Research Article

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A COMPARATIVE STUDY OF ABHADI CHURNA, MASHABALADI KWATHA NASYA & GREEVA VASTI IN MANYASTHAMBHA

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ABSTRACT

Background: *Manyasthambha* (Cervical Spondylosis) is one of the significant clinical problems worldwide. **Aim:** To evaluate and compare the effect of *Abhadi churna, Mashabaladi Kwatha Nasya & Greeva vasti* in case of *Manyasthambha*. **Materials and Methods:** It is Randomized open clinical trial. The study will be conducted on 45 clinically diagnosed patients of *Manyasthambha*. Total 45 patients randomly allocated into three groups (Group-A, Group-B and Group-C) after screening. Group A- *Abhadi churna,* Group B- Nasya with *Mashabalaadi kwatha*, Group C- *Greeva vasti* with *Mashabaladi kwatha*. Observation and results were assessed by using *Neck pain disability index questionnaire* and *Grading of Manyasthambha Symptoms* Statistically significant test for comparison was done by ANOVA followed by Dunnett's multiple comparisons test and Tukey's multiple comparisons test. **Results:** *Effect of the Nasya karma, Greeva vasti* and *Abhadi churna* on above parameters are extremely significant. **Conclusion:** The effect of Nasya on given parameters is better than *Greeva vasti* and *Abhadi churna*.

Keywords: Manyasthambha, Cervical spondylosis, Nasya, Greeva vasti and Abhadi churna

INTRODUCTION

Manyasthambha is mentioned under Nanatmaja vyad hi^{l} . It is caused by kapha avrita vata. Cardinal signs and symptoms of Manyasthambha are stiffness in neck and *Manya*, *Dantana danshanam*, *Lalasrava*, *Prishthayama*, *Shirograha*, *Jrimbha*, *Vadanasangha*². Our lifestyles consist many daily routine activities like over exertion, continuous and over strenuous work,



prolong improper sitting postures, heavy physical work outs, travelling on broken roads, accidents due to overtaking and over speeding. All these factors put strain and pressure on our spine, which finally causes disharmony in our biological system, which is further responsible in producing musculoskeletal problems like neck pain.

Manyasthambha, according to its signs and symptoms can be correlated with Cervical Spondylosis in modern system of medicine.

Cervical spondylosis is a degenerative disorder of the cervical intervertebral discs, leading to osteophyte formation and hypertrophy of adjacent facet joints and ligament. It leads to pain, stiffness in the joints, radiating pain into shoulders and forearm, headache, vertigo, giddiness, paraesthesia and numbness following dermatomal distribution etc.

In modern system of medicine there are various available modalities for the management of Cervical spondylosis, like conservative treatment (analgesics), epidural steroid injection and surgical treatment. All these modalities have their own limitations and complications. Ayurvedic principles of treatment for the management of this disease are proved to be effective on the same condition reported by in different clinical trials. Manyasthambha is a Vatavydhi. Nasya and Greeva vasti are preferred line of treatments for it³. Also, Nasya is important Avurvedic therapeutic measure for 'urdhwajatrugata' rogas. Greeva vasti is a type of local sweda. Sweda karma is very important treatment modality in Panchakarma Hence this study is planned to evaluate and compare the effect of Abhadi churna⁴, Mahshabaladi Kwatha Nasya⁵ & Geeva vasti in Manyasthambha.

Materials and Methods: The study was conducted on 45 clinically diagnosed patients of *Manyasthambha*. The selection of patients was made from OPD/IPD of Dr. S. R. R. A. U. Jodhpur, voluntarily. Study was approved by Institutional Ethics committee with approval no. dsrrau/uca/iec/18-19/75 dated 17/07/2018.

A. Inclusion criteria:

1. The patients between the age group of 18 to 60 years in either sex presenting with clinical features of *Manyasthambha*.

- 2. Pre-diagnosed patient of Manyasthambha.
- 3. Patient willing to sign the consent forms.

B. Exclusion criteria:

- 1. Cervical fracture and dislocation of cervical vertebrae.
- 2. Ankylosing spondylitis
- 3. Cervical rib fracture
- 4. Cervical compressive myelopathy
- 5. Patients unfit for Nasya karma.
- 6. Malignancy
- 7. Post spinal surgical case
- 8. Space occupying lesions of brain
- 9. Psychiatric disorder
- 10. Uncontrolled Diabetes Mellitus

Design of the clinical study: It is Randomized open clinical trial with Pre-test and Post-test design where the study was conducted on 45 clinically diagnosed patients of *Manyasthambha*. The selection of patients was made from OPD/IPD of Dr. S. R. R. A. U. Jodhpur, voluntarily. Total 45 patient randomly allocated into three groups (Group-A, Group-B and Group-C) after screening.

