



EFFICACY OF PANCHKARMA TREATMENT IN ANKYLOSING SPONDYLITIS- A CASE STUDY

Ayurveda

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ABSTRACT

Ankylosing spondylitis is a chronic inflammatory disease primarily affecting the spine and sacroiliac joint. Many patients are suffering from this disease from a long time but do not find any authentic treatment. This case illustrates the potential of ayurvedic medications and panchkarma therapies in the management of ankylosing spondylitis. A 48 year old man consulted in OPD of CBPACS, with complaints of gradually progressive lowerback pain alongwith stiffness in neck, unable to move neck and rolling himself on the bed & prediagnosed case of ankylosing spondylitis. Treatment was done with ayurvedic medications and panchkarma procedures in two phases. In 1st phase Abhyang, Patrapindpottalisvedana and Nadisvedana for 15 days, in 2nd phase Greevabasti, Patrapindpottalisvedana and Sarvang Vashpasveda were given for 18 days. According to BASFI patient got 30% functional improvement and 16.66% anatomical improvement after first phase and 45% functional improvement and 38.88 % anatomical improvement after second phase treatment.

KEYWORDS

Ankylosing spondylitis, Patrapindpottali svedana, Greevabasti, Sarvang svedana

INTRODUCTION

Ankylosing spondylitis is a chronic inflammatory disease primarily affecting the spine and sacroiliac joints. Chronic inflammation progresses to bony Ankylosis of joints of the spinal column and occasionally of major limb joints, resulting in fused vertebrae's and rigid spine. Ankylosing Spondylitis has a genetic cause identified in 90% of people diagnosed with the disease known as HLA-B27 gene¹

Ankylosing Spondylitis (AS) can develop at any time from the teenage years onwards. It is three times more common in men than women. The condition usually occurs between 20 to 35 years of age, and rarely starts in old age. Musculoskeletal pain, stiffness, and immobility of spine due to AS is a major burden. The prevalence of Ankylosing Spondylitis in India is 0.03 % as per survey conducted by bone and joint decade India from 2004 to 2010²

According to Ayurveda this disease can be compared with Asthimajjagata vata. Symptoms of Asthimajjagata vata include Asthibheda (stabbing pain in bone), Parvabheda (pain in joints of fingers), Sandhishool (pain in joints), Mansa kshaya (muscle loss) and Balakshaya (decreased vitality and strength), Aswapana (sleeplessness), Satataruka (continuous pain)³ and are similar to those found in the cases of Ankylosing spondylitis. Vinamata (bending of the body) is the manifestation of Majjavrittavata⁴ which can be compared with kyphosis.

Symptoms

Pain and stiffness- constant pain and stiffness in lower back, buttock and hip that continue for more than three month, spondylitis often starts around the sacroiliac joints, where the sacrum (lower major part of the spine) joins the Ilium bone of the pelvis in the lower back region.

Bony fusion: Ankylosing spondylitis can cause an overgrowth of the bones, which may lead to abnormal joining, called bony fusion, fusion affecting bones of neck, back or hips may impair a person's ability to perform routine activities. Fusion of the ribs to the spine or May limits a person's ability to expand his chest when taking a deep breath.

Pain in ligaments and tendons: Spondylitis also may affect some of the tendons and ligaments that attached to the bone. Tendonitis (inflammation of tendon) may cause pain and stiffness in the area behind or beneath the heel, such as the Achilles tendon at the back of the ankle.

CASE REPORT

A 48 year old man consulted in OPD for complaints of gradually progressive lower back pain along with Stiffness in whole spine.

Patient name: - ABC

Age and sex – 48 year, Male

Built – Medium

Duration of treatment: -

1st phase of treatment – 23/03/17 to 07/04/17,

2nd phase of treatment – 19/06/17 to 07/07/17

OPD/IPD No.– 2xxx1/1xx1 and 5xx45/3xx0

Address – Delhi

Chief Complaints:

Pain, tenderness and spasticity from cervical to sacroiliac region since last 10 years Forward head posture, upper back curved forward (Kyphosis) low back was flat.

Restricted movement of neck and both upper limbs with movement range up to 45 degrees.

H/O Present illness –

Patient was asymptomatic till 10 years ago when gradually progressive lower back pain along with stiffness in neck to whole spine. He is unable to move his neck and rolling himself on the bed while lying down, he was taking analgesic and other prescribe allopathic medicine for past 10 years but did not get any relief. So for better treatment he came to the OPD.

Past illness –

Patient is a known case of diabetes mellitus and hypertension.

Investigation–

Blood Sugar fasting – 98.56 mg/dl and PP - 132 mg/dl, HbA1c – 5.8 %, HLA-B27- positive X-ray LS-SPINE shows features of Ankylosing Spondylosis

Diagnosis-

Patient was prediagnosed case of Ankylosing spondylitis since 8 years. According to Ayurveda patient was diagnosed as a case of Asthimajjagata vata.

Table-1 Assessment Criteria:-

Bath Ankylosing spondylitis Functional index (BASFI)⁵ – The condition of patient is assessed on a scale from 0 to 10 digits (0= easy, 10 = impossible)

The first eight questions evaluate activities related to functional limitations due to the course of this inflammatory disease. The final two questions evaluate the patient's ability to cope with everyday life.

