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**A SINGLE CASE STUDY OF CERVICAL SPONDYLOSIS & LUMBER
SPONDYLOSIS WITH INTERVERTEBRAL-DISC LESION
MANAGEMENT BY AYURVED WITH LIFESTYLE IMPROVEMENT**

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ABSTRACT

Lifestyle improvement with certain medication is a need of study in different ages of different hormonal changes. To understand the results, there is need of long-term study or cohort's study in relation with time. Even some medication in Ayurved used for other purposes can be used smartly in other certain conditions for the improvements. Spondylosis is an arthritic change due to senile diseases, hormonal changes, lack of nutrients and many more conditions like obesity with no exercise. Even it triggers vertigo, hypertension to more restricted movements and ultimately to gain the weight. Certain Ayurved drugs which are used for hemorrhoids and varicose veins are good one with Proanthocyanidin with highly specialized group of bioflavonoid which repairs vessels wall as well as promotes microcirculation of blood can be an ultimatum in disc lesion repairment with lowering degenerative changes in vertebrates too.

After medicated oil massage over neck and lower back with medicated steaming can be stretch in better way to lower the disc compression by using traction. It will be well most tolerable and most effective in compare with no application of medicated oil and medicated steaming i.e., Abhyanga

and Nadi swedana. This protocol will trigger up healing process of spondylosis with organic calcium supplementary and other Rasaushadhi to lower vata (Ashraya-ashrayi bhava) in Ayurvediya views with lowering compression of intervertebral disc techniques.

Keywords: - Cervical spondylosis, Lumber spondylosis, Intervertebral-disc lesions, Early change in pathology, lifestyle changes, Ayurved medicines for microcirculation, Snehana & Swedana with Cervical & Lumber traction to release compression, Acceleration of healing process

INTRODUCTION

This is a case of lifestyle induced diseases which prognosis gone a bad in repeated pathophysiology circle. Sedentary life, no body movements with menopause turns to the gaining of the weight with poor bone health too. Ultimately turns towards cervical and lumber spondylosis with aging. Due to spondylosis changes, vertigo was there with restricted movements and weight gain with no movements turns to more and more worsening of spondylitis effect with disc lesion and progressive spondylosis changes with time. We need to break through worsening pathophysiological circle of spondylosis as an early prevention (Nidanparivarjana as Chikitsa) treatment protocol.

Cervical spondylosis or osteoarthritis of the cervical spine produces neckache radiates towards shoulders or arms even forearm upto fingers with tingling and numbness with headache over the nape of the neck. Recent data shows that Cervical spondylosis increases with aging before age 50 years and

decreases with aging after age 50 years,⁷ 70% of women and 85% of men show consistent Cervical spondylosis changes on X-ray in the age of 60 years.⁸

Greeva-stambh (as stiffness in neck) is considered as Ayurvedic diagnosis for the cases of Cervical spondylosis especially Vata-Nanatmaja Vyadhi chapter due vitiation of Vata dosha.⁹

The same things happened in this case of Manyagata vata in “Vyadhi Sankara” with Katigata vata which is explained earlier as same part of 80 types of “Vata Nanatmaja” vikara explained in Charak Samhita. In Lumbar spondylosis symptoms stiffness & pain in the low back, thighs or legs, muscle spasms. It is associated with legache, irregular gait, legs weakness can be seen. This condition can be correlated with Katigata vata, Kati graha, Trika graha, Prushta graha, Grudrasi Vata. etc.^{10, 11, 12.}

Post menopause with lower estrogen level may affect bones health as well as sedentary lifestyle with time may associated with

lifestyle induced diseases too. E.g., Diabetes mellitus, hypothyroidism, hypertension, Low bone mineral density, weight gain etc. Here, we have to put some protocols for those who needed hormonal replacement therapy, early senile changes, hormonal diseases, hypertension and even arthritic problems with low bone mineral density. Just applying for pain killers, Calcium and vitamins supplementary with even ayurved medicine & panchakarma is not a final treatment call. It needs furthermore to stop this pathophysiology cycle. We have to understand patient's routine lifestyle, diet and daily movements calibration and its correction too. Even with the time, there is need of good bond between patients and doctor to understand long term treatment applied changes in study. Here, we try this a long-term study with unbiased results from modern techniques and investigations with lifestyle correction with Ayurved medication.

