

## A CRITICAL REVIEW ON MANYASTAMBHA: AN AYURVEDIC PERSPECTIVE

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### ABSTRACT

Nowadays in this rapidly growing era, the prevalence of degenerative illness is growing because of stress and poor lifestyle. Manyastambha, a usual lifestyle ailment, proceeds as stiffness, ache, and restricted motion in the cervical area. In Ayurveda, Manyastambha is classified in the eighty Vataja Nanatmaja Vyadhis and Urdhwajatrugata Vikaras. Its signs have close resemblance to cervical spondylosis, a degenerative condition affecting the cervical vertebrae. Primary symptoms include Ruk (pain) and Stambha (rigidity), which might also result in nerve compression and subsequent sensory or motor problems in extreme instances. The ever growing occurrence of cervical spondylosis is attributed to some trendy conducts consisting of extended desk work, bad posture, immoderate screen time, abnormal sleep patterns, and overlooking physical and nutritional health. Addressing this situation calls for a balanced approach that carries higher ergonomics, everyday

workout, and conscious dwelling.

## INTRODUCTION

Nowadays, in this rapidly growing era, different factors including stress, sedentary lifestyle, extended work hours, prolonged multimedia consumption, manual exertions, immoderate length of tours, and bad eating habits contribute to joint stiffness, muscle rigidity, and issues affecting the joints and locomotor system. Neck ache, a common manifestation of these lifestyle choices, substantially hampers daily activities and quality of life. Motion is a key element of the human body, and Ayurveda explains that *Vata Dosha* governs all biological activities.<sup>[1]</sup> Any change in *Vata Dosha* results in impaired body functions. *Manyastambha* is classified as one of the *Naanatmaja Vatavyadhi*<sup>[2]</sup> and is considered an *Urdhwajathrugata Vikara*. It manifests from aggravated *Vata* accumulating in the *Manya* area, often with *Kapha* involvement, leading to restricted motion (*Sthabdhata*) and pain (*Shoola*).<sup>[3]</sup>

The term *Manyastambha* is derived from *Manya*, correlating to the nape of the neck. According to Monnier and Williams, *Manya* denotes the nerves of the neck region (*Greeva Paschat Sira*).<sup>[4]</sup> The term *Stambh* signifies stiffness or tension.<sup>[5]</sup> In this condition, *Kaphavruta Vata* accumulates within the *Sira* and *Snayu* of the *Manyapradesha*, causing symptoms such as heaviness (*Guruta*), stiffness (*Stambha*), pain (*Ruk*), and restricted movement (*Cheshtastambh*). Clinically, *Manyastambha* closely resembles cervical spondylosis, a type of *Vatavyadhi* that may present as either *Nanatmaja Vikara* or *Kaphavruta Vata*. Acharya Sushruta, in *Nidan Sthan*, identified factors such as daytime sleeping, postural deformities, and extended upward-looking as contributors to *Vata* and *Kapha* aggravation, eventually resulting in *Manyastambha*.<sup>[6]</sup>

The signs and symptoms of *Manyastambha* align with those of cervical spondylosis, a common musculoskeletal condition and a major health concern in modern society. A 2013 Global Burden of Disease study ranked neck pain among the top 10 causes of years lived with disability globally.<sup>[7]</sup> Similarly, the Global Burden of Disease 2015 report identified neck pain as the leading cause of years lived with disability and the fourth leading cause of disability-adjusted life years.<sup>[8]</sup> Modern lifestyle habits, including prolonged computer use, frequent two-wheeler travel, lack of neck exercises, poor posture, and increased mental stress, are major contributors to *Vata* aggravation. Additionally, *Kapha Dosha* plays a role in *Manyastambha*'s pathogenesis. *Vata* becomes vitiated either through *Avarana* or *Dhatukshaya* and eventually accumulates in *Kaphasthana*, involving *Kapha Dosha* in the

disease pathway. If neglected in its early stages, *Manyastambha* can progress, with later phases showing *Nirupastambhita Vata Dosha* rather than *Kapha Anubandhata*.

