

An ayurvedic approach to the management of *Manyastambha* w. s. r. to cervical spondylosis: A case report

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ABSTRACT

BACKGROUND:

Modern man lives in an era of rapid modernisation, technological advancement, and an increasingly fast-paced lifestyle. The demands of professional and social life, coupled with increasing physical and psychological stress, have contributed to significant changes in lifestyle and occupational patterns leading to degenerative diseases, one such condition is *Manyastambha*, which is becoming increasingly common. Prolonged sitting, improper posture at the workplace, continuous work in a single position, repetitive activities, overexertion, and sudden or jerky movements during travel and sports can place excessive mechanical stress on the cervical spine leading to increased prevalence of *Manyastambha*. Persistent exposure to such stresses may lead to degenerative changes in the intervertebral discs and cervical vertebral structures, thereby contributing to the

development and progression of **Cervical Spondylosis**.

Aim: *Ayurveda* management of *Manyastambha* w.s.r to cervical spondylosis – A case study

Methods: The Study was primarily based on subjective assessment parameters

Results: The results were assessed based on subjective parameters

Conclusion: The combined Ayurvedic management including *Greeva Basti*, *Patra pottali sweda*, *nasya*, *abhyanga* demonstrated a remarkable improvement in the assessed subjective parameters

Keywords: *Manyastambha*; Cervical Spondylosis; cervical spine; *Greeva Basti*; *Patra pottali sweda*; *Abhyanga*; *Nasya*

Introduction

The present era is characterised by rapid changes in lifestyle, increasing occupational demands, and heightened physical and psychological stress. Sedentary work patterns, prolonged sitting and computer use, long-distance travel, inadequate physical activity, repetitive or

strenuous activities, and prolonged maintenance of faulty postures subject the cervical region to continuous mechanical and muscular stress.

These factors may result in sustained contraction and fatigue of the cervical musculature, leading to neck pain, stiffness, and restricted functional activities. Emotional stress and improper sleeping postures, particularly the use of excessively high pillows, may further aggravate cervical discomfort and disturb normal cervical alignment.

From an *Ayurvedic* perspective, *Vata Dosha*, being the principal *Dosha* responsible for movement and functional activities, is particularly susceptible to aggravation in such a fast-paced lifestyle. Hence, measures aimed at *Vata* pacification and restoration of *doshic* equilibrium are essential for maintaining physiological balance and preventing *Vata*-related disorders.

Neck pain (cervicalgia) is a common musculoskeletal problem, affecting nearly **two-thirds of the population** at some point in life, with a reported lifetime prevalence of **40–70%**.⁽¹⁻³⁾ Although less common than low back pain, neck pain can significantly impair daily functioning and may arise from cervical spine disorders or referred pathology from adjacent structures.⁽⁴⁾

The prevalence of cervical spondylotic changes increases markedly with age, with approximately **13% of men over 20 years** showing spondylosis compared with **98% of individuals over 70 years**.⁽⁵⁾ Persistent neck pain, particularly beyond six months, is associated with adverse psychological effects and greater functional impairment. The longer the pain persists, the greater the likelihood of chronicity, with up to **7% of patients developing chronic neck pain**.⁶⁻⁸

In *Ayurveda*, *Manyastambha* is described as a *Shula-pradhana Vata Nanatmaja Vyadhi* among the eighty *Vata* disorders, affecting the musculoskeletal system and impairing daily activities⁽⁹⁾. It

may be correlated with *Grivahundana*, *Greevastambha*, and *Manyagrah*⁽¹⁰⁻¹¹⁾ and, based on its clinical presentation, with cervical spondylosis. Cervical spondylosis is a degenerative disorder involving the cervical vertebrae and intervertebral discs.

Ayurvedic management emphasises *Guru*, *Snigdha*, and *Ushna* therapies to counter aggravated *Vata*, whereas modern management focuses on pain relief and preservation of mobility using analgesics, NSAIDs, and steroid injections, with surgery reserved for refractory advanced cases. Limitations of conventional treatment have encouraged interest in alternative therapeutic approaches.

According to *Ayurvedic* classics, *Manyastambha* can be managed with therapies such as *Nasya*, *Abhyanga*, and *Swedana*, which are commonly indicated in *Vata* disorders. Considering its *Samprapti*, drugs possessing *Vata-Kapha-hara* and *Balya* properties may be beneficial. *Snehana* and *Swedana* hold prime importance in *Vata Vyadhi* management, with *Swedana* particularly effective in relieving pain and stiffness.

Methodology

A 41-year-old male software engineer presented to the *Kayachikitsa* OPD of RRAMCH with chief complaints of neck pain, stiffness, occasional giddiness and headache, associated with pain, tingling, and numbness in the right hand.

History of Illness

A 41-year-old male, working as a software engineer, was apparently healthy 6 months prior to presentation, when he gradually developed neck pain followed by stiffness. He sought allopathic treatment, which provided temporary relief. However, over the preceding 2 weeks, his symptoms progressively worsened, with increased pain and swelling, prompting him to seek further evaluation and management at our hospital.

