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# A Randomised Controlled Clinical Study to Evaluate the Efficacy of *Meshashringadi Kashaya* in *Gridhrasi* w.s.r. to Sciatica

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# ABSTRACT

**Background**: *Gridhrasi* is one among the 80 types of *Naanatmaja Vatavyadhi*. *Lakshanas* of *Gridhrasi* are *Stambha, Ruk, Toda* in *Sphik, Kati, Prushtha, Uru, Jaanu, Jangha, Paada* i.e. radiating pain from hip or gluteal region to either to thigh, knee, calf or till to the region of foot. The *Lakshanas* mentioned in *Gridhrasi* are similar to as that of Sciatica.

Sciatica is a crippling disease, in which the patient experiences shooting pain and paraesthesia along the course of the sciatic nerve roots which are involved.

This clinical study has been opted, to find out the therapeutic efficacy of *Meshashringadi Kashaya* in comparison with the efficacy of *Sahacharadi Kashaya* in case of *Gridhrasi*, as per the references available in ayurvedic classical literatures.

**Materials and Methods:** A randomised controlled clinical study was conducted among 60 subjects, they were randomly allocated into two equal groups, Group A and Group B. Group A subjects received *Meshashringadi Kashaya* and Group B subjects received *Sahacharadi Kashaya*. The effect of these interventions were assessed through the grading scales of Subjective and Objective parameters.

**Result:** The statistical analysis within the group has shown a highly statistical significant results with P<0.001 for all parameters in both the groups, i.e. in Group A and in Group B. On statistical comparison between the two groups, it was found that there is no statistical significant difference between the therapeutic effect of *Meshashringadi Kashaya* and *Sahacharadi Kashaya* in case of *Gridhrasi*.

# **Key Words** Gridhrasi, Sciatica, Meshashringadi Kashaya, Sahacharadi Kashaya, Eranda Taila

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# **INTRODUCTION**

In this present era, especially in developing countries, due to the advancement of busy, professional and social life, people are changing their life style either directly or indirectly by over exertion, heavy weight lifting, sitting-standingsleeping in an improper posture, or by experiencing the jerky movements during travelling, sports or trauma; which are making





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them to prone for getting affected by several disorders mainly related to locomotor system. *Gridhrasi* is a *Nanatmaja Vata Vyadhi*. It is of two types that is *Vataja* and *Vata-Kaphaja Gridhrasi*<sup>1</sup>. *Vataja Gridhrasi* is characterized by *Stambha* (Stiffness), *Toda* (Pricking pain), *Spandana* (Twitching or Trembling Sensation) and *Ruk* (Severe pain) from *Sphik Pradesha* (Gluteal region), radiates down to the *Kati* (Pelvic), *Prushtha* (back), *Uru* (Thigh), *Jaanu* (Knee), *Jangha* (Calf), *Paada* (Foot) and *Vata-Kaphaja Gridhrasi*<sup>1</sup> presents with *Tandra*, *Gaurava* and *Aruchi* in addition.

As per the characteristic of pain, *Gridhrasi* can be correlated to an ailment called Sciatica. It is a debilitating condition, clinically presented with excruciating/shooting pain in the distribution of the sciatic nerve or its component nerve roots. The pain is often worsened with flexion-twistingbending of lumbar spine.

Involvement of *Kandara* in the manifestation of *Gridhrasi* has been emphasised by *Acharya Sushruta*<sup>2</sup> and *Vagbhata*<sup>3</sup>. *Acharya Dalhana* explains *Kandara* as *Mahasnayu*<sup>4</sup>. *Acharya Chakrapani* mentions that *Kandara* may also be considered as *Sthula Snayu*<sup>5</sup>. *'Sakthikshepanigrahanat*<sup>2</sup> is the cardinal diagnostic feature of *Gridhrasi*, this we can correlate to SLR Test.

In developing countries, low back pain is the most common cause of inability to work. In general an estimated 5% -10% of patients with low back pain have sciatica, whereas the reported lifetime prevalence of low back pain ranges from

49% to 70%. The annual prevalence of disc related sciatica in the general population is estimated at  $2.2\%^{6}$ .

Hence, an effort is made in this study to compare and evaluate the therapeutic efficacy of 50ml of *Meshashringadi Kashaya* in Group A and 50ml of *Sahacharadi Kashaya* in Group B along with 10 drops of *Eranda Taila* as *Sahapana* per day for both of the *Kashaya* formulations.

# AIM

To evaluate the therapeutic effect of *Meshashringadi Kashaya* in *Gridhrasi*.

