

**EFFECT OF VALUKA SWEDA AND ERANDAMOOLADI KASHAYA BASTI IN GRIDHRASI THROUGH KARMA PATTERN – A CASE REPORT**Rajeshwari S Acharya<sup>1</sup>, Priyadarshini D<sup>2</sup>

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(Published Online: November 2024)

**Open Access**

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Article Received: 05/10/2024 - Peer Reviewed: 30/10/2024 - Accepted for Publication: 14/11/2024.

**ABSTRACT**

*Gridhrasi*, one among the 80 *Vatavyadhi* explained in classics, is characterised by the onset of *Ruk* (pain), *Toda* (pricking type), *Stambha* (stiffness) initially in *Sphik pradesha* (buttocks) radiating to *Kati prishta* (low back), *Janu* (knee), *Jangha* (calf region) till *Pada* (foot). It is commonly referred to as sciatica, a prevalent condition characterised by radiating pain along the course of the sciatic nerve, often accompanied by stiffness, numbness, and restricted mobility.

Materials and methods: *Sthanika Valuka sweda*, *Sarvanga Abhyanga* followed by *Dashamoola kashaya seka*, *Erandamooladi Kshara basti* followed by *Kashaya basti*, *Anuvasana* with *Sahacharadi taila* in *karma* pattern and oral medications were administered.

Results: Preliminary results suggest a significant reduction in pain and stiffness, showcasing the potential of Ayurvedic interventions in treating chronic musculoskeletal conditions like *Gridhrasi*.

Conclusion: This article explores the efficacy of *Erandamooladi Kashaya Basti* in alleviating symptoms of *Gridhrasi* through a clinical study involving participants with varying degrees of the condition. The study evaluates the treatment's therapeutic impact on pain relief, mobility improvement, and overall quality of life, aiming to establish the scientific basis for its traditional use.

**Keywords:** Gridhrasi, Sciatica, Valuka sweda, Erandamooladi Kashaya Basti

## INTRODUCTION

Gridhrasi<sup>1</sup> is one of the painful conditions explained in ayurveda in the context of *vatavyadhi*, where the pain from the *sphik* radiates up to the *pada* through the posterior aspect of *kati*, *Prushta*, *janu*, and *jangha*. Gridhrasi can be compared to Sciatica as there is a close resemblance in the manifestation of both conditions. Sciatica is a relatively common condition with a lifetime incidence<sup>2</sup> varying from 13% to 40%. The corresponding annual incidence of an episode of sciatica ranges from 1% to 5%. The incidence of sciatica is related to age. It is rarely seen before age 20, and the incidence peaks in the fifth decade and declines afterwards.

Several observational studies have suggested that processes other than pressure on nerve roots are involved in developing sciatic neuralgia. The evidence suggests a complex interplay of inflammatory, immunological, and pressure-related processes may be involved.

In this case, Disc herniation<sup>3</sup> is the leading cause of Sciatic neuralgia. A Herniated Disc refers to a problem with one of the rubbery cushions called discs between the bones that stack to make the spine. A herniated disc occurs when some of the nucleus pushes out through a tear in the annulus. It most often occurs in the lower back. Signs and symptoms include Radiating pain from the lower back to the buttocks, thigh, calf, and foot, Numbness or tingling, and weakness.

### Past History

Medical history-

N/K/C/O Hypertension, Diabetes Mellitus

### Family history

Nothing specific

**Personal history:** Shown in table no.01

**Table 1: Showing the subject's personal history**

Name: xyz	Bowel: Regular
Age: 23 years	Appetite: Good
Marital status: Unmarried	Habits: None
Occupation: Salesman	Height: 178cm
Diet: Mixed	Weight: 80kg

*Basti*<sup>4</sup> is regarded as the cornerstone treatment modality among the *panchakarma* for *Vata* disorders. In this case, *Sthanika valuka sweda*, followed by *Erandamooladi niruha basti*<sup>5</sup>, was administered.

### Case report:

#### Chief complaints

Complaints of low back pain radiating to left lower limb for one and half months.

#### Associated complaints

It is associated with stiffness in the lower back region and numbness in the left foot.

#### History of present illness

A male patient aged 23 years, n/k/c/o Hypertension/Diabetes Mellitus/ Thyroid dysfunction, was healthy one and half months back. He had h/o sudden jerk to the spine two years back and h/o travelling for a longer duration daily. Due to this, he gradually developed pain in the lower back region associated with stiffness. For that, he visited a nearby clinic, took medications, and got temporary relief. Later, his condition progressed with his daily activities; pain started to radiate to his left lower limb, associated with numbness. He also noticed changes in his walking style and found difficulty in walking. Hence, he was admitted to our hospital for further management.

