IJAPC Vol. 13 Iss. 1



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CASE STUDY

www.ijapc.com e-ISSN 2350-0204

Ayurvedic Management of *Gridhrasi* w.s.r. to Sciatica: - A Case Report

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ABSTRACT

Sciatica is considered as Gridhrasi in Ayurveda which is characterized by pain or discomfort associated with sciatic nerve. This disease very badly affects the quality of life of patient. Modern medicine has no permanent treatment for sciatica. Aim and Objectives: The aim of this study was to explore the Ayurvedic management including Raktamokshana, Shodhana, Shamana and Rasayana Chikitsa in Gridhrasi. Materials and Methods: It is a single case study. A 49-year-old female patient, came with complaint of difficulty in walking , severe pain in lower back region radiating towards right lower limb, numbness in right foot for past one and half year, stretching pain in left lower limb for past 3months, approached to Ayurvedic hospital where she was treated with Raktmokshana, Shodhana (Yoga basti) ,Shaman and Rasayana Chikitsa. The treatment was continued for 3 months. Results: Assessment was carried out during 2 months and satisfactory outcome came and overall quality of life of patient was significantly improved. Conclusion: The above mentioned therapy gives symptomatic relief in patients of Gridhrasi.

KEYWORDS

Sciatica, Gridhrasi, Raktmokshana, Yoga basti, Lashuna Rasayana



Received 20/05/20 Accepted 15/06/2020 Published 10/07/2020

Malviya et al. Int J Ayu Pharm Chem 2020 Vol. 13 Issue 1 e ISSN 2350-0204]

INTRODUCTION

Sciatica is a neuralgic pain referred to the muscles supplied by the sciatic nerve¹. The prevalence of sciatica varies considerably ranging from 3.8% in the working to 7.9% in nonworking population population². Low back pain has been enumerated as fifth most common cause for hospitalization and the third most frequent reason for a surgical procedure³. In Ayurveda, sciatica can be correlated with Gridhrasi because their same clinical presentation. Gridhrasi comes under Nanatamja Vata vyadhi⁴. The symptoms of Gridhrasi are Ruka (pain) that starts from Sphik (buttock) and then radiates to Kati (lower back), Prishtha (back), Uru (thigh), Janu (knee), Jangha (calf) and Pada (foot) along with Stambha (stiffness), Toda (pricking pain), and *Spandana* (twitching)⁵. Sakthikshepanigraha (i.e., restriction in upward lifting of lower limbs)⁶. In Gridhrasi, Tandra (Drowsiness), Gaurava (Heaviness), and Arochaka (Anorexia) may be present if Kapha is associated with $Vata^7$. On the basis of involvement of Dosha it is of two type vataja and vatajakaphaja. Management in modern medicine is symptomatic or surgery only that's why there is limitation of treatment in modern medicine. But in Ayurveda Acharya has described different treatment modalities for

Gridhrasi like Raktamokshana, Basti karma, Agnikarma⁸.

AIM AND OBJECTIVE

То Ayurvedic explore the management of Gridhrasi w.s.r. to sciatica.

CASE REPORT

A 49-year-old female patient came for consultation to the OPD of Kayachikitsa on 10/12/2019 having complaints of difficulty in walking, severe pain in lower back region radiating towards right lower limb, numbness in right foot for past one and half year, stretching pain in left lower limb for last 3months. She was known case of bronchial asthma from last 12 years. Patient was admitted in IPD for Panchkarma procedure. Before 3 years back she was fallen on floor after that she had pain in lower back region. She consulted local physician from where she got symptomatic treatment, but one and half year ago she got pain in lower back region radiate towards right lower limb, again she took treatment but did not got complete relief, 3 month ago she felt stretching pain in left lower limb and numbness in right foot. Magnetic resonance imaging (MRI) Lumbosacral spine suggestive of lumbar spondylosis with diffuse disc desiccation change, diffuse posterior disc bulge at L3-L4, annular tear L4-L5, bilateral terminal

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narrowing with compression. She took analgesic drug for pain but there was no improvement in symptoms then she came to Ayurvedic hospital for her better treatment. According to *Ayurveda* Patient was diagnosed as *Gridhrasi*. Treatment protocol has been made on the concept of *Vatavyadhi*.

Personal history uncovered that the patient is a vegetarian with good appetite, disturbed sleep due to pain and having frequency of micturition 5-6 times per day and she had history of constipation. There was no any relevant family history. General physical examination uncovered that GC: Painful, BP: 110/70 mmHg, P.R.: 72/min, regular, Temprature: Afebrile, Pallor -Icterus-Cyanosis-Clubbing- Edema: Not present, JVP: Normal, Tongue: Coated, Trachea: Centrally placed, Thyroid: Not enlarged, other lesion: Not present. On the basis of Ayurvedic principle the Samprapti Ghataka is given below.

