

## CHAPTER – 6

### DISCUSSION

#### NIDAN PANCHAK REGARDING VISHWACHI :

##### HETU :

- 1) Trauma due to falling. – 40.5 %
- 2) Working in odd postures. – 35.5 %
- 3) Excessive traveling, Bike use. – 14.4 %
- 4) Improper use of pillow. – 27.2 %
- 5) Ruksha, Sheeta ahara sevan. – 40 %
- 6) Frequent consumption of shimbi dhanya(6 to 8 Times/Week)52.2%
- 7) Sleeping late night. – 36.6 %
- 8) Eating spicy food. – 56.4 %
- 9) Tikta rasabhyas. – 12.7 %
- 10) Frequent fasts (Twice a week) – 49.4 %
- 11) Irregular timings of food eating. –36.1 %
- 12) Hard physical work in farms. – 20 %
- 13) To carry or to lift heavy objects. – 13.3 %
- 14) Excessive exercise. – 8.3 %
- 15) Mental stress/worries. – 34.4 %
- 16) Anger (krodha). – 15.5 %
- 17) Holding natural urge of defecation. – 2.8 %
- 18) Shushka Mansa seven. – 8.8
- 19) Excessive walking. – 10.5 %

Hetus listed here can be divided in to three groups i.e.

Aharjanya hetu, Viharjanya hetu & Manasik hetu.

**A) AHARJANYA HETU :**

1. Ruksha, Sheeta ahara sevan. (Fast food, Ice cream, Cold drinks etc.).
2. Frequent consumption of Shimbi Dhanya. (More than 6 to 8 times/week).
3. Eating spicy food.
4. Tikta rasa atisevan. (Nimba patra swarasa –7.2%, Karvellak swarasa-5.5%)
5. Frequent fasts. (Twice/week).
6. Shushka mans sevan.
7. Irregular timings of eating food.

**B) VIHARJANYA HETU :**

- a. Excessive exercise. (Vigorous exercise more than 2 hrs./day)
- b. Trauma due to falling.
  - Road traffic accident – 14.4 %
  - Falling from ladder. – 6.6 %
  - Falling from the tree. – 2.7 %
  - Falling from the steps. – 5 %
- c. Sleeping late night.
- d. Excessive walking.
- e. Hard physical work.
  - Lifting heavy objects. – 15.5 %
  - Carrying heavy objects. – 13.3 %
  - Hard work in farms. – 20 %
- f. Working in odd posture.
- g. Improper use of pillow.

- h. Excessive Traveling, Bike use.
- i. Holding natural urge of defecation.

**C) MANASIC HETU :**

- a. Mental stress / worries.

**PURVA RUPA :**

In case of Vishwachi, rupa i.e. lakshana in mild severity should be considered as purva rupa.

- i) Dull achae in neck, either or both arms, prustha,(upper back).
- ii) Occasional tingling sensation in either or both arms, especially while getting up from sleep.
- iii) Occasional timirdarshan for a short period with sudden neck movement.
- iv) Headachae in the posterior part of the head extending up to the neck.

**RUPA- i.e. Lakshana :**

- i) Moderate to severe pain in neck, either or both arms, & upper back.
- ii) Tingling sensation in either or both arms with routine work or even at rest.
- iii) Timir darshan with sudden neck movement.
- iv) Movement restriction of the neck.

**VISHWACHI PRAKARA :**

According to the common hetus observed Vishwachi is of following types.

- A]** I] NIJA- Aharaviharajanya Vata, Pitta Prakopak hetu janya.
- II] AGANTUK- traumatic hetus like abhighat, prapatan, etc. janya.
- B]** I] VATAJ
- II] PITTA VATAJ.

### **SAMPRAPTI :**

Samprapti of Vishwachi is not mentioned in the Ayurvedic text, but formulated on the basis of Hetus & Lakshnas.

