

EFFECT OF PANCHKARMA THERAPY IN KATISHOOLA W.S.R. LUMBAR SPONDYLOSIS -A CASE STUDY

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ABSTRACT

Low back agony is normal in middle age. Its executives is relies on the condition, intense or constant and the reason. On which the orthopedic choose, is it a crisis or preservationist line of treatment is adequate. In *Ayurveda trikshoola*, *katishoola* goes under *vatavyadhi*. Low back pain is an important clinical, social, economic, and public health problem affecting the population indiscriminately. It is a disorder with many possible etiologies, occurring in many groups of the population, and with many definitions. Low back pain affects approximately 60 – 85% of adults during some point in their lives and LS is responsible for about 10% of all the back pain conditions. *Shodhala* in the *Kayachikitsa Khanda*, *Vataroga Adhikara* had clear description regarding the *Samprapti*, *Lakshana* of *Kati Graha*. The board for this is with *matra basti*, *kati basti* is referenced in *ayurvedic* content. The

panchakarma procedures selected for management of *katishool* were *Abhyanga*, *Nadi-sweda*, *Katibasti*, *Matrabasti*. In this study patient got significant improvement and no complication were found during and after the clinical study.

KEYWORDS: *Vatavyadhi*, *Katigraha*, Lumbar spondylosis, *Abhyanga*, *Matra basti*, *Nadi-sweda*.

INTRODUCTION

Lumbar Spondylosis is a term used to describe a group of arthritis-based spine conditions that cause inflammation in the vertebrae and sometimes joints of the spine, in the lower back. Spondylosis generally occurs in the lowest section of the lumbar spine — the sacroiliac joint that connects the pelvis to the spine. Spondylosis (degeneration of the lumbar spine) initiates from the intervertebral disc. At this level progressive biochemical and structural changes take place leading to a modification in the physical properties of elasticity and mechanical resistance. Disc lesions cause pathological changes in the vertebral bodies, where osteophytes appear. Most osteophytes are anterior or lateral in projection. Posterior vertebral osteophytes are less common and only rarely impinge upon the spinal cord or nerve roots.^[1,2,3]

Low back pain affects approximately 60 – 85% of adults during some point in their lives and LS is responsible for about 10% of all the back pain conditions.^[4] In *Ayurveda*, It can compare with a disease *Katishool*, characterized by *Kati pradeshevedana*, *Kati shunyata*, *kriya hani*, *Hasta-pada suptata*. *Kati shoola* is a sickness which is mostly brought about by vitiation of *Vata dosha*. Some antiquated messages additionally portray *Kati shoola* as a manifestation of certain disarranges, for example, *Kati graha*, *Trika graha*, *Prushta graha*, *Kati vayu*, *Trika shoola*, *Prushta shoola*, *Vataja shoola*, *Trika vedana*, and *Grudrasi vata*.^[5,6,7]

Kati shoola isn't referenced as a different illness in any of the *Brihatrayees* straight forwardly. Despite the fact that *Acharya Charaka* has not referenced the condition straight forwardly, however by his citation "*Hetu Sthaana Visheshat Ca Bhavet Roga Vishesha Krit*" he has in a roundabout way referenced every one of those conditions which can emerge because of restriction of *Vata* in explicit part of the body.

Shodhala in the *Kayachikitsa Khanda*, *Vataroga Adhikara* had clear description regarding the *Samprapti*, *Lakshana* of *Kati graha*.^[8] *Yogarajnanakar* under the heading of *Vata vyadhi*, it has been referenced as *Kati Sandhigata Vata*, *Kati vata*, *Trika shoola*. Thus, these can be considered as the equivalent words of *Kati Shoola*.^[9] *Bhava Prakash* has clarified *Kati graha* and *Trika shoola* as a different illness. He has characterized *Trika* as the joint between two hip bones and spinal section, has clarified *Trika shoola lakshana*, and its administration.^[10] In modern medicine the disease is managed by non-steroidal anti-inflammatory drugs, analgesic drugs; physiotherapy and corticosteroids but these drug have so many side effects. So

ayurvedic approach is natural way to cure low back pain by *matrabasti*, *katibasti* and internal *ayurvedic* medicine without any side effect can give promising results.

AIMS AND OBJECTIVES

To estimate the efficacy of *Ayurveda* therapies in management of *Katishool* w.s.r. Lumbar-spondylosis.

MATERIALS AND METHODS

Study type- Single observational case study with no any control group.

Center of study- Dr S.R. Rajasthan Ayurved University, Jodhpur (Rajasthan).

CASE REPORT

A 30 year old married *Hindu* male patient visited in the OPD of *Panchkarma*, DSRRAU, Jodhpur with presenting problems of Pain and stiffness in lower back, Pain radiating to both lower limbs since 2 years, Numbness in both the lower limbs for last 6 months. He was advised for surgical treatment but he doesn't want to go for surgical treatment. So that patient came to the DSRRAU hospital.

PERSONAL HISTORY

Appetite – Normal Diet-Mixed type (veg & non-veg) Sleep – Normal Bowel-Irregular (constipation) Bladder – 4-5 times/day Addiction- None.

PAST HISTORY

No any significant past history was found.

