



KATIGRAHA (LUMBAR SPONDYLOSIS) MANAGED BY KATI PIZHICHIL AND PANCHATIKTA KSHEERA BASTI: A CASE REPORT

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ABSTRACT:

Low back pain affects approximately 60-85% of adults at some point in their life and 10% of this is due to lumbar spondylosis (LS). *Katigraha* which is correlated with LS, is a degenerative condition that affects the disc, Vertebral bodies, and/or joints associated with the lumbar spine. Ayurveda has mentioned Panchakarma therapies for the treatment of *Katigraha*. Hence, an effort has been made to evaluate the efficacy of *Kati Pishinchil* and *Basti* procedure along with *Shamana Chikitsa* in the management of the *Katigraha*. This is a single case study of 53 years old female patient. Who came with pain in lower back region radiating to bilateral lower limb (LF>RT), stiffness in the hip region, restricted movement of lower limbs and difficulty in walking for past 1 years. *Kati Pishinchil* with *Kottamchukadi Tailam* and *Panchatikta Ksheera Basti* along with *Shamana* therapy was administered. According to *Charaka* there is no other treatment except *Basti* for the *Shamana* of vitiated *Vata*, and considered as half part of the treatment as so many *Acharyas* has mentioned, and some *Acharyas* also said that *Basti* therapy is the treatment of all diseases. *Kottamchukadi Tailam* for *Kati Pishinchil* has a dual action of *Snehana* as well as *Swedana* which effectively helps in reducing *Vata*. *Tailam* has almost opposite qualities to *Vata Dosha*, thus *Kati Pishinchil* along with *Kottamchukadi Tailam* normalised vitiated *Vata Dosha*. In *shaman* Drugs *Panchatikta Ghrita Guggulu*, *Shanshamani Vati*, combination of *Ashwagandha Churna* + *Shatawari Churna* + *Supushti Yoga* and *Triphala Churna* for *Koshtha Shodhan* has been taken.

The therapy provided marked relief in pain and stiffness. Based on the case study, it can be concluded that *Kati Pishinchil* with *Kottamchukadi Tailam* and *Panchatikta Ksheera Basti* along with *Shamana* therapy is effective in the management of *Katigraha* (Lumbar Spondylosis).

Keywords: Katigraha, Low back pain, Kati Pishinchil, Panchatikta Ksheera Basti.

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INTRODUCTION

Katigraha has been described as a separate disease in the classical text *Gada Nigraha*. It has been correlated with Lumbar Spondylosis (LS) in the present study due to similarity of clinical manifestation and pathogenesis. Low Back Pain (LBP) affects approximately 60-85% of adults at some point in their lives.^[1] LS is responsible approximately 10% of all the back pain conditions. lower back pain ranks as number one cause of disability in individuals under the age of 45.^[2] LS is defined broadly as degenerative condition that causes degeneration of the discs, vertebral bodies, and/or associated joints of the lumbar spine^[3] *Katigraha* is *Shosha* (degeneration), *Stambha* (stiffness) and *Shula* (pain) predominant *Vyadhi* (disease). As correctly said by *Acharya Sushruta* without vitiation of *Vata*, *Shula* cannot be produced. *Acharya Charaka* has described *Katigraha* as one of the eighty *Vatananatmaja Vikara*, and says that *Basti* with a substance such as Milk, Ghee, and *Tikta dravya* is best suitable for the *Asthi pradoshaja vikara*.^[4] That's why we selected *Panchatikta Ksheera Basti*, *Kati Pishinchil* along with *Shamana* Drugs. It is a convincing treatment in Ayurveda for this disease.

Ayurveda advocates Panchakarma therapies like *Kati Pishinchil* and *Basti* procedure along

with *Shamana* therapy in the management of *Katigraha*.

