

**EFFECT OF SIRAVYADHA IN THE MANAGEMENT OF GRIDHRASI – A CASE STUDY****Akshay Shetty¹, Soumya Patli², C.R.Pujar³, G.S.Hadimani⁴**

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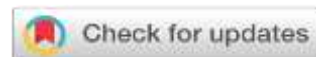
<https://doi.org/10.46607/iamj2911012023>

(Published Online: January 2023)

Open Access

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Article Received: 01/12/2022 - **Peer Reviewed:** 25/12/2022 - **Accepted for Publication:** 09/01/2023.

**ABSTRACT**

Gridhrasi is the most prevalent disease occurring in the degenerative phase of life span. Low back pain is the most common complaint encountered by practitioners. Low back pain can present as acute or chronic pain. Patients belonging to the chronic low back pain category are those who have not responded to six weeks of conservative management. These patients can be divided into different groups based on the location and radiation of the pain. Sciatica is the most common debilitating condition that causes low back pain radiating towards the posterior part of the legs. Nearly 40% of people experience sciatic pain at some point in their life. Sciatica resembles the disease Gridhrasi which mention in the ayurvedic classical text book which is included under vataja nanatmaja vikara. In gridhrasi pain starts from Kati-Prushta (pelvic and lumbosacral region) radiating towards jangha pada (thigh and legs) with impairment of lifting leg (stiffness). Ghridhrasi can be treated remarkably with procedures of pan-chakarma and internal medicine. Siravyadha is the major line of treatment mentioned in Ayurveda classical texts. **Case study:** A male patient aged 45 years; presenting with cardinal clinical signs and symptoms of Gridhrasi vis-

ited OPD with a history of two months. He was examined thoroughly and a detailed history of illness was recorded. He was treated with Siravyadha atantara kandara gulpha sandhi by following proper Purva, Pradhana, and Paschyat karma. **Observation and Result:** The patient got relief in subjective parameters i.e., Ruk and Stambha. Heaviness is reduced up to 50%, Pain reduced up to 60%, VAS-6 **Conclusion:** Siravyadha is administered in Tridoshadushti and Sarvangagatadushti. In Ghridrasi, Rakta and Kandara are Dushya and Vyana vata is major Dosh. Siravyadha corrects these imbalances by letting out the vitiated blood. The procedure was simple, economical, and can be done at the OPD level. It gives immediate relief of pain and stiffness.

Keywords: Gridhrasi, Vatavyadhi, Siravyadh, Sciatica.

INTRODUCTION

According to Ayurveda simple freedom from disease is not health. For a person, to be healthy he should be mentally and spiritually happy. An imbalance in Doshic equilibrium is termed as 'Roga'. Among Tridosha, Vata is responsible for all Cheshta and all diseases. As has the properties of the locomotor, its dynamic entity, its intensity, and the majority of its specific disorder in number more importance and attention are given to the Vata Dosh. Gridhrasi is Shoola pradhana nanatmaja vatavyadhi,^[1] affecting the lower limb which hampers the patient's daily routine activity. Gridhrasi (Ghridhra- vulture, asi- like) the name itself indicates the gait of the patient due to extreme pain i.e., like Gridhra or vulture.

It is a condition in which the Kandara (muscle tendons) which is passing towards the fingers of the feet, through Parshni (the region below Gulpha- ankle joint), gets vitiated by Vata, causing an inability to lift the lower limb. The cardinal signs and symptoms in Gridhrasi are intense shooting pain which initially affects sphik as well as the posterior aspect of Kati and then gradually radiates to the posterior aspect of the thigh (Uru), knee (Janu), calf (Jangha), and foot (Pada). Gridhrasi is of two types - Vataja and Vatakapahaja Tandra (drowsiness), Gouvara (heaviness), and Arochaka (anorexia) will be there.^[2] On the basis of symptoms of Gridhrasi; it can be correlated to sciatica. It occurs due to spinal nerve irritation and is characterized by pain in the distribution of the sciatic nerve.^[3] Low back pain is a common condition that affects as many as 80 to 90 percent of people during their lifetime, sciatica occurs in about 5

percent of cases. Sciatica is more common between 30 and 50 years of age^[4]

Conservative management of sciatica includes the administration of muscle relaxants, NSAIDs, analgesics, and corticosteroids. But their long-term use can produce toxic effects on the different systems of the body. And surgical procedures are carried out which are quite expensive and cause adverse effects like restricted movement of the spine, bowel, and bladder incontinence.

Line of Management of Gridrasi includes Siravyadha, Bastikarma and Agnikarma^[5-8] Siravyadha and Agnikarma are considered instant healers of pain. Raktamokshana by Siravyadha method is Ardchakitsa according to Sushruta.^[9] Siravyadha is specially indicated in the case of Gridhrasi. It is a simple OPD-level procedure affordable to all categories of patients and time-saving. Hence the present study is made to evaluate the efficacy of Siravyadha in the management of Gridhrasi.

