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**A SINGLE CASE STUDY TO EVALUATE THE EFFECT OF  
VATAVYADHICHIKITSA IN THE MANAGEMENT OF CERVICAL  
SPONDYLOSIS (W.S.R TO GREEVA STHAMBHA)**

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**ABSTRACT**

Greeva sthambha is one among the 80 vataja nanatmaja vyadhis which includes symptoms of neck pain and neck stiffness. Hence, we may include this condition in cervical spondylosis according to the modern aspects. It is a natural age-related disease (presents in the majority of people after the fifth decade of life) process that is associated with degenerative changes within the intervertebral disc. Here for the study, we have included the patient with axial neck pain radiating to bilateral hands associated with dizziness and headache. For which we adopted *samana vata vyadhi chikitsa* including *Snehana* and *vataghna basti* with *Dasamoola Taila*. The treatments were served for a period of 15 days and later on after *vishrama kala* of *basti* patient reported for follow up after 15 days and got relief from all her major symptoms. This single case study shows that the cases of cervical spondylosis may be successfully managed with Ayurvedic treatment.

**Keywords:** *Greeva sthambha*, Cervical spondylosis, *Basti*, Degenerative diseases, *samana vata vyadhi chikitsa*, *Dasamoola taila yoga basti*

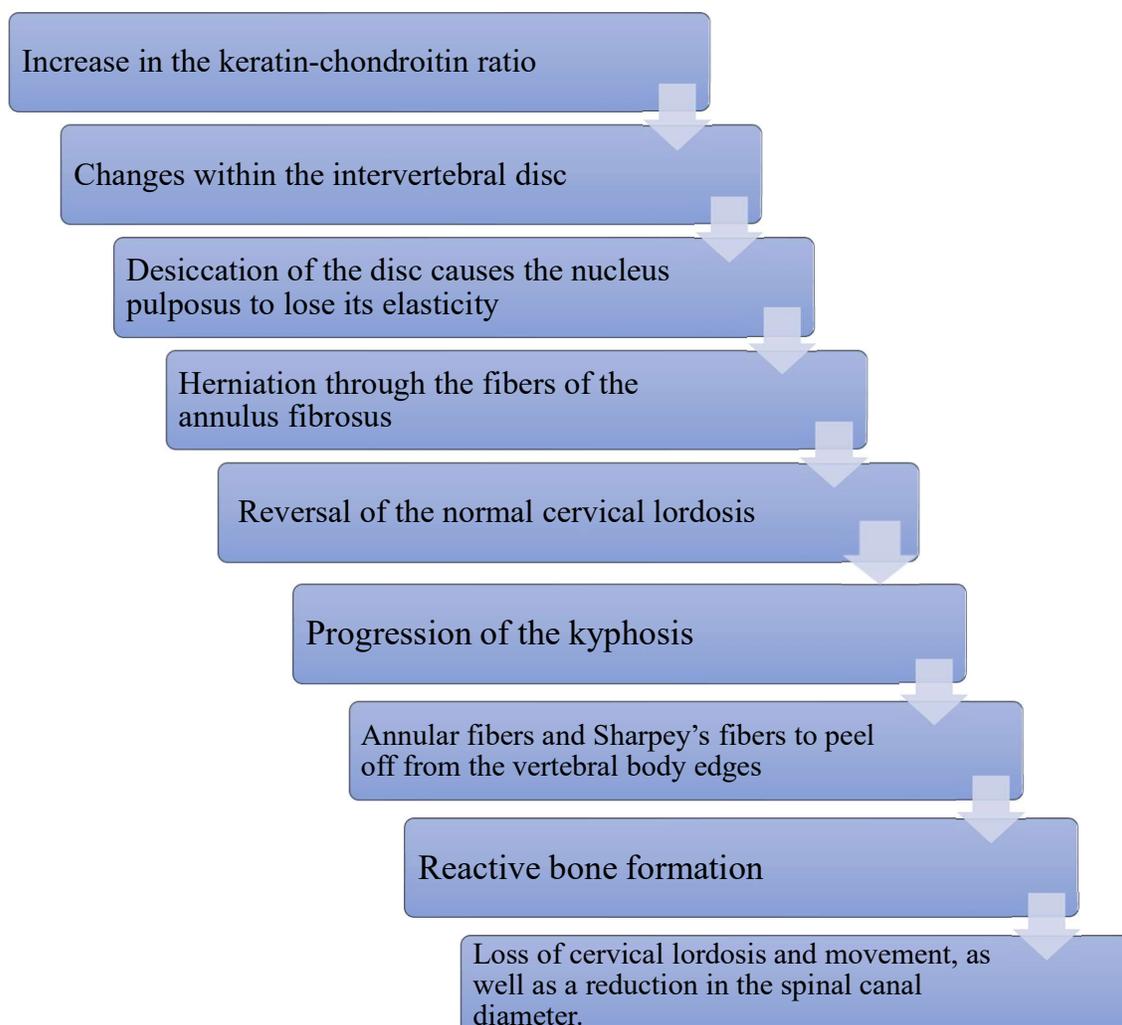
**INTRODUCTION**

According to the Global Burden of Disease 2015, low back and neck pain remain the leading cause of years lived with disability (YLD) and the fourth leading cause of disability-adjusted life years (DALYs)

