

A CLINICAL STUDY TO EVALUATE THE EFFICACY OF NASYA KARMA IN CERVICAL SPONDYLOSIS

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ABSTRACT

Cervical Spondylosis is a common degenerative condition of the cervical spine presenting with the complaint of neck pain, stiffness, numbness, Painful & restricted neck movements and weakness. In which the primary degenerative changes may be initiated by injury, but usually the condition is simply a manifestation of normal ageing processes. Many conditions explained in the chapter of *Vatavyadi* or *Vata Nanatmaja Vikaras* Especially in *Apabhahuka*, *Manyastambha*, *Vishvachi* etc can be correlated to cervical spondylosis. In the recent years, 66% of adult experience neck pain in their lifetime and 5 % are highly disabled by it. By age 60, 70 percentage of women and 85% of men show changes consistent with cervical Spondylosis on X-ray. *Acharya's* have mentioned *Snehana* and *Swedana* as the main line of treatment in *Vatavyadi*. Also explained regarding *Nasya karma* as the prime therapy in *Urdwajaturgata Vatavyadi's*. Aims and objectives-The present study is conducted to evaluate the efficacy of *Parinithakerikheeradi taila Nasya karma* in cervical spondylosis. In this Clinical study has been conducted on 20 patients fulfilling inclusion criteria were selected and *Nasya karma* with *Parinithakerikheeradi taila* for 7 days in the dose of 8 drops in each nostrils was done. It was observed that maximum patient in the study given statistically significant relief in almost parameters. The results of the present clinical study has given ($p < 0.001$).

Keywords: *Nasyakarma*, Cervical Spondylosis, *Parinathakeriksheeradi Taila*, *Vatavyadi*.

INTRODUCTION

Cervical Spondylosis is a degenerative condition of the cervical spine. There is degeneration of the intervertebral disc, with its protrusion, and bony over growth of adjacent vertebrae, causing narrowing of the cervical canal and intervertebral foramina with resultant compression of roots, cords or both.¹ Pain and stiffness are the primary symptoms. In which the primary degenerative changes may be initiated by injury, but usually the condition is simply a manifes-

tation of normal ageing processes.² The aetiology of Cervical Spondylosis is associated with the aging process and is closely related to the intrinsic axial load imposed by the weight of the cranium. Some occupational positions may demand repeated or prolonged flexion, extension or extreme bending of the neck which in turn may lead to early degenerative changes in the cervical spine. The incidence rate of Cervical spondylosis is 83 per 1,00,000 population

and prevalence rate ranging up to 3.3 cases per 1000 population.³ The present line of treatment in the contemporary field of science involves the administration of certain Analgesics which gives only a transient relief. Hence, an effective, safe, inexpensive and most acceptable modality of treatment is required to be explored for the better management of Cervical Spondylosis. Hence, it is the need of the hour to develop better treatment protocol to manage as well as to improve quality of life in Cervical Spondylosis. It is explained regarding *Nasya karma* as the prime therapy in *Vatavyadi's* pertaining to *Urdwajatrugata Vyadi's* Especially in *Apabhahuka*, *Manyastambha*, *Vishvachi* etc.^{4,5} Hence, *Nasya karma* can be adopted in Cervical spondylosis. *Parineethkerikseradhi taila* mentioned in *Sahasrayoga* under *taila prakarana* for *Apabhahuka chikitsa*.⁶

Keeping this view and the incidence of the disease in the modern society. A study was conducted on 20 cases of Cervical Spondylosis from OPD & IPD of SKAMCH&RC, Bengaluru and treated with *Nasya karma* using *Parineethkerikseradhi taila*.

OBJECTIVES: To evaluate the efficacy of *Parinatakeeri Ksheeradi taila Nasya* in cervical spondylosis.

MATERIALS AND METHODS:

The patient's were selected from the OPD and IPD of SKAMCH&RC after considering the Inclusion and Exclusion Criteria.

Then they were randomly selected on the basis of Clinical examination in a single group and treatment was adopted.

Totally 20 patients were registered for the study & Assessment of results was done by considering subjective and objective Parameters pre and post-treatment.

Then, it was compared for Assessments and results. All the Results were analysed statistically for 'P' Value using paired t-test.

Diagnostic Criteria

- Patients with signs & symptoms of Cervical Spondylosis.
- Patients presenting with radiological evidence of Cervical Spondylosis.

