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Original Article

EFFECT OF VATAGHNA UPANAHA IN THE MANAGEMENT OF KATIGATVATA WITH SPECIAL REFERENCE TO LUMBAR SPONDYLOSIS - A CASE STUDY

Dr. Anita A. Patil¹

Associate Professor, HOD Panchakarma Department, R.A. Podar Medical (Ayurved) College, Worli Mumbai-18 **Dr. Kesar N. Kshirsagar²** M.D. Scholar, 2nd Year, Panchakarma Department, R.A. Podar Medical (Ayurved) College, Worli Mumbai-18 Dr. Pallavi Kailas Wagh

Abstract

Katigatavata is disease with pain in lumbar region. Lumbar spondylosis, anterior displacement of vertebrae or vertebral column in relation to vertebrae below, is one of the common cause. According to Ayurveda, It is mentioned as one of the eighty *nanatmaj vatavyadhi* in *charak samhita*.¹ *Astang hrudya* has stated that "*Vatasya Upakrama Sneha Sweda Sanshodhanam Mrudu*.² So *Upanaha Sweda* is one of the *Swedana* treatments for pain, stiffness.

Current case study was carried out at R. A. Podar Ayurvedic College. A 43 yr male patient with history of lumbar spondylosis (Laminectomy Defect) was treated. The response to the treatment was recorded and therapeutic effect was evaluated through symptomatic relief. Clinical symptoms were significantly reduced and degree of anterior flexion increased from 30^0 to 90^0 . However MRI indicated that the patient was still suffering from Laminectomy defect with disc bulge.

Keywords: Katigatvata, Laminectomy Defect (Lumbar spondylosis), Vataghna Upanaha.

INTRODUCTION

Lumbar spondylosis is degenerative change in the Vertebral Column Lumbar disc which is almost universal in the elderly. More than 90% of episodes of low back pain are of mechanical origin and most resolve spontaneously within 1-2 weeks. In about 30% patients episode can last as long as a month but chronic low back pain of more than 3% of all cases. Mechanical low back pain is particularly associated with occupations that involve heavy lifting, bending or twisting such as manual labouring or nursing, but people whose job involve awkward static posture or prolonged driving are also at increased risk.

Episodes of occupationally related low back pain are twice as common in adults over the age of 40 years. Disc degeneration is age related and starts in 3rd decade. Reduction in the molecular size of the proteoglycans of the nucleus pilposus is associated with loss of viscoelastic properties.

Address for correspondence: Dr. Anita A. Patil Associate Professor, HOD Panchakarma Department, R.A. Podar Medical (Ayurved) College, Worli Mumbai-18 Mob.: Email: Increased load bearing by the annualus is followed by focal damage and disc herniation in some cases simultaneously the development of osteoarthritic changes in the spinal apophyseal joints leads to increases in stress and disc damage with cleft formation and osteophytes formation around the vertebral margins.³

Ayurveda refer this condition as *katigatvata*. *Katigatvata* is a disease which is mainly caused by vitiation of *Vata dosha*, *Asthi* and *Mamsa Dhatu kshaya*. Some ancient text also described *katigatvata* as symptom of some disorder such as *katigraha* (stiffness in lumbar region), *trikagra* (stiffness in sacral region), *prushtagraha* (stiffness in back region), *trikshool* (sacroiliac pain), *prushtashool* (back pain).⁴⁻⁵

Snehan and *swedana* are prescribed as common treatments in *Vatavyadhi*.⁶ The procedure of applying warm herbal paste to the diseased part of the body followed by bandaging is reffered by the name *Upanaha sweda*.⁷*Upanaha sweda* is one of the *swedana* used widely in the management of *sandhigatavata*. It is simple procedure which can performed even at OPD level. So this case report is planned to evaluate the effect of *Vataghna Upanaha* in the management of *Katigatavata* w.s.r. to Lumbar spondylosis.

AIM OF STUDY

To evaluate the effect of *Vataghna Upanaha* in *Katigatavata* w.s.r. to lumbar spondylosis.

