

ROLE OF PATRA PINDA SWEDA AND YAMAKAYUKTA KATI BASTI IN VATAJA GRIDRASI - A CASE STUDY¹Anjani S Pai, ²Ananta S Desai¹Final year PG scholar, Dept of PG and PhD studies in Panchakarma, GAMC Bengaluru²Professor and Head, Dept of PG and PhD studies in Panchakarma, GAMC BengaluruCorresponding Author: anjani.s.pai@gmail.com<https://doi.org/10.46607/iamj13p9012024>

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**ABSTRACT****Introduction:**

In today's fast-paced world, unhealthy lifestyle choices have led to a rise in diseases. Metabolic disorders such as Diabetes, Hypothyroidism, Dyslipidaemia, and Obesity are increasingly common, while issues affecting movement and motor function, often linked to poor posture and physical activity, are also on the rise. In *Ayurveda*, these movement-related diseases fall under the category of *Vata vyadhi*, which includes conditions like *Gridhrasi*.

Gridrasi is characterised by a shooting pain starting in the *Sphik poorva kati*, radiating through *Prushta*, *Uru*, *Jaanu*, *Jangha*, and *Paada*. When associated with *Kapha Dosha*, it is related to other symptoms such as *Tandra*, *Aruchi*, and *Gourava*. This condition can be found homologous with 'Sciatica' of contemporary science, which involves compressive pathology leading to pressure over the root of the sciatic nerve, characterised by a varied range of symptoms such as pain radiating down the affected leg starting in the lower back, weakness or numbness of the affected limb. The annual incidence of Sciatica is around 5%.

Materials and Methods:

In the case of *Vataja Gridrasi*, a female patient aged 36 years, who was a tailor by occupation, presented with pain in the lower back, which radiated to both lower limbs, associated with a tingling sensation for 6-7 years. Here, an approach towards management of the condition was made through *bahirparimarjana chikitsa* such as *Abhayanga*,

Patra pinda sweda, *Kati basti* with *yamaka prayoga*, after which the patient had significant improvement in the symptoms and was able to carry out daily activities without pain.

Conclusion:

Gridrasi is a *Daruna vata vyadhi*. Pain management becomes the first priority in such cases because it is a painful condition hampering the patient's day-to-day activities. *Bahya upakrama* through *Snehana* and *Swedana* can effectively resolve pain, which can be followed by *Bastyadi Shodhana karma*. With a similar view of initial pain management, *Patra pinda Sweda* and *Kati basti* with *Yamaka prayoga* were employed in this case of *Vataja Gridrasi* and noteworthy improvements were observed.

Keywords: *Vataja Gridrasi, Patra pinda Sweda, Kati basti, Yamaka prayoga*

INTRODUCTION

Gridrasi is one of the most common *Vata Vyadhi* in present-day scenarios. *Acharya Charaka* discusses *Gridrasi* in two contexts: as part of *Vata vyadhi chikitsa* and as one of the *asheeti Vataja Nanatmaja Vikara*. In the first context, he details *Gridrasi* and its types—*Vataja* and *Vata-kaphaja*—describing the progression of pain from the lower back to the legs and various symptoms such as *stambha*, *ruk* and *muhurmuhu spandana*.¹ A similar explanation can be found in *Sushruta Samhita* and *Sakthi utkshepa nigraha*, which can be correlated to positive SLR.² In the *Vata-kaphaja* type, additional symptoms like *tandra*, *gourava* and *arochaka* are included.³ In the second context, *Gridrasi* is viewed as a singular symptom, specifically *shoola*. The former can be considered as a syndrome, and the latter as a symptom. *Gridrasi in contemporary science can be found homologous with Sciatica where pain, weakness, numbness, or tingling in the leg are the main symptoms* due to injury or pressure over the sciatic nerve.

‘Sciatica’ involves compressive pathology leading to pressure over the root of the sciatic nerve. It is characterised by a varied range of symptoms, such as pain radiating down the affected leg starting in the lower back, weakness, or numbness of the affected limb. The annual incidence of Sciatica is around 5%. *Snehana*, *Swedana*, *Sira vyadha*, *Basti* and *Agni karma* are the main lines of treatment mentioned for *Gridrasi*.⁴ As the present case under study is *Vataja Gridrasi*, an attempt has been made to understand the role of different modalities of *Snehana* and *Swedana*

through this study. Initially, the patient was subjected to *Patra pinda sweda*, a *Saagni sweda* of *Sankara type*. It is *Snigdha-Ruksha* in nature, so it helps balance the *Vata Dosha* without affecting the *Kapha dosha*. This was followed by a course of *Kati Basti*, which acts as both *Snehana* and *Swedana*. Moreover, *Yamaka Sneha*, in the form of a mixture of *Guggulu tiktaka ghrita* and *Sahacharadi taila*, was used for *Kati basti*.

