

Role of Tikta Ksheer Basti in The Management of Katigraha W.S.R to Lumbar Anterolisthesis : A Case Study

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Abstract

Now a day's low back pain is become major health problem. This may be due to the faulty posture and faulty living habits .In Ayurveda Kati,Trik,Shroni are the terms used to represent low back part of human body.Graha i.e. stiffness with low back pain in katipradesha i.e.in low back region is termed as katigraha. In Ayurvedic Samhitas Katigraha is mentioned under various terms like katigraha, trika shula, trika graha, prustagraha. Spondylolisthesis is condition in which there is slippage of spinal vertebra.Usually it occurs towards the base of spine in lumbar region. Anterior displacement of spine is termed as Anterolisthesis. NSAIDS and Surgical treatment is advised in modern medicine which may not guarantee previous level of activity. Ayurveda has given a great contribution in the management of such disorders. This case study is based on efficacy of Ayurvedic treatment of katigraha w.s.r to Lumbar anterolisthesis

Keyword- Katigraha,Anterolisthesis.

Introduction-

In India Joint disorders are alarmingly increases with age and are common in females than males. Pain in lumbar region i.e.katipradesha is termed as *katishoola* and now days it is major health problem. A glance through ayurvedic classic reveal many terms like *katigraha*, *trika shula*, *trika graha*, *prustagraha* are used for describing the conditions. *Kati pradesha* is described as an important seat of *vata dosha*. In *katigraha*, *vata dosha* gets vitiated in its *swasthan*. Vitiated *vata dosha* produces the pain in the joints of *sphikasthi* and *prushta vankshnasthi*. According to "*Gadanigraha*" when *vata dosha* affected by *Ama* and it gets located in *Kati pradesha* it exhibit the symptom of *katigraha*.¹

The word spondylolisthesis is derived from the Greek words spondylo, meaning spine, and listhesis it means to slip or slide.It is a descriptive term which refers to slippage (usually forward) of a vertebra and the spine above relative to the vertebra below it. It lead to a deformity of the spine as well as a narrowing of the spinal canal (central spinal stenosis) or compression of the exiting nerve roots (foraminal stenosis).It Usually occurs at level of L5, S1.² Lumbar Anterolisthesis is condition in which there is anterior displacement or forward slippage of

lumbar vertebra is found. Lower back pain, numbness and tingling in the lower limb, difficulty in walking, limited body movements are symptoms found in patient of lumbar anterolisthesis. Injury to spine, ageing and growth of tumor in spine are common causes of lumbar anterolisthesis.

Ayurveda considers the relation of *vata dosha* and *asthi dhatu* while treating the diseases of *Aasthivaha* strotas. According to Acharya charaka "*Basti*" is important line of treatment in *katigraha*. Acharya charaka explain *tikta dravya siddha ksheer basti* for joint disorder.

Aim And Objectives-

- 1) To study the *Aghataj Katigraha* W.S.R.Lumbar Anterolisthesis in detail.
- 2) To assess the effect *Tikta ksheer Basti* in the patients of *Aghataj Katigraha* w.s.r to lumbar Anterolisthesis.

Case Report-

A 32 year middle age female patient came to Panchakarma OPD presenting with complaints of *Katishoola* (pain in lumbar region), Pain increases while walking, climbing steps, sitting and lifting weight. Tingling and numbness in both lower limb, *Sakashta Chankramana* (difficulty in walking) and *Sakashta Utkatasana* (difficulty in sitting). Patient

was suffering from same complaint since two year. But symptoms aggravated since last from 15 days.

On examination:

- 1) General condition of patient was moderate and a febrile.
- 2) Pulse: 74/min
- 3) Blood pressure: 130/70 mm of Hg
- 4) RR- 20/min
- 5) Systemic examination:
 CVS: S1 S2 Normal
 CNS: conscious. Well oriented
 RS: AE=BE, clear.
 P/A: Soft.

Ashta Vidha Parikshan:

- 1) *Nadi*- 74/min
- 2) *Mala- Samyak Pravrutti*
- 3) *Mutra – Samyak Pravrutti*
- 4) *Jivha-Niram*
- 5) *Shabd-Spashta*.
- 6) *Sparsha- Anushna Sheet*.
- 7) *Druk- Aaraktvarni*
- 8) *Akriti- Madhyam*.

Vikrut Strotas Parikshana:

Rasavaha Strotas: Ubhaya Pindiko Dveshtan (cramps in both legs)
Asthivaha Strotas: Katishool (pain in lumbar region)
Majjavaha Strotas: Tingling and numbness in both lower limb, Sakashta Chankramana (difficulty to walk) and *Sakashta Utkatasana* (difficulty in sitting)

Present Illness

Patient was well before 2 years. patient had H/O fall on ground at home before 2yrs. Then to start with pain at lumbar region she had further complains of tingling numbness, Pain increases while walking, climbing steps, sitting and lifting weight, difficulty in walking and sitting since 2 yrs. For the said complaint she attended private hospital for treatment and didn't get relief. She is advised for surgery but she doesn't want to proceed with surgical intervention and above symptoms aggravated from last 15 days hence. So the patient came to our hospital for treatment.

