



## "A COMPARATIVE CLINICAL STUDY OF KSHEERABALA TAILA NASYA AND VATAGAJANKUSHA RASA IN THE MANAGEMENT OF MANYASTAMBHA W.S.R TO CERVICAL SPONDYLOSIS"

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### ABSTRACT

Manyastambha, one of the commonest causes of neck pain is one such disease which throws light on the ill effects of changing of life style of modern human beings. As the advancement of busy, professional and social life, improper sitting posture in offices, factories, continuous and over exerting, jerky movements during travelling and sports – all these factors create undue pressure to the spinal cord and play a chief role in producing the disease. Some of the studies revealed that its prevalence is more in males. The occurrence of Cervical Spondylosis is 96% in women older than 70 yrs. 60-70% women and 85% of men show changes related with cervical spondylosis by the age 45. Cervical Spondylosis for clinical identification can be compared with manyastambha, apabahuka etc, where Nasya karma could be effective, economical and affordable treatment modality. The formulations KsheerabalatailanaNasya & Vatagajankusha rasa is indicated, especially in treating Urdhwajatrugataroga

**KEYWORDS :** Manyastambha, apabahuka, nasya, ksheerabala taila nasya, vatagajankusha rasa, urdhwajatrugata roga

### INTRODUCTION:

The health state is the harmonious balance between the three dosha; *Vata*, *Pitta* and *Kapha*. The imbalance between these three causes the disease state. Changing of life style of human being in modern era has created several disharmonies in his biological system. As the advancement of busy, professional and social life, improper sitting posture in offices, factories as well as working at home, continuous and over exerting jerky movements during travelling and sports – all these factors create undue pressure to the spinal cord.

Cervical Spondylosis is one of the degenerative conditions of the cervical spine. It was commonly seen in old age, but nowadays it is encountered in young and middle age people. In males the prevalence is 100% by age 70 yrs, 96% in women older than 70 yrs. 60-70% women and 85% of men show changes related with cervical spondylosis by the age 45<sup>5</sup>.

Cervical Spondylosis for clinical identification can be compared with *manyastambha*, *apabahuka* and such disorders<sup>7,8</sup>. All the Acharyas have highlighted the extensive utility of *Nasya karma* in the management of *vataja vikara*<sup>9</sup> where in *Nasya karma*<sup>10,11,12,13</sup> could be the effective, economical and affordable treatment modality.

### Objectives Of The Study:

1. To evaluate the efficacy of *Ksheerabalatailana Nasya* in *Manyastambha*.
2. To evaluate the efficacy of *Vatagajankusha Rasa* in *Manyastambha*.
3. To evaluate the combined therapeutic effect of *Ksheerabalatailana Nasya* and *Vatagajankusha Rasa* in *Manyastambha*.
4. To compare the individual and synergetic effect of *Ksheerabalatailana Nasya* and *Vatagajankusha Rasa* in *Manyastambha*.

### MATERIALS AND METHODS -

#### Study Design:

It is an open label comparative clinical study with pre and post-test design wherein a minimum 30 patients suffering from *Manyastambha* will be selected irrespective of their gender, caste and creed. Investigations and the parameters of signs and symptoms will be scored on the basis of standard method and will be analysed statistically using appropriate test.

### Intervention:

Thirty patients are divided into three groups.

- 1) Group I-*Ksheerabala Taila nasya* 6 bindu *pramana* in each nostril once a day for 14 days.
- 2) Group II -- *Vatagajankusha Rasa* - 1 tab of 250 mg thrice a day for 14 days.
- 3) Group III-*Ksheerabala Taila nasya* 6 bindu *pramana* in each nostril once a day for 14 days and *Vatagajankusha Rasa* - 1 tab of 250 mg thrice a day for 14 days.

### Inclusion Criteria:

- Patients presenting with *pratyatma lakshana* of *Manyastambha* (Cervical Spondylosis).
- Patients of either sex aged between 16 to 70 years.
- Patient willing and able to participate in the study for 2 weeks.
- Patient indicated for *nasya*.

### Exclusion Criteria:

- Patients showing Cervical Spondylosis features due to Fracture, RA, Osteoporosis.
- Patients contra-indicated for *Nasya*.

### Assessment Criteria:

The full details of history and physical examination of the patients will be recorded as per the pro forma. Clinical assessment will be done before treatment, during the treatment and at the end of the treatment. The assessment of pain can be done using **Visual Analogue Scale (VAS)** and assessment of the movement can be done with **Goniometry, Neck Disability Index (NDI), Short Form 12 (SF 12) & Patient Specific Function Scale (PSFS)**. The laboratory investigations will be carried out before and after treatment.

