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# A CRITICAL ANALYSIS OF BASTI CHIKITSA IN GRIDHRASI W.S.R. TO SCIATICA-A REVIEW STUDY

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#### **ABSTRACT**

Among all the neurological disorders Sciatica (Gridhrasi) is one of the severe debilitating syndromes. The cardinal signs and symptoms of *Gridhrasi* are *Ruka* (pain), *Toda* (pricking sensation), Stambha (stiffness) and Muhuspandana (twitching) in the Sphika (Gluteal Region), Kati (Waist), Prishtha (Low Back), Uru (Thigh), Janu (Knee), Jangha (Calf) and Pada (Foot) respectively and Sakthikshepa Nigraha i.e. restricted lifting of the leg. Above characteristics can be equated with the condition Sciatica syndrome in modern parlance, which occurs because of spinal nerve irritation and is characterized by pain in the distribution of sciatic nerve which begins from buttock and radiates downwards to the posterior aspect of thigh, calf and to the outer border of foot. Among the various ayurvedic treatments of the Gridhrasi, Basti is a unique procedure which eliminates the aggravated Doshas from the body as such it was described as half of the treatment of all the treatment. Here in, an effort is put forward to compile and analyse the various studies conducted on Basti management of Gridhrasi from the year 1990 to 2014 in the Department of Kayachikitsa and Panchakarma at Institute of Post Graduate Studies & Research in Ayurveda, Jamnagar, Gujarat. Total 07 studies on Gridrasi were analysed which revalidated the impact of Basti treatment in Gridhrasi. It was analysed that Basti was found to be significantly effective and clinically safe without any adverse drug reactions.

Keywords: Basti, Gridrashi, Sciatica

**INTRODUCTION** 

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Gridhrasi is one among the 80 types of Nanatmaja Vatavyadhi [1]. Gridhrasi is classified into two types i.e. Vataja and Vatakaphaja. Vataja Gridhrasi is characterised by Ruka (pain), Toda (pricking sensation), (stiffness) Muhuspandana Stambha and (twitching) in the Sphika (Gluteal Region), Kati (Waist), Prishtha (Low Back), Uru (Thigh), Janu (Knee), Jangha (Calf) and Pada (Foot) respectively [2]. This is a cardinal symptom of Gridhrasi. In Vatakaphaja Gridhrasi, due to Kaphaanubandh, Arochaka (Anorexia), Tandra (Stupor) and Gaurava (Heaviness) are found as associated symptoms. Sciatica is a condition where there is distribution of pain along the course of sciatica nerve, which radiates from low back to buttock and leg [3]. This is commonly accepted as being caused by lumbar disc prolapse. In contemporary medical science Sciatica is closely equivalent to Gridhrasi by its similarity in the course of pain from low back radiating down through the posterior part of leg. Sciatica cases occur in about 5% of cases<sup>[4]</sup>. Sciatica is more common among the age group between 30-50 years of age. The chance of Gridhrasi is expected to increase in the upcoming years due to sedentary life style, the increased use of computerization and also due to increasing body weight, mental stress, hectic work schedules and transportation methods. All these along with the improper posture are one In this study 24 patients were divided in two groups. In SHODHANA GROUP (n-12) Karma Basti(contained- Anuvasana with Bala Taila 100ml and Asthapana with Erandamulakwath 500ml, Bala Taila 100ml, honey 40ml, Putoyawanikalka 10gm and Saindhava

of the highlighted causes for spine and nerve compression disorders in the present scenario. Basti is the therapy advocated for Gridhrasi by many Acharyas. Basti has been glorified as the definitive therapy to subtle the aggravated Vata and Vata Pradhan Vyadhies [5]. With the aid of various drugs incorporated, in the BastiDravyas, it does Sanshodhan, Sanshaman and Sangrahan of Dosha [6]. Basti is a purification process by which all the three vitiated Doshaare expelled from the anal route and especially *Vata* is pacified. As a result of excretion of vitiated Dosha the physiological equilibrium in three Dosha is maintained and lasting results are produced with the therapy in the form of sound health.

Keeping these facts in mind this review study has been undertaken to bring out which type of *Basti* is more effective in the management of *Gridhrasi* with no side effect and long lasting effect.

#### MATERIALSAND METHODS

All the thesis work has been collected from department of *Kayachikitsa* and *Panchakarma*, IPGT & RA, Jamnagar.

**Method**: hand search.

The procured thesis was studied in detail and scientific review was done.