Case presentation: –

1. A 47 yrs. Old lady with complaint of 1. Low back pain,
2. Tingling and numbness to right hand fingers especially little finger, ring finger and partial to middle finger involvement.
3. Intermediate vertigo when patient had abrupt change in posture (? Orthostatic /

Due to spondylosis changes).

4. With mild obese and puffiness of the face – **Since from last 3 months.**

O/E – Patient having normal pulse rate (68–72/min), S1 And S2 node was heard with no sign of murmur. Borderline hypertension with No ‘Target organs’ damages i.e., B.P. was 148/90 mm. of Hg. with 64 kg body weight. (Mild obese). With height 5’ feet only. Respiration rate was 16/min, with no added sounds with AEBE. Afebrile Pulse with no temperature. Locomotory system for ‘Strength test’ was normal at 5 grades, and reflexes were normal regarding superficial & deep reflexes. Per abdominal was soft with normal bowel habit, No H/o constipation and normal urination. Occasional urination at night.

Patient weight was not so much to be called her as obese but it was her weight gain due to restricted spinal movement i.e., a lady with overweight as per her BMI.

Patient history – Patient was having above said symptoms since from 28th February of 2015 in prodromal features. She had decided herself to go for local available free Ayurved consultancy with prescription & self-dispensary clinic of well-known Ayurved company. They treated her for the diagnosis of “Katigata vata with Manyagata vata” with generalised giddiness. Her

treatment was included with 'Rasaushadhi' & 'Herbal remedies' and 'Guggulu vati' for aggravated vata pathophysiology & for her aggressive pains. She continued the treatment from the same free consultation & dispensing Ayurved company upto 28th of July 2015.

Total 5 months of continued treatment span

Sr. No.	Tests.	Results.	Unit.	Reference Range.
1.	Hb%	11.5	gm/dl.	11.0 – 15.0
2.	Bsl. F	78	mg/dl.	60 – 110.
3.	Bsl. PP	131	mg/dl.	70 - 140

Still, her symptoms were not relieved. Hence, at the same Chikitsalaya Centre, she was advised for Panchakarma, especially body massage (Abhyanga) with herbal medicated oil, herbal medicated steam (Nadi swedana/Sarvangaswedana) & cervical-lumbar traction alternately.

So, patient was arrived to Ayurved medical institute related hospital in 7th of Sept. 2015

Sr. No.	Tests.	Results. Investigations.	Dated.
1.	X-ray L.S. spine AP/Lateral view,	Changes of "Lumber Spondylosis"	07.09.2015
2.	X-ray C.S. spine AP/Lateral view,	changes of "Cervical spondylosis & Disc lesion at C5-C6"	07.09.2015.

1. X-ray L.S. spine AP/Lateral view showed changes of "Lumber Spondylosis" &
2. X-ray C.S. spine AP/Lateral view showed changes of "Cervical spondylosis & Disc lesion at C5-C6" as an impression note by consulting radiologist.

Her panchakarma and Cervical & Lumber

taken by the patient.

Meanwhile, advice for her laboratories reports for haemoglobin percentage & current fasting and post prandial blood sugar level. Before her last visit to concern Chikitsalaya, patient self willingly done her investigation on **dated 12.07.2015** to local laboratory.

in Kayachikitsa department for her panchakarma therapy. The physician in Ayurved medicine department (Kayachikitsa Vibhaga) had decided for current scenario for her cervical as well as lumbo-sacral X-ray after 5 months long treatment from the referring so called Chikitsalaya. Her X-ray on the same day showed. **On dated 07/09/2015.**

traction was prescribed there with furthermore herbal medication at Ayurved hospital of medical college upto 10 days. Patient feel discomfort for her Abhyanga (Oil massage and steam therapy) followed by traction of lumber & then traction of cervical. So, herself decided to discontinuation of the

all treatment.

