Karma with Prasarini taila. The results of this study showed both the group provided significant improvement in the symptoms of Cervical Spondylosis, but a comparison showed that the effect of Nadi Swedana done with Dashamoola Kwatha was better in comparison to Nadi Swedana done with Ushna jala.

**Keywords:** Cervical spondylosis, Nasya karma, Dashamoola kwatha, Prasarini taila

## INTRODUCTION

Pain in the neck is common after 40 years of age. Bones in the neck region progressively degenerate as age advances. Arthritis of the neck (Cervical spondylosis) may result from bony spurs and problems with ligaments and discs<sup>4</sup>. The spinal canal may become narrow and compress the spinal cord and nerve roots emerging out of it. The pain that results may range from mild discomfort to severe, crippling dysfunction. Pain may be at different sites having different origins but for the effective remedy of pain, man is still searching around. Pain-dominant disorders like Cervical Spondylosis are degenerative, inflammatory conditions pertaining to the spine that still haunt the man<sup>8</sup>. The present lifestyle has the sedentary nature of working in front of computers for hours, having no concern about overeating or travelling in jerky conditions all these contribute to the problems of the cervical spine, and many people are prone to it. The following data highlight's the present-day involvement of Cervical Spondylosis. This disease is having a prevalence of 0.1-1% of the general population, with a male to female ratio of 3:1. This disease is occurring in the middle and later decades of life, during the 4<sup>th</sup> to 5<sup>th</sup> Decade of the life<sup>7</sup>, after 40 years of age, Ishat Parihani Avastha<sup>1</sup> starts which results in the natural process of degeneration leading to manifestation like Spondylosis. Keeping this idea in view, the study was planned to compare the effects of Nadi Swedana done with Dashamoola Kwatha<sup>2</sup> and Ushna Jala. For this purpose, 40 patients with Cervical Spondylosis were treated in two groups each comprising 20 patients. Group A was treated with Dashamoola Kwatha Nadi Swedana followed by Nasya Karma with Prasarini taila<sup>3</sup> while the other Group was treated with Nadi Swedana with Ushna Jala followed by Nasya Karma with Prasarini taila. A fascinating point in the study was one group was treated with Dashamoola kwatha in view of introducing the concept of Shamana Swedana as Vishishta Poorva karma for Nasya Karma in the field of Panchakarma<sup>5</sup>. The results of this study showed both the group provided significant improvement in the symptoms of Cervical Spondylosis, but a comparison

showed that the effect of Nadi Swedana done with Dashamoola Kwatha was better in comparison to Nadi Swedana done with Ushna jala.

### OBJECTIVES OF THE STUDY

To evaluate the therapeutic efficacy of Dashamoola kwatha Swedana after Abhyanga for Nasya Karma.

To evaluate the therapeutic efficacy of Ushna jala Swedana after Abhyanga for Nasya Karma.

To compare the therapeutic efficacy of Dashamoola kwatha Swedana and Ushna jala Swedana for Nasya karma in cervical spondylosis.

Sources of data

40 patients with Cervical spondylosis were selected from OPD and IPD of MAMC & Hospital Dharwad

Method of collection of data

This was a comparative clinical study with a pre-test and post-test design where 40 patients of either sex diagnosed with Cervical spondylosis were randomly assigned into two groups viz., Group A and Group B comprising 20 patients in each.

A case proforma specially designed and duly filled with necessary details pertaining to history taking, clinical examination, and assessment parameters were prepared.

The results were assessed as per the grading of assessment parameters of cervical spondylosis and the data obtained was statistically analysed by adopting paired 't' test (within the group) and unpaired 't'-test (in between the group).

### DIAGNOSTIC CRITERIA

Diagnostic criteria are mainly based on the signs and symptoms of Cervical spondylosis.

In addition, a radiological examination was carried out on all the patients.

### ● INCLUSION CRITERIA

Patients between the age group 30-70 years of either sex were selected.

Patients with signs & symptoms of Cervical spondylosis.

Patients fit for Nasya karma.

### ● EXCLUSION CRITERIA

Patients who are undergoing other modalities of treatment.

Any other systemic disorders interfering with the course of treatment.

