



Case Study

AYURVEDIC MANAGEMENT OF *KATIGRAHA* (LUMBAR SPONDYLOSIS)

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ABSTRACT

Among the various causes of low back ache lumbar spondylosis is one of the degenerative spine diseases. Lumbar Spondylosis (*Katigraha*) is an important clinical, social, economic and public health problem affecting the population worldwide. About 39% of population present complaints of low back ache between 40 to 80 years of age. The clinical manifestations of Lumbar spondylosis are low back pain, stiffness, weakness and intensity of pain more during hyperextension of spine which can be correlated with *Katigraha* in Ayurveda. In this study patient with complaints of pain in lower back with morning stiffness and the intensity of pain increased after daily workouts approached to the *Kayachikitsa* OPD. The treatment plan was *Panchakarma* therapy *Katibasti* followed by *Patrapinda sweda* for 15 days along with *Shaman chikitsa* for a period of 1 month. Following this protocol, the patient got approximately 75% relief in all sign and symptoms. There was reduction in ODI (Oswestry disability index) and improvement in SLR and other physical examinations. Based on the case study, it can be concluded that *Katibasti* followed by *Patrapinda sweda* along with *Shaman* therapy is effective in the management of *Katigraha* (lumbar spondylosis).

INTRODUCTION

Lumbar spondylosis is a chronic, non-inflammatory disease caused by degeneration of lumbar disc and/or facet joints [1]. It is an important clinical, social and public health problem affecting 38-85% of worldwide population [2]. Spondylosis is the degenerative disease of the vertebral column characterized by wear and tear of spinal discs and facet joints often resulting in a spectrum of symptoms including lower back pain, stiffness, numbness, reduced range of motion and weakness in the legs. In some cases degenerative changes in the lower back region leads to compression of the spinal nerve root resulting in low back pain which radiates to lower extremities. Disc changes occur at the level of L4- L5 and L5-S1 mainly, but upper lumbar vertebrae are occasionally involved[3].

According to *Acharya Charaka*, *Katigraha* is included under 80 *Vatananatmaja Vikara*[4]. In *Gad nigrha* by *Acharya Shodhala*, it is mentioned that when itself *Vayu* only or *Vayu* along with *Ama dosha* got vitiated in *Kati Pradesh* it causes pain and stiffness in the same region which is termed as *Katigraha*.

वायुः कट्प्रितः शुद्धः सामो वा जनयेत् रूजम।

कटिग्रहः स विज्ञेयः पंगुः सकथि द्वाश्रितः ॥ (वात रोगाधिकार, 19/160)

In Ayurved, *Vata shaman* therapies like *Patrapinda sweda*, *Katibasti* along with *Shaman chikitsa* is advised in the management of *Katigraha*.

Case Presentation

A 31 years young male patient came to OPD of *Kayachikitsa* department of this institute with complaints of pain in lower back area while bending with morning stiffness (≥ 45 minutes) in the hip region. He also suffered from difficulty in walking and generalized weakness since last 1 month. His condition gradually worsened and the intensity of pain aggravates after walking and doing heavy work. His sleep was also disturbed due to severe pain while changing posture. He had consulted nearest medical practitioner from Govt. Hospital and was diagnosed as Degenerative Lumbar Spondylosis. He had taken

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analgesics and NSAIDs but got mild relief only. After some days he again developed the same complaints with severe intensity of pain along with stiffness.

History of Past Illness

There was no any past history of hypertension, diabetes mellitus or endocrinal disorders. There was no any history of trauma or accident.

Personal History

- Appetite- Good
- Bowel- Irregular
- Diet- Mixed
- Micturition- Normal
- Sleep- Disturbed

Astavidha Pariksha

Nadi (pulse rate)	Niyamit, Vata-pittaj
Mutra (urination)	Samanya, lshat peeta varna
Mala (excretory products)	Niraam, Vega- 2 times
Jihwa (tongue)	Anavrit
Shabda (sound)	Spashta
Sparsha (touch)	Samsheetoshna
Drik (vision)	Samanya
Akriti (built)	Samanya

Dasvidha Pariksha

Prakriti (body constitution)	Vata-pittaj
Vikriti	Prakriti sam samveta
Saara	Manshsar
Samhanan	Madhyam
Praman	Madhyam
Satmya	Laghu aahar satmya
Satwa	Madhyam
Aahar Shakti	Madhyam
Vyayam Shakti	Avara
Vaya	Madhyam

Systemic examination

- CNS- Conscious, well oriented to time, place and person.
- CVS- S1, S2 heard normally and no murmurs heard
- Respiratory System- Air entry adequate bilateral side. No added sound heard.