After a month of quitting of all medication and therapy, patient feel vertigo, giddiness with generalised weakness and neckache. For that purpose, she decided to consult an orthopedic for her routine checkup on **dated 17/10/2015**. There, her B.P. was found high up to borderline of hypertension. Hence, her orthopedic prescribed her antihypertensive medicine, anti-emetic tablet, anti-vertigo(sos.), as well as vit D3 sachet weekly once with 'Inj. Vitcofol C' weekly once deep intramuscular & Soft gel capsule of calcitrol 0.25 mcg, omega3 fatty acid (Docosahexaenoic Acid 120 mg & Eicosapentaenoic Acid 180 mg) with combination of Methyl cobalamin 1500mcg, Folic acid 400 mcg, Boron 1.5 mg & calcium carbonate 500 mg.

Patient continued the medicine for 15 days. Still, no relief was there. Hence, once again patient had quitted all medicines and stayed as it is. Whenever her pain rises and her discomfort in back & neck, she used to have a single tablet of painkiller intermittently with combination of Paracetamol 500 mg+ Diclofenac 50mg + Serratiopeptidase combination.

In **24/03/2016**, patient had approached in my clinic regarding above said complaints of Lumber spondylosis & Cervical spondylosis

with hypertension and intermittent vertigo & giddiness. Where the patient's O/e are 62.4 Kg weight, 84/min pulse rate, 150/82 mm of Hg blood pressure with menopause and running age was 50 yrs. When we took a thorough history with present complaints, it was found that patient don't have a proper sleep pattern. Due to dizziness and vertigo, patient used to have supine posture in most of the time in day. Supine posture for Patient's routine work become impossible for her short family too. She never walks, exercise in fear of fall. These lifestyle changes due to spondylosis made a bad cycle of Swelling, puffiness, mild obese, hypertensive and even spine stiffness from neck to lower back.

We decided to have change in her lifestyle, some improvement and some healthy dietary habit with branded Ayurved medicine with GMP certified for her spondylosis changes as well as her Secondary hypertension management through it.

She was advised to wake up early in the morning. Start her day with Glass of Luke warm water + 2 tsp. Lemon juice + 1 tsp. honey to cleanses her body for the waste followed by again 1 glass of plain luke warm water. After morning motion and urination, she was advised to take one more glass of luke warm water with 7/8 overnight soaked almonds seeds. Finely chewed it followed by

lukewarm water. Then start up her morning walk as per her convenience till next follow up. Probably, she was advised for 40 minutes walking without no bar for distance coverage with the help of her husband. Morning breakfast with one seasonal fruit and one bowl of Sprouts stir fry over pan with little spices and very little salt but no oil. Then, She was advised to Ayurved Institute's Hospital for her Panchakarma related therapy with her full body massage with medicated 'Dash Moola oil' for 40 minutes. Then seated in steam box (Swedana Peti) for 10 minutes and then advised her for cervical traction with 4 kgs. weight for 20 minutes followed by lumbar traction with 8 kgs weight for next 20 minutes. After reached at home, she used to bath with again bearable hot water. Actually, all these process removes her muscles stiffness with good bearable for Lumbar & cervical traction to regain strength back to normal.

She was advised to have her lunch with 2 fulka chapati, one full bowl of boil thick pulses & one full bowl of green vegetable or sprouted gravy sabji alternatively with minimal oil and salt, mix veg. salad (Whatever seasonal & available in market), 1 glass of fresh butter milk in the noon only. Slow eating and finely chewing to finish her meal with maximum 50 minutes. Water was

strictly prohibited just after the meal to avoid her hyperacidity complaint as well as Aam productive pathy (Srotorodh) which may obstruct the path of Vata dosha to make it vitiated in Sandhigata vata (Upa- stambhita Vata samprapti). After her food consumption, She was advised to walk slowly for 10 minutes (Shatpawali). Then have 30 minutes on left lateral side (Vamkukshi) for better secretion of Gastric & bile juices and digestion. Strictly no sleep-in day time. Still, she can use easy chair to rest. Actually, afternoon Nap was planned for her to repair her posture and to relieve muscles strains too. Eating ('Annam kalam na hapayet I') and exercising time should not be hampered. We restricted her from curd, sweets, free sugar, tea, coffee, potato, fried and raw oil, salty snacks etc.

