



## MANAGEMENT OF GRIDHRASI THROUGH AYURVEDA W.S.R SCIATICA - A CASE STUDY

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## ABSTRACT

**Introduction:** In Ayurveda, *Gridhrasi* is one of the *Shula pradhana vatavyadhi*, which comes under the eighty *vataja nanatmaja vikaras*. It has symptoms like pain that starts at Sphik and radiates to Kati (waist) to Pada(foot), along with Sthambha(stiffness), Toda (pricking pain), and *Spandana* (tingling sensation). Almost all the symptoms mimic the condition of sciatica in modern parlance, in which pain radiates along the sciatica nerve and runs down one or both legs from the lower back. **AIM:** The study aimed to evaluate the efficacy of *Swalpa rasona pinda* (internally) and *Saireyaka tail* (external application) in the management of Gridhrasi. **Materials and methods:** A single case study of a 55-year-old male patient visiting our Ayurvedic hospital to treat Gridhrasi of the right leg for ten months. He was treated for about 45 days. **Result:** After 45 days, the patient's symptoms were assessed, and the outcome was good. The patient's general quality of life had also improved. **Conclusion:** The mentioned treatment reduced Gridhrasi's symptoms significantly.

**Keywords:** *Gridhrasi*, Sciatica, *Swalpa rasona pinda*, *Saireyaka taila*.

## INTRODUCTION

This computerised era demands speed and accuracy in one aptitude and activity for mere survival. To

cope with such situations, every person in the population must face hectic competition and a stressful life.

This leads to irregular food habits, suppression of natural urges, continuous travelling, lack of proper sleep, and sedentary occupation, causing the disease of low back pain. Low back ache is the fifth most common cause of hospitalisation and the third most common for surgical procedures. It is the most common disease affecting 70% to 80% of the population. Among these, 5% of the population are the victims of Sciatica. It is highest in the age group of 30-50 years. Males are more commonly affected than women. The prevalence of sciatica varies considerably, ranging from 3.8% in the working population to 7.9% in the working population. In sciatica, symptoms are pain that starts from the lower back and radiates down to one leg or both legs, numbness, and stiffness, which causes difficulty in walking. It hampers the daily routine and deteriorates the patient's quality of life. *Gridhrasi* in Ayurveda quietly mimics the condition of sciatica in modern parlance. *Gridhrasi* is *shula-pradhana vata vyadhi*, which comes under eighty

*vataja nanatmaja vyadhi*. *Gridhrasi*, by itself, indicates the gait shown by the patient due to extreme pain, that is, *gridhra* or vulture. The cardinal signs and symptoms of *Gridhrasi* are *Ruk* (pain), *Toda* (pricking sensation), *Spandana* (Tingling sensation), *Stambha* (Stiffness) in *Sphik, Kati, Uru, Janu, Jangha* and *Pada* and *Sakthikshepanigraha* (i.e. restriction in the upward lifting of lower limbs). In *Gridhrasi*, *Tandra* (Drowsiness), *Gourava* (Heaviness), and *Arochaka* (anorexia) may be present if *kapha* is associated with *vata*.

Contemporary medicine manages this condition either conservatively or surgically. Considering the higher prevalence rate of *Gridhrasi* and overcoming the above expensive therapeutics, there is a great need to find out how to effectively manage *Gridhrasi*. In this, *Shamana chikitsa* with *Swalpa rasona pinda* and *Saireyaka taila* externally has been given, which resulted in excellent symptomatic relief.

### CASE HISTORY:

A 55-year-old male patient came to kayachikitsa OPD of DR.A. L Government Ayurvedic Hospital, Vijayawada on 14/09/2023 with the following details:

Patient name	XYZ
Age	55yrs
Sex	male
Address	Gollapudi, Vijayawada
OPD no.	23083
Occupation	Lawyer
Marital status	Married
Socio economic status	Middle class
Weight	82kgs
height	175cms(5'9"feet)

### CHIEF COMPLAINT:

The patient complained of pain in the lower back radiating to the right lower limb for ten months. Pain and difficulty while walking, sitting on flat surfaces, bending forward, stiffness at the posterior region of the thigh, tingling sensation on the right leg, and heaviness in both legs. These symptoms were associated with loss of appetite for four months, distension of the abdomen for three months and constipation for one month.