Intervention:

- **Group A-** *Abhadi Churna* given orally 5gm B.D. in divided doses with *Anupan*, Lukewarm water for 15 days.
- **Group B-** *Nasya* given with *Mashabaladi Kwatha* in dose of 6 drops for 7 days and *Abhadi Churna* given orally 5gm B.D. for 15 days.
- **Group C** *Greeva Vasti* given with *Mashabaladi kwatha* dose of 200ml for 15 days, time: 30-45 minute and *Abhadi churna* given orally 5gm B.D. for 15 days.

Duration of the treatment: 7 days -15 days **Assessment criteria:**

Assessment was done three times i.e. initially before undergoing medical intervention, immediately after the completion of treatment and 15 days follow up after completion of treatment. Assessment was done based on-

- 1. Neck pain disability index questionnaire
- 2. Grading of Manyasthambha Symptoms

Statistical Analysis: Statistically significant test for comparison was done by ANOVA followed by Dun-

nett's multiple comparisons test and Tukey's multiple comparisons test. *Graph Pad Prism* software used for Statistical Analysis.

Observation: Among 45 patients included in the study, maximum 16 (35.56%) patients belong to the age group of 18-30 years, male25 (55.56%), married 39 (86.67%), Hindu 41 (91.11%) and16 (35.56%) are primary educated. Maximum patients registered in the study are patients with sitting job or desk work i.e.14 (31.11%),24 (53.33%) patients belong to lower middle class,

28 (62.22%) patients are having mixed dietary habit, 22 (48.89%) in number are having no addiction. Maximum patients i.e. 25 (55.56%) are normal weight, *Vata-kapha prakrti are* 16 (35.56%). maximum patients 27 (60%) having madhyama Sara, 33 (73.33%) having madhyama Samahnana, 27 (60%) having madhyama Satva, 34(75.56%) having pravara Satmya. Maximum patients 29 (64.45%) having madhyama Pramana, 27 (60%) having madhyama Ahara shakti, 25(55.56%) having madhyama Vyayama shakti, All the patients in the present study have Greeva stambha and Shirograha as their main symptom. Jrimbha as symptom found in 15 (33.33%) patients, Dantanam Damshanam is present in 14 (31.11%), 4 (8.89%) patients have *Pristhayama* as the symptom and only 2 (4.44%) patients have *Lalasrava*. All the patients in the present study have *Pain Intensity, Difficulty in Lifting, work and Headache* as their main symptom. *Difficulty in Reading found 42* (93.33%) patient, Sleep disturbed as symptom found in 33 (73.33%) patients, *Difficulty in Personal Care* is present in 30 (66.67%) patients, 24 (53.33%) patients have *Concentration* problem as the symptom. *Difficulty in Driving* is present in 22 (47.82%), patients and 17 (37.78%) patients have *Difficulty in Recreation*.

Results: Effect of *Abhadi Churna* given orally, *Nasya, and Greeva vasti* on *Neck pain disability index questionnaire:*

The effect of *Nasya Karma* and *Greeva vasti*, on *Neck pain disability index questionnaire*, immediately after treatment and on 15th day follow up after completion of treatment is extremely significant improvement. On the other hand, though the *Abhadi Churna* shows significant improvement immediately after treatment, *and* on the 15th day follow up after completion of treatment, is extremely significant improvement compared to 0-day.

Table 1: Effect of Abhadi Churna given oraly, Nasya and Greeva vasti on Neck pain disability index question-naire immediately after treatment

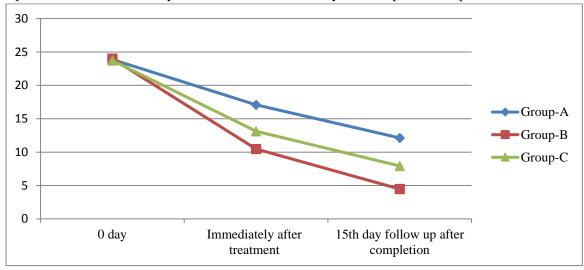
Group	Mean ± SD		MD	q	P value	Remark
	0 - Day	Immediately after treatment				
Group-A	23.87±	17.07±	6.80	4.733	0.0048	**
	6.906	5.535				
Group-B	24±	10.47±	13.53	11.53	< 0.0001	****
	7.061	3.195				
Group-C	23.73±	13.13±	10.60	9.692	< 0.0001	****
	5.663	3.796				