# **OBJECTIVE OF THE STUDY**

To compare the therapeutic effect of *Meshashringadi Kashaya* and *Sahacharadi Kashaya* in *Gridhrasi*.

# **MATERIALS AND METHODS**

• Institutional Clinical Ethical Committee Approval Number: ICEC/AAMC//AS/15, Date: 24/07/2021

• CTRI REG. NUMBER: CTRI/2022/07/ 043874 [Registered on: 08/07/2022]

a) Selection of the patient:

• Selection of patients was done irrespective of gender, religion, occupation, marital status, socio-economic status and educational status, fulfilling the diagnostic, inclusion and exclusion criteria of *Gridhrasi*.

• Data were collected using a separate case proforma prepared with the details of history November 10<sup>th</sup> 2023 Volume 19, Issue 3 **Page 2** 





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taking, physical examination, necessary investigations and parameters of signs and symptoms were scored on the basis of standard method and which were analysed statistically.

**b)** Sample size and Grouping: A minimum of 60 patients were randomly divided into two groups; Group A and Group B comprising minimum of 30 patients in each group.

c) Study design: Parallel Group -Randomised controlled clinical study.

- d) Blinding: Single Blind
- e) Sampling method: Lottery method
- ✤ Diagnostic criteria:

1. Patients with *Lakshana* of *Gridhrasi* characterized by radiating pain from *Sphik* and *Kati* to *Prushtha, Uru, Jaanu, Jangha* and *Paada* along with or without the presence of *Stambha*, *Toda, Tandra, Gourava* and *Aruchi*.

2. Positive SLR Test.

✤ Inclusion Criteria:

• Patients of age group between 18-60 years of either gender.

• Patients fulfilling the diagnostic criteria.

\* Exclusion Criteria:

• Congenital, Infective and Neoplastic Conditions of Spine.

• Patients who have lost the control over micturition and defecation.

• Sciatica associated with Diabetic neuropathy.

• Sciatica developed due to any post-surgical complications.

• Patients with any other systemic disorders which interferes the treatment.

- Pregnant women and Lactating mothers.
- **\*** Intervention:

**Group A:** Patients were administered orally with *Meshashringadi Kashaya* 50ml per day, before food along with 10 drops of *Eranda taila* as *Sahapana* for 30 days.

**Group B:** Patients were administered orally with *Sahacharadi Kashaya* 50ml per day, before food along with 10 drops of *Eranda taila* as *Sahapana* for 30 days.

✤ Observational period:

Treatment period: 30 days

**Follow up**: 7 days after completing the course of treatment i.e. 38<sup>th</sup> day

Total study duration: 37 days (30+7)

**Days of assessment**: Observation was done-at baseline on zero day (Before Treatment), on 16<sup>th</sup> day (During Treatment), 31<sup>st</sup> day (After Treatment) and follow up on 38<sup>th</sup> day (After Follow-Up).

# ✤ Assessment Criteria:

Assessment of the condition was done based on detailed case proforma adopting standard scoring methods of subjective and objective parameters.

# 1. Subjective Parameters:

*Ruk, Toda, Stambha, Tandra, Gourava, Aruchi* and VAS score; grading's of these subjective parameters have been mentioned in table number 1.

2. Objective Parameters:

a) **SLR test:** This was observed and assessed by mentioning the degree.