**○ STUDY DESIGN**

This was a comparative clinical study with pre-test and post-test design conducted on 40 patients with signs and symptoms of Cervical spondylosis. 40 patients with Cervical spondylosis were selected and assigned randomly into two groups, Group A and Group B.

**Group-A**

Poorva karma-Sthanika Abhyanga with Prasarini taila, Swedana with Dashamool kwatha.

Pradhana karma-Nasyakarma with Prasarini taila, 8 drops in each nostril.

Paschat karma-Kavalagraha with warm water and Dhoomapana with Haridra was performed.

**Group-B**

Poorva karma-Sthanika Abhyanga with Prasarini taila, Swedana with Ushna jala.

Pradhana karma-Nasya with Prasarini taila, 8 drops in each nostril.

Paschat karma-Kavalagraha with warm water and Dhoomapana with Haridra was performed.

Duration of procedure: 7 consecutive days.

Pre-test assessed on 1<sup>st</sup> day before treatment, Post-test assessed on the 7<sup>th</sup> day after treatment and after following up on the 14<sup>th</sup> day.

**ASSESSMENT CRITERIA**

○ The following Subjective and Objective parameters were assessed using different grading before Treatment, after Treatment, and after following up.

**○ SUBJECTIVE PARAMETERS**

- 1. Neck pain
- 2. Neck stiffness
- 3. Radiation of pain
- 4. Painful neck movements
- 5. Weakness of upper limb

**○ OBJECTIVE PARAMETERS**

- 1. Tenderness
- 2. Restricted neck movements-
  - Flexion
  - Extension
  - Right lateral flexion
  - Left lateral flexion
  - Right lateral rotation
  - Left lateral rotation
- Sensory loss of upper limb

**OBSERVATIONS**

| Parameter             | Category     | Value | %     |
|-----------------------|--------------|-------|-------|
| Age in Years          | 41-50        | 16    | 40%   |
| Sex                   | Female       | 23    | 57.5% |
| Religion              | Hindu        | 36    | 90%   |
| Education             | Graduate     | 18    | 45%   |
| Marital Status        | Married      | 40    | 100%  |
| Socio-economic Status | Middle class | 30    | 75%   |
| Occupation            | Housewife    | 18    | 45%   |
| Diet                  | Mixed        | 30    | 75%   |
| Sleep                 | Disturbed    | 22    | 55%   |
| Addictions            | Tea          | 22    | 55%   |
| Built                 | Moderate     | 35    | 87.5% |
| History of trauma     | Yes          | 9     | 22.5% |
| Nature of work        | Housewife    | 19    | 47.5% |
| Desha                 | Sadharana    | 38    | 95%   |
| Duration of disease   | <1 year      | 21    | 52.5% |

|       |           |    |     |
|-------|-----------|----|-----|
| Desha | Sadharana | 38 | 95% |
|-------|-----------|----|-----|

RESULTS

| RESULTS                                                                                          |       |       |      |      |      |        |         |         |        |
|--------------------------------------------------------------------------------------------------|-------|-------|------|------|------|--------|---------|---------|--------|
| TABLE SHOWING THE RESULTS OF NASYA KARMA ON ASSESSMENT PARAMETERS IN BETWEEN GROUP A AND GROUP B |       |       |      |      |      |        |         |         |        |
| Parameter                                                                                        | BT/AT | Group | Mean | S.D. | S.E. | P.S.E. | t value | p value | Remark |
| Neck Pain                                                                                        | BT    | A     | 3.00 | 0.00 | 0.00 | 0.08   | 1.83    | >0.05   | NS     |
|                                                                                                  |       | B     | 2.85 | 0.37 | 0.08 |        |         |         |        |
|                                                                                                  | AT    | A     | 1.35 | 0.49 | 0.11 | 0.15   | 1.33    | >0.05   | NS     |
|                                                                                                  |       | B     | 1.30 | 0.47 | 0.11 |        |         |         |        |
| Neck Stiffness                                                                                   | BT    | A     | 2.40 | 0.50 | 0.11 | 0.18   | 1.13    | > 0.05  | NS     |
|                                                                                                  |       | B     | 2.20 | 0.62 | 0.14 |        |         |         |        |
|                                                                                                  | AT    | A     | 1.10 | 0.31 | 0.07 | 0.12   | 0.81    | > 0.05  | NS     |
|                                                                                                  |       | B     | 1.00 | 0.46 | 0.10 |        |         |         |        |
| Radiation of Pain                                                                                | BT    | A     | 1.80 | 0.62 | 0.14 | 0.19   | 1.07    | >0.05   | NS     |
|                                                                                                  |       | B     | 2.00 | 0.56 | 0.13 |        |         |         |        |
|                                                                                                  | AT    | A     | 1.05 | 0.51 | 0.11 | 0.12   | 0.80    | > 0.05  | NS     |
|                                                                                                  |       | B     | 0.95 | 0.22 | 0.05 |        |         |         |        |

