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PANGU VATA AND ITS MANAGEMENT- A CASE REPORT

Dr. Natasha Singh (P.G. Scholar, Department of Panchakarma, Sri Jayendra Ayurvedic Medical College and Hospital, Nazarethpettai)

Prof. Dr. Chitta Ranjan Das Principal, HOD (Department Of Panchakarma) Sri Jayendra Saraswathi Ayurveda College And Hospital, Nazarethpettai.

Assistant. Prof. Dr. Jeniffer Ponsingh, Department Of Panchakarma, Sri Jayendra Saraswathi Ayurveda College And Hospital, Nazarethpettai

Corresponding Author : Dr. Natasha Singh (P.G. Scholar, Department of Panchakarma, Sri Jayendra Ayurvedic Medical College and Hospital, Nazarethpettai)

ABSTRACT

Paraplegia refers to either complete or partial paralysis that affects the legs and potentially the trunk, while leaving the arms unaffected. It involves a loss of motor or sensory function in the legs. This condition is typically the result of a spinal cord injury or a congenital disorder like spina bifida, which impacts the neural components of the spinal canal. The regions of the spinal canal that may be involved in paraplegia include the thoracic, lumbar, or sacral areas. The degree to which the trunk is impacted depends on the location of the spinal cord injury. Paraplegia arises from damage to the spinal cord at the T1 level or lower. Paralysis or reduced strength in both legs is known as Pangu. This condition is characterized by an imbalance of Vata and the term Vikalagati translates to limping movement, which involves both lower limbs. The specific causes, or Nidana, of Pangu are not explicitly stated, as it is recognized as

a disorder resulting from aggravated Vayu. Therefore, the factors that lead to the aggravation of Vayu can also be relayed pangu.

INTRODUCTION

Pangu vata has an estimated prevalence of about 3 per 1000 live births in India.[1] It is recognized as Cerebral palsy the most prevalent motor disability in children.[2 The classification of CP based on its topography includes categories such as monoplegia, hemiplegia, diplegia, and quadriplegia.[3] The most frequently occurring type is diplegia, which represents 30% to 40% of cases, followed by hemiplegia at 20% to 30%, and quadriplegia, which makes up 10% to 15%.[4] In a study analyzing 1000 cases of CP in India, spastic quadriplegia was found to account for 61% of occurrences, with diplegia being the next most common at 22%.[5,6,7,8] Spastic CP is the most typical, comprising 70% to 75% of all cases, dyskinetic CP accounts for 10% to 15%, and ataxic CP constitutes less than 5% of cases. Cerebral palsy is a condition that affects a person's movement and flexibility. The effects of aging can exacerbate these symptoms. Around 25% of individuals with cerebral palsy who are able to walk as children will lose this ability as they grow older.[9] Additionally, those with CP may experience pain that can be either acute or chronic, most frequently in the hips,[10] knees, ankles, and both the upper and lower back. Individuals with spastic CP may suffer from a higher number of painful areas and experience more severe pain compared to those with other forms of cerebral palsy. [11,12,13]

The term Vatavyadhi refers to specific disorders that arise from the vitiation of Vata Dosha in various ways.[14] Whenever Vata becomes disturbed due to different causative factors, it infiltrates all the Srotasas (the empty channels) in the body and settles at the site of 'Khavaigunya,' leading to Dhatu Kshaya (a degenerative condition). As a result, the nervous tissues that nourish the affected areas do not receive adequate nutrition and become inactive. In the case of cerebral palsy, particularly the spastic diplegia type in an adult, which is considered a Pangu, one of the Vatavyadhi, management was conducted in accordance with the general principles outlined by Acharya Sushruta.

CASE REPORT

A patient of age 18 years came to our hospital with the complaint of is unable to stand without assistance, unable to walk, experiences pain in the lower back and limbs, suffers from

weakness in her limbs, and has difficulty sitting and moving her hands independently for the past three years. She was brought by her relatives in a wheelchair. The patient's mother shared that she was asymptomatic three years ago. At that point, she began to experience weakness and she experienced difficulty in using her hands and was unable to feed herself. She could only walk with assistance when pain relief medications were administered. Additionally, there was a decline in her cognitive abilities and visual impairment, but her relatives were primarily concerned about her immobility and the severe pain she had to endure. She had consulted several healthcare professionals without receiving any significant improvement. Regarding her medical history, the patient's mother reported that she was delivered full-term in the hospital with no signs of birth asphyxia, birth trauma, or obstructed labor; however, she was born with a critically low birth weight of 450 grams.