Inclusion Criteria

- Patients of either sex between the age group of 20-70 years.
- Patients with signs & symptoms of Cervical Spondylosis.
- Patients fit for *Snehana*, *Swedana* and *Nasya Karma*.

Exclusion Criteria

- Patients with history of fracture or dislocation of cervical region or upper limb.
- Patients with other systemic diseases that may interfere with the course of treatment

STUDY DESIGN:-

- A Clinical Study of *Nasya* in the management of Cervical Spondylosis where in pre-test and post-test design was done.
- Minimum of 20 patients of Cervical Spondylosis who fulfilled the inclusion criteria are be selected.

Table 1: Showing Assessment parameter:-

	Subjective Parameters		Objective Parameters
1	Neck pain	1.	Tenderness over cervical region
2	Neck stiffness	2.	Movement of Neck (Painful /Restricted)
3	Radiation of pain		

INTERVENTION:-

- *Purva Karma* – *Sthanika Abhyanga* with *Murchita Tila Taila* and *Sthanika NadiSwedana*.

- *Pradhana Karma* – *Nasya Karma* with *Parineethkerikskeeradi taila* in the dosage of 8 drops

in each nostril for a period of 7 consecutive days.

- *Paschat Karma – Kavalagraha with Sukoshna jala and Dhoomapana with Haridra* will be done.

Time of Administration – *Prak Bhakta* (Morning before Breakfast)

OBSERVATION AND RESULTS:-

In this study 20 patients fulfilling the inclusion criteria were registered. All the patients were examined before and after the treatment. Both subjective and objective changes were recorded.

Table 2: Showing Effect of the treatment on Neck pain:

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	2.7	1.05	1.65	0.65	0.14	11.28	< 0.001	H.S

Graph 2: Showing the effect of the treatment on Neck pain:

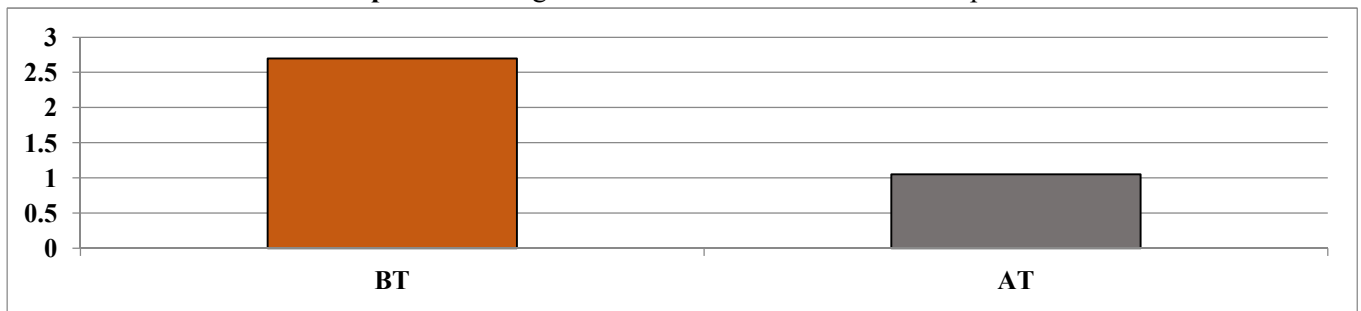


Table 3: Showing Effect of the treatment on Neck Stiffness:

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	2.7	1.05	1.65	0.65	0.14	11.28	< 0.001	H.S

Graph 3: Showing Effect of the treatment on Neck Stiffness:

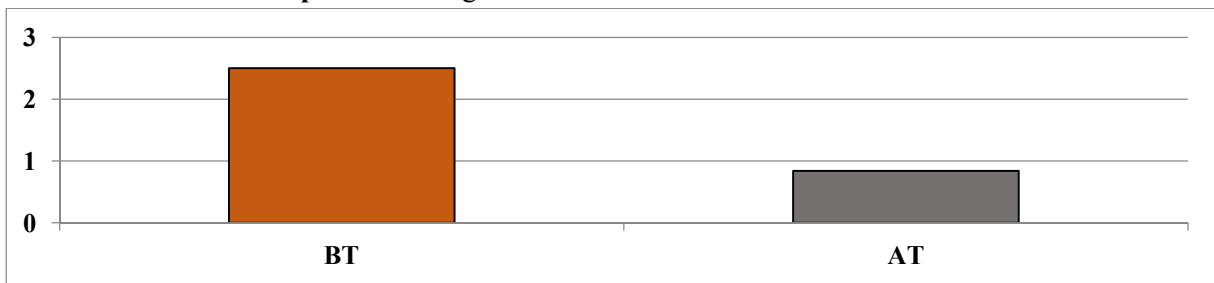


Table 4: Showing Effect of the treatment on Radiation of pain:

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	3	1.11	1.88	0.73	0.16	11.45	< 0.001	H.S

Graph 4: Showing Effect of the treatment on Radiation of pain :-

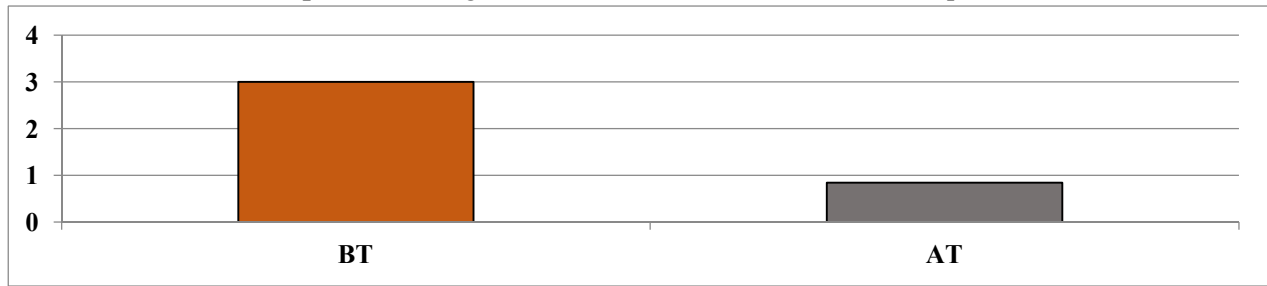


Table 5: Showing Effect of the treatment on Tenderness:

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	2.65	0.78	1.84	0.87	0.20	9.16	< 0.001	H.S

Graph 5: Showing the Effect of the treatment on Tenderness:-

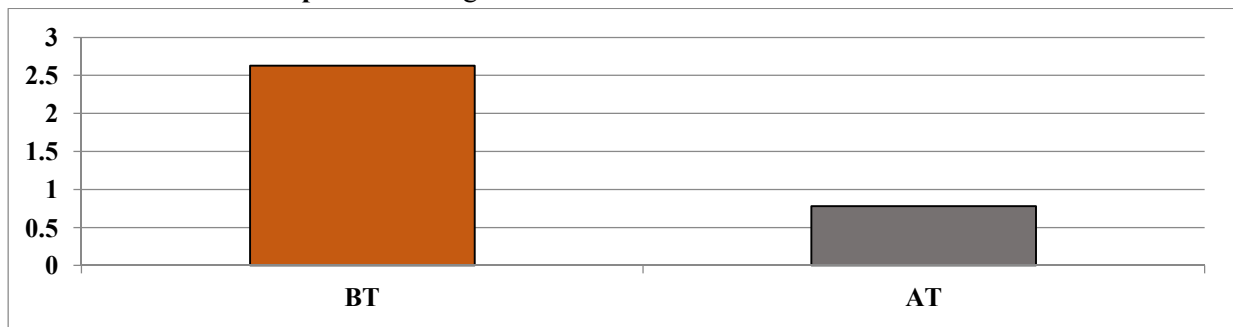


Table 6: Showing Effect of the treatment on Painful flexion of Neck :

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	1.47	0.47	1.29	0.57	0.14	8.78	< 0.001	H.S

