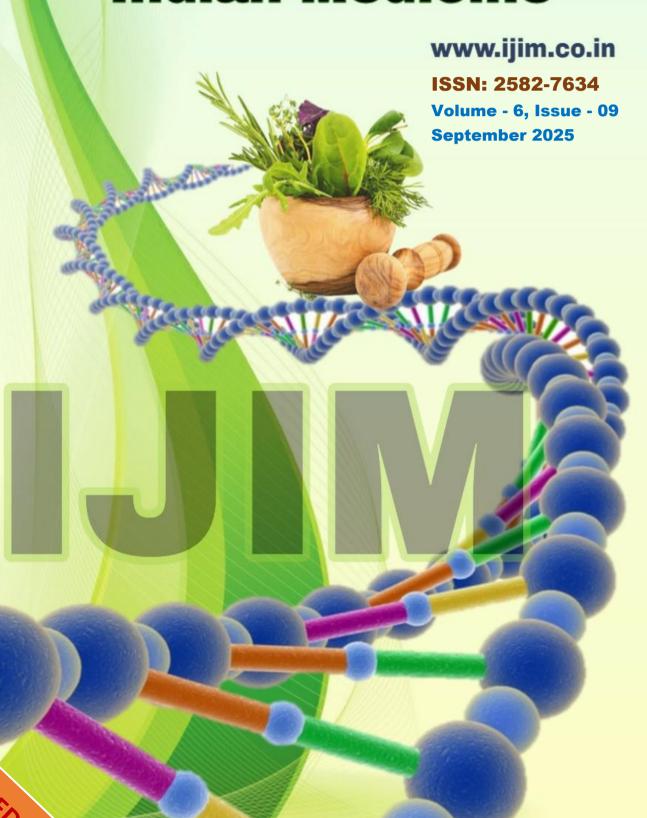


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A Case Study on The Role of Viddha Karma Using Dry Needling Technique in the **Management of Manyastambha**

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ABSTRACT:

Cervical spondylosis is a degenerative condition marked by neck pain, stiffness, and restricted movements. In Ayurveda, it correlates with Manyastambha, a Vataja Nanatmaja Vyadhi. This case study illustrates the use of Viddha Karma, a parasurgical technique using Dry needling technique, in the management of a 32-year-old male patient with Manyastambha. The intervention provided substantial symptomatic relief within a short period, showcasing the efficacy and safety of the procedure. In Ayurveda, cervical spondylosis can be correlated with Manyastambha, one of the Vataja Nanatmaja Vyadhi (diseases caused predominantly by vitiated Vata dosha). Acharya Charaka describes Manyastambha as stiffness of the neck due to aggravated Vata leading to loss of normal movement and pain.

KEYWORDS: Viddha Karma, dry Needling technique, Cervical Spondylosis, Manyastambha, Ayurveda, Neck Pain

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INTRODUCTION:

Cervical spondylosis affects over 25% of the population and is associated with modern lifestyle factors such as prolonged screen time, poor posture, and stress. In Ayurveda, Manyastambha is characterized by neck stiffness and pain, and often resists conventional therapy. Viddha Karma — a synergistic parasurgical therapy involving precise dry needling — offers a potential alternative treatment modality rooted in classical Ayurvedic texts.

CASE DESCRIPTION

A male patient 32 yrs old, occupation: garage worker, visited shalyatantra opd, with chief complaints of neck pain since 5 month, radiating to both hands, tingling sensation in both hands, and neck stiffness. Patient was apparently normal before five month, but gradually started developing complaints due to continuous strainious work and bad posture . Patient got conservative allopathic treatment priorly which was of no use to the patient and so he visited our opd for the treatment. All the needed general, physical examination were done which were within normal limits, patient had no any past major medical history or any past surgical history, no any allergic history.

Clinical Examination:

Neck Pain (VAS): 8/10 Neck Stiffness: Grade 3

Goniometer Reading: Limited flexion and extension

Tingling Sensation: Grade 2

Other symptoms: headache, neck stiffness **DISCUSSION:**

Diagnostic Assessment

X-Ray C-Spine: Mild osteophytic changes . Blood Tests: Within normal limits .

Diagnosis: Cervical spondylosis w.s.r. to Manyastambha (Vataja Nanatmaja Vyadhi). After clinical examination patient was diagnosed with manyastambha and viddha karma was selected as the treatment modality with patient's consent.

Intervention

Main Procedure: Viddha Karma on Day 0, 7, 14, 21

Needle Used: 26G

Depth of Insertion: ~5 mm at maximum tenderness points

Oral Medication: Trayodashanga Guggulu 500 mg BID with warm water for 28 days

MATERIALS AND METHODS STUDY DESIGN:

Single case study, pilot study

DURATION OF STUDY: 28 Days study ,with application of therapy on 0, 7,14,21 st day and follow up on 7th 14th 21st and 28th day

INCLUSION CRITERIA:

- 1. Patients having age of 30 to 60 years irrespective of their gender
- 2. Patients having clinical features of Manyastambha.