## REVIEW ON MANYASTAMBHA

### 1. Historical Review

The historical review of *Manyastambha* has been taken from the Vedic era to the present day. This assessment offers a widespread description of the ailment, exploring its occurrence in diverse classical texts.

#### a) Vedic Literature

There is no direct reference to *Manyastambha* in *Yajurveda* and *Samaveda*. However, indirect references can be found in *Rigveda* and *Atharva Veda*, particularly in discussions on *Vata Bheda*, *Shleshmaka Kapha*, *Sandhi Vyadhi*, and medicinal treatments for *Vatavyadhi*.<sup>[9]</sup>

#### i. Brihatrayi

- **Charak Samhita:** In *Charak Sutrasthana*'s 20th chapter, "Maharogadhyaya," Acharya Charaka enumerates 80 types of *Vataj Nanatmaja Vyadhi*, including *Manyastambha*.<sup>[10]</sup> In *Siddhi Sthana* 12, *Trimarmeeya Adhyaya*, he describes *Manyastambha* as a result of head injury (*Shiro Abhighata*).<sup>[11]</sup>
- **Sushruta Samhita:** Acharya Sushruta provides a detailed account of *Vatavyadhi* in *Nidana Sthana*, *Vatavyadhi Adhyaya*.<sup>[12]</sup> He considers *Manyastambha* as both an independent disease and a prodromal symptom of *Apatanaka*.<sup>[13]</sup> Gayadasa, a commentator on *Sushruta Samhita*, elaborates on the causative factors.<sup>[14]</sup>
- **Ashtanga Hridayam:** In *Nidana Sthana*, chapter 15, Vagbhatta lists *Manyastambha* as a symptom of *Antharayama*.<sup>[15]</sup> *Manyastambha* is also mentioned in *Ashtang Samgraha*.<sup>[16]</sup>

#### ii. Laghutrayi

- **Madhav Nidana:** Discusses *Manyastambha* in chapter 22, *Vatavyadhi Nidan*.<sup>[17]</sup>
- **Bhavprakash:** Acharya Bhavprakash includes *Manyastambha* among the 80 *Vataj Nanatmaja Vikara* in *Madhyam Kand*, chapter 24, *Vatavyadhi Adhikar*.<sup>[18]</sup>
- **Sharangdhar Samhita:** Mentions *Manyastambha* in *Purvakand Adhyaya* - 7 as one of the 80 *Vata Rogas*.<sup>[19]</sup>
- **Kashyap Samhita:** Lists *Manyastambha* among 80 *Vataj Nanatmaja Vikara* in *Sutrasthana*, chapter 27, *Rogadhyaya*.<sup>[20]</sup>
- **Harit Samhita:** Discusses *Manyastambha* in *Tritiya Sthana*, chapter 20, *Vatavyadhi*.<sup>[21]</sup>

- **Gadnigrah:** Provides information on Manyastambha in Kayachikitsa Kand, chapter 19.<sup>[22]</sup>
- **Yogratnakar:** Mentions Manyastambha in Vatavyadhi Nidan.<sup>[23]</sup>
- **Chakradatta:** Describes the treatment for Manyastambha in chapter 22.<sup>[24]</sup>
- **Bhaishajya Ratnavali:** Includes Manyastambha treatment in chapter 26, Vatavyadhi Rogadhikar.<sup>[25]</sup>

## b) Vyutpatti and Nirukti

Manyastambha is formed from two words:

- i. **Manya:** Refers to the nerves in the back of the neck (Greeva Paschat Sira).<sup>[26]</sup>
- ii. **Stambha:** Signifies stiffness, rigidity, or immobility (Dalhana), (Shabdha Kalpa Drumam)<sup>[27]</sup>

Aruna Dutta, in his commentary on Ashtanga Hridaya, defines Manya as two Nadis lateral to the neck, meanwhile Acharya Dalhana describes Stambha as Niscalikarana, which means stiffness or limited motion.<sup>[28,29]</sup> Manyastambha, hereby, is noted as pain and constrained neck actions due to vitiated Vata lodged within the cervical region. Stambha is inferred as a result of Prakupita Vata Karma.<sup>[30]</sup> This condition involves both Vata and Kapha Doshas.