Table 2: Effect of effect of Abhadi Churna given orally, Nasya and Greeva vasti on Neck pain disability index
questionnaire, 15 th day follow up after completion of treatment

Group	Mean ± S	Mean ± SD		q	P value	Remark	% Relief
	0- Day	15 th day follow up after completion of treatment					
Group-A	23.87±	12.13±	11.73	8.167	< 0.0001	****	49.18%
	6.906	3.815					
Group-B	24±	4.47±	19.53	16.65	< 0.0001	****	81.37%
	7.061	1.447					

C C	22.72	7 03+	15 00	14 45	.0.0001	****	66 500/
Group-C	23.73±	7.93±	15.80	14.45	< 0.0001	~~~~	66.58%
	5.663	2.712					

Graph 1: Effect of effect of *Abhadi Churna* given oraly, *Nasya and Greeva vasti* on *Neck pain disability index questionnaire*, immediately after treatment and 15th day follow up after completion of treatment



Intra group comparison the effect of Abhadi Churna given orally, Nasya and Greeva vasti on Neck pain disability index questionnaire: The effect of Nasya karma on Neck pain disability index questionnaire is better than Greeva vasti and Abhadi churna because mean difference of Neck pain disabil*ity index* questionnaire in Group- B patients more than Group- A and Group-C. The effect of *Greeva vasti* is better than *Abhadi churna* because mean difference of *Neck pain disability index* questionnaire in Group- C patients more than Group-A.

Table 3: Comparison the effect of *Abhadi Churna* given oraly, *Nasya and Greeva vasti* on *Neck pain disability index questionnaire:*

Group	Mean 1± SD	Mean 2± SD	MD	q	P value	Remark
Gp. A vs. Gp.B	11.73 ±3.453	19.93±6.204	-8.200	6.945	< 0.0001	****
Gp. A vs. Gp.C	11.73 ±3.453	15.8±3.509	-4.067	3.444	0.0493	*
Gp. B vs. Gp.C	19.93±6.204	15.8±3.509	4.133	3.501	0.0450	*

Effect of therapy on Greeva stambha:

The effect of *Nasya Karma* on *Greeva stambha*, immediately after treatment and on15th day follow up after completion of treatment is extremely significant improvement. On the other hand, though the *Abhadi*

Churna and *Greeva stambha* shows significant improvement immediately after treatment *and* on the 15th day follow up after completion of treatment, is extremely significant improvement compared to 0-day.

Table 4: Effect of therapy on Greeva stambha immediately after treatment

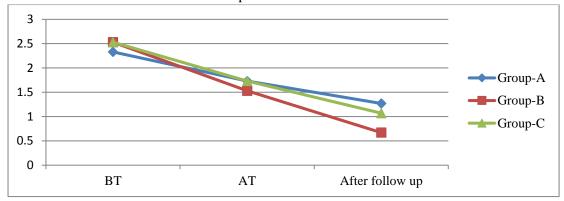
Group	Mean ± SD		MD	q	P value	Remark
	0 – Day (BT)	Immediately after treatment				
Group-A	2.33±	1.73±	0.60	4.965	< 0.0030	**
	0.488	0.457				

Group-B	2.53±	1.53±	1	7.638	< 0.0001	****
	0.516	0.516				
Group-C	2.53±	1.73±	0.80	5.084	< 0.0024	**
	0.516	0.593				

Table 5: Effect of effect of therapy on Greeva stambha, 15th day follow up after completion of treatment

Group	Mean ± 3	SD	MD	q	P value	Remark	% Relief
	0-Day	15 th day follow up after completion of treatment					
Group-A	2.330±	1.27±	1.06	8.862	< 0.0001	****	45.50%
	0.488	0.457					
Group-B	2.53±	0.67±	1.87	14.26	< 0.0001	****	73.52%
	0.516	0.488					
Group-C	2.53±	1.07±	1.46	9.321	< 0.0001	****	57.76%
	0.516	0.703					

Graph 2: Effect of effect therapy on *Greeva stambha*, immediately after treatment and 15th day follow up after completion of treatment



Comparison the effect of therapy on *Greeva stambha:* The effect of *Nasya karma* on *Greeva stambha* better than *Greeva vasti* and *Abhadi churna* because mean difference of Greeva stambha in GroupB patients more than Group- A and Group-C. The effect of *Greeva vasti* is better than *Abhadi churna* because mean difference of *Greeva stambha* in Group-Cpatients is more than Group- A.

