

A REVIEW ON LUMBAR SPONDYLOSIS AND ITS AYURVEDIC CORRELATION WITH *KATIGRAHA*

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ABSTRACT

Lumbar spondylosis is a degenerative disorder of the lower spine that causes slow degradation of the intervertebral discs, vertebrae, and related joints. Age-related changes and recurrent mechanical stress cause disc dryness, decreased disc height, and tiny tears in the annulus fibrosus. These alterations increase tension on the facet joints and adjacent ligaments, resulting in bone spur development and ligament thickening. From an Ayurvedic standpoint, this disease is linked to *Katigraha*, in which Vata dosha vitiation destroys musculoskeletal integrity and compresses nerve roots, resulting in stiffness, discomfort, and restricted movement. Degenerative alterations are referred to as *Dhatu Kshaya* (tissue depletion) and *Margavarana* (obstruction of natural channels). Inflammatory chemicals exacerbate tissue breakdown and lead to pain.

KEYWORDS: Lumbar Spondylosis, Katigraha, Vata Vyadhi,

dhatukshaya.

INTRODUCTION

Lumbar spondylosis is one of the most common causes of chronic low back pain, particularly among those over the age of 40. It is caused by gradual degenerative changes in the lumbar spine's facet joints, ligaments, and intervertebral discs. According to Ayurveda, Katigraha, a Vata Vyadhi disease, has similar symptoms. In Kati Pradesh, pain (ruja) and stiffness (stambha) are caused by an overactive vata dosha, which regulates movement and nerve function.

Lumbar spondylosis is a musculoskeletal disorder that requires clinical and therapeutic investigation because to the increased prevalence of sedentary lifestyles, poor posture, and work stress.

AIMS AND OBJECTIVES

1. To examine the etiopathogenesis of Katigraha and lumbar spondylosis.
2. To examine the relationship between contemporary and Ayurvedic concepts.

MATERIAL AND METHODS

- **Classical sources:** Classical Ayurvedic texts such as Charaka Samhita, Bhela Samhita, Madhava Nidana, Gada Nigraha, and Harita Samhita, along with their commentaries.
- **Contemporary sources:** Published research articles, books, and clinical studies on *Katigraha*, concentrating on its conception, etiology, and management.
- **Method:** Critical analysis and correlation of Ayurvedic concepts with modern science.

❖ AYURVEDIC REVIEW

The word “Kati Graha” is formed from two Sanskrit roots—Kati and Graha.

Kati

1. In the Amarakosha, the term "kati" is identified as a synonym of "shroni " referring to the pelvic or hip region of the body.
2. The Shabdakalpa Druma describes Kati as the anatomical portion situated near the Shroni, having an approximate circumference of sixteen Angulas (finger-breadth units).
3. As stated in Vachaspathyam, the origin of Kati lies in the expression Gatyam, derived from the root Gati, meaning “movement.” When the suffix "in" is added, it denotes a part connected with motion. Thus, Kati refers to the bony pelvic structure that aids in movement and has a measurement of approximately sixteen angulas in circumference.

Graha

1. The word “Graha” is derived from the Sanskrit root “Graha,” meaning “to seize” or “to hold.”
2. It originates from the verbal root (dhātu) of Adant-churam-atmam-saka-set.
3. According to Durgadas, “Graha” is interpreted as “Garho Grahanam,” which denotes the act of grasping, seizing, or holding firmly.
4. The term also implies the sense of support or sustenance, as expressed in the phrase “Graha Upādāne.”

Katigraha

Katigraha is a disorder characterized by pain (Śūla) and stiffness (Stambha) in the lumbar region (Kati Pradeśa), primarily caused by the vitiation of Kevala Vāta or Sāma Vāta. As described by Śārṅgadhara, it is a condition marked by “Kati-stambhena Vedanā-viśeṣa”—that is, specific pain and rigidity affecting the lower back region.

Etiology (Nidāna)

The causative factors of *Katigraha* are primarily those that vitiate Vāta Doṣa. Consumption of foods that are *Rūkṣa* (dry), *Śīta* (cold), or *Viṣṭambhī* (causing obstruction) increases and aggravates *Vāta*.

In today’s fast-paced lifestyle, irregular dietary habits, skipping meals, and improper food quantity disturb *Agni* (digestive fire) and enzymatic functions, resulting in *Vāta prakopa*.

According to Ayurvedic texts, *Nidānas* of *Vāta-vyādhi* can be classified as.

- **Mithyā-yoga (abnormal activities):** *Rātri-jāgaraṇa* (night awakening), *Vega-saṁdhāraṇa* (suppression of natural urges), *Bhāra-haraṇa* (lifting heavy weights), etc.
- **Ati-yoga (excessive activities):** *Ratha-ati-caraṇa* (excessive travel or driving), *Ati-vyāyāma* (overexertion), *Ati-adhyayana* (excessive study), and *Kriyā-atiyoga* (prolonged physical or mental activity).

Symptoms (Lakṣaṇa)

The signs and symptoms of *Katigraha* may be grouped as follows.

A. Spine-related manifestations

- *Kati Graha* – stiffness of the lumbar region.
- *Kati Śūla* – pain in the lower back.

