



## Clinical trial of *PanchatikattaKsheer Basti* in the Management of *Katigraha w. s. r.* to degenerative changes of intervertebral disc at lumbar region.

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### ABSTRACT

*Katigraha* is degenerative condition in which affecting vertebral bodies and vertebral disc and its associate with lumbar spine. We can correlate *katishool* in lumbar spondylosis, low back pain affects approximately 60.85% of adult during some point of their life and 10% of this is because of lumbar spondylosis. *Katigraha* owing to the grasping pain or stiffness in the *kati Pradesh*. *Kati* is one of the *vatasthanas*, pain and stiffness is caused by *vata*. Hence, *katigraha* may be considered as *vatavyadhi*. *Basti* is the *Agryachikitsa* for *vatadosha*. *PanchatikattaKsheer Basti* is *Vathar, Bruhan* and *Prishtashoolhar* it should be good in degenerative condition associated with pain affecting *Trik* region like lumbar spondylosis. **Aim:-** clinical trial of *PanchatikattaKsheer Basti* in the Management of *Katigraha* (degenerative changes of intervertebral disc at lumbar

region.) **Objective:** Establish the Mechanism of Action of *PanchatikattaKsheer Basti* in the Management of *Katigraha*. **Materials and methods:** *PanchatikattaKsheer Basti* is given to 40 diagnosed patient after application of Inclusion and Exclusion criteria in *Yogbasti* Pattern for 8 days. **Observations & Results:** *Katigraha* is observed in mostly after 45 age and female are more affected than male. Middle class and poor patients are generally affected by *katigraha* workers and housewife are more suffered by *katigraha*. After complication 8 days of *PanchatikattaKsheer Basti* lumbar pain, stiffness of the lumbar and lower limb, numbness and tingling sensation of the lower limb are found significant results. **Conclusion:**

*PanchatikattaKsheer Basti* Is found to be having very important role in the treatment of by considering it as *Katigraha*.

## Key words :-

*Katigraha, Panchatikata Ksheer, Basti etc*

## INTRODUCTION

Low back pain is the single most common cause for disability in individuals aged 45 years and as result carries tremendous weight in socioeconomic considerations. During the clinical examination, the disease may represent as low back pain, spinal stenosis, numbness, tingling sensation, swelling in lumbar region. This condition can be correlate with *Katigatvata* some ancient also describe few disorder having resemblance such as *Katigraha, trikagraha, Pushtagraha* , *Trikashool* , *Pushtashool, Vatajshool, Trikavedana*. The description about *Katigatavat* is not available as a separate disease entity in any *Ayurvedic* text. It is mentioned as one of the *Vyatvyadhi in CharakSamhita (80 NanatmjaVatvyadhi)*.

Spondylosis s common type of *Vatik* disorder found in all races. Due to change in life style like unstable sitting, sleeping, bike riding, standing and low nutritional value food as the junk food. *katigatvat* emerged in society as prominent disease, during the pathogenesis. when the *vititatedvata* get into the vertebrae then due to the inverse relationship in *Asthiand vata*. As the *vata* increases *Asti* decreases i.e *asthikshya* causing pain, tingling sensation , numbness<sup>[2]</sup>

Today the modern science deal with these kind of disease with analgesics and steroid but their side effect hampers the physiology more. In the *Ayurvedic* text *Purishadhrakala* is similar to *Asthidhara*

*kala*. In *Ayurvedic* suggest that *Asthigatvata* in best treated by *Panchakarma upakarama* with *siddha* (medicated) *ksherr-shiddhaghrita* using drugs having *tikta rasa* such as *Panchtikta*. *Tiktakshreebastiis* indicated in all type of *Astigmatvikar*. Further text advocate that vitiated *vata* which is located in *katiregion* i.e around lumbar region should be treated by *Basti karma* therapy and *sthaniksnehan, swedan* with drugs having *vata* and *kapha* pacifying properties. Ageing is the progressive, universal decline first in functional reserve and then in function that occurs in organisms over time<sup>[5]</sup> . Ageing is heterogeneous .It varies widely in different individuals and in different organs within a particular individual. Ageing is not a disease; however, the risk of developing disease is increased, in old age *Asthikshaya* is not exactly a disease occurring due to *Dosha-Dushya Sammurchhana* but a condition where because of degenerative changes in *Asthi* , *vata dosha* residing in *asthi* vitiates giving rise to symptoms like bone & Joint pain<sup>[4]</sup>

## Aim:-

To Rule out the clinical trial of *PanchatikattaKsheer Basti* in the Management of *Katigraha w.s.r.* to degenerative changes of intervertebral disc at lumbar region.