| Parameter                 | BT/AT | Group | Mean | S.D. | S.E. | P.S.E. | t value | p value | Remark |
|---------------------------|-------|-------|------|------|------|--------|---------|---------|--------|
| Painful Neck Movements    | BT    | A     | 2.30 | 0.47 | 0.11 | 0.13   | 1.13    | > 0.05  | NS     |
|                           |       | B     | 1.15 | 0.37 | 0.08 |        |         |         |        |
|                           | AT    | A     | 1.15 | 0.37 | 0.08 | 0.08   | 1.83    | > 0.05  | NS     |
|                           |       | B     | 1.00 | 0.00 | 0.00 |        |         |         |        |
| Weakness of Upper Limb    | BT    | A     | 0.70 | 0.73 | 0.16 | 0.21   | 1.42    | > 0.05  | NS     |
|                           |       | B     | 0.40 | 0.60 | 0.13 |        |         |         |        |
|                           | AT    | A     | 1.55 | 0.51 | 0.11 | 0.15   | 1.98    | > 0.05  | NS     |
|                           |       | B     | 0.25 | 0.44 | 0.10 |        |         |         |        |
| Tenderness                | BT    | A     | 2.15 | 0.37 | 0.08 | 0.10   | 1.04    | > 0.05  | NS     |
|                           |       | B     | 2.05 | 0.22 | 0.05 |        |         |         |        |
|                           | AT    | A     | 1.55 | 0.51 | 0.11 | 0.17   | 1.79    | > 0.05  | NS     |
|                           |       | B     | 1.25 | 0.55 | 0.12 |        |         |         |        |
| Restricted Neck Flexion   | BT    | A     | 2.05 | 0.22 | 0.05 | 0.15   | 1.71    | > 0.05  | NS     |
|                           |       | B     | 1.80 | 0.62 | 0.14 |        |         |         |        |
|                           | AT    | A     | 1.00 | 0.00 | 0.00 | 0.07   | 1.45    | > 0.05  | NS     |
|                           |       | B     | 0.90 | 0.31 | 0.07 |        |         |         |        |
| Restricted Neck Extension | BT    | A     | 2.05 | 0.22 | 0.05 | 0.15   | 1.98    | > 0.05  | NS     |
|                           |       | B     | 1.80 | 0.62 | 0.14 |        |         |         |        |
|                           | AT    | A     | 1.00 | 0.00 | 0.00 | 0.07   | 1.45    | > 0.05  | NS     |
|                           |       | B     | 0.90 | 0.31 | 0.07 |        |         |         |        |

