



A CASE REPORT ON KATIGAT VATA WITH SPECIAL REFERENCE TO LUMBAR SPONDYLOSIS

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ABSTRACT

According to Ayurveda Katigat vata is one of the types of Vata vyadhi explained in our ancient Ayurvedic text. It arises due to Prakop of Aata dosha and Asthi dhatu kshaya. Similarly Lumbar Spondylosis is a degenerative disorder affecting the discs and the vertebral bodies of the lumbar spine. Patients with lumbar spondylosis have pain in their axial spine which affects most of the people in the later stage of their lives. A 75 years old female having a history of katigat vata for the last 6 years so she approached Dr. DY Patil Ayurvedic Hospital for Ayurvedic management. Patient was having a progressive pain in her lower back with restricted movements. She was treated for 75 days including Panchakarma therapies. The response to the treatment was recorded and therapeutic effects were evaluated with a reduction of clinical symptoms of the patient. This case study evaluates that Ayurvedic management, in this case, was very effective treating Katigata vata successfully without any side effects.

Keywords: Katigat vata, Lumbar spondylosis, Ayurvedic management.

INTRODUCTION

Katigata vata is a disease which is mainly caused by the vitiation of Vata Dosha. In our ancient Ayurvedic text it has been explained with 80 different types of Vata vyadhi and its treatment. Sadhigat vata is one of them. Various types of disorders arrive due to an imbalance of Vata doshas. It is the most seen disorder. When vata dosha comes to the end of prakop avastha, then it arrives with various types of signs and symptoms. It includes signs and symptoms like joint pain mostly at the cervical region, lumbar region, knee joint, hip joint, and ankle joint. Mostly with pain, swelling, crepitation while movements, restricted movements of joints and stiffness are present.

Lumbar spondylosis in simple words is a wear and tear of lumbar vertebral disc due its degeneration. The fluid in between the vertebrae gets reduce leads to intervertebral disc space reduction i.e., Majjadhatu kshaya. If the pressure increases on the spinal nerves, one may experience numbness, tingling sensation in bilateral lower limb due to nerve compression. Not necessary that everyone of us have these same symptoms.

In urban areas about 60-70% population is prone to develop disorders of the Vertebral column, like Lumbar spondylosis, Prolapsed intervertebral discs, Osteoporosis, and other degenerative disorders of spine. Some of them will not even have anyone of this in its early stage. The chronicity and severity of this problem worsen with age. Causes may vary in different people. It depends upon severity and degree of degeneration of spinal discs.

Allopathy has different types of Anti-inflammatory, Analgesics, Muscle relaxant, calcium and Vitamin D supplements, Lumbar traction, Lumbar belt, and Physiotherapy is advised, but along with these drugs have a side effect which limits their use for a

long period of time. It's an opportunity for ancient science to treat such conditions without any side effects. With the help of the latest diagnostic techniques, we can find out through Radiographic studies, whether plain film, CT, CT myelogram, or MRI, may provide useful and confirmatory evidence to support an exam finding and localize a degenerative lesion or area of nerve compression.

CASE HISTORY

A 75-year-old female patient came to Kaya Chikitsa OPD of Dr. D Y Patil Ayurvedic Hospital, Nerul, Navi Mumbai with following complaints from the past 5-6 years but was more from last 2 weeks.

- 1) Pain in the lumbar region (Grade-03)
- 2) Pain in bilateral lower limbs (Grade-03)
- 3) Tingling sensation in the lower limb (Grade-02)
- 4) Restricted movements (Grade-02)
- 5) Irregular gait
- 6) Generalised weakness (Grade-01)

PERSONAL HISTORY

Based on her clinical symptoms and MRI findings she was diagnosed with a case of Katigata vata, presented with a history of onset of pain in lumbar region from past 5-6 years. From last one week there was a sudden increase in her pain, so she approached to Kaya Chikitsa OPD of Dr. D Y Patil Ayurvedic Hospital, for Ayurveda consultation & Treatment. She was admitted in Female ward, under the Department of Kaya Chikitsa, Nerul, Navi Mumbai, Maharashtra, India.

On physical examination, her vitals were within normal limits. She was conscious and well-oriented. Her systemic examination showed no other abnormalities.