Table 1 Grading's of Subjective Parameters



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Tuble I Grading 5 of Sadjeen	e i arameters				
PARAMETERS	GRADE 0	GRADE 1	GRADE 2	GRADE 3	GRADE 4
RUK	No Pain	Painful, walks	Painful, walks	Painful, can only	Painful, unable
"Ruk Shoolam"		without limping	with limping but	walk with	to walk
[Hemadri-Ayu.RasA.H			without support	support	
Su 12/49]					
STAMBHA	No stiffness	Mild,	Moderate,	Moderate, often	Severe, often
"Stambha		occasionally,	occasionally,	lasting for $>2$	lasting for $>3$
Nishkriyatwam"		lasting for <1 hr,	lasting for >1	hrs, interfering	hrs, interfering
[Arunadatta-Sarv.sund-		not interfering	hr, interfering	with ADL	with ADL
A.H Su 12/50]		with ADL	with ADL		
TODA	No pricking	Occasionally	Mild pricking,	Moderate	Severe pricking,
"Toda Vicchinna	sensation	pricking, lasting	lasting for >1 hr,	pricking, lasting	lasting for $>3$
Shoolam"		for <1 hr, not	interfering with	for $>2$ hrs,	hrs, interfering
[Arunadatta-Sarv.sund		interfering with	ADL	interfering with	with ADL
A.H Su 12/49]		ADL		ADL	
TANDRA	Nil	Lasting for >2	Lasting for 2-4	Lasting for 4-6	Lasting for >6
"Tandra Aalasyam   "		hrs,but not	hrs, interfering	hrs, interfering	hrs, interfering
(Dalhana, Ni.S -		interfering with	with ADL	with ADL	with ADL
Su.Sam.Sutra 4/55)		ADL			
GAURAVA	No	Occasionally	Feeling of	Feeling of	Feeling of
"Gauravam - Gurutwam	heaviness	feeling of	heaviness but not	heaviness	heaviness for
"		heaviness <1 hr	affecting ADL	interfering with	longer duration >
(A.D:S-A.H.Su 12/53)			>1 hr	ADL > 2 hrs	3hrs
ARUCHI	Willing	Unwilling	Unwilling	Unwilling for	Totally unwilling
<b>"Na Anne Roochir</b>	towards all	towards some	towards some	food but could	for meal
Bhavati Tam Bhishajo	Bhojana	specific Ahara	specific Rasa's	take the meal	
Vikaaram	Padartha	but less than	i.e; Katu/ Amla/		
Bhaktopaghatamiha		normal	Madhura		
Panchvidham Vadanti   "					
(S.S.U 57/3)					

**b) 50 foot walk test:** This was observed and assessed by mentioning the time taken to cover the distance of 50 foot in the form of seconds.

# Method of Administration of Medicine :

• 30packets of *Kwatha Choorna* (750gms) containing 25gms of prepared *Kwatha Choorna* and 15ml of *Eranda Taila* was provided to each patient for 30 days of interventional period.

• Patients were advised to prepare fresh *Kashaya* with the ratio 1:16 reduced to 1/8<sup>th</sup> as per guidelines of *Acharya Sharangadhara' Kashaya* preparation method. i.e. 12.5gms of *Kwatha Choorna* added to 200ml of water boiled on low flame until it reduced to 25ml of *Kashaya*. And also advised them to add 5drops of

*Eranda Taila* which was provided to them. This dosage was advised to intake two times in a day after reaching to a lukewarm state, before having food in the morning and evening for 30days.

# ✤ Method of Statistical Analysis :

Statistical tool used here is Sigma Stat Version 4.0, comparative analysis of the overall effect of the treatment in both the groups has been done statistically with 'Mann Whitney U Rank Sum Test'. Within the group comparison has been done statistically with 'Repeated measures of analysis of variance' test followed by 'post hoc -Tukey test'.







# **RESULTS**

Total 65 subjects were registered in the study, out of which 2 subjects were excluded and 3 subjects were dropped out (1 from Group A and 2 from Group B) and the rest 60 subjects completed the study.

Demographic Clinical A. and

Among the 60 patients, 40% belonged to the age group 31yrs to 40yrs, 28.33% belonged to age group 18yrs to 30yrs and to the age group 41yrs to 50yrs, 3.333 % belonged to the age group 51yrs to 60yrs; and 65% were Males and 35% were Females; and other observations have been enclosed in table number 2.

# characteristics:

DIET

Table 2 Observations of Demograph	ic profile, lifestyle, habits, <i>Prakrii</i>	<i>ti</i> etc of the patients
ODGEDUATIONG	TOTAL	

