

## A CASE STUDY: AYURVEDIC MANAGEMENT OF VERTEBRAL SPONDYLOSIS (*KATIGATA VATA*)

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### ABSTRACT

Vertebral spondylosis is a common spinal problem seen now a days because of early ageing. Prevalence is increasing, mostly degeneration of vertebral body is seen in old age grouped people. In a present case study 73 year old male patient was diagnosed with Vertebral Spondylosis post trauma with the help of modern investigations having symptoms of chronic lower back ache *Katishool* with movement restrictions, and radiating pain (*Katitahapada Paryant Shoola*) since 10 months was treated successfully as per principles of *Kshayajanita Katigata Vatvyadhi*.

**KEYWORDS:** *Katigata Vatvyadhi, Katishoola, Katitaha Padaparyant Shoola.*

### INTRODUCTION

Spondylosis refers to degenerative changes in the spine such as bone spurs and degenerating inter-vertebral discs. The terms *lumbar osteoarthritis*, *disk degeneration*, *degenerative disk disease*, and *spondylosis* are used in the literature to describe anatomical changes to the vertebral bodies and intervertebral disc spaces.

Low back pain (LBP) affects approximately 60–85% of adults during some point in their

lives. Fortunately, for the large majority of individuals, symptoms are mild and transient, with 90% subsiding within 6 weeks. Chronic low back pain, defined as pain symptoms persisting beyond 3 months, affects an estimated 15–45% of the population. Individuals aged 45–64 years identified 85.5% of participants to demonstrate osteophytes within the lumbar spine.

In Ayurveda it can be correlated with *Katigata Vata*. Some ancient texts also describe few disorders having resemblance such as *Kati Graha*, *Trika Graha*, *Prushtha Graha*, *Kati Vayu*, *Trika Shoola*, *Prushtha Shoola*, *Vataja Shoola*, *Trika Vedana*, and *Gridhrasi*.

Description of *Katigata Vata* is not given separately as much as and not included in *Nanatmaka Bheda* of *Vata*. In this entity *Vata Dosha* vitiated due to various causes, as mentioned in *Charaka Samhita* under the term “*Sandhigata Anila*”, here *Vata* gets located in the *Kati Sandhi* and result in *Katsandhigata Vata*.

## PATIENT INFORMATION

A 72 year old male patient visited OPD no. 4 of (PG *Kayachikitsa* department) at Govt. Akhandanand Ayurved Hospital Bhadra, Ahmedabad date on 29/6/22 having following complains:

*Katishoola* since 10 months

*Ubhaya Janghanand Vankshan Pradeshe Shoola* since 10 months

*Katiparyant Pada Shoola* since 10 months

*Udara Daha* since 10 months

## HISTORY OF PRESENT ILLNESS

Patient was relatively healthy without any metabolic disease, had history of trauma before 10 months. Then gradually he started feeling symptoms like *Katishoola*, *Ubhaya Janghanand Vankshan Pradeshe Shoola*, *Katiparyant Pada Shoola*. Medications like analgesics and anti inflammatory were consumed for above complaints but didn't get relief and pain reoccurred once medicines were stopped. *Udara Daha* was observed as a side effect of analgesics and anti inflammatory. Physiotherapy sessions were also conducted for 2 months but patient got only temporary relief. Then patient approached for *Ayurvedic* treatment at *Kayachikitsa* OPD at Govt. Akhandanand Ayurved Hospital, Ahmedabad.

**PAST HISTORY:** Trauma before 10 months.

**FAMILY HISTORY:** nil.

### **PERSONAL HISTORY**

- Diet- Vegetarian homemade food
- *Kshudha – Samyaka*
- *Vihara*-Excess physical exertion i.e *vyayama*, *abhghata* etc.
- *Agni- Nirama*
- *Koshtha- Madhyama*
- *Nidra*- Regular, normal 7-8 hrs/night
- *Mala Pravrutti*- Regular Once/Day
- *Mutra Pravrutti*- 5-6 Times/Day
- Addiction- Not Any

### **On Examination**

- **Pulse**-74/min
- **B.P**-130/90 mm Hg
- **Temp**-98.6 F

### **Physical examination**

- Straight leg raise(SLR)-Rt -60°; Lt-60°
- Motor and sensory function were normal.
- Superficial and deep reflexes were normal.