Past history:

No H/O DM/HTN/IHD/PTB/BA/Jaundice/Typhoid or any other major illness.

No H/O-Any major surgical illness.

No H/O- Accident

H/O- fall before 2 years.

Clinical examination of spine:

Inspection:

No scoliosis, no lordosis, no kyphosis were found in the patient.

No any other major abnormality was seen in spinal examination of patient.

No any swelling and surgical marks were seen in spinal examination of patient.

Gait: waddling gait.

Investigation –

CBC-

Hb %	10.7gm %
Total RBC Count	3.74 million/ Cmm
Total WBC Count	6700/Cmm
Neutrophils	59%
Lymphocytes	28%
Monocytes	08%
Eosinophils	05%
Basophils	00%
HCT	29.7%
MCV	79.4fl
MCH	27.5 pg
MCHC	34.7 gm/dl
Platelet count	2,16,000/Cmm

ESR - 20 mm at the end of first hour

Blood sugar-

Random BSL	80 mg%
Random USL	Nil

Urine Analysis Report-

Physical-

Quantity	10 ml
Colour	Pale yellow
Appearance	Sl Turbid

Chemical-

Proteins-	Nil
Sugar-	Nil
Ketone bodies	-
Bile salts	Absent
Bile pigments	Absent
PH	6
Occult blood	-

Microscopic –

RBC	02 to 03/HPF
Pus cells	03 to 04/HPF
Epithelial cells	10 to 12 HPF
Casts	Nil
Crystals	Nil
Bacteria	Nil
Fungi	Nil
Trichomonas Vaginalis	Nil
Amorphous Material	Present

MRI Of Lumbar Spine:

MRI on dated 21/05/2016 reported that Grade 2 anterolisthesis of L5 over S1 secondary to b/l spondylosis.
Desiccated D12/L1, L3/4, L5/S1 discs.
Pseudobuldge of L5/S1 disc causing compression of b/l traversing nerve roots.
Mild Lt.lateral protrusion of D12/L1 disc.
Facetal arthropathy at L5/S1 level.

Treatment:

Sarvang Snehana and *Swedan- Sarvang Snehana* by *Abhyanga tail* for 8 days.
Sarvang Swedan by *Dhashamul Kwatha* for 8 days.
Yogbasti: Total eight *basti* were given in eight days. First two days
Anuvasana basti 60ml with *Sahachar Taila* was given after that *Niruha basti* with *Tikta Kshir Basti* 250 ml. The *Anuvasana Basti* was administered after meal and *Niruha Basti* was administered empty stomach.
Merudand basti with *Maharararyana Taila* for 8 days.
Cap.Palsineuron 1 TDS for 8 days
Cap.Lumbatone 1 TDS for 8 days

Therapy/Medicine	Drugs	Duration
Snehana	Abhyanga tailam	8 days
Swedana	Dashmool Kwatha	8 days
Basti	Sahachara tailam for Anuvasana	Total 8 days
Anuvasana Niruha	Tikta ksheer for Niruha	
Merudand basti	Maharararyana Tailam	8 days
Cap.Palsineuron		1 TDS for 8 days
Cap.Lumbatone		1 TDS for 8 days

Assessment And Observation

Assessment was done on following subjective parameters-

	Absent	Mild	Modrate	Severe
<i>Katishoola</i>	0	1	2	3
<i>Sakashta Chankramana</i>	0	1	2	3
<i>Sakashta Utkatasana</i>	0	1	2	3
Tingling and numbness	0	1	2	3
Morning stiffness	0	1	2	3

Result –

The patient is symptomatically improved. The subjective parameters show improvement in the clinical symptoms. Although in MRI there were no changes in after treatment and before treatment. We can say that this treatment is helpful to treat lumbar anterolisthesis and prevent the further more complications. Study will be done on the large population.

	Before Treatment	After Treatment
<i>Katishoola</i>	3	2
<i>Sakashta Chankramana</i>	3	1
<i>Sakashta Utkatasana</i>	3	1
Tingling and numbness	3	2
Morning Stiffness	3	1

Discussion -

Ayurveda has miraculous treatment therapies of *Panchakarma* for the management of joint disorders. *Ksheer* is best *dravya* in nourishing *Asthidhatu*. *Mrudu*, *snighdha*, *shlakshna*, *picchil* guna of milk encounters the *rukshatva* of bone and helps in free movement of joints. *Ksheer* controls the *vata dosha* and helps in nourishment of bones. In joint disorders *tikta ksheer basti* is very helpful. *Tikta Rasa* Processed with milk can be used in '*Asthipradoshaj Vyadhi*' like *Katigatavata*. In modern medicine the disease is managed by non steroidal anti inflammatory drugs, analgesic drugs; physiotherapy and corticosteroids but these drug have so many side-effects

Conclusion:

In above discussion and result we can say that this therapy is effective in aghataj katigraha and it will be done in large population.

Reference-

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OWESTRY LOW BACK PAIN NDEX:**Before treatment
(VAS scale)****After treatment**

	Score	Symptoms
No Symptom	0	No Sandhishul
Mild (1 - 3)	1	No difficulty in walking.
Moderate (4-6)	2	Slight pain during walking.
Severe (7-10)	3	Severe pain during walking