METHODOLOGY

CASE REPORT Name of Patient- XYZ Age- 43 years/Male Occupation- Computer operator Reg. OPD No. – 1221 Reg. IPD No. - 18213 DOA - 4/01/2019 DOD - 13/02/2019

Brief History of Case

A 43 year old male patient complaining of back Katishool (lower pain). Katitrik sandhigraha (stiffness in lumbosacral region), Chakramana Kashtata (pain during walking), Ubhay Padashool (pain in bilateral legs), Ubhay Pad Chimachimayana (tingling sensation in bilateral legs), Pad Gauravata (heaviness in legs) since 3 year. He took allopathic treatment for past 3 year but didn't get any relief. Last year he also underwent lumbar laminectomy and was adviced complete bed rest for next 2 months.

Later on he joined his duty and he lifted heavy weight due to which his complaints resumed. Again he went for allopathy treatment but he didn't get any relief. So for further management he came to Panchakarma OPD No 15 of R. A. Podar Hospital Worli, Mumbai.

Diagnosis And Assessment

Lumbar spondylosis was diagnosed and assessed as follows.

Low back pain (*Katishool*) - VAS method was used to assess the pain.

- 1. Tingling sensation in both legs Assessed by asking present or absent. (*Ubhay Pad Chimchimayan*)
- 2.Heaviness of limbs (*Pad Gauravta*) Assessed by asking present or absent.
- 3.Stiffness of lumbosacral joint (*Katitrik sandhigraha*) was assessed by measuring forward bending angle.
- 4.Difficulty in Straight Leg Rising (*Sakashta Padothankriya*) has been assessed by SLR test.

MRI of L.S. spine (Before treatment 19/12/18) Laminectomy degect noted at L4-L5 level.

Degenerative disc disease at L4-L5 & L5-S1 level L4-L5 mild diffuse posterior bulge and central protrusion of disc abute, the thecal sac with evidence of indentation over left traversing nerve root. L5-S1 mild diffuse posterior bulge and central, right, paracentral exfusion of the disc abute. The thecal sac with evidence of compression of bilateral traversing nerve roots. There is minimal compression over bilateral exiting nerve roots. (R > L)

OBSERVATION

Gait- slow and patient has pain after walking.

Prakriti – Vatakaphaj

Vaya - Tarun

Bala – Madhyam

Agni - Vishamagni Koshta - Krura koshta

Hetu

Aahar - Akalaj bhojan, Kwachit paryusheet annasevan, Mansahar, Pav-Butter, Chaha-Bread.

Vihar - Long time sitting work, AC work, Occasionally heavy weight lifting, Continuous computer work.

Dosha – Vatakaphaj

Dushya – Asthi, Majja, Mamsa

Srotodushti – Asthivaha, Majjavaha

Adhisthan – Katitrik Sandhi

Udbhavasthan – Pakvashaya

Treatment Given

Vataghna Upanaha for 14 days Materials contents of the Vataghna Upanaha⁸ 1.Erand mool churna – 20-30 gm 2.Erand patra (Ricinus communis) – 7-10 3.Erand tail – 20-30 ml 4.Nimbuka – 1 5.Sainndhava – 5 gm Equipments and Instruments require for the preparation of *Upanaha* 1.Utensil 2.Spoon 3.Knife 4.Gas cylinder 5.Cotton cloth/Roller bandage

Preparation of Upanaha

- Switch on the gas and put utensil on it.
- Take 20-30 ml *Erand tail* in utensil.
- Add approximately 20-30 gm of *Erand mool churna* and 5 gm of *saindhava* to it.
- Mix it properly.
- Squeeze 1 lemon to the churna.
- Add clean cutting leaves of *Erand patra* (7-10) to it, and stir it continuosly till it becomes thick paste.