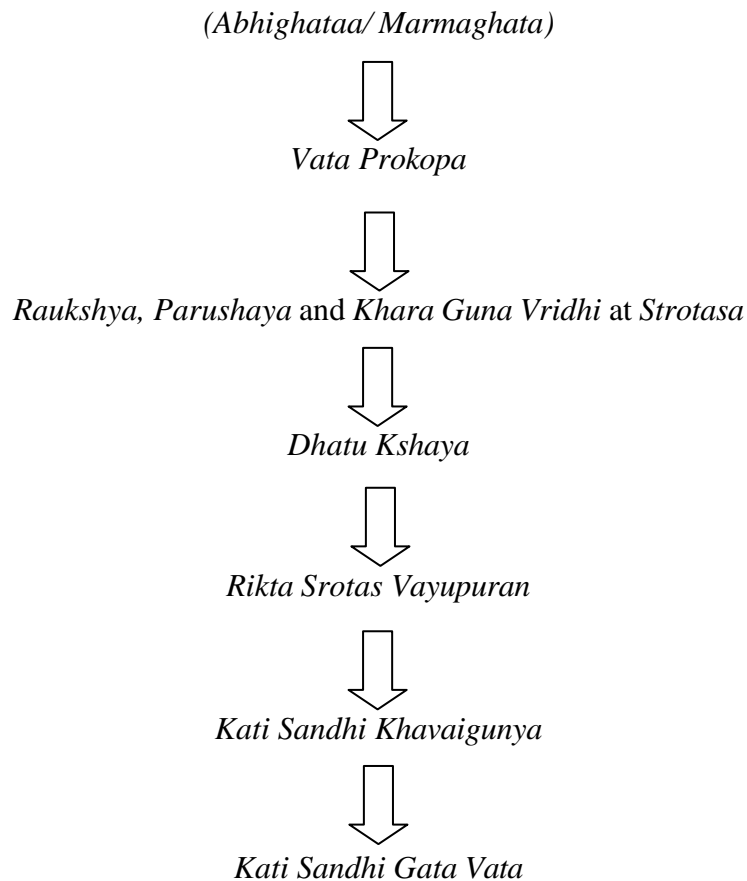
### **NIDANA PANCHAKA**

*Nidana - Vyayama, Abhighata*

*Purvarupa*- *Avyakta* - mild recurrent backache, slight stiffness, sudden pain on lifting weight or bending down

*Rupa*- *Katishoola*, *Ubhaya Janghan and Vankshan Pradeshe Shoola*, *Katiparyant Pada Shoola*

*Samprapti*:- *Vata Prakopaka Nidana Atisevana*



### ***Samprapti Ghataka***

- *Doshas :- Vata-Pradhana: In Kshayajanya- Sandhigatvata especially Vyana Vayu*
- *Dushya :- Rasa, Rakta, Mansa, Sira, Asthi*
- *Agni:- Jatharagni and Dhatvagni-Mandya*
- *Strotas:- Ashtivaha Srotas*
- *Srotodusti Prakara :- Sanga and Vimargagamana*
- *Udbhavasthana :- Pakwashaya*
- *Adhisthana :-Sharira*
- *Vyaktisthana:- Sandhi (Kati)*
- *Vyadhi Marga:- Bahya Marga*
- *Sadhyasadhyata:- Krichhasadhya / Yapya*
- *Rogmarga:- Marmasthita Sandhi (Abhyantara Rogamarga)*

### **INVESTIGATIONS**

**Before treatment****X-RAY OF L.S A.P AND LATERAL VIEW**

- Spondylotic changes seen in spine with osteophyte formation
- Wedging of D11 vertebra
- Facetal arthropathy in lower lumbar
- Multilevel reduced lumbar IV disc space noted from L1 to L4

**DIAGNOSIS** – On the basis of clinical history, clinical presentation, X-Ray investigations, patient was diagnosed as a case of vertebral Spondylosis (*Dhatukshayajanita Katisandhigata Vata*).