In the evening, with empty stomach (probably after 4 hrs. of her lunch), Interval in-between 4 to 6 o'clock. She was again advised to have her evening walk compulsory for 40 minutes again followed by 20 minutes Pranayama session in the evening. Especially with Dirgha-shwasan, Anulom-vilom, kapal-bhati and Shavasana only. With half hour break after pranayama, she was advised to have one seasonal fruit in the evening. If it is medium sized then have two (like kiwi, chikoo etc.), if it is big sized

then have one only. (like apple, pomegranate, orange, mango etc.). Again, in dinner at early night with same pattern of noon session but buttermilk was the exception. No Curd (Dadhi) or its byproduct in the evening. As per references from Ayurved that evening Curd or its other format is a causative for obesity. Slow walk for 10 minutes, left lateral for 30 minutes were the same protocol to be followed as in the noon. Then have a water for drink as per her need.

Water was strictly prohibited just after the meal to avoid hyperacidity as well as 'Aam' productive pathy. It was strictly again, no

drink and eat 1 hr. before going to bed. And overnight no water consumption. Here, we try to accelerate her basic metabolic rate, overcome from puffiness and swelling to avoid secondary symptoms like hypertension, hyperacidity, irregular bowel habits and for regaining the muscle tone. Still, any dryness in the mouth at night was advised for little sips of water to rinse the mouth only. But no full stomached water in the night sleep session.

On 24/03/2016, she was prescribed for.

Sr. No.	Medicine.	Timing.	Duration.
1.	Cap. Dazzle (Vasu pharma)	1 cap. bid	10 days.
2.	Cap. Bonton (Vasu pharma)	1 cap. bid	10 days.
3.	Cap. Cervispon (MMS pharma)	1 cap. bid	10 days.
4.	Tab. Pileum (MMS pharma)	1 tab. tds.	10 days.
5.	D-rise sachet (Sun pharma)	Once in 15 days	2 months.
6.	Dazzle ointment. (Vasu pharma)	Local application (sos)	Once /twice in a day.
7.	Cervical Splint	Day working time, At the time of walk.	30 days.

Patient came for next follow up with these medications only. But these efforts of overcome showed Pulse 72/minutes, B.P at 152/84 mm of Hg with mild vertigo. Hence, she was prescribed for continuation of above said medicine with half tablet Amlodep AT – in morning after breakfast and tablet Ecosprin 75 mg after lunch. Patient had improvement with walking ability. She liked all lifestyle improvements and we decided to distance wise brisk walking. Week wise increasing timing and distances. Her weight was 63.2

kgs on the same examination day. Approx. 0.8 kg gain than 10 days before. But her energy level was good.

Just after **3 days**, we try to follow up for minimal dose of anti-hypertensive medicine. There she came back **on 05/04/2016**. Her pulse 68/min with B.P. 126/72 mm of Hg was quite good with reduced in vertigo too. She complaint for tingling and numbness to her right-hand finger hence we decided to give her Inj. Nervijen. (5 ampules) 1 day alter deep I/M.

On dated 12/04/2016, Patient reduces her weight upto 62 kgs. Her pulse was 62/min and B.P was 134/76 mm of Hg with no fresh complaints. Her massage, steaming, cervical

and then lumber traction was continued. Her tingling and numbness gone. Hence, we continued with full fledged Ayurved treatment.

Sr. No.	Medicine.	Timing.	Duration.
1.	Cap. Dazzle (Vasu pharma)	1 cap. bid	10 days.
2.	Cap. Bonton (Vasu pharma)	1 cap. bid	10 days.
3.	Cap. Cervispon (MMS pharma)	1 cap. bid	10 days.
4.	Tab. Pileum (MMS pharma)	1 bid. tds.	10 days.
5.	D-rise sachet (Sun pharma)	Once in 15 days	2 months.
6.	Dazzle oil.	Daily massage	Once in a day.
7.	Cervical Splint	Day working time, At the time of walk.	Further 30 days.

After continuation of 2 months treatment course, patient came for next follow up on dated 20/06/2016. She was good with no fresh complaint. She walks daily with 5 kms in morning as well as in the evening. We decided to discontinued her neck splint.

Discontinued with cervical as well as Lumber and Cervical traction too. Still continued with self-application of Ayurved contents oils half hour before bathing. Slight changes made here with the treatment as dated 20/06/2016.