FAMILY HISTORY

No any significant family history was there.

GENENRAL EXAMINATION

B.P-130/80 mmHg	P.R.-75/min
R.R-19/ min	R.S. - AE=BE clear
CVS – S1 S2 normal.	CNS –conscious (oriented)
P/A: Soft, non-tender	Built – normal
Weight- 70 kg	Pallor – absent
Icterus-absent	Cyanosis –Absent
Nails – pinkish	Clubbing – absent

SLR test- Positive in left leg with 30 degree

CLINICAL EXAMINATION OF SPINAL CORD

Inspection: No lordosis, no kyphosis was found in the patient.

There was no any other major abnormality was seen in spinal examination of the patient.

No any swelling, no sign of trauma and surgical marks were seen in spinal examination of patient.

ASTVIDHA PARIKSHA

Nadi - Vata -pitaj (75/min)

Mutra – Samyakpravritti (4-5 times /day)

Mala – Malavshatmbha (occasional)

Jihva - Alipta

Shabda – Spashta

Sparsha- Samshitoshana

Drik - Samanya

Akrti - Madhyama

Sroto dushti: Asthivaha Strotas: Katishool

TREATMENT

<i>Sthanik Snehan (local oiling)</i>	<i>Mahanarayan tail</i>	30 days
<i>Swedan (nadi-swed) (hot fomentation)</i>	<i>Dhashamool Kwatha</i>	
<i>Matra basti: Yamak sneha (60 ml)</i>	<i>Panchtikta ghrta + Ksheerbala taila</i>	
<i>Kati basti</i>	<i>Brihat saindhvadi taila</i>	

Kati basti^[11]

Kati basti is renowned as the method of applying heat to the sacral or lumbar region by maintaining hot medicated oil on this area in a specially shaped frame. It is stated in the lower back region's painful condition. It was performed with *Brihat saindhvadi taila* for 45 minutes for 30 days.

Matra basti^[12]

Medicated oil or other *sneha dravya* administration is called *Anuvasana basti* or *Sneha basti* through the rectal path in prescribed dose. 1/4th of *Sneha basti* is *Matra basti* which is approx 75 ml. Here 30-30 ml of each *Panchtikta ghrta* and *Ksheerbala taila* was used in *Matra basti*.

CRITERIA FOR ASSESSMENT AND OBSERVED RESULT**Straight Leg Raising Test**

Before Treatment		After Treatment	
Right Leg	Left Leg	Right Leg	Left Leg
90 degree	30 degree	90 degree	70 degree

Owestry Low Back Pain Index

S.no.	Before Treatment	After Treatment
1	The pain is worst imaginable at the movement	No pain at the movement
2	Patient do not get dressed, wash with difficulty and stay in bed	Patient can look after himself normally without causing extra pain
3	Cannot lift or carry anything at all	Patient can lift weight without causing extra pain.
4	In bed most of the time	Pain does not prevent to patient walking any distance.
5	Pain prevent when sitting at all	Patient can seat in any chair as long as like
6	Patient have no social life because of pain	Normal social life

Relief in Bending

Before Treatment	After Treatment
Forward bending Painful	Forward bending Painless
Backward bending Painful	Backward bending Painless

DISCUSSION

Acharya Sushruta has mentioned that *Shoola* (pain) occurs because of *Vata Dosha's* vitiation. *Srotas Awarodata* (channel obstructions) and *Dhathu Kshaya* (tissue depletion / malnutrition) vitiate *Vata Dosha*. *Apana Vata* is mostly engaged in *Kati Shoola*. The purpose of the therapy, therefore, is to pacify vitiated *Vata Dosha*, particularly *Apana Vata*.

So to pacify *vata dosha* one has to use drugs having *snigdha*, *ushna*, *guru guna*. Due to excessive sedentary and standing form of job, *Kati shoola* is chronic disorder. *Snehan* and *Swedan* acts as *vata shamak*, increases blood circulation and relieves pain by local action. The mode of action of *abyanga* can also be understand by the properties of *snehan* i.e. *snigdha* and *guru* acts as *vatahara*, *snehana*, *balya*, *pustikara*, *Mridu guna* reduces the stiffness due to *kathinya guna*. *Sukshma guna* help the drug to reach upto minute channel.

Kati basti collectively serves the both purpose of *snehana* and *swedana* externally and provides time for *sneha dravya* to reach the target. *Matra basti* however is a internally acting process, reaches upto *Pakvashaya* which is known to be the main site of *vata dosha*. Here it pacify the *vata* with its *snigdha*, *ushna*, *guru guna* and brings about the *vata anulomana*.

CONCLUSION

Kati Shoola may happen autonomously or as a difficulty in numerous maladies which ought to be remembered while doing clinical assessment. The administration relies upon the stage, for example, *Svatantra* or *Paratantra*, *Naveena* or *Purana*, *Saama* or *Niraama*. *Kati Shoola* can be adequately overseen by wise utilization of *Panchakarma* therapy and by following diet and way of life.

It is found that this therapy regimen in *Kati Shoola* (lumbar spondylolisthesis) totally or partly relieves the symptoms. These drugs can be used to treat patients suffering from *Kati Shoola* to effectively and more effectively decrease both signs and symptoms.

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