Samprapti Ghataka

Dosha: Vata pradhan Tridosha

Dushya: Rasa, Rakta, Asthi, Majja, Sira, Kandara, and Snayu

Srotas: Rasavaha, Asthivaha, Majjavaha, and Purishavaha

Srotodushti: Sanga

Rogamarga: Madhyama

Agnimandya: Ama,

Jathargnimandya, and Dhatvagnimandya

Udbhavasthana: Pakvashaya
 Adhishtana: Kati and
 Prushthavamsha

Vyaktasthana: Sphik, Kati,
 Prushtha, Uru, Janu, Jangha, and Pada.

DIAGNOSIS

Vataja Gridhrasi

METHODOLOGY

It is a single case study.

INTERVENTION AND ASSESSMENT

1. Details of *Shodhana Chikitsa* (Yoga Basti), Shamana Chikitsa (Oral medicine), Lashuna Rasayana is mentioned in Table -1, 2, 3 respectively. Raktmokshana (Siravedhana) was done prior to Shodhana procedure.

After two month of *Shodhana* procedure *Lashuna Rasayana* was given to the patient. 2. Assessment and result: Assessment was done on the basis of subjective and objective parameters. After course of two month of treatment patient got significant relief in her complaints. Assessment and result was shown in Table- 4 and 5 respectively.

Raktmokshana (Siravedha) (Therapeutic bloodletting by vein puncture)

Before *Raktmokshana*, *Snehana-Swedana* was done then 100 ml of blood was drawn with the help of 20 number disposable scalp vein set.



S. N.	Type of Chikitsa	!	Drugs	Duration
1.	Sarwanga	Abhyanga	Mahavishgarbha Taila	8 days
	followed by		-	-
2.	Nadi swedana		Dashmoola kwath	8days
3.	Nirooha Basti		Erandmola kashaya-250ml	8days, Yoga basti
			Goarka – 15ml	(alternate Nirooha and
			Nirgundi taila – 100ml	Anuvasana Basti has
			Madhu - 80 ml	been given)
			Saindhava – 5 g	
			Bala + shilajatu kalka - 30g	
4.	Anuvasana Basti		Sahacharadi tail – 60 ml	

Table 1 Shodhana Chikitsa (Yoga Basti)

Table 2 Shamana Chikitsa (Oral Medicine)

S.N.	Drugs	Dose	Time or administration	f Anupana	Duration
1.	Ekangveer rasa	1 TDS	After food	Water	15 days
2.	Vishtinduka vati	1 BD	After food	Water	15 days
3.	Shilajatvadi loha	1 BD	After food	Water	15 days
4.	Gandharvhastadi kwath	30 ML,BD	Before food	Water	15 days
5.	Balarishta	20ML ,BD	After food	Water	15 days
6.	Gandhrvahastadi errand Tail	10 ML	HS	Luke warm water	15 days

Table 3 Lashuna Rasayana (Rejuvenating therapy)

S.N.	Туре	Dose	Time of administration	Anupana	Duration
1.	Cap Lashuna	12 cap	Empty stomach in morning	Milk	1^{st} -4 th day
		15 cap			$5^{th} - 8^{th} day$
		10 cap			$9^{th} - 12^{th} day$
		25 cap			$13^{th} - 16^{th} day$
2.	Trivrut lehya	10 g	Empty stomach in morning	Milk	17 th day
3.	Erand tail	10 ml	HS	Luke warm water	Till 15 th day

Table 4 Subjective symptoms

Symptoms/Signs	During admission	After 8 day	After 1 month	After 2 months
<i>Ruka</i> /radiating pain	Present (Rt. Leg 7+) VAS Score	6+	3+	0
Toda	Present	Present	Present	Absent
Stambha	Present	Present	Absent	Absent
Spandana/chimchimayana	Present	Present	Absent	Absent
Aruchi	Absent	Absent	Absent	Absent
Tandra	Absent	Absent	Absent	Absent
Gaurava	Present	Present	Present	Absent
DehasyapiPravakrata	Absent	Absent	Absent	Absent
Daha	Present(Rt.leg)	100% relief	Absent	Absent
Suptata	Present(Rt.leg)	Present	Present	Reduced
Sparshasahatwa	Present	Absent	Absent	Absent
Sparshagnyatwa	Present	Present	Present	Absent

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		During admission	After 8 day	After 1 month	After 2 month
SLR	Right	30	40	70	85
	Left	60	60	70	80
Lasegues test		-	-	-	
Bragau	rd test	+ve	+ve	+ve	-ve
Tendern	ness	Present (5)	5	5	Absent
ROM		Movement	Easy movement	Easy movement	

 Table 5 Objective symptoms

DISCUSSION

Gridhrasi is a Vatavyadhi which is explained in Vatavyadhi chapter⁸. As patient had history of fall which is the cause of vitiation of Vata Dosha so patient was treated on the line of Vatavyadhi. She came with severe pain with difficulty in walking, that's why Siravedhana was done for release of pressure of blood which gave relief in severe pain. Treatment principles for Gridhrasi is given in classics are Basti Karma. Siravedha. and Agnikarma Chikitsa. Here, in the present study the treatment principle planned was Siravedha, Yoga Basti, and Shaman Chikitsa along with Rasayana chikitsa. Siravedhana: It helps in release of pressure of blood that give relief in pain.

