"Safety and efficiently management through alternative medicine (yoga and naturopathy) life style in patients suffering from cervical spondylosis."



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Original Research Article

SAFETY AND EFFICIENTLY MANAGEMENT THROUGH ALTERNATIVE MEDICINE (YOGA AND NATUROPATHY) LIFE STYLE IN PATIENTS SUFFERING FROM CERVICAL SPONDYLOSIS.

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ABSTRACT-

Cervical spondylosis is an age-related degeneration ('wear and tear') of the vertebrae and discs in the neck. To an extent, we all develop some degeneration in the vertebrae and discs as we become older. It tends to start sometime after the age of about 30. One feature of the degeneration is that the edges of the vertebrae often develop small, rough areas of bone called osteophytes. Also, over many years, the discs become thinner. This degeneration is a normal ageing process which can be likened to having 'wrinkles in the spine'. In many people, the degeneration does not cause any symptoms. For example, routine X-rays of the neck will show these features (osteophytes and disc thinning) in many people who do not have any symptoms.

However, in some people, the nearby muscles, ligaments, or nerves may become irritated or 'pressed on' by the degenerative changes. So, cervical spondylosis often causes no problems but can be a cause of neck pain, particularly in older people. The aim of the study focuses on reduction of symptoms and increase in functional activities of elderly patients with spondylosis before and after modalities of yoga, naturopathy and physiotherapy. A total 65 patients were recruited .All human participants were treated on Yoga, Healing, Naturopathy, Physiotherapy and Diet control and panchakrama. The study parameters were assessed at baseline and at 18th month follow-up. Results found in this study shows an improvement in pain and pain in neck region Rigidness neck pain and the problem of coordination which is assessed by Symptomatic Score used by VAS) Physical Examination through MMT Radiological Examination (X-ray , HRCT ,MRI) and Examination by Pathological test (

Uric acid, ESR,RA factor, BMD), after taking one year Yoga, Naturopathy and Physiotherapy Healing , panchakarma treatment with Diet control . In conclusion, a combined package of Yoga, Naturopathy and Physiotherapy with diet control is found to be effective in reducing pain, facilitating improvement in functional status of elderly people suffering from Cervical Spondylosis.

KEYWORDS- Cervical sopdylosis, Yoga, Naturopathy, Physiotherapy, Healing, Panhakarama, Pain and Stiffness of the neck.

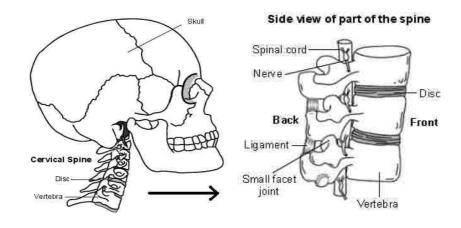
INTRODUCTION –

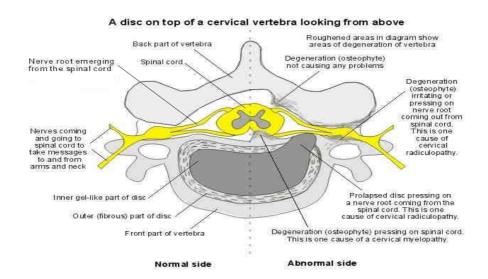
Cervical Spondylosis is a degenerative condition involving the vertebrae and discs of the neck. It occurs in both males and females usually after the age of 40 years and result from one area frequently associated with chronic pain and stiffness in the neck due to disc aging and degenerative changes in the cervical spine. Cervical spondylosis may be caused by faulty sleeping habits, sudden jerks to neck, severe stress and anxiety, and related to occupational hazards as in computer professionals or call centre workers, additional load on the neck are some of the etiological factors and always any type of jerking Movement in work basically this type of symptoms found who are driver.

Common neck pain (CNP) which is not due to any organic lesion accounts for more than 80% of neck pains. Depression and anxiety are well-known undesirable side effects of chronic neck pain. In order for the spine to function mechanically, it affects and is affected by skeletal alignment, flexibility, and strength of various parts of the body. The edges of the vertebrae often develop small, rough areas of bone called osteophytes. Over many years, the spur disc becomes thinner. This degeneration is a normal aging process likened to having 'wrinkles in the spine. Spur of bone disc, vertebra is called osteopthytes.

