Title :	A comparative efficacy study of the Panchtikta Ghrita and Go Ghrita (Placebo) Nasya in						
	Manyasthambha (Cervical Spondylosis)						
1]	Introduction:						
	A healthy life has been cherished wish of man since ages, but now a day due to fast						
	developing technological era, sedentary lifestyle and lack of time, people cannot concentrate						
	on their proper regimens and facing so many hurdles. One such hurdle is Manyasthamb						
	Manyastambha can be co-related with Cervical Spondylosis in modern perspective [1].						
	Occupational stress, poor posture in sitting or sleeping, day sleep, excessive travelling etc.						
	lead to spondylotic changes in cervical spine.						
	Treatment is usually conservative in nature; Surgery is occasionally performed. Many of the						
	treatment modalities for cervical spondylosis have not been subjected to rigorous, controlled						
	trials. Surgery is advocated for cervical radiculopathy in patients who have intractable pain,						
	progressive symptoms, or weakness that fails to improve with conservative therapy. Surgical						
	indications for cervical spondylotic myelopathy remain somewhat controversial, but most						
	clinicians recommend operative therapy over conservative therapy for moderate-to-severe						
	myelopathy.						
	The Nasya Karma is considered as the best and the most specific procedure for						
	diseases of the head and neck- "Urdhwa Jatru-Vikaresu Visesannasyamisyate" [2]. The rich						
	vascular plexus of nasal cavity provides a direct route into blood stream for medications that						
	easily cross mucus membrane. According to Acharya Charaka, Nasa is the gateway						
	Shira[3].Same is stated by <i>Vagbhatta</i> the nasal passage is considered as the portals of t						
	head " <i>Nasa hi Siraso Dwaram</i> "[4]. According to above concepts all drugs measures						
	introduced through the nose spread throughout the head and its constituent parts and may						
	accordingly influence all the <i>Doshas</i> and diseases situated in these parts[5].						
a]	Need for study:						
	This disease is now becoming a significant threat to the working population due to its						
	progressive nature. Modern medical science provide various types of medical and surgical						
	therapies but is seen that none of therapy is satisfactory in cervical Spondylosis. All treatment						
	module just provide symptomatic relief for short period of time. Hence Ayurveda now						
	coming into focus for chronic types of conditions.						
b]	Literary Review:						
	In this period of modernization and fast life, people undergo many unwanted practices like						
	improper sitting posture for long time in offices, continuous work in one posture and						

overexertion, load bearing movements during travelling and sports – all these factors create undue pressure and compressive injury to the spine and play an important role in producing disease like cervical spondylosis. Cervical spondylosis is a degenerative condition of the cervical spine where it may lead to Cervical spondylotic Myelopathy[6]. Main symptoms are Pain & Stiffness in neck, radiating pain into arms, headache, vertigo, tingling sensation, numbness etc. It disturbs daily routine & overall life of patient.

Manya shoola laxana is explained as Greevayah Paschatbhaga Shoola[7].Sushruta has used the words Manyagraha and Manyastambha synonymously and described Manyastambha (Urdhvajatrugata Vata nanatmaja vikara)[8] as Manyaha kriyahani. He told involvement of Kaphavruta Vata in the pathogenesis of Manyasthambha[9].Manyastambha is told as *Vata kaphaja* even though it is included in Vataja nanatmaja Vyadhi according to Sharangadhara[10]. Bhava Prakasha, Yoga Ratnakara, SushrutaSamhita, Bhaishajya Ratnavali all advised use of nasya karma for its management.

Here in initial stages of the disease Kapha Dosha involvement is present. The Kapha prakopa nidanas causes kapha prakopa which causes obstruction of Vata. Main factors involving in its pathogenesis are Vata (Vyanavata) and Kapha(Shleshaka Kapha).Dushyas occuring in it are Asthi, majja, snayu, mamsa. Hence, the drugs having Vata Kaphahara properties should be administered. They should have property to prevent the degeneration of bones and promote the regeneration.

By taking into consideration all above facts, in this study use of Panchtikta ghrita[11] will be used for nasya in patients having cervical spondylosis.

Panchatikta Dravyas involved in Panchtikta ghrita preparation are Rasayana for Asthidhatu. Charakacharya described Panchatikta Dravyas in Asthivaha Strotodushti Chikitsa in the form of Ksheerbasti and Sarpi[12].