### Subjective Parameters:

- *Samyak lakshanas* of *Nasya karma*
- Neck pain
- Stiffness
- Weakness
- Clumsy finger movements
- Vertigo
- Radiating pain to occipito frontal region, shoulder down to both arms.
- Paraesthesia

**Objective Parameters:**

- Tenderness over cervical region
- Movements of neck painful/restricted
- Sensory loss in upper limbs.
- Neurologic deficit.
- Power of hand muscles
- Reflexes of hand ligaments

**Investigations:**

- Hematological – TC, DC, ESR, Hb%, Serum Calcium
- Urological – Urine sugar, Urine Albumin
- Radiological – X-RAY (Cervical spine AP and lateral)

**Observations:**

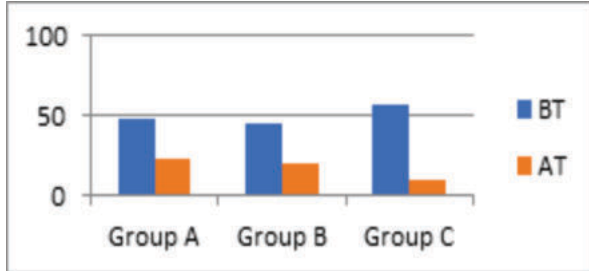


Chart No:01 Pain

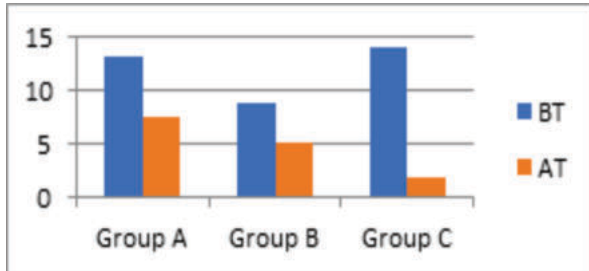


Chart No: 02 Neck Disability Index

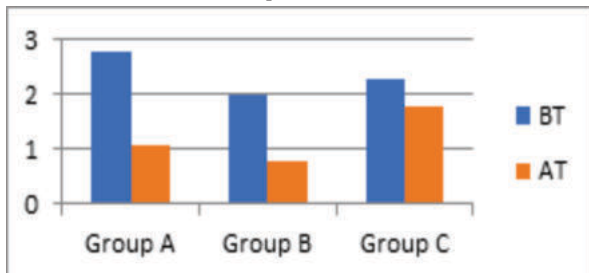


Chart No: 03 Radiating Pain

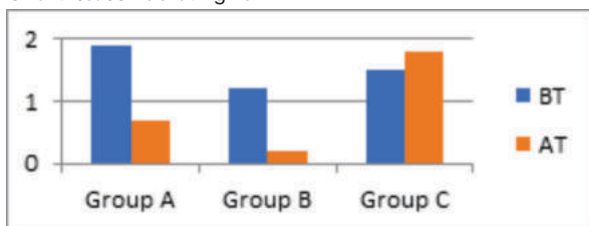


Chart No: 04 Tenderness

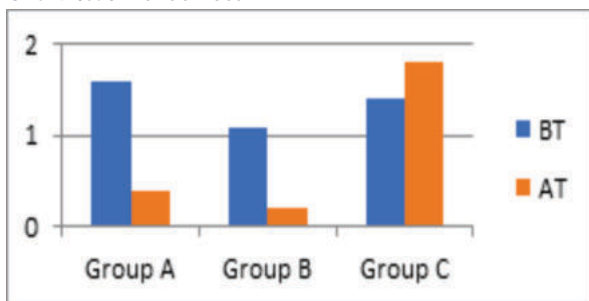


Chart No: 05 Parasthesia

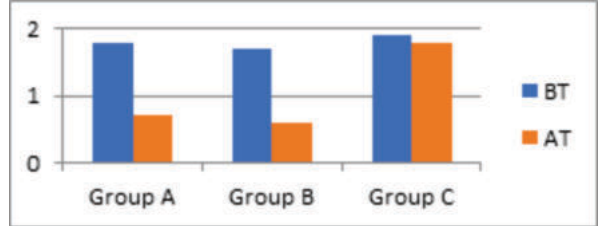


Chart No: 06 Sensory Loss Of Upper Limbs

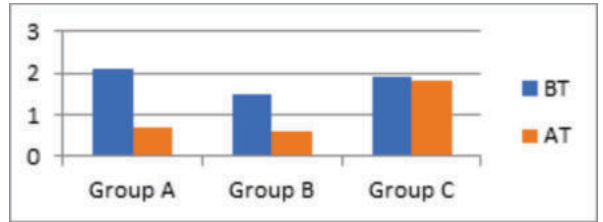


Chart No: 07 Neurological Deficit

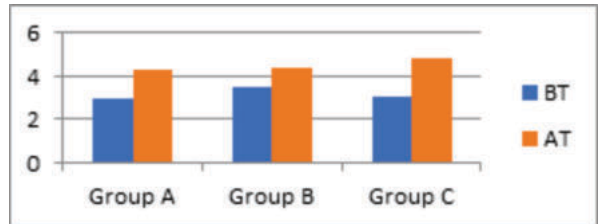


Chart No: 08 Power Of Hand Muscles

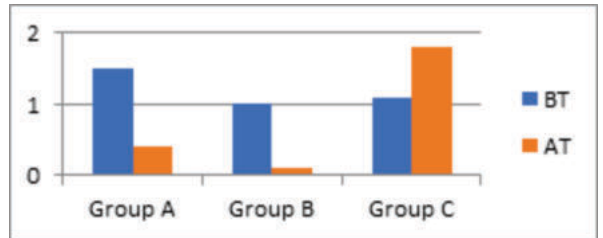


Chart No: 09 Clumsy Finger Movements

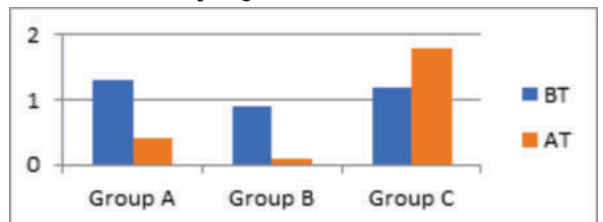


Chart No: 10 Vertigo

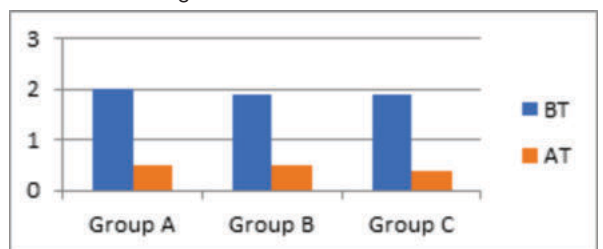


Chart No:11 Weakness

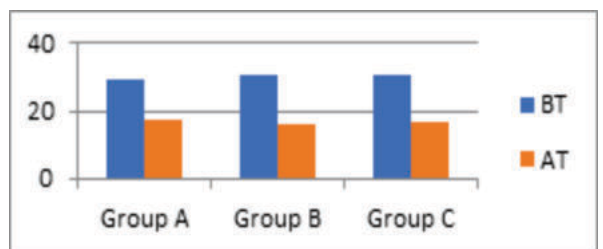


Chart No: 12 SF-12 Questionnaire

