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## The efficacy of sthanik kulattha kwath yukta kanji nadi sweda along with shaman aushadhi in the management of katishool W.S.R Low Back Pain

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### Abstract:

*Spondylosis refers to degenerative changes in the spine, such as bone spurs and alterations in the intervertebral discs. Lumbar spondylosis specifically affects the lower spine, where the narrowing of the space between the vertebrae compromises the spine. In a typical case of lumbar spondylosis, the space between the discs in the lumbar spine becomes narrowed, leading to symptoms such as numbness, tingling, and pain radiating from the affected area. These symptoms result from pressure on the nerves as they exit the spinal cord. It is estimated that about 80% of the world's population will develop lumbar spondylosis after the age of 40. In Ayurveda, this condition is comparable to a disease known as Katishool, characterized by pain in the lumbar region (Kati pradeshe vedana), numbness in the lumbar region (Kati shunyata), reduced activity (kriya hani), and numbness in the hands and feet (Hasta-pada suptata). This article focuses on the management of lumbar spondylosis (Katishool) through Ayurvedic practices. A 49 year old male patient reported in panchakarma OPD with the complains of Kati pradeshevedana (Pain in Lumber region), Kati shunyata (Numbness), Dourbalyata (Weakness), Shramahani (Lethargy) for last 6 month and other associate complaints were Hypertension, debility, lethargy, excessive sleep, burning micturation for four month. The patient was diagnosed as Lumber spondylosis. Patient was treated with swedana procedure. For swedana kulattha kwath yukta kanji was used. A combination of Yogaraj Guggulu (2 Tab), Punarnavadi Guggulu (2 Tab) twice a day, along with Dashmoolkwath (20 ml) twice a day with water after meal for one month. After one month of treatment a significant response was found.*

**Keywords:** Lumber spondylosis, Katishool, Shaman Aushadhis, Shansodhan Aushadhis.

### INTRODUCTION:

Lumbar spondylosis is a condition characterized by degenerative changes in the discs and lumbar spine. According to research by Nuki G. et al. (1999), disc degeneration is related to aging and typically begins in the third decade of life.

Spondylosis typically initiates with degenerative changes in the intervertebral discs. These changes progress with time, leading to alterations in the discs' physical properties like elasticity and

mechanical resistance. Consequently, these disc lesions cause pathological changes in the vertebral bodies, resulting in the formation of osteophytes.<sup>[1]</sup>

Lumbar spondylosis is often asymptomatic. However, an MRI study of the lumbar spine can reveal significant bulging of the L3 and L4-5 discs, mild thickening of the ligamentum flavum, and early signs of facet arthropathy.<sup>[2]</sup>

Statistics indicate that around 28% of patients experience spinal disorders, with low back pain being a prevalent condition affecting 80-90% of individuals at some point in their lives. This condition is most commonly observed in individuals aged 30 to 50 years.<sup>[3]</sup>

Modern medical treatments for low back pain resulting from lumbar spondylosis primarily include calcium supplementation, anti-inflammatory medications, analgesics, and sometimes surgical interventions, depending on the severity of the condition. However, this approach often leads to dependency on non-steroidal anti-inflammatory drugs (NSAIDs) and steroids, or necessitates restricted movements and complete rest post-surgery. Moreover, since degenerative changes are irreversible, these treatments might inadvertently accelerate the degenerative process.

Given these limitations, there is a growing interest in Ayurvedic treatments for relief from chronic back pain. Ayurveda, with its holistic approach and established efficacy in managing chronic conditions, offers hope for those suffering from lumbar spondylosis.

In Ayurveda, lumbar spondylosis can be correlated with a condition known as Katishool. Katishool manifests through various symptoms, including pain in the lumbar region (Kati pradeshe vedana), numbness in the lumbar region (Kati shunyata), reduced physical activity (kriya hani), and numbness in the hands and feet (Hasta-pada suptata).<sup>[4]</sup>

The severity of symptoms in Low back pain varies widely. Some episodes are self-limiting and resolve without specific therapy, but some causes of Low back pain might be excruciating enough to necessitate treatment in an emergency room. Many sources are responsible for Low back pain, including muscles, nerves, bones, and referred pain from abdominal organs. The principal line of treatment involves use of steroids, NSAID which are having severe side effects on hepatic and renal systems.<sup>[5]</sup> Swedana is a process to induce sweating (sudation) artificially. Here swedan with its ushna guna reduces stiffness and spasm of muscle, Tikshna guna with its penetrating property separate deeply embedded impure doshas from peripheral tissues. With sara and sukshma guna liquified doshas are move out of the minute cavities to their main sites. Swedan ultimately act as kapha vataghna leading to decrease in pain without causing any adverse effect on hepatic and renal system.