CASE REPORT

Patient Information

- Name: A male
- Age: 45 years
- Sex: Male
- Religion: Hindu
- Occupation: KSRTC Driver
- Place: Nagnur
- Marital status: Married
- OPD.No:11851
- Date:12/10/2020
- Department: Panchakarma

Vedana vrittanta

- **Pradhana vedana:** Pain in the low back with stiffness radiating to left lower limb with numbness and tingling sensation.
- **Kala prakarsha:** 2 months
- **Anubandhi vedana:** heaviness in the left lower limb, difficulty in walking
- **Kala prakarsha:** 20 days
- **Vedana vrittanta:** The patient is said to be healthy two months later started complaining of pain in the low back with stiffness radiating to the left lower limb with numbness and tingling sensation, for 20 days patient started complaining of heaviness in the left lower limb and difficulty in walking, pain aggravates during walking, sitting for a longer duration, heavy work on rest no change in the symptoms, the patient consulted an orthopedician with no relief in the symptoms thus approached our hospital for the same.
- **Poorva vyadhi vrittanta:** N/H/O HTN, DM, Koch's, RA, IHD, RHD Surgery or trauma.

Vayaktika vrittanta

- Ahara: Vegetarian
- Vihara: Shramajanya
- Nidra: Disturbed sleep
- Mutra pravritti :4-5 times
- Mala pravritti:1 time
- Vyasana: Tobacco

General examination

- Built: Moderate
- Nutrition: Moderate
- Temperature:98.40 F
- Pulse rate:70 bpm
- RR: 16 per minute
- BP:150/0 mm of hg
- Height:5.3 ft
- Weight:68kg
- No pallor/cyanosis/clubbing/icterus

Astavidha pareeksha

- Nadi: Vatakaphaja
- Mala: Sama
- Mutra: Prakruta
- Jiwha:Nirama
- Shabdha: Avikruta
- Sparsha: Anushna
- Drik: Prakruta
- Akriti: Madhyama
- ✚ CVS Examination :S1,S2 heard with no murmurs
- ✚ RS Examination: Bilaterally symmetrical with no foreign sounds
- ✚ Per abdomen:
- ✚ CNS Examination: The patient is conscious well oriented to time and place.
- ✚ locomotor system:
 - Gait: Antalgic gait
 - Arm: Swinging
 - Leg: limping
 - Spine: No scoliosis, kyphosis

Test	Right L/L	Left L/L
SLR	60 ⁰	30 ⁰
Lassigue	+ve	+ve
Bowstring	+ve	+ve
Coin test	+ve	

Pain Assessment	
O (Onset)	Acute
P(Precipitating/palliative)	Heavy work, walking, sitting, climbing
Q(Quality)	Sharp aching

R(Region/Radiation)	Low back radiates to the left lower limb
S(Severity)	Very severe
T(Time)	Continuous aggravates at night
VAS(Visual Analog Scale)	09

Table no.1: Assessment Criteria

1. Low back pain radiating direction	G0	Pain in the lumbar region not radiated anywhere.	
	G1	Pain in the lumbar region radiates toward the right lower limb.	
	G2	Pain in the lumbar region radiates toward the left lower limb.	√
	G3	Pain in the lumbar region radiates toward both limbs.	
2. Stiffness and Numbness	G0	No stiffness and Numbness	
	G1	Mild stiffness and Numbness	
	G2	Moderate stiffness and Numbness	√
	G3	Severe stiffness and Numbness	
3. Tingling sensation	G0	No tingling sensation	
	G1	Mild tingling sensation	
	G2	Moderate tingling sensation	√
	G3	Severe tingling sensation	
4. Difficulty and pain while walking and sitting.	G0	No pain	
	G1	Mild pain+ no difficulty in walking and sitting	
	G2	Slight difficulty in walking and sitting	
	G3	Much difficulty in walking and sitting	√

- Prakriti: Kaphavata
- Vikriti: Vata kapha, Rasa, Rakta, Mamsa, Asthi, majja, Sira, Snayu, Kandara
- Sara: Tvaksara
- Satva: Madhyama
- Satmya :Katu, Tikta, ruksha
- Samhana: Madhyama
- Aharashakti
 - ✓ Abhyavarana: Madhyama
 - ✓ Jarana: Madhyama
- Vyayama shakti: Madhyama
- **Samprapti:**

- Pramana: Madhyama
- Vaya: Madhyama
- **Nidhana:** tu, tikta, ruksha, divaswapna, Shrama, Ati yana, Prajagara
- **Poorvarupa:** --
- **Rupa:** Vedhana in kati radiating to left L/L with guruta, tingling, and numbness

Ka-



- **Upashayaanupashaya:** Ushnaupachara
- **Samprapti Ghataka**
 - Dosha: Vata, Kapha
 - Dushya: Rasa, Rakta, Mamsa, Asthi, majja, Sira, Snayu, Kandara
 - Srothas: Rasadi
 - Srothodusti: Sangha
 - Udbhavastana: Pakwashaya
 - Sancharasthana: Rasavahini
 - Vyaktasthana: Kati, parshni
 - Swabhava: Ashukari
- **Vyadhi vinischaya:** Vata kaphaja gridhrasi
- **Chikitsa:** Siravyadha was planned
अतःप्रत्येकं सि बन्धनं च । Ca.Ch
28/101
- ❖ **Poorva karma:** Counselling and Consent was taken
- Sambara sangraha: Surgical Gloves, tourniquet, disposable needle, Gauge, cotton, bandage, betadine
- Sthanika abhyanga with murchita tilataila followed by Nadi sveda was done

