

A SUCCESSFUL CLINICAL CASE STUDY ON MANAGEMENT OF GRIDHRASI THROUGH AYURVEDA W.S.R TO SCIATICA

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ABSTRACT

Background: Gridhrasi is one of the most common disorder of vata, which can be co related with sciatica. which is characterized by pain or discomfort associated with sciatic nerve. The prevalence of sciatica varies considerably ranging from 3.8% in working Population to 7.9% in the non working population. Modern medicine has limitation relief in pain. Next option is surgery with lot of side effect. **Aims and Objective:** The aim of this study was to access the efficacy of ayurvedic management including shodhan and shaman chikitsa in gridhrasi. **Material & Method:** It is a single Case study. A 35 yr male who was already diagnosed with intervertebral disc prolapsed at L4-L5 correlated with gridhrasi of left leg since 6 yrs approached to ayurvedic hospital and was treated with panchakarma treatment including Eranda moola niruha basti, Abhyanga, tila pinda Sweda, snigdha agni Karma along with Shamana chikitsa. **Results:** Symptomatic assessment of Patient was carried out after one month and satisfactory outcome was there and overall quality of life of patient was significantly improved. **Conclusion:** Above mentioned therapy gives Symptomatic relief for the management of Gridhrasi.

KEYWORDS: Gridhrasi, Eranda moola Yoga basti, shaman Chikitsa and Sciatica.

INTRODUCTION

Day today we are adopting sedentary lifestyle and nature of work are putting added tension on the unusual health. The aggravating factors such as over exertion, sedentary occupation, Jerkey movements during travelling, lifting and mental stress which leads to low backache, One of the main cause for low backache is intervertebral disc prolapse. In 95% of the lumbar disc herniation at L4-L5 and L5-S1, The pain may be located in the low back only or referred to a leg, buttock, hip sciatica is which Causes difficulty during walking. It hampers the daily routine and deteriorates quality life of patient. The prevalence of sciatica varies considerably ranging from 3.8% in working Population to 7.9% in non working Population.^[1] It is most commonly found in 40s and 50s, men are more commonly affected than women.^[2] The sign and symptoms of 'sciatica' correlate with the condition of gridhrasi mentioned in Ayurveda. Gridhrasi explained under nanatmaja vata vyadhi.^[3] "Gridhrasi" the name itself indicates the way of gait shown by the patient due to extreme Pain that is Gridha or vulture, Gridhrasi is divided into 2 types based on dosha involvement 1.kevala vataja gridhrasi and 2.vata – kaphaja gridhrasi.

The Cardinal sign and symptoms of 1. vataja Gridhrasi are,

- a. Ruk (Pain)
- b. Toda (twitching type)
- c. Muhurspandana (Tingling sensation)
- d. Stambha (stiffness) in Sphik, Kati, uru, Janu, Jangha and Pada in orderly.^[4] and "Sakthi utkshepa nigrahat" (restriction in upward lifting of lower limbs)^[5]

In 2. vata -kaphaja Gridhrasi

- a. Tandra (Drowsiness),
- b. Gaurava (Heaviness) and
- c. Aruchi (Anorexia)

May be present if Kapha is associated with vata.^[6] In this case study a 35 yrs old male patient with IVDP in lumbar region was prescribed for different stanika and sarvadaihika shodana chikitsa and shaman chikitsa resulted in excellent symptomatic relief.

Table No 1:

▶ Age: 35yrs
▶ Gender: Male
▶ Occupation: Bakery worker
▶ Marital status: married
▶ Socio-economic status: Middle class
▶ Address: Ilkal
▶ OPD NO: 2209058
▶ IPD NO: 21215

Chief complaint

1. Pain in the low back region Radiates left leg from hip upto ankle,foot since 6 yrs.
2. Then he gradually developed stiffness numbness and heaviness in posterior aspect of left thigh, knee, calf region, ankle and foot.
3. Difficulty while walking and bending forward, pain aggravating since 2 month he was unable to do his occupational and personal work also.

Associated complaint

1. Disturbed sleep.
2. Unable to walk properly
3. Bowel: Constipated
4. Appetite: poor
5. Twitching type of pain in left calf and thigh region.

