

CASE REPORT: CLINICAL MANAGEMENT OF KATIGATVATA WSR TO PIVD**Monika Das¹, Pradeep Madhur²**

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Article Received: 16/08/2021 - **Peer Reviewed:** 31/08/2021 - **Accepted for Publication:** 05/09/2021**ABSTRACT**

In India, nearly 80% of people have significant back pain due to lumbar pathology. In this case study patient's main complaint was severe low backache, stiffness in the back due to which he was unable to do his routine activities. He was diagnosed with Prolapsed intervertebral disc (PIVD) which can be correlated to *katigatvata* (low backache) which comes under *vatavyadhi*. *Panchkarma* therapies like *katibasti* and *panchtikta ksheer basti* in *ka-la basti* format are given with oral *vatashamak* medicines. In course of treatment satisfactory improvement was noted.

Keywords: *Katigatavata, Vatavyadhi, Katibasti, PTKB.***INTRODUCTION**

More than 10 million cases of PIVD are found per year in India. Young adults (14-40), adults (41- 60 years) and seniors (60 +years) are very commonly affected with a male to female ratio of 2:1.

Any situation which increases pressure within a disc can lead to damage and prolapse. Lifting heavy objects, fall or injury may change the disc. A sudden

increase in pressure on the disc causes a tear in the tough outer ring. If the tear extends right through the outer ring, some of the soft centres may prolapse. As well as local pressure on the nerve from the disc there is swelling and inflammation. This inflammation is responsible for severe pain caused by disc prolapse.

Katigatvata can be considered under *Vata Vyadhi* (musculoskeletal and neurological diseases). In this *Katishool* is there and pathogenesis of *katishoola* (low backache) is *asthipradoshaj*, degeneration of bony tissue in *kati* (lumbosacral region) due to vitiation of *vata*.

Line of Treatment of *Vata Vyadhi* is *abhyanga* (massage), *swedana* (fomentation) *basti* (medicated enema) and *nivaat sthana* (resides in a warm place). So, these lines of treatment were adopted for *katishoola*.

Kati Basti is external therapy that causes localized *Snehan* and *Swedan*. In this lukewarm oil is poured on the lower back which is held by a small frame. Muscles of that area get relaxed and due to qualities of oil and also due to the gradual pressure effect of pooled oil, local changes may occur in the intervertebral area.

Charak and *Vagbhata* mentioned the use of *basti* prepared with *tikta dravyas*, *ksheer* and *ghrita* as treatment of *asthigata dosha* (bony tissue) along with the use of *swayoni dravyas* (similar substances).

Sushruta also mentioned similar substances in the case of diminished *dhatu*s.

CASE REPORT:

A male patient of age 29 years from Badwani visited OPD of Shubhdeep Ayurved Medical College and Hospital, Indore.

C/O – 1) Severe low backache for last 2 months.

2) Stiffness in the back and can't bend forward for the last 2 months.

3) Difficulty to squat – 1 month.

H/O PRESENT ILLNESS –

The patient was asymptomatic 2 months before, gradually he developed low backache and that become severe with no history of any trauma or injury. There was stiffness in the lower back, and he couldn't bend forward. He took allopathic treatment but did not get any relief, so he came to our hospital.

Clinical Findings –

SLR – The straight leg raising (SLR) test was 40* on the right leg and 45* on the left leg.

VAS – 6

Diagnostic Assessment –

MRI lumb sacral region – Focal Annular disc bulge at L4 - L5 and L5 – S1, level causing thecal sac indentation with no nerve root compression.

Table 1: Assessment Criteria

S.No	Symptoms	Parameters	Gradation
1	Pricking pain	Absent Mild Moderate Severe	0 2 4 6
2	Stiffness	Absent Mild Moderate Severe	0 2 4 6
3	SLR Scoring	0 10 20 30 40 50 60 70 80 90	54 48 44 36 30 24 13 12 6 0
4	VAS	No Pain Mild Pain Moderate Pain Severe Pain Very severe	0 1 – 3] 4 – 6]

		Worst pain possible	7 – 9 10
5	Posture	-No Complaints -Patient walks without difficulty but experiences difficulty getting up from squatting -Difficulty to squat -Difficulty in Climbing stairs -Limping Gait	0 1 2 3 4

Table 2: Observations are to criteria of assessment Before & After treatment.