- The patient is made to lie in a supine position left leg is straight and the right leg is flexed
- Tourniquet was tied below the knee joint
- Tadana was done
- ❖ **Pradhana karma:** For vyadhana sira from above gulfa was selected and yadana was done with a needle and blood was collected in the kidney tray
- Vyadhana kala : 10 minutes
- Srava matra: 25 ml
- ❖ **Paschat karma:**
 - Needle was removed
 - The punctured site was compressed
 - Cleaned with betadine
 - Bandaging was done
- **Post siravyadha assessment**
 - Heaviness reduced by up to 50%
 - Pain reduced by up to 60%
 - VAS-6

Table no.2: Assessment between before and after treatment:

Sl.no		Before treatment	After treatment
1.	Low back pain radiating toward the left lower limb	G3	G ₂
2.	Stiffness and Numbness	G2	G0
3.	Tingling sensation	G2	G1
4.	Difficulty and pain while walking and sitting.	G3	G1
5.	Straight leg raise(SLRT)	Left leg 30 ⁰	left leg 70 ⁰

DISCUSSION

In the human body, the Lumbar spine is the site of the most expensive orthopedic problem in the world's industrialized countries. It is the seat of miracles. The central nervous system as well as the Autonomic nervous system work through the spine and the entire nervous system is dependent upon the spine. so, the disease affecting the lumbar spine is handled very carefully.

Gridhrasi is such a disease having its origin in Pakvashaya and seat in Sphika and Kati i.e., lumbar spine. In classics, Gridhrasi is included under the 80 types of Nanatmaja Vata Vikara under Vatavyadhi as a separate clinical entity. Sciatica or sciatic syndrome is a condition described in modern medicine that resembles Gridhrasi. In sciatica, there is pain in the distribution of the sciatic nerve which begins in the lower back and radiates through the posterior aspect of the thigh and calf and to the outer boarder of the foot. Herniation and degenerative changes in the disk are the most common causes. There is often a history of trauma such as twisting of the spine, lifting heavy objects, or exposure to cold. The disability caused by this disease hampers day to day activity of the patients and makes the patients crippled. Acharya Charaka has described Siravyadha, Basti Karma, and Agnikarma in the management of Gridhrasi. Siravyadha is also accepted as half of the therapeutic measure in Shalya Tantra like Basti in Kayachikitsa.

MODE OF ACTION OF SIRAVYADHANA: -

In panchakarma Chikitsa, the vitiated Doshas are purified whereas in siravyadhana let out Rakta along with vitiated Doshas where Rakta Dhatu is predominant.

The susceptibility of Rakta dhatu towards getting impured is so versatile that the acharyas were forced to agree upon Rakta as the fourth Dosha. Therefore, Dushita Rakta from the related Siras should be let out to protect the health or to remove the disease. Since Pitta is dependent on Rakta, therefore Raktamokshana decreases the quantum of enhancement of Pitta, henceforth Doshas and Pittaja Vyadhi are too relieved or cured by the therapy. Siravyadhana does raktaprasadana. This occurs by stimulation of Yakrit and Pliha which are the moola of Raktavaha srotas. The whole of the Raktavaha srotas gets corrected when these organs are corrected. Raktamokshana decreases the workload on Raktavaha srotas.

The Dusta Rakta which is Shaakhashrita is expelled by Siravyadhana as it is the nearest route for Dosha niharana. Amlata in Rakta is responsible for Ruk. Hence

Raktamokshana by Siravyadhana is instrumental in relieving symptoms like Ruk by reducing Amlata in Rakta. Siravyadhana comprises Apatarpana Rupa Chikitsa which enhances the migration of Dusta Doshas from Asthi and Sandhi to Rakta. It produces Langhana, Swedana, Pittahara, Raktadosharana. Hence Siravyadhana invariably results in an immediate cure when compared to other therapeutic procedures that take longer periods for the relief of symptoms.

CONCLUSION

The heaviness was reduced by up to 50% and Pain was reduced by up to 60%. Gridhrasi is vata vyadhi having a predominance of vata and vata kapha. Raktamokshana by Shiravyadha is considered to be supreme as it drains out the viated Rakta and cures the

disease. Shiravyadha is very useful in severe painful conditions and chronic (degenerative) conditions. It is a better choice for the management of Gridhrasi. Nidana parivarjan may stop the further progression of the disease. It may be concluded that various treatment modalities present in Ayurveda vary according to the condition of the disease, present.

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Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Akshay Shetty et al: Effect of Shiravyadha in the Management of Gridhrasi – A Case Study. International Ayurvedic Medical Journal {online} 2023 {cited January 2023} Available from: http://www.iamj.in/posts/images/upload/187_193.pdf