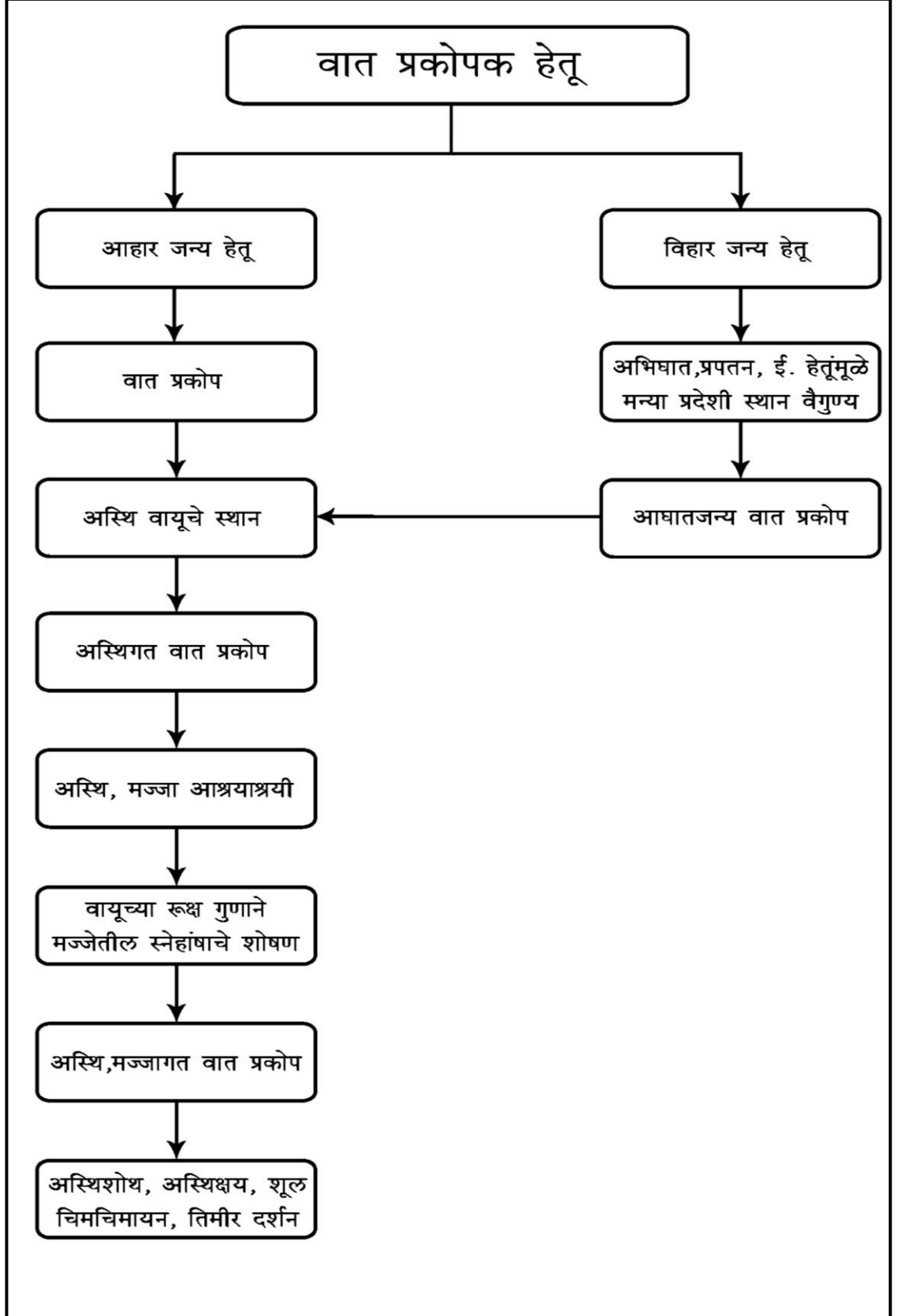
### **SAMANYA SAMPRAPTI :**

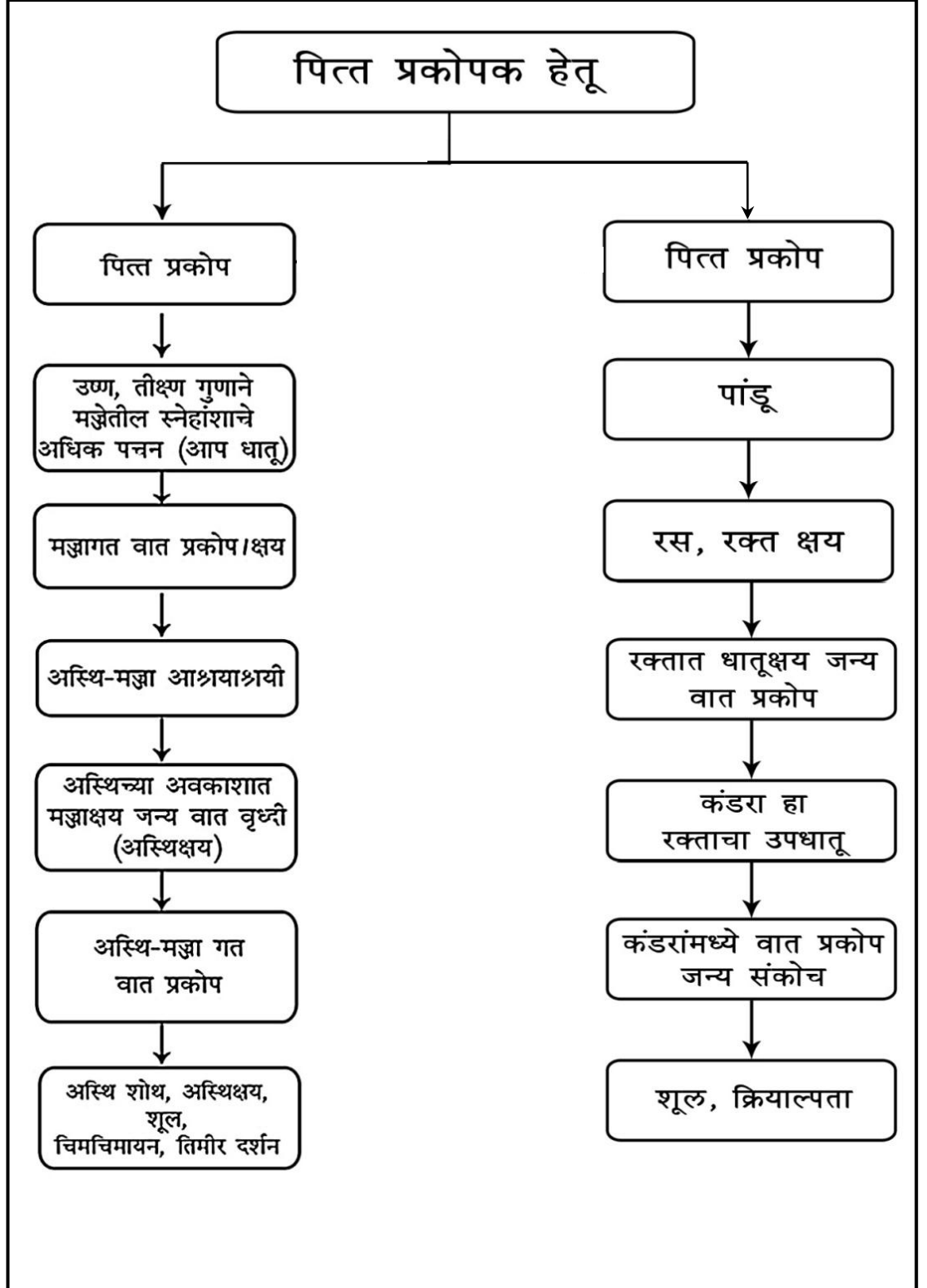
Previously described hetus leads to Vata & Pitta Prakopa. This prakupit Vata dosha creates spasm in the muscles & tendons i.e. (Snayu & kandara) of Cervical region & Upper extremity & there by produces shoola, kriyalpata, in the upper extremity. We know the close relation between Pitta, Majja, & Asthi