OBSERVATIONS	TOTAL	GROUP A	GROUP B
AGE (IN YEARS)	-		
18yrs – 30yrs	17 (28.33%)	09(30.00%)	08(26.66%)
31yrs – 40yrs	24 (40.00%)	13(43.33%)	11(36.66%)
41yrs – 50yrs	17 (28.33%)	07(23.33%)	10(33.33%)
51yrs – 60yrs	02 (3.333%)	01(3.333%)	01(3.333%)
GENDER			
Male	39 (65%)	21 (70%)	18 (60%)
Female	21 (35%)	09 (30%)	12 (40%)
RELIGION	· · · · · ·	× ,	× ,
Hindu	41 (68.333%)	22 (73.33%)	19 (63.33%)
Muslim	13 (21.66%)	04 (13.33%)	09 (30.00%)
Christian	06 (10.00%)	04 (13.33%)	02 (6.666%)
MARITAL STATUS			
Married	49 (81.66%)	24 (80%)	25 (83.33%)
Unmarried	11 (18.33%)	06 (20%)	05 (16.66%)
EDUCATION			
Illiterate	05 (8.333%)	03 (10.00%)	2 {6.66%)
Primary	07 (11.66%)	02 (6.66%)	5 (16.66%)
High School	15 (25.00%)	08 (26.66%)	7 (23.33%)
Higher Secondary	13 (21.66%)	07 (23.33%)	6 (10.00%)
Graduate	13 (21.66%)	07 (23.33%)	6 (30.00%)
Post Graduate	07 (11.66%)	03 (10.00%)	4 (13.33%)
OCCUPATION			
Business	07 (11.66%)	03 (10.00%)	04 (13.33%)
Labor	04 (6.66%)	03 (10.00%)	01 (3.33%)
Home maker	05 (8.33%)	03 (10.00%)	02 (6.66%)
Driver	10 (16.66%)	05 (16.66%)	05 (16.66%)
Tailor	13 (21.66%)	05 (16.66%)	08 (26.66%)
Officials	06 (10.00%)	03 (10.00%)	03 (10.00%)
Teacher	06 (10.00%)	04 (13.33%)	02 (6.66%)
Farmer	04 (6.66%)	02 (6.66%)	02 (6.66%)
Student	05 (8.33%)	02 (6.66%)	03 (10.00%)
SOCIO-ECONOMIC STATUS			
Poor	10 (16.66%)	06 (20.00%)	04 (13.33%)
Middle	39 (65.00%)	19 (63.33%)	20 (66.66%)
Higher	11 (18.33%)	05 (16.66%)	06 (20.00%)
HABITAT			
Urban	22 (36.66%)	11 (36.66%)	11 (36.66%)
Semi-urban	21 (35.00%)	09 (30.00%)	12 (40.00%)
Rural	17 (28.33%)	10 (33.33%)	07 (23.33%)





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Veg	27 (45%)	13 (43.33%)	14 (46.66%)
Mixed	33 (55%)	17 (56.66%)	16 (53.33%)
OBSERVATIONS	TOTAL	GROUP A	GROUP B
HABITS			
Tea/coffee	39 (65.00%)	20 (66.66%)	19 (63.33%)
Alcohol	03 (5.00%)	02 (6.66%)	01 (3.33%)
Smoking	05 (8.33%)	02 (6.66%)	03 (10.00%)
None	13 (21.66%)	06 (20.00%)	07 (23.33%)
SLEEP	× · · · ·	· · · · · ·	· · · · ·
Sound	28 (46.66%)	16 (53.33%)	12 (40%)
Disturbed	32 (53.33%)	14 (46.66%)	14 (60%)
KOSHTHA	× · · · ·	· · · · · ·	· · · · ·
Mridu	10 (16.66%)	4 (13.33%)	6 (20%)
Madhyama	26 (43.33%)	12 (40.00%)	14 (46.66%)
Krura	24 (40%)	14 (46.66%)	10 (33.33%)
AGNI			× /
Manda	23 (38.33%)	11 (36.66%)	12 (40.00%)
Vishama	30 (50.00%)	16 (53.33%)	14 (46.66%)
Teekshna	07 (11.66%)	03 (10.00%)	04 (13.33%)
PRAKRITI			
Vata-Pitta	26 (43.33%)	14 (46.66%)	12 (40.00%)
Pitta-Kapha	13 (21.66%)	5 (16.66%)	8 (26.66%)
Vata -Kapha	21 (35%)	11 (36.66%)	10 (33.33%)
VYAYAMA SHAKTI			
Pravara	09 (15%)	06 (20%)	3 (10%)
Madhyama	23 (38.33%)	13 (43.33%)	10 (33.33%)
Avara	28 (46.66%)	11 (36.66%)	17 (56.66%)
TYPES OF GRIDHRASI			
Vataja	35 (58.33%)	19 (63.33%)	16 (53.33%)
Vata-Kaphaja	25 (41.66%)	11 (36.66%)	14 (46.66%)
SYMPTOMS OF GRIDHRASI			
Ruk	60 (100%)	20 (100%)	20 (100%)
Stambha		21 (70%)	30(100%)
Toda	<u> </u>	21 (70%)	$\frac{23(70.00\%)}{10(62.32\%)}$
Tandra	21 (25%)	11 (36.66%)	19(03.33%) 10(22.22%)
Gourava	21(33%)	11 (30.00%)	10 (35.35%)
Aruchi	10 (31 66%)	8 (26 66%)	14 (40.00%)
RADIATION OF PAIN	17 (31.0070)	0 (20.0070)	11 (30.0070)
Left	25(11660/)	11 (26 660/)	11 (16 660/)
Right	<u> </u>	11 (30.00%)	14 (40.00%)
Both	<u> </u>	0 (20%)	<u>10 (33.33%)</u> 6 (20%)
	13 (23%)	9 (30%)	0 (20%)

# **B.** Effect of Intervention :

On statistical analysis within the groups, both trial as well as standard drug have shown a highly statistical results with P<0.001 for all 12

parameters in group A and group B respectively, this same has been mentioned in table number 3 for group A and table number 4 for group B.

