

Therapeutic Efficacy of Agnikarma in Katigata Vata (Lumbar Spondylosis): A Single Case Report

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ABSTRACT –

Lumbar spondylosis is a common degenerative disorder of the lumbar spine, characterized by chronic low back pain that may radiate to the hips or lower limbs, often accompanied by stiffness and reduced mobility.^[1] It primarily affects older populations but is increasingly seen in younger and middle-aged individuals due to sedentary lifestyles, prolonged sitting, poor posture, obesity, smoking, improper diet, and genetic factors.^[2] Global prevalence of radiographic lumbar spondylosis reaches 75–85% in those over 60 years, with point prevalence of low back pain in India estimated at 48% (95% CI 40–56%), annual 51%, and lifetime 66%.^[3]In Ayurveda, it closely resembles Katigata Vata or Trika Sandhigata Vata, as described in classical texts like Charaka and Sushruta Samhita, sharing symptoms of Ruka (pain) and Stambha (stiffness).^[4] Conventional treatments NSAIDs, muscle relaxants, corticosteroids, physiotherapy, and surgery often provide temporary symptomatic relief without addressing root degeneration and may carry side effects.^[5]

Ayurvedic management offers a holistic, individualized approach. This single-case report evaluates Agnikarma

(therapeutic thermal cauterization) in a 48-year-old male with 6-month progressive low back pain, right-leg radiation, tingling, stiffness, and restricted mobility. Four weekly sessions (using Panchadhatu Shalaka on tender points) with detailed Purva Karma (preparation), Pradhana Karma (main application until Samyak Dagdha Lakshana), and Paschat Karma (post-care with Ghrita-Madhu-Aloe-Haridra and oil application) yielded significant.

Outcomes: Complete resolution of walking pain, marked reduction in tingling, and improvement in stiffness/mobility from severe to mild by Day 30. No adverse effects or scarring occurred. Agnikarma's Ushna, Tikshna, and Ashukari properties pacify Vata-Kapha, clear Srotorodha, and provide neurophysiological pain relief via gate control theory and vasodilation^[6]. This supports Agnikarma as a safe, effective para-surgical modality for Katigata Vata. Larger randomized trials are recommended for validation.^[7]

Keywords: Lumbar spondylosis, Katigata Vata, Panchadhatu Shalaka Agnikarma, Thermal cauterization, Vatavyadhi.

CASE REPORT –

INTRODUCTION –

क्षारदग्निर्गरीयान् क्रियासु व्याख्यातः, तद्गंधानां रोगाणामपुनर्भावाद्वेषजशस्त्रक्षारैरसाध्यानां तत्साध्यत्वाच्चे ॥^[9](सु.सू. १२/३)

According to Acharaya Sushruta, a Patient treated with the Agnikarma procedure never suffers from the same disease again, i.e it never reoccurs. Thus, Agni Karma cures the disease completely, Hence Agnikarma is said to be superior than other therapeutic procedures like oral medicine, Kshara karma, or even surgery. In modern terminology Agnikarma therapy can be termed as International therapeutic heat burns .

तद्यथा- पिप्पल्यजाशकृद्रोदन्तशरशलाकाजाम्बवौष्ठेतरलौहाः क्षौद्रगुडस्नेहाश्च ॥^[10] (सु.सू १२/४)

The process of Dahan Karma is normally done by using Pippali, hot honey & oil, gold, hot jiggery, Silver, Panchadhatu Shalaka, Loha Shalaka, etc.

In modern medicine, Katigat vata aligns with lumbar spondylosis, a degenerative condition involving the lumbar vertebrae and intervertebral discs.^[12] Factors like poor posture, chronic strain, or prior injuries lead to changes such as disc space reduction, osteophyte formation, and nerve root compression, causing severe pain, stiffness, and functional impairment. Lumbar spondylosis affects nearly 80% of industrial workers and 60% of the general population, with one in 20 people experiencing symptoms. While NSAIDs and steroids are commonly used for pain relief, these provide only temporary benefits and pose risks like gastric irritation, hyperacidity, and liver or kidney impairment with prolonged use. In Ayurveda, it correlates with Katigata Vata, a Vata-dominant disorder featuring Shoola (pain), Stambha (stiffness), and restricted movements due to Srotorodha and Dhatushaya.^[3]

CASE PRESENTATION -

Patient Information: A 48-year-old male office worker (sedentary lifestyle, mixed diet, disturbed sleep) presented with 6-month progressive low back pain, right-leg radiation, tingling, stiffness, and difficulty bending/standing/walking. No

comorbidities or trauma. Written informed consent obtained for treatment .

Clinical Findings: Tenderness over lower lumbar; painful flexion/extension/lateral bending. Right SLR positive at 45°, Lasegue positive, mild right-leg paresthesia. Normal reflexes/motor strength.

Timeline

Symptom onset: 6 months prior.

Baseline: Day 0.

Agnikarma sessions: Weekly (Days 1, 8, 15, 22).

Follow-up: Day 30.

Diagnostic Assessment: X-ray: marginal osteophytes, reduced L4-L5 space. MRI: mild disc bulge L4-L5/L5-S1 with thecal indentation. Blood normal.