In many people, the degeneration does not cause any symptoms. Most patients with cervical spondylosis are asymptomatic. Symptoms may develop acutely or insidiously and manifest by the fifth and sixth decade of life. Upon examination, the patient may have difficulty rotating the head and moving it toward the shoulder. Headache usually occipital, constant, and no throbbing, may be less common and arise as a secondary phenomenon due to muscle spasm in the neck. Yoga offers us a path of light and hope to lead us from the state of degeneration towards one of integration, health and harmony by harnessing our inherent healing potential to the fullest.

Yoga therapy is a multifunctional exercise modality with numerous benefits. Since the underlying pathology of neck disorders remains unclear, the treatments are aimed at relief of pain and stiffness. Yoga has also been found to be an effective tool in reducing the stress levels. Yoga relaxation techniques is one of the important role in the treatment of cervical spondylosis, that can be practiced in supine or sitting posture for achieving the goal of positive health, will power, concentration, and relieving pain and stiffness of the neck. The present study was planned to assess the effects of yogasanas on cervical spondylosis.





Objectives =

- I) To ameliorate the clinical features of Cervical spodylosis
- II) To minimize the periodic Age fluctuation of the disease.
- III) To examine the positive effect of yoga management

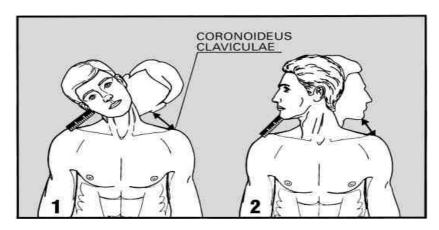
Methodology =

Present study was conducted at Medical Research and Development section of PSD. The patients were selected from the OPD of the Population and Social Development for Yoga Naturopathy Education and Research, Durgapur, Bardhaman, West Bengal . All patients were appointed at the age ranging from 40 to 60 years . Adequate counseling was carried out

for the disease awareness as well as about the study trial. Eligible patients were recruited after taking consent as per research protocol which is recommended by Institutional Ethic Committee of PSD. The total period of recruitment of patients was 12 months.

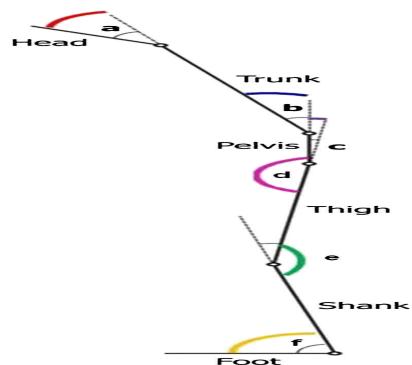
1) Instrumental assessment

1. Coronoideus Claviculae -



The measurement has been done through pectoral.





Posture was evaluated by means of a six cameras stereophotogrammetric system (60-120 Hz, BTS S.r.l., Padova, Italy) synchronized with a Bertec force plate (FP4060-10, 960 Hz). A modified version of Leardini was adopted for the kinematic analysis based on the Cast Protocol which entails the application of 3 extra reflective markers on the head in

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correspondence of glabella, right and left temporomandibular joints. The following joint angles in the sagittal plane were evaluated.

Head protrusion (HP): the supplementary angle to the angle between head and upper trunk upper trunk flexion-extension (UTFE): the angle between upper trunk (defined by means of the 7th cervical vertebra and the right and left acromions) and trunk.

Description of the joint angles in the sagittal plane. Head protrusion (a), trunk flexionextension (b), pelvic tilt (c), hip flexion-extension (d), knee flexion-extension (e), ankle flexion-extension (f).

