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# MANAGEMENT OF GRIDHRASI THROUGH AYURVEDA W.S.R TO SCIATICA- A CASE STUDY

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### **ABSTRACT**

**Background:** Gridhrasi is one of the most common disorders of Vata, which closely resembles with sciatica, which is characterized by pain or discomfort associated with sciatic nerve. Contemporary medicine has limitations giving short-term relief in pain or surgical intervention with side effect.

Aims and Objectives: The aim of this study was to access the efficacy of Ayurvedic management through Shodhana and Shamana Chikitsa

Materials and methods: It is a single case study. A 31yrs old male who was came with complaints of severe pain in low back (lumbar region) on right side which is radiating towards the thigh, calf region &down to foot difficulty & pain while walking & sitting, stiffness in lumbar region, mild numbness in right leg since 2 months. Also having the H/O fall before 4 months. So, patient approached to Ayurvedic hospital and was treated by one course of Yoga Basti along with Shamana Chikitsa.

**Result:** symptomatic assessment of patient was carried out after the treatment & satisfactory outcome was observed & overall quality of life of patient was improved.

Conclusion: The above mentioned therapy gives symptomatic relief for the management of Gridhrasi.

KEYWORDS: Gridhrasi, Shodhana, Shamana, Yoga Basti, Sciatic.

## **INRTODUCTION**

In Ayurveda sciatica disease is resembles with Gridhrasi which included under 80 types of Vataja Nanatmaja Viakara [1]. In this disease the gait of patient is typical that resembles of Ghridra (Vulture). Ghridrasi is divided into 2 types based on Dosha Involvement in it. One is Keval Vataja and other is Vata-Kaphaja. The sign and symptoms of Kevala Vataja is Ruk(pain) with Toda (pricking sensation), Stamba (stiffness) and repeated twitching in the Sphik, Kati, Uru, Janu, Jangha, and Pada in order. Saktikshepanigraha(i.e., restriction in upward lifting of lower limb). In Vata-Kaphaja Gridhrasi there is Tandra (drowsiness), Gaurva (feeling of heaviness) and Aruchi (anorexia) is present. [2]



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Sciatica refers to pain that radiates along the course of the sciatic nerve, which is associated with tingling numbness, pricking sensation and stiffness. The life time incidence of sciatica varies from 13-40%. It is most common during peoples 40s and 50s and men's are more frequently affected than women's.[3] The prevalence of sciatica varies considerably ranging from 3.8% in the working population to 7.9% in the nonworking population.

In Ayurveda the disease Gridhrasi treated as a Vata Vyadhi, which included mainly Basti Chikitsa as a Shodhana Karma and internal medicine as a Shamana Chikitsa.

### CASE REPORT

A 31 year male patient visited kayachikitsa OPD of RPK Ayurvedic Hospital, Ilkal on date

20/7/22 with following details:

Age/sex: 31vr/male OPD No: 2215527 DOA: 20/7/22 DOD: 27/7/22

Occupation: Software Engineer

Address: Hatti

#### **Chief Complaints**

Low back pain radiating to right toe since 2 months.

- Difficulty and pain while walking & sitting since 2 months.
- Stiffness in lumbar region and slight numbness since 2 months.

### **H/o Present Illness**

Patient is said to be healthy before 2 months then he gradually developed symptoms like pain in lower back region, which started gradually radiating to posterior aspect of right leg, associated with difficulty & pain while walking and sitting, stiffness in lumbar region and slight numbness which was disturbing routine work. For these complaints patient has approached allopathic hospital where he got medication i.e painkiller and pain was relieved for short duration but there is no complete recovery and there is reoccurrence of symptoms. So Patient approached to kayachikitsa OPD seeking Ayurvedic cure.

#### **Past History**

- H/O Trauma fall from bike
- N/H/O DM/HTN

#### **Personal History**

- Diet: Mixed
- Appetite: Reduced
- Bowel: clear (1 time/day)
- Micturation: Normal(5-6 times/day)
- Sleep: Disturbed because of pain

### Ashtavidha Pariksha

Naadi: Vatakaphaja Mala: Prakruta Mutra: Prakruta Jihva: Alipta

Shabda: Prakruta Sparsha: Prakruta Druk: Prakruta

Akruti: Madhyama

#### Nidana Panchaka

- Nidana (Causative factors): Irregular posture, H/o fall from bike, Aatichankramana(excessive walking), prolonged continuous standing, sitting and heavy weight lifting.
- **Poorvarupa** (Prodromal symptoms): Pain and stiffness in lumbar and low back region.



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**Roopa** (manifestation): Pain in the lumbar region radiating towards the thigh, calf region and down to the foot, difficulty in walking and sitting, numbness in the left leg.