Along with swedana some vatahara, shothhar and vedanahar aushadhi also given to patient to reduce katishool and other sarvadehik lakshanas.

**Aims and Objectives:**

To estimate the efficacy of Kulattha kwath yukta nadi swedana procedure along with shaman aushadhi in the management of katishool. W.S.R Lumbar spondylosis.

**Materials and Methods:**

Type of Study- Single observational case study.

Study center- G.D.POL Foundations Yerla Ayurvedic Medical College and Hospital

**Case Report:**

A 49-year-old male patient visited the OPD of Panchakarma department of Y.M.T Ayurvedic Hospital in Kharghar, Navi Mumbai, with primary complaints of leg pain, difficulty in sitting and standing position, weakness, fatigue, and numbness in legs for the past 6 months.

**Additional complaints:**

- 1]burning sensation during urination (Mutra-daah) during past 4 months,
- 2] high blood pressure (Uchcharaktachap)
- 3]excessive sleep (Atinidra).

**Diet-**

The patient's personal history reveals a mixed diet (both vegetarian and non-vegetarian) with a preference for extra oily and fatty foods, consumed irregularly.

**Past history-**

No significant past history found.

**Family history-**

No significant past history found.

**Local examination-**

Edema at both legs.

Pain on palpation

The Straight Leg Raising (S.L.R.) test was positive in the right leg at 45 degrees

Tremors in the neck region

**General Examination-**

PR-82/MIN

BP-140/90 mmHg

RR- 18/min

Weight- 84kg

**Investigations-**

Hematology : E.S.R. - 37 mm/hr

Urine examination :

pH - 5.5



epithelial cells- 5-6

W.B.C.s- 4-5

presence of calcium oxalate

Radiological :

An MRI conducted on June 19, 2018, indicated broad-based posterocentral and right paracentral disc extrusion (with 5 mm caudal migration) and annular fissuring at the L4-L5 level, impinging on the thecal sac and causing moderate narrowing of the bilateral lateral spinal recess, abutting the bilateral traversing nerve roots (right more than left). There was moderate to severe central canal stenosis and bilateral facet joint arthropathy.

**Diagnosis:** katischool.

### Symptoms

Pain and stiffness in back region

Radiating pain to both lower extremities

Numbness at lumbar and lower limbs

Difficulty in walking, standing and changing position from last 8-9 months

General Examination

- Prakriti- Kapha vata
- Vaya- Madhyam
- Bala – Madhyam
- Agni – Madhyam
- Koshtha- Madhyam
- Gait- slow

### Treatment-

1. Stahnik snehana at kati, prushtha shroni pradesha with til taila was given for 7days.
2. Kulattha kwath yukta kanji nadi sweda at kati pradesha for 10-15 mins was given for 7 days
3. Yograj guggulu 2tablets twice a day with warm water. For 1 month
4. Punarnavadi guggulu 2 tablets twice a day with warm water. For 1 month
5. Dashmool kwath 20ml twice a day with water before meal. For 1 month

### OBSEVATION AND RESULTS:

Subjective criteria- Pain, Paresthesia, Stiffness, posture

Objective Criteria- Walking time, Walking distance, SLR, MRI Findings

Table 1: Before Treatment

Subjective criteria	Gradation	Objective Criteria	Gradation
Pain	3	Walking time	The patient took

			approximately 5-7 minutes to walk 100 steps
Paresthesia	3	Walking distance	The patient experiences severe pain after walking 100 meters.
Stiffness	2	SLR	The Straight Leg Raising (S.L.R.) test was positive in the right leg at 45 degrees.
Posture	The patient experiences difficulty in changing posture.	MRI findings	Postero-central/right paracentral disc herniation/extrusion (with 5 mm caudal migration) and annular fissuring at the L4-L5 level, impinging on the thecal sac.