**THERAPEUTIC INTERVATION**

*Kalabasti Karma* followed by *Matra Basti Karma* for 30 days were planned in the management along with medicines (*Shaman Chikitsa*) as below :-

Medicine	Dose	Duration
<i>Hingwashtak Churna-6 gm</i> <i>Navayasa Loha 250 mg Mukta</i> <i>Shukti 500 mg with Go-Ghrita</i>	1tsp BD	46 days
<i>Simhnada Guggulu</i>	2 TDS	46 days
<i>Dashmula Kwatha 20 gm</i> <i>Rasnadi Kwatha-20 gm</i>	50 ml BD	46 days

All these medicines were given with warm water before meal.

**PANCHAKARMA**

- *Abhyanga* with *Nirgundi Taila*
- *Bahya Swedana* :- *Kati Basti* with *Mahavishagarbha Taila*

*Bashpa Sweda Kati Pradeshe*

- *Kalabasti* For 16 days

After *Kalabasti*, *Matra Basti* for 1 month with 50 ml *Ashwagandha Taila*

**KALA BASTI**

<i>Vastidravya(Niruha Vasti)</i>	Doses
<i>Rasnadi Kwatha</i>	100 ml
<i>Guduchyadi Kwatha</i>	100 ml
<i>Pathyadi Kwatha</i>	100 ml
<i>Madhu</i>	60 ml
<i>Lavana</i>	10 gm
<i>Shatpushpa Kalka</i>	20 gm

Til Taila	60 ml
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Vasti dravya(Anuvasana)	Doses
Ashwagandha Taila	50 ml