#### **OBSERVATIONS:**

# **G J Moradiya** (1990) [7]

10gm) were administered for 30 days. In SHAMANA GROUP (n-12) *Mahanimbadichurna* 6gm/day and *Rasanaguggulu* 6gm/day each in three divided dose were given for 30 days. The study concluded that *Basti* provided better relief in distribution and severity of

pain, *Stambha*, *Gaurava*, *Toda*, tenderness and *Spurana* in *Shodhana* group, whereas *Shamana* therapy provided better relief in *Graha*, *Arochaka* and *Tandra*. Study concluded that

*Basti* group was better in providing relief in sign and symptoms of *Gridhrasi* in comparison to *Shamana* group.

**Table1:** Effect of therapies on sign and symptoms of *Gridhrasi* 

Sign and	Shodhana	Group			Shamana Group				
symptoms									
	Mean	Mean	% Relief	'P' Value	Mean BT	Mean	% Relief	'P' Value	
	BT	AT				AT			
Severity of	2.87	0.54	81.18%	< 0.001	2.35	0.99	57.87%	< 0.001	
pain									
Stambha	2.41	0.83	65.56%	< 0.001	2.17	1.08	50.23%	< 0.001	
Toda	1.67	0.25	84.99%	< 0.001	2.0	0.75	62.5%	< 0.001	
Spurana	1.33	0.25	81.02%	< 0.01	1.5	0.58	61.33%	<0.01	
Tandra	1.5	0.92	38.93%	< 0.01	1.5	0.5	66.66%	< 0.01	
Gaurav	1.5	0.5	66.66%	< 0.01	1.5	0.5	66.66%	< 0.01	
Arochaka	1.5	1.08	28%	< 0.05	1.5	0.58	61.33%	<0.01	

## Dr.Manoranjana Sahu(2002)<sup>[8]</sup>

In this study 25 patients of *Gridhrasi* were divided in two groups. In GROUP-A (*Shodhana* group)10 patients were given *Virechana* with *Erandataila* 50ml and *Nigundipatraswarasa* 50ml after proper *Snehana* and *Swedana* was done. After *Samsarjana Karma Siddha-Basti*(A.H. Ka. 4/33) for 8 days as *YogaBasti* as well as *Rasanaguggulu* for 30days was given. In GROUP B (*Shamana* group) 15 patients were given *Rasanaguggulu* for 30 days

along with *Mriduabhayanga* and *Nirgundi-*patrapinda Sweda once daily. The study concluded that Shodhana shows better result than
Shamana group. Shodhana should be carried
out before commencing internal medication.
Erandataila and Nirgundipatraswarasa has
the strongability to give relief in Gridharsi and
Siddhabasti should be given in other Vatika
disorders also.

**Table2:** Dr. Manoranjana Sahu: Effect of therapies on sign and symptoms of *Gridhrasi* 

Sign and symp-	Group-A	(Shodhana)			Group-B(Shamana)				
toms									
	Mean	Mean AT	% Relief	'P' Value	Mean BT	Mean AT	% Relief	'P' Value	
	BT								
Distribution of	4.8	1.8	64.58%	< 0.001	3.66	1.86	49.18%	< 0.001	
pain									
Severity of pain	2.8	0.7	75%	< 0.001	2.3	1.33	42.85%	< 0.001	
Stambha	2.7	0.7	74%	< 0.001	2.07	1.30	37.19%	< 0.05	
Toda	2.22	0.77	65%	< 0.01	2.0	1.67	46%	< 0.001	
Spurana	2.44	0.66	72.85%	< 0.001	1.76	1.16	34.96%	>0.05	
Tandra	2.50	0.8	68%	< 0.01	2.25	1.80	20.58%	>0.05	
Gaurav	2.4	0.9	62.50%	< 0.001	2.0	1.0	50%	< 0.001	
Arochaka	2.50	0.37	85%	< 0.001	2.46	1.20	46.90%	< 0.001	

# Vd. Swati V. Atre (2004) [9]

In this work 30 patients were treated in two groups. In GROUP-A, 15 patients were given course of *Kalabasti*(*Asthapanabasti* with *Kwath* prepared from *Dashmoola*, *Bala*, *Rasana*, *Guduchi* and *Sunthi* about 400ml, *Erandataila* 80ml, *Kalka* of *Satpushpa* 10gm, *Madhu* 30gm, *Saidhava* 10gm and for *Anuvasana Basti Taila* prepared from same drug as *Dashmoola*, *Bala*, *Rasana*, *Guduchi* and *Sunthi* about 100ml.) along with *Erandataila* 20ml was given orally as *Shamana* therapy for rest

of the period for 6weeks. In GROUP-B(n-15) *Kwath* of same drugs used in *Asthapana Basti* were give norally 20ml each time twice a day and 20ml of *Erandataila* was given with the evening dose for 6weeks. The study concluded that total effect of therapies on individual patient reflects that *Shodhana* therapy along with *Shamana* therapy was more effective in pacifying the symptoms of *Gridhrasi* as compare to *Shamana* therapy alone.