Table no 2: After Treatment

Subjective criteria	Gradation	Objective Criteria	Gradation
Pain	1	Walking time	Took three minute to walk 100 steps
Paresthesia	1	Walking distance	Walk without pain about 500 m
Stiffness	1	SLR	Negative
Posture	Markedly improved	MRI findings	No significant changes

Table no 3: pattern of Grading

score	Interpretation
0	No pain
1	Mild pain
2	Moderte pain
3	Severe pain

## Discussion:

### Kulattha kwath yukta kanji nadi sweda-

Swedana is a procedure that raises body temperature through external heat, inducing sweating. Acharya Charaka recommended Swedana for treating Vata disorders. Nadi Swedana, a type of Swedana, was administered to patient having Katishool using Kulattha Kwath Yukta Kanji for seven days, with notable results observed.

Nadi Swedana, or localized steam therapy, uses a specialized device (Nadi Swedana Yantra) to apply steam to specific body areas, relieving musculoskeletal pain, stiffness, and inflammation, while promoting relaxation. This therapy involves a 5-minute pre-treatment massage with Tila Taila (sesame oil) to enhance absorption due to the oil's lipid solubility and skin permeability.

Ancient Ayurvedic texts advocate for this practice, comparing it to how heat and oil make dry wood pliable, similarly benefiting conditions like dryness, stiffness, heaviness, rigidity, and tension. The therapy promotes vasodilation, releasing neurotransmitters like bradykinin and nitric oxide, reducing muscle contraction and spasm through decreased sympathetic output, and activating calcium channels to block pain receptors.

The heat improves blood flow, clears waste products, reduces joint stiffness, and decreases inflammation, aligning with the gate control theory of pain. In the study, Kulattha Kwath Yukta Kanji Nadi Sweda was used<sup>[6]</sup>, where the drug's particles are absorbed through the skin and metabolized by Bhrajak Pitta. Kulattha, with properties like laghu, ruksha, and teekshna, pacifies Kapha dosha and aids in waste elimination, achieving Vata shaman.

Phytochemical analysis reveals Kulattha contains alkaloids, flavonoids, carbohydrates, proteins, and tannins, contributing to its anti-inflammatory, antioxidant, and antispasmodic effects, relaxing muscles and reducing inflammation. Kanji, with its amla (sour) taste and hot potency, mitigates Vata and Kapha doshas, enhancing Bhrajak Pitta and stimulating agni (digestive fire).<sup>[7]</sup>

Kanji's ingredients, rich in flavonoids and tannins, have antioxidant properties, promote healing, and reduce inflammation, benefiting conditions like low back pain. Transdermal drug delivery, similar to Nadi Sweda, bypasses first-pass metabolism for higher bioavailability and efficacy, showcasing Nadi Sweda's potential as an effective therapeutic approach.<sup>[8]</sup>

### Shamana aushadhi-

Primarily pachaka, sothahara and vatahara drugs are choice of drug to treat the katishoola.

#### Yogaraja Guggulu

Yogaraja Guggulu is a herbo-mineral preparation renowned for its Kaphavatahara (kapha and vata balancing) properties. Its primary target is the asthi majjagata vata, which refers to vata-related disorders affecting the bones and bone marrow. The preparation contains ingredients with ushna (hot) and ruksha (dry) qualities, which help in clearing the srotas (body channels), thereby facilitating the removal of blockages and promoting better bodily functions.<sup>[9]</sup>

#### Punarnavadi Guggulu

Punarnavadi Guggulu is a potent herbal diuretic formulation that is primarily used to treat edema, which is the abnormal accumulation of fluid in the body, along with other inflammatory conditions. This herbal mixture significantly enhances blood circulation, reduces body inflammation, and exerts beneficial effects on the heart, kidneys, and liver. Moreover, it helps in reducing fluid accumulation in the cells, tissues, and serous cavities throughout the body, thereby alleviating symptoms associated with fluid retention.

#### Dashamoola

Dashamoola, as its name suggests, contains the roots of ten different plants. These roots are divided into two groups: Brihad Panchamoola (the major five roots) and Laghu Panchamoola (the minor five roots). In Ayurveda, Dashamoola is typically used in the form of kwath (decoction) or arishta (fermented decoction). This formulation is utilized for a variety of conditions including headaches, pain and swelling related to arthritis, fever, abdominal distension, and costochondral pain (pain in the rib area). Dashamoola is described as an analgesic (pain reliever), anti-arthritic, and anti-rheumatic combination, making it effective in managing pain and inflammation associated with numerous ailments<sup>[10]</sup>

### Conclusion:

On the basis of this single case study it can be concluded that sthanik kulattha kwath yukta kanji nadi swedana and Shaman aushadhis had been effective in the management of katishoola (Lumber spondolysis).

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