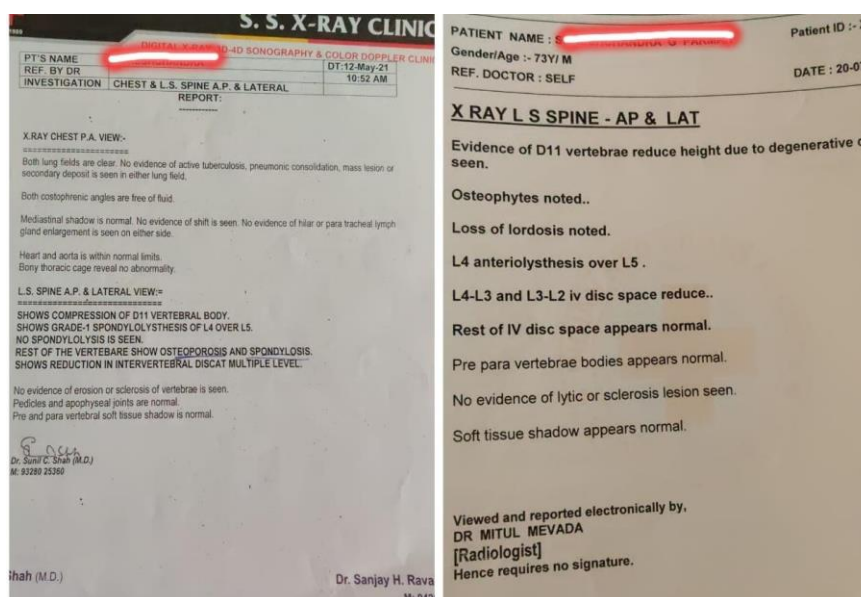
### Pathya-Apathya

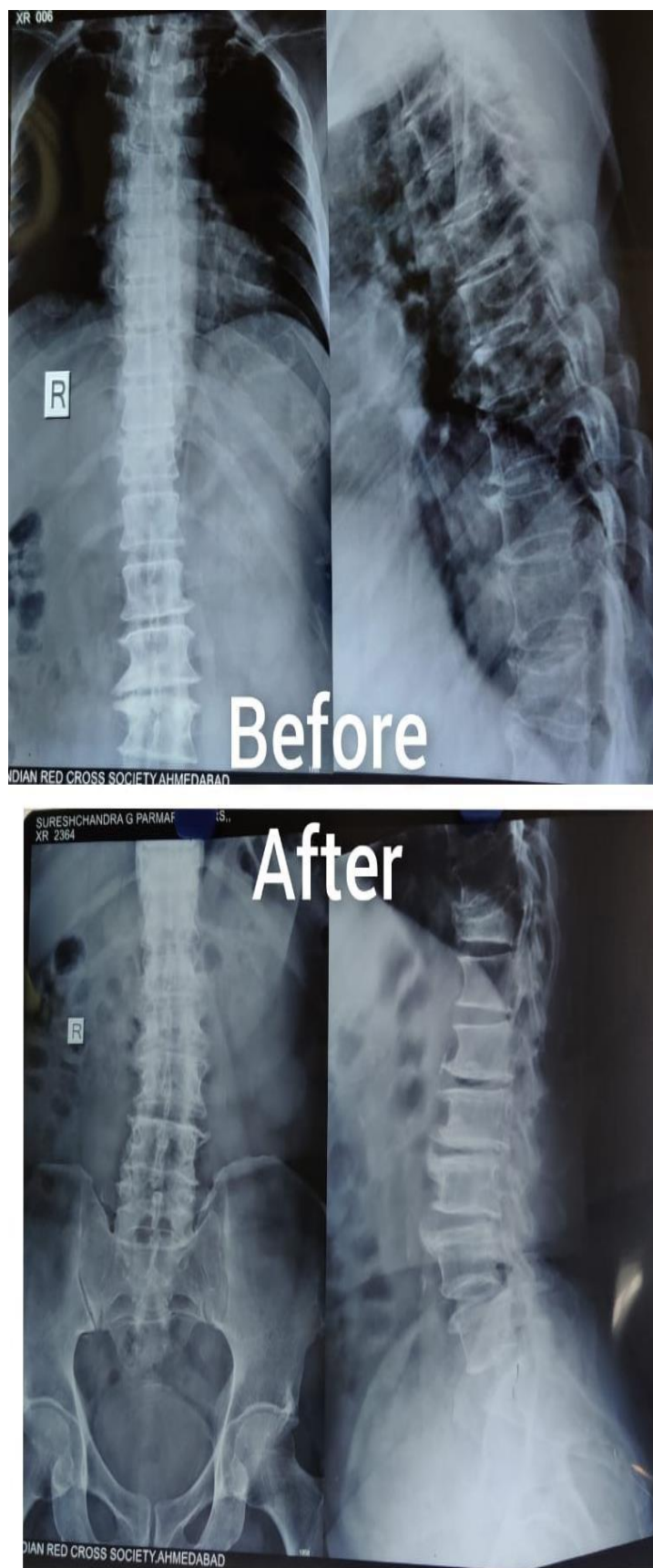
Patient was advised *Pathya Ahara* and *Vihara* during the course of medication like-Milk, *Ghee*, freshly cooked food, easily digestible light diet with *Ghrita* like *Khichdi*(Vilepi), *Mudga Yusha*(green gram soup), vegetable soup, roti, *Sabji*(bottle gourd, ridge gourd, sponge gourd, pointed gourd, bittergourd, (spiny gourd etc). Patient was barred for day sleep(*Divaswapa*) and awakening at night(*Ratri Jagrana*), suppression to natural urges, and excess physical exertion(*Adhika Vyayama*).

### ASSESSMENT OF DISEASE IMPROVEMENT: SUBJECTIVE CRITERIA

Symptoms	B.T	A.T						
		1 <sup>st</sup> wk	2 <sup>nd</sup> wk	3 <sup>rd</sup> wk	4 <sup>th</sup> wk	5 <sup>th</sup> wk	6 <sup>th</sup> wk	7 <sup>th</sup> wk
Katishoola	+++++	+++++	+++	+++	++	++	+	-
Ubhaya Janghan Pradeshe Shoola	+++++	+++++	+++	++	+	+	-	-
Vankshan Pradeshe Shoola	+++++	+++++	+++	++	-	-	-	-
Katiparyant Pada Shoola	+++++	+++++	+++	++	-	-	-	-
Udara Daha	++	+	-	-	-	-	-	-

