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A Retrospective Observational Study on Nidan Panchak of Cervical Radiculopathy w.s.r to Manyagraha

Author: Solanke S G1

ABSTRACT

Introduction: Neck and shoulder pain is most commonly seen in clinical practice. This can happen as a result of the degeneration and subsequent enlargement of the facet joints, spinal ligaments, bony end plates, and the intervertebral discs. In this condition, bone spurs, called osteophytes developed. These spondylitis changes lead to neurological dysfunction like Cervical radiculopathy.

Background: Conservative management such as pain medications, exercise and surgery in severe compression of the nerves. This management failed to treat the disease from its root cause due to failure in confirmatory diagnosis.

Methods: This was an observational case series with retrospective review of *Nidanpanchak* of patient of cervical radiculopathy. The primary endpoint was to study the *Samprati* of disease. In this study 24 patients were selected. Their detailed history regarding *Hetu*, *Purvaroop*, *Roop*, *Upashay* and *Samprati* were taken. Secondary end point is to study impact of disease in day-today life.

Results: 24 patients were included in study. According to the study the cause, signs and symptoms and pathophysiology of cervical radiculopathy is found to be almost same as of *Manyagraha* explained in classics.

Conclusions: Cervical radiculopathy can be correlated with the *Manyagraha*. *Manyagraha* is *Vatavyadhi* and it can be said that there will be vitiation of *VataDosha* in cervical radiculopathy. We can establish the *Samprapti* and *Avastha* of this disease according to *Shatkriyakal*, and then early treatment can be possible to avoid the progression of the disease.

Key Words Cervical Radiculopathy, Cervical spondylosis, Manyagraha, Nidanpanchak

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INTRODUCTION

Cervical radiculopathy is the damage or disturbance of nerve function that results if one of the nerve roots near the cervical vertebrae is compressed. Damage to the nerve roots in the cervical area can cause pain and the loss of sensation along the nerve's pathway into the arm and hand, depending on where the damaged roots are located. The main function of the cervical spine is to support the weight of the head and facilitate head and neck movements. As it happens with other regions of the spinal cord, with passage of time due to

¹Department of Kayachikitsa, Siddhakala Ayurved College, Sangamner, MS, India

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undue stress of constant movement of the head in day-to-day activities the cervical spine starts to degenerate. Other causes such as trauma may contribute. Damage can occur as a result of pressure from material from a ruptured disc, degenerative changes in bones, arthritis or other injuries that put pressure on the nerve roots. In middle-aged people, normal degenerative changes in the discs can cause pressure on nerve roots. In younger people, cervical radiculopathy tends to be the result of a ruptured disc, perhaps as a result of trauma. This disc material then compresses or inflames the nerve root, causing pain¹.

Kelly JC (2011) described that evidence of spondylotic changes is frequently found in many asymptomatic adults with, 25% adults under the age of 40 years, 50% adults over the age of 40 years and 80% adults over the age of 60 years, showing some evidence of disc degeneration². Singh S et al (2014) further highlighted that age, gender and occupation are risk factors for having cervical spondylosis. The prevalence of cervical spondylosis is similar for both sexes, although the degree of severity is greater for male³.

The nerves originating from the cervical spine support a large portion of the body including the head, neck, shoulders, hands, and fingers. Due to compression of any of the nerve roots of the cervical spine the following symptoms may occur:

- 1) Constant excruciating pain in the neck, shoulders, and the thoracic area.
- 2) Radiating pain from the neck down the forearms and arms to the fingers.

- 3) Pain with any sort of movement of the head or neck can also be a symptom of cervical Radiculopathy.
- 4) Neck stiffness along with tightness.
- 5) Tenderness to palpation in the neck area.
- 6) Persistent headache⁴.

In modern science Cervical radiculopathy is treated by taking the conservative route which means taking pain medications, exercises specific to the cervical spine, or epidural injections which more often than not manage the symptoms effectively. If the symptoms do not resolve after these measures and there is severe compression of the nerves then surgery may be recommended to relieve the pressure from the nerves and help with symptoms caused by Cervical Radiculopathy. It is a drawback of use of NSAID that as soon as blood level decreases, there is regression of pain. Even this treatment may fail to prevent neurological progression of the disease.

Ayurvedic **Point** of View Cervical radiculopathy due to cervical Spondylosis can be correlated with Manyagraha complications. Charak has (C.S.20/10) described eighty types of Nanatmaja Vata Vyadhi. Peculiarity of Nanatmaja Vata Vyadhi is that only *Vayu* is aggravated in it⁵. *Manyagraha* is not described in eighty types of Nanatmaja Vata Vyadhi. However Charak stated Manyagraha (C.S.17/13-14) while referring *Shiroroga*⁶.