**Table 2: Showing Ashtasthana pareeksha**

Nadi	Prakruta, 70bpm
Mutra	Prakruta 3-4times/day 1-2 times/night
Mala	Prakruta 1 time/day
Jihwa	Alipta
Shabda	Prakruta
Sparsha	Prakruta
Drik	Prakruta
Akriti	Prakruta

**Table 3: Showing Dashavidha pareeksha**

Prakriti: Vata kapha	Satmya: Katu pradhana sarva rasa satmya
Vikriti: Vata kapha	Ahara shakti: Madhyama
Sara: Madhyama	Vyayama shakti: Madhyama
Samhanana: Madhyama	Vaya: Madhyama (23 years)
Satva: Madhyama	Pramana: Ht- 178cm Wt- 80kg

**Systemic examination:**

Central nervous system: Higher mental functions intact, no abnormality detected

Cardiovascular system: S1 S2 heard, no abnormality detected

Respiratory system: NVBS heard, no abnormality detected

Gastrointestinal system: P/A- soft, non-tender

**Musculoskeletal system:**

Gait- Antalgic

Attitude- Upper limb- Normal

Lower limb- Normal

Spine examination:

Inspection-

- Curvature: Normal
- Deformity: absent
- Scar mark: absent

Palpation-

- Tenderness: absent
- Temperature: not raised
- Doorbell Sign: negative

ROM- restricted due to pain

**Table 4: Showing specific signs elicited in the patients**

Sign	Right	Left
SLR	Negative	Positive at 30 degrees
Bowstring	Negative	Positive

Bragard's	Negative	Positive
Lasegues test	Negative	Positive
Heel walk	Possible with pain	Possible with pain
Toe walk	Possible	Possible
Femoral Nerve stretch test	Negative	Negative
Pelvic Compression test:	Negative	Negative
Faber's test:	Negative	Negative
Piriformis stretch test :	Negative	Negative
Schober's test:	Positive (18cm)	
Coin Pick test:	Positive	

**Table 5: Showing samprapti ghataka**

<i>Dosha</i>	<i>Vata(vyana) kapha(Shleshaka)</i>	<i>Udbhavasthana</i>	<i>Pakvashaya</i>
<i>Dushya</i>	<i>Rakta(Kandara), Asthi</i>	<i>Sancharastana</i>	<i>Kati pradesha</i>
<i>Agni</i>	<i>Jatharagni, Dhatwagni</i>	<i>Vyaktasthana</i>	<i>Sphik, kati prishta, uru, janu, jangha, pada</i>
<i>Agni dushti</i>	<i>Mandagni</i>	<i>Adhistana</i>	<i>Kati pradesha</i>
<i>Srotas</i>	<i>Raktavaha, Asthivaha</i>	<i>Rogamarga</i>	<i>Bahya- Madhyama (Shakha, sandhi)</i>
<i>Srotodushti</i>	<i>Sanga</i>	<i>Sadhyasadhyata</i>	<i>Yapya</i>

**Table 6: Showing Treatment protocol adopted**

<i>Panchakarma</i>	<i>Shamana Oushadhis</i>
<ul style="list-style-type: none"> <li><i>Sthanika Valuka Sweda</i> for 7 days</li> <li><i>Koshtashodhana</i> with <i>Gandharvahastadi Eranda Taila</i><sup>6</sup> for 1 day</li> <li><i>Sarvanga Abhyanga</i> with <i>Sahacharadi Taila</i> f/b <i>Dashamoola kashaya</i><sup>7</sup> <i>Seka</i> for 7 days</li> <li><i>Erandamooladi Kshara basti</i> followed by <i>Kashaya Basti- karma</i> pattern (12 days)</li> <li><i>Anuvasana Basti</i> with <i>Sahacharadi taila</i><sup>8</sup> (18 days)</li> </ul>	<ul style="list-style-type: none"> <li><i>Yogaraja Guggulu</i><sup>9</sup> 1TID A/F</li> <li><i>Agnitundi Vati</i> 1BD B/F</li> <li><i>Rasnasaptaka kashaya</i><sup>10</sup> 15ml BD B/F with 30ml warm water</li> </ul>

**Table 8: Showing the contents of Erandamooladi Kshara basti and Kashaya Basti**

<i>Erandamooladi Kshara basti</i>		<i>Erandamooladi Kashaya basti</i>	
Contents	Dose	Contents	Dose
<i>Makshika</i>	50ml	<i>Makshika</i>	50ml
<i>Saindhava lavana</i>	6gms	<i>Saindhava lavana</i>	6gms
<i>Sahacharadi taila</i>	70ml	<i>Sahacharadi taila</i>	70ml
<i>Shatapushpa kalka</i>	20gms	<i>Shatapushpa kalka</i>	20gms
<i>Erandamooladi Kshara basti</i>	300ml	<i>Erandamooladi kashaya basti</i>	300ml
<i>Gomutra arka</i>	50ml + 100ml water		
Total	596ml	Total	446ml

