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A Comparative Clinical Study on the Effect of *Kativasti* and *Rasnadi Gutika* in *Gridhrasi* w.s.r. to Sciatica Syndrome

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ABSTRACT

Low back pain is a symptom which is present in 40% of patients of which 10% cases experience pain which is radicular in origin and convert into Sciatica syndrome. *Gridhrasi* is a disease in which the pain starts from buttocks and radiates towards the legs thus cripples the life of an individual. The present study was conducted at Institute of Post Graduate Ayurvedic Education & Research, Shyamadas Vaidya Shastra Pith Hospital on 60 patients of *Gridhrasi* which was divided into three groups. Group A: 20 patients treated with oral intake of *RasnadiGutika* in the dose of 1g twice daily after meal for 30 days. Group B: 20 patients treated with *Kativasti* and *PatraPindaSwedana* for 30 days and Group – C: 20 patients treated with oral administration of *RasnadiGutika* in the dose of 1g twice daily after meal along with *Kativasti* and *PatraPindaSwedana* with *Erandataila*for 30 days. The result was found to behighly significant in group C. Drugs like *Rasna* and *Guggulu* plays an important role in subsiding the symptoms of this disease as they possess *sothahara*, *vedananasaka* property and *Kativasti* and *PatraPindaSwedana* is the key for overcoming from this type of diseases.

KEYWORDS

Gridhrasi, Kativasti, PatraPindaSwedana, RasnadiGutika, Radicular



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INTRODUCTION

All these factors leads to

low back pain which is a common complain of an individual now-a-days.

Gridhrasi, a type of *vatavyadhi* is one of the most common problem not only in India but also all over the world.

It is caused due to aggravated *vayu* and pain starts from the *Sphikapradesha* and radiates towards the legs in chronological order thereby hampering the daily activities of an individual.

The symptoms of Gridhrasi mentioned in Ayurvedic texts are Ruka (Pain radiating from Kati pradesha to pada anguli), Stambha (Stiffness of the affected joints), Toda (Pricking sensation of the affected (Occasional *Muhuspandana*¹ site). twitching sensation in the legs) etc. According to Charaka, it is one of the eighty types of vatavyadhi. In Astanga Hridayaa symptom "Sakthiutkshepa Nigrahanti"² is described which is similar to Straight Leg Rising Test (SLR). The symptoms of gridhrasi can be simulated with Sciatica Syndrome, a physical complain in which people cannot stand, walk or sit properly due to continuous radicular pain in the affected limbs. The prevalence of this disease ranges from 11% - 40%. In Western system of medicine, the sciatica includes management of

administration of analgesics, Epidural steroid injections, periradicular infiltration and surgical interventions³ at higher costs. While Ayurveda mentioned *Snehana*, *Swedana*, *Siravedhana*⁴, *Agnikarma*, *Vasti Karma* and *bhesaja prayoga* for this disease which are simple, safe and effective remedies.

Although the disease is not life threatening, it cripples the life of an individual. Chances of recurrence of this disease are high even after surgery but special attention has been advocated in Ayuveda. The development of new harmless drug of plant origin which is cheap and easily available for the treatment of this disease is essential.

AIMS & OBJECTIVES

The current research work was carried out with the following aims and objectives:

- a) To assess the efficacy of *Kativasti* and *Patra Pinda Swedana* and *shaman chikitsa* in the management of *gridhrasi*.
- b) To compare the effect of all the therapies clinically.
- c) To bring out quick, safe and effective remedy for the concerned disease.

MATERIALS & METHODS

Ethical Committee Approval

Number SVP/2177/2016



For this study a series of 60 patients were selected from the OPD and IPD of Institute of Post Graduate Ayurvedic

Education & Research at Shyamadas Vaidya Shastra Pith Hospital, 294/3/1 A.P.C Road, Kolkata–700009. The

patients were questioned, examined and investigated thoroughly by following the inclusion and exclusion criteria.

The patients were divided into three groups with 20 patients in each group.