- trunk flexion-extension (TFE): the angle between trunk (defined by means of the 5th lumbar vertebra and the right and left acromions) and pelvis (see Figure 2)
- pelvic tilt (PT): is the angle of rotation about the mediolateral axis of the pelvis
- right and left hip flexion-extension (rHFE, lHFE): the angle between pelvis and femur
- right and left knee flexion-extension (rKFE, lKFE): the angle between femur and shank
- right and left ankle flexion-extension (rAFE, lAFE): the angle between shank and foot

Subjects were asked to stand for 60 seconds in an upright position over the force plate, with the feet 30° apart and their arms along the body and to look at a small achromatic circular target placed about 1 meter from the eye sat 7 different heights: eye height, $\pm 10^{\circ}$, $\pm 20^{\circ}$, $\pm 30^{\circ}$ than their eye level (e.l.). Romberg test was also performed entailing performing two static acquisitions (stand for 60 seconds in an upright position over the force plate, with the feet 30° apart and their arms along the body), one in eyes open (e.o.) and one in eyes closed (e.c.) conditions. Both kinematic and centre of ground reaction forces data were collected.

The total body center of pressure (CoP) trajectory over the support surface was computed from the vertical force of the force platform, which were recorded for 60 seconds at 960 Hz and then filtered by a 3rd order, low-pass Butterworth filter (cut-off frequency 5 Hz). The first 20 seconds of the acquisition were excluded from the analysis].

A total of 9 CoP measures were computed from the CoP displacement in the horizontal planeIn the time domain, we obtained 3 measures that characterized the CoP trajectory over the support surface, 2 measures that estimated the area covered by the CoP, and 3 measures that estimated the velocity of body sway over the support surface. The following CoP-based measures were computed: Sway area (area included in CoP displacement per unit of time (mm²/s)), Ellipse 95%, the CoP coordinate time series, the CoP coordinate time series in antero-posterior (AP) and medio-lateral (ML) directions, mean velocity (total CoP trajectory length/trial duration (mm/s)), mean velocity in AP and ML directions.

Design of the study

Randomization -

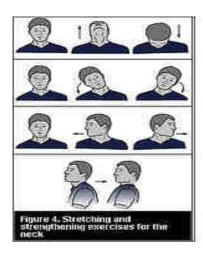
A total number of **65**(Male-48 and Female- 17) patients were recruited from different localities and different ethnic group. These patients were observed randomly into one Group. Group was observed through Healing and therapy i.e. Yoga, Naturopathy, Physiotherapy and diet control. Before starting the trial, intensive counseling was done to educate them about the disease and its risk factors, about the benefits of the treatment of Yoga, Naturopathy, Physiotherapy and diet control, X-ray, number of treatment visits to the Hospital and about the parameters to be investigated during the study period.

TREATMENT

YOGA -

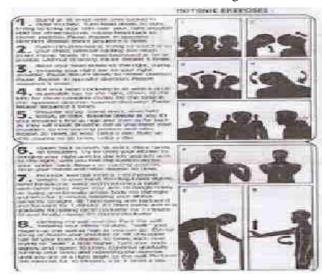
EXERCISES:

Mild exercise is beneficial for first stages of diseases. Vigorous diseases are not advisable to these patients. One should always start gradually mild exercises in beginning. And gradually increasing the types and time. There are many types of exercises which mainly concentrates on cervical region. Exercise flexion of neck, extension, rotation etc.



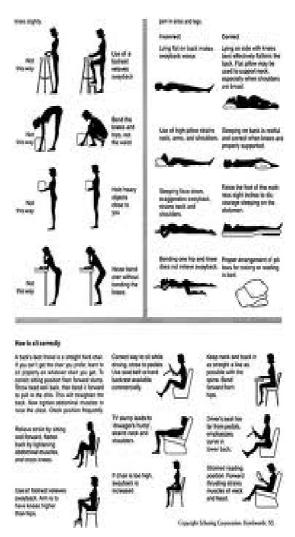


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NATUROPATHY

(PHYSIOTHERAPY AND PANCHAKARMA)



Panchakarma Ayurvedic Treatments for Cervical Spondylosis-

In Ayurveda, a traditional holistic Indian health care system, Panchakarma Ayurvedic treatments are the best option to reduce the symptoms of neck pain and disc compression as experienced by those suffering from the malady of Cervical Spondylitis.