History of illness: - k/c/o HTN

Sr.Uric acid- 6.2

Urine R-WNL

Family history: - No h/o any other major illness

TREATMENT

Ahar: - Nonvegetarian
 Nidra: - Asamyak
 Prakruti: - Vata Pradhan
 Bala: - Alpa
 Jivha: - Niram
 Agni: - Alpagni
 Nadi: - 88/min
 Raktadabh: - 130/90 mmhg
 Shabdha:- Prakrut
 Sparsha: - Anushna
 Druk: - Swetabh

Based on her clinical and radiological findings, she was diagnosed with katigat vata and was started with Ayurvedic line of treatment. Classical Ayurvedic Therapeutic procedures were administered. Orally Conservative treatment was started and externally local sthanik snehan, sthanik nadi swedan, and basti was given for 10 days and later continued with conservative treatment for 2 months.

MRI LS Spine- Diffuse bulge of L3-L4, L4-L5 &L5-S1, causing lateral and bilateral foraminal narrowing. Minimal retrolisthesis of L3 over L4 is seen.

PROGRESSION

During her hospital stay all advised Panchakarma procedures were held like sthanik snehan and swedan, by which she had a very effective response, her lumbar pain was decreased gradually with better movements of her joints, patient had relief from pain and stiffness, was able to walk properly.

Blood investigations

Hb- 11.9 g/dl
 Rbc- 3.9 mill/cumm
 Wbc-9.3/cumm
 ESR-43
 Sr. Creatinine-0.6

The patient was later treated with only Oral medication for over a period of 2months and was monitored through follow-up visits after every 15 days in OPD. After discharge over a month patient reported 30% - 40% relief with no aggravation of symptoms.

Table 1: Severity of Pain Measurements

Severity of pain measurement	Pain relief measurement
Severe -03	Complete -00
Moderate -02	Good -01
Mild -03	Moderate -02
No pain -00	Slight -03

Table 2: Enlisting panchakarma procedure

Panchakarma procedures	With	Mode of action
Sthanik snehan	Vishagarbha tail	Provides strength in body muscles, boosts immunity.
Sthanik swedan	Nadi sweda with dashmool kwath	Which helps in mobilizing the parkupit doshas and ama blocked in channels.
Katibasti	Vishargarbha tail	Decreased localized pain, swelling and stiffness.
Panchatikta kshirbasti	Panchatikta gruth	Gives strength to the bone.

Table 3

Enlisting the oral medication.	Mode of action
Mahayograj guggul 250mg twice a day	Anti-inflammatory, muscle relaxant properties, analgesic.
Chandraprabha vati 250 mg twice a day	Balya and rasayan. rasadhi dhatupariposhan, rakta vardhak.
Sanshamani vati 150mg twice a day	Antioxidants and protects cell damage in the body
Ashwagandharishta 20ml with water at night	It has antistress and anxiolytic properties. Rasayan

DISCUSSION

Response to the treatment was recorded and therapeutic effects were evaluated by the patient’s symptomatic relief. It was observed that her clinical symptoms were reduced gradually during her hospital stay. Some of her symptoms were reduced completely and some of them was reduced partially.

strotas, panchatikta siddha kshir basti acts as rasayan for asthidhatu. They rejuvenate the dhatus, give strength and restrict down the progress of the disease.

According to ayurvedic pathogenesis, i.e samprapti the prakupit vata dosha leads to strotas avrodh and rasa raktadhi dhatu kshaya. The study revealed that as the disease was katigata vata and there was a predominance of vata according to her prakruti, alarming a sign of occurrence of different types of Vatavyadhi. In these case study the symptoms of katigata vata were relieved by ayurvedic management such as panchakarma therapy and oral medications. Due to internal medication, such as guggul acts as anti-inflammatory, anti-spasmodic, balya and rasayan, in asthivaha

Our spine is mobile and made up with several numbers of vertebrates, each with two facets and an intervertebral disc. When these facet joints and intervertebral disc degenerate or face any trauma leads to tear of protective cartilage around forming new bone spur. The impact of activity and occupation for eg- Lifting heavy weight, twisting, bending, long way standing or sitting in same position, vehicular driving, or any accidental trauma to the lower back etc. are the basic causes.

Hence the treatment given for Katigata vata is Snehan, Swedan and Anuvasan Basti which helps in Shaman of Vata dosha, reliefs the symptoms of disease and attempts to provide safe and effective treatment to the patient¹⁻⁶.

CONCLUSION

It is concluded that this treatment completely or partially relieves the symptoms of katigata vata, this therapeutic management can be used in treating katigata vata. It reduces both the sign and symptoms and shows effectiveness in katigata vata (Lumbar spondylosis).

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