S.No	Symptoms	Before Treatment	After Treatment
1	Pricking Pain	6	0
2	Stiffness	4	0
3	SLR Scoring RT	30	6
4	SLR Scoring LT	33	12
5	Posture	2	1
6	VAS	5	2

Treatment Planned

Shodhana Chikitsa – The patient planned for *panch-karma* therapy in 2 steps:

- 1) *Kati Basti* (a procedure where specific medicated oil is retained for a period of time around 30 minutes) in *Kati* region with *Sahachar* oil with *abhyang* and *Nadi Sweda* on *kati* region for 5 days.
- 2) Then the patient is treated with *Kala Basti* (therapeutic enema with a group of 16 enema) of *Panchatikta Ksheer Niruha Basti* and *Anuvasan Basti* (oil enema) with *Rasna dashmooladi oil* before application of *abhyang* with MNT and *nadi swedan* of *kati* region.

Shamana Chikitsa

- 1) *Maharasnadi kwatha* 30 ml BD empty stomach twice a day.
- 2) *Brihat Vatachintamani ras* 125 mg BD with honey.
- 3) *Tryodashang guggulu* 250 mg BD with hot water.
- 4) Tab *Shallaki* IBD.

RESULT

The general condition of the patient becomes fair. There is 85% relief in Chief Complaints of the patient. No adverse effect of therapy was seen.

DISCUSSION

The line of treatment given for *vatvayadhi* is adopted for *Katishool* (low backache) *Kati Basti* (specific medicated lukewarm oil is poured on the lower back or specific time which is held by a small frame). It is external therapy that causes localized *snehan* and *swedan* which acts against the *ruksha gun* (dryness) and *Sheeta guna* (coldness) of *vata*. The properties of *sahacharadi* tail such as *Snigdha*, *Guru*, and *Ushna* are *Vata Shamak*. It encourages muscle health by nourishing the muscle fibres, regulates muscle function by acting against inflammation. Its phytochemical composition has a relaxing and soothing effect on tendons and ligaments.

Charak Vagbhata mentioned the use of *basti* prepared with *tikta dravyas*, *ksheer*, and *ghirta* in *asthigata dosha* (bony tissue) along with the use of *swayoni dravyas* (similar substances). *Sushruta* also mentioned similarly in diminished *dhatu*s.

Probable mode of action of *Panchatikta ksheer basti*.

Vata dosha is predominantly present in *asthi datu* and joints by *Ashraya – ashrayi* phenomenon *ksheer* has *Snigdha* and *Madhura* properties which do *shaman* of *Vata Dosha*. Here *ksheer* was prepared

with *tikta rasa* which is said to be effective in *As-thigata* and *Majjgata rogas*.

Basti dravyas contain *Madhu*, *Saindhav*, *Ghrita* and *Bala Tail*. *Madhu* contains sucrose and many more enzymes. *Saindhava* contains NaCl and other ions which generate action potential by which ion exchange take place through the membrane of the intestine. This exchange of ions may help in – taking out vitiated *doshas* mainly *vayu* from the body. *Ghrita* is *Snigdha guna pradhan* which can control vitiated *Vata dosha* due to its properties. *Bala tail* has anti-inflammatory and *Tridoshshamak* properties.

Brhadvataintamani rasa was used in treatment is indicated in all types of *Vataja Vikara*, *Trayodasanga Guggulu* is useful in *Snayugatvata* (various tendon and ligament disorders), *asthigatvata* (disorders of bone), *majjagatvata* (disorders of the bone marrow). *Maharasnadi Kashyam* is used in *Vata* disorders like low back pain, osteoarthritis, neck pain etc. The main content is *Guggulu*, which *Ushna veerya* and *Katu Vipak*. *Ushna guna* is considered as *Vatashamak* and *Vednasthapana*.

CONCLUSION

Combine Therapy of *kati basti* with *Sahachar* oil, *Panchtikta ksheer basti*, *Brihatvatachintamani rasa*, *Trayodashanga guggulu*, *Maharasnadi kwath*, are effective in the management of *katigatvata* (PIVD). There is no adverse effect found in course of treatment.

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