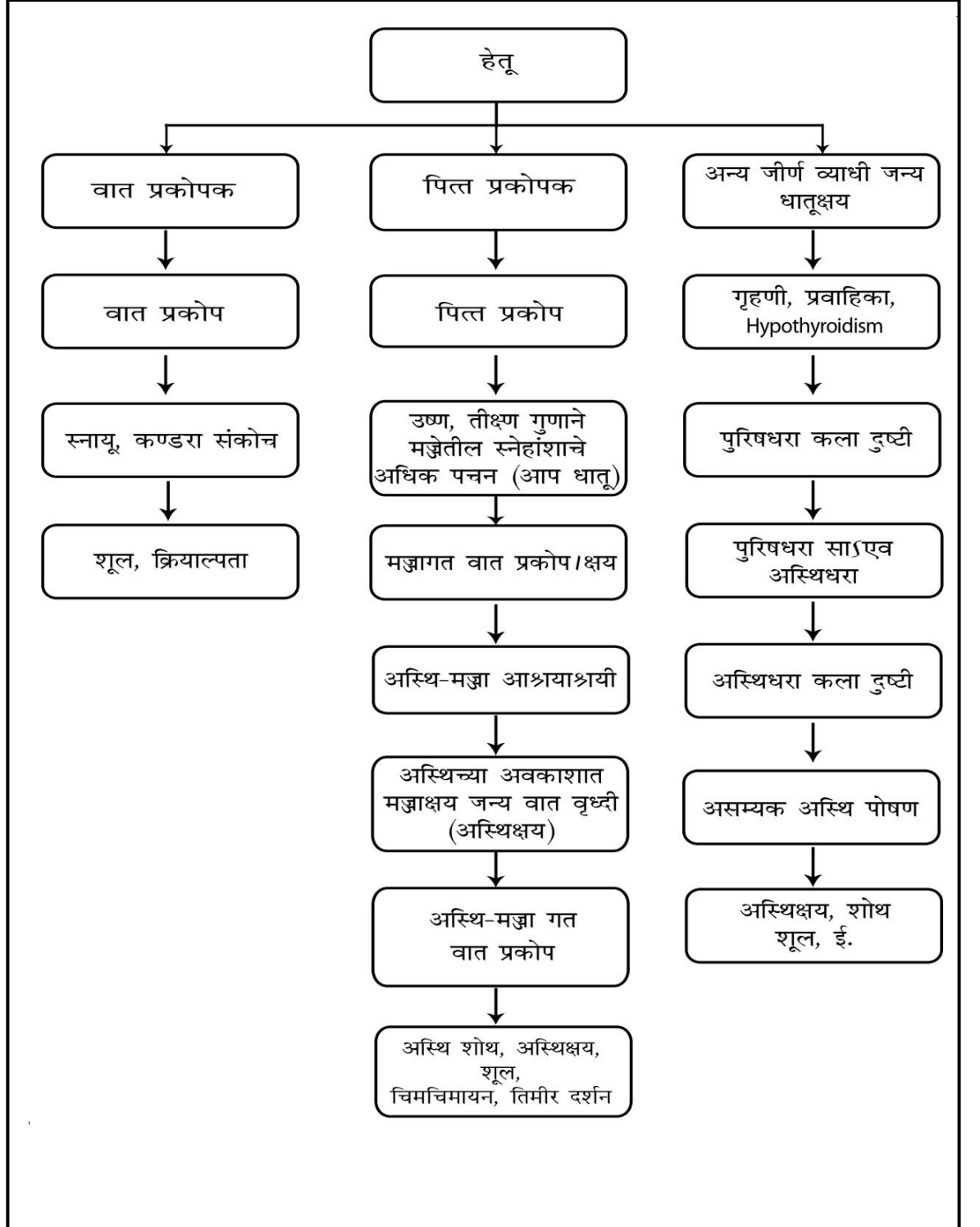
**पित्तधरा कला साऽव मज्जाधरा ।**

When Pitta dosha gets prakupit with intense ushna-tikshna guna , in Majja Dhatu also this ushna-tikshna guna vruddhi leads to excessive pachan of sneha (aap dhatu). Due to excessive pachan of sneha dravya in Majja Dhatu, Majjagat Vata prakop occurs. Asthi & Majja Dhatu are ashraya-ashrayi in nature. (Asthi pooran is one of the pradhan karma of Majja ). Here Majjagat Vata Prakop leads to Majja kshya & tadjanya Vata prakop in Asthi dhatu. Thus Asthi-Majja gat Vataprakop leads to utpatti of Asthi shotha, Asthi kshya, shoola, chimchimayan & timir darshan.

## SAMPRAPTI AT A GLANCE







- i.** If we observe the hetus mentioned above we find that Viharjanya hetus like Trauma in the region of neck, arm or Upper back due to falling or road traffic accident, Excessive use of bike, Strainous physical work, Working in odd postures are most common. This trauma creates kha-vaigunya & produces Aghatajanya Vat prakop. Further this prakupit Vat dosh develops the samprapti of Vishwachi w.r.t. Cervical Spondylosis.