Physical examinations

On inspection there was lack of lumbar lordosis i.e., flat Lumbar spine was found. On palpation over the LS spine pain was observed in center of the back or spinal region. Limited range of motion was found with pain in LS spine on flexion. Gait of the patient was

Family history

His immediate family members didn't have any similar problems.

Vitals

- Blood pressure – 124/80mmhg
- Pulse rate- 98/min
- Temperature – 97.5F
- Weight- 70Kg

General Examination

- Pallor – Absent
- Icterus – Absent
- Lymphadenopathy – Absent
- Edema – Absent

normal. Superficial and deep tendon reflexes were within normal limits.

On further examination Straight Leg Raising (SLR) test was found positive (≤ 45 degree) in both legs with restricted hip joint movement.

Investigations

- MRI (dated- 19/09/2023) of the Lumbar spine revealed disc bulge with early disc desiccation changes at L5-S1/ S1-S2 levels. Near complete lumbarization S1 vertebrae, prominent transverse process both sides with early degenerative

spondylosis L/S spine in the form straightened lumbar curvature.

- Hematological parameters were within normal limits.
- HLA-B27 (qualitative) antigen test was negative.

As per the presenting symptoms and by MRI of the lumbosacral spine, the case was diagnosed as *Katigraha* (Lumbar spondylosis). The patient was

advised for admission at the male IPD of *Kayachikitsa* Department of this Institute.

Therapeutic Interventions

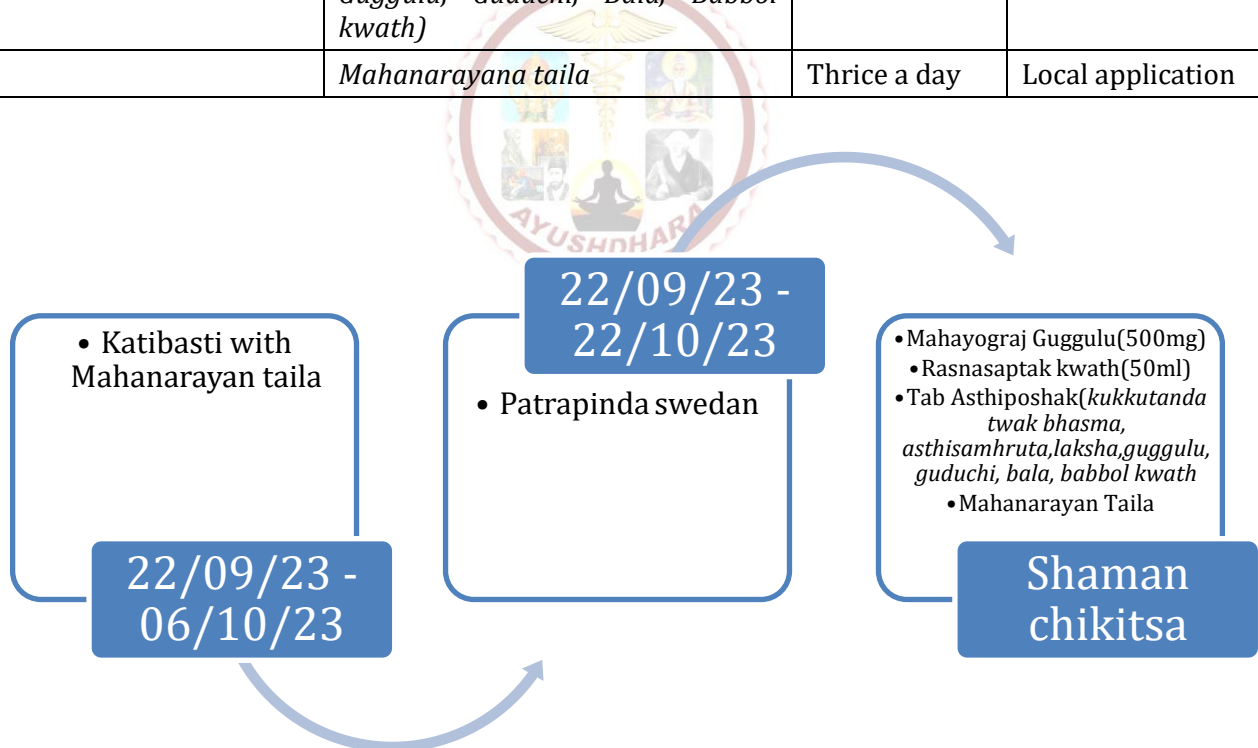
Patrapinda Swedan and *Katibasti* procedure for 15 days (Table-1) along with *Shamana Chikitsa* (Table-2) for 1 month from the starting day were given.