HISTORY OF PRESENT ILLNESS

Basic information about the patient is mentioned in table 1. A 35-years-old Patient was apparently normal before 6 yrs, then he gradually developed pain in low back region, which started gradually radiating to posterior aspect of left thigh, knee, calf region and foot, difficulty while walking and bending forward He was unable to do his occupational work also. He consulted local doctor, prescribed medication and advised rest. By that he got temporary relief, But pain re occurred 2 months back which was persistent in nature and aggravates after strenuous work. He came to a stage were he was unable to do his work also. Simultaneously, along with above complaints, he had associated symptoms of loss of appetite, constipation. so visited our R.P.Karadi ayurvedic hospital ilkal for further management and admitted in our hospital IPD.

PAST HISTORY: No H/O DM and HTN.

No Surgical history, No history of trauma or fall

Personal History

Aahara: Vegetarian, craving for pungent food items

Vihara: Bakery Work, long Standing work, Two wheeler riding since many years

Appetite: Poor

Bowel: Constipated on & off

Micturition: Normal 5-6 times/day

Sleep: Disturbed due to pain

Habits: Coffee 2 times/day

Family History: No family members having such complaint.

Nidana Panchak

1) Hetu (Etiology or causative factors)

A. Ahara nidana: 1) Tikta rasa (Bitter guard, curry leaves, brinjal,) and Katu Rasatmak ahara sevana (mirchi bajji)

2) Ruksha ahara, - Bakery items, packed foods, junk foods - chips, packed juices, dry roti

B. Vihara nidana: Vata prakopa due to long standing, travelling, Jerky movements while riding the bike.

2) Purvarupa: Avyakta

3) Rupa: Pain in lower back region radiating to left leg, and discomfort like Stiffness, tingling sensation, heaviness in left legs, difficulty while walking and bending forward.

स्फिकपूर्वा कटिपृष्ठोरुजानुजङ्घापदं क्रमात्।

गृध्रसी स्तम्भरुक्तोदैर्गृह्णाति स्पन्दते मुहुः।

वाताद्वातकफात्तन्द्रागौरवारोचकान्विता। (cha .chi 28/56)^[7]

- ▶ Pain radiates from Sphik pradesha,
- ▶ Kati,
- ▶ Prustha,
- ▶ Uru,
- ▶ Jaanu,
- ▶ Janghaa,
- ▶ Pada
- ▶ Stambana,
- ▶ Twitching type of pain,

- Pain aggravates while walking and turning from one side to other on lying down.

4) Samprapti: Due to Vataprakopa ahara (Vata vitiating food items) and abhighata at Kati pradesha (age-related degeneration) due to jerky movements while travelling and vitiation of Apanavayu due to constipation, which leads to vitiation of Vataj and Kaphaja doshas along with vitiation of Rakta (blood), Sira (veins), and kandara (ligaments). This ultimately causes obstruction to the neural conduction (Vatavahini Nadi) and elicited as radiating pain from Kati (lumbar region), Prushta (back), Uru (thigh), Janu (knee), Jangha (calf), and Pada (foot), and leads to Gridhrasi (sciatica). In this disease, the main Dushya are Rakta, Kandara.^[8]

Samprapti Ghatak

- 1 Dosh: Vata and Kapha
- 2 Dushya: Rasa, Rakta, Sira and Kandara,
- 3 Srotas: Rasavaha, and rakta vaha srotas
- 4 Srotodushti: sanga, vimargamana
- 5 Rogamarga: Madhyama
- 6 Agni: Mandagni
- 7 Koshta: Madhyama
- 8 Udbhavasthana: Pakvashaya
- 9 Adhishtana: Kati and Prushthavamsha
- 10 Vyadhi swabhava: Chirakari
- 11 Vyaktasthana: Sphik, Kati, Prushtha, Uru, Janu, Jangha, and Pada.
- 12 Vyadhi vinischaya: Vata– Kaphaja Gridhrasi

SAMPRAPTI CHAKRA

Vata dosha vitiated due to Nidana sevana, excessive walking irregular posture, prolonged

