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Case Study –Management of Manyagata Vata With Special Reference To Cervical Spondylosis by Ayurvedic Medicine

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Abstract-

Manyagata vata is a one of the eighty types of vata vyadhi. It is occurs due to vitiated vata in neck region. The description of manyagata vata is not found as a separate disease but mentioned as one of the vata vyadhi in Charak Samhita. Further, based on clinical features, this condition can be co-relate with Cervical Spondylosis.

ervical Spondylosis is a kind of arthritis. It is also called cervicalosteoarthritis. It is a condition involving changes to the bone, discs and joints of the neck. These changes are caused by the normal wear and tear of aging. With age, the discs of the cervical spine gradually break down, lose fluid and become stiffer. Cervical spondylosis usually occurs in middle and elderly people. It is found most commonly in individuals aged 40-60 years, leads to symptoms like pain, restricted movement, stiffness and tinglingnumbness at neck region. Cervical Spondylosis often develops as a result of changes in neck joints as age. Other factors include - neck injuries, Work related activities that put extra strain on neck from heavy lifting, Holding neck in an uncomfortable position for prolong periods of time or repeating the same neck movements throughout the day.

Here I present the case of 39 years old male patient, whose early diagnosis of Manyagata vata permitted successful management according to ayurvedic principles. Though initially having-Neck pain, restricted movement, stiffness and tingling-numbness at neck region, he return to normal life.

CASE

PATIENT NAME- XYZ

AGE- 39 years SEX- Male
Occupation-Worker Reg. No. 9004/640
D.O.A-21/04/2023 D.O.D-09/05/2023

C/O – Neck pain

- -Restricted movement
- -Neck stiffness
- -Tingling-Numbness at neck region
- -since 6 month.

No H/O- Malaria /Typhoid /Jaundice.

No K/C/O- HTN/DM/PTB/BA/Epilepsy.

No H/O- Any Surgical illness.

No H/O- Any Drug Allergy.

H/O- Alcohol consumptions -since 20 years

O/E-GC-Fair & Afebrile

P-84/min

BP-120/90 mm of hg

S/E-RS-AEBE Clear

CVS-S1 & S2 Normal

CNS-Conscious & Oriented

SLRT- Rt.-90%, Lt.-90%, B/L- 90%; painless

Investigations

CBC-Hb-12%; RBC-4300; WBC-6000; ESR-13; Platelets- 215000 Others-RA, VDRL, HbsAg –Negative X-ray of Cervical Spine- Minimal anterior osteophytes formation at C4 and C5. Mild reduction in intervertebral disc at C4- C5. Endplate sclerosis at C4, C5 and C6 vertebrae.

Nidanpanchaka

Hetu-

-Aaharaj- Vatana, Udid, Gahu, Mash, Draksha etc. Sevan

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-Viharaj- Heavy weight lifting, Holding neck in an uncomfortable position, Lack of exercise, Atichakraman, Stress etc.

SanpraptiHetu sevana vaata prakopa Sthan
Sanshraya in Manya Pradesh merudand ruksha
and shushkata Neck pain & Restricted
movement Manyagata vata(Cervical
Spondylosis)

Treatment Given

Oral:-Tab. Yograj Guggulu (500mg) TDS x 14 days

- -Tab. Arogyavardhini Vati (500mg) TDS x 14 days
- Tab. Panchatikta gruta Gugulu (500mg) TDS x 30 Days
- Tab. Ossopan 500 1-0-0-x 15 days

Panchakarma:-

- Sthanic Snehan & Swedan with Til Tail x 30 days
- Manya Basti with Sahachar Tail + Mahanarayan
 Tail x 30 days
- Agni Karma on Neck region with Panchadhatu Shalaka

After Treatment

No Neck pain, painless movement of neck & No stiffness

On Discharge- Patient is advised oral medicines and regular follow up in OPD.

Discussion

Initially when patient came to us, patient was suffering from the disease almost since 6 Months. Having Neck pain, Restricted movement, Neck stiffness, Tingling-Numbness at neck region. After therapy of one month patients Symptoms are reduced & neck movement improved. There is no other

complains. Patient can now do his routine work without taking NSAIDS.

We have manage this patient with the help of Ayurvedic Medicines & Panchakarma.

Conclusion

The case highlight the fact that confidence can be placed in Ayurvedic treatment principles even in a case where modern medicines progress is poor. The patient was diagnosed in Ayurvedic term and treated accordingly Manya Basti, Agni Karma & Panchatikta gruta Gugulu in the case of Manyagata vata. Patient can now do his routine work without taking NSAIDS.

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