From the three study groups it seems that patients giving history of Falling, or Trauma due to road traffic accident & Excessive travelling on bike are from urban Territory. Hetus like Working in odd posture such as spending significant time on working with Computer or Laptop, Reading books at bed time with heighted pillow under the head, Excessive clerical work were also reported in the patients from urban territory. In this study most of the patients were from rural territory and Farming is their prime work, hence strainous physical work, Lifting or Carrying heavy objects on their head, working in odd posture for long duration are the common hetus reported in these patients.

- ii.** Even though in Ayurvedic samhitas Vishwachi is described under the heading Vatavyadhi, Regarding Samprapti of Vishwachi Vat prakop & Pitta prakop are equally responsible factors to develop the disease. Vat prakopa due to Vat prakopak hetus Affects the Kandaras of Tala (Palm), Pratyanguli (Fingers) & Bahuprustha (Dorsal aspect of the Arm) & there by produces Shoola, Kriya alpata in the Upper extremity. Hetus like Katu rasabhyas, Ratri jagaran, Frequent Upvasa, Spicy food, Akala bhojan, Tobacco chewing produces Pitta prakop. Due to this Pitta prakop intence Ushna-Tikshna guna vridhhi takes place. As Pittadhara Kala sa eva Majjadhara kala this intense Ushna Tikshna guna of Pitta causes excessive pachan of Snehadravya Vata prakop in



Majja dhatu & there by Majjagat occurs. As Asthi Majja are Ashrayashryi in nature Vat prakop in Asthi dhatu also takes place. Thus Asthi Majja gat Vatprakop leads to Asthi Shotha-Kshaya-Shoola, Chimchimayan & Timirdarshan.

Pitta prakop leads to Pandu & tadjanya Rasa-Rakta Kshaya. If this condition remains untreated for long duration Dhatukshayajanya Vat prakop takes place in Rasa, Rakta dhatu. As Kandara is Upadhatu of Rakta, Vat prakop in Kandara also takes place. This prakupit Vat creats Sankoch (spasm) in Kandara & there by develops Shoola, Kriyalpata in the Upper extremity.

**iii. Chikitsa Vivechan & Guna, karma of Trayodashang Guggul and Panchamrut Loha Guggul :**

If we go through the Guna, Karma & Pharmacological action of the ingredients of Trayodashang guggul, we can observe that most of the contents possess Shotha har (Anti inflammatory), Shoola har (Analgesic) properties. Cervical Spondylosis is also Osteoarthritis of the cervical spine, hence the contents possessing Shotha har & Shoola har (Anti inflammatory & Analgesic) Properties are useful in the treatment.

Some of the contents have Anti arthritic property which again becomes useful in the management of Cervical Spondylosis. Contents possessing Snayu shaithilya kar (Muscle relaxant) property are useful in reliving the paraspinal muscle spasm which is the most common radiological finding. Vata Nadi Shoolahar (Neuralgic pain reliever) property as well as Nadi Balya (Nervine tonic) properties of Vriddhadaru, Guggul etc. are beneficial in reliving symptom Pain.

In the observations, Statistical Analysis shows that complete relief in symptom pain is maximum (55 patients out of 60) i.e. 91.6%

with Trayodashang Guggul, Whereas Panchamrut Loha Guggul gives complete pain relief in (9 out of 60) patients i.e. 15%.

While describing the samprapti of Vishwachi we have seen that Vata & Pitta Prakopa are the responsible factors. Contents of Trayodashang Guggul are Vata shamak in nature, some of them are Vata-Pitta shamak & hence are beneficial in the Samprapti bhanga i.e. chikitsa of Vishwachi.

If we go through the Guna, Karma of the ingredients of Panchamrut Loha Guggul, we can observe that the contents of Panchamrut Loha Guggul possess properties like Rasayan, Yogawahi, Vatanadi kshobha nashak, Vata nadi balya, Snayu Kandara sankocha nashak etc.

As most of the Bhasmas are rasayan in nature, Panchamrut Loha Guggul provides adequate dhatu poshak dravya to degenerated dhatu, & thereby stimulates regeneration process in that particular degenerated dhatu.

