

INTERNATIONAL AYURVEDIC MEDICAL JOURNAL



Impact Factor: 6.719

Case Report

ISSN: 2320-5091

AYURVEDIC MANAGEMENT OF *GRIDHRASI* (SCIATICA) - A CASE REPORT ABSTRACTS

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https://doi.org/10.46607/iamj2811092023

(Published Online: September 2023)

Open Access © International Ayurvedic Medical Journal, India 2023 Article Received: 08/08/2023 - Peer Reviewed: 25/08/2023 - Accepted for Publication: 10/09/2023.

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ABSTRACT

BACKGROUND: Low back pain is one of the most common complaints in India that affects 70% to 80% of the population. Low back pain can present as acute and chronic pain. Sciatica is a condition in which runs down one or both legs from the lower back. In *G*radhrasi pain starts from *Sphilik* (Hip) and runs down to *Kati P*rusta (back), *Uru* (Thigh), *Janu* (Knee), *Jangha* (Calf muscles) and *Pada* (Foot) along with pain it may be associate with stiffness heaviness based on *Dosha* Involvement .The clinical features of *Gradhrasi* is Low back pain which radiate from the hip to the posterior aspect of thigh and down to leg. It can be correlated to "sciatica" in modern medicine. AIM AND OBJECTIVE: The study aimed to assess the efficacy of *Panchkarma* and *Shaman Chikitsa* in *Gridhrashi* (sciatica). MATERIAL AND METHODS: It is a single case study. A 47Year old female patient has been suffering from *Gradhrasi* for 2year correlate with Sciatica. The patient complained pain in lower back region with radiate to bilateral lower limbs since 2year (LEFT>RIGHT) along with Stiffness, Numbness and Tingling sensation present and associate complain with tingling sensation in left hand. She was admitted to the private ward in PT KLS GOVERNMENT AYURVEDA HOSPITAL AND INSTITUTE BHOPAL (M.P.). The patient was treated with *Panchkarma* procedures such as *Kati Basti, Sarwang Patra Pinda Swedan* and *Anuvasan basti* for 16 days and Oral Medication. Patients were treated for a period of 16 days. RESULTS: The response to

the treatment was recorded and therapeutic effect was evaluated though symptomatic relief. CONCLUSION: This case shows that *Ayurveda* treatment may be helpful in the management of the *Gradhrasi*.

Keywords: Gradhrasi, Low Back Pain, Sciatica, Katibasti, Matrabasti

INTRODUCTION

In Ayurveda, Gridhrasi is described as one of the Vatavyadhi. It is characterized with the onset of Ruja (pain), Toda (pricking), and Stambha (stiffness), initially in Sphika (gluteal region) and then radiating distally to Kati-Prishtha (low back), Janu (knee), Jangha (thigh) till Pada (feet). Gridhrasi (Sciatica) is one of the vata vyadhi mentioned by various Acharya in Avurveda. Sciatica resemble the diseases Gridhrasi which mention in avurvedic classical textbook which include under vataj nanatmaja vikar. Sciatica is characterized by severe pain radiating from lower back to the leg caused by compression, irritation, or inflammation of the sciatic nerve. The prevalence of sciatica varies considerably ranging from 3.8% in the working population to 7.9% in the nonworking population. It is most prevalent in people during their 40s and 50s and men are more common affected than men. The aggravating factors, such as over exertion, sedentary occupation, jerky movements during travelling, and lifting, create mental stress, which leads to low backache. The main cause behind the irritation of sciatic nerve is a degenerative pathology of intervertebral disc such as bulging, desiccation, prolapse of the intervertebral disc, reduction in the intervertebral space and sacralization of vertebra and spinal canal stenosis. It can be managed with anti-inflammatory, analgesics and physiotherapy or surgical correction. Furthermore, surgery for this illness is costly, and there is a risk of recurrence.

A CASE STUDY

History of present illness-

A 47year old female patient comes in a OPD with complaints Pain in lower back region with radiate to bilateral lower limbs since 2year (LEFT>RIGHT), which increase during activities (walking and sitting) along with Stiffness, Numbness and Tingling sensation present and associate complain with tingling sensation in left hand. During examination tenderness was present at the lumbosacral region. SLR test was found positive during examination. The patient had a history of allopathic treatment for the last 2 years but did not get any relief so approached use for *ayurvedic* treatment.

History of past illness- Hypothyroidism – taken allopathic medication

Chief complaints of patients.

1. Pain in lower back region radiating. towards bilateral lower	er limb 2 years	
2. stiffness in bilateral lower limb and lumber region	2 years	
3.Difficulty and Pain while walking and sitting	6 months	
4. Numbness present in left leg	6 months	
5. Tingling sensation present in left leg	6 months	
	Nadi - Pitta Kapha	
Clinical Examination-	Mala - Samyak	
On Examination	Mutra – Samyak	
Height- 162 cm., Pigmentation-Absent	Jivha - Saam	
Weight- 68kg, Pulse- 72/mint.	Sparsha - Anushnasheeta	
Pallor -Mild, Blood Pressure-110/70mmhg	Akruti -Madhyam	
Icterus-Absent, Oedema- Absent	Drika -Samyak	
Ayurvedic Examination- Shabda – Spashta		

Locomotory Examination

Gait- Antalgic

Arm-Normal

Leg- B/L limb- Tenderness ++ present, Numbness ++ in left leg, Tingling Sensation ++ in left leg, SLR Test- Right leg- 50° , Left leg - 40° , Bragard's Test-Right leg- 50° , Left leg - 35° , Spine- Normal Alignment

MRI Report • Disc L4-5 shows mild volume loss with diffuse circumferential bulge and posterior asymmetrical protrusion, causing moderate thecal sac and nerve root compression with spinal canal and neural foramina narrowing.