Inclusion Criteria

- 1. Presence of *Ruka* (Pain), *Toda* (Pin pricking sensation), *Stambha* (Stiffness) of legs.
- 2. Origin of pain from the hip region.
- 3. Pain radiating from the hip to thigh, knee, leg and foot posteriorly.
- 4. Tenderness of sciatic nerve.
- 5. Extension of legs upto 45⁰ in S.L.R test.
- 6. Patients of both sexes between the age group of 40 60 years of age.

Exclusion Criteria

- 1. Patients below 40 years and above 60 years of age.
- 2. Patients suffering from Hypertension, Uncontrolled Diabetes Mellitus, Ischaemic Heart Disease and other systemic disorders.
- 3. Patients suffering from CA of Lumbar Spine.
- 4. Patients suffering from tuberculosis of lumbar spine.

- 5. Patients having the history of Pregnancy and lactation.
- 6. Patients suffering from other contagious diseases.

Informed Consent

In a specified Research format, the consent of patient with signature and date was taken in three languages viz. Hindi,

English, Bengali. The content of the consent form was explained to the patient in their own language in details.

Diagnostic Criteria

a) Subjective:

From clinical signs and symptoms.

Positive Straight Leg Rising Test from 45° -90° .

b) Objective: From haematological, biochemical, serological and radiological investigations.

Preparation of Medicine

All the components of the trial drugs were collected. *Guggulu* was undertaken for *sodhana* in *triphala kwatha* [Fig: 2]



Figure 2 Guggulu Sodhana with Triphala Kwatha



for overnight. The next day it was dried under direct sunlight. It was made into powder form. Rasna Panchanga was also made in powder form. In khalvayantra the powder of both drugs were mixed and processing was given with goghrita. Then it was made in the form of pill in the dose of 1 masa (1 gram). The pills were kept under direct

sunlight for seven days. After that the pills were kept in a polythene packet and given to individual patient.

<u>Dosage</u>: 1 gram (2 pills) twice daily after meal.

Vehicle: Lukewarm water.

Grouping of Patients

60 patients of *Gridhrasi* (sciatica syndrome) were divided into three groups i.e Group – A, Group – B and Group – C. Group – A: 20 patients were given *Rasnadi Gutika* [Fig – 1] in the dose of 1g orally after meal with lukewarm water for 30 days.



Figure 1 Rasnadi Gutika

Group – B: 20 patients were treated with *Kativasti* [Fig: 3] and *Patra Pinda Swedana* [Fig: 4] with *Eranda taila* for 30 days.



Figure 3 Patient Duing Kativasti



Figure 4 Pottali for Patra Pinda Swedana Group – C: 20 patients were treated with oral administration of *Rasnadi Gutika* [Fig:1] along with *Kativasti* [Fig: 3] and *Patra Pinda Swedana* [Fig: 4] with *Eranda taila* for 30 days.

Assessment Criteria

The patients were assessed on the basis of relief of signs and symptoms. To assess the effect of therapy, all the signs and symptoms were aligned a scoring pattern following Visual Analog Scale depending upon their severity.



Ruka(Pain)	* No Pain	: 00	
	* Occasional Pain	: 01	
	* Mild Pain	: 02	
	* Moderate Pain	: 03	
	* Severe Pain	: 04	
Stambha(Stiffness)	*No Stiffness	: 00	
	* Stiffness for 5 – 10 minutes	: 01	
	* Stiffness for 10 – 30 minutes	: 02	
	* Stiffness for 30 – 60 minutes	: 03	
	* Stiffness more than 60 minutes	: 04	
Toda (Pricking Sensation)	* No Pricking Sensation	: 00	
	* Occasional Pricking Sensation	: 01	
	* Mild Pricking Sensation	: 02	
	* Moderate Pricking Sensation	: 03	
	* Severe Pricking Sensation	: 04	
0.T. D. T.	+=		
S.L.R Test	* Extension of legs upto 90°	: 00	
	* Extension of legs between 80° -	- <mark>90° :</mark> 01	
	* Extension of legs between 60°-	- 80° 02	
	* Extension of legs between 45	.60°:03	
	* Extension of legs below 45°	: 04	
1			🖺 (Ct