## Objective:-

To establish the Mechanism of Action of *PanchatikattaKsheer Basti* in the Management of *Katigraha w.s.r.* to degenerative changes of intervertebral disc at lumbar region.

## Materials and methods:

### Source of raw material :

Raw material collected from the department of *Rasashastra and Bhaishjya Kalpana*, CSMSS Ayurved Mahavidyalaya, *Kanchanwadi*, Aurangabad.

### Inclusion criteria: [1]

1. Irrespective age, sex, race, religion.
2. Patients with symptoms of
  - Low back pain radiating to lower region

## Drug Review, Preparation of Drug:

### *PanchatiktaKsheer Basti* contents:

Sr. no.	Name	Rasa	Guna	Virya	Vipak	Doshghnata
1	<i>Patol</i>	<i>Tikta</i>	<i>Laghu, Ruksha</i>	<i>Ushan</i>	<i>Katu</i>	<i>Tridoshshamak</i>
2	<i>Nimba</i>	<i>Tikta, Kashya</i>	<i>Laghu, Ruksha</i>	<i>Shita</i>	<i>Katu</i>	<i>Kaphapitta</i>
3	<i>Chirayata</i>	<i>Tikta</i>	<i>Laghu, Ruksha</i>	<i>Ushan</i>	<i>Katu</i>	<i>Tridoshshamak</i>
4	<i>Rasana</i>	<i>Tikta</i>	<i>Guru</i>	<i>Ushan</i>	<i>Katu</i>	<i>Kphavatshamak</i>
5	<i>Sapataparni</i>	<i>Tikta, Kashya</i>	<i>Laghu, Snigdha</i>	<i>Ushan</i>	<i>Katu</i>	<i>Kaphapittashamak</i>

### Methodology Used:

Details of procedure – *PanchatikattaKsheer Basti*

No. of Patient – 40

Matra (Dose) – According to *Sharangadhar Madhyam Matra* - 640 ml

Ingredients

- Restricted movement
- Numbness/Tingling sensation
- Swelling in lumbar region
- Stiffness

### Exclusion criteria:

- Infectious disease e.g. HIV positive, HbsAg positive, Koch's
- Potts's disease, cauda equina syndrome, Muscle paralysis, *ankylosing spondylosis*
- Previous spine surgeries.
- Pregnancy.
- Patient who are not willing for trial.

- *Patol* -20 gm
- *Bhunimba* - 20 gm
- *Chirayat* - 20 gm
- *Rasana* -20 gm
- *Sapatparni* -20 gm
- *Milk* -400 ml
- *Ghrita* - 80 ml
- *Madhu* -50ml
- *Siandhav* -10gm

## Procedure :-

### Procedure of Basti (PanchatiktaKsheer Basti) [3] :-

#### 1) Poorvakarma :-

- The patient will be asked to evacuate bowel and urine.

- SarvangSnehan will be done with Tiltail.

- Sarvangbhashpswedan will be done after snehan.

#### 2) Pradhan karma :-

- The patient will be asked to lie down on Abhyanga table in left lateral position

(i.e. Vamparshavasthiti) flexing the Right hip and knee keeping on his left leg

- a) Anuvasanbasti – 120 mlTil tail taken in basti yantra

Lubrication of anus will be done with til tail.

- Basti will be- given by applying equal pressure on Bastiputaka

-b)PanchatikattaKsheerBasti :- 640 ml taken in basti yantra.

Lubrication of anus will be done with til tail.

- Basti will be given by applying equal pressure on Bastiputaka

#### 3) Pashchatkarma:-

- Aftar Bastidanatadan of Patient must be done.

- The patient will be kept in Supine position for few min

- PathyaApathya plan will be advised to the patient.

- pratyagaman should be observe.

## Criteria for Clinical Assessment:

### 1. Low back Pain:

Criteria	Grading
No Pain While Walking	0
Mild Pain While Walking	1
Moderate Pain While Walking	2
Sever Pain While Walking	3

### 2. Restricted Movement:

Criteria	Grading
Normal	0
Mildly Restricted	1
Moderately Restricted	2
Severely Restricted	3

### 3. Tingling Numbness:

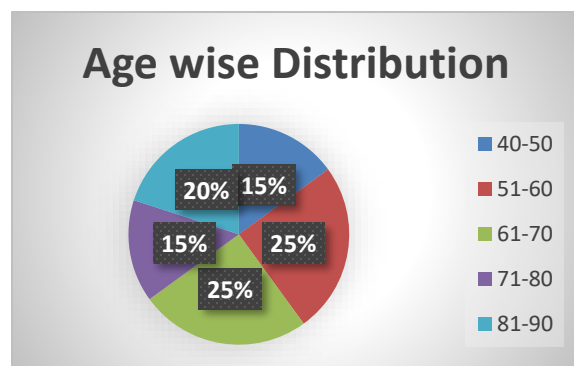
Criteria	Grading
No Numbness	0

Mild sensation numbness	Tingling without	1
Mild sensation intermittent numbness	tingling with	2
Moderate sensation continuous numbness	Tingling with	3

