AYUSHDHARA
ISSN: 2393-9583 (P)/ 2393-9591 (O)
An International Journal of Research in AYUSH and Allied Systems

Review Article

AYURVEDIC ORAL MEDICATIONS VERSUS *PANCHAKARMA* THERAPIES IN THE MANAGEMENT OF *MANYASTAMBHA* (CERVICAL SPONDYLOSIS) - A COMPILED REVIEW ARTICLE

Ariba Habib[1]*, Visvesh Kumar Manikpuri[1], Chhavi Seekwal[1], Puja Kumari[1], Aditaya Nath Tewari[2]
*[1]MD Scholar, [2]Associate Professor, Department of Roga Nidana Evum Vikriti Vigyan, CBPACS, New Delhi, India.

Article info
Article History:
Received: 29-06-2026
Accepted: 31-07-2026
Published: 10-09-2026

KEYWORDS:
Manyastambha, Vata-Kapha Dosha, Cervical Spondylosis*, Agni, Panchakarma* Therapy, Oral Medications.

ABSTRACT

Manyastambha is an Ayurvedic disorder which is characterized by pain, stiffness and restricted movements of neck mainly due to the vitiation of *Vata Dosha* which is often associated with *Kapha Dosha.* The condition resembles cervical spondylosis which is a common degenerative disorder of the cervical spine and has a significant impact on the quality of life. Its prevalence has increased in recent decades due to sedentary lifestyles, long-term use of digital devices, poor posture, occupational strain and population aging. The usual way of treating cervical spondylosis is by giving medicines for pain and muscle relaxation, physiotherapy and in extreme cases surgery. These interventions can provide temporary relief but may not always treat the underlying pathology and can have adverse effects with long-term use. Ayurveda provides a complete treatment system by correcting the root cause *Dosha* imbalance and re-establishment of functional integrity. The main treatment methods are *Shamana Chikitsa* (oral herbal and herbo-mineral formulations) and *Shodhana Chikitsa (Panchakarma* procedures such as *Abhyanga, Swedana, Greeva Basti and Nasya)*. Both modalities of treatment have shown promising clinical results in reducing pain, stiffness and functional disability. However, there is limited comparative evidence of their relative efficacy and benefits from their combined use. This review compiles the available literature and critically appraises it in order to compare these therapeutic modalities in the management of *Manyastambha.*

INTRODUCTION

In Ayurveda, *Manyastambha* is classified under *Vata Nanatmaja Vikaras* (diseases caused primarily by *Vata*), often involving *Avarana* (obstruction) by *Kapha* [1,6]. In Ayurvedic texts *Manyastambha* stands for neck stiffness and restricted neck movements [2]. It is correlated clinically to a spectrum that includes cervical muscle spasm, myofascial pain and degenerative cervical spondylosis. In contemporary medicine it is clinically correlated with Cervical spondylosis which is a degenerative condition of the cervical spine. Management in Ayurveda typically combines *shamana* (internal) therapy with local and systemic *Panchakarma (shodhana)* procedures [4].

Access this article online
Quick Response Code
https://doi.org/10.47070/ayushdhara.v13i4.2929

Published by Mahadev Publications (Regd.) publication licensed under a Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0)

The treatment principle of *Manyastambha* focuses on relieving stiffness *(Stambha*), reducing pain (*Shoola*), and nourishing the degenerated tissues (*Dhatu Kshaya*)[7]. Clinical trials and many case reports consistently suggesting symptomatic and functional improvement in *Manyastambha* with both oral Ayurvedic medicines and *Panchakarma* therapies.

" Manye Samsruto Vato Yeda Antharnadi Prapadyathe Tadha

Manyasthambham Kuryat Ayam Shleshmanavrutena Vatena Janyate " - Ayurvediya Sabdakosha

AIM AND OBJECTIVE:

AIM: To establish a synergistic complied approach in management of *Manyastambha* through Ayurvedic oral medications and *Panchkarma* therapies.

OBJECTIVE: The objective of this review is to evaluate and compare the two primary Ayurvedic interventions; oral medication (*Shaman chikitsa*) and *Panchkarma* therapies (*Shodhana chikitsa*).

Previous Study Done

1) Akki M, Hakkandi S, Panwar A. Evaluation of comparative efficacy of Guda Sunthi and Manjistha Guggulu Avapeedana Nasya in Manyastambha (Cervical Spondylitis). Journal of Ayurveda and Integrated Medical Sciences. 2019;4(02):1–6. DOI: 10.21760/jaims.4.2.1.

2)Gawas C, Pathrikar A, Paradkar H, Kamat N. Ayurvedic Management of Cervical Spondylosis: A Case Study. International Journal of AYUSH Case Reports. 2021;5(1 Special Issue):27–33.