Table 6: Comparison the effect of therapy on *Greeva stambha*:

Group	Mean 1± SD	Mean 2± SD	MD	q	P value	Remark
Gp. A vs. Gp.B	1.067 ±0.258	1.867±0.351	-0.800	7.937	< 0.0001	****
Gp. A vs. Gp.C	1.067 ±0.258	1.467±0.516	-0.400	3.969	0.0203	*
Gp. B vs. Gp.C	1.867±0.351	1.467±0.516	0.400	3.969	0.0203	*

Effect of therapy on Shirograha:

The effect of *Nasya Karma* and *Greeva vasti*, on *Shirograha*, immediately after treatment and on15th day follow up after completion of treatment is extremely significant improvement. On the other hand, though

the *Abhadi Churna* shows significant improvement immediately after treatment, *and* on the 15th day follow up after completion of treatment, is extremely significant improvement compared to 0-day.

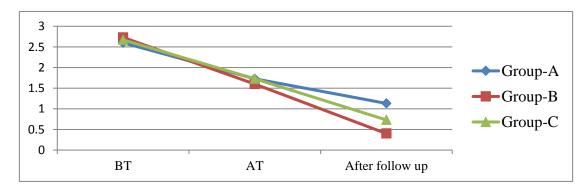
Group	oup Mean ± SD		MD	q	P value	Remark
	0 – Day (BT)	Immediately after treatment				
Group-A	2.60±	1.73±	0.87	6.211	0.0002	***
	0.507	0.593				
Group-B	2.73±	1.60±	1.13	8.936	< 0.0001	****
	0.457	0.507				
Group-C	2.67±	1.73±	0.93	7.00	< 0.0001	****
	0.488	0.457				

Table 7: Effect of therapy on Shirograha immediately after treatment

Table 8: Effect of effect of therapy on Shirograha, 15th day follow up after completion of treatment

Group	Mean ±	SD	MD	q	P value	Remark	% Relief
	0-Day	15 th day follow up after completion of treatment					
Group-A	2.6±	1.13±	1.47	10.51	< 0.0001	****	56.53%
	0.507	0.516					
Group-B	2.73±	$0.40\pm$	2.33	18.40	< 0.0001	****	85.34%
	0.457	0.507					
Group-C	2.67±	0.73±	1.93	14.50	< 0.0001	****	72.69%
	0.488	0.593					

Graph 3: Effect of effect therapy on *Shirograha*, immediately after treatment and 15th day follow up after completion of treatment



Comparison the effect of therapy on *Shirograha*: The effect of *Nasya karma* on *Shirograha* better than *Greeva vasti* and *Abhadi churna* because mean difference of *Shirograha* in Group- B patients is more than Group- A and Group-C. The effect of *Greeva vasti* is better than *Abhadi churna* because mean difference of *Shirograha* in Group- C patients is more than Group-A.

Group	Mean 1± SD	Mean 2± SD	MD	q	P value	Remark
Gp. A vs. Gp.B	1.467 ±0.639	2.333±0.488	-0.866	6.280	0.0002	***
Gp. A vs. Gp.C	1.467 ±0.639	1.933±0.457	-0.466	3.381	0.0546	Ns
Gp. B vs. Gp.C	2.333±0.488	1.933±0.457	0.400	2.898	0.1130	Ns

Table 9: Comparison the effect of therapy on *Shirograha*:

Intergroup comparison: Effect of therapy on *Dantanam Damshanam*: The effect of *Abhadi* churn on *Dantanam Damshanam*, immediately after treatment and on the 15th day follows up after completion of treatment is significant improvement. On the other hand, though the *Nasya karma* and *Greeva stambha* shows significant improvement immediately after treatment *and* on the 15th day follow up after completion of treatment, is extremely significant improvement compared to 0-day.

