

AYURVEDIC MANAGEMENT OF *GREEVA SANDHIGATA VATA* (CERVICAL SPONDYLOSIS): A CASE STUDY

Rakesh Kumar Majhi¹, Pankaj Kumar Katara², Pranay Singh*³, Dr. Arun Gupta⁴

^{1,3}PG Scholar, Department of Panchkarma, Chaudhary Brahm Prakash Ayurved Charak Sansthan (CBPACS).

²Associate Professor, Department of Panchkarma, Chaudhary Brahm Prakash Ayurved Charak Sansthan (CBPACS).

⁴Professor and Head, Department of Panchkarma, Chaudhary Brahm Prakash Ayurved Charak Sansthan (CBPACS).

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***Corresponding Author: Pranay Singh**

PG Scholar, Department of Panchkarma, Chaudhary Brahm Prakash Ayurved Charak Sansthan (CBPACS).

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ABSTRACT

Cervical spondylosis is a chronic degenerative disorder of the cervical spine and represents one of the most prevalent degenerative conditions of the vertebral column, affecting nearly 95% of individuals by the age of 65 years. Cervical spondylosis closely resembles *Greeva Sandhigata Vata* in terms of etiological factors, clinical presentation, and symptomatology. *Greeva Sandhigata Vata* is a *Shoola-pradhana Vatananatmaja Vyadhi* involving the musculoskeletal system, which significantly hampers an individual's ability to perform routine daily activities. In the present case, a 45-year-old female patient presented with complaints of severe neck pain and stiffness persisting for four months, accompanied by mildly restricted cervical movements. She also reported headache associated with a sensation of heaviness in the head. Following detailed clinical evaluation, a diagnosis of *Greeva Sandhigata Vata* corresponding to cervical spondylosis was established. The treatment protocol comprised *Patra Pinda Sweda*, *Greeva Basti*, along with selected internal medicinal formulations. The therapeutic intervention proved effective in alleviating the overall symptomatology of *Greeva Sandhigata Vata*, and the patient experienced marked improvement in pain, stiffness, and associated clinical features.

KEYWORDS: *Greeva Sandhigata Vata*, Cervical Spondylosis, *Greeva Basti*, *Patra Pinda Pottali Swedana*.

INTRODUCTION

Cervical spondylosis is a degenerative condition characterized by progressive deterioration of the cervical vertebrae, intervertebral discs, and supporting ligaments. Morning stiffness is one of its prominent clinical features, while in chronic cases, pain may intensify during the night or following neck movements. Cervical spondylosis is a commonly encountered disorder and is estimated to account for nearly 2% of all hospital admissions. Radiological evidence

suggests that approximately 90% of men above 50 years of age and 90% of women above 60 years demonstrate degenerative changes in the cervical spine. Furthermore, a report published in 2009 indicated that cervical spondylosis with myelopathy constituted the most frequent primary diagnosis (36%) among the elderly population.^[1]

In *Ayurvedic* literature, disorders affecting the joints are described under *Sandhigata Vata*, which is included within *Vatavyadhi*. The classical clinical manifestations of this condition include joint pain, joint swelling, and restriction of joint movements.^[2] The symptomatology of cervical spondylosis—such as neck pain, reduced range of cervical movements, and localized swelling—closely correlates with *Sandhi Shoola*, *Prasarana–Akunchana Vedana*, and *Sandhi Shopha* described in *Sandhigata Vata*. Therefore, cervical spondylosis can be managed on the principles of *Sandhigata Vata Chikitsa*.

According to *Ayurvedic* treatment guidelines, *Snehana* is considered the primary line of management in *Nirama Vata* conditions.^[3] while *Basti* is regarded as the most effective therapy for all types of *Vata Vyadhi*.^[4] *Greeva Basti* can be administered without the need for strict dietary or lifestyle modifications and does not necessitate hospital admission.^[5] Hence, based on these observations, *Greeva Basti* may serve as a therapeutically effective, safe, and cost-effective modality for pain management in *Greeva Sandhigata Vata* (cervical spondylosis).

CASE PRESENTATION

A 45-year-old female patient presented to the outpatient department with complaints of pain in the cervical region associated with stiffness for the past four months. She also reported mild restriction of neck movements along with headache accompanied by a sensation of heaviness in the head. There was no history suggestive of trauma or any major systemic illness. The patient had previously taken analgesic medications intermittently, which provided only temporary symptomatic relief.

On general examination, all vital parameters were found to be within normal limits. The patient's appetite was normal, while bowel habits revealed mild constipation. Local examination of the cervical spine revealed tenderness without any visible swelling or crepitus. The range of motion of the neck was reduced, particularly during flexion. Based on the clinical presentation and assessment according to *Ayurvedic* principles, the condition was diagnosed as *Greeva Sandhigata Vata*.

Ayurvedic Diagnosis

The condition was diagnosed as *Greeva Sandhigata Vata* with *Vata Pradhana Dosha* involvement affecting *Asthi* and *Majja Dhatu*, along with vitiation of *Asthivaha Srotas*.

TREATMENT PROTOCOL AND INTERNAL MEDICATIONS

A schedule has been planned with *Patra Pinda Pottali Swedana* and *Greeva Basti*.

Table 1: Shodhana Chikitsa.