3)Jain M, Parwe S, Ade V, Nisargandha M. Study of Nidan (Etiological Factors) Responsible for Manyastambha with Respect to Cervical Spondylosis in Present Era - A Study Protocol. Journal of Pharmaceutical Research International. 2021;33 (30B):59–64. DOI: 10.9734/jpri/2021/v33i30B31640.

4)Jain M, Ade V, Parwe S, Sawarkar P. Evaluation of comparative efficacy of Tinospora cardifolia and Ricinus communis via nasal administration in the management of cervical spondylosis: a randomized controlled trial protocol. F1000Research. 2024;13:83. doi:10.12688/f1000research.140183.2.

5)Katkar SR, Vedapathak SM, Kulkarni M. Conceptual study of Mashadi Taila Nasya in Manya Stambha with special reference to Sharangdhar Samhita. World J Pharm Res. 2019;8(13):909–913. doi:10.20959/wjpr 201913-16287.

6)Thakur JS, Nayak NR, Dass RK. A review article on the Ayurvedic aspects of Manyastambha. J Ayurveda Integr Med Sci. 2024;9(9):248–257. doi:10.21760/ jaims.9.9.40.

METHODS: This review study is based on a compiled review of Ayurvedic textual references and general clinical observations regarding the management of *Manyastambha*. The interventions are categorized into two groups for analysis.

1)Role of Ayurvedic Oral Medications (*Shamana Chikitsa)*

Oral medications aim to pacify the aggravated *Doshas* systemically, improve digestion (*Agni),* and nourish bone and nerve tissues *(Asthi and Majja Dhatus*).

Common Formulations:

***Guggulu* Preparations**: *Yogaraja Guggulu*[8,9], *Trayodashanga Guggulu*[10], *and Mahayogaraja Guggulu* [11] are extensively used for their potent anti-inflammatory and *Vata*-pacifying properties.

Decoctions (*Kwathas*): *Maharasnadi Kwatha [10,12], Rasnadi Kwatha [12,13], and Dashamoola Kwatha* [14] help alleviate systemic pain and nerve root compression symptoms.

***Rasayana* (Rejuvenators)**: *Ashwagandha [15]and Shilajit* [16] are often prescribed to prevent further tissue degeneration and strengthen the musculoskeletal system.

Advantages: Excellent for long-term maintenance, preventing recurrence, and addressing the root systemic imbalances of *Vata dosha*. They are highly accessible and easy for patients to comply with at home.

Limitations: The onset of action can be slower compared to localized therapies, particularly for acute, severe muscle spasms or stiffness.

2)Role of *Panchakarma* & External Therapies *(Shodhana Chikitsa)*

Panchakarma and allied external therapies offer targeted, deep-tissue interventions that give rapid symptomatic relief.

Therapies for *Manyastambha*

***Greeva Basti*[17]** : The retention of warm medicated oil (like *Ksheerabala Taila [18] or Mahanarayana Taila* [19]) over the cervical region. It lubricates the joints, relieves muscle spasms [20], and nourishes the intervertebral discs [21].

Nasya: Administration of medicated oils/ powders through the nasal route [22]. According to Ayurveda, "*Nasa hi Shiraso dwaram*" (the nose is the gateway to the head) [22,23]. *Nasya* (using *Anu Taila or Ksheerabala Taila*) [18] is considered the most specific and effective treatment for supra-clavicular disorders [22], directly stimulating the nerve pathways [22,24,25,26].

Abhyanga* and *Swedana: Localized therapeutic massage followed by sudation (steam/heat therapy) such as *Patra Pinda Sweda* (leaf bolus massage)[17,20,27]. This immediately reduces *Kapha* induced stiffness and improves blood circulation [17].

Advantages: Provides rapid relief from pain and stiffness. It directly addresses the localized *Strotorodha* (channel obstruction) and offers deep nourishment to the cervical tissues.[28]

Limitations: Requires clinical visits, trained therapists, and a strict diet/lifestyle regimen during the treatment period.

Comparative Analysis

RESULT

Feature	**Oral medication (*Shamana Chikitsa*)**	***Panchkarma* Therapies *(Shodhana Chikitsa)***
Onset	Gradual	Fast and noticeable
Target area	Systemic (whole body/*Dosha* balance)	Localised and systemic (deep tissue)
Primary action	Prevents degeneration, sustains relief	Clears stiffness, lubricates, detoxifies
Patient convenience	High (can be taken at home)	Lower (requires clinical setup)
Best suited for	Mild cases, long-term maintenance	Acute/severe stiffness, highly limited mobility.