Cervical spondylosis is osteoarthritis of the cervical spine causing stenosis of the canal and sometimes cervical myelopathy due to encroachment of bony osteoarthritic growths (osteophytes) on the lower cervical

spinal cord, sometimes with involvement of lower cervical nerve roots (radiculomyelopathy) [1].

### Pathophysiology:



**N.B:** These bone spurs or osteophytes can form along the ventral or dorsal margins of the cervical spine, which can then project into the spinal canal and intervertebral foramina [2].

### Predisposing factors:

1. Age: after the fifth decade of life.
2. Trauma: Repetitive, subclinical trauma probably influences the onset and progress.
3. Family History & Genetics: H/O back pain or degenerative disc disease
4. Work activity: carrying heavy loads on their heads and in office workers involving long sitting hours.
5. Smoking: Smoking contributes to degenerative disk disease

According to Ayurveda, *Greeva Stambha* with cardinal feature of stiffening of the

neck is described by *Acharya Charaka* as one among the eighty types of *Vataja*

*Nanatamaja Vikara* which may be correlated to Cervical spondylosis.

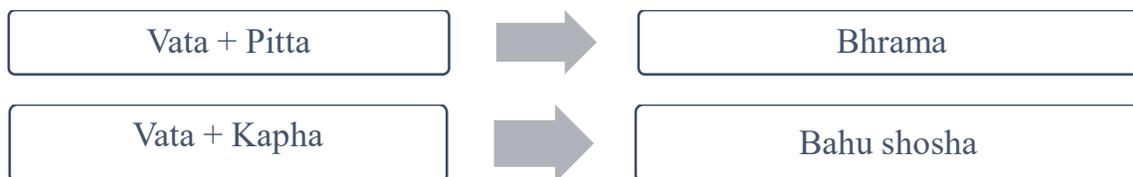
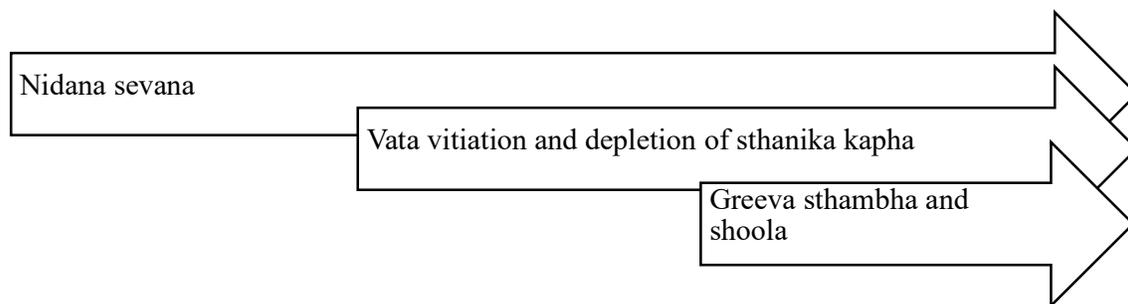
**Nidana:**



**Poorvaroopa:** *Avyakta poorvaroopa.*

**Lakshana:** *Greevashool and Greevastambh*

**Samprapti:**



**AIM:**

To evaluate the effectiveness of *vatavyadhi chikitsa* in cervical spondylosis.