Diagnosis: Lumbar spondylosis (Katigata Vata).

Therapeutic Intervention

Agnikarma performed once weekly for 4 weeks (4 sessions) on tender points using Panchadhatu Shalaka.

1. Purva Karma (Pre-procedure)-

Patient counselled on procedure, risks, and benefits. Written consent obtained. Investigations normal. Prone positioning for comfort. Tender points marked. Area cleaned with distilled water/antiseptic and dried. Panchadhatu Shalaka and instruments sterilized/prepared. Assistant present for support.

2. Pradhana Karma (Main procedure)

Heated Panchadhatu Shalaka applied gently to marked points. Bindi-type burns created (10-second contact per point), spaced adequately. Continued until Samyak Dagdha Lakshana (ideal burn: no blistering/scarring; controlled thermal effect with proper discoloration). Patient monitored; procedure adjusted for tolerance.

3. Paschat Karma (Post-procedure care)

Immediate application of Ghrita + Madhu + Aloe vera + Haridra for pain relief/healing. For 3–4 days post-session: Coconut oil + Aloe vera gel 2–3 times daily. Vata-pacifying diet, rest, posture correction advised. No other therapies.

OBSERVATION -

Table: Symptoms Improvement Over Time

Parameter	Day 1	Day 8	Day15	Day 22	Day 30
Lumbar Stiffness	3	3	2	2	1
Flexion	3	2	2	1	1
Extension	3	2	2	1	1
Lateral	3	2	2	1	1

Movement					
Tingling	2	2	1	1	1
Pain on walking	3	2	1	1	0

Progressive improvement: Walking pain resolved; tingling/stiffness/mobility mild by Day 30. No adverse events.

DISCUSSION-

In the present single-case clinical study, a patient presenting with lower back pain, severe stiffness, restricted lateral spinal movement, and difficulty in walking was clinically diagnosed with Katigata Vata(Lumbar Spondylosis), based on classical Ayurvedic and modern diagnostic parameters. Modern medicine offers treatment options such as NSAIDs, steroids, and surgical interventions, which may provide only temporary symptomatic relief and are often associated with side effects or incomplete resolution. In this study, an integrated Ayurvedic approach was adopted. The patient received Agnikarma therapy using Panchadhatu Shalaka , administered Once in a week for a month.

This treatment protocol proved effective in reducing symptoms such as pain while walking, tingling sensation, local tenderness, stiffness, and restricted spinal mobility associated with Lumbar Spondylosis.

Probable mode of action of Agnikarma –

Agni possesses Ushna, Tikshna, Sukshma, and Aashukari Gunas, which are opposite to Vata and Anti-Kapha properties. Physical heat from red hot Shalaka is transferred as therapeutic heat to Twakdhatu by producing Samyak Dagdha Vrana. From Twakdhatu this therapeutic heat acts in three Ways. First, due to Ushna, Tikshna, Sukshma, Ashukari Guna, removing the Srotavarodha, pacifying the Vitiated Vata and Kapha Dosha, and maintaining Their equilibrium. Secondly, it increases the Rasa Rakta Samvahana (blood circulation) to the affected Site. The excess blood circulation to the affected part Flushes away the pain-producing substances and the Patient gets relief from symptoms. Third, therapeutic Heat increases the Dhatwagni, so the metabolism of Dhatu becomes proper and digests the Amadosha. From the affected site, and promotes proper nutrition From Purva Dhatu. In this way, Asthi and Majja Dhatu become more stable. Thus, the result is precipitated in the form of relief from all symptoms of Kativata. Further, it can be endorsed that the therapeutic Heat goes to the deeper tissue like Mamsa Dhatu and Neutralizes the Sheeta Guna of Vata and Kapha Dosha, and in this way vitiated Doshas come to the Phase of equilibrium and patients got relief from the Symptoms. According to Ayurveda, the basic humor Responsible for causation of Ruka is Vata and pain is A cardinal symptom in most of the Vatavyadh is ^[11] Vata Dosha is predominantly having Sheeta Guna Which is exactly opposite to Ushna Guna of Agni. So, Agni is capable of producing relief in pain by virtue of its Ushna Guna.

Mode of Action of Agnikarma

• On muscles

Rise in temperature

Sudden contraction of muscles.

Followed by relaxation.

Increase in the efficiency of their action.

• On Blood Circulation

Stimulation of superficial sensory nerves.

Dilation of local blood vessels.

Increase in blood circulation.

• On Pain

Increase in local metabolism.

Metabolites excreted.

Blood circulation normalizes.

Thus, reduction in the intensity of pain

CONCLUSION –

Agnikarma (weekly for 4 weeks) effectively managed Katigata Vata (lumbar spondylosis), resolving key symptoms safely through classical Vata pacification and modern pain modulation. It offers a minimally invasive, cost-effective option for degenerative conditions. Agnikarma provided better relief in Katishoola (pain in the lower back) and Katisuptata (numbness in the lower back). It is the best & most effective Parasurgical procedure. It acts together as Antiseptic, Haemostatic & Analgesic. Agni is considered as life In vedas. In the same way, the karma done by this Agni gives new life to the body.

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