Graph 6: Showing Effect of the Treatment on Painful Flexion of Neck:-

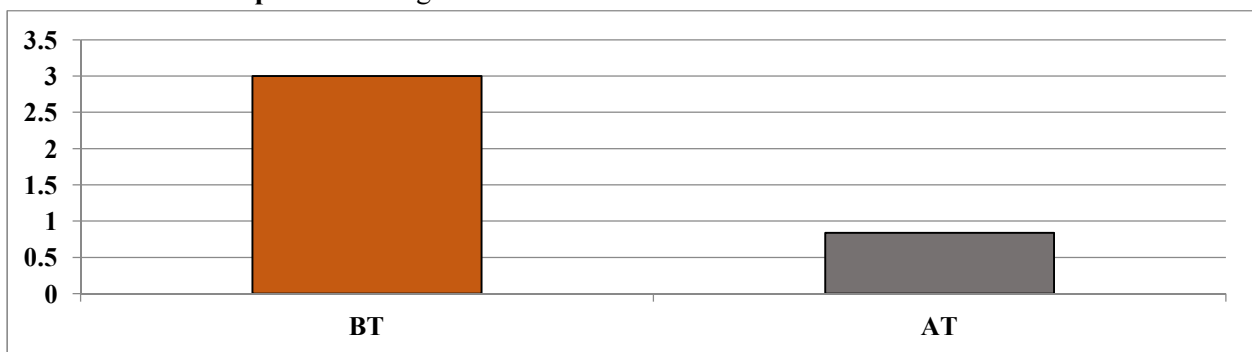


Table 7 Showing Effect of the treatment on Painful Extension of Neck:

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	1.77	0.22	1.55	0.49	0.12	12.52	< 0.001	H.S

Graph 7: Showing the Effect of the treatment on Painful extension of the Neck:-

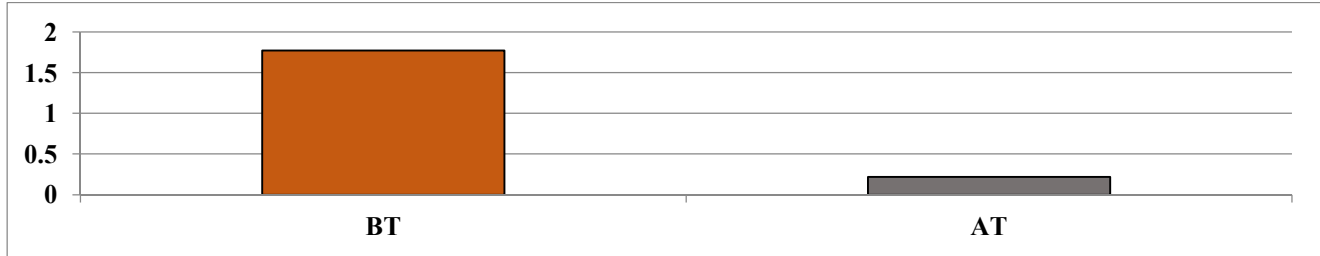


Table 8: Showing Effect of the treatment on Right lateral Flexion:

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	2.05	0.35	1.45	0.58	0.13	10.99	< 0.001	H.S

Graph 8: Showing Effect of the Treatment on Right lateral Flexion:-

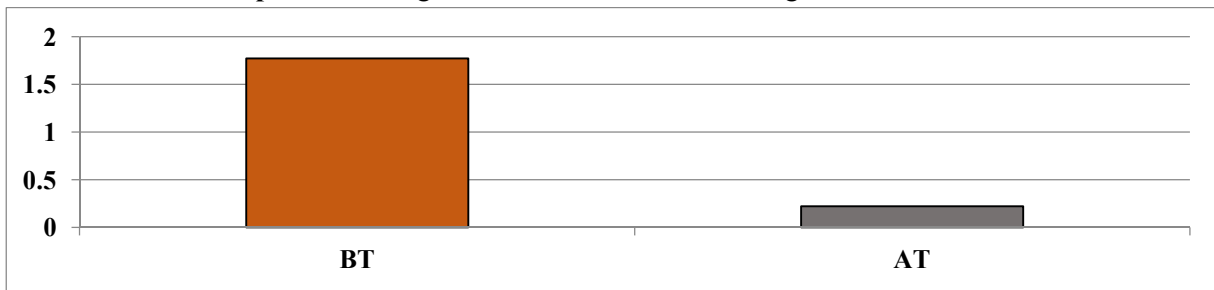


Table 9: Showing Effect of the treatment on Left lateral Flexion:

	Mean		Mean diff.	Paired 't' Test				
	Before	After		S.D	S.E	't'	p	Re
BT-AT	2.21	0.68	1.57	0.67	0.15	10.19	< 0.001	H.S