# Table 3 Effect of Trial Drug (Meshashringadi Kashaya) in Group A

		<u> </u>	0			<u> </u>				
S1.	Parameters	BT	(Day 0)	DT	(Day	AT	(Day	AFU	(Day	P value of
No.				10	5 <sup>th</sup> )	3	1 <sup>st</sup> )	38	<sup>th</sup> )	Group A
1.	Ruk	2.533±	0.507	2.30±0.4	466	1.333±	0.479	0.567±0	.626	P<0.001
2.	Stambha	1.167±	1.020	1.10±0.	995	0.633±	0.615	0.200±0	.484	P<0.001

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3.	Toda	$1.100\pm0.960$	$0.967 \pm 0.890$	0.50±0.509	0.100±0.305	P<0.001
4.	Tandra	$0.500 \pm 0.777$	0.467±0.730	0.167±0.379	0.100±0.305	P<0.001
5.	Gaurava	$0.633 \pm 0.850$	0.633±0.850	0.267±0.521	0.033±0.033	P<0.001
6.	Aruchi	$0.300 \pm 0.535$	0.300±0.535	$0.200 \pm 0.407$	0.033±0.183	P<0.001
7.	VAS score	5.40±1.133	4.333±1.241	2.733±1.015	1.333±1.028	P<0.001
8.	SLR Right Leg – Active	27.70±22.035	30.700±24.230	34.767±27.366	40.500±31.795	P<0.001
9.	SLR Right Leg –	27.70±22.035	30.767±24.311	34.700±27.292	40.500±31.795	P<0.001
	Passive					
10.	SLR Left Leg – Active	28.60±27.967	31.200±30.900	35.667±35.667	42.00±40.767	P<0.001
11.	SLR Left Leg – Passive	$28.667 \pm 28.033$	31.267±31.100	35.667±35.667	42.00±40.767	P<0.001
12.	50 ft walk test	42.433±3.664	39.967±3.459	36.967±3.899	33.267±3.956	P<0.001

# Table 4 Effect of Standard Drug (Sahacharadi Kashaya) in Group B

S1.	Parameters	BT (Day 0)	DT (Day 16 <sup>th</sup> )	AT (Day 31 <sup>st</sup> )	AFU (Day 38 <sup>th</sup> )	P value of
No.						Group B
1.	Ruk	2.4±0.498	2.133±0.434	1.167±0.461	0.233±0.430	P<0.001
2.	Stambha	$1.1 \pm 1.029$	$0.933 \pm 0.907$	$0.5 \pm 0.630$	$0.066 \pm 0.254$	P<0.001
3.	Toda	$0.9 \pm 0.995$	$0.833 \pm 0.950$	0.433±0.568	$0.066 \pm 0.254$	P<0.001
4.	Tandra	0.433±0.679	0.433±0.679	0.233±0.504	0.033±0.183	P<0.001
5.	Gaurava	$0.867 \pm 1.008$	$0.8 \pm 0.925$	0.3±0.466	0.033±0.183	P<0.001
6.	Aruchi	$0.5 \pm 0.731$	$0.4 \pm 0.563$	0.133±0.346	0.033±0.183	P<0.001
7.	VAS score	$5.2 \pm 1.095$	4±1.083	2.3±0.596	$0.633 \pm 0.850$	P<0.001
8.	SLR Right Leg – Active	22.833±22.387	25.233±24.663	28.933±28.033	34.167±32.960	P<0.001
9.	SLR Right Leg – Passive	22.833±22.387	25.267±24.583	28.933±28.033	34.167±32.960	P<0.001
10.	SLR Left Leg – Active	21.177±22.081	22.950±24.375	26.138±28.018	30.839±31.884	P<0.001
11.	SLR Left Leg – Passive	21.210±22.146	22.980±24.481	26.166±28.018	30.839±31.884	P<0.001
12.	50 foot walk test	44.200±4.021	41.433±3.812	37.433±3.857	33.067±3.912	P<0.001

On comparative statistical analysis between the two groups, it has been found that there is no statistical significant difference between the effect of trial drug and standard drug, and the P value with respect to each parameter has been enclosed in the table number 5.