CASE REPORT

This is a single case study of a 53 years old female patient who came to OPD of Panchakarma Department, Pt. Khushilal Sharma Govt. Ayurvedic College and Institute, Bhopal, M.P. (Reg. no.2023/073/0000010) with complaints of pain in the lower back region radiating to the left lower limb, stiffness in the hip region, restricted movement of both lower limbs and difficulty in walking for the past 1 years (not continuous). His condition gradually worsened and he started feeling difficulty in walking without support. He has taken an allopathic analgesics for pain relief. After some time, the patient again complained of pain in the lumbar region radiating to both hips, back of the thigh, and legs with severe intensity (LF>RT). The pain was pricking in nature and aggravated by walking and relieved on rest. There was no significant past history of diabetes or hypertension.

Investigation:

MRI (dated - 01/12/2022) of the lumbar spine suggested diffuse disc bulge with posterior annular tear at L4-L5 level noted causing severe spinal canal stenosis, Bilateral

significant neural recess stenosis & Bilateral moderate neural foraminal narrowing (LF>RT). Diffuse disc bulge with posterior annular tear at L5-S1 level causing thecal sac indentation, bilateral significant neural recess stenosis & Bilateral moderate neural foraminal narrowing.

Diffuse disc bulge with L2-L3 & L3-L4 level causing mild spinal canal stenosis, bilateral neural recess stenosis, LF moderate & RT mild neural foraminal narrowing.

Myelogram shows cut off at L4-L5 level.

On local examination Straight Leg Raising (SLR) was found below 30° in both legs with restricted hip joint movement.

The case was diagnosed as *Katigraha* (Lumbar Spondylosis) on the basis of symptoms and by the MRI of the lumbosacral spine. The patient was admitted at the female IPD of Panchakarma Department, Pt. Khushilal Sharma Govt. Ayurvedic College and Institute, Bhopal (M.P.)

Interventions:

Kati Pishinchil with *Kottamchukadi Tailam* and *Panchatikta Ksherra Basti* prepared with *Dravya* (ingredients) (Table 1) along with *Shamana Chikitsa* (Table 2) were given. Six *Anuvasana* and Fifteen *Niruha Basti* were

given in 3:1manner. Before giving *Panchatikta Ksheer Basti*, we had given *Dashmool Niruha Basti* for first 3 days for *Shodhana* purpose.

Kati Pishinchil is a form of local *Parisheka* (pouring of warm liquid or oil) which is given in specific body parts. The patient was asked to lie down comfortably in a prone position with well-exposed *Kati-Pradesh* (lumbo-sacral region), over *Droni*. Pouring of warm oil over the lumbar region of the patient was done by dipping a piece of clean cloth (gauze) in the warm oil and squeezed the cloth over that area with the hand. The warm oil was poured from the height

of 12 *Angula* (about 9 inches) for 30-45 minutes. After the procedure, the whole oil was wiped out.

Table 1. Ingredients of Panchatikta Ksheera Basti (sequence of preparation)

Dravya (Materials)	Quantity
Madhu (honey)	50 gm
Saindhav Lavana (rock salt)	3 gm
Tila Taila	75 gm
Panchatikta Kalka	25 gm
Kwatha prepared with Ksheera	200 ml

Table 2. Clinical intervention of the patient.

Date	Procedure	Drug & Dose	Time
01/01/23 - 24/01/23	<i>Kati Pishinchil</i>	<i>Kottamchukadi Taila</i>	For 25 days at morning
01/01/23 - 03/01/23	<i>Dashamoola Niruha Basti</i>	<i>Dashamoola Kwatha</i> 450ml	For 3 days Empty Stomach
04/01/23 – 24/01/23	<i>Panchatikta Ksheera Basti</i>	450ml PTK <i>Basti</i> and 120 ml <i>Anuvasan Basti</i> with <i>Ksheera Bala Tailam</i> was given in 3:1	For 21 days PTK <i>Basti</i> = Empty stomach. <i>Anuvasana Basti</i> = after meal.
Shamana			
01/02/23 – 25/01/23	<i>Panchatikta Ghrita Guggulu</i>		2 Twice a day
	<i>Ashwagandha Churna 3gm + Shatawari Churna 3gm + Supushti Yoga 3gm</i>		Twice a day
	<i>Sanshamani Vati</i>		2 BD
	<i>Triphala Churna</i>		5gm HS