The Panchakarma treatments include:

Basti (Enema): This is considered as the mother of all Panchakarma treatments since it cleanses the accumulated toxins from all the 3 doshas, Vata, Pitta and Kapha, through the colon. Medicated oil or ghee and an herbal decoction is given as enema to clean the colon through the rectum and increase the muscle tone.

Kati basti: The process of pouring warm medicated oil for 20 minutes releases stiff, tight and inflamed muscles and the oil penetrates deeply to nourish the ligaments and tendons. A very effective treatment for back pain, stiffness, and other back concerns related to spinal disc problems. The local Marma points are energized, and the warm herbal oil soothes the pain.

Shirodhara: Pouring continuous stream of medicated oil, buttermilk etc on the fore head and doing a gentle & soothing head massage which creates profound relaxation of the mind and body and revitalizes the central nervous system.

Abhyangam: A whole body massage with specific herbal oils, achieves deepest healing effects by naturally harmonizing body, mind, soul and the senses. The oil is massaged into the entire body before bathing or showering to restore the flow of vital energy, Prana, where it has become blocked.

Swedan: Is a traditional steam therapy designed to open tissues with the saturation of heat and moisture. This method reduces inflammation, improving circulation, and promoting healing and restoration reducing pain in cervical (Neck) and Lumbar (Lower back) part.

Patra PindaSweda (Medicated bundle fomentation): Medicated oil massage and fomentation with bundle of herbs, which reduces pain and swelling of the joints and also checks degenerative process inside of the body.

Sweda (Medicated Steam bath): Fomentation with medicated steam for Stiffness due to neurological disorders and gives instant relief from pain, spasm of the muscles, inflammation of the joints.

Nasyam: (administration of medicated oil through the nose) Cleanses accumulated Kapha toxins from the head and neck region.

Elakizhi: (herbal leaf bundle massage) Entire body is massaged with herbal poultices, prepared with various herbs and medicated powder after they are warmed in medicated oils.

Shastika Sali Pinda Swedam/ Navarakizhi: A highly effective rejuvenation technique using a special type of rice that is cooked, tied into boluses and dipped into an herbal decoction and warm milk, then skillfully massaged all over the body.

Pizhichil (medicated oil bath): Fresh linen dipped in lukewarm medicated oil is squeezed body while masseurs slowly and gently rub the oil all over over. **Greeva Basti:** A treatment done on the neck to decrease cervical spinal compression.

Dilatory Control =

Role of dietary Control for CS –

Calcium, phosphorus, Vitamin D and a host of hormonal, dietary and emotional factors play a major role in the integrity of the locomotors system. The delicate balance between these factors permits many things to go wrong in this system-for instance a deficiency in calcium will cause the entire matrix of the bone to become weaker, or an upset in the Calcium: Phosphorus ratio can cause demineralization of the bone. Proper diet should be consumed to maintain our bones and joints in a healthy condition. Both vegetarian and non-vegetarian diet has their unique roles in maintaining the bone mineral metabolism of the body.

Non-vegetarian diet

Meat is a rich source of sulphur which can change the pH of blood. Same impact is observed in the case of fried foods, spicy foods and sour foods. Meat has the heaviest acid load due to the rich sulphur content which increases the acidity of the blood leading to the demineralization of bones. Many surveys have demonstrated that post-menopausal women who are vegetarians

have a higher bone mineral content as compared to their non-vegetarian (omnivorous) counter parts.

Furthermore there is a very strong relationship between joint pains like 'frozen shoulder and cervical spondylosis and the kind of food eaten. Fried foods, spicy, oily foods, excessive meats and refined foods like sweets, confectionery, bread and other refined wheat products are the main incriminating factors in joint diseases. The kind of food leads to excess acid load in the blood which the kidneys are unable to cope with. Hence this acid causes inflammation of all joints, deterioration of intervertebral discs hence the disc compression.

Constipation also initiates the formation of toxins in the gut, which get absorbed into the blood and increase its acidity. This, too, contributes, along with other factors, in the development of CS and bone demineralization.

Hormones like oestrogen, testosterone, adrenocortical hormones, thyroid and growth hormone also play a very major role in the maintenance of normal body structure and function. A strong link between hormonal activity and the kind of food we eat has been established in several studies.