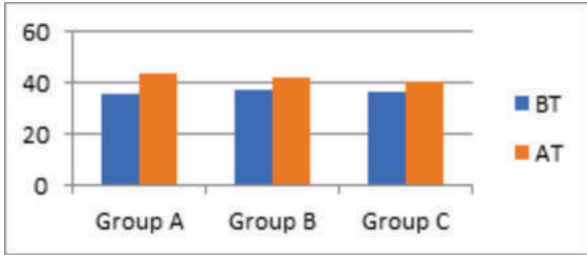


Chart No: 13 Flexion Of Neck

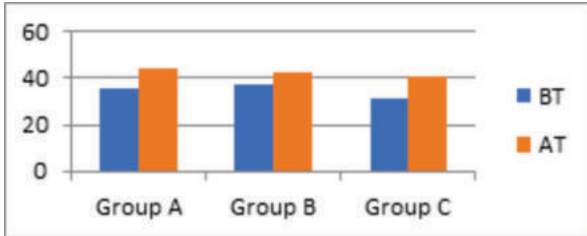


Chart No: 14 Extension Of Neck

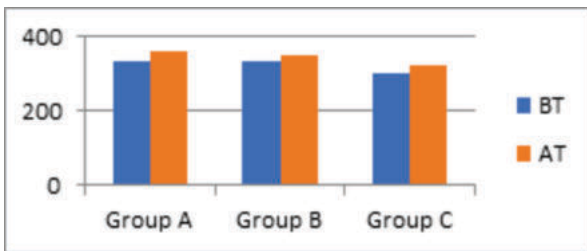


Chart No: 15 Neck Rotation

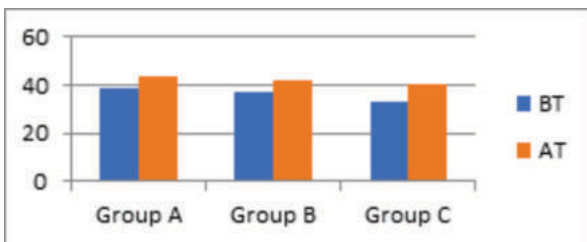


Chart No: 16 Rt Lateral Flexion

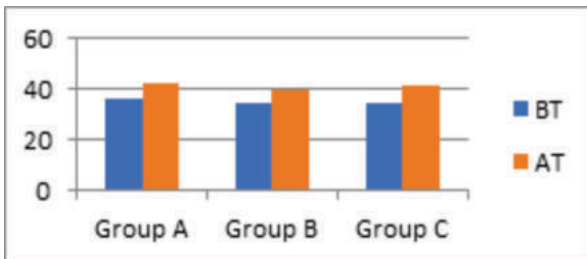


Chart No: 17 Lt Lateral Flexion

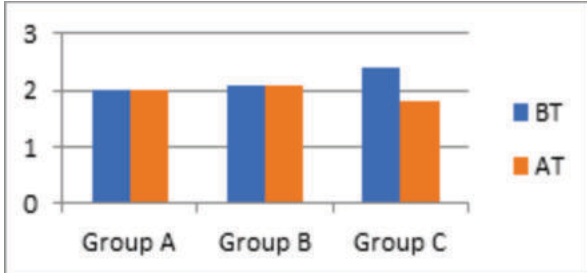


Chart No: 18 Reflexes Of Hand Ligaments

**RESULT:**

**The Total Effect Of The Therapy As Per The Group**

- Total Effect Of Therapy On Group A -44.690%
- Total Effect Of Therapy On Group B -46.203%
- Total Effect Of Therapy On Group C -57.105%

**CONCLUSION:**

By observing beginning from the screening of the patients till the end of the follow-up period one can arrive at the following conclusion:-

1. Total cure was not seen in all the three groups namely Group A (KsheerabalatailaNasya), Group B (Vatagajankusha rasa), Group C (KsheerabalatailaNasya & Vatagajankusha rasa).
2. Both the Nasya karma and Vatagajankusha rasa are effective in producing marked improvement by relieving the symptoms of Manyastambha in different proportions.
3. Vatagajankusha rasa is alone sufficient to combat the milder symptoms and Manyastambha of recent onset.
4. Nasya karma is more preferable in chronic and advanced stage of Manyastambha.
5. Vatagajankusharasa shown maximum remission in symptoms like tenderness, clumsy finger movements, Vertigo, pain, radiating pain.