### HISTORY OF PRESENT ILLNESS:

A 55-year-old male patient was average before ten months. The patient was from a lower-middle-income family. He used to ride his bike on irregular roads for more than 30km daily for work. He developed pain in his lower back, which gradually increased, so he approached an allopathic hospital, where he got medication, and the pain was relieved for some days. After a few days, he again developed pain in the lower back, slightly radiating to the posterior aspect of his right

thigh. He used to manage with allopathic medication, but he didn't get better results. The pain is worsening, radiating up to his right foot, along with stiffness, tingling sensation in the right leg, and heaviness in both legs. By searching for alternative medicine, he came to kayachikitsa OPD seeking an Ayurvedic cure.

**PAST HISTORY:**

Continuous jerk to the lower back region while riding on the bike for long distances daily for 15 years.

**FAMILY HISTORY:**

Nobody in the family ever experienced DM, HTN, Sciatica, etc.

K/C/O - Hypertension under medication

N/H/O - DM/THY/Surgery

N/H/O - Trauma or fall.

**PERSONAL HISTORY:**

Diet- Mixed

Appetite- Reduced

Bowel- Constipation

Micturition- Normal

Sleep- Disturbed due to pain.

Table 2: Astavidha pariksha

Nadi	Vatakapha
Mala	Asamyak (constipation)
Mutra	Samyak
Jihwa	Sama
Shabda	Prakrutha
Sparsha	Anushnaseeta
Drik	Prakrutha
Akruthi	Madhyama

**Nidana panchaka:**

**Hetu**(etiology)

**Ahara:** More intake of *katu*, *ruksha* and *athi snigdha ahara*.

**Vihara:** daily riding on a bike on irregular roads for long distances, lack of proper sleep.

**Poorva rupa:** mild on-and-off pain at *kati pradesha*.

**Rupa:** *Shula* at *kati pradesha* radiating to right leg.

**Upasaya:** By rest and after taking medication.

**Samprapthi:** Due to *vata prakopa ahara* and *marm-abhigata* at *kati pradesha* due to jerky movements while travelling and excess vitiation of *apana vayu* due to constipation, which leads to vitiation of *vata* and *kapha doshas* along with vitiation of *Raktha* (blood), *sira* (veins) *dhamani* (arteries). This ultimately obstructs neural conduction and elicits a radi-

ating pain from *Kati* (lumbar region) to *pada* (foot), which leads to *Gridhrasi* (sciatica).

**SAMPRAPTHI GHATAKAS:**

- *Dosha: Vata Kapha*
- *Dusya: rasa, rakta, mamsa, asthi, majja, sira, akandara, snayu*
- *Srotas: Rasavaha, asthivaha, majjavaha and purishavaha*
- *Srotodusti: Sanga*
- *Rogamarga: Madhyama*
- *Agnimandhya: Ama, jatharagnimandhya and Dhatvagnimandhya*
- *Udbhavasthana: Pakvashaya*
- *Adhistana: Kati and Prushthavamsha*
- *Vyaktasthana; sphik, kati, prustha, uru, janu, jangha and pada.*

Table no:3 Locomotor system examination

Inspection	Antalgic gait
Palpation	Tenderness at L4,L5and S1 region Good muscle tone

	Muscle power grade both right and left extremities (Upper & lower) – 5/5
Special test	<u>SLRT</u> optimistic at 30° on the right leg
	Negative on the left leg
	<u>Tibial nerve stretch test</u>
	Upbeat on the right leg Negative on the left leg <u>Flip test</u> Upbeat on the right leg Negative on the left leg

### Investigations:

MRI was done on 04/09/2023.

- Lumbar spondylosis with multilevel mild disc degenerative changes.
- Circumferential disc bulge with central/correct paracentral disc protrusion/extrusion at L5-S1 with caudal migration of the extruded disc causing anterior thecal sac indentation, significant spinal canal compromise (1.7mm), impingement on the proper traversing nerve root and indentation on the correct corresponding exiting nerve root.

**Diagnosis:** *Vatakaphaja Gridhrasi.*

**Chikitsa:** *Shaman chikitsa* with *Swalpa rasona pinda* (internally) and *Saireyaka taila* (external application) showed promising results in this case.

*Swalpa rasona pinda:* 500mg 2 tablets BD with *sukoshna jala* after food

*Saireyaka taila:* Applied externally two times a day.