Vegetarian diet

A vegetarian diet, which is rich in fibre and, in the uncooked form, contains a lot of vitamins and minerals proves very beneficial as it prevents constipation removes toxic matter from the gastrointestinal tract, thereby preventing increased acidity of the blood. The increased amounts of minerals and vitamins in vegetarian foods contribute richly to the smooth functioning of bone metabolism. The acidity (sulphur related) of a non-vegetarian diet initiates and perpetuates bone demineralization as seen by serial bone mineral density studies done by direct photon absorptiometry. In contrast the vegetarian diet which contains predominantly uncooked food doesn't have this disadvantage. However, fried foods, spicy foods and excessively sour foods-whether vegetarian or non-vegetarian are detrimental to bone, cartilage and joint integrity.

Lacto vegetarianism

It is a common conception that vegetarians lack calcium in their diet and as a result they suffer from bone demineralization leading to osteoporosis and osteomalacia. This is not true in the case of a lacto vegetarian because milk and its products are a very rich source of calcium which is easily available to man. However, there are reports and it is our experience that as age advances the digestion of milk becomes more and more difficult owing to decreased gastric

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acid, enzyme content. The maldigestion of milk not only gives gastrointestinal discomfort but also gives an increased acid burden to the body which leads to joint pains and aggravation of arthritis. Cottage cheese (also known as paneer or clabbered milk) and whey (the water obtained during the preparation of cottage cheese) are excellent calcium sources for a vegetarian and are much less toxic than the nonvegetarian sources of protein. Analysis of the available data shows that vegetarian diets prevent the progression of neck and shoulder pain and the demineralization of bones due to the high fibre, vitamin & mineral content and low acid content

Vegetarian sources of calcium

- A. Milk
- B. Cottage cheese
- C. Almonds
- D. Pulses (though bound to phytate)
- E. Seeds especially Sesame, Sunflower
- F. Cheddar Cheese
- G. Swiss Cheese
- H. Soya beans and their products like TOFU (bean curd)

Factors preventing calcium absorption

- A. Foods containing oxalic acids. e.g. spinach, lotus stem, horsegram
- B. Lack of Vit. D.

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C. Overuse of proteins like meat, fish, poultry, eggs, etc.

D. Excessive use common salt, alcohol, coffee, tobacco, fat and soft drinks containing phosphorus

Easy dietary tips for CS

Apart from physical exercise, meditation and yoga diet plays a very important part in decreasing the problem of cervical spondylosis. Patient must have four meals a day which includes salad of steamed vegetables, raw vegetables, whole-wheat bread sprouts and milk. Intake of vitamin d, vitamin c, phosphorus, calcium proteins are also useful. Taking lemon juice mixed with salt at least 2-3 times a day. Additional intake of cherubic myrobalan following meals also found very effective. Habitual consumption of 2-3 cloves of garlic in the morning decreases the problem of cervical spondylosis.

Fruits and vegetables- Vitamins C & A content of fruits and vegetables fight against free radicals responsible for inflammation and help to reduce painful swelling around the neck.

Fish, nuts and oil seeds are rich sources of omega 3 fatty acids and vitamin E acting against inflammation.

Apple, garlic, ginger and turmeric are also anti-inflammatory.

Avoid red meat, white potato and coffee as it increase acid load in the body Include fruit juice and veg. soup in the routine diet.

Diet rich in monounsaturated fatty acid help to reduce inflammation.

Avoid spicy, hot, salty oily foods

Replace rice with wheat

Add more bitter vegetables like bitter gaud and drum stick in the routine food.

Hence it is evident that vegetarian diets do offer substantial protection from bone and joint

disease provided adequate care is taken to meet the daily calcium, protein and vitamin requirements. Analysis of the available data shows that vegetarian diets prevent the progression of neck and shoulder pain and the demineralization of bones due to the high fibre, vitamin & mineral content and low acid content. Studies revealed that practicing proper dietary pattern in life could do wonders in minimizing CS.