## 2. Paribhasha

Manyastambha can be considered under the well-known eighty Vataja Nanatmaja Vikaras. Along with Vata, Kapha Dosha is also involved. Vata becomes vitiated either due to Kaphavarana or Dhatu Kshaya and accumulates in the Kapha Sthana, further implicating Kapha in the disease. If untreated in early stages, Manyastambha may progress into a chronic condition, during which Kapha involvement diminishes, resulting in a primarily Vata-dominant disorder with degenerative traits.<sup>[31]</sup>

## 3. Nidana

The classical texts do not explicitly mention specific Nidanas of Manyastambha. Hence, factors that aggravate Vata Dosha may be reasonably regarded as its causative elements. Some of these Nidanas include: Ruksha Ahara, Sheeta Ahara, Katu Rasa, Tikta Rasa, Neevara, Raktashali, Koradoosha, Shyama, Yavagu, Aadhki, Diwaswapna, Vishamashana, Urdhvanirikshana,<sup>[32,33]</sup> Kshavthu Vegadharana,<sup>[34]</sup> Jrimbha Vegadharana,<sup>[35]</sup> and Ashru Vegadharana,<sup>[36]</sup> etc.

#### 4. Purvarupa<sup>[37]</sup>

*Purvarupa* refers to the premonitory signs of a disease, indicating its impending onset. It appears during the *Sthanasanshraya Avastha* of *Shadkriyakala*. Classical Ayurvedic texts do not offer a direct description of the *Purvarupa* of *Manyastambha*. *Acharya Charaka* states that the *Purvarupa* of *Vatavyadhi* is defined as: “*Avyaktam Lakshanam Tesham Purvarupam Iti Smritam.*”<sup>[38]</sup> Commentator *Vijayarakshita* further explains the term “*Avyakta*” as “*Na Ati Abhivyakta*,” meaning signs that are not clearly manifested.<sup>[39]</sup> Hence, mild and subtle signs that appear before the full expression of *Manyastambha* may be considered its *Purvarupa*.

#### 5. Rupa

The *Rupa* of a disease refers to the fully developed clinical features. *Rupa* appears during the *Vyakti Avastha*, the fifth phase of *Shadkriyakala*, which follows the *Sthanasamsraya Avastha*. Many clinical signs of *Vatavyadhi* are comparable to those seen in *Manyastambha*, and can be correlated with cervical spondylosis.

Prominent symptoms of *Manyastambha* are<sup>[41]</sup>

- a) मन्था च स्तंभयते (Stiffness in the neck)
- b) मन्थाशूल (Pain in the neck)
- c) अन्तरामयते ग्रीवा (Straining of the neck inward)
- d) शिरोग्रह (Headache)
- e) पृष्ठग्रह (Pain in the back)

#### 6. Samprapti

*Samprapti* describes the pathogenesis of a disorder, outlining how the *Doshas* become vitiated and the process leading to the disease’s manifestation. Understanding *Samprapti* is key for treatment, as it provides insight into the entire disease process.

Classical texts do not mention a specific *Samprapti* for *Manyastambha*, so the general *Samprapti* of *Vatavyadhi* is taken into account:

- a) *Acharya Charaka* states that the consumption of *Vata Prakopa Nidana* leads to *Vata Prakopa*, promoting vitiated *Vata* to settle in *Rikta Srotas* and develop into various *Sarvanga* and *Ekanga Vyadhi* (Ch.Chi. 28/18–19).<sup>[42]</sup>

- b) *Acharya Vagbhatta* further describes that vitiated *Vata* circulates through empty channels (*Rikta Srotas*) and fills them (AH, Ni. 15/6).<sup>[43]</sup>
- c) The vitiated *Vata* causes *Shleshaka Kapha Kshaya* due to its *Ruksha* (dry) and *Khara* (rough) qualities. These qualities oppose *Shleshaka Kapha*, ultimately depleting it. Since *Shleshaka Kapha* serves as a binding force among joints, its loss leads to *Dhatukshaya*. Consequently, the vitiated *Vata*, no longer confined to its original *Ashaya*, circulates throughout the body and settles in the *Asthi Dhātu*.
- d) When *Vyana Vayu* becomes vitiated, *Khavaigunya* occurs in *Asthi Dhātu* due to its affinity for *Asthi Dhātu*, following the *Ashraya-Ashrayee Bhava* principle. This results in *Asthivaha* and *Majjavaha Srotodushti*, which ultimately manifests as *Manyastambha*.