6. KsheerabalatailaNasya shown maximum remission in symptoms like radiating pain, parasthesia, pain, clumsy finger movements, power of hand muscles.
7. Both showed marked relief in remission of the symptoms like radiating pain, clumsy finger movements, tenderness, pain.
8. Vata dominant symptoms likely to be responding to snehayuktaupachara both bahya and abhyantara. Moreover, selection of ksheerabalatailaNasya was eminently working against vitiated vata. As per the classics also urdhwajatrugatavikara best responds to brimhananasya, Hence the purpose of selection of Nasya karma found effective in tackling with Manyastambha.
9. Vatagajankusha rasa contains drugs namely rasa sindura, nirgundipatraswarasa, agnimanthachoorana, shuddhagandhaka is said to reduce the vata, thus reducing all the symptoms of manyastambha.
10. KsheerabalatailaNasya contains drugs namely balamoolatwak, go ksheera&tilatailatailata which is said to reduce the vata and thus reducing the symptoms of the Manyastambha.
11. Both the ksheerabalatailata and Vatagajankusha rasa is useful in reducing the symptoms and is cost effective for the common people.
12. Though shorter duration & smaller group subjects was studied about the effect of vatagajankusha rasa along with KsheerabalatailataNasya found more effective in comparison. This suggests that vatavyadhi like Manyastambha is best managed with clubbed therapy using Vatagajankusha rasa orally and Ksheerabalatailata Nasya to get assured result.

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