**Table-3:**Effect of therapies on sign and symptoms of *Gridhrasi* 

Sign and symptoms	Group-A(S	hodhanapurv	vak-		Group-B(Shamana)					
	-Shamana)									
	Mean BT	Mean AT	% Relief	'P' Value	Mean BT	Mean AT	% Relief	'P' Value		
Distribution of pain	5.6	1.6	71.42%	< 0.001	5.33	2.66	50.09%	< 0.001		
Severity of pain	2.93	0.86	70.64%	< 0.001	2.6	1.06	59.23%	< 0.001		
Stambha	1.85	0.64	65.40%	< 0.001	1.46	0.73	50%	< 0.001		
Toda	2.2	0.6	72.72%	< 0.001	2.0	0.66	67%	< 0.001		
Muhuspnadana	2.35	0.85	63.82%	< 0.001	2.06	0.8	61.61%	< 0.001		
Tandra	2.0	0.6	70%	< 0.01	2.0	1.0	50%	< 0.02		
Gaurav	2.0	0.36	82%	< 0.001	2.0	0.87	5605%	< 0.01		
Arochaka	2.0	0.42	79%	< 0.01	2.0	1.0	50%	>0.05		

## Dr. Anamika Kumari(2006)<sup>[10]</sup>

In this study total 34 patients were treated in two groups. In GROUP-A(n-17) oral capsule 500mg (contained- *Nirgundichurna* 440mg, *Suddhakupilu* 60mg and *Parijatapatrakwath* used for *Bhavana* for 3 times) 2 cap twice daily were given with Luke warm water for 30days. In GROUP-B(n-17) oral cap same as

above and *Matrabasti* with 60ml of *Prasarini Taila* (*BhaishajyaRatnavaliAmavataRogadhikara*) for 21 days. The study concluded that oral capsule was also given good results but oral capsule with *Matrabasti* provided better relief in the amelioration of sign and symptoms.

**Table-4:** Effect of therapies on sign and symptoms of *Gridhrasi* 

Sign and	Group-A(or	ral capsule)			Group-B(oral cap. + <i>MatraBasti</i> )				
symptoms									
	Mean BT	Mean AT	% Relief	'P' Value	Mean BT	Mean AT	% Relief	'P' Value	
Rukh	3.17	1.35	57.41%	< 0.001	3.29	1.05	68.08%	< 0.001	
Stambha	1.60	0.13	91.87%	< 0.001	1.36	0.27	80.14%	< 0.001	
Toda	1.50	0.25	83.33%	< 0.01	1.77	0.11	93.78%	< 0.001	
Spandana	1.40	0.10	92.85%	< 0.001	1.16	0.00	100%	< 0.001	
Tandra	1.50	0.00	100%	>0.05	1.00	0.00	100%	>0.05	
Gaurav	1.80	0.40	77.77%	< 0.05	1.16	0.50	56.89%	< 0.001	
Arochaka	1.50	0.5	66.66%	>0.05	1.33	0.33	75.18%	>0.05	

## Shraddha P Joshi (2008) [11]

In this study 20 patients were treated in two groups. In GROUP-A(n-10) *Shephalikakala Basti*(contained- *Anuvasana* with *Shephalika Taila* 100ml and *Asthapana* with same *kwatha* with 400ml/*Basti* dose) was given. In GROUP-B *Vajigandhadya Kala Basti* (described in *Yogaratnakar Vatavyadhichikitsa*)

was administered. The study concluded, overall effect of therapies as GROUP-B *Vajigandhadya Kala Basti* proved to be more effective then *Shephalika Kala Basti*. The reason behind the better results of *Vajigandhadya Kala Basti*is that it was a *Sastrokta*yoga from *Yogaratnakar*.