EXCLUSION CRITERIA:

- 1. Patients having age less than 30 yrs and more than 60 years irrespective of age.
- 2. Skin diseases and localized ulceration.
- 3. History of injury, fracture, surgery of spine and cervical spondylosis.
- 4. K/C/O DM, HTN, IHD, HIV & HbsAg
- 5. Patients on anticoagulant medications.
- 6. Patients undergoing physiotherapy treatment.

WITHDRAWAL CRITERIA:

- 1. If patients develop any adverse effect.
- 2. If patient refuses to continue with the treatment.

Sop for viddha karma

Equipment – • Cotton gauze pads • Betadine solution • 26 NO. gauze needle

Purvakarma • Pre procedure assessment of patient • Informed written consent was taken regarding the procedure and treatment protocol

Pradhan karma • Patient wasmade to sit on the chair in neck flexed position • Affected part was cleaned with betadine solution. • Markings were made over the points of viddhaagni karma i.e maximum tenderness points • Then using 26 number gauze needle, viddha karma was done upto approx. 5mm depth (as mentioned regarding the muscular area at the neck region)

Paschat karma • Patient was observed for about 30 minutes after the procedure.

Patient tolerated the procedure well without and complications

Assessment Criteria

The patient was evaluated for all signs and symptoms before and after procedure of viddha karma according to the following criteria.

Objective Criteria –

Neck Pain – Visual analogue scale [VAS] – Number will be marked which equals to patients pain. Pain score – 0 to 10 Numerical Rating Scale [NRS]

Subjective criteria_

Neck Stiffness - Grade Description

- 0 Absent / Occasional
- 1 For 5 min to 1 hour
- 2 For 2-6 hours

3 - More than 6 hours

Tingling Sensation in upper limb –Grade Description

- 0 Absent
- 1 Mild
- 2 Moderate
- 3 Severe & disturbed sleep
- Headache Grade Description
- 0 Absent
- 1 Occasional
- 2 Continuous
- 3 Severe

Giddiness - Grade Description

- 0 No dizziness
- 1 Feeling of dizziness without

hampering routine work

- 2 Feeling of giddiness on movement
- 3 Feeling of giddiness on rest

Neck movement - Grade Description

- 0 Movement without pain
- 1 Movement with mild pain
- 2 Partial Restricted movement
- 3 No movement

Shaman aushadhi

Trayodashanga guggulu 500mg with jala was given in BID dose for 28 days

Outcome Measures

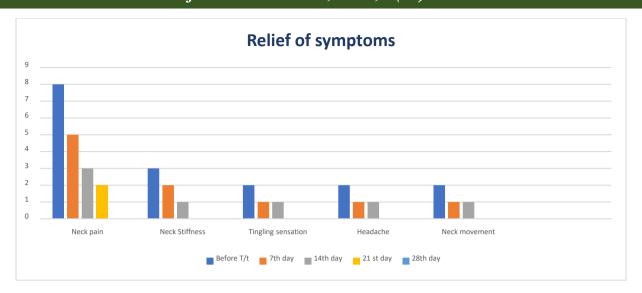
Observations and Result

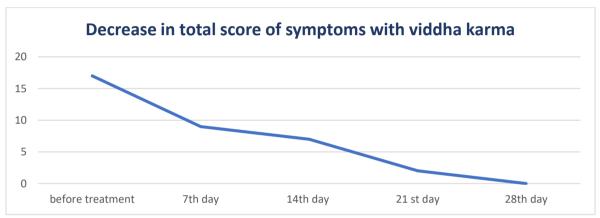
Observations	Before	7 th day	14th day	21st day	28th day
	treatment				
Neck pain	8	5	3	2	0
Neck stiffness	3	2	1	0	0
Tingling sensation in upper limb	2	1	1	0	0
Headache	2	1	1	0	0
Giddiness	0	0	0	0	0
Neck movement	2	1	1	0	0
Total	17	10	7	2	0

Case Study

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The case demonstrates the rapid and sustained efficacy of Viddha Karma, likely due to its ability to:-Release Vatavarodha i.e (obstruction of Vata) ,Stimulate local endorphin release, Improve microcirculation. Trayodashanga Guggulu complemented the therapy by supporting Vata-Kapha pacification and acting as an internal analgesic and anti-inflammatory. Previous studies have evaluated Agnikarma for musculoskeletal disorders . This approach appears to provide synergistic benefits, warranting larger trials.

CONCLUSION:

Viddha Karma using dry needling is an effective, minimally invasive treatment for Manyastambha (cervical spondylosis), offering significant relief in pain, stiffness, and functional mobility. It holds promise as an alternative to pharmacologic management, especially in chronic cases.

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Conflict of Interest

None declared.

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