The following study focuses on exploring the action of the above-mentioned two treatment modalities in *Vataja Gridarsi*.

MATERIALS AND METHODS:

This is a single case study. Informed consent was obtained from the patient in their language.

• History Of Present Illness

A 36-year-old female patient was healthy 6 years ago. She gradually developed pain in her lower back region, which was on and off initially and gradually turned into persistent pain. In the past 6 months, the pain started radiating to both lower limbs. The patient also experienced stiffness in the lower limbs only on exposure to cold climate. Along with the above-mentioned symptoms, the patient also had numbness and tingling in both feet. The patient noticed that the pain aggravated on walking and forward bending.

The patient consulted other physicians and was prescribed certain oral medication, details of which have not been provided. She was also suggested to undergo surgery. However, as there was only temporary relief from the medication, the patient approached SJIIM for further treatment.

- No h/o fall or trauma
- h/o lifting heavy weights.
- History Of Past Illness
- Patient is not a known case of hypertension, diabetes mellitus, Thyroid dysfunction or any other conditions.

● Rogi Pareeksha

1) Ashta Sthana Pareeksha

Table no. 1 showing Ashta Sthana Pareeksha:

Nadi	Vata pittaja
Mala	Prakruta
Mutra	Prakruta
Jihwa	Nirlipta
Shabda	Prakruta
Sparsha	Anushna sheeta
Drik	Prakruta
Akriti	Madhyama

2) Dasha Vidha Pareeksha:

Table no. 2 showing Dasha Vidha Pareeksha:

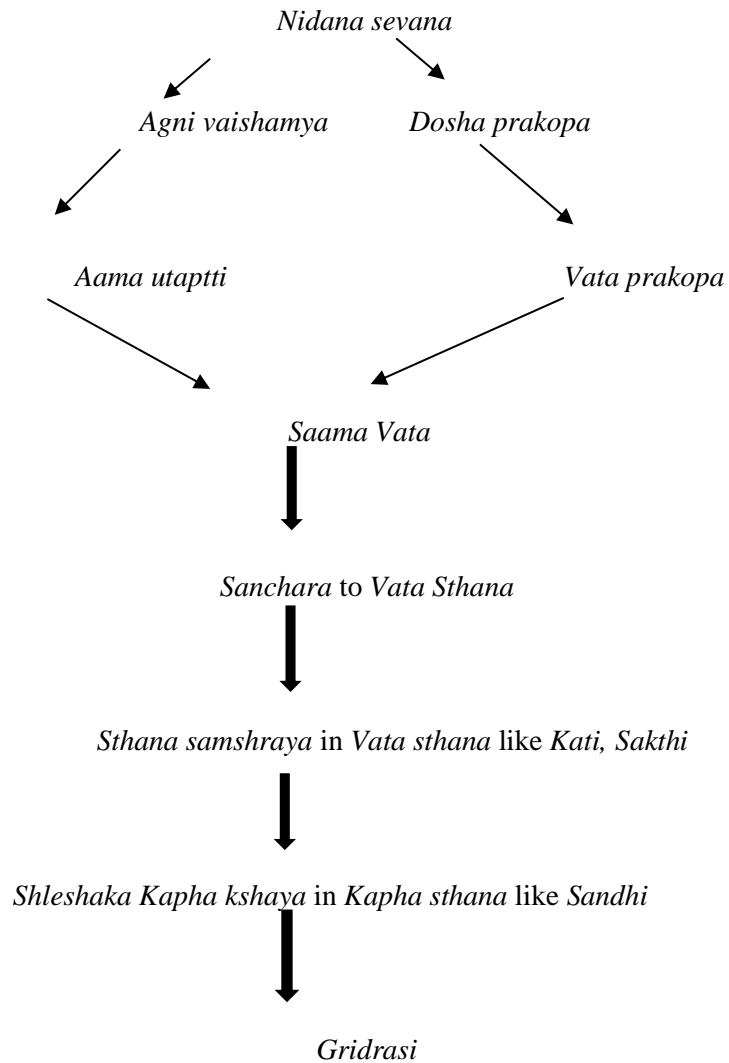
Prakriti	Kapha pitta
Vikruti	Vata Kapha Mamsa, Asthi, Majja Sira, Snayu, Kandara
Sara	Madhyama
Samhanana	Madhyama
Sattva	Pravara
Satmya	Katu rasa pradhana
Ahara shakti	Madhyama
Vyayama shakti	Madhyama
Pramana	Madhyama
Vaya	Madhyama