**MATERIALS AND METHODS:**

A 67-year-old female came to our OPD with chief complaints of pain and stiffness of

neck since 15 days. She is negative for other chronic health conditions. She claims of an alleged history of continuous heavy weight lifting on her head during a natural calamity before 20 years following which she developed anxiety disorder. She was

apparently normal before 6 years and started to develop frequent episodes of cervical vertigo and insomnia gradually for which she sought medical treatment which gave her some relief; Later on, she started to develop pain and stiffness of neck especially in the early morning. Pain radiates to B/L upper limbs till fingers associated with numbness and tingling sensation. Pain exacerbates on cold temperature and with excessive movements and slightly relieves on rest. She also gave history of occasional vertigo and head ache in the evening hours for 6 months. During this 6-year time period she went through multiple hospital visits but productive comfort was very slim. And now she came here for betterment.

### Examination:

Relevant clinical examinations were performed in the patient such as:

- On inspection: Scoliosis detected and shoulder tilting towards left side.
- Spurling test for cervical radiculopathy- positive
- Lhermitte's sign and Hoffman's sign- negative
- Deep tendon reflexes- normal
- Gait-Ataxic
- Toe-to-heel walk test- Patient is unable to walk on a straight line
- Romberg's test-Positive
- Grip and release test— Positive test (9 times per minute)
- ROM- reduced due to pain

### Assessment:

1. Neck Pain [4]
2. Neck stiffness [4]
3. Neck rotation [4]
4. Headache [4]
5. Rombergs test [9]

### 1. Neck Pain

Grade	Observation
0	No Pain
1	Mild and Intermittent Pain
2	Moderate and Bearable Pain
3	Severe and Unbearable Pain

### 2. Neck stiffness

Grade	Observation
0	No Stiffness 1 Up to 25% Impairment in range of movement
1	Patient can do daily routine without any difficulty 2 Up to 25 -50% Impairment in range of movement
2	Patient can perform daily routine with mild/moderate difficulty. 3 Up to 50 -75% Impairment in range of movement
3	Patient can perform daily routine activity with moderate to severe difficulty 4 >75% Impairment in range of movement.
4	Patient totally unable to do daily routine.

**3. Neck rotation**

Grade	Observation
0	Possible without any difficulty
1	Possible with slight difficulty
2	Possible with more difficulty
3	Not at all possible

**4. Headache**

Grade	Observation
0	Absent
1	Occasional 1 -3 times in a week 3 > 3 times in a week

**5. Romberg test**

Grade	Observation
0	Absent
1	Present with open or closed eyes
2	Present only when eyes are closed

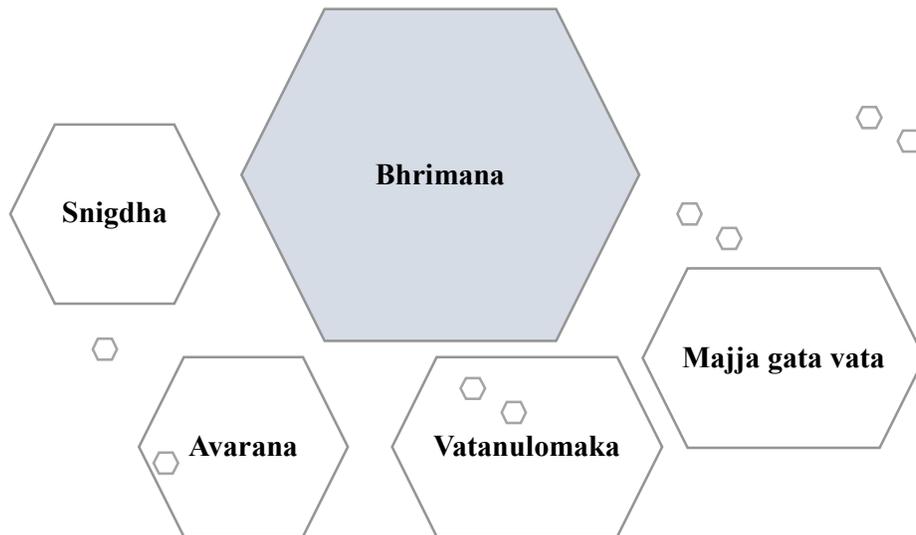
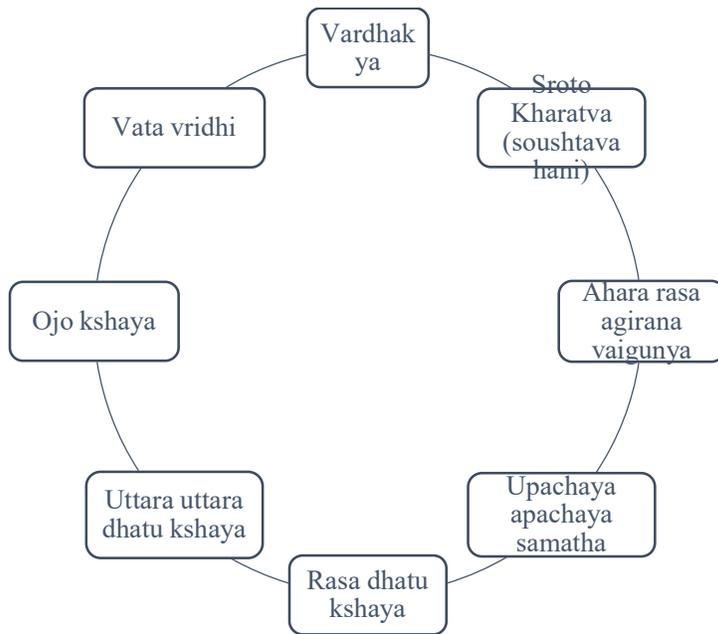
**Treatment given:**