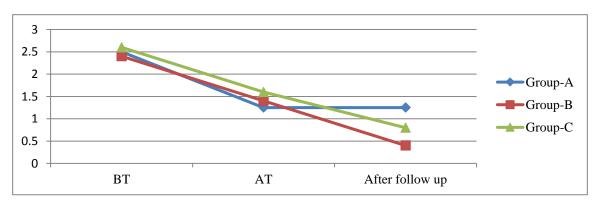
Table 10: Effect of therapy on *Dantanam Damshanam* immediately after treatment

Group	Mean ± SD		MD	q	P value	Remar
	0 – Day (BT)	Immediately after treatment				K
Group-A	2.50±	1.25±	1.25	4.743	< 0.05	*
	0.577	0.500				
Group-B	2.40±	1.40±	1	4.082	0.0339	*
	0.547	0.547				
Group-C	2.60±	1.60±	1	4.330	0.0248	*
	0.547	0.547				

Table 11: Effect of effect of therapy on Dantanam Damshanam, 15th day follow up after completion of treatment

	Mean \pm SD						
Group	0 - Day (BT)	15 th day follow up after completion of	MD	q	P value	Remark	
	0 - Day (B1)	treatment					% Relief
Group-A	2.50±	$1.25\pm$	1.25	4.743	< 0.05	*	50%
Oloup-A	0.507	0.500	1.23	4.745	<0.05		
Group-B	2.40±	$0.40\pm$	2	8.165	0.0002	***	83.33%
Оюцр-в	0.547	0.547	2	0.105	0.0002		
Group-C	2.60±	0. 80±	1.80	7.794	0.0004	***	69.24%
Group-C	0.547	0.447	1.60	1.194	0.0004		

Graph 4: Effect of effect therapy on *Dantanam Damshanam*, immediately after Treatment and 15th day follow up after completion of treatment



Intra Group Comparison the effect of therapy on *Dantanam Damshanam:*

The effect of *Nasya karma* on *Dantanam Damshanam* better than *Greeva vasti* and *Abhadi churna* because mean difference of *Dantanam Damshanam* in Group-

B patients is more than Group- A and Group-C. The effect of *Greeva vasti* is better than *Abhadi churna* because mean difference of *Dantanam Damshanam* in Group- C patients is more than Group- A.

Group	Mean 1± SD	Mean 2± SD	MD	q	P value	Remark
Gp. A vs. Gp.B	1 ±0.500	2±0.000	-1	4.629	0.0170	*
Gp. A vs. Gp.C	1 ±0.500	1.8±0.447	-0.8	3.703	0.0545	Ns
Gp. B vs. Gp.C	2±0.000	1.8±0.447	0.2	0.925	0.7933	Ns

 Table 12: Comparison the effect of therapy on Dantanam Damshanam

Effect of therapy on Jrimbha:

The effect of *Abhadi* churn, *Nasya karma* and *Greeva stambha* on *Jrimbha*, immediately after is significant

improvement *and* on the 15th day follow up after completion of treatment, is highly significant improvement compared to 0-day.

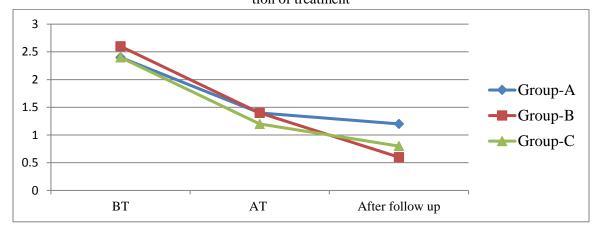
Table 13: Effect of therapy on Jrimbha immediately after treatment

Group	Mean \pm SD			a	P value	Remark
Group	0 - Day (BT) Immediately after treatment		MD	q	rvalue	
Group-A	2.40±	1.40±	1	4.330	0.0248	*
Oloup-A	0.547	0.547	1	4.550	0.0248	
Group-B	2.60±	$1.40\pm$	1.20	3.928	0.0412	*
Оюцр-в	0.547	0.894	1.20	3.920	0.0412	
Group-C	2.40±	1.20±	1.2	4.243	0.0277	*
Group-C	0.547	0.836	1.2	4.243	0.0277	-

Table 14: Effect of effect of therapy on Jrimbha, 15th day follows up after completion of treatment

	Mean ± SD						
Group	0 Der	15 th day follow up after	MD	q	P value	Remark	% Relief
	0 -Day	completion of treatment					
Group-A	2.40±	1.20±	1.20	5.196	0.0083	**	50%
Oloup-A	0.547	0.447	1.20	5.190	0.0085		
Group-B	2.60±	0.60±	2	6.547	0.0016	**	76.92%
Oloup-D	0.547	0.547	2	0.547	0.0010		
Group C	2.40±	0.80±	1.6	5.657	0.0046	**	66.67%
Group-C	0.547	0.447	1.0	5.057	0.0040		