Graph 9: Showing Effect of the treatment on Left lateral Flexion:



DISCUSSION

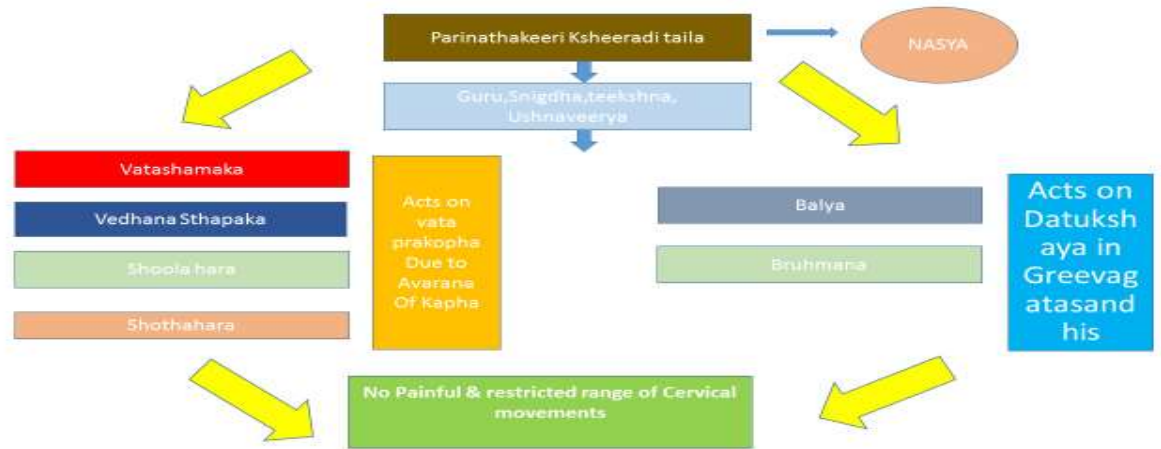
Cervical Spondylosis is a degenerative condition of the cervical spine and the treatment should be viewed from the point of *Vatavyadhi*. It is also considered under *Urdwajatrughata vikara* as its occurrence involves neck region. Cervical Spondylosis is a degenerative Condition of the spine .There is degeneration of inter-vertebral disc with its protrusion and bony over growth of adjacent vertebrae causing compression of roots, cords or both. Occasionally it is associated with non-compressive myelopathy consequent to vascular degeneration. (API Medicine).

The prevalence of Cervical Spondylosis is increasing day by day apart from age, because of sedentary work, occupational over stress on the neck Region, Traumatic blunt or sharp injury, improper sitting posture, and sedentary life style. The main symp-

toms of cervical spondylosis are pain in the neck, stiffness of the neck muscles and radiation of pain to the arms and restricted movements of the neck. In Classics there are many other ailments, which are related to neck and show the similar symptoms. Such as *Greeva Hundanam*, *ManyaStambha*, *Manya Graha*, *GreevaStambha*, *Manyagatavata*, *Vishwachi*, *Apabahuka* etc.

Nasyakarma is mainly indicated in the Management of *Urdhvajaturgata Vikara* in Classics & Acharya's have indicated *Nasya* therapy exclusively for the Management *Manyastambha*, *Apabhahuka*, *Vischwachi* etc which all can be considered under Umbrella term cervical Spondylosis. Cardinal features like Pain and Stiffness denotes involvement of *Kapha* and *Vata Dosha* in the diseases phenomenon. So, *Shodhana* In the form of *Nasyakarma* i.e. *Snehana/ Brimhana Nasya* is adopted in the study.

Figure 1: Samprapthi Vighatana by Parinethakeriksheradi taila Nasya:-



CONCLUSION

- *Nasya karma* is effective in reducing the symptoms of cervical spondylosis and also effective in preventing further degenerative changes in *Greeva pradesha*.
- As explained by Acharya's *Snehana nasya* is effective in Cervical Spondylosis (*Apabhahuka*, *Manyastambha*, *Vishwachi*)^{7,8} and *Parinethak-*

eriksheeraditaila Nasya selected in the study shown highly Significant results in almost Parameters. It can be taken for large sample study.

- As occupational factors and sedentary life styles plays vital or major contributory causative factor, so even occupational therapy, Physiotherapy (Exercise therapy) avoiding the causative factors can prevent the disease worsening.

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