Nidanpanchak of Manyagraha is not directly described in Ayurvedic text. But as considering



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Manyagraha as *Vatavydhi* its *Nidanpanchak* can be correlated with *Nidanpanchak* of *Vatavyadhi*.

Research Question:

Is there any correlation between *Nidanpanchak* of *Manyagraha* and Cervical Radiculopathy

Hypothesis:

Null Hypothesis:

There is no association between *Nidanpanchak* of *Manyagraha* and Cervical Radiculopathy.

Alternative Hypothesis:

There is association between *Nidanpanchak* of *Manyagraha* and Cervical Radiculopathy.

Aim and Objectives:

Aim:

1) To study the *Nidanpanchak* in *Manyagraha* with reference to cervical radiculopathy.

Objective:

1) To evaluate *Nidanpanchak* of *Manyagraha* and to correlate those with cervical radiculopathy.

MATERIALS AND METHODS

Centre of Study: OPD, IPD and Casualty of Kayachikitsa Department of our institute.

Sampling Technique: Simple Random Method

Population Definition:

All the patients attending OPD, IPD and Casualty of our institute complaining Manyagraha with special reference to Cervical Radiculopathy having neurological manifestations were considered for selection irrespective of age, sex, religion, economical status and educational status. Patients fulfilling the criteria of diagnosis of Manyagraha with reference to cervical radiculopathy were considered.

OBSERVATIONS:

24 patients of Cervical radiculopathy were selected. Their detail history regarding *Hetu*, *Purvaupa*, *Rupa*, *Upashay* and *Samprati* were taken.

Hetu:

Out of 24 patients 22 patients were found to have degenerative changes, Indulgence of *Ruksha*, *Shita. Laghu* and *Alpa Ahar* were found in 20 patients, *Chinta-Shok-Krodh-Bhay Hetu* were observed in 18 patients and *Kashtaprad Shayya* were observed in 18 patients which were shown in Table no. 1.

S.No.	Hetu	No. of Patient
1.	Degenarative Joint Disease	22
2.	Herniated Disc	3
3.	Trauma (Abhighat)	3
4.	Indulgence in Ruksha, Shita. Laghu, Alpa Ahar	20
5.	Ratri Jagran	11
6.	Divasvap	4
7.	Ati Langhan	11
8.	Atichakraman	13
9.	Ati Vyayam	7
10.	Chinta, Shok, Krodh,Bhay	18
11.	Anya Chirakalaj Roga	4



12.

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Purvaroopa:
Purvaroopa are the earlier signs of disease which
can be seen as soon as the pathology starts. In

Kashtaprad Shayya

h n some disease they do not get expressed in full form. One could not identify that. In this study, in patient of Cervical Radiculopathy there were no any specific symptoms of *Purvaroopa* found. As Charak Stated that Purvaroopa are in Avyakta form in a *Vatavyadhi* such as *Manyagraha*⁷.

While noting Lakshanas, Manyashoola were observed in 20 patients, radiating pain were observed in 16 patients, Tingling Sensation in fingers were found in 18 patients and Shirashula were found in 17 patients. Also, other symptoms were found which were mentioned in Table no.2. **Upashay- Anupashay** : Upashay- Anupashay were recorded on the basis of history given by patients which are mentioned in Table no. 3.

18

Lakshanas:

Table 2 List of *Lakshanas* Recorded in 24 Patients of Cervical Radiculopathy"

S. No.	Rupa	No. of Patients
1.	Neck Pain (Manyashula)	20
2.	Pain On And Off in Nature	9
3.	Pain Radiating to Hand/Shoulder/chest	16
4.	Neck Rigidity (Manyastambh)	2
5.	Parashesia	3
6.	Muscle Numbness (Gatrasuptata)	5
7.	Tingling Sensation in Fingers	18
8.	Akunchan Prasaran Shula	6
9.	Stiffness (Graha)	8
10.	Pidanasahatva (Tenderness)	12
11.	Alpanidra (Sleep disturbance)	9

Table 3 List of *Upashay-Anupashay* Recorded in 24 Patients of Cervical Radiculopathy"

S. N.	Karma	Upashay Recorded in No. of patients	Anupashya in No. of patients
1	Snehan	22	2
2	Svedan	21	3
3	Vyayam particularly of Manyaa region (physiotherapy)	16	8
4	Shitsparsha	0	24

RESULTS

A Retrospective Observational Study was done on Nidan Panchak of Cervical Radiculopathy. In this study 24 patients showing signs and symptoms of cervical radiculopathy selected. Diagnosis was confirmed by X-ray cervical spine. Various questions regarding their disease were framed and findings were noted. Information regarding Hetu, Purvarup, Rup,

Upashay-Anupashay and Samprati of disease were taken and tried to correlate in classics. It was founded that this Nidanpanchak are very much similar with the Nidanpanchak of Table-1, Manyagraha. Table-2, Table-3 respectively presented the most of Hetu, Lakshana and Upashaya-Anupshaya of cervical radiculopathy in Manyagraha.

