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Effect of *Vatagajankusha Rasa* with *Bhringaraja Taila Nasya* in the Management of *Manyastambha* with Special Reference to Cervical Spondylosis – A Case Study

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ABSTRACT:

Manyastambha, described in Ayurveda as one of the Vataja Nanatmaja Vyadhi, results from the Avarana of Vata by Kapha, leading to Ruk (pain) and Stambha (stiffness) in the cervical region (Manyapradesha). Its cardinal features closely parallel those of cervical spondylosis, a degenerative disorder of the cervical spine characterized by neck pain, stiffness, and occasionally radicular symptoms such as paresthesia, sensory disturbances, vertigo, and giddiness due to neural compression. The prevalence of cervical spondylosis is steadily increasing, particularly among younger adults, due to sedentary habits, prolonged screen time, poor posture, and lifestyle factors. Radiological evidence of cervical degeneration is seen in 25% of individuals below 40 years, 50% above 40 years, and up to 85% of those over 60 years, often without symptoms.

The 24 years old female, presented with complaints of Pain and stiffness in neck region radiating to Right hand since 10 months. Based on examination and classical symptoms, she was diagnosed with *Manyastambha*. The patient was administered *Vatagajankusha Rasa* for 15 days, along with *Nasya* Karma using *Bhringaraja Taila* for 7 consecutive days. the patient reported significant relief in stiffness and pain, with improved range of motion in the cervical region. No adverse reactions were observed. Follow-up after 10 days showed sustained improvement with no recurrence of symptoms.

Keywords: Manyastambha, Cervical spondylosis, Vatagajankusha Rasa, Bhringaraja Taila Nasya.

INTRODUCTION:

Manyastambha is one among the 80 Vataja Nanatmaja Vyadhi. Manyasthambha is understood by two words – "Manya" and "Stambha". Manya is Greeva Paschadbhaga² (Posterior part of the Neck) and Stambha means Nishalikarana³ (stiff or immovable). Manyastambha occurs due to Avarana of Vata by Kapha leads to Ruk (pain) and Stambha (stiffness) at Manyapradesha⁴. The cardinal features of Manyastambha can be clinically correlated with symptoms of Cervical Spondylosis.

Cervical spondylosis is a degenerative condition of the cervical spine and symptoms manifest as neck pain, neck stiffness and can be accompanied by radicular symptoms when there is compression of neural structures⁵. The prevalence of cervical spondylosis is steadily increasing, particularly among younger adults, due to sedentary habits, prolonged screen time, poor posture, and lifestyle factors. Radiological evidence of cervical degeneration is seen in 25% of individuals below 40 years, 50% above 40 years, and up to 85% of those over 60 years, often without symptoms⁶. India shows an incidence of 3.5 cases per 1000 population, with male to female ratio of 3:1⁷. According to Indian State Level Disease Burden, Neck pain is the 3rd leading cause of YLDs in Karnataka.⁸

Conventional management focuses on analgesics, NSAIDs, physiotherapy, cervical traction, supportive orthoses, and in severe cases, surgical intervention⁹. However, long-term use of NSAIDs and analgesics is associated with adverse systemic effects¹⁰. highlighting the need for safer alternatives.

Ayurveda offers a holistic approach to the management of *Manyastambha* through therapies like *Nasya Karma*, *Rooksha Sweda*¹¹, *Nasapana*¹², *Kukkutanda Sweda*, *Abhyanga*¹³, and *Shamanaoushadhi*. These interventions aim not only to relieve pain and stiffness but also to correct the underlying *doshic* imbalance and prevent recurrence.

As Manyastambha is considered as one among the Urdhwajatrugata Roga and among Panchakarma, Nasya Karma is the prime line of treatment for Urdhwajatrugata roga. So Bhringaraja Taila¹⁴ indicated in Manyastambha was chosen for Nasya Karma and also Vatagajankusha Rasa¹⁵ indicated in Manyastambha.

CASE STUDY:

Chief complaints: Pain and stiffness in neck region, radiating to right hand since 10 months.