# > Samprapti (Pathogenesis)

*Vata Dosha* is vitiated due to *Nidana Sevena* i.e. excessive walking, irregular posture, H/o fall from bike, prolonged continuous standing, sitting and heavy weight lifting.

Vitiated Vata Dosha causes formation of Rukshta, Kharata in lumbar vertebra

which further leads to loss of functioning of *Shlesmaka Kapha* i.e. decreases elasticity and flexibility of disc

It result into the decreasing the functioning of joints in lumbar region, which ultimately results in disc herniation and compression of nerve i.e. *Prakshobha* of *Vatavahini Nadi*.

Compression of nerve causes radiating pain towards low back, gluteal, calf and right leg with tingling, numbness.

### Samprapti Ghataka

- Dosha Vata Kapha
- Dushya –Rasa , Rakta, Mamsa, Asthi, Majja
- Ama Nirama
- Agni Jataragnijanya
- Srotas- Rasavaha, Raktavaha, Mamsavaha, Asthivaha, Majjavaha
- Srotodusti Sanga
- Rogamarga Madhyama
- Udhbhava Sthana Pakwashaya
- Vyaktasthana Sphik, Kati, Prushta, Uru, Jaanu, Jangha, Paada
- Rogaswabhava Ashukari
- Sadhyasadyata Sadhya

### **Systemic Examination**

CNS- conscious and well oriented with time and place.

CVS- S1 and S2 heard no murmur.

RS- Normal vesicular sounds heard and no added sounds.

P/A -

### Locomotor examination

#### Inspection

• Gait : Antalgic Gait

• Deformity : No Any Deformity

### **Palpitation**

- ➤ Tenderness positive at L4 and L5
- ➤ Muscle tone good
- ➤ Muscle power both upper limb and lower limb is good
- Range of movement of spine
  - Forward flexion limited to 20cm above ground.



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- Right lateral flexion limited to 30° with pain.
- Left lateral flexion limited to 30° with pain.
- Extension limited to 10° with pain.
- Schober's- less than 10cm of distance.

## **Special Test**

| Test            | Right leg       | Left leg |
|-----------------|-----------------|----------|
| SLR Test        | Positive at 35° | Negative |
| Bragard's Test  | Positive at 35° | Negative |
| Bow string test | Positive        | Negative |

#### **Treatment**

- Sarvanga Abhyanga followed by Pinda Sweda and Bashpa Sweda
- Basti Yoga Basti
- Niruha Basti Erandamooladi Niruha Basti Ingredients of Niruha Basti:

| S.no | Ingredients          | Dose  |
|------|----------------------|-------|
| 1    | Madhu                | 100ml |
| 2    | Saindhava lavana     | 10gms |
| 3    | Sahacharadi taila    | 200ml |
| 4    | Shatapushpa kalka    | 10gms |
| 5    | Erandamooladi kwatha | 400ml |
|      | Total quantity       | 700ml |

### Anuvasana Basti – Sahacharadi Taila (70ml)

### Yoga Basti

| 21/7/22 | 22/7/22 | 23/7/22 | 24/7/22 | 25/7/22 | 26/7/22 | 27/7/22 | 28/7/22 |
|---------|---------|---------|---------|---------|---------|---------|---------|
| AB      | NB & AB | AB      | NB&     | AB      | NB&     | AB      | AB      |
|         |         |         | AB      |         | AB      |         |         |

### Shamana Aushadhi

- 1. Cap. Palsineuron-1TID A/F with luke warm water for 7days
- Tab. Trayodashanga Guggulu- 2BD A/F with luke warm water for 7days
- 3. Astavarga Kashaya 3tsf BD before food with luke warm water

### Followup medication

- 1. Tab. Neuro XT 1 BD A/F with luke warm water
- Sahacharadi Kashaya 3tsf BD B/F with luke warm water
- MM Oil E/A od before bath

## Assessment of patient

**Table 1: Subjective Criteria** 

| S.no | Criteria                                       | Before Treatment | After Treatment |               |
|------|--|------------------|-----------------|---------------|
|      |  |                  | After 15 days   | After 30 days |
| 1    | Radiating pain from lumbar region to right leg | Severe pain      | Mild pain       | Pain reduced  |
| 2    | Appetite                                       | Reduced          | Improved        | Improved      |
| 3    | Sleep  | Disturbed        | Good            | Good          |



