



Management of Cervical Spondylosis with Agnikarma Therapy: Case Study Article

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Case Report

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Abstract

The clinical disease known as sandhigata vata causes structural and functional disarrangement in the joints with symptoms of sandhishoola, sandhishotha, akunchana prasarana, pravrittiscavedana, and in the later stages, hanusandhigatah, sandhigata vata can be identified as a joint disease. In the context of ayurveda, some clinical conditions, such as manyastambha, manyagraha, grivastambha, and viswachi, mimic cervical spondylosis however there are no degenerative changes in these illnesses. The only condition that can be highly appropriate with cervical spondylosis is sandhigata vata. Age-related wear and tear affecting the cervical vertebrae in the neck is known as cervical spondylosis. As the disc-dehydrate and shrink, sign of osteoarthritis develops, including bony spur. agnikarma having vata kapha shamaka properties like ushna, sukshma, and ashukari guna may be helpful relives pain and muscle spasm instantly so it can be used to treat cervical spondylosis.

Keywords: Agnikarma; Cervical Spondylosis; Sandhivata

Introduction

Cervical spondylosis is usually age-related condition in which degeneration of cervical column especially that resulting in abnormal fusion and immobilization of vertebral bones. As it is vata vyadhi which is considered as a mahagada because treatment may be prolonged and prognosis is uncertain [1].

Spondylosis is a term suggested for degenerative osteoarthritis of the joints between the centre of the spinal vertebrae and or neural foramina resulting in pain, paraesthesia etc. If it is occurring on cervical vertebrae, it is

called cervical spondylosis.

So, it is a disease affecting more of elderly (more than 40 years) where there is degeneration of the apophyseal joints and intervertebral disc joints with osteophyte formation and associated with or without neurological sign.

In ayurveda cervical spondylosis comes under sandhigata vata. Sandhigata vata is a common vata predominant disorder due to changes in life style unsuitable sitting, sleeping, standing, looking upwards or some other certain posture lead to cervical spondylosis in a prominent disease.

Sandhigatavata can be defined as a disease of sandhi (joint) with symptoms of sandhishoola, sandhishotha and akunchana prasaran pravrittiscavedana and in the later stage hanti sandhigatah. Acharya sushruta has described various types of sandhi viz. peshi sandhi, snayu sandhi and shira sandhi etc. but in this perspective, we are dealing with asthi sandhi [2].

The term gata means "situated in", directed to hence sandhigatavata represents the site in which provoked vata dosha is situated. vata is a biological force which governs and stimulates all the activity of body and act as a receptor as well as stimulator [3].

Treatment for heat burns in ayurveda is known as agni karma. Dahan karma is another name for it. Several painful conditions like joint pain, headache, cervical pain, lower backache, muscular pain anywhere in the body and few convulsion disorders such as epilepsy and psychosomatic diseases can be treated with his intentional heat burn therapy.

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According to acharaya sushruta, a patient was treated the agnikarma process never experiences the same illness once more, i.e it never reappears. Hence, agni karma totally cures the illness, thus agnikarma said to be superior then other treatment methods like kshara karma, oral medication, or even surgery.

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The process of agni karma is normally done by using pippali, hot honey, oil gold, hot jiggery and silver, panchadhatu shalaka, loha shalaka, etc.

Methodology

This is a single case study conducted at Rishikul govt. Ayurvedic College and hospital, UAU, haridwar patient having I.P.D. no 4767/26581 was treated with a specific regimen and prognosis was assessed. After proper counseling, the line of treatment was explained.

Case History

Study in which a 27year-old female patient. Who had apparently been normal 6month back. Gradually she noticed

pain and stiffness over neck region. Radiating to the right upper limb along with tingling sensation and numbness up to tip of fingers. Difficulty in neck movement. She was managed according for a week with allopathic medicine but did not get any relief. After that she visited O.P.D no 20 Panchkarma dept. of Rishikul campus for further management with diagnosed as having cervical spondylosis.