## Table 5 Statistical results of comparison between two groups

1		
PARAMETERS	'P' value of BT-AT	Remarks
Ruk	P = 0.792	NS
Stambha	P = 0.810	NS
Toda	<b>P</b> = 0.354	NS
Tandra	P = 0.350	NS
Gaurava	P = 0.298	NS
Aruchi	P = 0.028	SS
		$(\mathbf{Gp} \ \mathbf{B} > \mathbf{Gp} \ \mathbf{A})$
VAS score	P = 0.328	NS
SLR Right Leg – Active	<b>P</b> = 0.662	NS
SLR Right Leg – Passive	P = 0.668	NS
SLR Left Leg – Active	P = 0.795	NS
SLR Left Leg – Passive	<b>P</b> = 0.866	NS
50 ft walk test	P = 0.033	SS
		(Gn A > Gn B)

# DISCUSSION

• In this present study, two different Ayurvedic medicines were selected in the form of *Kashaya* 

formulation along with *Eranda Taila* as *Sahapana*; one for trial group-*Meshashringadi Kashaya* and another for standard group-*Sahacharadi Kashaya*. November 10<sup>th</sup> 2023 Volume 19, Issue 3 **Page 7** 





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• Majority of *Dravya* involved in these two formulations are having *Ushna Veerya*; *Vata-Kaphahara* or *Kapha-Vata Shamaka* property, *Vedanasthapaka, Shothahara, Balya, Deepana* helps to subside the *Lakshana* of *Gridhrasi. Eranda Taila* has been selected as *Anupana* for both of these two *Kashaya* as per reference found in classical literature.

• The Eranda Taila has Madhura Rasa, Kashaya Anurasa; Ushna Veerya; Teekshna-Sookshma Guna and has Madhura Vipaka. It causes *Sroto Shodhana* by means of *Adhobhagadoshahara* in turn leading to *Vata-Kaphahara Karma*. It increases the *Bala* and *Arogya* as well as helps for *Vayah-Sthapana*<sup>7</sup>.

• The ingredients of *Meshashringadi Kashaya* are *Meshashrungi*, *Vidanga*, *Gokshura*, *Ashwagandha*, *Erandamoola*, *Bilwa*, *Bruhati* and *Kanthakari*<sup>8</sup>. *Rasapanchaka* and pharmacological properties of these drugs have been enlisted in table number 6 and 7.

Table 6 Ingredients and its botanical name of Meshashringadi Kashaya

SL No.	DRUG NAME	BOTANICAL NAME	FAMILY	PART USED
1.	Meshashrungi <sup>29</sup>	Gymnema sylvestre	Asclepiadaceae	Leaf
2.	Vidanga <sup>30</sup>	Embelia ribes	Myrsinaceae	Fruit
3.	Gokshura <sup>31</sup>	Tribulus terrestris	Zygophyllaceae	Root
4.	Ashwagandha <sup>32</sup>	Withania somnifera	Solanaceae	Root
5.	Eranda <sup>33</sup>	Ricinus communis	Euphorbiaceae	Root
6.	Bilwa <sup>34</sup>	Aegle marmelos	Rutaceae	Root
7.	Bruhati <sup>35</sup>	Solanum indicum	Solanaceae	Root
8.	Kanthakari <sup>36</sup>	Solanum surattense	Solanaceae	Root

Table 7 Pharmacological properties of Meshashringadi Kashaya

DRUG NAME	RASA	GUNA	VEERYA	VIPAKA	KARMA
Meshashrungi <sup>29</sup>	Kashaya	Laghu,	Ushna	Katu	Kaphahara, Vatahara,
	Tikta	Ruksha			Deepana, Vedanahara
Vidanga <sup>30</sup>	Katu, Tikta	Laghu,	Ushna	Katu	Vata-Kaphapaha
		Ruksha,			Deepana, Ruchya,
		Teekshna			Vata-Kapha Artinut
Gokshura <sup>31</sup>	Madhura	Guru,	Sheeta	Madhura	Rujahara, Deepana
		Snigdha			Brumhana, Vataghna
Ashwagandha <sup>32</sup>	Tikta,	Laghu,	Ushna	Madhura	Vata-Kaphapaha
	Kashaya	Snigdha			Balya, Rasayana,
					Shophahara, Vatahara
Eranda <sup>33</sup>	Madhura	Snigdha,	Ushna	Madhura	Vatasamshamana,
		Guru			Angamarda Prashamana,
					Adhobhaaga Doshaharam,
					Shoola-Shophahara
Bilwa <sup>34</sup>	Madhura	Laghu	Sheeta	Madhura	Tridoshaghna, Vatanut
Bruhati <sup>35</sup>	Katu, Tikta	Laghu	Ushna	Katu	Vata-Kaphapaha, Deepana,
					Paachana, Ruchya, Shoolajit
Kanthakari <sup>36</sup>	Tikta, Katu	Laghu,	Ushna	Katu	Kapha-Vata Shamaka
		Ruksha,			Ruchya, Deepana, Pachana,
		Teekshna			Artinut