(In *Siravedhana*, expulsion of morbid humors (vitiated *Doshas*) accumulated due to inflammatory reaction outside body can give relief in pain. *Stambha* is chiefly due to *Sheeta* and *Ruksha Guna* of *Vata Dosha*. In such conditions of *Vata Prakopa* due to *Kapha* and *Pitta Avarana*, *Siravedha* will facilitate to get rid of the *Avarana* of *Pitta* and *Kapha* *Dosha* giving way for *Anuloma Gati* of vitiated *Vata* that indirectly cures the *Vatika* symptoms along with symptoms produced by *Kapha dos*)

From second day treatment had been planned which included Sarvanga Abhyanga, Nadiswedana, and Yoga Basti (Enema treatment) Erandmooladi Nirooha Basti alternate with Anuvasana Basti with Sahachraadi tail, which is shown in Table-1. Abhyanga (Local massage): It is type of Snehana which nourish the Twak, Snayu, Mamsa Dhatu. It acts on Spershendriya which is the seat of Vata Dosha⁹. Mahavishgarbha Tail having property of Ushna, Tiksha which pacify Vata dosha¹⁰. Nadiswedana: it is a type of Swedana (sudation) which pacify Stambha, Sankoch, *Vatakaphashamaka*¹¹. Thus it liquefies the Dosha and expands the Srotas (channels), helping the Doshas to travel towards their leading the own place to Srotosangavighatana (breakdown the pathogenesis by removing obstruction in the micro channels) and stiffness of the joint relieved¹². Nirooha Basti: Basti is the half treatment of Vatavyadhi as per



Acharya charaka: Basti has systemic action as the active principles (Virya) of Basti preparation absorbed are through Pakwashaya (intestine) and spread to various channels of the body. It reaches at the site of lesion and induces systemic effects and relieves the disease¹³. Anuvasana Basti with Sahachara Taila get absorbed and spread throughout the body up to subtle channels¹⁴. Sahachara Taila is specific of having property Gati viseshatvam (helps to move) because of its Madhura and Tikta Rasa and having Vatahara, Bruhana (nourishing), and Pachana properties¹⁵. Shamana Chikitsa: Given in Table- 2: Ekangaveer Rasa -It is having anti - inflammatory, analgesic property, antioxidant¹⁶. Vishtinduka vati – Due to Rasa- Tikta, Katu, Vipaka – Katu, Virya – Ushna, Guna - Laghu, Tikshna. it acts as Kaphvatashamakaa. Strychnous nux vomica has two important alkaloids which are- Brucin and brucin oxide. These alkaloids are likely to increase glutamic acid levels in brain. Glutamic acid excites muscle contractions by stimulation of excitatory nerve impulses¹⁷. Shilajatvadi loha- It contains pure Shilajit (black bitumen/mineral pitch), Swarna Makshika Bhasma (ash of Shunthi (Zingiber chalcopyrite), officinale Roscoe). Maricha (Piper nigrum L.), and Pippali (Piper longum L.)

in equal amount and Lauha Bhasma (calx of iron-turning) are six times to other ingredients¹⁸. *Balarishta:* It predominantly cures diseases that occur due to Vata imbalances. These imbalances mainly affect the nervous and musculoskeletal system. Gandhrvahastadi Errand Tail: It is used for Mriduvirechana, Vatanulomana. Lashuna Rasayana: Acharya Vagbhatta has described in brief about Lashuna *Rasyana*, it should be given in the condition of Stabdha(Rigidity or Loss of movement), Bhagna(Fracture) , Kutila (Beding of bone), Vyathita Asthi(Other diseases of bone)¹⁹. Acharya Vagbhatta considered Lashuna as the Vatahara Dravya. He emphasized the role of Lashuna as a Rasayana in the treatment of Vata Avaranas. It removes obstruction of channels by its hot and penetrating qualities. It pacifies Vata and Kapha by its hot and penetrating qualities. At the end of *Rasayana* therapy a mild purgation should be done to expel the excess *Pitta* then only process of Rasayana the becomes complete²⁰. The method of taking *Lashuna* Rasayana mentioned in Table- 3. Through this treatment plan patient got complete relief in her complaints, which were shown in Table- 4 and 5. After one month patient was again admitted for 10 days and same Yoga Basti had been given and after that Lashuna Rasayana was given. From these

treatment modalities significant results were found.

CONCLUSION

The overall effect of the above mentioned treatment shows that sciatica can be cured effectively with *Ayurvedic* treatment. It is also conclude that through this treatment plan patient got complete relief in symptoms and no recurrence of symptoms. After two month of treatment the patient is well and doing her household work easily. This treatment can be adopted for other cases of *Gridhrasi* and for research also which explore the treatment of *Gridhrasi*. Through *Ayurvedic* treatment we gave a new hope for QOL to the patient of *Gridhrasi*.





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