Statistical Evaluation of the Results

The data obtained from this study were analyzed statistically. The value were expressed as mean \pm SEM (Standard

Error of Mean). The data were analyzed by paired 't' test. Highly significant level (p < 0.001) was considered and interpreted statistically

RESULT

Table 1 Demographic Profile of patients of Gridhrasi

Demograp	Numb	Percenta	
hic Profile	er of	ge	
	Patien		
	ts		
40 - 50	41	68.34%	
years			
Male	38	63.34%	
Muslim	38	63.34%	
Housewive	22	36.67%	
S			
Middle	41	68.34%	
Income			
Urban	40	66.67%	
Vata –	39	65%	
Kapha			
Raja –	30	50%	
Tama			
Mandagni	22	36.67%	
Constipated	33	55%	
	hic Profile 40 – 50 years Male Muslim Housewive s Middle Income Urban Vata – Kapha Raja – Tama Mandagni	hic Profile er of Patien ts 40 – 50	

TABLE 2 Effect of Rasnadi Gutika on Group A patients of Gridhrasi

Sl	Symptom	Mean Score		% of	SD	SE	't'	P value
No.	of Patients			Relief			Test	
	(n = 20)	BT	AT					
1	Ruka	3.67	3.11	15.26%	1.04	0.24	2.28	< 0.05
2	Stambha	3.67	3.00	18.25%	1.13	0.26	2.51	< 0.05
3	Toda	3.56	2.88	19.10%	1.18	0.27	2.48	< 0.05
4	SLR Test	3.67	2.83	22.88%	1.42	0.33	2.48	< 0.05

n= Number of patients, **SD** = Standard Deviation, **SE** = Standard Error, **BT** = Before Treatment, **AT** = After Treatment, **'t'** = Paired 't' test, **P** = Level of significance.

TABLE 3 Effect of Kativasti and Patra Pinda Sweda on Group B patients of Gridhrasi

Sl.	Symptom	Mean Score		% of	SD	SE	't'	P value
No	Of Patients			Relief			Test	
	(n = 20)	BT	AT					
1	Ruka	3.67	2.78	24.25%	1.17	0.27	3.26	< 0.01
2	Stambha	3.61	2.83	21.61%	1.31	0.31	2.53	< 0.05
3	Toda	3.67	2.7	24.65%	1.45	0.34	2.58	< 0.02
4	SLR Test	3.72	2.17	41.67%	0.98	0.23	6.71	< 0.001

 \mathbf{n} = Number of patients, \mathbf{SD} = Standard Deviation, \mathbf{SE} = Standard Error, \mathbf{BT} = Before Treatment, \mathbf{AT} = After Treatment, $\mathbf{'t'}$ = Paired 't' test, \mathbf{P} = Level of significance.



TABLE 4 Effect of Rasnadi Gutika with Kativasti and Patra Pinda Sweda on Group C patients of Gridhrasi

Sl.	Symptom of	Mean S	core	% of	SD	SE	't'	P value
No	Patients (n = 19)	BT	AT	Relief			Test	
1	Ruka	3.68	1.05	71.46%	0.76	0.17	15.11	< 0.001
2	Stambha	3.78	1.16	69.31%	1.01	0.23	11.43	< 0.001
3	Toda	3.68	0.95	74.18%	0.80	0.18	14.89	< 0.001
4	SLR Test	3.74	0.79	78.87%	0.70	0.16	18.30	< 0.001

 \mathbf{n} = Number of patients, \mathbf{SD} = Standard Deviation, \mathbf{SE} = Standard Error, \mathbf{BT} = Before Treatment, \mathbf{AT} = After Treatment, 't' = Paired 't' test, \mathbf{P} = Level of significance.