Associated complaints: low back ache occasionally since 2 years

History of present illness –The 24 years old female patient was apparently healthy 10 months back. Then she gradually developed Pain and stiffness in Neck region, radiating to right hand and occasionally associated with low back ache since 2 years. For the past 1-month Symptoms got aggravated after excessive writing and physical exertion relived after rest. For this she took allopathic treatment and got relief. After stoppage of medicine same symptoms reoccurred. So, the patient visited BVVS AMC&H, Bagalkot for Ayurvedic line of management.

Past history -Patient is not K/C/O Hypertension, Diabetes, mellitus, Thyroid disorder.

Past treatment history - Tab. Dolowin - SOS

Family history - Nothing significant

Personal history

Diet - Vegetarian

Appetite - Good

Bowel- Hard stools -Regular

Micturition - Regular

Sleep- Disturbed

Habits- None

Occupational history – Student [Prolonged sitting and Sedentary lifestyle]

Arthava vrittanta: Menarche- 14yrs, Regular - 4-5 days/28 days

General examination-

Built - Normosthenic

PICCLE- NAD

BMI- 21.6kg/m²

Vital signs:

BP-120/70 mm Hg

PR- 76 b/min

RR- 16 c/min

Temperature- 98.30 F

ASTASTHANA PAREEKSHA:

1.	Nadi	Pittaja
2.	Mala	Vikruta
3.	Mutra	Prakruta
4.	Jivha	Nirlipta
5.	Shabdha	Prakruta
6.	Sparsha	Anushnasheeta
7.	Drik	Prakruta
8.	Aakriti	Madhyama

DASHAVIDHA PARIKSHA:

1	Prakriti	Pitta Kaphaja
2	Vikruti	Vata Kapha
3	Sara	Madhyama
4	Samhanana	Madhyama
5	Pramana	Madhyama
6	Satmya	Vyamishra
7	Satva	Madhyama
8	Ahara Shakti	
	Abhyavaharana Shakti	Madhayama
	Jarana Shakti	Madhayama
9	Vyayama Shakti	Madhayama
10	Vaya	Yuva

Systemic examination-

CNS - Conscious, well oriented to time, place, person

CVS-S1, S2 heard, no added sounds

RS- clear, AEBE

PA- Soft, non-tender

Musculoskeletal Examination of Cervical Spine

A. Inspection

1. Deformity: absent

2. Swelling: absent

3. Discoloration: absent

4. Scar mark: absent

B. Palpation

1. Local temperature: present

2. Tenderness: Cervical region and Right shoulder

3. Swelling: absent

C. Range of Movement of Cervical Spine

Flexion	70
Extension	60
Left lateral flexion	60
Right lateral flexion	60

SPECIFIC TEST:

Spurling's test: Positive

Neck distraction test: Positive

Lhermitte's sign: Negative

VAS score: 04

NIDANA PANCHAKA

Nidana

Aharaja	Viharaja	Manasika
Rooksha	Vivruta Asana	Chinta
Pramitashana	Vivruthadwa Nirikshana	
Vishamashana	Ratrijagarana	

Poorvaroopa: Avyakta

Roopa :Manya ruk, Manya stambha

Samprapti :

Nidana ↓

Vata and Kapha Prakopa



Kaphavarana



Sthanasamshraya in Manya Gata siras



Manyastambha

Upashaya: Vishrama and Hot fomentation.

Anupashaya: Ativyayama, Ratrijagarana.

Samprapti Ghataka:

Dosha: Vata Kapha Udbhavasthana: Amapakwashaya

Dooshya: Rakta, Mamsa, Meda, Asthi Sanchara sthana: Rasayani

Agni: Dhatwagni mandya Vyakta sthana: Manya
Ama: Dhatwagni mandya Adhishtana: Manya

Srotas: Rakta, Mamsa, Asthi, Majja Roga marga: Madhyama

Srotodushti: Sanga Vyadhi Swabhava: Chirakari

CHIKITSA:

Aushadhi	Matra	Kala	Anupana	Duration
Bhringaraja Taila Nasya	8 drops [Each nostril]	Morning	-	1st -7th day
Vatagajankusha Rasa	1 tab (150mg) BD	After food	Sukoshna Jala	1st -15thday

CRITERIA FOR ASSESSMENT OF PARAMETERS 16

Gradings for Assesment of Subjective Parameter

Grades	Ruk (neck pain)	Stambha (neck stiffness)
Grade 0	No neck pain	No stiffness
Grade 1	Neck pain aggravates with movement	Morning stiffness