| Parameter                         | BT/AT | Group | Mean | S.D. | S.E. | P.S.E. | t value | p value | Remark |
|-----------------------------------|-------|-------|------|------|------|--------|---------|---------|--------|
| Restricted Right Lateral Flexion  | BT    | A     | 1.80 | 0.62 | 0.14 | 0.21   | 0.47    | > 0.05  | NS     |
|                                   |       | B     | 1.70 | 0.73 | 0.16 |        |         |         |        |
|                                   | AT    | A     | 0.90 | 0.31 | 0.07 | 0.12   | 0.00    | > 0.05  | NS     |
|                                   |       | B     | 0.90 | 0.45 | 0.10 |        |         |         |        |
| Restricted Left Lateral Flexion   | BT    | A     | 1.65 | 0.75 | 0.17 | 0.25   | 0.20    | > 0.05  | NS     |
|                                   |       | B     | 1.60 | 0.82 | 0.18 |        |         |         |        |
|                                   | AT    | A     | 0.85 | 0.49 | 0.11 | 0.15   | 0.00    | > 0.05  | NS     |
|                                   |       | B     | 0.85 | 0.49 | 0.11 |        |         |         |        |
| Restricted Right Lateral Rotation | BT    | A     | 0.30 | 0.66 | 0.15 | 0.20   | 0.50    | > 0.05  | NS     |
|                                   |       | B     | 0.20 | 0.62 | 0.14 |        |         |         |        |
|                                   | AT    | A     | 0.15 | 0.37 | 0.08 | 0.11   | 0.47    | > 0.05  | NS     |
|                                   |       | B     | 0.10 | 0.31 | 0.07 |        |         |         |        |
| Restricted Left Lateral Rotation  | BT    | A     | 0.40 | 0.75 | 0.17 | 0.24   | 0.43    | > 0.05  | NS     |
|                                   |       | B     | 0.30 | 0.73 | 0.16 |        |         |         |        |
|                                   | AT    | A     | 0.20 | 0.41 | 0.09 | 0.12   | 0.41    | > 0.05  | NS     |
|                                   |       | B     | 0.15 | 0.37 | 0.08 |        |         |         |        |
| Sensory Loss of Upper Limb        | BT    | A     | 0.10 | 0.31 | 0.07 | 0.11   | 0.47    | >0.05   | NS     |
|                                   |       | B     | 0.15 | 0.37 | 0.08 |        |         |         |        |
|                                   | AT    | A     | 0.05 | 0.22 | 0.05 | 0.10   | 1.04    | >0.05   | NS     |
|                                   |       | B     | 0.15 | 0.37 | 0.08 |        |         |         |        |

## DISCUSSION

Nasya Karma which involves the nasal route of drug administration can be considered the best line of treatment in the management of Cervical spondylosis. It is the nearest possible route of drug administration to reach the site of pathology (in the neck) and alleviate the diseases in that area. For Nasya karma sthanika abhyanga and sthanika swedana as Poorvakarma do they help in dosha shaman? “Is a point to be analyzed”? Snehana and swedana as Poorvakarma for shodhana do utkleshana and dravikarana of doshas, but sthanika snehana and Swedana for Shamana Nasya contribute for dosha shaman when shaman dravyas are used or only ushna jala is sufficient is the research question for the present clinical study. In this regard, the present clinical study was conducted to evaluate the efficacy of Dashamoola kwatha and ushna jala Swedana as Poorva karma for Nasya Karma contributes to Shamana.

**PRASARINI TAILA:** guru, snigdha guna, ushna virya, and Vata hara, shotha hara property helps in reducing the symptoms of Cervical spondylosis.

### **DASHAMOOLA QUATHA:**

Due to its ushna virya, tridosahara, shoolahara, and shotha hara property help in reducing the symptoms of Cervical spondylosis.

## CONCLUSION

The present study is a comparative clinical study with a pre-test and post-test design where 40 patients of either sex diagnosed with cervical spondylosis were randomly assigned into two groups viz., Group A and Group B comprising 20 patients in each. The patients in Group A treated with Dashamoola Kwatha Swedana and Group B were treated with Ushna jala Swedana followed by Nasya Karma with *Prasarini Talia*, 8 drops in each nostril for 7 consecutive days. The overall observation in the study revealed that the maximum number of patients were females in the age group of 40 – 60 years belonging to a middle class,

Hindu Religion, married, graduated having mixed diet and disturbed sleep presenting with all the symptoms of Cervical spondylosis.

The overall result in the study revealed that there is no statistically significant difference between the two groups since both the groups showed statistically highly significant improvement after treatment and after following up in almost all the parameters with a p-value < 0.001 but when compared with the t value Group A was better than Group B. All the patients in both groups presented with Samyak Swinna and Samyak Nasya Lakshanas.

Hence, the present study reveals that for Shodhana, Snehana, and Swedana Poorva karma is meant for Doshauktlesana and dravikarana but for Shamana Nasya it helps for dosha shamana by altering the dravyas as per patient and disease condition.

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