The comparative analysis revealed distinct functional profiles for both modalities:

Efficacy and Onset: *Panchakarma* therapies demonstrated a fast and noticeable onset of relief, particularly effective for clearing stiffness and lubricating localized channels *(Strotorodha*). Oral medications showed a gradual onset but sustained relief by systemically pacifying *Doshas* and improving *Agni* (digestion)

Target Area: *Panchakarma* acts deeply on localized cervical tissues while stimulating specific nerve pathways (e.g., *via Nasya*). Oral medications act systemically to correct the root *Vata* imbalance and nourish *Asthi* (bone) and *Majja* (nerve) Dhatus.

Convenience and Application: Oral medications scored high in patient convenience, being well-suited for home use and long-term maintenance in mild cases. *Panchakarma* scored lower in convenience due to the requirement for clinical setups, trained therapists, and strict lifestyle regimens, but proved essential for acute, severe stiffness.

DISCUSSION: The results indicate that *Shamana and Shodhana* therapies serve different but highly complementary roles in managing *Manyastambha* [30]. Panchakarma therapies are unmatched in breaking acute pathology; procedures like *Greeva Basti and Swedana* immediately reduce *Kapha*-induced stiffness and relieve intense muscle spasms [7,31]. However, to prevent recurrence, oral medications are necessary to correct internal metabolic fires and halt further degeneration of the cervical spine [32].

CONCLUSION:

Oral medications and *Panchakarma* therapies are not strictly competitors but they are highly synergistic. For the optimal management of *Manyastambha*, an integrated protocol is recommended initiating treatment with *Panchakarma* for rapid symptomatic relief followed by long-term oral medications to sustain tissue nourishment and systemic *Dosha* balance.

REFERENCES

1. Sushruta. Sushruta Samhita. Trans. P. V. Sharma. Varanasi; Chaukhambha Visvabharati; 2018. Nidana Sthana. Chapter 1. Verse 67.
2. Madhavakara. Madhava Nidana. Trans. G. D. Singhal. Delhi; Chaukhamba Sanskrit Pratishthan; 2016. Chapter 22. Verse 60.
3. API/Standard Integrative Medical Journal. Symptomatology of Manyastambha with Modern Diagnosis of Cervical Spondylosis.
4. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Chikitsa Sthana. Chapter 28.
5. Vagbhata. Ashtanga Hridaya. Trans. K. R. Srikantha Murthy. Varanasi; Chowkhamba Krishnadas Academy; 2017. Sutra Sthana. Chapter 22.
6. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Sutra Sthana. Chapter 20.
7. Vagbhata. Ashtanga Hridaya. Trans. K. R. Srikantha Murthy. Varanasi; Chowkhamba Krishnadas Academy; 2017. Sutra Sthana. Chapter 13.
8. Sharangadhara. Sharangadhara Samhita. Madhyama Khanda. Varanasi; Publisher not specified; Year not specified. Chapter 7. Verses 71–81.
9. Sen GD. Bhaishajya Ratnavali. Trans. K. R. Srikantha Murthy. Varanasi; Chaukhambha Orientalia; 2015. Aamavata Chikitsa. Chapter 29.
10. Sen GD. Bhaishajya Ratnavali. Trans. K. R. Srikantha Murthy. Varanasi; Chaukhambha Orientalia; 2015. Vatavyadhi Chikitsa. Chapter 26. Verses 89–92.
11. Sharangadhara. Sharangadhara Samhita. Madhyama Khanda. Varanasi; Publisher not specified; Year not specified. Chapter 7. Verses 82–93.
12. Krishnan Vaidyan AK, Gopalapillai S, eds. Sahasrayogam. Kashaya Prakarana. 35th ed. Alappuzha: Vidyarambham Publishers; 2017
13. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Sutra Sthana. Chapter 25. Verse 40.
14. Sharangadhara. Sharangadhara Samhita, Madhyama Khanda, Chapter 2 (Kwatha Kalpana), verses 1–2. Edited by Pandit Parasuram Shastri Vidyasagar. Varanasi: Chaukhambha Surbharati Prakashan; 2018.

