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Evaluation of the effect of *Panchtikta Ksheer Basti* in IVDP (Inter vertebral prolapsed disc): A case study

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Abstract:

Inter vertebral disc prolapsed is a condition in which there is pain, numbness, weakness, sensory or motor changes occur in the limbs. Low back pain is common symptom seen in the diseases of spine and most of the times it is found due to Inter vertebral Disc prolapsed. It mostly happens as a result of trauma or increased tension due to heavy weight lifting, sitting in wrong posture etc. About 80% cases of prolapsed of inter vertebral disc are traumatic in origin and about 15% of degenerative in origin. According to *ayurvedic* literature, the sign and symptoms of back pain due to IVDP can be correlated with *kativata* which is described under *vata vyadhi*. *Panchakarma* therapies like *basti*, *katibasti*, *sthanik snehan swedan* and *vata shamak* drugs are given internally to the patient and the results found are too good and effective. Here, in this case patient is having symptoms of pricking pain in back, back stiffness, unable to walk in straight posture due to disc degeneration of L3/L4, L4/L5 and L5/S1 with significant disc protrusion at L3/L4 level and disc bulge at L4/L5 and L5/S1 level. Patient was treated with *panchtikta ksheer basti* of 16 days with *sarvang snehan swedan*, *katibasti* and internal *vata shamak* drugs like *Rasnadi kwath*, *Ashwagandha churna*, *Trifala guggulu*. All this treatment was given for 30 days and there was significant relief to the patient.

Keywords:

IVDP, *Panchtikta ksheer Basti*, Backpain, *kativata*

Introduction-

Low backpain is common problem facing by people now-a-days. Disc prolapse or herniation accounts for 30% of low backpain.^[1] Intervertebral discs are placed between the vertebral bodies and these discs act as a shock absorber for the spinal column. These also provided mobility between the bodies of the vertebrae. Each intervertebral disc consist of a central semifluid spongy material known as 'nucleus pulposus' and which is surrounded by tough fibrous ring known as 'Annulus fibrosus'.^[2] When the nucleus pulposus invaginates through the annulus fibrosus the condition is known as Prolapsed Intervertebral Disc.^[3] Commonly disc prolapses are due to the trauma, increased tension or due to disc degeneration^[4] but some studies shows that Disc prolapse is genetically driven—twin studies indicate that at least 60% of the variance can be explained on genetic grounds.^[5] General treatment in Allopathy for this disease is rest, traction or oral medications like NSAIDs, steroids etc. and when symptoms are severe enough and are not improved by conservative treatment needs operation.^[6] In *Ayurveda* general principle treatment for *kativata* which is described under *vatavyadhi* is *sthanik* and *sarvdehik chikitsa* of vitiated *vata dosha*. Hence, in this case *Panchtikta ksheer Basti*, *kati basti* and oral *vatashamak* medications were given to patient and it is found to be effective in this case.

Aim and objectives-

To evaluate the effect of *Panchtikta ksheer Basti* in Intervertebral disc prolapse (IVDP).

Case study-

A case of 34 year old male patient complaining of low back pain radiating towards bilateral legs, difficulty during walking, back stiffness and inability to stand in erect position since 2 months attending *Shalyatantra* OPD was clinically diagnosed and chosen for study.

History of present illness-

Patient was asymptomatic before 2 months after that he get started complaining of low back pain and gradually developed raditing pain in bilateral legs, back stiffness and inability to stand in erect posture.

Past history-

No any history of Diabetes and Hypertension or any other major illness.

No specific family history found.

No any specific medicinal or allergic history found.