Sr. No.	Medicine.	Timing.	Duration.
1.	Panchendriya Vardhana Taila for Nasya.	After face massage - 5-5 drops on each nostril at bed time & rest for 10 minutes.	30 days.
2.	Tab Arrow (Vasu pharma)	1 tab. bid.	30 days.
3.	Arrow oil.	Daily massage	Once in a day.
4.	Tab. Pileum (MMS pharma)	1 bid. tds.	30 days.

Intermittent changes of above two prescriptions were done with patient's convenience. Continuation of lifestyle changes with healthy eating habits. Brisk walks in the

morning and in the evening were continued. And we decided to check the final improvement with help of X-ray on dated 02/04/2017.

Sr. No.	Tests.	Results. Investigations.	Dated.
1.	X-ray: - L.S. spine AP/Lateral view,	Spine shows normal curvature. Vertebral body shows early degenerative changes. Disc space are normal. No lytic or sclerotic lesion is seen. No spondylolysis or spondylolisthesis is seen. Prevertebral soft tissues appear normal. Impression: - Early changes of Lumber spondylosis.	02/04/2017.

2.	X-ray: - C.S. spine AP/Lateral view,	E/o loss of normal cervical lordosis. E/o early degenerative changes at C5-C6. Disc space is mildly reduced at C5-C6. No E/o cervical rib. No lytic or sclerotic lesion is seen. No E/o spondylosis / spondylolisthesis. Prevertebral soft tissue shadow is normal. Impression: - Very early changes of "Cervical spondylosis & Disc lesion at C5-C6"	02/04/2017.
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It was the biggest joyful moment for the patient when she started her Ayurved medicine in some specified Centre then towards some orthopedic consultant. She started her treatment on **28/02/2015** with couple of months with bad prognosis and no relief. Even she lands in secondary hypertension due to cervical spondylitis changes. Need to manage her hypertension and postural vertigo too. But approaches to us with proper medication and improvements in lifestyle at the **end of 02/04/2017**. After 2yrs & 2months gap with total menopausal overcome with no further bad prognosis. Though it doesn't end up with total eradication of spondylosis changes but improvement in 'very early changes of Cervical as well as Lumber spondylosis' is very pleasant picture for us. It was a personal discussion with modern

stream "Radiologists" who was also surprised with compared such a huge gaped reporting. (approx. 2yrs. gap) X-rays after treatment reporting. Lady patient was still continued with us. She had minimal tablet of Antihypertensive medicine with no need of Antivertigo treatment. We had seen her raised Hb% as well weight loss upto 60 kgs. She walks very nicely to cover the distance of 1km. in 10 minutes.

On dated 25/05/2018, we decided for her Thyroid function test. Where she required her bone mineral density (BMD) treatment for further degenerative changes if any. But her Free T3, Free T4 & TSH from Metropolis, Mumbai had very normal reporting.

(Reported on dated 26/05/2018.)

Sr. No.	Investigation.	Observed Value.	Units.	Biological Reference Interval.
1.	Free T3.	2.55	Pg/ml.	1.4 – 4.4 Pregnancy: 2 – 3.8.
2.	Free T4.	1.19	Ng/dl.	0.8 – 1.8. First Trimester: 0.7 -2.0. Second trimester: 0.5 – 1.6. Third Trimester: 0.5 -1.6.
3.	TSH (Ultrasensitive)	1.317	uIU/mL.	0.45 – 4.5. First Trimester: 0.1 – 2.5. Second trimester: 0.2 – 3.0. Third Trimester: 0.3 – 3.0

Hemogram: - 25/05/2018.

Sr. No.	CBC	Results	Reference Range / Unit.
1	Hb	10.8	11 – 16 gm/dl.
2	Rbcs	2.82	4.0 – 6.0 mil./cu.mm.
3	Wbcs	5000	4000 – 10000 /cu.mm.
4	Platelets	168000	1.50 – 4.50 lakhs / cu.mm.
5	HCT	35.9	35 -60 %
6	MCV	83.1	82 – 95 fL.
7	Mch	25.0	27 -31 pg.
8	MCHC	30.1	32 -36 gm/dl.
9	RWD	13.6	11.5 – 14.5 %
11	MPV	7.5	7 – 11 fL.
13	Neutrophils	60	45 – 75 %
14	Lymphocytes	37	20 – 50 %
15	Monocytes	01	2 – 6 %
16	Eosinophils	02	1 – 6 %
17	Basophils	00	0 -1 %
18	ESR	30	mm/hr.