S.N.	Ingredient	Pharmacological Action			
1	Guduchi	Tinospora cordifolia			
2	Nimb	Azadaricta indica			
3	Vasa	Adhataoda Vasica			
4	Kanatakari	Solanum xanthospermum			
5	Patol	Trichosanthes patola			

All drugs in Panchatikta ghrita having Tikta rasa and Ushnavirya which facilitate dhatvagni, nutrition and stableness of all dhatus. It helps in improvement of general condition, also act as anti-inflammatory agent. Yogvahiguna of ghrita increase bioavailability of other drugs, so

	degeneration may not occur rapidly. It does dhatuposhana due to Tikta rasa & ushnavirya						
	help in pacification of aggravated vata.						
	They rejuvenate the <i>Dhatus</i> , repair them, remove <i>Kha Vaigunya</i> , give <i>Bala</i> (strength) to the						
	<i>Dhatu</i> , maintain their healthy condition and restricts/slow down the progress of disease[13].						
c]	Previous work done:						
	 A clinical study on the development of subtype of Abhyanga with reference to its role in the management of Griva-hundana (cervical spondylosis). By-Dr. Kalapi Patel Department of Panchkarma I.P.G.T. & R.A.Gujarat Ayurved University, Jamnagar. Effect of <i>Tikta Kshira Basti</i> and <i>Patrapinda Sweda</i> In The Management Of Cervical Spondylosis (<i>Asthigata Vata</i>). By- Dr. Jayadipkumar P. Shah Department Of Panchkarma, I.P.G.T. & R.A. Gujarat Ayurved University, Jamnagar. In 1992, S. Hebbar from G.A.M.C. Mysore worked on Manyasthamba with special reference to its management by Nasya. In 2006, Ashwin Dev from DGMAMC Gadag worked on evaluation of the comparative 						
2]	Aim and Objectives:	asya karma with Karpasthyadi taila in Manyasthamba.					
2a]	Aim of study:	To study effect of nasya with Panchtikta ghrita and ghrita in Manyshoola and manyagraha in Cervical spondylosis					
2b]	Objectives of study:						
	 To study the effect of nasya with Panchtikta ghrita Manyshoola and manyagraha in Cervical spondylosis To study the effect of nasya with goghrita in Manyshoola and manyagraha in Cervical spondylosis To Compare the effect of nasya with Panchtikta ghrita and goghrita in Manyshoola and manyagraha of Cervical spondylosis Pain management with nasya 						
21		-					
3]	Material And Methods:	The informed consent of the participants will also be obtained before participation in the study.					
3a]	Source of study:	The study area will be Mahatma Gandhi Ayurvedic College, Hospital and Research Centre. Salod (H), Wardha					

3b]	Study D	esign:		Randomized parallel	Comparative Clinical study			
3c]	Study T	ype:		Interventional				
	Phase of	f Study:		Phase 1 / Phase 2				
3d]	Sample	size:		30 patients				
3e]	Groupin	g: 2 groups		Group A – 15 Patient	(Panchtikta ghrita N	Nasya)		
				Group B - 15 Patient	(Goghrita Nasya [Pl	acebo])		
3f]	Inclusion	n criteria:		Age group abo	ove 20 years and bel	low 60 years		
				Manyasthamb	ha Signs and sympt	oms		
				Cervical spon	dylosis-signs & sym	ptoms		
3g]	Exclusio	on criteria:		Age group bel	low 20 years and abo	ove 60 years		
				Known Patier	nts of serious disorde	ers of head		
				• Cervical S _I	pondylosis with	myelopathy and		
				radiculopathy	(ICD 10 criteria M	47.8)		
				Nasya anarha	[14]			
				Pregnant females				
3h]	Selection	n of Material:		Subjects are selected from the Panchakarma OPD and IPD of				
				MGACH & RC Salod (H) with preset diagnostic criteria and				
				distributed randomly by Lottery method into two groups.				
3h1]	Compos	ition of Materia	ıl:					
	Panchtikta ghrita (Cow ghee			medicated with Guduchi, Vasa, Nimba, kantakari and Patola) is				
	prepared	l in Rasashala	of Go	o anusandhna Kendra,	Devalapar,madhyap	radesh after proper		
			-	Ghrita Kalpana and r		y textual reference		
			a) and c	ow ghee is procured fr				
	S. N	Sanskrit		Botanical Name	Useful part	Quantity		
	1	Guduchi		pora cordifolia	Root bark	1/5 th part each		
	2	Nimba		aricta indica	Stem bark	part for kalka		
	3	Vasa		taoda Vasica	Leaves	preparation		
	4	Kanatakari		um xanthospermum	Root bark	(total 1 part)		
	5	Patola		osanthes patola	Root			
	6	Goghrita	Cow	ghee	-	4 part		
	7	Water		1	-	16 part		
	Toxicity	studies:		No known toxicity r	reported either for	Panchtikta ghrita or		

