

**-CERVICAL SPONDYLOSIS- AN AYURVEDIC APPROACH****Dr. Deepika Dilip Vyawahare**

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**ABSTRACT** In this mechanical era the changing lifestyle like shift duties, excessive travelling, inappropriate postures and irregular dietary habits has created several disharmonies. All these factors create undue pressure and stress injury to the spine and play an important role in producing disease like Cervical Spondylosis. Cervical spondylosis is a degenerative condition of cervical spine associated with pain, stiffness, tingling sensation radiating pain from shoulder to digits along the course of the nerve indicates nerve root compression. Manyastambha is one of the vatavyadhi enumerated in Nanatmaja vatavyadhi. According to sushruta nidana sthan by day sleep, sitting and standing (in fixed position) and gazing obliquely, the vata covered by kapha causes manyastambha. Thus manyastambha is the clinical entity in which the movements of the neck are impaired and there is stiffness. Manyastambha can be co-related with cervical spondylosis in modern prospective.

**KEYWORDS :** Cervical Spondylosis, Manyastambha, Vatavyadhi**INTRODUCTION**

In this mechanical era the changing lifestyle like shift duties, excessive travelling, inappropriate postures and irregular dietary habits has created several disharmonies. All these factors create undue pressure and stress injury to the spine and play an important role in producing disease like cervical spondylosis.

Cervical spondylosis is a degenerative condition of cervical spine associated with pain, stiffness, tingling sensation radiating pain from shoulder to digits along the course of the nerve indicate nerve root compression.

Manyastambha is one of the vatavyadhi enumerated in nanatmaja vatavyadhi. The term manyastambha is derived from two different words manya and stambha. According to Arunadatta, the commentator of Ashtanghridaya meaning of the word manya is two nadis, laterally to neck. While Amar Singh the commentator of BhavPrakash says meaning of manya is the sira of the posterior side of the neck. According to Monier William 'manya' means the back or the nape of the neck. The word meaning of stambha is niscalikarana. Stambha means stiffness rigidity.

According to sushruta nidana sthan by day sleep, sitting and standing in fixed position and gazing obliquely. The vata covered by kapha causes manyastambha in which the movements of the neck are impaired and causes stiffness. Manyastambha can be co-related with cervical spondylosis in modern prospective.

**1. Cervical Spondylosis:**

- Cervical spondylosis is a general term for age-related wear and tear affecting the spinal disks in the neck.
- As the disks dehydrate and shrink, signs of osteoarthritis develop, including bony projections along the edges of bones (bone spurs).
- Cervical spondylosis is very common and worsens with age.
- Most people experience no symptoms from these problems. When symptoms do occur, nonsurgical treatments often are effective.

**1.0 Prevalence**

- Now a day's joint disorder (Musculoskeletal) is one of the main causes distress in fifth decade of life.
- Age plays an important role in the pathogenesis.
- By the age of 50 years around 20-50% people develop cervical spondylosis.

- At the 75 years of age it is seen at least 70% of people are affected.

**1.1 Epidemiology:-**

- Women are affected almost twice as much as men.
- Prevalence rise with the age for men and women and is the highest in the age group 50-59 years.
- The incidence of neck pain in general practice has been estimated to be between 18 and 23 per 1000 registered patients per year.
- X - Ray findings suggest that the majority of men older than 50 years and women older than 60 years have evidence of degenerative changes in the cervical spine.
- Both gender are affected equally but problem begin earlier in males.

**1.2 Causes:**

According to age, the bones and cartilage that make up the backbone and neck gradually develop wear and tear. These changes can include:

- **Dehydrated disks.** Disks act like cushions between the vertebrae of the spine. By the age of 40, most people's spinal disks begin drying out and shrinking, which allows more bone-on-bone contact between the vertebrae.
- **Herniated disks.** Age also affects the exterior of the spinal disks. Cracks often appear, leading to bulging (herniated) disks — which sometimes can press on the spinal cord and nerve roots.
- **Bone spurs.** Disk degeneration often results in the spine producing extra amounts of bone in a misguided effort to strengthen the spine. These bone spurs can sometimes pinch the spinal cord and nerve roots.
- **Stiff ligaments.** Ligaments are cords of tissue that connect bone to bone. Spinal ligaments can stiffen with age, making neck less flexible.