standing work

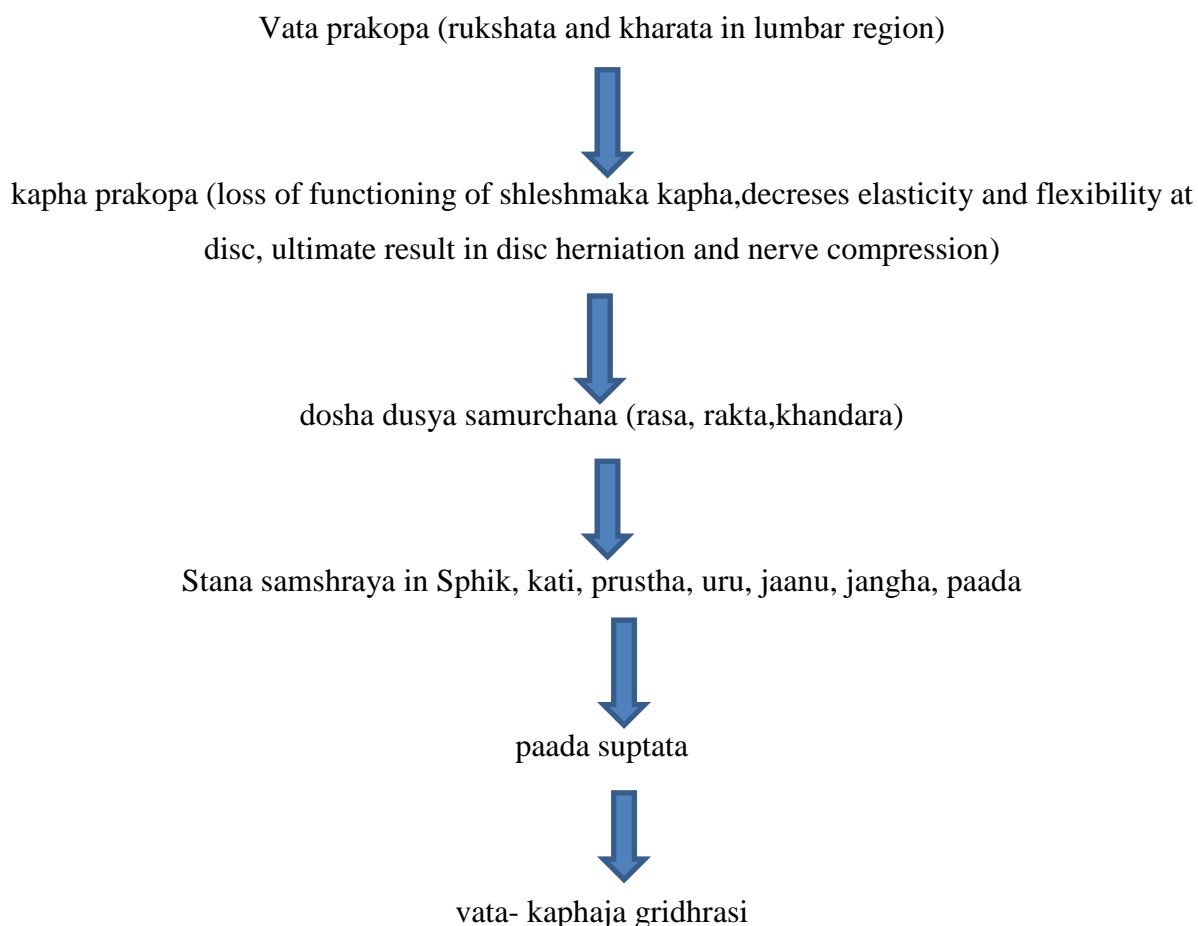


Vitiates vata- kapha dosha causes of Agnidusti.



Ama sanchaya





5) UPASHAYA: Resting in supine position and after taking analgesic medicine

ANUPASHAYA: Walking, Bending, Working, lifting

ON EXAMINATION

A) STRETCH TEST: SCIATIC NERVE

- ▶ A) SLR: Rt: 70° Lt:30
- ▶ B)Bragard test: Rt: -ve Lt +ve
- ▶ C)Lasegues test Rt: -ve Lt +ve
- ▶ D)Bowstring test: Rt: -ve Lt +ve
- ▶ E)Coin test : Rt: -ve Lt +ve
- ▶ F)Tenderness: Rt: -ve Lt +ve

- ▶ Gait: Antalgic gait
- ▶ Upper limb: Normal
- ▶ Lower limb: Stiffness in the calf and thigh region.

B) EXAMINATION OF SPINE

- ▶ **Inspection:** No visible deformity
- ▶ **On Palpation:** Tenderness at -L4,L5
- ▶ Muscle tone : Good
- ▶ Muscle power: Both upper and lower limb is good.