# **ORIGINAL RESEARCH ARTICLE**

• Madhura Rasa of Gokshura-Erandamoola-Bilwa; Madhura Vipaka of Gokshura-Ashwagandha-Erandamoola-Bilwa; Snigdha and Guru Guna of Gokshura-Eranda; Snigdha Guna of Ashwagandha; Ushna Veerya of Meshashrungi-Vidanga-Ashwagandha-

*Erandamoola-Bruhati-Kanthakari*. These helps for *Vatashamana* in *Vataja Gridhrasi*.

• Katu and Tikta Rasa of Vidanga-Bruhati-Kanthakari; Tikta Rasa of Meshashrungi-Ashwagandha; Laghu, Ruksha, Teekshna Guna of Vidanga-Kanthakari; Laghu Guna of Meshashrungi-Ashwagandha-Bilwa-Bruhati;

Ushna Veerya of Meshashrungi -Vidanga-Ashwagandha-Eranda-Bruhati-Kanthakari;

*Katu Vipaka* of *Meshashrungi-Vidanga-Bruhati-Kanthakari;* these properties does the *Kaphashamana* in case of *Vata-Kaphaja Gridhrasi.* 

Vedanahara, Kaphahara, Vatahara, DeepanatoKarma of Meshashrungi; Deepana, Anulomana,oVatakaphapaha Karma of Vidanga; Vataharaeand Brumhana Karma of Gokshura;pVatakaphapaha, Balya and Rasayana Karma oftaTable 8 Ingredients and its botanical name of Sahacharadi Kashaya

Vatahara Ashwagandha; and Amapachana Karma of Erandamoola; Tridoshaghna Karma of Bilwa; Kaphahara, Vatahara, Deepana, and Paachana Karma of Bruhati; Kapha-Vata Shamaka, Deepana and Pachana Karma of *Kanthakari;* acts synergistically and helps for the Shamana of Ruk-Toda-Stambha; and improves the Aruchi by acting on Jatharaagni, also relieves the Tandra and Gaurava in Gridhrasi patients. Analgesic activity and Antiinflammatory activity<sup>9-22</sup> of the drugs of Meshashringadi Kashaya might have helped for reduction in pain in Gridhrasi patients of Group A.

A. Ingredients of *Sahacharadi Kashaya* are *Sahachara, Suradaru* and *Naagara*<sup>23</sup>; these *Dravya* are having *Deepana, Paachana* and *Kapha-Vatahara* properties which leads to *Amapachana, Agnideepana* and *Shophahara* in total which helps in relieving the Pain (*Ruk*) and other associated symptoms like *Stambha, Toda* etc. *Rasapanchaka* and pharmacological properties of these drugs have been enlisted in table number 8 and 9.

1 able 0 mgr	Table o Ingredients and its obtained name of Sandenardar Rashaya							
SL No	DRUG NAME	BOTANICAL NAME	FAMILY	PART USED				
1.	Sahachara <sup>37</sup>	Barleria prionitis	Acanthaceae	Whole plant				
2.	Shunthi <sup>38</sup>	Zingiber officinale	Zingiberaceae	Rhizome				
3.	Suradaru <sup>39</sup>	Cedrus deodara	Pinaceae	Heart wood				

Sable 9 Pharmacological properties of Sahacharadi Kashaya							
SL No	DRUG NAME	RASA	GUNA	VEERYA	VIPAKA	KARMA	
1.	Sahachara <sup>37</sup>	Tikta,	Laghu	Ushna	Katu	Kapha-Vatahara, Kesha	ranjana
		Madhura					
2.	Shunthi <sup>38</sup>	Katu	Laghu,	Ushna	Madhura	Kapha-VataShamaka,	Ruchya,
			Snigdha			Deepaneeya, Paci	haneeya,
						Shophaapaha,	







						Shoolaprashamana,		
3.	Suradaru <sup>39</sup>	Tikta	Laghu,	Ushna	Katu	Kaphahara, Vatahara,		
			Snigdha			Shothahara, Vedana Sthapana		

• *Barleria prionitis (Sahachara)* roots have been reported to have Anti-inflammatory activity<sup>24</sup>, anti-nociceptive activities<sup>25</sup>.

