



VISHWACHI - A CASE REPORT

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<https://doi.org/10.46607/iamj2512052024>

(Published Online: May 2024)

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Article Received: 11/04/2024 - Peer Reviewed: 29/04/2024 - Accepted for Publication: 13/05/2024.



ABSTRACT

Vata is the prime cause of all diseases. Vishwachi is one of the vataja nanatmaja vyadhi. Being shoola pradhana vyadhi, it affects the neck and upper extremities. The clinical presentation of vishwachi resembles cervical spondylosis, a degenerative condition of the cervical spine. Hence, the Vishwachi line of treatment can be adopted in the management of cervical spondylosis. Materials and methods: Swedana, Basti karma and nasya are the samanya chikitsa for vata vyadhi. In this present case, radiating pain starting from the nape region to the right upper limb was effectively managed through Jambheera pinda sweda for five days, Kukkutanda pinda sweda for seven days, and Karpasastyadi taila nasya and oral medications were administered. Results: The patient had a significant reduction in pain and improvement in range of motion.

Conclusion: Vishwachi's treatment line for cervical spondylosis yields better results.

Keywords: Vishwachi, Cervical spondylosis, Jambheera pinda sweda, , Kukkutanda pinda sweda, Karpasastyadi taila nasya.

INTRODUCTION

People are vulnerable to a variety of musculoskeletal and neurological conditions due to improper lifestyle

adaptation. A sedentary lifestyle, lack of time, lack of sleep, suppression of natural urges, etc., are the lead-

ing causes of the manifestation of various lifestyle disorders. One such disease is Cervical spondylosis. Vishwachi is one among vatavyadhi. The word vishwachi is derived from two words. Vishvat and anc. Vishvat means pervading, and anc means directed towards. It affects the neck and upper extremities and produces signs and symptoms like Ruk, Thoda, Sthamba, Karmakshaya (1), and Chestapaharana of Bahu (2). Dalhana opines that vishwachi resembles Gridhrasi (3). In contemporary science, vishwachi can be correlated to cervical spondylosis.

Cervical spondylosis is the result of osteoarthritis in the cervical spine. It is characterised by the degeneration of intervertebral discs and osteophyte formation (4). It includes signs and symptoms like pain and stiffness in the neck, radiating to the upper limb associated with numbness, headache, etc. It is a common disease affecting the middle and old age groups of both sexes, and the prevalence of neck pain ranges from 0.4% to 41.5% (5). Contemporary science advises muscle relaxants, hot/cold therapy, lifestyle modification, NSAIDs, corticosteroid injections and lastly, surgical procedures, which have several complications.

Abhyanga, Swedana, Basti, Nasya and Sneha virechana are the samanya vatavyadhi chikitsa explained by several acharyas. Swedana is mainly indicated in vatakaphaja vikara and nasya karma is the best choice of treatment in urdhwajatrugata vikara. Hence, in the present case, an attempt is made to evaluate the combined effect of swedana and nasya in vishwachi.

MATERIALS AND METHODS

CASE REPORT:

Musculoskeletal examination: shown in Table no 1.

	Right upper limb	Left upper limb
Radiating pain	Present	Present
ROM	Restricted	Restricted

Chief complaints:

- Pain and stiffness in the nape region radiating to the right upper limb.
- Swelling in neck region for six months.

Associated complaints:

- Sour belching, nausea, headache, and burning sensation in throat and chest region for six months.

History of present illness:

A female patient presented to the OPD of Panchakarma, SJGAUM Hospital Bengaluru, Karnataka, India. Chief complaints of pain and stiffness in the nape of the neck region have been radiating to the right upper limbs for six months. The pain and stiffness gradually onset and were initially noticed in the neck region. As she neglected the condition, in the span of the next six months, she developed a neck that started radiating to the right upper limb. She has observed aggravation of pain during morning hours while carrying heavy weight over her head. Symptoms were observed to be mild on application of hot fomentation. The patient had taken various treatments. She didn't get satisfactory relief, so she visited the OPD of Panchakarma, SJGAUM Hospital Bengaluru, for further management.

Examination:

The curvature of the spine-Loss of cervical lordosis
Spurling test – Positive

Cervical spine	
Swelling	Present at the nape of the neck
Tenderness	Present at C5-C6, C6-C7.
Temperature	Warmth
ROM	Right and left lateral rotation: painful. Flexion and extension: Restricted.

Dashavidha pareeksha

Table 02: Showing Dashavidha pareeksha.

Prakruti	Vata-Pittaja	
Sara	Madhyama	
Samanana	Madhyama	
Satva	Madhyama	
Saatmya	Katu amla rasa saatmya	
Ahara Shakti	Abhyavaharana Shakti	Madhyama
	Jarana shakti	Madhyama
Vyayama Shakti	Avara	
Vaya	30 yrs.-Madhyama	
Pramana	Madhyama	

Nidana panchaka:

Table 03: showing Nidana panchaka.