**1.3 Signs and Symptoms:**

- In most of the people, cervical spondylosis causes no symptoms. When symptoms do occur, they typically include pain and stiffness in the neck.
- Sometimes, cervical spondylosis results in a narrowing of the space needed by the spinal cord and the nerve roots that pass through the spine to the rest of your body.
- If the spinal cord or nerve roots become pinched, it may cause:

Tingling, numbness and weakness in arms, hands, legs or feet, Loss of bladder or bowel control

**1.4 Treatment:**

The Symptoms of cervical Spondylosis undergo spontaneous remission and exacerbation.

- **Self-Therapy:** Remedial measures of the acute neck pain are fortunately simple. To overcome the acute pain and muscle spasm patients should be advised to take complete rest.
- **Conservative treatment:** Treatment for cervical spondylosis depends on the severity of signs and symptoms. The goal of treatment is to relieve pain, help to maintain usual activities, and prevent permanent injury to the spinal cord and nerves. NSAIDS, Corticosteroids, muscle relaxants, anxiolytic and antidepressants help a lot. Vitamin E helps to relieve the painful muscular spasm.
- **Epidural steroid injection (ESI):** It is a long acting steroid with local anaesthesia injected into the epidural space.
- **Physiotherapy Measures:** It plays important role in both acute and chronic cases of cervical spondylosis.
- **Cervical Traction:** It helps to distract the neck bones and recreate the lost intervertebral space.
- **Collars:** It immobilises the neck and provides rest to painful muscles.
- **Cryo Therapy:** During the first 24 – 48 hours, cryo therapy with ice is ideally used to relieve pain and spasm.
- **Exercise:** Neck exercise should be preferably done. Isometric exercises are done to keep the neck muscles from atrophying.
- The Assessment Criteria for Range of motion (ROM) of cervical spine with the help of Goniometer.

**2.0 Concept of Cervical Spondylosis in Ayurveda:**

- According to Monier William's 'manya' means the back or the nape of the neck.
- The word meaning of 'stambha' is nischalikarana (stiffness / rigidity).
- Cervical spondylosis as the affliction of middle age where degeneration of dhatu starts.
- According to Sushruta the causes are Diwaswapna which increases kapha, upaveshanam (improper position of neck during sleep), Urdhwaneerikshna (raising the neck for a long, Ratrijagan leads to vata prakopa. Thus kapha avrutta vata causes manyastambha. The same nidana, lakshan and samprapati is explained by Gadanighraha and Harita Samhita.
- Dalhan clarifies that by looking upwards continuously in vakra that is improper position of manya leads to minor trauma and precipitates the symptoms.
- In charak samhita, Shirobhighata, as one of the reason for Manyastambha. The factors which causes vitiation of vata can be classified as follows :
- Swaprakopaka, Margavarodhaka, Marmaghatakara, Dhatukshyakara Nidan.

**2.1 Lakshana of Manyastambha:**

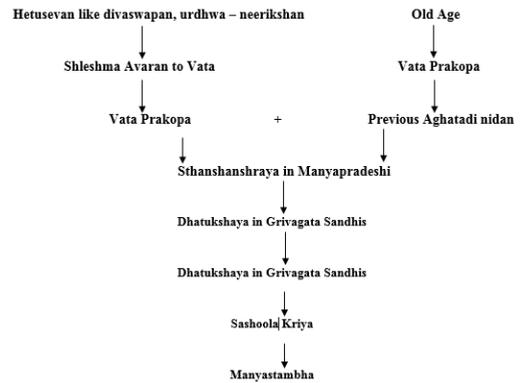
- Ruka
- Bhrama
- Shirashoola
- Hasta chimchimayan
- Stambha

**2.2 Samprapti :**

- The cervical spine has to be mobile and support the head. It is a considerable strain is born by the neck when the arm muscles are pit to vigorous use.
- After the age of about 60 years almost all the subjects are likely to present some evidences of spondylotic changes and also indicates

towards the involvement of vata.

- All these indicates to provocation of Vyana Vata in the cervical region leading to contraction of some cervical muscles as well as Asthi Kshaya in the cervical vertebra.



**2.3 Different Treatment Modalities in Ayurveda:**

- Snehan: Various tailas are used for local application.
- Swedan: Nadi Sweda, Taap sweda.
- Shaman: Guggul kalpas, Kwaths,
- Nasya: Mashabaladi, Ksheerbala Taila .
- Basti: Niruha Basti.
- Pathya Ahara – Kulatha, Masha, Godhuma, Raktashali, Patola, Shigru, Dugdha, Ghrita, Jangal Mamsa, Draksha, Madhur amla lavan Rasa
- Apathya Ahar- Chanaka, Rajmash, Tinduka, Kshaya katu tikta Ahar Rasa
- Pathya Vihar-Abhyanga ,Mardan, Samvahan, Vishram, Shayanas
- Apathya Vihar–Sheeta Vayu, Chinta, Prajagara, vegadharan, Anasha n Chardi, Shaman.