Biochemistry – 25/05/2018.

Sr. No	Lab Test.	Results.	Reference Range / Unit.
1.	Sr. Creatinine	1.10	0.5 – 1.5 mg/dl.
2.	Blood Urea Level	25.0	15 -50 mg/dl.
3.	Bsl Fasting	106.0	60 – 110 mg/dl.
4.	Bsl PP.	145.0	70 – 140 mg/dl.
5.	Urine parallel Fasting.	Nil.	Nil.
6.	Urine parallel PP.	Nil.	Nil.

LFT- 25/05/2018.

Sr. No.	Lab Test.	Results.	Reference Range / Unit.
1.	Sr. Bilirubin – Total.	0.84	0 – 1.2 mg/dl.
2.	Bilirubin – Direct	0.20	0 – 0.3 mg/dl.
3.	Bilirubin – Indirect.	0.64	0 – 0.7 mg/dl.
4.	SGPT.	18.0	0 – 40 IU/L.
5.	SGOT.	23.0	0 – 40 IU/L.
6.	Alkaline Phosphatase.	75.0	25 – 147 IU/L.
7.	Total Protein	6.4	6.4 -7.8 gm/dl.
8.	Albumin.	4.8	3.5 – 5.2 gm/dl.
9.	Globulin.	1.6	2 – 3.5 gm/dl.

Urine R – 25/05/2018. (WNL.).

Now patient is goes towards good prognosis, in hopes from early spondylosis changes towards normal reporting in coming future days.

Management and Outcome: –

DISCUSSION: – 1. Cap. Dazzle (Vasu

pharma) – Dazzle capsule is a polyherbal formulation for rheumatoid arthritis. Osteoarthritis, spondylosis, joint stiffness and inflammation. It is in action with analgesic and anti-inflammatory properties. Shallaki and Guggulu in Dazzle capsule

have been documented for anti-inflammatory and anti-arthritic effects. Nirgundi has analgesic properties, while Ashwagandha prevents free radical induced degenerative changes. Dazzle also stimulates uric acid excretion, an essential factor for long term management of arthritis. Regular use of Dazzle capsule provides relief in pain and inflammatory and fracture healing. Kukkutandatvak bhasma – 30 mg a natural calcium source, Mukthashukthi bhasma – 25 mg – Mukta Sukti Bhasma is an Ayurvedic medicine prepared from Pearl Oyster. It is used in Ayurvedic treatment of abdominal colic, gastritis, anorexia, etc. So, all these synergies work together in osteoblast activity, enhances osteogenesis and calcification. It restores strength of bones, arrests osteoporotic degeneration, reduces pain and inflammation. It is also hastening fracture healing, facilitates reunion of slow healing and multiple fractures. Improves bone mineral density by 5.61% & improves tensile strength of bones.²

3. Cap. Cervilon (Arya Vaidya Nilayam pharma) / Cervispon (MMC pharma)
Alternatively used:

– The Cervilon Soft Gel Capsules are considered the first choice in cervical spinal problems. Composition of – Sesame oil -

conditions of arthritis and skeletomuscular disorders.¹

2. Cap. Bonton (Vasu pharma) – Asthi-shrinkhala (Cissus quadrangularis)- 2400 mg, Arjuna (Terminalia arjuna) – 200 mg, Medasaka (Litsea chinensis)- 50 mg, Abha guggulu – 125 mg, Laxadi guggulu – 125 mg – widely used in the Ayurvedic treatment for of bone related diseases

