

## A CASE STUDY ON AYURVEDIC MANAGEMENT OF CERVICAL DYSTONIA W.S.R. GREEVA HUNDANAM

Anju K Bhardwaj<sup>1</sup>, Vijay Dandavatimath<sup>2</sup>

<sup>1</sup>Ayurveda Physician ESIC MC & H, Faridabad, Haryana, India

<sup>2</sup>Associate Professor & HOD Panchakarma TMAE Society's Ayurveda Medical College, Hosapete, Karnataka, India

Email: [dr.annu1802@gmail.com](mailto:dr.annu1802@gmail.com)

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### ABSTRACT

Cervical Dystonia (CD) is a chronic neurological disorder characterized by involuntary patterned contractions of cervical musculature resulting in abnormal movements or postural changes of the head, neck, and shoulders. In *Ayurveda* *Prakupita vata* is responsible for clinical entity termed as *Greeva Hundanam* that can be correlated to Cervical Dystonia. Current case study was carried out in ESIC Medical College & Hospital Faridabad. Patient complaining of stiffness, pain in neck region, progressively developed structural change in neck leading to hyper-extension. After analysing the condition of patient and understanding the *Nidana* and *Samprapti* it was concluded that it can be managed with principles of *Vata vyadhi chikitsa* explained in *Ayurveda* and accordingly this case was treated with *Shamana aushadh* (oral Medicines) of *Vata-Kaphahara*, *Balya* (strength promoting) in nature & *Panchakarma* (Five Bio Purificatory therapies of *Ayurveda*) i.e. *Nasya* (Nasal instillation of medicines) & *Shirodhara*. Pain, stiffness and overall health of patient improved with *Ayurvedic* treatment. Overall results of treatment were positive and further researches on a large sample size will certainly provide evidence to support efficacy of *Ayurvedic* treatment in cases of Cervical Dystonia.

**Keywords:** Cervical Dysytonia, *Greeva hundanam*, *Panchakarma*, *Nasya*, *Shirodhara*.

### INTRODUCTION

*Vata dosha* is responsible for movements in human body. In its normal state *Vata Dosha* maintains normal structure and function of various joints of body. *Dhatu Kshaya* (Depletion of body tissues) and *Margavarodha* (Obstruction of circulatory channels) are major *nidana* of *Vata vyadhi*<sup>1</sup>. *Greeva hundanam*<sup>2</sup> is one such condition explained under *Prakupita vata lax-*

*anas* in *Charaka samhita*. *Chakrapani* commented on the word *Hundanam* as “*Shiro Prabhrutinam Antah Pravesha*” means inward contracture of the head and its allied parts, which is possible due to the implication with cervical parts.<sup>3</sup> This condition is suggestive of the structural deformity of the neck. Cervical Dystonia is a chronic neurologic disorder character-

ized by involuntary patterned contractions of cervical musculature resulting in abnormal movements or postural changes of the head, neck, and shoulders. <sup>4</sup> Clinical features of both the conditions simulates to a larger extent.

### CASE REPORT-

Female aged 43 years complaining of restricted movements, severe pain radiating to both upper limbs, structural deformity in cervical region and sudden involuntary jerky neck movements since 4-5 years came to *Ayurveda* OPD ESIC Medical College & Hospital Faridabad in June 2018. She had associated complaints of disturbed sleep and hard stools off and on since 4-5 years. Patient was apparently healthy 4 years back, initially experienced sudden tremors with se-

vere pain neck for which she was managed conservatively but gradually stiffness started worsening and neck became hyperextended i.e. Retrocolis so it became difficult to look down and hampered daily routine of the patient. She is working in a textile company for 8-10 hours a day.

In her previous medical records she was diagnosed as a case of cervical dystonia – segmental dystonia and was on medication Tab Syndopa 125mg OD and Tab Zapez 0.5 mg HS daily and took analgesic for symptomatic relief. With these medications jerky movements were controlled but structural changes and stiffness in cervical region gradually worsening. Symptoms reoccur on stopping above mentioned medication.

### Dashavidha Pariksha

**Table 1:** Showing *Dashavidha Pareeksha*

<i>Parikshya Bhaava</i>	
1. <i>Prakruti</i>	<i>Vata-Pittaja</i>
2. <i>Vikruti</i>	<i>Vata Vriddhi, Kapha Kshaya, Dhatu kshaya</i>
3. <i>Sara</i>	<i>madhyama sara</i>
4. <i>Samhanana</i>	<i>Madhyama</i>
5. <i>Pramana</i>	<i>Atidirgha, Krisha akriti</i>
6. <i>Satmya</i>	<i>Avara</i>
7. <i>Satva</i>	<i>Avara</i>
8. <i>Ahara Shakti</i>	<i>Madhyama</i>
9. <i>Vyayama shakti</i>	<i>Madhyama</i>
10. <i>Vaya</i>	<i>Madhayama</i>

### Ashta Sthaana Pareeksha

1. *Nadi- Vata-pittaja*, 2. *Mootra- Prakrita* 3. *Malahard stool, once in 1-2 days* 4. *Jihva- Alpa lipta* 5. *Shabda-Prakrita* 6. *Sparsha- Naatiushna* 7. *Drika-Prakrita* 8. *Akriti- Krisha, Deergha*. She had *Alpa nidra, Vishamagni* and was *Atichintita*.

### INVESTIGATION-

MRI cervical spine dated 15/7/17

- Partial reversal of normal cervical lordotic curvature.
- Early cervical spondylosis & disc degenerative changes associated with mild annular disc bulges at

C5-C6 & C6-C7 levels mildly indenting ventral thecal sac & bilateral exiting nerve damage roots.