**3.0 Similarities between Cervical Spondylosis and Manyastambha**

**Table no. 01 Etiological factors:**

According to Modern	According to Ayurved
Age Factor	Vaya
Improper posture	Upaveshanam Urdhwaneerikshan
Trauma	Abhighaat

**Table no.02 Clinical Features:**

According to Modern	According to Ayurved
Pain	Ruka
Stiffness	Stambha
Vertigo	Bhrama
Occipital Headache	Shirashoola
Tingling Sensation in Hand	Hasta Chimchimayan

**Table no.03 Treatment:**

According to Modern	According to Ayurved
Local Application of Gel	Bahya Snehan
Hot Fomentation	Sthanik Swedan
Internal Medicines	Shaman, Shodhan
Rest	Vishram
Physiotherapy	Yoga

**4.0 Discussion:**

Cervical Spondylosis is emerging disease as one of the most common disease especially in urban population. It causes disturbance in day to day life due to severity of pain and it augments the quality of life. The degeneration of bone tissue and vitiation of vata moreover such degenerative type of condition with clinical manifestation can be considered as Vata Vyadhi. The above mentioned etiological factors of cervical spondylitis can cause the vitiation of vata, which in turn may lodge into the Asthi Dhatu due to the relation of Ashraya – Ashrayi Bhava of vata dosha and asthi dhatu. The vitiated vata lodges into the cervical region cause Khavaigunya especially in asthi of Greeva (neck) region. It also diminishes Shleshak Kapha along with asthi kshaya, which are the main entities found in the pathogenesis of cervical

spondylosis. This leads to the restriction of the movements of neck as the disease process progresses the osteophyte formation occurs between two adjacent vertebrae which causes the compression of nerve root passes through the inter vertebral foramen of the related vertebrae. The compression of nerve root exhibits the neurological symptoms like pain, tingling sensation, numbness etc. in the related area of the nerve supply. The vertebral artery compression exhibits the symptoms like vertigo, headache etc. Sometimes the local tenderness is also found.

### 5.0 Conclusion:

Cervical spondylosis is a age related degenerative disorder. Pathology starts at C5-6 and C6-7 vertebrae and gradually degenerate the annulus fibrosis and reduced intervertebral discs space and formation of osteophyte presenting with headache, restricted movement, and stiffness. There is no such classical disease which can be equated precisely with cervical spondylosis, but on the basis of core pathogenesis, this condition can be considered as manyastambha. Ayurvedic therapy addresses the most fundamental cause of the problem. There are different treatment modalities available in Ayurveda for such conditions.

### References:

1. Williams M. Monier (1995), Sanskrit English Dictionary Reprint; Motilal Banarasidas Publisher, (page no –789)
2. Medicine: API Textbook of Medicine; The Association of Physicians of India, Mumbai, 7th Edition, 2003 (page no –885, 886)
1. Maheshwari J (2007), Essential Orthopaedics, New Delhi: Mehta Publishers J.
2. Joshi J and Kotwal P (2011), Essentials of Orthopaedics and Applied Physiotherapy New Delhi: Elsevier.
3. Gayadas, Yadhavaji Trikamaji (2003), Sushruta Samhita Varanasi Choukhambha Surabharati Prakashan.
4. Yadhavaji Trikamaji (2013) Agnivesa Charak Samhita Reprint Varanasi: Choukhambha Publication.
5. Tripathi B (2000), Madhava Nidan vol 1, 2, Varanasi Choukhambha Surabharati Prakashan.
6. Shukla V. (2001), Kayachikitsa vol-4, Varanasi: Choukhambha surabharati Prakashan.
7. Kasture H. S (1993): Ayurvediya Panchakarma Vijnana :Baidyanath Ayurveda Bhavana Nagpur.
8. Wadher Rupesh (may-June 2017) Clinical evaluation of tikta Kshira Basti and Patrapinda Sveda in Cervical Spondylosis (Asthigata Vata). Journal of Ayurveda and Integrated Medical Sciences. Vol 2, Issue 3.
9. Kasture H. S (1993): Ayurvediya Panchakarma Vijnana :Baidyanath Ayurveda Bhavana Nagpur.
10. Wadher Rupesh (may-June 2017) Clinical evaluation of tikta Kshira Basti and Patrapinda Sveda in Cervical Spondylosis (Asthigata Vata). Journal of Ayurveda and Integrated Medical Sciences. Vol 2, Issue 3.