Grades	Ruk (neck pain)	Stambha (neck stiffness)
Grade 2	Neck pain without movement	Later hour stiffness on same day
Grade 3	Neck pain which disturbs the sleep	Continuous stiffness

Gradings for Assesment of Objective Parameter

Range of Movements of Cervical Spine:

Grades	Flexion
Grade 0	No restriction i.e., able to touch the interclavicular line ,80°
Grade 1	Movement from $70^{\circ} - 80^{\circ}$
Grade 2	Movement from 60° - 70°
Grade 3	Movement less than 60°

Grades	Extension
Grade 0	Normal i.e., able to extend the head up to the level when tip of the nose and forehead become in horizontal plane $,40^{\circ}$
Grade 1	Movement from 40° - 50°
Grade 2	Movement from $50^{\circ} - 60^{\circ}$
Grade 3	Movement more than 60°

Grades	Lateral flexion (Right /Left)
Grade 0	Normal i.e., ear able to touch the shoulder tip, 45°
Grade 1	Movement from 45° - 55°
Grade 2	Movement from 55° - 65°
Grade 3	Movement more than 65°

RESULT:

SUBJECTIVE PARAMETERS:

Parameters	Before treatment 1st day	Observation 7 th day	After treatment 16th day	On Follow up 25 th day
Ruk	Grade -2	Grade -0	Grade -0	Grade -0
Stambha	Grade -2	Grade -0	Grade -0	Grade -0

OBJECTIVE PARAMETERS:

Parameters	Before treatment 1st day	Observation 7 th day	After treatment 16th day	Follow up 25 th day
Flexion	Grade -1	Grade -0	Grade -0	Grade -0
Extension	Grade -2	Grade -1	Grade -0	Grade -0
Left lateral flexion	Grade -2	Grade -1	Grade -0	Grade -0
Right lateral flexion	Grade -2	Grade -1	Grade -0	Grade -0

DISCUSSION:

Manyastambha occurs due to the Avarana of Vata by Kapha in the cervical region. As it is classified under Urdhwajatrugata Roga, Nasya Karma is considered the most effective Panchakarma treatment. Nasya acts by reaching the Shringataka Marma, spreading through the Urdhwajatru area, dislodging morbid Doshas, and eliminating them from the Uttamanga. This process helps relieve pain and stiffness by improving circulation, promoting vasodilation, and strengthening the neck and shoulder structures.

Bhringaraja Taila is selected for Nasya because of its Vata-Kaphahara, Balya, Rasayana, and Shothahara properties. Its Ushna Virya, Katu-Tikta Rasa, and Ruksha Guna help clear Srotorodha and reduce Kapha-related stiffness, while Snigdha Guna and Madhura Rasa pacify aggravated Vata. Ingredients like Manjishtha and Nagakesara reduce inflammation, and Balya dravyas such as Bhringaraja, Tila, and Bala strengthen cervical tissues. Rasayana herbs like Yashtimadhu aid tissue nourishment and regeneration. Thus, Bhringaraja Taila effectively alleviates symptoms of Manyastambha.

Vatagajankusha Rasa acts through Deepana, Pachana, Shoolaghna, Shothahara and Rasayana properties. Shunthi, Maricha, Pippali, Lohabhasma and Gandhaka do Amapachana by improving digestion and clearing Srotorodha. Trikatu and Nirgundi relieve pain and stiffness through their Shoolaghna action. Lohabhasma, Gandhaka, Tankana, Agnimantha and Shunthi reduce inflammation with their Shothahara effect. Pippali, Haritaki, Vatsanabha, Rasasindhura, Haratala and Makshika ingredients act as Rasayana, nourishing Dhatus, preventing degeneration. This combined action pacifies Vata, reduces Kapha obstruction, relieves pain and stiffness, improves circulation and supports cervical tissue strength in Manyastambha.