### Criteria for Assessment:

All the signs and symptoms were given scoring depending upon their severity to assess the effect of the treatment subjectively on Pain in Neck, degree of Flexion, Extension, Lateral Rotation, Lateral Flexion, Nature of Stool, *Nidra, Svara varna yoga*. Scores were recorded before and after treatment to see the role of treatment (Annexure 1- Grading of symptoms).

**TREATMENT PROTOCOL 1****Table 2:** Showing Treatment Protocol

Oral medicines	Dosage	Anupaana	Duration
<i>Maharasnadi Kashaya</i>	30 ml bd After food	Warm water	30 days
<i>Tab. Trayodashanga Guggulu</i>	2 bd After food	Warm water	30 days
<i>Tab Brahmi Vati</i>	2 HS	Warm milk	30 days
<i>Ashvagandha Kshirapaka</i>	50 ml once daily	-	30 days
<i>Matra Vasti with Mahanarayana Taila</i>	50 ml	Just after lunch	7 days

**TREATMENT PROTOCOL 2****Table 3:** Showing Treatment Protocol 2

Procedure	Medicine Used	Duration
<i>Shirodhara</i>	<i>Dhanvantaram tailam &amp; Rasnadi Choornam for talam</i>	45 min for 7 days
<i>Sthanika Abhyanga to Shiras, Greeva and both hands followed by Nadi sveda</i>	<i>Abhyanga with Dhanvantaram tailam &amp; Dashamoola Kvath for Nadi sveda for 7 days.</i>	<i>Abhyanga for 20-30 minutes &amp; Nadi sveda till Samyaka laxanas observed.</i>
<i>Nasyam</i>	<i>Dhanvantaram 101 Paki taila, Ushna jala for Kavala after Nasya</i>	8 drops <i>Taila</i> in each nostril for 7 days

*Pathya Ahara* / Conducive diet—ghee, meat soup, warm milk, warm and oily food, pomegranate, *Aam-laki*, *Ashvagandha Ksirapaka*.

*Pathya Vihara* – *Abhyanga, Nirvata sthana, Atapa Sevana*, etc.

**Table 4:** Showing score of symptoms Before & After treatment

S.NO	SCORE	BT	AT
1.	Pain	3	1
2.	Flexion	4	3
3.	Extension	1	0
4.	Lateral Rotation	2	1
5.	Lateral flexion	2	1
6.	Nature of stool	2	0
7.	Sleep	3	1
8.	<i>Svara varna Yoga</i>	3	0

**RESULTS & DISCUSSION**

*Vata Prakruti* individuals are at more risk of developing neurological and degenerative conditions. History revealed that when patient developed this condition she was in deep grief state due to familial issues that caused *Vata Prakopa* and she did excessive *Langhana* so there was probably *Dhatukshaya Janya Vata Prakopa (Tissue depletion)* leading to this condition in the case. Initially oral treatment was started with the formulation mentioned in Table 2 along with *Matra Vasti* for a period of 7 days. *Maharasnadi Kashaya* has mainly *Rasna (Alpinia galanga)* and *Guggulu (Com-*

*miphora mukul)* as ingredients, both are *Vata hara, Shoolahara* (analgesics) and anti-inflammatory in action. *Matra vasti* is indicated in *Vatabhagneshu*<sup>5</sup> (All *Vata* disorders) & is especially advised in person working for longer duration<sup>6</sup> *Mahanarayana taila is Vatahara & Matra Vasti* with it leads to nourishment of body tissues<sup>7</sup>. After 7 days *Matra Vasti* was discontinued and oral medicines were continued for a period of three more weeks.

*Ashvagandha (Withania somnifera)* & *Brahmi (Bacopa monnerie)* are nervine tonics and reduces stress. During second week of treatment *Shirodhra, Sthanika*

*Abhyanga, Nadi sveda* and *Marsha Nasya* was administered (Table 3). *Sirodhara & Moordhini tailam*<sup>8</sup> is indicated in *Shirogata Vikaras* and as patient was in stress also so *Shirodhara* was included in line of management. *Shirodhara* provides relaxation to the individual and pacifies the *Vata Dosha*. *Dhanvantaram tailam* is effective in neuro muscular conditions<sup>9</sup> and as this was a *Vata* dominant condition so it was choice of *taila* for *Shirodhara* and its 101 *Paka Taila* for *Nasya*. *Bala, Dashamoola, Ksira, Kakoli, Meda Mahameda* etc are *Balya* as well as *Vata* and *Kapha hara* in action. *Nasya* is indicated in *Greevagata roga* as well as *Urdhvajatrugata Vata Vikara* (supraclavicular diseases)<sup>10</sup>. *Dhanvantara 101 Paka tailam* administered through *Nasya* may act on degenerative changes as seen in cervical spondylosis and helps in nourishment of body tissues. External therapies of massage and *Nadi Sveda* (steam) reduces pain and stiffness due to the physical effect and reduces muscle spasm. Patient had marked improvement in pain as pain score reduced from 3 to 1, and range of movement. Quality of sleep and motion habit was significantly improved with treatment. Loss of lordosis i.e. hyperextension of neck remained unchanged with treatment but overall spasm was reduced.

## CONCLUSION

*Vata Vyadhi* explained in *Ayurveda* forms basis for development of Protocol of various neuro muscular degenerative conditions including Cervical Dystonia. The nourishing and strengthening effect of *Ayurvedic* drugs and procedures is responsible for significant improvement in such conditions. A study on large sample size is needed to comment on the role and limitation of *Ayurvedic* management in CD.

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