**Table-5:** Effect of therapies on sign and symptoms of *Gridhrasi* 

Sign and symptoms	Group-A(Shephalika Kala Basti)				Group-B(Vajigandhadya KalaBasti)				
	Mean BT	Mean AT	% Relief	'P' Value	Mean BT	Mean AT	% Relief	'P' Value	
Rukh	3.4	1.2	65.71%	< 0.001	3.5	1.1	68.57%	< 0.001	
Stambha	2.8	1.3	53.57%	< 0.001	2.8	1.0	64.26%	< 0.001	
Toda	2.0	0.8	60%	< 0.001	2.2	0.7	68.18%	< 0.001	
Muhuspandan	1.9	0.5	73.68%	< 0.001	2.4	0.6	75%	< 0.001	
Tandra	1.1	0.4	63.63%	< 0.05	1.0	0.3	70%	< 0.01	
Gaurav	2.0	1.0	50%	< 0.05	0.5	0.1	80%	< 0.05	
Arochaka	1.0	0.3	70%	< 0.05	1.6	0.3	81.25%	< 0.001	

## MumtazAli(2009) [12]

In this study 119 patients were registered but 102 patients took continued treatment remaining patients did not continued. In GROUP-A(n-52) oral *Nirgundighanvati* 500mg 2tab thrice a day after meal was given for 30days with Luke warm water followed by local *Abhayanga* and *Swedana* for 21days. In GROUP-

B(n-50) oral *Nigundighanavati* along with *Abhayanga Swedana* and *Matrabasti* of *Nirgunditaila* 60ml for 30 days were given. The study concluded that *Nirgundighanavati* gave good results but *Nirgundighanavati* with *Matrabasti* provided better relief in amelioration of sign and symptoms.

Table-6: Effect of therapies on sign and symptoms of *Gridhrasi* 

Sign and symp-	Gropu-A(Nirgundighanavati)				Group-B(Nirgundighanavati+MatraBasti)				
toms									
	Mean BT	Mean AT	% Relief	'P' Value	Mean BT	Mean AT	% Relief	'P' Value	
Rukh	3.23	1.98	38.69%	< 0.001	3.28	1.2	62.19%	< 0.001	
Stambha	2.0	0.78	61.53%	< 0.001	1.88	0.56	71.27%	< 0.001	
Toda	2.51	1.42	45.03%	< 0.001	2.48	0.9	62.90%	< 0.001	
Muhuspandan	1.07	0.35	86.66%	< 0.001	1.21	0.28	64.70%	< 0.01	
Tandra	1.66	0.91	50%	< 0.001	1.41	0.47	58.33	< 0.001	
Gaurav	2.0	0.66	66.66%	< 0.001	1.92	0.06	68.75%	< 0.001	
Arochaka	2.15	0.39	78.04%	< 0.001	1.89	0.23	84.26%	< 0.001	

## Sumedh N Paikrao (2014) [13]

In this study total 40 patients were treated in two groups. In GROUP-A (n-20) *Siravedha* at the site of four *Angulas* below the *Janusandhi* in total 4 seating1 seating per week was done. In GROUP-B classical *VaitaranaBasti* [14] was

given to patients for 15 days. The study concluded that both of procedure is effective, simple, cheap and safe but *Vaitarana Basti* is more effective in treating the cardinal symptoms of *Gridhrasi*.

**Table-7:** Effect of therapies on sign and symptoms of *Gridhrasi* 

Sign and	Group-A(Si	ravedha)			Group-B(VaitaranaBasti)				
symptoms									
	Mean BT	Mean AT	% Relief	'P' Value	Mean BT	Mean AT	% Relief	'P' Value	
Rukh	5.0	0.95	83%	< 0.001	5.5	1.35	75%	< 0.001	
Stambha	2.77	1.05	52.2%	< 0.001	3.15	0.89	71.66%	< 0.001	
Spanadana	2.36	0.75	63.33%	< 0.001	2.41	0.38	78.31%	< 0.001	
Tandra	1.78	0.4	47.6%	< 0.001	2.0	0.66	66.66%	< 0.05	
Gaurav	1.71	0.3	52.5%	< 0.001	2.4	0.6	75%	< 0.001	
Arochaka	1.57	0.15	26.49%	< 0.01	03	01	66.66	< 0.001	

#### **RESULT:-**

The highly relief percentage found in *Ruka* (severity of pain) was 81.18% which was statistically highly significant where p<0.001 (Table 1) in *Erandamooladi Karma Basti*.