CONCLUSION:

Manyastambha caused due to Avarana of Vata by Kapha, so clearing this obstruction becomes the primary therapeutic goal. Nasya with Bhringaraja Taila helps remove the blockage while simultaneously strengthening the Greeva and Skanda regions. Its Vata-Kaphahara, Balya, Rasayana, Shothahara, and Vedanasthapaka properties collectively reduce stiffness, pain, and inflammation. Alongside this, Vatagajankusha Rasa supports the management of Manyastambha by promoting Deepana and Pachana to reduce Ama, relieving pain through Shoolaghna action, decreasing inflammation with its Shothahara effect, and nourishing the Dhatus via its Rasayana property. Together, these interventions pacify vitiated Vata, alleviate symptoms, and enhance cervical mobility, offering a comprehensive approach to the condition.

REFERENCES:

- 1. Agnivesha, Charaka Samhita, Vaidya Yadavji Trikamji acharya, Chakrapanidatta commentary, Sutra Sthana, chapter- 20, shloka no 11, Choukambha Publication, Edition: reprint 2013, Varanasi, Pp -112,113.
- Shastri Paradakara PH (1998) amarkosh or namalinganushasana Dwitiya kand manushya varg 6/65 chaukhambha Sanskrit sansthan, varansi, India, pp: 209.
- 3. Vaidya Yadavji Trivikramji Acharya edited Sushruta Samhita with Nibandha sangreha Commentry, Nidanas Sthana, Chapter No-1, Shloka No-27, Page No262, Reprint edition 2014, Pub; Choukamba Surbharati Prakasan, Varanasi.
- 4. Acharya P.V Sharma, Sushruta Samhita, Nidana Sthana, chapter- 1, shloka no-67, Choukambha Publication ,1st edition Varanasi, Pp-14-15.
- 5. Kelly DG, Groarke PJ, Butler JS, Poynton AR, O'Byrne JM. The natural history and clinical syndromes of degenerative cervical spondylosis. Adv Orthop. 2012; 2012: 393642. [PMC free article] [PubMed]
- Nicki. R. Colledge, Brain R. walker, Stuart H. Ralston. Davidson's principles and practice of Medicine, chapter 26, disorders of spine and spinal cord, edition 21st; Pp 1221.
- Dr akansha valecha and dr. himanshu rai, European journal of biomedical and pharmaceutical sciences, issn 2349-887, volume 5, issue 2,772-777, year 2018.www.ejbps.com.refered on 30/01/18.
- 8. Indian Council of Medical Research https://share.google/94QAHts5aMjmqHxOS
- Shyamal Sen, Chapter no 28, Neurology, Cervical and Lumbar Spondylosis, G. S. Sainani, API textbook of medicine, 6th edition, Association of Physicians of India publication, 1999: Pp. 830.
- Nicki. R. Colledge, Brain R. walker, Stuart H. Ralston. Davidson's principles and practice of Medicine, part-2, musculoskeletal Disease, edition 21st. Pp 1077.
- 11. Acharya P.V Sharma, Sushruta Samhita, Chikitsa Sthana, chapter 5, shloka no-18,19, Choukambha Publication, 1st edition, Varanasi, Pp- 321
- 12. Dr. Indradeva Tripathi Chakradatta, Vaidhyaprabha, Hindi commentary, edited by Prof Ramanath Dwivedy, *Vata*vyadhi Chikitsa, Shloka no.23,24, 3rd edition 1997, Pp.134.
- 13. Dr. Bulusu Sitaram, Bhava Prakasa of Bhavamishra, volume-2 Madhyama and Uttara khanda, chapter 24th *Vata*vyadhiadhikara, shloka 75-78, Choukambha Publication: 2010,1st edition, Varanasi, Pp 272.

- 14. Prof. Siddhi Nandan Mishra, Bhaishajya Ratnavali Kshudrarogadhikara., Chapter 60, Shloka no. 133-138, Choukambha Publication, 2015 reprint, Pp 946
- Prof. Siddhi Nandan Mishra, Bhaishajya Ratnavali Vatavyadhiadhikara, Chapter 26, Shloka no. 114-118, Choukambha Publication, 2015 reprint,
 Pp 528
- 16. Dr. Manjunath Akki, Dr. Suresh Hakkandi, Dr. Arti Panwar. Evaluation of comparative efficacy of Guda Sunthi and Manjistha Guggulu Avapeedana *Nasya* in *Manyastambha* (Cervical Spondylitis). J Ayurveda Integr Med Sci 2019; 2:1-6.

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