Nidana	Aharaja: katu amla rasa ,abhishyandi aahara ati sevana Viharaja: skipping meals, carrying heavy weight overhead, Ratri jagarana. Manasika: shokha, chinta
Purvaroop	Avyaktha
Roopa	Ruk, thoda, stambha in bahu pradesha, karmakshayakari of bahu.
Upashaya	Afternoon hours, hot fomentation
Anupashaya	Morning hours

Samprapti ghataka:

Table 04: showing Samprapti ghataka.

Dosha	Vata pradhana tridosha	Udbhava sthana	Pakwashaya
Dushya	Mamsa,asthi,snayu,sandhi,kandara	Sanchara sthana	Sarva shareera
Agni	Jataragni	Vyaktasthana	Snayu and kandara of bahu, hasta tala and anguli
Agnidushti	Mandagni	Adhishtana	Greeva
Srotas	Asthivaha and majjavaha	Rogamarga	Madhyama
Srotodusti	Sanga	Sadhyasadhyata	Kricchra Sadhya

Treatment Protocol Adopted:

Panchakarma procedures, along with oral medicines, were administered.

Details of treatment are given in Table 05

Table 05: Treatment Protocol Adopted

Panchakarma	Shamanoushadi
1. Jambheera pinda sweda	1. Trayodashanga guggulu 1-1-1 A/F
2. Kukkutanda pinda sweda	2. Dashamoola kashaya 10ml-0-10ml A/F
3. Karpasastyadi taila nasya	3. Syp Amlapitta mishrana 10ml-0-10ml B/F

OBSERVATIONS AND RESULTS

Table no 6: showing observation and results.

Treatment	Duration	Observation
Jambheera pinda sweda	Five days	A slight reduction in pain. Stiffness in the neck region was reduced by 70%.
Kukkutanda pinda sweda	Seven days	Radiating pain from neck to right upper limb reduced.
karpasastyadi taila nasya	Seven days	Marked reduction in pain, swelling, and stiffness. 90% relief from overall symptoms.

Assessment: Shown in Table 07

Table 07: Assessment of symptoms before and after the treatment.

Parameter	Before treatment	After treatment	
Radiating pain from the nape of the neck	Present	Absent	
Tenderness in the nape of the neck	Present	Absent	
Swelling	Present	Absent	
Range of movement			
Cervical spine	Flexion	30°	50°
	Extension	30°	50°
	Lateral flexion	40°	45°

DISCUSSION

vishwachi is the one among vatavyadhi. The lakshanas of vishwachi include a deficiency in the ability to perform the movements of Bahu, such as utkshepana and apakshepana.

Cervical spondylosis and vishwachi share the exact pathophysiology and Symptoms. Hence, the condition can be effectively managed using the vishwachi treatment line.

Jambheera pinda sweda

Jambheera pinda Sweda falls in the category of sankara sweda⁽⁶⁾. It is included under sagni and snigdha sweda. The ingredients of jambheera pinda sweda are

act as vataaphahara, shoolagna and sthambagna. Deepana pachana Jambira action helps remove the ama from the localised part. So, initially, Jambira pinda sweda was adopted to remove the avarana. Jambira pinda sweda mainly works in musculoskeletal disorders, helps improve muscle tone, and thereby aids in shoolahara and sthambahara action.

Kukkutanda pinda sweda

Kukkutanda pinda sweda is the unique pinda sweda modality mentioned by Bhavaprakasha⁽⁷⁾. It acts as stambhagna, gouravgna, vedhanashamaka, brimhana, balya, and tridoshagna. The egg contains nutrients like glucosamine, chondroitin sulphate, hyaluronic acid, etc. Glucosamine helps prevent cartilage degeneration and joint space reduction. Chondroitin sul-

phate helps maintain cartilage structure and reduces inflammation by its anti-inflammatory properties.

Karapasathyadi taila nasya

Karapasastyadhi taila⁽⁸⁾ possesses ushna and brimhana guna. Hence, it is helpful for kaphavruta vata lakshanas.

CONCLUSION

Vishwachi and cervical spondylosis share the exact aetiology and clinical presentation. In contemporary science, cervical spondylosis is not effectively managed. The following case study sheds light on ayurvedic treatment, which includes oral medications and panchakarma procedures, and has yielded promising results.

Declaration of patient consent:

The authors certify that they have obtained all appropriate consent from the Patient.

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Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Priyanka Kalal & Ananta S Desai: Vishwachi -A Case Report. International Ayurvedic Medical Journal {online} 2024 {cited May 2024} Available from: http://www.iamj.in/posts/images/upload/993_997.pdf