Personal history-

- Occupation- farmer
- Bowel- constipation, H/O hard stool
- Micturation- NAD
- Appetite- decreased
- Diet- vegetarian
- Addiction- no any
- Sleep- disturbed due to back pain

Local examination-

Clinical evaluation

Test	Rt leg	Lt leg
SLRT	At 30 degree positive	At 20 degree positive
PHT [PUMP HANDLE TEST]	Negative	Positive
SIST[SACROILIAC STRESS TEST]	Negative	Negative
LASEGUE Sign	Negative	Negative

After admitting the patient all investigations were done and treatment was planned as follows:

Investigations-

Hb-12.5%, BT-1.45min, CT-4.15min, BSL random- 108 mg/dl, Urine routine- within normal limits, HbsAg- non reactive, ICTC- non reactive, Sr. creat- 3.4 mg%

MRI LUMBAR SPINE- Disc degeneration of L3/L4, L4/L5 and L5/S1 with significant disc protrusion at L3/L4 level and disc buldge at L4/L5 and L5/S1 level.

Material and Methods-

First of all *deepana pachana* was given to the patient for 3 days with *Hingwashtak churna* 2gm BD and *shunthi sidhha jal* for *panarth*(for drinking) . After that *Panchtikta ksheer basti kram* was given for 16 days which includes total 4 *Niruh basti* and 12 *Panchtikta ksheer basti* as mentioned in table no.1. *Sarvang snehan swedan* and *Katibasti* with *Til tail* was given daily to the patient for 30 days. Internal medications *Rasnadi kwath* 20 ml BD after meal, *Ashwagandha churna* 2gm BD, *Trifala guggulu* 2 BD for 30 days was given.

Table no. 1 N- *Niruh Basti*, P- *Panchtikta ksheer Basti*

Days	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Type of Basti	N	P	P	P	N	P	P	P	N	P	P	P	N	P	P	P

Criteria for assessment-

Sr.no.	Symptoms	Parameters	Gradation
1.	Backpain	Absent Mild Moderate Severe	0 1 2 3

2.	Stiffness	Absent Mild Moderate Severe	0 1 2 3
3.	SLRT degrees	0 10 20 30 40 50 60 70 80 90	9 8 7 6 5 4 3 2 1 0
4.	Posture	No complaints Patient walk without difficulty but experiences pain Difficulty in getting up and sitting Difficulty in climbing up the stairs Limping gait	0 1 2 3 4

Results-



Observations before treatment and after treatment according to criteria for assesment

Sr.no	Symptoms	Before treatment	After treatment
1.	Pricking pain	2	0
2.	Stiffness	3	0
3.	SLRT (Rt side)	6	1
	SLRT (Lt. side)	7	2
4.	Posture	3	0

Patient was admitted in *Shalyatantra* IPD for 30 days. In this period, he was treated with *Panchatikta ksheer Basti* for 16 days, *deepana pachana* drugs, *sarvang snehan swedan*, *katibasti* and oral medications for 30 days. Patient got satisfactory relief.

DISCUSSION-

As backpain due to IVDP is correlated with *kativata* in *vatavyadhi* so, general treatment of *vata dosha* is applied

i.e.snehan, swedan, basti, katibasti. For the treatment of vitiated *vata dosha sarvang snehan swedana* was given and for removal of stiffness of back *Kati basti* with *til tail* was given. As *Aacharya Charaka* has described *basti* as main treatment for vitiated *vata dosha*^[7] and *tikta* drugs for treatment of *asthimajjagat rogas* so, in present case *Panchatikta ksheer Basti* was given. As *Basti* is given through *pakvashaya*, it spreads all over the body by its *virya*.^[8] Internal

medications like *ashwagandha churna* acts as *Balya* for *asthi-majja dhatu* and *Rasnadi kwath*, *Trifala guggulu* pacifies the vitiated *vata dosha*.

CONCLUSION-

The intervertebral disc prolapse occurs either due to trauma or degeneration of disc or due to hereditary factor. As a result of this, patients affected with IVDP shows symptoms like backpain, back stiffness, radiating leg pain, walking and sitting difficulty etc. The treatment principles for *vata vyadhi* described in *Ayurvedic* literature like *snehan*, *swedan*, *kati basti*, *panchtikta ksheer basti* along with oral medication was applied in this case. The treatment was given for 30 days after admitting the patient and significant relief was observed in this case. So, from this we can conclude that *Panchtikta ksheer basti* has significant role in management of IVDP. However, further work can be done by taking large samples to prove more specificity.

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