

**AYURVEDIC MANAGEMENT OF LUMBAR SPONDYLOSIS WITH  
SPECIAL REFERENCE TO ASTHIMAJJAGAT VATA:- A CASE  
STUDY**

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**ABSTRACT**

Lumbar Spondylosis is defined as the degenerative condition affecting the discs, vertebral bodies and associated joints of the lumbar spine. Low back pain is the most common cause of disability in those of less than 45 years age. The present study deals with a diagnosed case of lumbar spondylosis with marrow oedema. Patient arrived in OPD with complaints of painful lumbar movements, pain while walking, decreased range of movement and burning sensation in lower limb. This case can be correlated with the condition called Asthimajjagat vata in Ayurveda. The patient was admitted in IPD for about 28 days and was treated with, Dashmooladi Shodhan Basti for 8 days as a Yogabasti Kram and Panchtikta, Musta and Ashwagandha sidhha

Kshirbasti with Mahasneha given for 15 days as Bruhan Basti Kram. Patrapinda Swedan done for 15 days as a Sthanik Chikitsa, along with above procedure Shaman therapy was given. Assessment was done on the basis of Straight Leg Raising Test and symptoms of patients. Patient showed significant improvement in gait and other associated symptoms. Complete course including Shodhan Basti, Bruhan Basti and Shaman Chikitsa showed markable improvement in Asthimajjagat vata.

**KEYWORDS:** Lumbar spondylosis, Asthimajjagat vata, Straight Leg Raising Test, Gait.

## INTRODUCTION

Lumbar spondylosis is defined as a degenerative condition affecting the discs, vertebral bodies and associated joints of the lumbar spine. Low back pain is the most common cause of disability in those of less than 45 years age. 70% of persons will have back pain at some point in their lives. Inappropriate sitting posture, Jerking activities during travelling and sports trauma, heavy weight lifting are the factors which create too much pressure to the spinal cord and play important role in producing backache. It is mostly presented with following symptoms like painful lumbar movements pain while walking, burning and tingling sensation. Stiffness and numbness in lower limb. This condition can be correlated with asthimajjagata vata.

Above mentioned factors along with low nutritional value food as the junk food leads to vitiation of Vata Dosha. According to inverse relationship between Vata and Asthi Dhatu vitiation of Vata Dosha leads to Asthikshay. As Majja Dhatu is Puran Dhatu of Asthi Dhatu we should look after both the Dhatus Asthi and Majja in treating spondylosis.

## CASE REPORT

The present study deals with a diagnosed case of Lumbar spondylosis with marrow oedema.

A 48 years age male patient native from Shivadi, Mumbai was a field worker by occupation and had history of standing for long time and heavy weight lifting. Patient arrived at OPD on dated 20/12/18 with following complaints. c/o Pain at left lower limb pain in bilateral knee joint No backache Pain while walking Range of movement decreased (pain in forward bending).

Burning of left lower limb radiating along with Sciatica nerve root since 2 month Pain aggravated on working, walking, heavy weight lifting and standing for long time. Patient had no complaints of tingling sensation. Patient had history of hospitalisation for similar complaints before 15 days. Patient was non smoker, non alcoholic and had no history of allergy to any drug or food item. No past history of any medical illness found. No family history of any other illness. No history of blood transfusion and any major surgical illness. Patient didn't get relief outside and opted Ayurvedic treatment for pain relief.

**General Examination** B.P. 120/80 mmHg Pulse 74/min.

CVS S1S2 normal CNS patient conscious and oriented RS Bilateral air entry equal and clear. At the time of examination patient was restless due aggravation of pain. Local examination revealed tenderness at lumbar region and muscle spasm noted at back region. Range of movement was decreased (flexion, extension, Lateral bending, rotation of hip joint and movements of both the knee joints were affected). No tingling and numbness or weakness of muscle found in lower extremities and no bowel and bladder incontinence noted. On knee joint examination crepitation noted at both the knee joints. Forward bending was up-to mid shank (mild painful)

Straight leg raising test was performed and reading was

Right	20°	Painful
Left	20°	Painful
Both	20°	Painful

### Haematological reports were within normal limits

MRI Scan (22/11/18) Straining of lumbar and sacral spine. Mild T2 STIR hyper-intense signal seen at Antero-inferior corner of L2 and Antero-superior corner of L3 vertebral bodies. Partial disc dessicated at L5-S1 level. L4-L5 inter-vertebral disc showed mild posterior bulge.

### Diagnosis and Assesment

Lumbar spondylosis was diagnosed by the presence of pain and stiffness and restricted movements at Lumbar region.

### Treatment

Treatment was primarily conservative in nature mainly focussed on in relieving pain at lower back region and at both the knee joints.