Assessment Criteria and Outcomes:

A criteria of assessment was based on the signs and symptoms of *Katigraha* as per Ayurveda text, SLR (Straight Leg Raising) test

for range of movement at hip joint) and ODI (Oswestry disability index) scale (Table 3), which were assessed before treatment, after treatment and after follow up (Table 4)

Table 3. Gradation of symptoms for assessment.

Symptoms	Criteria	Grading
<i>Ruka</i> (pain)	No pain while walking	0
	Mild pain while walking	1
	Moderate pain while walking	2
	Severe pain while walking	3
<i>Stambha</i> (stiffness)	No stiffness	0
	Stiffness for 10-30 min	1
	Stiffness for 30 – 60 min	2
	Stiffness for more than 1 hr	3
Movement of joints (both hip joints)	Normal	0
	Mildly restricted	1
	Moderately restricted	2
	Severely restricted	3

Gait	Unchanged	0
	Occasionally changed	1
	Walk with support	2
	Unable to walk	3
Sleep	Normal	0
	Occasionally disturbed	1
	Frequently disturbed	2
	Unable to sleep due to pain	3
SLR Test	No pain at 90°	0
	Pain > 71 up to 90°	1
	1 Pain > 51 up to 70°	2
	Pain > 31 up to 50°	3
	Pain below 30°	4
ODI Scale*	Minimal disability (0%-20%)	0
	Moderate disability (21%-40%)	1
	Severe disability (41%-60%)	2
	Crippled (61%-80%)	3
	Bedbound (81%-100%)	4
*ODI Scale is composed of 10 sections (Questions). Each question is rated on 6 points (0-5) scale measuring activities like personal care, sleep, social life, etc.		

RESULTS:

After completion of treatment there was marked relief in pain and stiffness of the

joints. (Table 4) The patient felt ease on long-standing, walking, and during her daily activities.

Table 4. Assessment before, after treatment and follow up.

Days → Symptoms ↓	1 st	25 th	40 th
<i>Ruka</i> (pain)	4	1	1
<i>Stambha</i> (stiffness)	3	1	1
Movement of joints	2	1	1
Gait	2	1	1
Sleep	3	0	0
SLR	4	1	1
ODI	2	1	1

DISCUSSION

When the *Vata* increases too much, there is no remedy other than *Basti* for its alleviation. *Basti* has been glorified as the definitive therapy to treat the vitiated *Vata* and *Vatapradhana Vyadhies* (AS. Su. 28/12). *Basti* removes *Mala*, *Pitta*, and *Kapha* and does *Vatanulomana* to relieve the disorders situated in all over the body. *Basti* performs various actions such as *Samshodhana*, *Samshamana*, *Samgrahana*, *Vajeekarana*, *Brumhana*, *Karshana*, *Chakshushya*, and *Vayahsthapana*. *Basti* is “*Param Vatahara*,” and as *Vata* is the causative factor of *Katigraha*, hence, here *Basti Chikitsa* was opted.

In *Katigraha*, *Ruja* and *Stabdhta* are observed, and according to Ayurvedic classics, *Basti* is advocated in *Shakhagata Vyadhies* and in patients having *Stambha*, *Sankocha*, pain, severe constipation, fracture, etc., (Ch. Si. 1/32-34).