C) SYSTEMIC EXAMINATION

- ▶ CVS:S1,S2 heard, no murmur
- ▶ P/A: Soft and non tender.
- ▶ CNS: conscious and well oriented with time and place
- ▶ R.S: B/L Symmetrical, normal vesicular sounds heard and no added sounds.

D) General examination

- ▶ B.P:130/80mmhg
- ▶ PULSE:70/min
- ▶ R.R: 16/min
- ▶ HEIGHT:155cm
- ▶ WEIGHT:65kg

VYADHI VYAVACHEDANA

VATAJA GRIDHRASI	VATA-KAPHAJA GRIGHRASI	KHALLI
Ruk	Tandra	Pada,jangha, Uru & Uru moola peeda
Toda	Gaurava	Mardanvat peeda
Stambha	Arochaka	
Spandana	Agnimandya	
Sakthikshepana nigrhanti	Mukhapraseka	
	Bhaktadwesa	
	Stimitya	

CHIKITSA SUTRA

अन्तराकण्डरागुल्फं सिरा बस्त्यग्निकर्म च ॥ (cha chi 28/101)^[9]

Advised treatment

Before panchakarma procedure these medicine advised:

For Deepana ,Pachana

1. Tab: Agnitundi vati 2BD with warm water b/f for 8 days
2. Sadyo virechana with Gandarva hastadi taila 100ml empty stomach 9th day 8 vega of virechana occurred.

YOGA BASTI**Main treatment:(8-15th day)**

- ▶ M.M oil+ lin.myostal forte for abhyanga.
- ▶ Tila Pinda sweda
- ▶ Bhaspa sweda
- ▶ Sahacharadi taila for anuvasana basti 100ml
- ▶ Eranda moola kwath for niruha basti
- ▶ Dashamoola kashaya for internally 20ml bd bf
- ▶ Snigdha agnikarma with Erandapatra +Nirgundi patra 4th,5th,6th,7th & 8th day

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8
Anuvasan basti 200 ml with sahacharadi taila.	Niruha basti 700ml	Anuvasan basti 200 ml with sahachara di taila.	Niruha basti 700ml	Anuvasan basti 200 ml with sahachara di taila.	Niruha basti 700ml	Anuvasan basti 200 ml with sahachara di taila.	Anuvasan basti 200 ml with sahachara di taila.
EVENING:	Anuvasan basti 100 ml with sahachara di taila.		Anuvasan basti 100 ml with sahachara di taila.		Anuvasan basti 100 ml with sahachara di taila.		

<u>Basti</u> <u>pratyagamana</u> <u>kaala</u>	<u>9</u> <u>am</u> <u>=</u>	<u>7min</u>	<u>9:30am-</u> <u>Retention</u> <u>at :8pm</u>	<u>5min</u>	<u>10am-</u> <u>6pm</u>	<u>5min</u>	<u>9am-</u> <u>5:30pm</u>	<u>9:15</u> <u>am-</u> <u>6pm</u>
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Eranda Moola Niruha Basti**Ingredients**

1. Makshika-100ml
2. Saindava Lavan -10gm
3. Sahacharadi Sneha -200ml

4. Shatapuspa Kalka -10gm
5. Eranda moola Kashaya-400ml
6. Total quantity: 700 ml

Shaman Aushadhi: (16th -30 days)

- 1.M.M oil+ lin.mayostal forte for abhyanga.
- 2.Dashamoola kashaya for internally 20ml BD B/F with warm water
- 3.Tab: Trayodashanga guggulu 2 BD A/F with warm water
- 4.Tab: Myostal forte 1 TID A/F with warm water