1.	<i>Greeva Basti</i>	<i>Ksheerbala Taila</i>
2.	<i>Patra Pinda Pottali Swedana</i>	<i>Ksheerbala Taila</i>

Along with this, patient is advised to take following *Ayurvedic* medicine throughout the treatment schedule

Table 2: Shamana Chikitsa.

1.	<i>Trayodashanga Guggulu</i>	2 BD (after food)
2.	<i>Dashmoola Kwath</i>	40 ml BD (before food)

Assessment Parameter

1. Neck Pain
2. Neck Stiffness
3. Neck Rotation
4. Headache

Table 3: Neck Pain.

Grade	Observation
0	No Pain
1	Mild and Intermittent Pain
2	Moderate and Bearable Pain
3	Severe and Unbearable Pain

Table 4: Neck Stiffness.

Grade	Observation
0	No Stiffness
1	Up to 25% Impairment in range of movement. Patient can do daily routine without any difficulty
2	Up to 25 -50% Impairment in range of movement. Patient can perform daily routine with mild/moderate difficulty.
3	Up to 50 -75% Impairment in range of movement. Patient can perform daily routine activity with moderate to severe difficulty
4	>75% Impairment in range of movement. Patient totally unable to do daily routine.

Table 5: Neck Rotation.

Grade	Observation
0	Possible without any difficulty
1	Possible with slight difficulty
2	Possible with more difficulty
3	Not at all possible

Table 6: Headache.

Grade	Observation
0	Absent
1	Occasional
2	1 -3 times in a week
3	> 3 times in a week

Duration of Treatment

The total duration of treatment was 12 days.

RESULT AND DISCUSSION

Observation before and after the course of treatment is as follows:

Table 7: Observation in different parameter

S. No.	Parameter	Before treatment	After treatment
1	Neck Pain	2	1
2	Neck Stiffness	2	0
3	Neck Rotation	2	0
4	Headache	2	0

DISCUSSION

Greeva Basti is a localized oil-retention procedure performed over the cervical region for the management of neck pain, wherein the therapeutic effects of both *Snehana* and *Swedana* are achieved simultaneously. *Snehana* is considered the primary line of treatment in *Nirama Vata*, while *Basti* is regarded as the most effective therapy for all types of *Vata Vyadhi*. Since *Vata Dosha* is characterized by *Sheeta* (cold) and *Ruksha* (dry) qualities, the application of warm, unctuous substances helps in alleviating aggravated *Vata*. *Swedana* promotes perspiration and facilitates the elimination of metabolic waste products through sweat, thereby reducing *Kleda* in the body. This ultimately results in the alleviation of *Gaurava* (heaviness) and *Stambha* (stiffness), which are commonly observed manifestations of *Vatavyadhi*.^[6]

Patra Pinda Pottali Swedana is generally indicated in *Vata-Kaphaja* conditions. The medicinal leaves commonly used include *Nirgundi*, possessing analgesic, antibacterial, and anti-inflammatory properties; *Dhatura*, known for its anti-inflammatory activity; *Shigru*, effective in reducing severe pain; *Eranda*, which helps in pacifying *Vata Dosha*; and *Arka*, which exhibits analgesic, anti-inflammatory, antimicrobial, and *Vranashodhana* actions. The procedure enhances local blood circulation, aids in the elimination of vitiated *Doshas*, strengthens the underlying musculature, facilitates toxin removal, and reduces inflammation. It also improves muscle tone in the affected region.^[7]

Tryodashanga Guggulu is a classical formulation comprising *Shodhita Guggulu*, *Rasna*, *Ashwagandha*, *Babula*, *Hapusa*, *Shatavari*, *Gokshura*, *Shatahva*, *Shati*, *Guduchi*, *Vrudhadaru*, *Sunthi*, and *Goghrita*. The constituent drugs predominantly possess *Tikta*, *Katu*, and *Kashaya Rasa*, *Ushna Virya*, and *Madhura Vipaka*.^[8] Owing to these pharmacodynamic properties, the formulation exhibits *Vatahara* action due to *Ushna Virya* and *Madhura Rasa*, while the combination of *Ushna Virya* with *Tikta* and *Kashaya Rasa* contributes to *Kapha Shamana*.^[9]

Dashamoola Kwatha is a widely used Ayurvedic formulation known for its analgesic and anti-inflammatory effects. It consists of *Brihat Panchamoola* and *Laghu Panchamoola*. The drugs of *Brihat Panchamoola* are predominantly *Tikta* and *Kashaya Rasa*, possess *Ushna Virya*, and exhibit *Kapha-Vata Shamana* properties. In contrast, *Laghu Panchamoola* drugs are mainly *Madhura Rasa* dominant, *Anushna-Sheeta* in nature, and are described as *Sarva-Dosha Nashaka*.^[10]

CONCLUSION

This case study demonstrates that *Ayurvedic* management is effective in reducing pain and improving functional capacity in patients suffering from *Greeva Sandhigata Vata* (Cervical Spondylosis). The combined therapeutic approach involving *Greeva Basti*, *Patra Pinda Pottali Swedana*, and appropriate internal *Ayurvedic* medications provided significant relief in symptoms such as pain, stiffness, headache, and restricted neck movements. The findings suggest that *Ayurveda* offers a safe, holistic, and cost-effective alternative for the long-term management of Cervical Spondylosis. However, further clinical studies with larger sample sizes are recommended to validate and substantiate these observations.

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