GENERAL EXAMINATION

Table no. 1

1. Nadi	86/min.	7. Druka	Avara
2. Mala	Samyak	8. Akriti	Madhayama
3. Mutra	Asamyak	9. Prakruti	Pittavata
4. Jivha	Sama	10.Weight	34 kg
5. Shabda	Sparsha	11. Blood Pressure	130/90
6. Sparsha	Anushnasheeta	12. Temperature	36.2’C

The patient's prior test results showed: Hb at 12.4 gm/dl, RBC count at 4.76 m/cumm, Vitamin D3 level at 4.52 mg, Vitamin B12 at 258 pg/ml, alkaline phosphatase at 745.2, and fasting blood sugar at 115 mg/dl, with MCH recorded at 26.1 and serum iron at 208.4 ug/dl.

DASHAVIDHA PAREEKSHA

Table no. 2

Prakriti	Pitta kapha
Vikriti	Vata
Sara	Twak
Samhanana	Madhyam
Pramanam	Avara
Satmyam	Sarava rasa
Satvam	Madhyama
Vayah	Madhyam
Ahara shakti	Madhyama
Vyayama shakti	Avara

SYSTEMIC EXAMINATION

- **CVS**: S1 S2 heard.
- **RS**: Clear fields
- **GIT**: NAD
- **CNS**: Occasionally

S.N. Local examination	**Before treatment**	**After first seating**	**After second seating**
SLR	Unable to perform	25 degree	45 degree

Lesegue's test	Unable to perf	-ve	-ve
Knee joint crepitus	Right +ve Left +ve	Right +ve Left +ve	Right -ve Left -ve
Muscle tone	Increased	Normal	Normal
Muscle power	Right Left U/L 2 3 L/L 3 2	Right Left U/L 2 3 L/L 3 2	Right Left U/L 2 3 L/L 3 2
Deep tendon reflexes	Right Left	Right Left	Right Left
Knee	Diminished	Decreased	Decreased
Elbow	Diminished	Decreased	Decreased
Ankle	Diminished	Decreased	Decreased
Hand movement	Absent	Absent	Absent
Sleep hours	2 hrs	4 hrs	4 hrs
Bed sores	Present	Absent	Absent
Gait	Patient on wheel chair	With support	Without support
Pain	Moderate pain	Partially	Markedly improved

MANAGEMENT

1.Shamana chikitsa: Abhyantara chikitsa

1. Tryodashang Guggulu – 2 tablets

2. Combination of:
   - Godanti Bhasma – 500 mg
   - Mukta Pisti – 250 mg
   - Avipattikar Churna – 5 g
3. Ashwagandharishta – 15 ml
4. Ajaashwagandhadi avaleha 10gm-0-10gm A/F
5. Kalyanaka gulam 0-0-10gm B/F

Second Therapy Session:

Duration: 23rd December 2024 – 3rd January 2025 (7 days)

1) Panchakarma Chikitsa:

- Matra basti with Mahanarayana tailam
- Sneha Dhara
- Sarvanga shastika shali anna lepa
- Shiro Abhyanga

About Basti:

Basti is a therapeutic enema primarily used to manage Vata-related disorders. Various classical texts in Ayurveda describe different types of Basti formulations, depending on the disease condition.

About Sneha Dhara:

Sneha Dhara is an external oleation therapy where a continuous stream of medicated oil is poured onto the affected body part while simultaneously massaging it with the other hand. The oil is maintained at a lukewarm temperature throughout the procedure.

About Shatika Shali Anna Lepa

Annalepa: A Specialized Form of Swedana Therapy[15]

Annalepa is a type of Swedana (sudation therapy) in which Shastika Shali (a variety of rice) is cooked with Godugdha (cow's milk) and Bala Moola Kwatha (decoction of Bala root) before being applied to the patient's body. This therapy is particularly beneficial for conditions affecting the nervous system, such as paralysis, spinal cord degeneration, neuropathy, fibromyalgia, degenerative disorders, emaciation, cerebral palsy, muscular dystrophy, muscle wasting, chronic fatigue syndrome, and avascular necrosis.

In cases where modern medicine struggles to provide complete relief without side effects, Ayurveda offers alternative treatment modalities that are well-tested, effective, cost-efficient, and associated with minimal adverse effects. Annalepa is one such therapy known for its Bhimhana Guna (nutritive properties), which help nourish and strengthen muscular tissues.