**Observation and Results:**

**Table 9: Showing Observation and Results**

Treatment	Observation
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<i>Sthanika Valuka Sweda</i>	Pain and numbness reduced by 30%
<i>Koshta shodhana with Gandharvahastadi Eranda Taila</i>	
<i>Sarvanga Abhyanga with Sahacharadi Taila f/b ushna jala snana</i>	Pain reduced Range of movement improved
<i>Erandamooladi Kshara Basti</i>	Pain and stiffness reduced Range of movement improved
<i>Erandamooladi Kashaya Basti</i>	Pain and stiffness reduced Range of movement improved
<i>Anuvasana Basti with Sahacharadi taila</i>	Pain and stiffness reduced Range of movement improved

**Table 10: Showing overall assessment before and after treatment**

	Before treatment	After Valuka sweda	After Basti
SLR	30 degree (left)	60 degree	80 degree
Schober's test	18cm	18cm	21cm
Range of Movements	Restricted, painful	Improved	Improved

## DISCUSSION

### **Valuka Sweda:**

*Ruksha sweda* has been given importance as *Samshamaneeya sweda* in *Saama dosha* conditions<sup>11</sup>. *Valuka sweda* is one among the *ruksha sweda*. It involves using heated sand tied in a cloth or pouch and then applied to the affected areas. The heat from the sand improves blood circulation and helps relieve muscle stiffness and nerve compression, thus reducing pain. The warmth aids in reducing inflammation, easing the pressure and irritation that contribute to the pain. Patients may experience better flexibility and movement in the affected areas as stiffness and muscle tension are reduced. The heat from *Valuka Sweda* helps to pacify *Vata* and *Kapha dosha*.

### **Koshta shodhana:**

*Koshta shodhana* refers to *sadyovirechana*, where in the *Utklishta*, *doshas* are removed from the body. In this case, *koshta shodhana* was given before *basti karma*, so that *Basti dravya* reaches the target site. *Gandharvahastadi eranda taila* was given here for *koshta shodhana*, which is *vatahara*, *anulomaka* and *agnivardhaka*.

### **Sarvanga Abhyanga:**

*Sarvanga Abhyanga* involves the application of oil over the entire body in rhythmic, gentle strokes. *Abhyanga* does *Vatashamana*, thereby helping in the relief of symptoms like *ruk*, *toda*, and *Sthambha*. Strokes of *Abhyanga* promote muscle relaxation, reduce tension and thus improve flexibility in affected areas.

### **Dashamoola Kashaya seka:**

*Dashamoola kashaya seka* involves pouring warm *Kashaya* over the affected part of the body. The herbs in *Dashamoola* have potent anti-inflammatory, analgesic, and *vatahara* properties. The warmth of the *Dashamoola Kashaya* helps open the channels in the body, enhances blood flow to the affected areas, relaxes the muscles and tissues, and reduces stiffness and spasms.

### **Erandamooladi Kashaya basti:**

*Erandamooladi Kashaya basti* has ingredients such as *Vata kapha hara*. *Gomutra* has *lekhana* property, which helps tackle *vikruta kapha dosha*. It removes the *kapha avarana* and does *maruta nigraha*. Ingredients include *Eranda*, *Shatahva*, *Pippali*, *Balamoola*, *Madhuka*, etc., which have anti-inflammatory and analgesic effects. It not only has *shodhana* effects but also does *brahmana*.

### **Karma basti:**

*Karma basti* consists of a total of 30 *basti*, which includes 12 *niruha* and 18 *anuvasana basti*. Due to the higher number of sessions, it is especially beneficial for chronic and severe conditions involving aggravated *vata dosha*. The extended duration of *Karma basti* ensures that *vikruta vata dosha* is effectively corrected, providing long-term relief from symptoms such as chronic pain, stiffness and neurological disorders. Since it involves a combination of *niruha* and *anuvasana basti* in a structured sequence, it effectively does *brihmana* of the *dhatu*s while removing the accumulated ama, thereby helping in addressing the root cause of *vata* aggravation and providing long-term relief.

## CONCLUSION

The study on the effect of *Erandamooladi Kashaya Basti* in the management of *Gridhrasi* (sciatica) demonstrates promising results in alleviating the condition's primary symptoms, including pain, stiffness, and restricted mobility. The treatment effectively balanced the aggravated *vata* and *kapha dosha*, offering significant relief to patients without notable side effects. The anti-inflammatory and analgesic properties of *Erandamooladi Kashaya* played a crucial role in reducing pain intensity and improving the functional ability of the patients. Based on the outcomes, it can be concluded that *Erandamooladi Kashaya Basti* is an effective Ayurvedic intervention for managing *Gridhrasi*. Its holistic approach addresses the physical symptoms and promotes long-term health by targeting the underlying doshic imbalances.

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Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Rajeshwari S Acharya & Priyadarshini D: Effect of Valuka Sweda and Erandamooladi Kashaya Basti in Gridhrasi through Karma pattern – A case report. International Ayurvedic Medical Journal [online] 2024 {cited November 2024} Available from: [http://www.iamj.in/posts/images/upload/2092\\_2097.pdf](http://www.iamj.in/posts/images/upload/2092_2097.pdf)