1. *Rasnadi kashaya* – 40 ml -BD , before food
  2. *Tablet Aabha guggulu* -2 BD, after food
- } For first 3 days
3. *Gandha taila* drops- 2 drops , *Anupana* -milk
  5. *Sarvanga abhyanga* with *Dasamoola taila*
  6. *Nadi sweda* with *dasamoola kashaya*
  4. *Yoga basti*-- *Anuvasana: Dasamoola taila*-72 ml
- } next 8 days
- Niruha basti:*
- Madhu*-30ml
  - Saindava*-3gm
  - Sneha*-100ml
  - Kalka* -*Shatapushpa*
  - Kashaya*-250 ml
  - Avapa* -*Gomutra arka*-60ml
5. *Rasnadi kashaya* – 40 ml -BD , before food
  6. *Tablet Ekangaveera ras* with *Anupana- Ardraka swarasa*  
(125 mg) 1BD, after food
  7. *Gandha taila* drops- 2 drops, *Anupana* -Milk

**DISCUSSION**

Cervical Spondylosis is a term that encompasses a wide range of progressive degenerative changes that affect all the components of the cervical spine (i.e., intervertebral discs, facet joints, joints of Luschka, ligamentum flava, and laminae)

[5]. In later stages, spondylotic changes may result in stenosis of the spinal canal, lateral recess, and foramina. Cervical spondylosis presents with three clinical syndromes like: axial neck pain, cervical myelopathy, and cervical radiculopathy.



*Dasamoola taila yoga basti* is indicated for increasing vigour, strength and oja. It can break pathogenesis of *Vata vyadhi* by removing *Margavarodha* by purification of channels and *Dhatukshaya* by its *Vata shamak* property [6].

*Rasna*, due to its *Tikta Rasa*, *Katu Vipaka* and *Ushna Virya*, *Toda*, *Shula* and other related symptoms may be relieved.

*Guggulu* reduces bone inflammation, alleviates pain, reduces swelling, pain and prevents bone resorption. *Abha Guggulu* mainly acts on bones, joints, and parts of the musculoskeletal system. It mainly has *Agnideepana*, *Vatahara*, *Shothahara*, *Vedanasthapana* properties.