Applying Dilatory Control Method in Research of CS=

Timing	Instruction
6.00 am	Wake up, tooth brash, mouth wash and take two glass of water
6.30 am to 7.30	Natural urges, bathing with luke warm etc.
am.	
7.30 am	Prayer .
7.45 am	Intake 1 cup luke warm Shunthifant(Zingiberofficinale) (1 gm
	dry ginger powder boiled with 1 glass of water)
8.15 am to 8.30	Breakfast (dalia/mamra/upma etc. with toned milk.)
am	
11.30 am to 12.30	Light Lunch [Boiled rice, dal (pulses), vegetable soup or
pm	vegetable khichidior roti, dal (pulses), vegetable soup], then
	Shatapadgaman(slow walking for 100 steps).
	Never sleep in day time.
1.00 pm to 1.15 pm	Intake fresh seasonal fruit (e.g. apple, pear, pomegranate, guava
	etc.) never take ripe banana &mango.
4.30pm to 5pm	Evening snacks, if needed, take toned milk with rice puff or rice
	flacks in moderate quantity.
7.30Pm to 8.00PM	Light Dinner[Boiled rice, dal (pulses), vegetable soup or
	vegetable khichidior roti, dal (pulses), vegetable soup], then
	Shatapadgaman(slow walking for 100 steps).
9.45pm	Prayer & intake of 5ml Erandataila(Ricinuscommunis) with 1
	glass luke warm toned milk.
10.00pm	Go to sleep

HEALING -

Healing –Healing Touch is an energy therapy in which practitioners consciously use their hands in a heart-cantered and intentional way to support and facilitate physical, emotional, mental and spiritual health.

Healing Touch is a bio field (magnetic field around the body) therapy that is an energy-based approach to health and healing.

Healing Touch uses the gift of touch to influence the human energy system, specifically the energy field that surrounds the body, and the energy centres that control the flow from the energy field to the physical body.

These non-invasive techniques employ the hands to clear, energize, and balance the human and environmental energy fields, thus affecting physical, mental, emotional and spiritual health. It is based on a heart-cantered, caring relationship in which the practitioner and client come together energetically to facilitate the client's health and healing.

The goal of Healing Touch is to restore balance and harmonies in the energy system, placing the client in a position to self heal.

Duration of healing 30 minutes per day total 21 seating in entire for 18 months period.

Statistical Methods -

The data obtained in the study was analyzed by using Mean and SD. For comparison from 18th month to baseline, Paired T Test was performed. For non parametric method Chi-square test was performed. Results of Pain (VAS) mean \pm standard deviation (SD). The p value (<0.05) was considered to be statistically significant.

Results or Findings –

Sixty five (65) CSof neck pain patients were recruited in this study. All the patients have completed their one year follow-up.

Symptomatic Scoring:

Effect of Therapy on the fallowing clinical features

Clinical	Means of Score		% of relief	S.D	t, vale	p- value
Features	Before	After				
	Treatment	Treatment				
Stiff Neck &	2.02	0.67	64.35	0.23	17.23	< 0.001
Neck Pain						
Rigidness	2.22	0.75	63.26	0.46	18.25	< 0.001
neck pain						
Shoulder Pain	2.1	0.23	60.65	0.58	17.23	< 0.001

PHYSICAL EXAMINATION:

MMT

MMT	Category	Baseline	18 th months	P value
	Very	5	0	< 0.001
	Fair	25	0	
Cervical Right	Very Fair	26	0	1
	Good	7	0	1
	Very	2	19	1
	Normal	0	46	1
	Very	8	0	< 0.001
	Fair	24	0	1
Cervical Left	Very Fair	28	25	1
	Good	5	40	
	Very	0	0	1
	Normal	0	0	

MMT	Category	Baseline	18 th months	P value
	Very	5	0	< 0.001
	Fair	25	0	
Thoracic Right	Very Fair	26	0	
	Good	7	0	
	Very	2	19	
	Normal	0	46	
	Very	8	0	< 0.001
	Fair	24	0	
Thoracic Left	Very Fair	28	25	
	Good	4	40	
	Very	1	0	
	Normal	0	0	

Table 2: Comparison of Pain (VAS) at baseline and after 18th month Follow-up.