		Plane ghee which is Edible in nature.					
3h2]	Preparation of Material:						
	Group A – Panchtikta Nasya	a group patients will subjected to Uttam matra of Marsha					
	Nasya[15]	asya[15]					
	Group B – Goghrita Nasya group patients will subjected to Uttam matra of Marsha Nasya						
	 a) <i>Poorva Karma</i> Local <i>Snehana</i> with <i>Til Tila</i> (Sesame Oil) and local <i>Nadi Sveda</i>. b) <i>Pradhana Karma</i> Marsha Nasya with Panchtikta Ghritaand plane goghrita for respected 						
	group (Mradu paka) with the c	lose of 8 <i>Bindu</i> (approximate 4 ml) in each nostril at 8:30 am					
	for 7 consecutive days. Panch	tikta ghrita and plane goghrita should be made lukewarm					
	before administration.						
	c) Paschat karma: Dhoomapaa	ana with haridradi varti and Kavala are practiced.					
3i]	Dosage:	8 drops in each nostrils					
3j]	Study duration:	7 days					
3k]	Follow up Period:	7 days					
31]	Screening Investigations:	CBC					
		ESR					
3m]	Specific Investigations:	X -Ray Cervical spines (AP –Lateral View)					
3n]	Subjective Parameters:	Both pre and post assessments of the patients will be done					
		on the basis of clinical symptoms-					
		1]Shula (Pain) in cervical region:					
		0=No Pain					
		1=Pain in the neck,					
		2=Pain in neck, mild aggravates with movement					
		3=Pain in neck, severe aggravates with movement					
		4=Pain in neck, radiation and disturbed the sleep					
		2]Stambha (Stiffness) in Cervical region:					
		0=No Stiffness,					
		1=Stiffness up to 1 hour					
		2=Stiffness up to 2-3 hours					
		3=Stiffness up to 4-6 hours					
		4=Stiffness more than 6 hours					
		3]Graha (Restricted movement) of neck					
		0= Normal range of movement					

				1= ROM reduced up to 25%							
				2= ROM reduced to 26% -50%							
					3= ROM 1	reduced	d 51% -	75%			
				4	4= ROM 1	educe	d 76% -	100%			
30]	Objective Parameters:				• Ne	ck dis	ability Iı	ndex			
					• Goniometer Scoring (Assessment in degrees).						
3p]	Statistical M	lethods	:								
	The subjecti	ve crite	ria were as	se	essed befor	re treat	ment, af	fter treatme	ent, after fis	t follow up and	
	after second	follow	up. The da	ata	a obtained	in cli	nical stu	ıdy is subj	ected to sta	tistical test and	
	analyzed in t	two par	ts as;								
	1. The	Wilcox	on signed R	Ra	nk test						
	2. Paire	ed t-test	using Grap	bh	pad prism	softwa	are.				
3q]	Assessment	of Resu	ılts:								
	Assessment	ly will be	do	one for cl	inical	and Ass	sessment p	arameters of	on the basis of		
	Before and A	After as	sessments.								
3r]	PICO model:										
	Population Patients su				fering from	n Man	yastham	bha (Cerv	ical spondy	losis)	
	Intervention Panchtikte			a ,	ghrita Nas	sya					
	Comparison		Goghrita	N	asya						
	Outcome		Pain relief	f with Panchtikta ghrita nasya in Cervical Spondylosis							
3s]	Intervention	Table									
Group		Group	o A		Group B						
Sample	e size	15 pat	ients		15 patients						
Interve	ntion	Panch	tikta ghrita	ı 1	Vasya		Goghrita Nasya				
Dose	Dose 8 drops in each 1			nc	nostrils 8 drops in each nostrils						
Duration 7 days				7 days							
Follow up period 7 days				7 days							
Total duration 14 days				14 days							
3t] C	Gnat Chart										
			Q1		Q2	Q3	;	Q4	Q5	Q6	
Enrolm	nent of Patients	8									
Medici	Medicine preparation										

Data	Data collection							
Data	analysis							
Writ	ing the Article							
Subr	nission							
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5a]	Annexure -1:	Case Sheet
Juj	Auto 1.	
5b]	Annexure -2:	Consent Form (Bi-Lingual)
50]	Annexule -2.	Consent Form (DI-Lingual)
	Annexure -3:	NDI SCALE (Scale for objective criteria)
	Allie -5.	NDI SCALL (Scale for objective chiefia)
	Annowing 1.	Dudaat Dronaal
	Annexure -4:	Budget Proposal
		(separate tables for Investigation & trial Medicine)