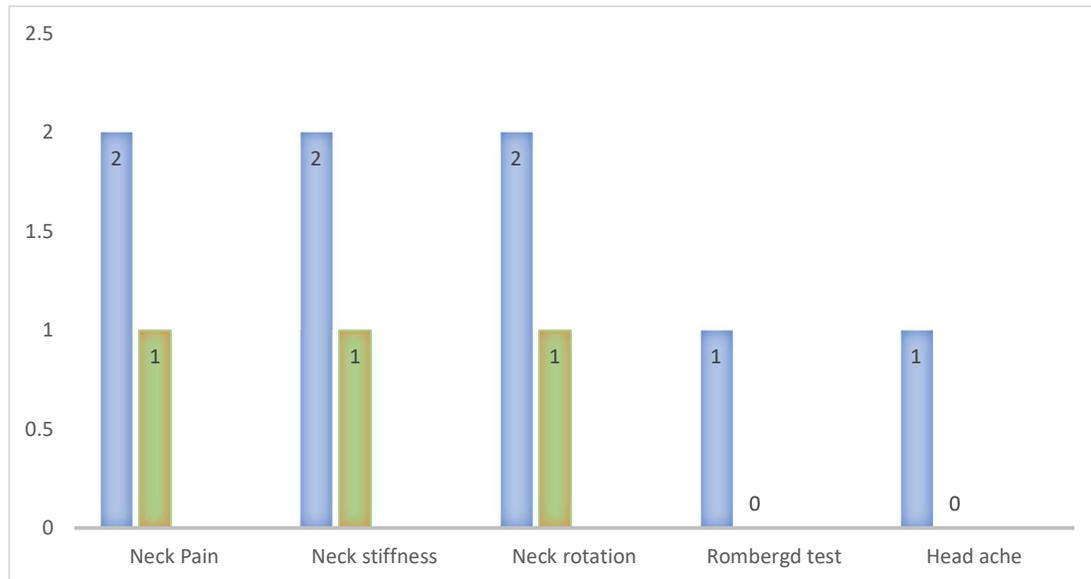
*Ganda taila* is *uttama sthairyra* drug used in *ati virya janita vata* and *pitta* disorders [8].

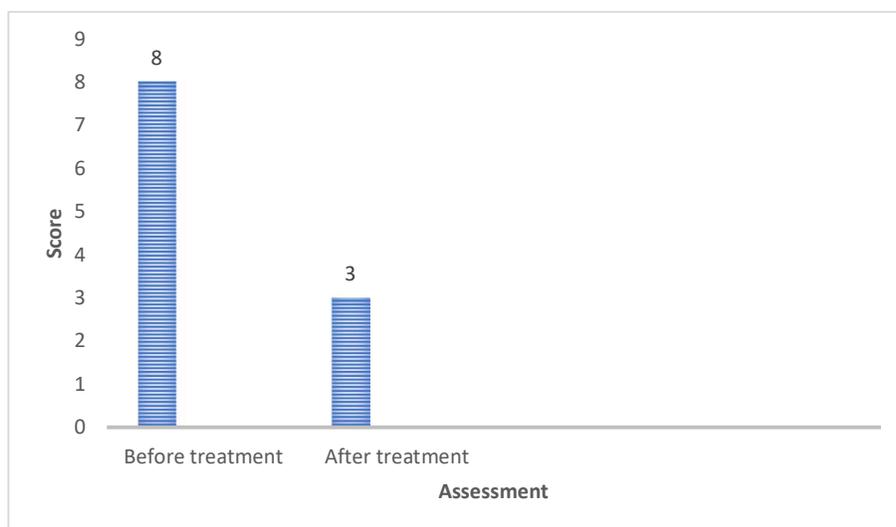
*Ekangveer ras* with *anupana* as *ardraka swarasa*, helps to break the *samprapti* of *greevasthanbha* in 2 ways a) In *marga avarodha* with its *ushna* and *teekshna lekhana* property it acts as *vata kapha haratva* and removes *sanga* b) In *Dhatu kshaya* it acts as *rasayana* and *balya* [7].

### OUTCOME MEASURES AND FOLLOW UP

After completion of Panchakarma procedures patient condition was assessed for pain, giddiness, neck stiffness, neck motion, and reflexes. Pain had subsided. Patient had no giddiness. Neck stiffness had substantially reduced. Range of motion of neck was improved.

**Assessment of patient before and after treatment:**





Patient was discharged on March 7<sup>th</sup>, 2023 with instructions to continue oral medicines for 15 days such as:

Sr. No.	Drug name	Dose	Administration	Anupana(if any)
1	<i>Rasnadi kashaya</i>	40 ml	BD, before food	-
2	Tablet <i>Ekgaveera ras</i>	125 mg	1BD, after food	<i>Ardraka swarasa</i>
3	<i>Gandha taila drops</i>	2 drops	HS	Milk

Patient condition was stable after 15 days of treatment.

### CONCLUSION

The case report demonstrates clinical improvement in symptoms with Panchakarma and Ayurvedic medicinal interventions.

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