Family History: Nothing specific

Past History: No any H/O HTN, DM, TB

- ✓ No any H/O Injury or Trauma to neck

Past treatment History: Took NSAIDS and calcium supplements

Vayaktika vrittanta:

- ✓ Prolonged sitting without neck support
- ✓ Improper posture
- ✓ continuous work on the system for 10-12hrs
- ✓ Working in A.C room in cool temperature
- ✓ Ratri jagrana
- ✓ Irregular sleep pattern & Irregular meals

Ashta vidha Pariksha

- ✓ Nadi: Gati – 76bpm
Dosha – vatapittaja, krama – regular
- ✓ Mala: sankhya – 1/day
Regularity – regular
- ✓ Mutra: Sankhya – 4/day 1/N

Colour – slight yellow

- ✓ Jihva: varna – slightly pinkish
- ✓ Shabda: prakruta
- ✓ Sparsha: ruksha
- ✓ Drk: prakruta
- ✓ Akrti: madhyama

Dashavidha Pariksha

- ✓ Prakruti: vata pittaja
- ✓ Vikruti: vatapradhana kapha anubandha
- ✓ Sara: Madhyama
- ✓ Samhanan: madhyama
- ✓ Pramana: Madhyama
- ✓ Satmya: Madhyama
- ✓ Satva: Madhyama
- ✓ Abhyavarana shakti: Madhyama
- ✓ Jarana shakti: Madhyama
- ✓ Vyayamashakti: avara
- ✓ Vaya: Madhyama

Subjective Parameters

- ✓ Ruk (pain) in manyapradesha
- ✓ Stambha (stiffness) in manyapradesha
- ✓ Weakness
- ✓ Difficulty with fine finger movements
- ✓ Giddiness

Grading of Pain

Sl no.	Pain in Manyapradesha	Grading
a.	No pain	Grade -0
b.	Mild pain, can do strenuous work with difficulty	Grade - 1
c.	Moderate pain, can do the normal work with support	Grade -2
d.	Severe pain, unable to do work at all	Grade -3

Grading of stiffness

Sl no.	Stiffness in Manyapradesha	Grading
a.	No stiffness	Grade -0
b.	Mild stiffness, can do strenuous work with difficulty	Grade - 1
c.	Moderate stiffness , can do the normal work with support	Grade -2
d.	Severe stiffness with marked restriction of movement and inability to perform routine activities	Grade -3

Grading of weakness

Sl no.	Weakness	Grading
a.	No weakness	Grade -0
b.	Mild weakness, can do work	Grade - 1
c.	Weakness present , with difficulty performing routine activities	Grade -2

d.	Weakness with severely restricted movement	Grade -3
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Grading of difficulty with fine finger movements

Sl no.	Difficulty with fine finger movements	Grading
a.	Can do work unaffectedly	Grade -0
b.	can do strenuous work with difficulty	Grade - 1
c.	can do the normal work with difficulty	Grade -2
d.	inability to perform routine activities	Grade -3

Grading of giddiness

Sl no.	Difficulty with fine finger movements	Grading
a.	No giddiness	Grade -0
b.	Mild giddiness, can do work	Grade - 1
c.	Giddiness present , with difficulty performing routine activities	Grade -2
d.	Giddiness present, with severely restricted movement	Grade -3

Range of Movements- Flexion

Sl no.	Flexion	Grading
a.	No pain on movements	Grade -0
b.	Mild pain on movement	Grade - 1
c.	Moderate pain on movement	Grade -2
d.	Moderately severe pain aggravated by movement	Grade -3
e.	Severe pain on movement	Grade -4

Range of Movements- Extension

Sl no.	Extension	Grading
a.	No pain on movements	Grade -0
b.	Mild pain on movement	Grade - 1
c.	Moderate pain on movement	Grade -2
d.	Moderately severe pain aggravated by movement	Grade -3
e.	Severe pain on movement	Grade -4

Range of movements- lateral Bending

Sl no.	Lateral bending	Grading
a.	No pain on movements	Grade -0
b.	Mild pain on movement	Grade - 1
c.	Moderate pain on movement	Grade -2
d.	Moderately severe pain aggravated by movement	Grade -3
e.	Severe pain on movement	Grade -4

Range of Motion – Rotation

Sl no.	Rotation	Grading
a.	No pain on movements	Grade -0
b.	Mild pain on movement	Grade - 1
c.	Moderate pain on movement	Grade -2
d.	Moderately severe pain aggravated by movement	Grade -3
e.	Severe pain on movement	Grade -4

GENERAL EXAMINATION

- ✓ Tenderness + over midline
- ✓ Spasm +
- ✓ Rom: restricted movement of neck, not able to do flexion, extension and rotation of neck
- ✓ Spurling test: +

- ✓ Loss of cervical lordosis /straightening of the spine
- ✓ Osteophytes (smooth bony projection along joint margins)
- ✓ Reduction in joint space