It is clear that there is the involvement of *Asthi* – *Majja Vaha Srotas* in *Katigraha*. *Ksheera Basti* is described as the main line of treatment in *Asthi gata Vikaras* by *Acharya Charaka*. The *Basti*, which has *Ksheera* or milk as the main ingredient is known as *Ksheera Basti*. *Ksheera* is the ingredient which can be used in the *Basti* preparation as per the condition and *Doshik* involvement. As per the

quantity of this *Basti* and use of *Ksheera* as a main ingredient, *Ksheera Basti* serves dual function, i.e., *Niruha* and *Anuvasana*. hence, it acts as *Shodhana* as well as *Snehana*. And the drugs *Guduchi*, *Nimba*, *Vasa*, *Kantakari*, *Patol Patra* in *Bhavprakasha Nighantu* all mentioned in treatment of *Vata Pradhan Vyadhi*, which do their work with *Rasa*, *Virya*, *Vipaka* and by *Prabhava*. *Ksheera Basti* relieves the *Margavarodha* and produces *Brimhana* effect. In this study, *Panchatikta Ksheera Basti* is used as *Yapana Basti* continuously for 21 days.

The rectum has rich blood and lymph supply, and drugs can cross the rectal mucosa such as other lipid membrane. Thus, unionized and lipid-soluble substances are readily absorbed from the rectal mucosa. In *Basti Karma*, a homogeneous emulsion of Honey, *Saindhava*, *Sneha Dravya*, *Kalka*, and decoction mixed in remarkable combination after proper churning may break the large and middle chain fatty acid to small chain fatty acids. The mixture given facilitates absorption better than a single drug per rectum.

Sneha Dravya (Oil) is used in *Kati Pishinchil* has dual action of *Snehana* - *Swedana* which assists in alleviating *Vata* effectively. In *Katigraha*, *Vata Dosh* is mainly involved. *Sneha* has almost opposite qualities from the *Vata Dosh*. Thus, *Kati Pishinchil* with *Kottamchukadi Taila* normalizes the vitiated

Vata Dosha and helps in *Samprapti Vighatana* (breaking of the pathogenesis) of *Kati Pishinchil*. The heat applied through *Kati Pishinchil* over the affected region helps in contesting these symptoms. Degeneration is also one among the causes for *Katigraha*, where *Vata Dosha* is present and there is *Kshaya* (depletion) of *Snehabhava*. With this consideration, *Snigdha Sweda* would be an ideal line of management, which is delivered effectively by *Kati Pishinchil* with oil. Thermal therapy increases the circulation and local metabolic process with the relaxation of the musculature. Application of heat causes relaxation of muscles and tendons of the low back, improves the blood supply, venous drainage, lymph supply and activates the local metabolic processes which are responsible for the relief of pain, tenderness, swelling, and stiffness. Trans-dermal absorption depends upon the lipid solubility of the drug. Drugs in oils and other lipid-soluble carriers can penetrate the epidermis as it is a lipid barrier. Through the layers of cell membranes in the stratum corneum, the movement is slow. But once the drug reaches the underlying tissue, it will be absorbed into the circulation.^[5] *Kottamchukadi Taila* was selected for *Kati Pishinchil*. It has been proven that *Kottamchukadi Tailam* has anti-inflammatory, analgesic, and antipyretic action which helps

to reduce symptoms of *Katigraha*. *Panchatikta Ghrit Guggulu* is widely used as medicine and also in preparatory procedure called *snehan*. It is useful in cooling the inflamed part of the body, It is indicated in *Asthigat roga* and has *Tridoshaghma* property.^[6]

Ashwagandha, *Shatawari* and *Supushti Yoga* has *Balya* (Promoting Strength), *Rasayana* (rejuvenating), and *Vatashamaka* properties. *Shanshamani Vati* balances *Vata & Pitaa*.^[7] *Triphala Churna* acts as a complete health supplement because of its important and effective properties like Antioxidant, Anti-Inflammatory, Antibacterial, etc. It helps to clear Ama. We have used it for *Koshtha Shodhana*.

Conclusion

On the basis of this case study, it can be concluded that *Kati Pishinchil* with *Kottamchukadi Tailam* and *Panchatikta Ksheera Basti* along with *Shamana* therapy is effective in the management of *Katigraha*.

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