## Observations & Results:

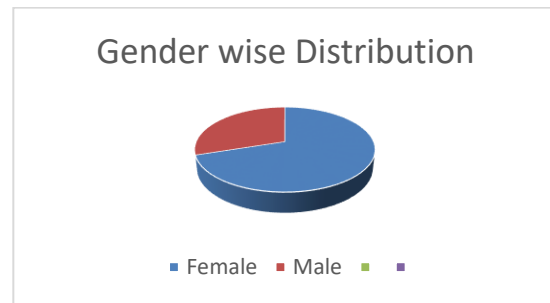
### Age wise Distribution:

Age in years	No. of Patient	% of pt in different age group
40-50	6	15
51-60	10	25
61-70	10	25
71-80	6	15
81-90	8	20



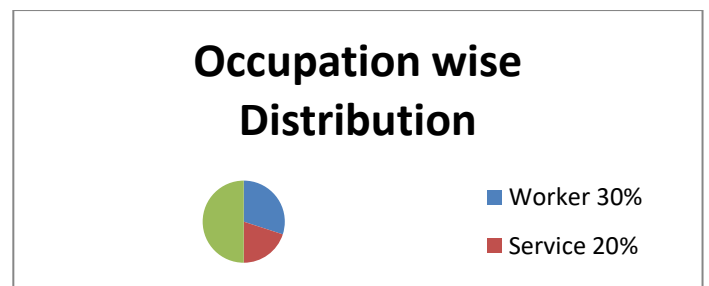
### Gender wise Distribution:

Sex	No. of Patient	%
Female	28	70
Male	12	30



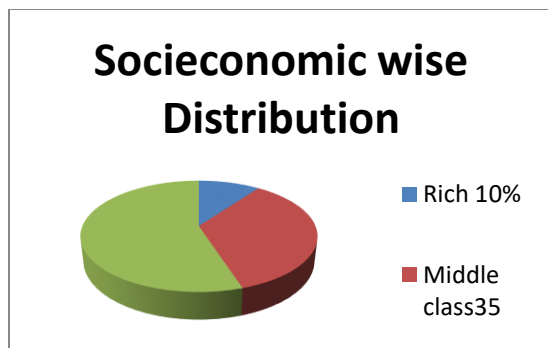
### Occupation wise Distribution:

	No. of Patient	Percentage%
Worker	12	30
Service	8	20
Housewife	20	50



### Socioeconomic wise Distribution:

	No. of Patient	Percentage%
Rich	4	10
Middle class	14	35
Poor	22	55



### Discussion:

The *hetu* or causes of lumbar spondylosis and *Katigrah* mention in *ayurved Samhita* causing *Vat Prakop* and *Dhatu Skhya* are similar they are degenerative changes due ageing or trauma changing in life style and work pattern causing strain over lumbar back and traveling for prolong duration causing continuous jerk and indulge in an salutary – unhealthy food habits causing nutritional defect due to all above etiological factors when vitiated *vat dosh* gets logged in Kati that is lumbosacral region , *Katigat* vat condition occurs. The resembling clinical feature of lumbar spondylosis and *Katigat* vat which explore to the correlation between two alignment such lower back ache (*Katishool*), stiffness (*Katigrah*), Restricted lumbar movement (*Smvedana Katigati*), radiating pain to the lower extremities (*Sancharivedana*) and degeneration of lumbosacral spine ( *katiasti sandhi datuskshya*). Out of this 40, 79.23 % patient got complete relief from back pain, 88.5% patient get relief from restricted movements, and 93.02 % patient relive from stiffness, 70% relief from Tingling numbness with help of *PanchatikattaKshir Basti*. *Charaka* has explained in his theory of

*Swabhavoparamavada* that “there is a causative factor for the manifestation of beings but no causative factor as such exists for their deterioration.”<sup>5</sup>

### Conclusion:

*PanchatikattaKshir Basti* Is found to be having very important role in the treatment of by considering it as *Katigraha*. It is very good in considerably reducing the symptoms of *Katigrah* which is *vataj rog*, *Pachatikattakshirbasti* which is tolerated by patient and also it does not demand a strict regimen and easier for the patient. The study also gives us a treatment protocol which may be followed in such case to provide good reason within minimum days of hospital stay.

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