Chief Complaint

The onset of symptoms developed around 6 months back. However, the symptoms such as pain and stiffness over neck region and pain radiating to RT hand. Numbness present in RT hand and difficulty in neck movement.

H/O Past Illness

- No H/O Htn, Dm, Thyroid

Family History

- No Family History Found

Personal History

- Addiction- No Specific Addiction Diet-Vegetarian
- Appetite-Reduced
- Thirst-Adequate
- Bowel-Regular
- Micturation-Normal
- Menstruation-Regular
- Sleep-Disturbed Due To Pain

General Examination

- General Condition-Fair
- B.P.-118/80mmhg
- Pulse-68/Min
- Temp-Afebrile
- R/R-18/Min
- Pallor-Not Present
- Icterus-Not Present
- Cyanosis-Not Present
- L/N-Not Enlarged

Examination

Inspection-curvature of spine-normal curvature of spine, no visible injury, mass, and scar mark. Palpation-local temperature slightly raised, tenderness-cervical region. Movements cervical: cervical active ranges of motion were painful during flexion, extension and lateral rotation.

Test

By cervical compression of the neck increased the pain and radiates pain towards patient's arms (spurling test positive). During flexion of neck patient feel electric shock towards arms (lhermitte's sign).

Investigation

X-Ray cervical spine shows mild osteophyte formation with normal intervertebral disc. MRI image of cervical spine shows right posterolateral disc prolapse at c6/c7 causing moderate c7 root compression. Routine blood investigations

were in normal limits. Urine routine examination showed to be normal. The patient was diagnosed with cervical spondylosis due to chronic postural strain. Other investigation like haemoglobin, esr, lft, kft, lipid profile, thyroid etc. are with in normal limit (Table 1).

Assesment

- Neck Pain
- Neck Stiffness
- Pain Radiating In Arm
- Vertigo

S.No.	Parameters	Grading	Observaion
1	Neck Pain	0	Absent
		1	Mild And Intermittent
		2	Moderate And Bearable Pain
		3	Severe And Unbearable Pain
2	Neck Stiffness	0	Absent
		1	Mild Stiffness
		2	Moderate Stiffness With Partially Restricted Movement
		3	Severe Stiffness With Restricted Movement
3	Pain In Arm	0	Absent
		1	Mild Intermittent Pain Over Arm
		2	Moderate Pain With Occasional Tingling Sensation
		3	Sever Pain Radiating From Neck With Tingling Sensation
4	Vertigo	0	Absent
		1	Occasional
		2	1-3 Time In Week
		3	>3 Times In A Week

Table1: Routine Examination of patient diagonalization with Cervical Spondylosis due to Chronic Postural Strain.

Treatment

Agnikarma Chikitsa

Purva-karma

It includes the appropriate evaluation and preparation of the patient and any necessary instruments. Prior to the procedure, the patient's informed consent should be obtained. A normal investigation needs to be carried out.

Pradhan-Karma

Before beginning the procedure, the patient was kept in a favourable position. Agnikarma site conformation is accomplished by selecting the area that is tender and painful

the most. Proper cleaning of the area. Using panchadhatu agnikarma the most sensitive area is where the bindu dot kind of varna dagad and shalaka agnikarma are applied and shalaka remains in in touch with the skin for 10 seconds.

A certain distance should be kept between two samyak dagad vranas as agnikarma is conducted at the still until samyak twaka dagad lakshan appears. The assistants kept comforting and holding the patient during the procedure.

Paschat-Karma

After completing the procedure, apply ghritha, madhu, gritkumari pulp, and haridra to the samyaka dagad varna for immediate pain relief. for the dagad varna to properly heal,

apply coconut oil and aloe vera gel at evening 2-3 times each day for 3-4 days. The patient should receive guidance on eating right. It is advised to be patient with pathya apathy. The varna should be seen to have fully recovered. Two local treatments of agni karma were given over a 15-day period.