## 7. Upashaya

*Upashaya* refers to drugs, dietary habits, and regimens that bring relief in *Manyastambha*. These help relieve symptoms and restore balance. Examples include:

- a) *Abhyanga* (oil massage)
- b) *Swedana* (therapeutic sweating)
- c) *Ushna Ahara* (warm food)
- d) *Ushna Ritu* (warm season)
- e) Avoiding pillows

## 8. Anupashaya

*Anupashaya* includes substances and regimens that aggravate the disorder. Avoiding these can help manage *Manyastambha* effectively. Examples include:

- a) *Laghu, Ruksha, Sheeta Gunas* (light, dry, and cold qualities in food)
- b) *Anashana* (fasting)
- c) *Alpashana* (minimal food intake)
- d) *Sheeta Ritu* (cold season)
- e) Nighttime routines

## 9. Pathya–Apathya

No specific *Pathya* (wholesome practices) or *Apathya* (unwholesome practices) are explicitly mentioned for *Manyastambha* in classical texts. However, since *Manyastambha* is a *Vatavyadhi*, general principles of *Vata* management should be followed—this includes dietary, lifestyle, and therapeutic interventions suitable for pacifying *Vata Dosha*.

## 10. Chikitsa

### a) Nirukti of Chikitsa

The word *Chikitsa* originates from “*kit Rogapanayane*.” The root *kit* denotes eradication—implying the process of removing or controlling disease:

- i. *Chikitsa Ruk Pratikriya*: Treatment or removal of pain or disease is *Chikitsa*.<sup>[46]</sup>
- ii. *Chikitsa Roga Nidana Pratikare*: Avoidance of causative factors is also *Chikitsa*.<sup>[47]</sup>
- iii. *Yaa Kriya Vyadhi Harinee Sa Chikitsa Nigadhyate*: Any action that relieves or eliminates disease is *Chikitsa*.<sup>[48]</sup>

### b) Chikitsa of Manyastambha

In Ayurveda, the first line of treatment is *Nidanaparivarjana*, which means eliminating causative factors. Lifestyle adjustments, including appropriate diet, *Yoga*, and regular physical activity, are vital in managing *Manyastambha*.

*Bhava Mishra* recommends *Abhyanga* with *Taila* or *Ghrita*. *Bhavamishra* and *Yogaratanakara* also suggest *Rooksha Sweda* and *Nasya*.<sup>[49]</sup> Since this disease is categorized as *Vatavyadhi*, *Vatahara Chikitsa* is indicated.

### c) General Treatment of Vatavyadhi

Since *Manyastambha* falls under *Vatavyadhi*, its treatment follows the general principles of *Vatavyadhi Chikitsa*:

- i. *Vata Shamaka Ahara* (Vata-pacifying diet)
- ii. *Snehana* (Oleation therapy)
- iii. *Swedana* (Therapeutic sweating)
- iv. *Mridu Samshodhana* (Gentle purification)
- v. *Bahir Parimarjana* (External therapies)
- vi. *Basti Upakramas* (Medicated enemas)

### d) Therapeutic Approaches<sup>[50,51,52,53]</sup>

#### i. *Snehana*

When *Vata* aggravation occurs without *Upastambha* or *Avarana*, it should first be managed using *Sneha Dravyas* such as *Ghrita*, *Taila*, *Vasa*, and *Majja*. Subsequent therapies include *Anuvasana Basti* (medicated oil enema) with *Amla* and *Lavana Rasa*, *Sneha Nasya*, and *Brihana Ahara* (nourishing diet).