INVESTIGATION

X-ray

THERAPEUTIC INTERVENTION

Sl. No.	Panchakarma treatment	Duration
1.	Abhyanga with <i>ksheerabala Taila</i>	7 days
2.	Patrapottali sweda	7 days
3.	Greeva Basti with <i>Ksheera Bala Taila</i>	7 days
4.	Nasya with <i>Anu Taila</i> (4 drops in each nostril)	7 days

Sl. No.	Shamana Aushadi	Dose	Duration
1.	Trayodashang Guggulu	500mg TID (A.F)	15 days
2.	Cap. Gandha Tailam	500mg BID (A.F)	15 days
3.	Tab. Mahavata Vidhwamsini	250mg BID (A.F)	15 days
4.	Dashamoola kwatha	15ml BID (B.F)	15 days

After 15 days

Sl. No.	Shamana Aushadi	Dose	Duration
1.	Cap. <i>Ksheerabala</i> 101 avarti	500mg BID(A.F)	15 days
2.	Trayodashang Guggulu	500mg BID (A.F)	15 days
3.	<i>Ashwagandha churna</i> with milk	5gm	15 days

Result

Table showing improvement in the subjective parameters

Sl.no.	Symptoms	BT	AT
1.	Pain in <i>Manyapradesha</i>	G ₃	G ₁
2.	Stiffness in <i>Manyapradesha</i>	G ₃	G ₁
3.	Weakness	G ₃	G ₁
4.	Difficulty with fine finger movements	G ₂	G ₀
5.	Giddiness	G ₃	G ₁

Table showing improvement in range of movements

Sl.no.	Range of Movements	BT	AT
1.	Flexion	G ₃	G ₁
2.	Extension	G ₄	G ₁
3.	Lateral bending	G ₄	G ₁
4.	Rotation	G ₄	G ₀

Discussion

Based on the clinical assessment, the following treatment protocol was adopted

❖ **Abhyanga with Ksheerabala Taila followed by Patra Pottali Sweda**

- ✓ It served as Both preparatory and therapeutic measures by counteracting the Raksha and *sheeta gunas* of aggravated *Vata*
- ✓ These procedures helped in relieving muscular spasm, reducing *Stambha*, improving local circulation and facilitating joint mobility.

❖ **Greeva Basti with Ksheerabala Taila**

- ✓ This was the Principal local therapy employed
- ✓ The *Snigdha*, *guru* and *Brimhana* properties of the *Taila* acted directly on the affected *Greeva* sandhi, pacifying localised *vata* and nourishing *Asthi* and *majja dhatus*
- ✓ Continuous contact of medicated oil over the cervical region allowed sustained absorption leading to reduction in pain, stiffness and restricted movements arresting further degenerative changes

❖ **Nasya with Anu Taila (Urdhvajatrugata Chikitsa)**

- ✓ Considering the involvement of the *urdhvajatrugata pradesha*, *Nasya* was administered
- ✓ “*Nasa hi siraso dvaram* “
- ✓ *Nasya* is the prime therapy for the *urdhvajatrugata Rogas*

❖ **The Shamana Aushadi supported both symptomatic relief and correcting the underlying Samprapti**

- ✓ **Mahavatavidhwamsini Rasa** being predominantly *vatahara* acts primarily at a level of *Sama vata* and *avarana* . It helps in *amapachana*, *srotoshodhana* and has potent *vedanasthapana*

property provides rapid pain relief .

- ✓ **Trayodashang Guggulu** is indicated in various *vata vyadhis* involving *asthi* and *sandhi*. It acts as *vata kapha shamaka*, *shothahara*, *shoolahara*, *Balya* and *brimhana* supporting *Dhatu* nourishment.

- ✓ **Gandha taila capsules** classically indicated in *asthi bhagna*, *asthi kshaya* and *vata vyadhi* , being *snigdha* and *brimhana* it counteracts *Rukshata* of aggravated *vata* . It's *Rasayana* Effect May help to slow degenerative progression

- ✓ **Dashamoola kwatha** provides anti inflammatory and *vata hara* effects

- ✓ **Ashwagandha churna** due to its *brimhana* and *rasayana* properties improves muscle strength and prevent further *dhatu kshaya*.

CONCLUSION

- ✓ The present case of **Manyastambha**, correlated with cervical spondylosis, demonstrated the potential of Ayurvedic management in reducing **neck pain, stiffness, restricted movements, and associated neurological symptoms**.

- ✓ The adopted therapeutic approach, incorporating **Greeva Basti, Patra Pinda Pottali Sweda, and appropriate internal medication**, showed improvement in the subjective parameters and functional status of the patient.

- ✓ The response may be attributed to the **Vata-Kapha-hara, Snehana, and Swedana** properties of the interventions, which help alleviate pain and stiffness and restore cervical mobility.

- ✓ Thus, *Ayurvedic* management may serve as a **safe and effective therapeutic approach for the symptomatic management of Manyastambha** (cervical spondylosis).

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