Observation

The observations of the case is recorded and displayed in the Table 2.

S.No.	Parameters	Before treatment	After 1st sitting	After 2nd sitting
1	Neck pain	3	1	0
2	Neck stiffness	3	2	0
3	Pain in arm	3	2	1
4	Vertigo	2	1	0

Table 2: Observed parameters such as pain over neck.

Result

Based on prognosis, observed parameters such as pain over neck which was grade 3 on day 1, was relieved to mild/grade1 on first sitting (15th days) & complete relief on 2nd sitting (30th day). Neck stiffness and pain in arm which were grade 3 on day 1(initial day), were relieved to moderate/grade 2 on days 15th day& mild relieve that is grad1 at day 30&complete relief in neck stiffness on day30. Also, the parameter vertigo was grade 3 in day 1, was relieved to mild/grade1on 15 day & complete relief on day 30. This proves is effective in management of greevagata sandhi vata with special reference to cervical spondylosis.

Discussion

In the present single case study, a patient with a chief complaint such as pain and stiffness over neck region, and radiating to the right upper limb along with numbness up to tip of fingers. Difficulty in neck movement was diagnosed with sandhi vata (cervical spondylosis) was taken for the study. The established treatment includes steroids & analgesics along with surgery having a limited prognosis. In this study, Agni-karma procedure was given to the patient & found efficacious in reliving symptoms. Agnikarma with modified agnikarma device 2 times with 15 days

Probable Mode of Action

Ushna, Tikshna, Sukshma, and Aashukari Gunas, which are anti-Vata and anti-Kapha in nature, are all present in Agni. By creating Samyak Dagdha Vrana, red-hot Shalaka transfers therapeutic heat in the form of physical heat to Twakdhātu. This healing heat has three different effects from Twakdhātu. As a result of Ushna, Tikshna, Sukshma, and Ashukari Guna, the Srotavarodha was eliminated, the vitiated Vata and Kapha Dosha were calmed, and their equilibrium was maintained. Second, it improves the damaged site's blood circulation, or Rasa Rakta Samvahana. The patient experiences symptom

relief as a result of the pain-producing chemicals being flushed away by the increased blood flow to the affected area. Thirdly, therapeutic heat raises Dhatwagni, which improves Dhatu metabolism, allows Amadosha from the damaged area to be digested, and encourages Purva Dhatu to produce sufficient nourishment.

Asthi and Majja Dhatu gain more stability as a result. As a result, alleviation from all Sandhivata symptoms is the immediate outcome. Additionally, it is possible to support the notion that the Heat penetrates deeper tissue, such as Mamsa Dhatu, and neutralises the Sheeta Guna of Vata and Kapha Dosha. As a result, vitiated Doshas enter an equilibrium phase, relieving the symptoms of the patients. Ayurveda claims that the fundamental humour Vata is the dosha that causes Ruka (pain), and pain is a key symptom in the majority of Vatavyadhi [6], which predominately have Sheeta Guna, the exact opposite of Ushna Guna of Agni. As a result, Agni can relieve pain.

Mode of Action of Agnikarma

- **On muscles**
 - Rise in temperature.
 - Sudden contraction of muscles.
 - Followed by relaxation Increase in the efficiency of their action.
- **On Blood Circulation**
 - Stimulation of superficial sensory nerves. Dilation of local blood vessels.
 - Increase in blood circulation.
- **On Pain**
 - Increase in local metabolism. Metabolites excreted.
 - Blood circulation normalizes.
 - Thus, reduction in the intensity of pain.

Conclusion

Agnikarma gave cervical spondylosis patients more alleviation. The best and most efficient Para surgical technique. It functions as an antiseptic, haemostatic, and analgesic all at once. In the Vedas, Agni is referred to as life. The karma performed by this Agni in a similar manner breathes fresh life into the body.

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