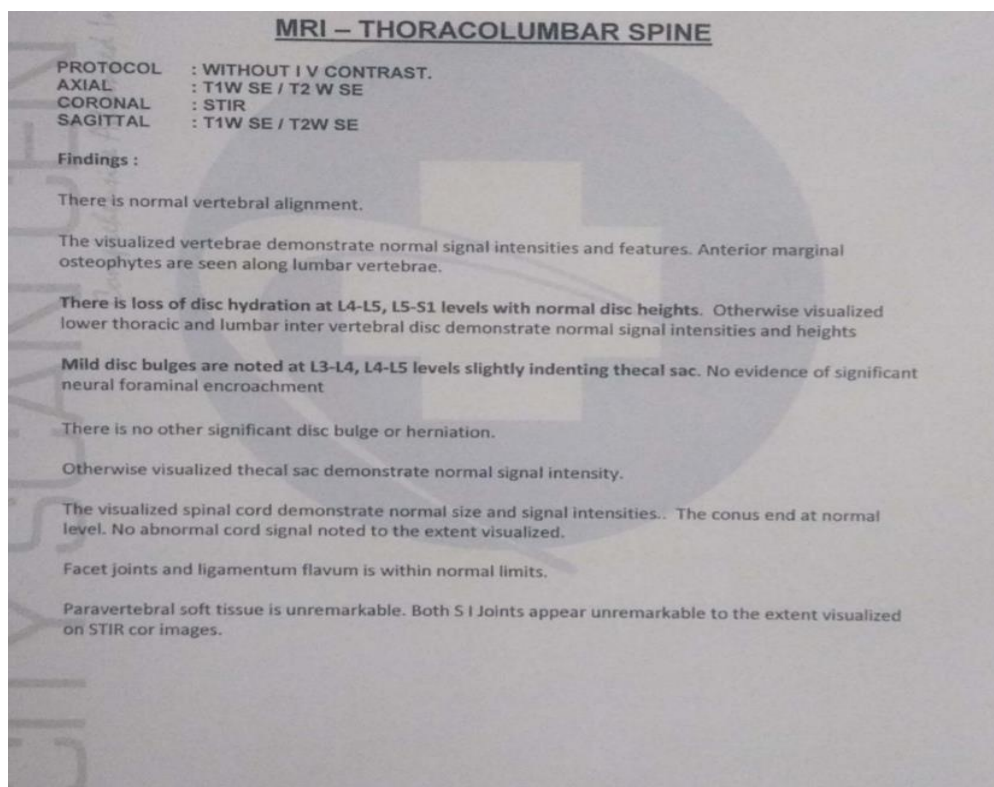
Follow up medicine

- 1.Tab: Agnitundi vati 2BD with warm water b/f..for 15 days
- 2.Cap: Palsinuron 1TID with warm water A/F
- 3.Sahacharadi kashay 20ml BD (BF) with warm water
- 4.M.M oil for abhyanga.

INVESTIGATIONS: Magnetic resonance imaging (MRI) Lumbosacral spine with screening of whole spine reveals, osteoporotic spine with diffuse circumferential disc bulge at L4-L5 disc level and early spondylo-degenerative changes in L4-L5 spine shown in Fig

- ▶ Fig: MRI-Lumbar spine.
- ▶ IMPRESSION: At L3-L4,L4-L5 Disc bulge.

IMPRESSION:	
Mild disc bulges at L3-L4, L4-L5 levels slightly indenting thecal sac. No evidence of significant neural foraminal encroachment	
Otherwise unremarkable study.	
Level	Central AP diameter (cm)
L1-L2	1.5
L2-L3	1.5
L3-L4	1.4
L4-L5	1.4
L5-S1	1.3



PATHYA: to be followed

AHARAJ

- ▶ Madhur (Dugdha, goghрут, peanut, coconut, kharjur, mrudvika)
- ▶ Amla (Dadima, Draksha)
- ▶ Lavana rasa ahaar,
- ▶ Godhuma,
- ▶ Masha,
- ▶ Meat soup

APATHYA: to be avoid

Aharaj

- ▶ Katu (Mirchi)
- ▶ Tikta (bitter guard, curry leaves, brinjaal)
- ▶ Kashaya rasa(horse gram, green tea, nut meg ahaara atisevan,
- ▶ Curd,
- ▶ Sheeta jala,

Vihaaraja: to be avoid

- ▶ Ati Vyayama, chankramana

- ▶ Chinta,
- ▶ Vegadharana,
- ▶ Shrama

Assessment of patient

Table 01: subjective criteria.

S no:	Criteria	Before treatment	After treatment After 15 days after 30 days	
01	Radiating pain from lumbar region to left leg	C/O severe PAIN	Mild Pain,	Pain reduced
02	Appetite	POOR	Improved	Improved
03	Sleep	Disturbed	Good	Good
04	Stiffness	Present	Reduced	Reduced
05	Numbness	Present	Reduced	Reduced
06	Bowel	Constipated	Relieved	Relieved

Table 2: Objective criteria.