● Roga Pareeksha:

Nidana Panchaka:

1. Nidana: Katu rasa pradhana ruksha aahara,
Vata prakopaka Vihara such as Ati vyayama, Aticheshta, Atichintana
2. Poorva roopa: Avyakta
3. Roopa: Ruja, stambha, Spandana starting from Sphik poorva, running through kati,
Prushta, Uru, Jaanu, Jangha, Paada
4. Upashaya: Vishraama, Oushadha
Anupashaya: walking, forward bending

5. *Samprapti:*



• Physical Findings:

Table no. 3 showing Examination findings of the Patient:

Gait	Antalgic		
Arms	NAD		
Legs	<ul style="list-style-type: none"> ➤ Inspection: NAD ➤ Palpation: Tenderness noted at B/L gluteal region ➤ ROM: 		
	JOINT	RIGHT LL	LEFT LL
	Hip Joint	Painful Flexion and extension	Painful Flexion and extension
	Knee Joint	Within normal limits	Within normal limits
	Ankle joint	Within normal limits	Within normal limits

	Tarsals and meta-tarsals	Within normal limits	Within normal limits
Spine	<ul style="list-style-type: none"> ➤ Inspection: NAD ➤ Palpation: <ul style="list-style-type: none"> • Curvature: Normal • Deformity: None • Tenderness: Present over Lumbar Vertebrae • Doorbell sign: Positive over Lumbar vertebrae ➤ ROM: Painful flexion and extension 		
Special Signs	Test	RLL	LLL
	SLR test	+ve at 45°	+ve at 45°
	Breggard's Test	+ve	+ve
	Lasegue's Test	+ve	+ve

• **Investigation Findings**

MRI – DL SPINE IMPRESSION:

- Disc desiccation seen at multiple levels.
- Diffuse disc bulge seen at L4-L5 and L5-S1 levels, causing indentation of anterior thecal sac and narrowing of neural recess and neural foramina with indentation of bilateral exiting nerve roots.
- Mild disc bulge with anterior thecal sac indentation at L1-L2, L2-L3 and L3-L4 levels.

• **Treatment Protocol Adopted:**

1. *Sarvanga Abhyanga* with *Kottamchukkadi taila* followed by *Patra Pinda Sweda* – for 7 days.
2. *Kati Basti* with *Yamaka Sneha (Guggulu tiktaka ghrita + Sahacharadi taila)* – for 7 days.

• **RESULTS**

Symptoms	Before Treatment	After <i>Patra Pinda Sweda</i>	After <i>Yamakayukta Kati Basti</i>
Radiating pain	Severe	Reduced by 50%	Reduced by 80%
Stiffness, numbness and tingling	Severe	Reduced by 70%	Reduced by 80%
SLR TEST	+ve at 45°	+ve at 60°	-ve
Gait	Antalgic The patient was able to walk only for a few steps due to pain	Normal gait Able to walk for 5-7 minutes without pain	Normal gait No pain while walking
Forward bending	Painful	Less painful	No pain on forward bending

DISCUSSION

Snehana and *Swedana* are essential pillars of the treatment protocol of any Vata vyadhi. In the case of

Gridrasi, as Vata is the main culprit along with Kapha, Snehana and Swedana have been adopted so that both *Vata* and *Kapha vaigunya* are balanced at the same time.

Vata dosha is endowed with *Laghu*, *Ruksha*, *Sheeta*, *Sukshma* and *Chala guna*⁵. When the body is exposed to *Vata kara nidana* such as *Katu*, *Ruksha ahara sevana*, *aticheshta*, *chinta*, *Vishama aasana* and *sthana*, the above-mentioned *guna* of *Vata* attains *vriddhi* leading to *Prakopavastha* of *Vata*.

In *Gridhrasi*, *Prakupita Vata* travels exclusively to *Vata sthana* such as *Kati* and *Sakthi pradasha* and also associates with *Kapha dosha* that is present in certain *Kapha sthana* such as the *Sandhi* and causes *Shoshana* of *Sthanika Kapha*. Due to *Prakopavastha* of *Vata*, every *guna* may lead to different symptoms, such as *Laghu guna* leading to *susheerava* and *Laghuta* in *Asthi Dhatu*, *Chala guna* causing radiating type of pain, *Sukshma guna* causing *spandana*, *toda* etc. Due to the involvement of *Kapha*, symptoms like *Stambha* may be noted.