For 45 days, follow up after the 15th, 30th and 45th days.

### Assessment criteria:

#### Scoring pattern of Subjective parameters:

Table no: 4 <i>RUK</i> (Pain)	
No pain	0
Occasional pain and mild pain	1
Moderate pain and Slight difficulty in walking	2
Moderate pain with difficulty in walking	3

Table :5 <i>TODA</i> ( Pricking Sensation)	
No pricking sensation	0
Occasional and mild pricking sensation	1
Moderate pricking sensation	2
Severe pricking sensation	3

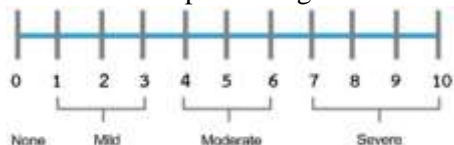
Table no:6 <i>STAMBHA</i> (Stiffness)	
No stiffness	0
Stiffness for 5 to 10 min	1
Daily for 10-60min	2
Daily more than 1 hr.	3

<b>Table no:7</b>	<i>Aruchi</i>	<i>Tandra</i>	<i>Gourava</i>
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Absent	0	0	0
mild	1	1	1
moderate	2	2	2
severe	3	3	3

**Objective parameters:**

- SLRT
- Tibial nerve stretches test.
- Flip test
- Numerical pain rating scale.



Grade	severity	Scale reading
0	No pain	0
1	Mild pain	1-3
2	Moderate pain	4-6
3	Severe pain	7-9
4	Worst possible pain	10

**Observations and results:**

**Table no:9 Observations of subjective criteria**

Signs and symptoms	Before treatment	After treatment/after 45days
Ruk	3	0
Toda	3	1
Sthambha	3	0
Aruchi	2	0
Tandra	2	0
Gourava	3	0

**Table no:10 observation of objective parameters**

	Before treatment	After treatment
<b>SLRT</b>	Positive at 30° (right leg) Negative on the left leg	Negative at 75° on the right leg
<b>Tibial nerve stretch test</b>	Upbeat on the right leg Negative on the left leg	Negative
<b>Flip test</b>	Upbeat on the right leg Negative on the left leg	Negative
<b>NPRS</b>	Grade 3	Grade 0

After 45 days of treatment, the patient found significant relief in lumbar pain. Patient assessment was

carried out using specific subjective and objective parameters mentioned in Tables 9 and 10. In other words, the patient can now walk without much difficulty, sit on flat surfaces without pain, and do his dai-

ly activities without pain. No radiological investigation was carried out after the completion of treatment.

## DISCUSSION

In this case study, the patient was treated with *Swalpa rasona pinda*, which is taken reference from *Bhaishajya ratnavalli*, 26th *vatavyadhi chapter* verse no-93-97 and *Saireyaka taila*, which is taken from *chakradatta 22<sup>nd</sup> vatavyadhi, chikitsa* verse 102. In *Swalpa rasona pinda* ingredients like *Rasona, Hingu, Jeeraka, Saindhava lavana, Shunti, Maricha, Pipali*, all these are having *Kapha Vata hara, Vatanulomana Sulahara, Balya, Deepaniya and Rasayana*, Anti-arthritis, Analgesic, Anti-inflammatory, Anti-spasmodic which helps in reducing the symptoms of *Gridhrasi*. *Saireyaka taila* ingredients are *Saireyaka, Tila taila*, and *go ksheera*. It has properties like *Kapha Vata shamaka, Balya, Rasayana*, anti-arthritis, anti-inflammatory, and antioxidant and is rich in calcium. All these helps reduce the symptoms of *Gridhrasi*. After starting treatment, patient signs and symptoms decreased because all the properties of local inflammation and *kapha avarana* were treated with *gunas* of *Swalp rasona pinda* and *Saireyaka taila*. Significant improvement was seen in the patient's signs and symptoms after treatment.

## CONCLUSION

The above treatment helps relieve disease symptoms and is also an attempt to provide safe and effective treatment to the patient. The therapy was quickly ad-

ministered to the patient, and no side effects were noted.

### Declaration of patient consent:

This is to certify that I (the author) obtained all the patient consent forms. In the form, the patient gave consent for his clinical information to be reported in the journal. The patients understand that their names and initials will not be published, and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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