VAS % (Mean ± SD)	Baseline	12 th Month	P value
	54.64±15.51	8.57±7.55	< 0.001

RADIOLOGICAL EXAMINATION –

- a. X-ray
- b. HRCT
- c. MRI

On analyzing the data of radiological examination among the 65 human participants for the research of cervical spondylosis. It was observed that significant number of patients who have the thickness of Vertebra in the cervical region (1-10 mm) and orthopedically deviation. After integrated application of Yoga and naturopathy and dietary control. After the comparative study between the baseline situations with 18month fallow up in participant group which is describe in below in a tabular format.

Comparison study of Radiological examination of patient of CP(Cervical Spondylosis)

Severity of	Category	Base Line	18 th month after	p- values
Diseases				
Mild	(10 mm)	10	60	< 0.012
Moderate	(7mm)	42	5	
Savior	(3mm)	13	0	

PATHOLOGICAL EXAMINATION

- a. Blood Examination
- i. ESR
- ii. RA Factor
- iii. BMD
- iv. Uric Acid

ESR in Blood Examination –

There was a Significant improvement in ESR level in Blood in comparison with 18th month fallow up 65 patients as compare to baseline

In human participant (p- value < 0.011).

Table 3: Comparison of ESR in Blood of Human Participants at Base Line and 18th Month Fallow up

Category	Baseline	After 16 th month	p- values
Mild (<7mg)	9	20	< 0.011
Moderate (<8 mg)	30	0	
Severe(<9mg)	25	0	
Normal (<5mg)	1	45	

RA Factor in Blood Examination –

There was a Significant improvement in RA Factor level in Blood in comparison with 1^{th} month fallow up 65 as compare to baseline In human participant (p- value <0.011).

Table 4: Comparison of RA Factor in Blood of Human Participants at Base Line and 18th Month Fallow up

Category	Baseline	After 18 th month	p- values
Positive (+)	60	0	< 0.011
Negative(-)	5	62	

BMD in Blood Examination –

There was a Significant improvement in BMD level in Blood in comparison with 18th month fallow up 65 as compare to baseline In human participant (p-value<0.010).

Table 5: Comparison of BMD in Blood of Human Participants at Base Line and 18th Month Fallow up

Category	Baseline	After 18 th month	p- values
Mild (1-2mm)	13	10	< 0.010
Moderate(1-1.5mm)	10	0	
Severe(1mm)	42	0	
Normal (1-3mm)	0	55	

Uric Acid in Blood Examination –

There was a Significant improvement in Uric Acid level in Blood in comparison with 16^{th} month fallow up 65 as compare to baseline In human participant (p- value <0.012).

Table 6: Comparison of Uric Acid in Blood of Human Participants at Base Line and 18th Month Fallow up

Category	Baseline	After 18 th month	p- values
Mild (7.9 mg)	0	5	< 0.012
Moderate (9.5 mg)	13	0	
Severe(10.3 mg)	42	0	
Normal (7.5 mg)	0	60	

DISCUSSION-

The results suggest that there was a very high significant improvement in case group. Cervical spondylosis is a general term for age related wear and tear affecting joints in the neck region. In this condition usually appears in men and women older than 40 and progresses the age. The development of this condition is more likely when other factors are present, including obesity and sedentary lifestyle, occupation requiring heavy lifting and frequent bending and twisting, previous neck injury, severe arthritis, osteoporotic fractures, and genetic factors. This verity of signs and symptoms directs approach for cervical spondylosis with the following goals like relieving pain and stiffness of the neck. As quoted in one study, tension that is associated with stress is stored mainly in the neck muscle, diaphragm and the nervous system. It has also been suggested that the presence of depressive symptoms predicts future musculoskeletal disorders. Stress can cause spasms by interfering with co-ordination of different muscle groups involved in the functioning of the neck. If these areas are relaxed, stress gets reduced. We need to take consideration, the gender, the physical condition as well as the condition when we are applying yogasana therapy. A step by step approach involving aspects of diet, involving aspects of lifestyle modification, involving aspects of the way we think, and also involving yogic counseling.