Material and Methods:

Shastika Shali is cooked with milk and Bala Moola and then gently applied to the patient's body by two therapists in a synchronized manner. Simultaneously, a gentle massage is performed with the other hand. The procedure continues until Samyak Swinna Lakshana (signs of proper sudation) are observed. Annalepa is carried out in seven different positions, similar to Kayaseka (Abhyanga).[16,17,18,19,20]

Annalepa enhances physical strength, nourishes body tissues, prevents degenerative changes, reduces muscle spasms, prevents contractures, improves muscle tone, and increases muscle bulk by properly nourishing the dhatus (body tissues).[21,22]

DISCUSSION

The case diagnosed as 'Pangu', one of the Vatavyadhi, was treated following basic principle for DhatukhayjanyaVatavyadhi taking in consideration vyadhiavstha

When we talk about the pangu vata In Ayurveda, Pangu Vata refers to a condition where Vata dosha becomes vitiated and affects the muscles and joints, leading to pain, stiffness, and limited mobility, Pangu Vata is characterized by:

- Muscle and joint pain: Pain and stiffness in the muscles and joints, especially in the hands, feet, knees, and hips.
- Limited mobility: Reduced mobility and flexibility in the affected joints.
- Stiffness: Morning stiffness that lasts for hours.
- Cramping: Muscle cramps and spasms.
- Weakness: Feeling of weakness or fatigue in the muscles.
- Tremors: Tremors or shaking of the hands or fingers.

Management includes the following criteria

1. Balancing Vata dosha Using herbs, diet, and lifestyle modifications to balance Vata dosha.

2.Reducing inflammation: Using anti-inflammatory herbs and therapies to reduce pain and inflammation.

3. Improving joint mobility: Using exercises, massage, and other therapies to improve joint mobility and flexibility.

a. Trayodashanga guggulu

Trayodashanga Guggulu is a traditional Ayurvedic medicine that combines the benefits of Guggulu (Commiphora mukul) with 13 other herbs. Here's a breakdown of its properties and how it acts upon Pangu Vata:

Properties:

1. Anti-inflammatory: Reduces inflammation and pain.

2. Antioxidant: Protects against oxidative stress and cell damage.

3. Antimicrobial: Exhibits antibacterial and antifungal properties.

4. Immunomodulatory: Modulates the immune system to prevent autoimmune responses.

5. Rasayana: Rejuvenates and nourishes the body.

Action on Pangu Vata:

1. Reduces inflammation: Anti-inflammatory properties help reduce swelling and pain in the affected joints.

2. Relaxes muscles: Antispasmodic properties relax muscle spasms and cramps, improving mobility.

3. Improves joint lubrication: The formulation helps maintain healthy joint lubrication, reducing friction and wear.

4. Balances Vata dosha: The combination of herbs helps balance Vata dosha, reducing its vitiation and alleviating symptoms.

5. Rejuvenates joints: Rasayana properties help nourish and rejuvenate the joints, improving overall joint health.

b.Ajaashwagandhadi avaleha

Aja Ashwagandhadi Avaleha is a traditional Ayurvedic formulation primarily used to promote strength, vitality, and overall well-being. It combines Ashwagandha (Withania somnifera) with Aja (goat's milk) and other rejuvenating ingredients to enhance muscle strength, boost immunity, and support neurological health.

Key Benefits:

- Enhances strength and stamina
- Nourishes the nervous system
- Supports muscle growth and recovery
- Helps in managing stress and anxiety
- Acts as a general health tonic

c.Ashwagandha aristam

Strengthens Muscles & Joints :Helps improve muscle tone and prevents muscle wasting, which is common in Pangu Vata.Supports Nervous System Health: Nourishes the nerves and promotes better neuromuscular coordination, aiding in conditions like paralysis and neuropathy. Balances Vata Dosha: Reduces excessive Vata aggravation, which is the root cause of Pangu Vata, leading to better movement and flexibility. Enhances Mobility &

Reduces Stiffness: Helps in restoring movement in affected limbs by reducing stiffness and improving circulation. Boosts Energy & Vitality: Acts as a natural rejuvenator (Rasayana), improving stamina and reducing fatigue. Supports Mental Well-being: Helps reduce stress and anxiety, which are often linked to nervous system disorders.

CONCLUSION

As the pangu vata has many different complication,iven the notable relief from pain and enhancement in functional ability provided by Panchakarma therapy, it can be inferred that this treatment is beneficial in enhancing the quality of life for adult individuals with cerebral palsy, which is clearly advantageous for the overall well-being of the patient's family.

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