Sarvang Snehan	Til tail		For 23 days prior to Basti instillation
Sarvang swedan	Nadi Swedan		For 23 days prior to Basti instillation
Shodhan Basti kram	Dashmool, Palash beej Guduchi, Musta and Aamlaki	Niruha and Anuvasana Basti 1:1 ratio	For 8 days
Bruhan Basti Kram	Panchtikta, Musta, Ashwagandha, Kshirabasti with Mahasneha	Kshirabasti 60 ml	For 15 days
Patrapinda Swedan			For 14 days
Shaman Chikitsa	Mahavatvidhvansa Ras		For 08 days along with shodhan basti
	Panchtikta Ghrut Guggul		For 15 days along with Bruhan Basti

**RESULT**

	20\12\18	25\12\18	29\12\18	4\1\19	8\1\19
Right	20° painful	30° painful	50° mild painful	80° mild painful	80° painless
Left	20° painful	30° painful	50° mild painful	80° mild painful	60° painless
Both	20° painful	30° painful	50° mild painful	80° mild painful	80° painless

<b>Forward bending</b>	<b>Before treatment</b>	<b>After treatment</b>
	Up to mid shank (painful)	Up to toes (mild painful)

	<b>Before treatment</b>	<b>After treatment</b>
Walking	Pain in lower limb while walking or when standing from sitting position	Decreased
Range of movement	Decreased and painful on forward bending	pain decreased
Gait	Affected	Improved

**DISCUSSION**

Sarvang snehan and Nadi swedan was done before every Bastikarma. Swedan followed by Snehan karma proves useful in relieving Vatajanya Avarodh (spasm). In conjunction with Snehana, Swedana renders liquefaction of the vitiated Dosha that is distributed in the body. Abhyanga nourishes deeper dhatus It reduced stiffness of muscles and improved mobility.

Patrapinda Swedana was done for 14 days. As the oil is applied before the Swedana procedure this belongs to category of Snigdha Sweda. It corrects the imbalance of Vata Dosha. In addition to this, the sudation procedure helps in rectifying the morbid Kapha Dosha as well. It alleviates the pain and decreased stiffness, as the leaves used in Patrapinda procedure were analgesic and anti inflammatory in nature. It relieved muscle sprain and spasm. It also proved useful in peripheral neuritis. Patrapinda swedana karma acted as local measure in relieving pain.

Dashmooladi Niruha Basti was given for 8 days along with Sarvang Snehan and Nadiswedan. As vitiation of Vata dosha in the major pathology here Basti karma proved useful in treating vata dosha. Niruha basti act as an anti-inflammatory and detoxifying measure here. With Niruha basti vata dosha regulated. Dashmool decoction is a good analgesic and anti-inflammatory and a natural detoxifier. Shodhan Basti proved useful in treating Aamavastha of the disease.

Panchtikta Ghrit kshir basti is explained in treatment of Asthi majjagat vyadhis. Here instead of Ghrit Mahasneha has been used. Mahasneha is the combination of Ghrit, Tail (oil), Vasa (animal fats) and Majja(bone marrow fats). Tikta Ras sidhha basti along with Mahasneha act

as a Bruhan Basti. Here Bruhan means nothing but the nourishment of body. Mahasneha is act as good nourishing factor of Asthigata vata according to Samanya Visheshha Sidhhanta. Mahasneha is good in Vata shaman and Asthi Poshan. This basti rejuvenate the Asthi and Majja Dhatu, repair it and gives strength. According to Commentator Arundatta the substance that produces Kharatwa (roughness) due to Snigdha and Shoshan properties increases Asthi (Asthivardhanam). In process of Dhatu Utpatii, Meda Dhatu is converted in Asthi Dhatu by property of Lekhan karma of Tikta rasa. Tikta Kshir Basti has ability to reach to Asthi Dhatu and deal with Vata Dosha. So from above consideration Bruhan basti has ability to arrest progression of disease and repair degenerative changes of Asthi Dhatu.

### CONCLUSION

From the above case study, it can be concluded that Lumbar Spondylosis can be correlated with Asthimajjagata vata. Shodhan and Bruhan Basti along with Patrapinda Swedana and Shaman Chikitsa showed remarkable improvement in signs and symptoms of patient.

### REFERENCES

1. Charaka Samhita by Aacharya Vidyadhar Shukla and Prof. Ravi Dutt Tripathi, Chaukhamba Sanskrit Pratikthan, Delhi, 2012.
2. Astangahrdaya with commentaries, Sarvangsundara of Arundutta.
3. Harrison's Principles of internal Medicine by kasper fauci Hauser Longo Jameson Loscalzo, Mc graw Hill Education, 19<sup>th</sup> Edition.
4. International ayurvedic Medical Journal ISSN: 2320 5091, Role of Tikta Ksheer Basti in The Management of Asthimajjagat Vata With Special Reference To Spondylosis.