s.no	Criteria	Before treatment	After treatment After 15 days after 30 days	
01	Pain while walking and sitting	Severe pain	Mild pain	Pain reduced
02	SLR TEST A) RIGHT LEG B) LEFT LEG	A)Negative B)Positive at 30°	A)Negative B)Positive at 70°	A)Negative B))Negative
03	Bragard`s test A) RIGHT LEG B) LEFT LEG	A)Negative B)Positive at 30°	A)Negative B)Positive at 70°	A)Negative B))Negative
04	Forward flexion	Limited to 20cm above ground with pain	Limited to 10cm above ground with pain	Limited to 10cm above ground with pain
05	Left lateral flexion	30° with pain	20° without pain	20° without pain
06	Right lateral flexion	30° with pain	20° without pain	20° without pain
07	Extension	10° with pain	25° without pain	25° without pain
08	Schober`s test	< 10 cm distance	>10 cm distance	>10 cm distance

Observations and result

No any complication observed during and After completing 8 days of *Shodhana* (basti) procedure and one month *Ayurvedic* treatment, *shaman aoushadi* advised to patient got 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 02, as per patient language ,patient is now able to walk without much difficulty able to sit on flat surface without having much pain and able to daily personal and professional routine activity without any pain.

DISCUSSION

Chikitsa sutra for Gridhrasi as per classics is Basti karma, siravyadha and agnikarma ⁽¹⁰⁾ As gridhrasi is a vata vyadhi, chikitsa of vata dosha is snehana and shodhana is necessary to pacify vatadosha. The treatment of principle applied for the management of disease condition is vatashamana chikitsa and vedana stapana chikitsa.

The mode of action of these Shodhana and Shaman chikitsa can be explored as follows:

1. Eranda mooladi Niruha basti:^[11]

Eranda moola is best vata hara. Erandamoola has the properties of kaphavata hara shamaka and acts as shooglagna ,shothgna and also acts as vedanastapana ,as basti is main chikitsa in gridhrasi, it plays an important role in relieving pain.

2. Cap: Palsinuron:^[12]

Which contains Mahavata vidhwans rasa, sameerapannaga rasa, Ekanga veera rasa, sootashakar rasa ,khurasani beeja churna, lajjalu. Improves metabolic process in CNS and PNS, activates neuro- muscular communication. Regulates blood supply in affected areas, over come anorexia, stimulates cerebro neural activity ,promotes healing of damaged nerves and blood vessels recanalization, provides nutrition support to nerves and blood vessels.

3. Sahacharadi kashaya^[13]

Advised in the condition vata-kapha prakopa , helps relieve stiffness of joint, hip and back which contains sahachara, kulattha, puskara, daruharidra, nisa, amlavetasa, hingu, lavana.

4. Sahacharadi taila^[14]

Main ingredients like sahachara, dashamoola which is vata kapha shamaka and dashamoola which is tridosha hara, It is potent oil to combat vata vyadhi ,kapha and shosha.

5. Agnitundi vati^[15]

Main ingredients like Haritaki, kupilu ,vibhitaki, amalaki, ajmoda, jeeraka,nimbu swarasa jambeera swarasa advised in the condition Gridhrasi with saama vata it does agni pradeepana and vedana shamaka.helps in balancing vata-kapha.

6.Trayodashanga Guggulu^[16]

Main ingredients like ashwagandha, abha,hapusha,guduchi, gokshura, shatahva, rasna, shati, nagara, shodita guggulu ,sarpi it is very useful to promote strength of bones and joints, which is very effective in low back pain ,sciatica,knee joint pain.

7.Dashamoola kashaya^[17]

Its best vata- kaphahara aushadha. Which contains Bilva,shonyaka,gambhari,shalaparni, prushnaparni, agnimanth, bruhati,kantakari,patala,gokshura.

8.Myostal forte

Helps to relief in muscular pain, shallaki, guduchi, shunti,haridra, ashwaganda.

9.M.M oil

Main ingredients :Methi, Manjista, Lashuna. Ushna, vedana shamaka and kaphagna.

10.Tila

which is vata kapha shamaka,ushna-veerya, sukshma ,vyavayi, vikasi,teekshanguna, madhuara rasa. Best vata hara, increses snehana in shareera.

CONCLUSION

Sciatica is a major disease which causes morbidity of person that makes difficulty to do daily personal and professional Activities, this case shows that by treating shaman and shodhana chikitsa were very effective in management of gridhrasi. It gives significant results in subjective and objective parameters indicates quality of life of patient improved, presently patient doing well for his daily activities.by proper analysis of treatment we can conclude that gridhrasi can be successfully managed and gives satisfactory result without any complications.

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