Table 1: Patrapinda and Katibasti Procedure

Date	Procedure	Drug	Time period
22/09/2023-06/10/2023	<i>Katibasti</i>	<i>Mahanarayan Taila</i>	For 15 days at the morning time
22/09/23 - 06/10/23	<i>Patrapinda swedan</i>	<i>Eranda, Arka, Nirgundi, Dhatura, Shigru, Chinch, Til taila</i>	For 15 days after <i>Katibasti</i> procedure

Table 2: Shaman Chikitsa- During the procedure

Date	Drug & dose	Time period	Route
22/09/2023 - 22/10/2023	<i>Mahayograj gugglu</i> (500mg)	Twice a day	Oral
	<i>Rasnasaptak kwatha</i> (50ml)	Twice a day	Oral
	<i>Tab Asthiposhak</i> (<i>Kukkutanda twak bhasma, Asthisamhruta, laksha, Guggulu, Guduchi, Bala, Babbol kwath</i>)	Twice a day	Oral
	<i>Mahanarayana taila</i>	Thrice a day	Local application



Assessment Criteria and Outcomes

Assessment criteria based on the signs and symptoms of *Katigraha* as per Ayurveda text, SLR test for range of movement and ODI (Oswestry disability index) scale which were assessed before and after treatment and follow up (Table 3 & 4).

Table 3: Gradation of symptoms for Assessment

Symptoms	Criteria	Grading
<i>Ruja</i> (Pain)	No pain while walking	0
	Mild pain while walking	1
	Moderate pain while walking	2
	Severe pain while walking	3
<i>Stambha</i> (Stiffness)	No stiffness	0
	Stiffness for 15-30 min	1
	Stiffness for 30-45 min	2
	Stiffness \geq 1 hour	3
Restricted movement (Hip joints)	Normal movement	0
	Mild restricted movement	1
	Moderate restricted movement	2
	Severe restricted movement	3
Gait	Unchanged	0
	Occasionally changed	1
	Walk with support	2
	Unable to walk	3
Sleep	Normal	0
	Occasionally disturbed	1
	Frequently disturbed	2
	Unable to sleep due to pain	3
SLR Test	No pain at 90 degree	0
	Pain between 70-90 degree	1
	Pain between 50-70 degree	2
	Pain between 30-50 degree	3
	Pain below 30 degree	4
ODI scale	Minimal disability (0%-20%)	0
	Moderate disability (21%-40%)	1
	Severe disability (41%-60%)	2
	Crippled (61%-80%)	3
	Bedbound (81%-100%)	4
<ul style="list-style-type: none"> • ODI scale is composed of 10 questions. Each question is rated on 6 points (0-5) scale measuring activities like personal care, sleep, social life etc. • ODI – Oswestry disability Index, SLR- Straight leg raising 		