Yoga is fast advancing as an effective therapeutic tool in physical, psychological and psychosomatic disorders. Stress, anxiety, depression, tension, lack of concentration, mood changes during pain, emotions are the psychological risk factors in neck pain indicated clear link between psychological variables with neck pain. In a study by Vempati, et al. On healthy adults, the yoga -based guided relaxation was shown to reduce the sympathetic activity as measured by autonomic parameters, oxygen consumption and breathe volume the subjects who practiced yogasanas they felt that they have experienced and learnt a skill in the form of yogasanas, pranayamas, loosening exercises. They felt very happy and self confident, fully satisfied with the treatments.

Result obtained in this study shows an improvement in different dimension like, symptomatic score of (Stiff Neck & Neck Pain, Regimes neck pain, Shoulder Pain) , Physical Examination (MMT of Cervical Right & Left and Thoracic Right & Left) and Radiological Examination (X-ray TX C.T scan) lastly Pathological test of (Uric acid of Blood , RSR,Ra factor , BMD of Blood) one and half (16th Month) year of Yoga , Naturopathy, Healing, Physiotherapy treatment with diet Control of Human Participants.

These observations indicate that Yoga, Naturopathy, Healing, Physiotherapthy and Diet Control when used combined and adopt as a way of life is safe and efficient in reducing pain,

improving the functional capacity status. Previous studies also support our result .Recent evidence suggest that panchakaram and physiotherapy may be helpful in the treatment of symptomatic neck pain of Cervical Spobdylosis. The mechanisms of potential action of panchakarma reaming unclear, however, the proposed mechanisms include improving local blood flow, promoting Venus circulation, reducing the stiff neck & neck pain, Rigidness of neck pain and improving the coordination of problems.

In Ayurveda, a traditional holistic Indian health care system, Panchakarma Ayurvedic treatments are the best option to reduce the symptoms of neck pain and disc compression as experienced by those suffering from the malady of Cervical Spondylitis. Actually Panchakarma consisting with number of segments of treatment means of ayurvedic which are fallowing -

Basti (Enema) it helps -to clean the colon through the rectum and increase the muscle tone.

Kati basti it is used for reduce the back pain, stiffness, and other back concerns related to spinal disc problems. The local Marma points are energized, and the warm herbal oil soothes the pain.

Shirodhara is used for reducing for profound relaxation of the mind and body and revitalizes the central nervous system and also tone up the spinal nerve affected.

Abhyangam is used for restoration of the flow of vital energy, Prana, where it has become blocked.

Swedan this method is used reducing inflammation, improving circulation, and promoting healing and restoration reducing pain in cervical (Neck) and Lumbar (Lower back) part.

Patra PindaSweda (Medicated bundle fomentation) which is used for reducing pain and swelling of the joints and also checks degenerative process inside of the body.

Sweda (Medicated Steam bath) this method is used for instant relief from pain, spasm of the muscles, inflammation of the joints.

Nasyam: (administration of medicated oil through the nose) this method is for Cleanses accumulated Kapha toxins from the head and neck region.

Elakizhi: (herbal leaf bundle massage) this process is used for improving the circulation of the body .

ShastikaSaliPindaSwedam/ Navarakizhi this is used for rejuvenation of the body.

Greeva Basti this is used for decreasing of cervical spinal compression.

Healing uses the gift of touch to influence the human energy system, specifically the energy field that surrounds the body, and the energy centres that control the flow from the energy field to the physical body.

These non-invasive techniques employ the hands to clear, energize, and balance the human and environmental energy fields, thus affecting physical, mental, emotional and spiritual health. It is based on a heart-cantered, caring relationship in which the practitioner and client come together energetically to facilitate the client's health and healing.

In the study it is revealing that application of healing process on the person who are suffering from CS most effective and result oriented. It acts on human body to release anti oxidant materials from the human body and improve the working power and improve the flexibility of joints.

CONCLUSION -

The results of this study showed that yoga and relaxation techniques are a better and beneficial therapy in the treatment of pain and stiffness of the neck region. These techniques may be used as supportive along with conventional medications.

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