DISCUSSION

Gridhrasi is a painful condition in which the person cannot sit or walk properly. It hampers the normal activities of an individual. All the signs and symptoms of resembles with Sciatica gridhrasi syndrome in western system of medicine. Clinically, it was observed that the nidana of vatavyadhi such as abhighata, ruksha, alpaahara, dhatukshaya seem to be the cause of gridhrasi. Vata is the main factor for producing the disease. The lakshana of *gridhrasi* described starts from Sphika (buttocks), kati (waist), pristha (back), uru (thigh), janu (knee), jangha (ankle), pada (legs) involved in a chronological order which resemble with the affected course of sciatic nerve. The irritation of pathology at the lumbo-sacral joint that underlines specifically the back of thigh, knee, legs which is the location of sciatic nerve and its branches. The maximum cases were between 40 - 50

The maximum cases were between 40 - 50 years of age group (total incidence were

68.34%) [Table -1] which reveals that the highest incidence occurs in 4th – 5th decade of life which is the initial age of vataprakopa. Lack of nutrients and stress leads to *dhatukshaya* which causes progressive degenerative changes. The males i.e. 63.34% [Table – 1] were the maximum sufferer due to more strenous life and heavy work. Maximum number of patients were Muslims i.e. 63.34%, [Table 1] which is due to consumption of high calorie protein diet which leads to bowel and bladder dysfunction, thus precipitating the pain. Highest incidence was observed in housewives i.e. 36.67% [Table – 1] due to prolonged working in abnormal posture for long periods which causes wear and tear of the spine and their pain is exacerbated by movements such as twisting, bending, extrusion⁶ and sitting. Socio-economic distribution reveals that 68.33% patients [Table – 1] were from middle class population as they are involved in strenuous life, lack of health awareness, which leads to dhatukshaya and causes progressive degenerative change. Habitat distribution reveals that 66.67% patients [Table – 1]



were from urban area as the study was conducted in urban area and the individuals residing in these areas were involved in fast lifestyle and hazards associated with industrialization.

All the components of the trial drug formulation (Rasnadi Gutika) possess Katu and Tikta rasa, Ushna virya, KatuVipaka⁷. Eranda taila possess Madhura Vipaka and Madhura, Tikta, Kashaya rasa. Hence, mitigate *vata* and *kapha* dosha which is involved in Gridhrasi roga. The procedure i.e. Kativasti and Patra *Pinda Swedana* reduces the pain and stiffness by causing sweating and bringing lightness to the affected part i.e. lumbo-sacral region, thereby increasing the tone of the muscles within the body. Overall, the trial drug formulation and therapeutic procedure alleviate the *Ruka* (Pain). Stambha (Stiffness) and *Toda* (Pricking Sensation) of gridhrasi.

CONCLUSION

Oral administration of Rasnadi Gutika along with Kativasti and Patra Pinda Sweda together acts significantly better [Table – 4] as compared to oral administration of Rasnadi Gutika, Kativasti and Patra Pinda Sweda alone. Kativasti and PatraPinda Sweda has a definite role in the management of gridhrasi. Kativasti comes in direct contact with the painful area which mitigates pain. As the site of samprapti is Kati pradesha, thus local snehana and swedana gives quick relief by acting at the site of samprapti. Kativasti increases the temperature of the connective tissue such as skin, muscles, tendons, ligaments or articular capsule and increases the elasticity in that region. *Patra Pinda Sweda* relieves pain, stiffness and pacifies the morbidity of vata, pitta and kapha in the affected joints, muscles, soft tissues and causes sweating which brings lightness to the affected and increases part blood circulation to the affected area; gets rid of imbalance of dosa, strengthens the muscles in the area, helps release of toxins and reduces inflammation which increases the tone of the muscles and improves the working of tissues within the body. Rasnadi Gutika contains Rasna and Guggulu which alleviate vata and kapha. Due to guru guna and ushna virya Rasna pacifies vata and kapha. Guggulu also has Kapha-vatashamaka and antiinflammatory property by its ushnavirya

and is proved to be *vedanashamaka*.



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