In Cervical Spondylosis degenerated Inter vertebral disc causes compression to the concerned exiting nerve root. This nerve root irritation causes Tingling, Numbness in the respected area of compressed nerve root. By promoting regeneration process in the inter vertebral disc Panchamrut Loha Guggul reduces compression on the exiting nerve root & proves to be beneficial in relieving symptom Tingling sensation of Vishwachi w.s.r. to Cervical Spondylosis. (For guna karma charts see Appendix )

In the observations, statistical analysis shows complete relief in symptom Tingling is maximum (52 out of 60 patients) i.e. 86.6% with Panchamrut Loha Guggul, whereas Trayodashang Guggul relieves Tingling sensation completely in (4 out of 60 patients) i.e. 6.66%.

In the symptom Vertigo, relief with both the treatments i.e. Trayodashang Guggul & Panchamrut Loha Guggul is almost same i.e. 61.6%.

- iv.** Chronic diseases like Grahani, Pravahika, Hypothyroidism results into Hypocalcemia & Osteoporosis & becomes viprakrushta hetu for bony disorders like degenerative Osteoarthritis, Cervical Spondylosis etc. In such conditions correction of these preexisting diseases should be the primary focus. Without treating these diseases one cannot get better results in Cervical Spondylosis.
- v.** While diagnosing Vishwachi w.r.t. Cervical Spondylosis more importance should be given to the clinical assessment, as in many patients no Radiological changes were observed in x-Ray, even though patient is showing classical symptoms of Vishwachi i.e. Cervical Spondylosis.
- vi.** In the epidemiology of Cervical Spondylosis it is mentioned that mostly patients in the fourth decade of life suffers from Cervical Spondylosis. Statistical results of this study also show that maximum number of patients i.e. 43.89% belongs to the fourth decade. According to ayurveda this stage of life is of Pitta Dosh prabalya, & maximum patients suffer in this age group, suggests that there is some role of Prakupit Pitta Dosh along with Prakupit Vat Dosh in the development of the disease, as mentioned in the Samprapti.

In the epidemiology it is mentioned that Male : Female ratio is 1:1.4 but in this study this ratio is 1:2.1 i.e. Females are more in number than Males. Probably this is due to maximum number of patients are from Rural territory & Males in this territory use to pull on their diseases & does not approach to physician till they suffer badly.

Maximum degeneration in the cervical spine was observed at C5-C6 Disc level. This is due to maximum Flexion & Extension of the cervical spine occurs at this level & there for chances of degeneration at this level are higher than other cervical vertebrae.

- vii.** Regarding Radiological improvement percentage of the patients showing Disc Space Reduction in the pre treatment X-Ray & showing Minimal Disc Space Reduction i.e. improvement in the post treatment X-Ray is higher i.e. 58.33% in the group treated with Panchamrut Loha Guggul, whereas Trayodashang Guggul shows 22.11% recovery in Disc space reduction.

As the contents of Panchamrut Loha Guggul are Rasayan in nature, they promote Regeneration process & there by recovers the degenerative changes in the Inter vertebral disc up to some extent.

Percentage of the patients showing radiological improvement as Lost / Partially Lost normal Cervical Lordosis in the pre treatment X-Ray to Partially lost Cervical Lordosis or Normal Cervical Lordosis in the post treatment X-Ray is higher i.e. 47.8% in the group treated with Trayodashang Guggul, whereas Panchamrut Loha Guggul shows 28.09% recovery.

The contents of Trayodashang Guggul like Babbul, Gokshur, Yawani possess Muscle relaxant property & Ashwagandha, Vriddhadaru, Rasna possess Antispasmodic, Spasmolytic proprieties. Due to Muscle relaxant & Spasmolytic proprieties of the contents of Trayodashang Guggul it relieves Paraspinal Muscle spasm & helps to restore the Normal Cervical Lordosis.

Other factors influencing the Radiological improvement are –

- i) Following strict Patthyapatthya i.e. avoiding Spicy food, Katurasabhyas, Ratri jagaran, avoiding frequent Shimbi dhanya sevan etc.

- ii) Working out the advised postural changes regularly.
- iii) Working out advised Yogasana regularly.
- iv) Age of the patient. Patient in the fourth decade of life, strictly following all the instructions advised to him has more chances of radiological improvement.

**SCOPE FOR FURTHER STUDY :**

To maintain the relief for long duration, postural changes & physiotherapy is equally important as that of oral medication. Yogasana in which backward bending of the cervical vertebrae / entire vertebral column is obtained should be suggested to the patient according to the patients age & comfort. Duration of the asanasthi should be evaluated according to the level of traction desired.