B. Lower limb-related manifestations

- *Pāda Supti* – numbness in legs
- *Pāda Harṣa* – tingling sensation
- *Pāda Gaurava* – heaviness in legs
- *Pāda Daurbalya* – weakness of lower limbs

Pathogenesis (Samprāpti)**1. Dhātu-kṣayaja Katigraha**

Continuous indulgence in *Rūkṣa* (dry), *Śīta* (cold), and *Laghu* (light) foods, *Rātri-jāgaraṇa* (night vigil), and *Vega-dhāraṇa* (suppression of urges) leads to depletion of body tissues (*Dhātu-kṣaya*) and subsequent aggravation of Vāta Doṣa.

The *Rūkṣa-guṇa* of aggravated *Vāta* causes a decrease in Kapha and Snehansha (unctuousness) in the joints (*Sandhi*), leading to *Sandhi-bandhana-śīthilata* (loosening of ligamentous and joint structures). The vitiated cumulates in its seat (*Āśraya sthāna*) and manifests as *Katigraha*.

Vāta then localizes in the structurally weak lumbar joints (*Kati-pradeśa*), producing *Stambha* (stiffness) and *Śūla* (pain)—the key features of *Katigraha*.

2. Mārgāvarodhaja Katigraha

When food is consumed before complete digestion of the previous meal or in quantities inappropriate to one's Agnibala, Ama (toxic, undigested metabolic byproduct) is formed. Intake of Guru (heavy), *Śīta* (cold), *Viṣṭambhī* (obstructive), *Śuṣka* (dry), *Vidāhī* (irritant), *Rūkṣa*, and *Picchila* (slimy) foods, along with sedentary habits, contributes to Ama accumulation.

This Ama causes Dosha prakopa, disturbs Agni, and leads to the improper formation of Rasa Dhātu. The derangement of Jatharāgni and Dhātvāgni results in Srotavarodha (obstruction of body channels). Consequently, the obstructed Vāta becomes vitiated and produces Ruk (pain) and Stambha (stiffness) in the Khavaigunya-yukta Sandhi (weakened joints), manifesting clinically as *Katigraha*.

Samprāpti Ghaṭaka (Pathogenetic Components)

Component	Description
Doṣa	<i>Vāta</i> (Vyana, Samāna, Apāna), <i>Kapha</i> (Śleṣaka)
Duṣya	<i>Dhātu – Māṃsa, Meda, Asthi; Upadhātu – Kandara, Snāyu</i>
Agni	<i>Jatharāgni, Dhātvāgni</i>
Āma	<i>Jatharāgni and Dhātvāgni-janya Āma</i>
Srotas	<i>Asthivaha and Māṃsavaha Srotas</i>
Srotoduṣṭi	<i>Saṅga</i> (obstruction)
Udbhava Sthāna	<i>Pakwāśaya</i> (seat of Vāta)
Vyakta Sthāna	<i>Kati Pradeśa</i>
Roga Mārga	<i>Madhyama Roga Mārga</i>

MORDEN REVIEW

Lumbar spondylosis is a degenerative condition of the lumbar spine that affects the vertebral bodies, intervertebral discs, ligaments and facet joints. It is a progressive disorder caused by continuous wear and tear, aging, and mechanical stress, which results in spinal structural and functional deterioration.

Pathophysiology of Lumbar Spondylosis (Three Phases)**Phase 1: Dysfunctional Phase**

The first stage of degeneration starts in the intervertebral disc. The nucleus pulposus loses water and proteoglycans with time, which makes it less flexible and less able to handle mechanical stress. Because of this, the annulus fibrosus has tiny cracks from being under constant stress. The height of the disc starts to go down, which puts extra stress on the facet joints and other structures.

This stage shows up in the clinic as minor pain in the lower back, stiffness, and muscular spasms that happen from time to time.

Phase 2: Instability Phase

As degeneration continues, the disc structure gets weaker, which makes it less able to absorb trauma. The annular tears get bigger, which makes the disc bulge or partially prolapse. Facet joints erode and inflame their cartilage because of changes in biomechanics, and supporting ligaments, especially the ligamentum flavum, become loose. This disorder makes some parts of the body unstable, which can irritate nerves.

Clinically, patients may report intermittent back discomfort, a sense of “locking” or “catching” during mobility, and radiating pain along the afflicted nerve route.

Phase 3: Stabilization Phase

And finally, in the last step, the body tries to get back to a stable state by growing osteophytes around the edges of the spine. Facet joint hypertrophy and ligament thickening both happen at the same time, which narrows the spinal canal and intervertebral foramen space, putting pressure on the nerves.

This process may lead to partial or total fibrosis of the disc, resulting in a rigid and immobile portion (spontaneous fusion).

In a clinical setting, patients exhibit chronic pain, restricted spinal motion, and occasionally neurological manifestations, including numbness, weakness, or radiculopathy.

CONCLUSION

The symptoms stated in Katigraha are similar to lumbar spondylosis in modern medicine. Both illnesses share clinical symptoms such as low back pain (Kati Śūla) and stiffness (Stambha), indicating heavy involvement of Vāta and Kapha Doṣas.

Ayurvedic etiology (Samprāpti) describes Doṣa Prakopa (Vāta and Kapha vitiation) and its location (Sthāna Saṁśraya) in Kati, Trika, and Pṛṣṭha Pradeśa (lumbar, sacral, and back regions), causing Srota blockage, discomfort, and stiffness. Degenerative alterations in intervertebral discs and facet joints cause mechanical compression and inflammation in lumbar spondylosis, causing lower back discomfort, stiffness, and limited mobility.

85.5% of 45-64-year-olds had lumbar osteophytes. Imaging indicates 10% of 20–29-year-old women had disc degeneration. Most adults over 40 have lumbar spondylosis, while 3% of 20–29-year-olds have it.

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