



**EFFECT OF *CHITRAKAMULA (PLUMBAGO ZEYLANICA LINN) LEPA* IN THE
MANAGEMENT OF CALCANEAL SPUR A CASE REPORT**

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Article Received on 23/08/2018

Article Revised on 12/09/2018

Article Accepted on 02/10/2018

ABSTRACT

The calcaneal spur syndrome is characterized by the presence of a benign growth extending away from the bone (the calcaneal bone). Calcaneal spurs beneath the sole of the foot (plantar area) are related with plantar fasciitis. Heel spurs and plantar fasciitis can occur alone or be related to underlying diseases. Till date symptomatic treatments are accessible like NSAID and analgesic drugs, steroid injections, orthotics and exercise. The surgical treatment like, plantar fascia release and excision of calcaneal spur are available having complications like incomplete relief of pain and nerve damage. According to Ayurveda *asthi-snayugata vata* can be correlate with the calcaneal spur. *Chitraka (Plumbago zeylanica Linn)* has *katu rasa*, *katu vipaka* and *ushna virya* and *tikshna guna*, so application of *Chitrakamula lepa* externally supportive in *Vatashamana*. Hence in this study calcaneal spur patient was treated with *Chitrakamula lepa* for 4 wks. Due to *ushna*, *tikshna* properties of *chitrakamula* provided considerable relief in pain.

KEYWORDS: *Asthi-snayugata vata*, *Chitraka (Plumbago zeylanica Linn)*, *Vatashamana*.

INTRODUCTION

The calcaneal spur syndrome is characterized by the presence of a benign growth extending away from the bone and often accompanied by extreme heel pain in the area of the inferior calcaneus, caused by the pull of the plantar fascia (and sometimes by the insertion of the Achilles tendon) on the periosteum. There may be no obvious evidence of a heel spur on X-ray (Merck 2001). A negative X-ray for bone spur is not conclusive, as in the early stages visual evidence is often minimal.^[1]

The apex of the spur lies either within the origin of the planter fascia (on the medial tubercle of the calcaneus) or superior to it (in the origin of the flexor digitorum brevis muscle). The relationship between spur formation, the medial tubercle of the calcaneus and intrinsic heel musculature results in a constant pulling effect on the plantar fascia resulting in an inflammatory response.^[2]

The incidence of calcaneal spur in south Indian population having posterior heel pain was 59%.^[3]

According Ayurvedic interpretation calcaneal spur can be correlate with *asthi-snayugat vata* and main indications pain is because of *vata*. As per *achrya shushruta parshni shula* (pain in heel) is due to localization of variously aggravated *vayus* in bones produces degeneration of bone.^[4]

As calcaneal spur is *Astisanyugata Vata* and main symptom which worsen the patient is pain at bilateral heel region. *Chitakamula Lepa* externally is selected as choice of treatment in and patient of calcaneus spur and presented in this case study. Here I present the case of 60-year-old female patient, whose diagnosis of calcaneal spur (*Asthisnayugata -vata*) permitted successful management according to ayurvedic principle.

CASE REPORT

Patient name: ABC A 60 yrs. female patient came to us in OPD with complaint of pain and localized tenderness to both heels. In the last 3-month, Difficulty in walking Pain may worsens in posterior aspect of heel during standing or walking. Severe pain in morning. Age: 60 yrs. Sex: Female OPD no:*** Date: 16/ 3/ 2015, No known case of HTN, DM or major disease in past. No history of any drug allergies, on local examination tenderness over bilateral heel region were found, systemic examination findings were normal. Investigations All routine investigations such as CBC, BSL were in normal Range. X-Ray Booth Heel (AP) – X-Ray shows bilateral calcaneal spur.

Assessment criteria

1) Pain at both heel region – No, Mild, Moderate, Severe.

- 2) Tenderness over affected area- No, Mild, Moderate, Severe.
 3) Pain during Walking – No, Mild, Moderate, Severe.

Treatment

Application of *Chitakamula Lepa* externally done for period of 5 minute.
 Preparation of *chitraka mula lepa*.

Dry root of Chitraka should be rubbed or scratched for desired number of rotations with water and made into a paste for externally application.

Chitakamula Lepa externally application done at maximum tenderness point at calcaneal region.

Time: Morning hrs 10 am to 10.05 am.

Duration: Application of *Chitakamula Lepa* one times in alternate day in a week.

Total 12 sittings done in a month.

Follow up after 24th hours

Severe Pain during standing for a long time.
 Tenderness over affected area — moderate.
 Pain during Walking – moderate.

Follow up after 3th days

Moderate Pain during standing for a long time.
 Tenderness over affected area – moderate
 Pain during Walking – moderate.
 From above symptoms.

Follow up after 5th days

Moderate Pain during standing for a long time.
 Tenderness over affected area – mild.
 Pain during Walking – mild.
 From above symptoms.

Follow up after 8th days

Moderate Pain during standing for a long time.
 Tenderness over affected area – mild.
 Pain during Walking – mild.

Follow up after 11th days

Mild Pain during standing for a long time.
 Tenderness over affected area – mild.
 Pain during Walking – mild.

Follow up after 14th days

Mild Pain during standing for a long time.
 Tenderness over affected area – mild.
 Pain during Walking – mild.

Follow up after 17th days

Mild Pain during standing for a long time.
 Tenderness over affected area – mild.
 Pain during Walking – mild.

Follow up after 20th days

Mild Pain during standing for a long time.

Tenderness over affected area – mild.

Follow up after 23th days

Reduction in Pain during standing for a long time.
 Tenderness over affected area – Reduced.
 Pain during Walking – mild.

Follow up after 26th days

Reduction in Pain during standing for a long time.
 Tenderness over affected area – Reduced above symptoms.
 Pain during Walking – Reduced From above symptoms.

Follow up After 29th day

O/E: No pain during walking, standing for a long time.
 No tenderness on affected area.

DISCUSSION

Initially when patient came to us, patient was suffering from the disease almost in the last 3 months. Pain at bilateral heel region & Difficulty in walking. After the *Chitakamula Lepa* externally done therapy of one month no pain at bilateral heel & patient walk without difficulty. There is no other complains.

Calcaneal spur is *Asthinayugata ashrita vyadhi* and *sushruta*.^[4] The cardinal symptom of Calcaneal spur is pain at heel. According Ayurveda, basic humour responsible for pain is *Vata*. *Vata Dosha* is predominantly having *sheeta guna* which is exactly opposite to *Ushna Guna of Chitaka*. So *chitraka* is capable of producing relief of pain by virtue of its *ushna guna*. In *Chitakamula Lepa* the temperature at the applied site is increased which reduces nerve reflexes resulting in relaxation of muscle.

The use *Chitakamula Lepa* externally created local heat (thermotherapy) may provide relief of pain and painful muscle spasm by acceleration of metabolic processes whereby the concentration of pain including toxic metabolites is reduced. This is accomplished by increase in local circulation.

CONCLUSION

Chitakamula Lepa externally is modest, inexpensive, safe, effective and alternative management in calcaneal spur without any complications. In Ayurveda, it can cure effectively and can evade injections, surgery and other proceeding problems.

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