Application of Upanaha

The patient was placed comfortably in prone position. Now spread the paste of *upanaha* on *erand* leaf, thickness of the paste should be approximately 3-5 mm. Then it is placed over lumbar region and cover it. The application of the herbal paste covered with leaves of *Eranda* is secured in position by bandaging.⁹

Duration - 12 hrs^{10} (*Upanaha* applied in the evening 7.00 pm is kept undisturbed overnight and removed at morning 7.00 am) for 14 days.

After porocedure

Bandage /cotton cloth are removed and the area is properly cleaned with hot water.

r roperues of Dravya							
Dravya	Rasa	Virya	Vipaka	Guna	Doshaghnata	Sthanic karma	
Erand mool ¹¹	Madhura (Katu Kashaya anurasa)	Ushna	Madhura	Snighdha Tikshna Sukshma	Vataghna Kaphaghna	Vedanasthapan Shothahara	
Nimbuka ¹²	Amla	Anushna	Madhura	Laghu Rukshna Tikshna	Vataghna Kaphaghna	-	
Saindhava ¹³	Lavana Madhura	Ushna	-	Snigdha	Tridoshaghna	-	

Properties of Dravya

RESULT

The results observed after the treatment were.

Improvement in sign and symptoms of the patient. Relief was (near about 50%) found in Low back pain,

Chakraman kashtata, Ubhay pad chimchimayana. Stiffness of lumbosacral joint (*Katitrik sandhigraha*) has gone. Gait has improved.

Observation	Before Treatment	After Treatment			
Walking distance	Patient had severe pain	Patient could easily walk			
	After walking 100 mts.	without pain about 300 mts.			
Walking time	Patient took around 6	Patient took around 3			
	minutes to walk 100 steps.	minutes to walk 100 steps.			
SLRT	$Rt - 30^{0}$	$Rt - 90^{\circ}$			
	$Rt - 30^{0}$ Lt - 45 ⁰ B/L - 30 ⁰	$Rt - 90^{0}$ Lt - 90^{0} B/L - 90^{0}			
	$B/L - 30^{0}$	$B/L - 90^{0}$			
No Significant changes were observed in MRI finding.					

DISCUSSION

Upanaha swedana is one among the type of swedana. Swedana is process which relieves stiffness, heaviness, coldness and produces sweating. In *Katigatvata* i.e. (Lumbar spondylosis) there is severe pain, stiffness in lumbar joint. Upnaha sweda relieves stiffness and pain in joints. The main function achieved by swedana is rise in temperature, which is responsible for increased metabolic activity, increased blood flow and stimulation of neural receptors in the skin or tissues. Heat has a direct effect on the blood vessels, causing vasodilation, particularly in the superficial area where temperature is highest. It can also cause a reflex dilation of arterioles by the stimulation of superficial nerve endings.¹⁴

The lipoidal bond is very much suitable for penetration of drug molecule through stratum corneum. On this basis, we can assume that in *Upanaha* (poultice), *taila* (oil) helps in formation of lipoidal bond with other drugs thus helps in the penetration of drug molecules. *Upanaha* (poultice) is a type of *Swedana* (sudation) so it induces hyperthermia which improves local blood and lymphatic circulation and thereby improving local tissue metabolism, reduces imflammation by modifying secretion of various inflammatory mediators, relaxes local musculature by physical effect of heat and thereby reduces pain, increases the rate of trans-dermal drug delivery. Most of the drugs used are having alkaloids, thus they are doing the inflammation and some of the drugs are having flavonoids also which play a role in anti-oxidant effect.¹⁵

Thus the above properties of *dravyas* helps in *katigatavata* by reducing the pain and stiffness. **CONCLUSION**

Katigatavata (Lumbar spondylosis) is type of Vatavyadhi in which upanaha sweda is good one among the treatments. The vatavyadhihar/vataghna upanaha is much beneficial in the patient of Katigatavata (Lumbar spondylosis) by relieving the local pain as it contains all Ushnaviryatmak, Tikshna, Vataghna, Vednasthapan and Shothahara Dravya. But this study needs further evaluation on large number of patient to finally conclude this treatment.

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