Thus, it is essential for the treatment protocol to involve both *Vata-Kaphahara* properties. In view of this, *Patra Pinda Sweda* has been adopted as the initial treatment modality.

Patra Pinda Sweda is a *Sagni sweda*. It can be included under *Tapa sweda* out of the *Chaturvidha sweda*. The procedure of *Patra Pinda Sweda* involves *bharjana* of several *Vatahara patra* such as *Nirgundi*, *Eranda*, *Rasna*, *Chincha*, *Shigru* along with other ingredients like *Nimbuka*, *lathuna* in suitable *Taila* based on the condition. This mixture is then tied into 2 Pottalis of appropriate size, and *swedana* is performed after *Abhyanga* with suitable oil like *Kottamchukkadi taila* in this case.

Patra Pinda Sweda is employed in conditions involving muscular spasms, *Neuralgia*, stiffness, musculoskeletal involvement, etc. As *Ushnata* is the main quality in any *Swedana* modality, it causes muscle relaxation and vasodilatation. Thus, it is beneficial in conditions involving muscular spasms. Due to the qualities of the drugs used, it also has analgesic properties. Moreover, *Patra Pinda Sweda* also has *Amapachana* property, which helps in *Samprapti vighatana*.

After a 7-day course of *Patra Pinda Sweda*, the patient was re-evaluated, and it was noted that the patient had around 40-50% relief in most of the

symptoms. As the symptoms of *Spandana*, *Gourava*, and *Stambha* had reduced, and *ruja* was the most predominant feature, *Kati Basti* with *Yamaka Sneha* was done for the next 7 days, keeping *Vata pradhanyata* in mind.

Kati Basti is a *Bahirparimarjana chikitsa* that acts as both *Snehana* and *Swedana*. It involves the application of a circular compartment made of *Masha kalka* over the affected area and filling this compartment with suitable *Sneha* after making it lukewarm. As the procedure and the drugs used in this are endowed with *Snigdha*, *Ushna*, *Guru*, and *Sthira guna*, which are diametrical to the properties of *Vata*, it helps in combating various conditions like *Katigata vata*, *Gridhrasi*, *Kati shoola*, *Kati graha*.

Kati Basti, due to prolonged contact of the *Ushna Sneha dravya* with the skin, causes a calming effect over the skin via sensory neuron endings and leads to vasodilatation, which leads to muscle relaxation and pain that arises due to tonic muscle contraction⁶. Metabolic activity also increases due to the application of heat. Thus, *Kati Basti* helps in the management of pain in *Gridhrasi*.

Guggulu tiktaka ghrita is *Tridosha shamaka* and it is indicated in *Sandhi-asthi-majja vikruthi*⁷. It is *Ushna* in nature. Even though it is a form of *Sneha dravya*, it does not increase *Kapha dosha*. As many of the ingredients of this *Ghrita* have *Ushna veerya* and *Katu rasa*, it causes *Ama Pachana*.

Sahacharadi taila contains *Sahachara* as the main ingredient, along with other ingredients like *Dashamoola*. *Sahachara* is *Deepana*, *Pachana*, *Balya*, *Shophahara*. It is also thermogenic and anti-inflammatory. *Dashamoola* is *Vata-Kaphahara*, *Shophahara*, *Pachana*⁸.

When the above two *Sneha* are used in the form of *Yamaka*, the two have a combined effect in controlling *Vata* and bringing about *Vedana shamana*.

CONCLUSION

In the present case, a female patient presented with complaints of *Gridhrasi* with a history of 6 years. After a thorough analysis of the status of *Dosha*,

Dushya, Ama, and Nidana Panchaka, she was subjected to Bahya Snehana and Swedana in the form of Patra Pinda Sweda and Kati Basti, after which significant relief in the symptoms was noted.

Vata roga is considered *Daruna*, *Kricchra Sadhya*, as the complaints persist for a very long time, and thus, they require extensive treatment for a long duration. While *Snehana* and *Swedana* act at the *Sthanika* level in the pacification of *Dosha*, *Shodhana*, in the form of *Virechana* and *Basti*, can be beneficial in the correction of *Agni* and establishing *Dhatu Samya* in *Gridhrasi*. Thus, after a course of *Bahya upakrama*, *Shodhana* can be helpful in such chronic conditions.

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