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**Table 2: Objective Criteria** 

| S.no | Criteria                                  | Before treatment                       | After treatment                              |  |
|------|---|--|--|--|
| 1    | Pain while walking and sitting            | Severe pain                            | Mild pain                                    | Pain reduced                                 |
| 2    | SLR TEST  a) Right leg  b) Left leg       | a)Positive at 35°<br>b)Negative        | a)Positive at 50°<br>b)Negative              | a)Negative<br>b)Negative                     |
| 3    | Bragard's test  a) Right leg  b) Left leg | a)Positive at 35°<br>b)Negative        | a)Positive at 50°<br>b)Negative              | a)Negative<br>b)Negative                     |
| 4    | Forward flexion                           | Limited to 20cm above ground with pain | Limited to 10cm<br>above ground with<br>pain | Limited to 10cm<br>above ground with<br>pain |
| 5    | Left lateral flexion                      | 30° with pain                          | 20° without pain                             | 20° without pain                             |
| 6    | Right lateral flexion                     | 30° with pain                          | 20° without pain                             | 20° without pain                             |
| 7    | Extension                                 | 10° with pain                          | 20° without pain                             | 20° without pain                             |
| 8    | Schober's test                            | <10cm of distance                      | >10cm of distance                            | >10cm of distance                            |

### **OBSERVATION AND RESULT**

After completion of one and half month of *Ayurvedic* therapy (*Shodhana* and *Shamana*) patient had found significant relief in the lumbar pain, with increased range of movement of spine. Assessment of the patient was carried out by specific subjective and objective criteria as mentioned in table no.1 and table no.2. As per patient words, patient is now able to walk without much difficulty, able to sit on flat surface without having much pain and able to daily routine activities without pain.

#### DISCUSSION

Chikitsa sutra for Gridhrasi as per classic is Bastikarma, Siravyadha, and Agnikarma<sup>[4]</sup>. As Gridhrasi is Vata Vyadhi, Chikitsa of Vatadosha is Snehana and Shodhana is needed to pacify Vatadosha. The treatment principle applied for the management of this disease condition is Vedanasthapana Chikitsa and Vatashamana Chikitsa.

The probable mode of action of these Shodana amd Shamana Chikitsa can be explored as follows:

### Erandamooladi niruha basti<sup>[5]</sup>

Erandamoola is best Vatahara. Erandamoola has the properties of Kaphavatahara Shamaka and act as Shulagna, Sothagna, and also acts as Vedanasthapana and Adhobhagharogahara. As basti is main Chikitsa in Gridhrasi (Vata Vyadhi), Erandamoola Niruha Basti will play major role to relive symptoms of Gridhrasi.

## Sahacharadi taila<sup>[6]</sup>

Sahacharadi taila contain main ingredients like Sahachara which is Vatakapha Shamaka and Dashamoola which is Tridoshahara it is potent oil to combat Vatavyadhi, Kampa and Shosha.

### Astavarga kashaya<sup>[7]</sup>

Astavarga kashaya acts as Vatakaphahara, also called Vatahara Kashayam is an Ayurvedic proprietary medication used for Vata issues like rheumatic diseases. Sanctified with potent anti-inflammatory and analgesic actions, it reduces joint pain, inflammation, swelling, and stiffness. It is also vital for the treatment of rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, and paralytic disorders.

## Cap Neuro XT<sup>[8]</sup>

It contains *Ekangaveera Rasa*, *Mahavata Vidwasaras*, *Vatagajankush Rasa*, *Vata Kulantaka Rasa*, all these helps for *Vata Shamana* and *Shulahara*. It is anti inflammatory, analgesic, muscle relaxant and regenerative property. *Travodashang Guggulu*<sup>[9]</sup>

*Trayodashang Guggulu* is *Guggulu* based herbal formulation. It provides strength to the nerves, bones, joints, muscles and ligaments. It is effective in all types of diseases related to nervous system and musculoskeletal system. It is also beneficial in gout, pain disorders, paralysis, hemiplegia, sciatica pain and all types of joint pain.



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#### Palsineuron<sup>[10]</sup>

Improves metabolic processes in CNS & PNS, activates neuro- muscular communication. Regulates blood supply in affected areas, overcomes anoxia, stimulates cerebro-neural activity. Promotes healing of damaged nerves & blood vessels, Recanalises blood vessels. Provides nutrition support to nerves & blood vessels.

### **CONCLUSION**

Sciatica is a major cause of morbidity that makes a person to be disabled from daily activities. These case showed that *Shodhana* and *Shamana Chikitsa* were very effective in the management of *Gridhrasi*. It has proved significant improvements in subjective and objective parameters indicating that the patient has improved in presenting the features and significant improvement found in quality of life. The patient is doing well with his daily activities. By proper assessment and treatment we can conclude that *Gridhrasi* can be successfully managed and gives satisfactory result without any side effects.

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