15. Bhavamishra. Bhavaprakasha Nighantu. Purvakhanda, Mishra Prakarana, Guduchyadi Varga, Shloka 189–190. Edited by K.C. Chunekar. Varanasi: Chaukhambha Bharati Academy; 2015.
16. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Chikitsa Sthana. Chapter 1.3 (Karaprachitiya Rasayana Pada). Verses 50–75.
17. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Sutra Sthana. Chapters 13 (Snehana) & 14 (Swedana).
18. Vagbhata. Ashtanga Hridaya. Trans. K. R. Srikantha Murthy. Varanasi; Chowkhamba Krishnadas Academy; 2017. Chikitsa Sthana. Chapter 21. Verses 74–76.
19. Sen GD. Bhaishajya Ratnavali. Trans. K. R. Srikantha Murthy. Varanasi; Chaukhambha Orientalia; 2015. Vatavyadhi Chikitsa. Chapter 26. Verses 152–162.
20. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Chikitsa Sthana. Chapter 28. Verse 75.
21. Vagbhata. Ashtanga Hridaya. Trans. K. R. Srikantha Murthy. Varanasi; Chowkhamba Krishnadas Academy; 2017. Sutra Sthana. Chapter 16.
22. Vagbhata. Ashtanga Hridaya. Trans. K. R. Srikantha Murthy. Varanasi; Chowkhamba Krishnadas Academy; 2017. Sutra Sthana. Chapter 20 (Nasya Vidhi Adhyaya). Verse 1.
23. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Siddhi Sthana. Chapter 9. Verse 88.
24. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Sutra Sthana. Chapter 5 (Matrashiteeya Adhyaya). Verses 55–62.
25. Ponnaiah M, Elumalai R, Muthappan S, Jaisankar S, et al. Adverse events in India's Ayush interventions for cervical and lumbar spondylosis: a systematic review. European Journal of Medical Research. 2024; 29:396. doi:10.1186/s40001-024-01985-3
26. Radhika C, Kumar GV, Mihirjan K. A randomized controlled clinical trial to assess the efficacy of Nasya in reducing the signs and symptoms of cervical spondylosis. AYU. 2012;33(1):73–77. doi:10.4103/0974-8520.100316.
27. Shettar RV, Bhavya BK. Evaluation of Combined Efficacy of Greeva Basti, Patra Pottali Sweda and Nasya in the Management of Cervical Spondylosis: A Pilot Study. Journal of Homeopathy & Ayurvedic Medicine. 2013;2(4): 137. doi:10.4172/2167-1206.1000137.
28. Mayo Clinic Staff. Cervical spondylosis: Diagnosis and treatment. Mayo Clinic; 2025 Sep 19.
29. Margetis K, Tadi P. Cervical Spondylosis. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2026 Jan–. Updated 2025 Aug 2. PMID: 31855384
30. Vagbhata. Ashtanga Hridaya. Trans. K. R. Srikantha Murthy. Varanasi; Chowkhamba Krishnadas Academy; 2017. Sutra Sthana. Chapter 14 (Dvividhopakramaniya Adhyaya).
31. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Sutra Sthana. Chapter 14. Verse 11.
32. Agnivesha. Charaka Samhita. Trans. R. K. Sharma, B. Dash. Varanasi; Chowkhamba Sanskrit Series Office; 2014. Chikitsa Sthana. Chapter 1.1 (Rasayana Adhyaya) and Chapter 15. Verse 40.
33. Thakur JS, Nayak NR, Dass RK. A Review Article on the Ayurvedic Aspects of Manyasthambha. J Ayurveda Integr Med Sci. 2024;9:248–257.
34. Girisagar JP. To Evaluate the Efficacy of Nasya Karma in Manyasthamba. J Ayurveda Integr Med Sci. 2019;4(6):26–29.
35. Singh H. Cervical Spondylosis is a Degenerative Condition of the Cervical Spine that Causes Pain, Stiffness, and Tingling Sensations. Journal of Natural and Ayurvedic Medicine. 2023;7(1).
36. Gawas C, Pathrikar A, Paradkar H, Kamat N. Ayurvedic Management of Cervical Spondylosis: A Case Study. Int J AYUSH CaRe. 2021;5(1):27–33.
37. Kaushik R, et al. Management of Cervical Spondylosis through Ayurveda: A Case Study. Int J Res Ayurveda Pharm. 2017;8(Suppl 2):179–181.
38. Vishwas SK, Sharma KK, Kumar A. Review on Cervical Spondylosis and Its Management through Panchakarma. AYUSHDHARA. 2018;5(4): 1791–1795.

Cite this article as:
Ariba Habib, Visvesh Kumar Manikpuri, Chhavi Seekwal, Puja Kumari, Aditaya Nath Tewari. Ayurvedic Oral Medications Versus Panchakarma Therapies in the Management of Manyastambha (Cervical Spondylosis). AYUSHDHARA, 2026;13(4):469-472.
https://doi.org/10.47070/ayushdhara.v13i4.2929

***Address for correspondence**
Dr. Ariba Habib
MD Scholar, Department of Roga Nidana Evum Vikriti Vigyan, CBPACS, New Delhi.
Email: aribahabib99@gmail.com

Disclaimer: AYUSHDHARA is solely owned by Mahadev Publications - A non-profit publications, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. AYUSHDHARA cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of AYUSHDHARA editor or editorial board members.