The highly percentage of relief in *Stambha* (80.14%), *Toda* (93.78%) and *Spandana* (100%) were found in *MatraBasti* along with oral capsule, which were statistically highly significant (P<0.001). (Table 4)

**Table-8:** Overall effect of *Basti* therapies on sign and symptoms of *Gridhrasi*(sciatica) in various research works-

Basti Therapy	Sign and Symptoms							
	Ruka	Stambh a	Toda	Span- dana	Tan- dra	Gau- rava	Aro- chaka	
ErandamooladiKarma Basti(G J Moradiya)	81.18%	65.56%	84.99 %	81.02%	38.93 %	66.66%	28%	
VirechanapurvakSiddha- Basti(Dr.ManoranjanSahu)	75%	74%	65%	72.85%	68%	62.5%	85%	
KalaBasti (Vd. Swati V Atre)	70.64%	65.40%	72.72 %	63.82%	70%	82%	79%	
MatraBasti with Oral Capsule (AnamikaKumari)	68.08%	80.14%	93.78 %	100%	100%	56.89%	75.18%	
ShephalikaKalaBasti (Shraddha P Joshi	65.71%	53.57%	60%	73.68%	63.63 %	57.14%	70%	
VajigandhadhyaKalaBasti (Shraddha P Joshi)	68.57%	64.28%	68.18 %	75%	70%	80%	81.25%	
NirgundiTailaMatraBasti with Nirgun- dighanaVat i(Mumtaz Ali)	62.19%	71.27%	62.90 %	64.70%	58.33 %	68.75%	84.26%	
VaitaranaBasti (Sumedh N Paikrao)	75%	71.66%	-	78.31%	66.66 %	75%	66.66%	

#### **DISCUSSION**

On reviewing the thesis works, it can be said that Erandamooladi karma Basti was found more effective in relieving cardinal symptom of Sciatica (Gridhrasi) i.e. Ruka (Pain) as it is a course of 30 Basti which has been specially indicated for Vatavyadhis and Erandamooladikwatha is having properties like anti-inflammatory, analgesics and kaphavatahara therefore helps in relieving the pain and inflammation of nerve, if any. Through its Snigdha, UshnaGuna and Ushnavirya it pacifies

Ruksha and SheetaGuna of aggravated Vata-Dosha.

Oral capsule (contained- NirgundiChurna 440mg, Suddhakupilu 60mg and Parijatapatra Kwath used for Bhavana) along with Matra Basti of Prasarini Taila were found more effective in relieving symptoms like Stambha (stiffness), Toda (pricking sensation), Spandana (Pulsation), Tandra (Stupor). Stambha is the symptom mainly attributed to Ama(undigested food part). Shamana drug possess Deepana-Pachana, UshnaVirya properties, thus by correcting vitiated Ama and by

improving Agni of the patients, it might be provided relief in *Stambha* symptom. *Spandana* and *Toda* are also important symptom produced by vitiation of *Vata*. All the drugs of oral capsule and *Basti* are having *UshnaVirya* and *Kapha-VataShamaka* properties. So by their virtue, they help in relieving *Spandana* and *Toda*.

Basti is the PradhanKarma as it possesses a wide spectrum of effects & is thought to be the Ardhachikitsa in Ayurveda. Shamana therapy is also used in many studies along with Basti as Shodhana therapy in which Rasanagugguluis being widely used. It has been observed that Shamana therapy alone is not as much effective as Shodhanapurvakshamana therapy on various sign and symptoms of Gridhrasi. Various drugs (Erandamoola, Dashmoola, Bala, Sahachara, Nirgundi, Rasana, etc.) that have been used for Basti in various studies have Vata-Kaphagna property that is effective in subsiding the signs and symptoms in Gridhrasi.

In Gridhrasi, Vata specifically Apana and VyanaVayu Dushti is found. Basti stays at Pakwashaya and starts its action from there. Pakwashaya is the natural abode of Vayu. Basti conquers the vitiated Vata in its PrakrutaSthana by which Vata dwelling in other parts of the body is automatically conquered [15]. Basti removes Malasanghata [16] and thus maintains the Anulomagati of ApanaVayu. This further helps in regulation of Samana &VyanaVayu. Vata is vitiated by Laghu, Ruksha. Sheeta etc.Gunas. AnuvasanaBasti (medicated oil Enema) with its SnigdhaGuna destroys Rukshata, with GuruGuna, Laghuta and with *UshnaGuna*, *Sheetata* of *Vata* [17].

#### CONCLUSION

With this review study it can be concluded that *Basti Chikitsa* is very effective either given with or without palliative drugs for the management of Sciatica. Palliative drugs has shown just add on effect with it. *Karmabasti* and *Kalabasti* shows better results compared to 7days scheduled *Yogabasti*.

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