### INVESTIGATIONS AFTER TREATMENT











## RESULTS

After 46 days of *Ayurvedic* treatment, patient got complete relief in symptoms like *Katishoola*, *Ubhaya Janghan* and *Vankshan Pradeshe Shoola*, *Katiparyant Pada Shoola*. After 30 days of *Ayurvedic* treatment *Udara daha* symptom got completely subsided. Gradual improvement in physical well being, increase in appetite, improvement in bowel movement, sleep pattern, pain reduction, correction in posture, improvement in physical strength were observed after above management which is very remarkable in old age. Marked changes were observed in post treatment X- ray.

## FOLLOW UP

Follow up medicine was given in OPD of Government Akhandanand Ayurveda College Hospital, Ahmedabad for further 2 weeks. Same medications were continued for 2 weeks.

## DISCUSSION

Due to *Nidanas* like ageing effect (*Jarajanya Vata Vriddhi*) along with history of trauma (*Abhigata/ Marmaghata*) leads to *Dhatu Kshaya* at *Katisandhi Adhithana* that can be easily visible in X-ray investigation reports. Hence this is a typical case of *Kshayaanita Katisandhigata Vatavyadhi*.

Treatment protocol were planned mainly to execute the *Vata Shaman Karma* and *Brimhana Karma*.

*Vata Shaman Karma* along with *Snehana*(*Bahya and Abhyantara*), *Swedana*, *Basti Karma* were initiated as per classical line of treatment of *Kshaya Vatavyadhi*.

*Hingwastaka Churna* having properties of *Deepan Pachan* were consumed along with *Muktashukti Bhasma* and *Navayas Lauha* that is having properties of *Balya* and *Shonita Prasadana*.

*Simhnada Guggulu* was prescribed that acts as *Vatahar*, *Shulahara*, *Jaranashana* properties. *Maharasnadi Kwatha* along with *Dashamoola Kwatha* were consumed having properties of *Vatashamana Brimhana* and analgesic effect.

*Snehana Swedana Mrudu Samshodhana Karma Basti* and *Matra Basti* were prescribed as per principles of *Vatavyadhi Chikitsa*.

*Bahya Snehana* included *Sarvang Abhyanga* with *Sukhoshna Nirgundi Taila* having properties of *Vata Shamana*.

*Bashpa Sweda* is *Saagni Sweda* that acts on *Vata Samana* and relieves pain and stiffness.

*Kati Basti* is *Snigdha Saagni Swedana* which by its local effect helps in relieving *Shoola Stabdhta*. It may help in immediate relief of symptoms causing analgesic effect.

*Basti Chikitsa* is considered as *Ardha Chikitsa* and *Shrestha Chikitsa* for pacifying *Vata Dosha*.

It is explained in classical text that mode of action of *Basti* that is administered through rectal route gets absorbed and shows its effects in all over the body just like water gets absorbed through the roots and nourishes the whole plant. *Jara* or ageing is an unavoidable phenomenon in livings and there is no treatment in western science. Ageing specifically affects in the bones is a huge problem for ancient times that is called osteoarthritis. *Ayurveda* has very special management approach with its unique principles focusing the *Agni*/digestive power and *Bhootagni* basic metabolism. In present case all the focus were made to improve both the above *Agni* that is also a prime approach in the management of *Vatavyadhi*.

Additionally old age referred as a *Vataprakopa* age because of natural depletion of tissues *Swabhavoparam* that leads to both *Prakopa* with its principles *Dehe Strotansi Riktani Puryitwa Anilobali*. Hence external and internal oleation were successfully included in this case.

So, it can be concluded that classical management of *Kshayajanita Vatavyadhi* is applicable on the basis of modern investigation, findings along with appropriate history of patient and suitable required *Pathya Karma*.

## CONCLUSION

This case study proves that Degenerative bone disorder like Spondylosis due to ageing pattern can be treated successfully in *Ayurveda* with the application of classical line of management of *Vatavyadhi* in *Charaka Samhita*.

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