• *Cedrus deodara* (*Suradaru/Devadaru*) - Analgesic, Anti-inflammatory activity<sup>26</sup>.

• Zingiber officinale (Naagara/Shunthi) rhizomes: Gingerol, Shogaol - Analgesic and Anti-inflammatory activity<sup>27</sup>.

Research studies have proven that *Sahacharadi Kashaya* possesses the pharmacological actions like Analgesic, Anti-inflammatory activity, Anti-arthritic Property<sup>28</sup>.





**Graph 1** Overall Effect in Group A and Group B based on clinically

# CONCLUSION

Based on a percentage wise result, **clinically** it has been found that **both the medicines were effective** but *Meshashringadi Kashaya* was more effective with **marked improvement** (51% to 75% relief) in 67% subjects of Group A, whereas *Sahacharadi Kashaya* has shown its marked improvement in 63% subjects of Group B, it has been represented with graphical presentation in the form of pie diagram - graph number 1.





#### **ORIGINAL RESEARCH ARTICLE**

• Based on **percentage wise relief**\_obtained on analyzing the therapeutic effect statistically **after treatment**, it has been found that *Sahacharadi Kashaya* was more effective than *Meshashringadi Kashaya* by showing its **marked**  **improvement** (51% to 75% relief) in 6 parameters out of 12, whereas a *Meshashringadi Kashaya* has shown marked improvement in 3 parameters out of 12, this has been enclosed in table number 10.

Table 10 Overall Effect with percentage wise relief in Group A and Group B based on statistical results.

EFFECT OF TREATMENT		No. of	No. of	No. of	No. of
CLASS	GRADING	- parameters in GROUP A (AT)	GROUP B	GROUP A	GROUP B
			(AT)	(AFU)	(AFU)
0%	No Improvement	0	0	0	0
1-25%	Mild Improvement	3	3	1	1
26-50%	Moderate	6	3	4	4
	Improvement				
51-75%	Marked	3	<u>6</u>	1	0
	Improvement		_		
76-99%	Significant	0	0	6	7
	Improvement				_
100%	Complete Relief	0	0	0	0
Dath alt		an statistically	of Mach	ashningadi Kas	hava in Vataia

 Both clinically as well as statistically, therapeutic effect of *Sahacharadi Kashaya* in *Vata-Kaphaja Gridhrasi* was more compared to *Vataja Gridhrasi*; whereas the therapeutic effect Table 11 Symptom wise relief in Group A and Group B of *Meshashringadi Kashaya* in *Vataja Gridhrasi* was more compared to *Vata-Kaphaja Gridhrasi*, symptom wise results have been mentioned in table number 11.

Assessment Criteria	ΔΤ	ΔT	ΔΕΙ	ΔΕΙΙ
Assessment Chiena			APO	AI U
	Group A	Group B	Group A	Group B
Ruk	47.37 %	51.375 %	77.61 %	90.291%
Stambha	45.75 %	54.54 %	82.94 %	93.93 %
Toda	54.54 %	51.88 %	90.90 %	92.588 %
Tandra	66.6 %	46.18 %	80 %	92.30 %
Gaurava	57.81 %	65.39 %	94.73 %	96.15 %
Aruchi	33.33 %	73.34 %	88.90 %	93.34 %
VAS score	49.388 %	59.61 %	75.370 %	87.82 %
SLR Right Leg – Active	25.51 %	26.71 %	46.20 %	49.63 %
SLR Right Leg – Passive	25.27 %	26.71 %	46.20 %	49.63 %
SLR Left Leg – Active	24.70 %	23.42 %	46.85 %	45.62 %
SLR Left Leg – Passive	24.41 %	23.36 %	46.50 %	45.35 %
50 ft walk test	12.88 %	15.30 %	21.60 %	25.18 %
		paramete	ers out of 12 and	d was <b>no statistical</b>

• Highly statistical significance was found within each group with P<0.001, on analyzing therapeutic effect before and after trial in both• the groups for all the parameters.

• On **comparison** between the effect of Group A and Group B, it has been found that there was a **statistical significant difference** in 2 **significant difference** in 10 parameters out of 12.

Finally to conclude, both of the formulations i.e. Meshashringadi Kashaya and Sahacharadi Kashaya are having equal efficacy in the management of Gridhrasi.

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