DISCUSSION



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Cervical radiculopathy is a common condition that usually results from compression and inflammation of the cervical nerve root or roots in the region of the neural foramen. It is frequently caused by cervical disc herniation and cervical spondylosis. In Manyagraha, there is vitiation of Vata Dosha and there is Khavaigunva in Asthi of Griva Pradesh particularly Kasheruka of Manya. Deranged functions of Vata such as Sransa, Vyasa, Vyadh, Svap, Sada, Ruk, Tod, Bhed, Sang, Angbhang, Sankoch, Varta ,Romharsh, Shosha, Kampa, Spandana, Parushata, Saushirya, Stambha $(A.H.S.12/49/50)^8$. This brings about Sthansrashaya of Vata Dosha in Manya causing Manyagraha⁹.

Radiculopathy refer to set of conditions in which one or more nerves are affected and do not function properly resulting in pain, numbness, weakness etc10. Incidence of the symptoms of Radiculopathies were recorded, almost all those symptoms were reviewed classical text $(A.H.S.12/49/50)^{11}$. All these symptoms were also recorded in Manyagraha. Manyagraha being a Vatavyadhi mentioned in classical text and being at cervical area, cervical radiculopathy should thought of Sthangat Prakop of Vata Dosha. Charak stated that Dosha at various Sthan cause different disease and to treat the disease one should know the *Sthan*, *Dosha*, *Dushya*¹². In of 24 patients of cervical study radiculopathy, symptoms of deranged functions of Vata were observed as presented in earlier.

As we search for the causes and symptoms of cervical radiculopathy, we found that major causes and symptoms of cervical radiculopathy are similar with the *Hetu* and *Lakshana* of *Manyagraha* shown in table no. 4 and 5.

Table 4 Correlation between *Hetu* of Cervical Radiculopathy and *Manyagraha*"

Sr. No.	Cervical radiculopathy Causes	Vatavyadhi (Manyagraha) Hetu
1.	Degenerative Joint Disease	Dhatu Kshay
2.	Trauma	Abhighat
3.	Rheumatoid Arthritis	Anya Chirakalaj Rog
4.	Improper Position	Kashtaprad Shayya

Table 5 Correlation between *Lakshanas* of Cervical Radiculopathy and *Manyagraha*"

Radiculopathy	(Reference A.H.S.12/49/50 and C.C.28/20-22)
	(Reference A.11.5.12/49/50 and C.C.26/20-22)
Neck Pain	Manyashula
Neck Rigidity	Mantastambh
Muscle Numbness	Gatrasuptata
Stiffness	Graha
Tenderness	Pidanasahatva
Sleep disturbance	Alpanidra
Headache	Shirashula
	Neck Rigidity Muscle Numbness Stiffness Tenderness Sleep disturbance

In Cervical Radiculopathy degenerative changes occurres due to *Vitiation* of *Vata*. *Vata* due to various causes mention above such as *Ruksha*, *Shita*. *Laghu*, *Alpa Aahar Atichakraman*, *Ativyayam*, *Abhighat* etc get vitiated ¹³.

Khavaigunya in Asthi-Griva Pradesh due to specific Nidana like excessive work ,Trauma, exertion etc. bring about the affinity to Vata Dosha Causing Sthansanshrya Avastha.

Localization of Prakupita Vata in Griva Pradesh May 10th 2024 Volume 20, Issue 3 Page 5







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Asthi Dhatu causes Kshaya of local Shleshak Kapha (Herniated Disc) due to Ruksha Guna of Vata. This ultimately Give rise to Rachanatmaka and Kriyatmaka Vikriti in Griva Pradesh causing Cervical Radiculopathy with Respect to Manyagraha.

CONCLUSION

The retrospective observational study of 24 Patients of cervical radiculopathy was done to evaluate the Nidanpanchak of cervical radiculopathy. After completing study it is observed that this Nidanpanchak are very much similar with the Nidanpanchak of Manyagraha. It is very clear from the foregoing that there is association between Nidanpanchak Manyagraha and Cervical Radiculopathy. This association can further be used to treat the patient with Ayurvedic medication in early stages. The study may be one of the guidelines to the research scholars to undertake the problem and to evaluate the fact with more sophisticated ultramodern methods.



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