VAS scale

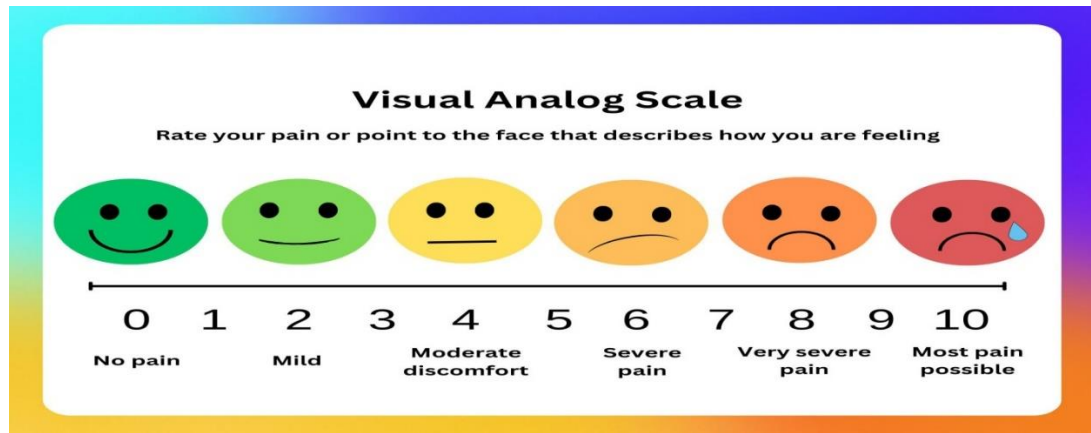


Table 4: Assessment before, after treatment and follow up

Days/ symptoms	1 st visit	15 th day	30 th day	60 th day
<i>Ruja</i>	3	2	1	0
<i>Stambha</i>	2	2	1	0
Movement of joints	2	2	1	1
Gait	1	1	0	0
Sleep	2	2	0	0
SLR	3	2	1	0
ODI	2	2	1	1
VAS scale	6	6	4	1

DISCUSSION

In *Katibasti* procedure *Vatanashak taila* is used. That warmed medicated oil does both the actions such as *Snehana* and *Swedana* which pacifies *Vata dosha* effectively. In *Katigraha*, *Vata dosha* is mainly involved. *Taila* possesses the opposite properties from *Vata dosha*. Hence *Katibasti* with *Mahanarayan taila* pacifies the vitiated *Vata dosha* and helps in *Samprapti Vighatana* (breaking the pathogenesis) of *Katigraha*. The heat applied over the affected region by the procedure of *Katibasti* helps in reducing these symptoms. In *Katigraha* degeneration is also a main cause which is due to depletion of *Snehabhava* by vitiated *Vata dosha*. Hence with this discussion *Snigdha Sweda* would be effective in treatment which is given in the form of *Katibasti*. Heat applied causes the Vasodilatation which increases the blood supply to the muscles that causes relaxation of muscles and tendons of the low back region [5]. It also improves the venous drainage, lymphatic supply and other metabolic processes which are responsible for the relief of pain, tenderness, stiffness. Also, the drugs used in *Taila* reaches to the underlying tissue after absorption through epidermis layer from which it enters into the blood circulation. This absorption depends upon the lipid solubility of the drugs. *Mahanarayan taila* contains drugs like *Dashmoola*, *Ashtavarga*, *Ashwagandha*, *Shatavari* etc[6]. *Dashmoola* has

properties like analgesic, anti-inflammatory, antipyretic action[7] which helps in reducing the symptoms of *Katigraha*.

Mahayograj Guggulu has properties like *Tridosha Shamak* (suppression of all *Dosha* but mainly suppress *Vata Dosha*), *Rasayana* (rejuvenating), *Vataghna*, *Deepan* and *Dhatuposhak* [8]. In *Katigraha* degeneration is a main cause due to *Vata dosha* which is pacified by *Dhatuposhak* and *Rasayan* properties of the same. *Rasnasaptak Kwath* contains ingredients like *Rasna*, *Amrutha (Guduchi)*, *Aargvadha*, *Devadaru*, *Trikantak (Gokshura)*, *Eranda*, *Punarnava* which is specially indicated in *Vatavyadhi* like *Uruhshoola*[9]. *Gokshura* has anti-inflammatory and analgesic properties[10] and *Devadaru* does *Vatakapha Shamak*, anti-inflammatory, analgesic action,[11] hence reduces the pain and stiffness associated with *Katigraha*. *Asthiposhak* tablet (*Kukkutanda twak bhasma*, *Asthisamhruta*, *Laksha*, *Guggulu*, *Guduchi*, *Bala*, *Babbol kwath*) gives strength to Bones. *Abhyanga* with *Mahanarayan Taila* is effective in all types of *Vatavyadhi* [12] hence reduces all the symptoms of *Vata dosha*.

After following 15 days of the treatment protocol, there was mild reduction in symptoms like *Ruja*, *stambha* and movement of joints. Meanwhile there was no change in SLR and ODI scale. But after

following the protocol for 1 month, patient got satisfactory relief from the symptoms. There was marked relief in pain and stiffness. Patient's gait and sleep quality was also improved. On further examination SLR test was found negative bilaterally and ODI score was also found improved from the 1st visit.

CONCLUSION

This case study highlights the efficacy of Ayurvedic interventions along with *Panchakarma* in managing chronic conditions like Lumbar Spondylosis. This organized treatment protocol ensured symptomatic relief and improved quality of life of the patient. On the basis of this case study, it can be concluded that *Katibasti* with *Mahanarayan Taila* followed by *Patrapinda Swedan* along with *Shamana Therapy* is effective in the management of *Katigraha*.

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