## ii. *Swedana*

Following *Abhyanga*, the patient is administered *Swedana* therapy, including:

- *Nadi Sveda* (steam therapy)
- *Sankara Sveda* (bolus fomentation)
- *Prastara Sveda* (mattress fomentation)

*Swedana* effectively reduces *Toda* (pricking pain), *Harsha* (tingling), *Ruka* (pain), *Shotha* (swelling), *Stambha* (stiffness), and *Anga Graham* (spasticity). Repeating *Snehana* and *Swedana* helps prevent *Vata* disorders from settling in the *Kostha*.

## iii. *Mridu Samshodhana (Virechana)*

If *Vata Vyadhi* does not subside after *Snehana* and *Swedana*, *Mridu Virechana* is advised.

Options include:

- Medicated *Ghrita* prepared with *Tilvaka* or *Satala*
- Oral use of *Eranda Sneha* with *Godugdha* (cow milk), facilitating *Vata Anulomana* and *Dosha* elimination

## iv. *Basti*

*Basti* is described as *Ardha Chikitsa* or even *Sampurna Chikitsa* because of its wide-reaching impact in *Vata* disorders. The type of *Basti* can be modified depending on therapeutic goals—*Lekhana*, *Brimhana*, *Grahi*, *Shodhana*, etc. *Acharya Charaka*, in context of *Asthipradoshaja Vikaras*, emphasizes *Panchakarma*, especially *Basti* using *Tikta Dravyas*, *Ksheera*, and *Sarpi*.

## v. *Nasya Karma*

*Nasya Karma*, a therapeutic method for *Urdhvajatrugata Vikaras*, involves intranasal administration of medicine. *Acharya Charaka* recommends *Nasya Karma* in all forms of *Vata Vyadhis*.

A clinical protocol to be taken as a recent approach is mentioned below

Sr. No.	Treatment	Dose	Method of Administration
1.	Yograj guggulu <sup>[54]</sup>	2 tabs (500mg)	2 tabs twice a day 30 mins after meal with lukewarm water
2.	Vatvidhvansan ras <sup>[55]</sup>	2 tabs (500mg)	
3.	Ruksha Baluka	15-20 mins	For External Swedan (fomentation)



	Swedan <sup>[56]</sup>		
4.	Mahanarayan	8 drops	For nasya (nasal instillation)
5.	tailam <sup>[57]</sup>	500 ml	For greeva pichu

## DISCUSSION

*Manyastambha*, included under *Vatavyadhi*, closely aligns with cervical spondylosis, with *Vyana Vayu* and *Shleshaka Kapha* playing key roles in its pathogenesis. The condition arises from *Vata*-aggravating causes and leads to stiffness, pain, and restricted neck mobility. Ayurvedic management focuses on:

- *Snehan Karma* to soften tissues
- *Swedan Karma* to mitigate *Kapha* and *Ama*-induced rigidity
- *Manya Basti* for pain relief
- *Nasya Karma* for stabilizing *Vata* and *Kapha* in *Urdhvajatrugata* disorders

Given the rise in cervical problems due to sedentary habits and poor posture, Ayurveda emphasizes *Nidanaparivarjana* through dietary regulation, *Yoga*, and daily physical activity. This approach combines curative measures with prevention, offering a long-term framework for cervical health.

## CONCLUSION

*Manyastambha*, one among the 80 *Naanatmaja Vata Vyadhis*, correlates well with cervical spondylosis—a degenerative cervical spine condition. It stems from *Vata*-provoking influences and results in both structural and functional cervical impairment. Ayurvedic treatment—*Snehan Karma*, *Swedan Karma*, *Manya Basti*, and *Nasya Karma*—restores mobility and reduces discomfort. With lifestyle factors contributing significantly to its growing prevalence, the Ayurvedic strategy of *Nidanaparivarjana*, incorporating diet, *Yoga*, and exercise, becomes vital for long-term disease management. By merging classical Ayurvedic insight with present-day health demands, a cohesive, sustainable, and therapeutically effective response to *Manyastambha* emerges—helping improve quality of life.

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