• Disc L5-S1 shows a mild diffuse bulge with slight right Para central protrusion causing impingement over the right transverse S1 nerve root.

ASSESSMENT CRITERIA -

*Assessment of sign and symptoms before treatment -

Symptoms	Right leg	Left leg
1.Pain in lower back region radiating towards bilateral lower limb	Present	Present
2. Stiffness in lumber region	Present	Present
3. tingling sensation in bilateral lower limb	Absent	Present
4. Pain and Difficulty while walking and sitting	Present	Present
5. Numbness	Absent	Present

* Assessment of sign and symptoms after treatment -

Symptoms	Right leg	Left leg
1.Pain in lower back region radiating towards bilateral	Relief	Moderate Relief
lower limb		
2. Stiffness in lumber region	Relief	Relief
3. tingling sensation in bilateral lower limb	Relief	Relief
4. Pain and Difficulty while walking and sitting	Relief	Relief
5. Numbness	Absent	Moderate Relief

Shodhan Chikitsa-

S.N .	Type of chikitsa	Drugs	Duration	
1.	Kati basti	Mahanarayan Tail	16 days	
2.	Sarwang Patrapinda swedan	Mahanarayan Tail	16days	
3.	Anuvasan Basti	Sahachar Tail(80ml)	16 days	

Shaman Chikitsa-

S.N	Drugs	Time of administration	Anupana	Duration
1.	Ras Rajeshwar Ras (1BD)	After food	Lukewarm water	16 days
2.	Cap. Lumbagest (2BD)	After food	Lukewarm water	16 days
3.	Rhumat 90 liquid (10ML)	Before meal	Lukewarm water	16 days

DISCUSSION

Chikitsa sutra for gridhrasi as per classic is Bastikarma, Siravyadha and Agnikarma. As gridhrasi is vata vyadhi, Chikitsa of vatadosha is Snehana and Shodhan is needed to pacify Vatadosha. The treatment principle applied for the management of this disease condition is *Vedanasthapan* and *Vatashamak Chikitsa*. The probable mode of action of these *Sho-dhan* and *Shaman Chikitsa* can be explored as follows.

Sarwang Patrapinda Sweda with Nirgundi, Arka, Eranda, Mahanarayan oil: Patrapinda Sweda consisting of medicated leaves with oil pacifies Vata without increasing kapha due to its Snigdha and Ruksha Gunas. It induces the Swedan effect without increasing the Aam (toxic waste product) condition .It provide soothing effect to the affected region, that is, nerve and muscle relaxation may result in reduction of compression of nerve root that also reduce radiating pain and numbness. Patrapinda Sweda is mainly used to provide relief from pain, inflammation, swelling, and stiffness associated with bone, joint, or musculoskeletal pain. In Gridhrasi, Snehana, and Swedana by virtue of their Vata shamak and Dhatuposhaka properties are useful in relieving the symptoms of Gridhrasi such as Stambha and Ruja.

Katibasti with *mahanarayan* tail group is more effective to control *vata* dominance symptoms like *Ruk*, *Toda*, numbness, burning sensation and *Muhuspandana* and also on the functional ability and the functional disability. *Kati basti* is a type of *Snigdha* Swedana. Application of *Kati Basti* (L4-L5region) was carried out to provide good nourishment and strengthen the affected part due to protrusion and alleviated *vata vyadhi*. In this, there is degeneration of *shleshaka kapha* is affected, which result in compression and irritation.

Basti- Basti is called Ardhachikitsa. It is the most important procedure among Panchkarma procedures and the most appropriate remedial measure for Vata dosha. Basti acts on the Vata Sthan i.e., Pakwashaya. Anuvasana basti with Sahachar tail basti is Ayurvedic herbal oil that treats vata imbalance disorders and muscles and joint stiffness.it is heavy and unctuous Guna helps to balance vata dosha.

Internal Medicine-Patient was advised Cap. Lumbagast (2BD), Rheumat 90 liquid (10ml) and *Rasra*- *jeshwar Rasa* (1BD) twice a day with warm water for the period of 16 days.

Rasrajeswar Rasa- Excellent combination of *Swarn Yukta Rasaraj rasa, Shudh vishamusthi, Awagandha, Rasa sindoor, Dasmoola visesh sodhit guggulu* acts as the best medicine for all kind of nervous system disorder, relives nervine irritation, inflammation and pain.

CONCLUSION

On the basis of this case study, it can be concluded that *Kati basti* and *Sarwang patra pinda Swedan* with *Mahanarayan* tail, *Anuvashan basti* with *Sahachar* tail (*Sodhan* therapy), *Saman* therapy and Physiotherapy are effective in the management of gridhrasi. *Gridhrasi* is a one of the *Nanatmaja vata vikara* hence *basti* is the basic treatment all *vata vyadhi* and is thought to be *Ardhachikitsa* in *Ayurveda*.

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Source of Support: Nil Conflict of Interest: None Declared

How to cite this URL: : Ayurvedic management of gridhrasi (sciatica) - a case reportAbstracts. International Ayurvedic Medical Journal {online} 2023 {cited September 2023} Available from:

http://www.iamj.in/posts/images/upload/2349_2352.pdf