Tila tailam, Medicated with the Aqueous extract of The ten roots – Dasmoolam, Sida retusa – Bala, Hordeum vulgare – Yava, Zizyphus jujube – Kola, Dolichos biflorus – Kulattha, Milk – Ksheera, Paste of group of sweet drugs - Madhura gana, Rock salt – Saindhava, Yellow resin – Sarjarasam, Vateria indica – Hima, Pinus longifolia – Sarala, Cedrus deodara – Devadaru, Rubia cordifolia – Manjistha, Ellettaria cardamomum – Ela, Trigonella foenumgraceum – Methika, Parmelia kantschadalis – Saileya, Cinnamomum iners – Patra, Cassia tora – Tagara, Acorus calamus – Vacha, Peucedanum graveolens – Satahwa, Boerhaavia diffusa – Punarnava, Asparagus racemosus – Shatavari. **Mode Of Action** – Cervilon corrects the dehydration of the intervertebral discs. Cervilon thus arrests the degenerative changes of the cervical spine. Cervilon helps to strengthen the para-vertebral muscles of the neck.

Cervilon helps to relieve myo-fascial spasm & Cervilon also provides mild anti-inflammatory action. Indications: -Cervical spondylosis with or without Radiculopathy, Myelopathy, Fibro-myalgia of the neck, Osteoarthritis of the facet joints. Dosage: - In Acute conditions: 2-3 capsules thrice as a Preventive: 2 capsules twice daily.³

4. Tab. Pileum (MMC pharma) – It is used in the following medical conditions like chronic venous insufficiency, blood capillary fragility, retinopathy, sunburn, hypertension, pancreatic insufficiency. Pileum Tablet is a combination to provide comfort from discomfort of hemorrhoids and varicose veins. Key Ingredients are Proanthocyanidin & Vitamin C. Proanthocyanidin is highly specialized group of bioflavonoid which has powerful vascular wall strengthening properties. Vitamin C is a natural anti-oxidant that can remove harmful substances from your body that can cause cellular damage. Important key ingredient action is Proanthocyanidins. It contains catechin monomer, dimer, and trimer, all of which are water-soluble molecules that contain a number of phenolic hydroxyls (Bagchi et al., 2002). Mostly derived from Grapes seeds which accelerate microcirculation and healing process.⁴

5. Dazzle oil (Vasu pharma) – Ingredients

are gandhpuro oil, til oil, erand oil, narayan oil, nilgiri oil, vishgarbha oil, jyotishmati oil, nirgundi oil, devdaru, mahamash oil, shigru, Kapoor, mirch, and sarshap oil. It is used for the relief of pain, in the treatment of joint inflammation, rheumatoid arthritis, and various other muscle-skeletal pain as shoulder and neck stiffness and backache too. Dazzle Oil is a non-steroidal anti-inflammatory drug that is a safe alternative therapy and very effective in relieving symptoms like pain and swelling.⁵

6. Cervical Splint and traction with Lumber splint and traction – The role of splint and traction is to relieve compression pressure partially and bear the body weight as supportive padding. The traction releases pressure in between the vertebral disc and allow to blood circulation in microlevel to heal up disc lesion and further spondylosis and degenerative changes. Short term traction and splint treatment is more beneficial to heal up disc lesion. Long term use may lose the lordosis of spine.

Nerve compression – Cervical collars are occasionally used to reduce pressure on the nerves in the neck. **Cervical spondylosis** – A cervical collar may cause temporary relief from pain caused by cervical spondylosis — an age-related condition that's caused by wear and tear of cartilage

and bones in the neck. In General neck pain or stiffness — A cervical collar may help to take some strain off your neck muscles.⁶

Acknowledgments: – This long-term study for observing wonderful effects of newly invented Ayurved drugs and even its utility in **Yuktivyapashraya Chikitsa** apart from its use in different way from routine. Even there is need of long term good faithful healthy relation between physicians and patients for the accuracy in medication as well as to observe pros and cons of long terms results of certain lifestyle changes and correction. Modern system related investigation experts will play an unbiased justification in a right way for the treatment. Where it is laboratories investigation, hormonal assay or imagining techniques will have a crucial role in the line of treatment. We are very much thankful to my patient who believe in me with understanding of less medication in relation to correction of lifestyle. Patient tried from no walk to fast walk, from one time walk to two times walk in a day. We are grateful to my radiologist who timely concern with me and encourage me for the betterment changes too. We are very much thankful to well-equipped modern laboratory pathologist who confirmed our institute's reports time to time. Not but not list, We are very much

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