Graph 5: Effect of effect therapy on *Jrimbha*, immediately after treatment and 15th day follow up after completion of treatment



Comparison the effect of therapy on Jrimbha:

The effect of *Nasya karma* on *Jrimbha* better than *Greeva vasti* and *Abhadi churna* because mean difference of *Jrimbha* in Group- B patients is more than

Group- A and Group-C. The effect of *Greeva vasti* is better than *Abhadi churna* because mean difference of *Jrimbha* in Group- C patients is more than Group- A.

Group	Mean 1± SD	Mean 2± SD	MD	Q	P value	Remark
Gp. A vs. Gp.B	1.2 ±0.447	2.0±0.000	-0.80	4.382	0.0232	*
Gp. A vs. Gp.C	1.2 ±0.447	1.6 ±0 .547	-0.40	2.191	0.3040	Ns
Gp. B vs. Gp.C	2.0±0.000	1.6±0.547	0.40	2.191	0.3040	Ns

Table 15: Comparison the effect of therapy on Jrimbha

DISCUSSION

Discussion on *Abhadi Churna Dravya*: Hence to explain the mode of action of a drug means to establish a relationship between the *Samprapti ghataka* of the dis-

ease and principles of *Rasa, Guna, Virya, Vipaka, Prabhava* of a drug. The properties of the ingredients of *Abhadi churna* are shown in the table. From this we can get an idea about the probable mode of action of the drug.

			5			
Sr.No.	Drug	Rasa	Guna	Virya	Vipaka	Dosha haratva
1.	Abha	Kashaya	Guru, Ruksha	Shita	Katu	Kapha Pitta Shamaka, Niryas - Vata
						pitta Shamaka
2.	Rasna	Tikta	Guru	Ushna	Katu	Kaphavata shamaka
3.	Guduchi	Tikta, Kashaya	Guru, Snigdha	Ushna	Madhura	Tridoshashamaka
4.	Shatavari	Tikta, Madhura	Guru, Snigdha,	Shita	Madhura	Vata pitta Shamaka
5.	Shunthi	Katu	Laghu, Snigdha	Ushna	Madhura	Vata Kaphahara
6.	Shatapushpa	Katu, Tikta	Laghu, Tīkshna	Ushna	Katu	Vata-Kaphahara
7.	Ashwagandha	Tikta, Katu,	Laghu, Snigdha	Ushna	Madhura	Vata Kapha shamaka
		Madhura				
8.	Hapusha	Katu, Tikta	Laghu, R uksha,	Ushna	Katu	Tridoshahara
			Tikshna			
9.	Vridhdadruka	Katu, Tikta,	Laghu, Snigdha	Ushna	Madhura	Kaphavata shamaka
		Kashaya				
10.	Yavani	Katu, Tikta	Laghu, Ruksha,	Ushna	Katu	Kaphavata shamaka
			Tikshna			
11.	Ajamoda	Katu, Tikta	Laghu, Ruksha,	Ushna	Katu	Kaphavata shamaka
			Tikshna			

Table 16: Properties of Abhadi churna Drvayas

In Present study, the *Abhadi churna* contains ingredients which are mainly having *Vata Kaphahara* properties. Hence due to *Vata Kaphahara* properties of *Abhadi churna* drugs adopted in present study, it is effective to treat the *Manyasthambha*, because *Manyasthambha* mainly caused by vitiation of *Vata* and *kapha* dosha.

Discussion on *Nasya*: *Nasya* karma is important *Pan-chakarma* procedures having less complication, intended to alleviate morbid *doshas* from *urdhajatrugata* part of body. It is more effective in "*urdhawa Jatrua-gata rogas*.

Discussion on *Purvakarma* of *Nasya*: *Abhyanga* and *Swedana*:

Mridu Abhyanga and *Swedana* should be given on scalp, forehead, face and neck for Liquefaction of *dosha*. It is well known that sweating is one of the phenomena involved in excretion of waste products thus, here induced sweating helps in similar fashion. Heat which is given in the *Swedana* process reaches subcutaneous blood vessels take place. As a result of vasodilatation, there is an increased flow of blood through that area, so that necessary oxygen and nutritive material are supplied, and waste products are removed. Liquefied *doshas*, thus get expelled out by *Nasya*.

