JETIR.ORG

ISSN: 2349-5162 | ESTD Year : 2014 | Monthly Issue JOURNAL OF EMERGING TECHNOLOGIES AND

INNOVATIVE RESEARCH (JETIR)

An International Scholarly Open Access, Peer-reviewed, Refereed Journal

Katigat Vata (Lumbar spondylosis) - A Special Case Report:

Dr. Anita Yaday :-

Assistant Professor, Department of Kayachikitsa, Shri Baba Mastnath Ayurvedic College & Hospital, Asthal Bohar, Rohtak. (H.R) Pin 124021.

Abstract:

A 47 yrs old female patient suffering from Katishool (backache) and weakness, and constipation from 6 weeks. No history Diabetes and hypertension or any other major illness. Diagnosis is Katigata Vata (Lumbar spondylosis) which is differentiated from other Condition of Lumbar spinal disorders. Patient had taken allopathy medicine for the same but was not relieved. She was admitted to our Hospital for Ayurvedic treatment. This case is treated with Ayurvedic medicine and gets relieved all symptoms. So, in this specific case we are got excellent results.

key words: Katigata Vata, Lumbar spondylosis.

Background:

Patient information:

Patient was thoroughly examined and detailed history was taken, advised for other investigation and admitted for further ayurvedic management.

Clinical findings:

Pulse: 84/ min. **Temp:** 98.8⁰ F **B. P.** 130/90. **R. R.** 20/ min.

Kshudha: Prakrut **Nidra**: Alpa **Mala**: Badha **Mutra**: Samyak

Dosha – vata. **Dushya:** Twak, Mamsa, Asthi, Majja. **Mala:** Purisha

Srotas: Rasa, Mamsa, Ashti and Majjavaha.

Timeline: Patient has symptoms from 6 weeks. After that she was investgated for X ray Lumbar Ap And Lat view. Diagnosis were made is Lumbar spondylosis. Treated with modern medicine but not having any relief. So admitted for Ayurvedic Treatment.

Diagnostic assessment: Katigata Vata (Lumbar spondylosis)

WBCs 9700 c/mm Investigation: Hb: 10.3 RBC 4.55 C/mm

ESR: 22 mm /1hr. DLC: N: 61 L: 34 E: 03 M: 02 B: 00

Platelet Count: 289000.

Therapeutic interventions:

Treatment given:

Panchakarma Treatment:

Snehan with Ksheer bala Taila

Bashpa swedan –

Kati basti with Kottamchukadi Taila

in a day for 7 days.

Basti Alternate Anuvasan and Niruha

Anuvasan with Sahacharadi Taila 60 ml and Niraha with Dashmool Triphala Kwath 450 ml.

Oral Medicine:

Tab Trayodashang Guggulu 500 Mg BID 45 days

Tab Lakshadi Guggulu 500 Mg BID 45 days

Maharasnadi Kwatha 30 ml BID. 45 days

Follow-up and outcomes:

Follow up after every 7 days after discharge from IPD.

Discussion:

Ayurvedic medicine is a multimodal treatment approach, several mechanisms might be responsible for the observed treatment effect. First, bodily oriented therapies, such as manual and massage therapies, induce neurobiological mechanisms at the level of the peripheral nociceptor and the spinal cord. 1

Ayurvedic external treatments use medicated oils that may also have local and systemic pharmacologic effects. Finally, manipulation of skin and connective tissue is mostly perceived as being pleasurable. Thus, these techniques are highly likely to induce emotional and attentional processes on the cortical level, fostering relaxation and inducing beneficial effects on pain perception on a systemic level.²

According to the Ayurveda, *Shoola* (pain) occurs due to vitiation of *Vata Dosha*. *Vata Dosha* is vitiated by *Srotas Awarodata* (obstructions of channels) and *Dhathu Kshaya* (depletion of tissues/malnutrition). In *Kati Shoola Apana Vata* is mainly involved. So, the aim of the treatment is to pacify vitiated *Vata Dosha*, especially *Apana Vata*.³

In this study basti do this work so pain relieved.

All the above treatment work on vata dosha. So we have got excellent results.

Patient perspective and informed consent:

A written informed consent taken before application of Panchakarma Treatment.

Conclusions:

This study has provided Ayurved and panchakarma treatment for Katigata Vata (Lumbar spondylosis)

References:

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