TOTAL TREATMENT SCHEDULE– Shaman chikitsa -

1. Ajmodadi Churna 3gm twice a day
2. Dashmool kwath -40 ml Bd

Panchkarma therapy-**Phase-1st**

1. Abhyanga⁶-Balaashwagandha lakshadi oil⁷
2. Patrapindapottali svedan⁸ – Bala ashwagandhalakshadi oil⁷
3. Nadisveda – Dashmool kwath¹⁰

Phase-2nd

1. Greevabasti¹¹- Balaashwagandhalakshadi oil
2. Patrapindapottalisvedan– Balaashwagandhalakshadi oil
3. Sarvanga vashpasveda¹² with Dashmool kwath

TABLE -2 RESULTS

S.N.	Domain	Score at the time of admission	After 1 st phase	After 2 nd phase
1	Putting on your socks or tights without help or aids (e.g. sock aids)?	7	5	4
2	Bending forward from the waist to pick up a pen from the floor without any aid?	7	4	4
3	Reaching up to high shelf without help or aids (e.g. helping hand)?	7	5	4
4	Getting up out of an armless dining room chair without using your hands or any other help?	8	6	4
5	Getting up off the floor without any help from lying on your back?	8	6	4
6	Standing unsupported for 10 minutes without discomfort?	8	6	5
7	Climbing 12-15 steps without using a handrail or walking aids (one foot one each step)	6	4	4
8	Looking over your shoulder without turning your body?	9	6	4
9	Doing physically demanding activities (e.g. physiotherapy exercise ,gardening and sport)	9	7	5
10	Doing a full day activities whether it be at home or work?	9	8	6
Total		78	57	44

Average Score of functional improvement: - Total score of 1 to 8 activities /8

Average score of anatomical improvement – Total score of 9 to 10 activity /2

Table-3 Functional improvement:-

Parameter	BT	AT 1 st Phase	AT 2 nd Phase
BASFI	7.5	5.25	4.12
Difference	0	2.25	3.38
Percentage of relief	0	30 %	45 %

Table-4 Anatomical improvement

Parameter	BT	AT 1 st Phase	AT 2 nd Phase
BASFI	9	7.5	5.5
Difference	0	1.5	3.5
Percentage of relief	0	16.66 %	38.88 %

DISCUSSION:-

According to Ayurveda this disease can be compared with Asthimajagata vata. Symptoms of Asthimajagata vata in this case include Sandhishool (pain in joints), Mansa kshaya (muscle loss) and Balakshaya (decreased vitality and strength), Aswapana (sleeplessness) and Satataruka (continuous pain).The goals in the treatment of Ankylosing spondylitis are to reduce pain and stiffness, maintain a good posture, prevent deformity and preserve the ability to perform normal activities. General principle of treatment of avarana janya Vatavyadhi¹³ was adopted in present study along with medicine which can act as brihana dravya for both Asthi and Majja dhatu. In this case snehana followed by svedana was done by Abhyanga and Patrapindapottali sveda. Abhyanga¹⁴ increases the strength of muscles, nourishes body and reduces pain. Patrapindapottali sveda helps in reducing the stiffness between vertebrae, provides relief from pain while at the same time rejuvenates and strengthens the soft tissue between intervertebral spaces¹⁵. Nadisveda with dashmool kwath helps to reduce pain and stiffness of the joints and improves mobility. In IInd sitting patient was give sarvang vashpa sveda with dashmool kwath. It helped in reducing the pain and stiffness of all joints of body. Greevabasti is useful in spondylosis and is balya & vataghna in properties. It is work by improving the blood circulation of affected part¹⁶.

With combined effect of Ayurvedic medicine and Panchkarma therapy we were able to reduce discomfort and improve the function of patient. Ajmodadi churna is ama pachak, vataghna and shoalaghna in nature and is used in painful conditions with stiffness,¹⁷ Dashmool kwath is having tridoshnashak property and balances Vata Pitta and Kapha. It also has anti-inflammatory and analgesic effects. Balaashwagandha lakshadi tail is balya in nature and is effective in treating weakness of muscles, bone and joints.

According to parameter of Bath Ankylosing spondylitis Functional index (BASFI) - we asked to patient 8 types of question regarding their daily routine work and guess the improvement before and after treatment. The patient got 30 % improvement after first phase treatment and 45% improvement after 2nd phase treatment in their daily routine work for check functional improvement of patient. And last 2 types of questions are related to understand anatomical improvement. In this case study we got 16.66% improvement in anatomical functions after 1st phase of treatment and 38.88 % improvement after 2nd phase.

At the end of treatment, patients had significantly relief in complaints, neck stiffness decreased and ROM is not restricted. Feeling of heaviness and numbness in upper limbs relieved. Patient overall quality of life improved as he was able to do routine work without any stress.

Patient was able to reduce the intake of painkillers, and got significant improvement in stiffness. Patient is also able to commute on his bike alone and without any support.

CONCLUSION

According to observations this can be safely concluded that combined effect of Ayurvedic treatment and panchkarma therapy are significantly effective in the management of ankylosing spondylosis. However it is advisable to repeat Panchkarma therapies to achieve better results and further work should be done by conducting clinical trials on large samples to draw the final conclusion.

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