Nasya karma: Nasya has an important role in the management of Manyasthambha. In Manyasthambha, Acharya Sushruta has described Vata kapha hara Nasya and ruksh sweda as the specific treatment of Manyasthambha.

The drug administered through nostrils, reaches Shringataka (a shira marma) by Nasa Srota and

spreads in the *Murdha* (Brain) taking route of vascular pathways of *Netra* (eye), *Srota* (ear) and *Kantha* (throat) etc. and scrapes the morbid *Doshas* in supra clavicular region and extricates them from the *Uttamanga*.

Absorption of the medicament in nasal passage takes place in 3 ways: vascular, neural and lymphatic pathways. On the other hand, the head low position may help in draining of blood from facial vein to cavernous sinus. *Sthanika abhyanga* and *Sweda* may enhance the drug absorption by increasing the blood circulation.

Hence explanation of the mode of action of a drug means to establish a relationship between the *Samprapti ghataka* of the disease and penta fold principles of *Rasa, Guna, Virya, Vipaka, Prabhava* of a drug. The properties of the ingredients of *Mashabaladi kwa-tha* are shown in the table below; from this we can get an idea about the probable mode of action of the drug.

Sr.No.	Drug	Rasa	Guna	Virya	Vipaka	Dosha haratva
1.	Masha	Madhura	Guru, Snigdha	Ushna	Madhura	Vata pitta Shamaka
2.	Bala	Madhura	Laghu, Snigdha, Picchila	Shita	Madhura	Vata pitta Shamaka
3.	Kapikachchhu	Madhura, Tikta,	Guru, Snigdha	Ushna	Madhura	Vata Shamaka
4.	Rohisha gha- sa	Katu, Tikta	Laghu, Ruksha, Tik- shna	Ushna	Katu	Kaphavata shamaka
5.	Rasna	Tikta	Guru	Ushna	Katu	Kaphavata shamaka
6.	Ashwagandha	Tikta, Katu, Madhura	Laghu, Snigdha	Ushna	Madhura	Vata Kapha shamaka
7.	Eranda	Madhura	Snigdha, Tikshna, Sukshma	Ushna	Madhura	Vata Kaphahara
8.	Hingu	Katu,	Laghu, Snigdha Tik- shna	Ushna	Katu	Kaphavata shamaka
9	Saindhava	Lavana, Madhura	Snigdha, Tīkshna, Sukshma, & Laghu	Ushna & Shita	Madhura	Tridoshahara

Discussion on *Mashabaladi kwatha Drvayas:* **Table 17:** Properties of *Mashabaladi kwatha* Drvayas

In Present study, the *Mashabaladi kwatha* contains ingredients which are mainly having *Vata Kaphahara* properties. *Manyasthambha* is *urdhwajatrugata vyadhi*, *urdhwajatrugata* is *sthana* of *Kapha*. That is why *Manyasthambha is caused by dushti of vata along with* *kapha. Shoola is vatapradhan and stambha* are character of *kapha dosha*. Hence, due to *Vata Kaphahara* properties of *Mashabaladi kwatha* drugs adopted in present study, it is effective to treat the *Manyasthambha*.

Discussion on Greeva vasti:

Greeva vasti is type of local *sweda*. It is directly done over the affected area. *Samprapti* of *Manyasthambha* is mainly affected by vitiation *Vata* and *Kapha dosha*. *Greeva vasti* help in *samprapti vighatan* because *vata* and *kapha* having *shita* property, which pacify by *ushna* property of *swedan*. It is also clear *srotodushti* (*sanga*). *Swedan* improves the blood circulation and provides nourishment to affected area. It also relieves pain, stiffness and variety of obstruction by widening of the pores which allows easy movement of liquefied solid or semisolid materials. In present study *Greeva vasti* is done by *Mashabaladi kwatha* having *vata kaphahara* property, which is *ruksha* type of *swedana*. It pacifies both *vata* and *kapha dosha*. Hence *Greeva vasti* with *mashabaladi kwatha* is adopted in present study.

CONCLUSION

The observations and results were analyzed statistically and significant improvement was found in the three groups. But *Nasya* group patients got better response than *Abhadi churna* group and *Greeva vasti* group patients. *Greeva vasti* group patients got better response than *Abhadi churna* group.

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