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A COMPARATIVE CLINICAL STUDY OF SHAMANAUSHADHI AND KATIBASTI IN THE MANAGEMENT OF GRIDHRASI W.S.R. TO SCIATICA

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ABSTRACT

Gridhrasi is a syndrome where radiating pain from low back region to lower limbs associated with tingling sensation & other discomforts along the path of sciatic nerve. The treatment available for Sciatica in modern medicine is not very satisfactory. A clinical trial was carried out in 30 patients suffering from Gridhrasi (sciatica). Kati basti (local treatment on lumbo sacral region) & oral medications like Dashmulaghanavati & Gandharvaharitaki churna found to be safe & effective in the recovery of Gridhrasi patient.

Keywords: Gridhrasi, Sciatica, DashmulaGhanavati, Kati Basti, Gandharvaharitaki churna

INTRODUCTION

The low back pain is extra ordinarily common as that of common cold. The life time prevalence of non-specific (common) low back pain is estimated at 60% to 70% in industrialized countries. Among the affected patients 40% have radicular pain.

The prevalence¹ of Sciatica ranges from 11%-40%Gridhrasi, an entity enumerated by Shula *Pradhana*, is one among the 80 types of *NanatmajaVataVyadhi*. According to *Charaka,Stambha, Ruka, Toda, & spandana* are the signs & symptoms of *vataja Gridhrasi, Aruchi, Tandra & Gaurava* are additional symptoms of *Vata-KaphajaGridhrasi*².

In general, *Vataprakopa* is prime causative factor for *gridhrasi*.

Samprapti (Pathogenesis) of gridhrasi where vyanavata which is masked by kapha. This produces restricted movements of gati or vayu gets disturbed. Kandara is affected by vitiated Doshas & the symptoms of 'Sakthanahkshepan Nigriharniyata' (i.e. restricted movement of leg) proves the involvement of AsthiSandhi, as Asthi is site of Vata & there is an inverse relation between two. As far as the

pathological aspect is concerned there is irritation of the 4th and 5th lumber roots and the 1stSacral root, which together form the Sciatica Nerve³.

The Straight Leg Raising (SLR) test is used both for diagnosis as well as for assessing the progress of treatment. *Snehana*, *swedana* & *Mridushodhana* are applied in all *vatavyadhi*. However, in *Gridhrasi sinceSnayu* & *Rakta* are involved, *Agnikarma* & *Siravyadha* are the lines of treatment⁴.

Management of Sciatica include usage of analgesics. NSAIDs for pain are having several adverse reactions surgical corrections with complications. Snehana and Swedana are considered to be prime in the treatment of Vata. Snehana includes both external and internal Oleation. External Snehana &Swedana are done by Katibasti (local treatment over lumbo sacral region), abhyanga (Massage), Pariseka (pouring the medicated oil), Avagaha (Tub bath), etc. Snehan & Swedana by virtue of their vatashamaka & DhatuPosaka (nourishment of the body elements) properties relieves the symptoms. Swedana relieves shita (cold

Sensation), *Shula* (pain) & *Stambha* (stiffness), thus helps in alleviating the sign & symptoms of Gridhrasi⁵.

KatiBasti, an external simple, non-invasive, economic & palatable treatment is found to be effective in clinical practice & oral medicines like Dashmula Ghanavati & Gandharvaharitakichurna are also found to be safe. In Allopathy, a medication like pain killer has many adverse side effects. Hence, study was conducted to evaluate the efficacy of these Samshaman Aushadhi & Kati basti in management of Gridhrasi (Sciatica).

Aims & Objectives

- 1) To evaluate the efficacy of *Dashamula Ghanavati & Gandharvaharitakichurna* in the management of *Gridhrasi*.
- 2) To compare the efficacy of shamanaushadhi i.e. Dashamula Ghanavati, Gandharvaharitakichurna & katibasti in the management of Gridhrasi.

Materials & Methods

Total 30 patients of *Gridhrasi* from among the OPD & IPD of Kayachikitsa Department of

D.Y. Patil School of Ayurveda, Nerul were selected for study.

Inclusion Criteria

Subjective Parameters

- 1) Patients in the age-group of 25-60 years.
- 2) Patients having presence of *Ruk* (pain), *Toda* (pricking sensation), *Stambha* (stiffness) & *Spandana* in the *sphik*, *kati*, *uru* & *pada*.

Objective Parameters

- 1) SLR test in affected leg as objective measure for diagnosis & assessment of improvement in treatment.
- Popliteal compression test, knee jerk & ankle jerk.

Exclusion Criteria

- 1) Patients age below 25 years & above 60 years of age.
- 2) Those having uncontrolled diabetes mellitus, cardiovascular disease & pregnant women.
- 3) Having tuberculosis of spine, renal disorders.

Table 1: Assessment criteria parameters with scoring pattern

Parameters	Severity of Sign and symptoms	Scores
	No pain	0
	Occasional pain (1 to 2 hrs per day)	1
Pain	Mild pain (Able to tolerate)	2
	Moderate pain (Hampers the routine activities)	3
	Severe pain which requires medication	4
Tingling Sensation	No tingling sensation	0
	Present sometimes	1
	Present most of times	2
	Present all the times and requires medication.	3
Tenderness	No tenderness	0
	Bearable tenderness	1
	Wincing of face on pressure	2
	Wincing of face and withdrawal of affected part on pressure	3
	Resist - touch	4

	Can bend completely	0
Forward bending	Can bend with slight pain	1
	Can bend with moderate pain	2
	Can bend with severe pain.	3
	No movement	4
SLR Test	>90 deg.	0
	60 to 90 deg.	1
	45 to 60 deg.	2
	30 to 45 deg.	3
	< 30 deg.	4

Treatment modalities

I) Internal

- 1) DashmulaGhanavati-Ingradients
- **♣** *Bilva* (Aeglemarmelos)
- Prishniparni (Urariapicta)
- **Kantakari** (Solanumsurratense)
- **4** *Gambhari* (Gmelinaribes)
- ♣ Brihati root (Solanumindicum)
- ♣ Shyonak (Oroxylumindicum)
- ♣ Shalparni (Desmodiumgangeticum)
- **♣** *Gokshur* (Tribulusterrestris)
- ♣ Patla (Stereospermumsuaveolens)
- **Agnimanth** (Premnamucronata)
- 2) GhandharavaharitkiChurna Ingredients
- **♣** *Haritaki* (Terminaliachebula)
- **♣** *Eranda* (Castor Oil)

II) External:-

KatiBasti with Tila Tail.

Kati Basti: The patients are prepared in prone position; a circular ring about 5-6 cms height & 10-12 cms diameter using black gram powder paste is made over the lumbo sacral region & fixed properly by pressing its edges from outside and inside. Warm tilataila is poured in the ring so as to cover the whole skin surface area. The temperature of the oil is maintained by changing it repeatedly & according to the heat tolerance capacity of the patient. The duration of the procedure is 30 minutes.

Grouping

Patients were randomly divided into two groups.

1) Group A

➤ Dashmoolaghanavati – 500 mg (2 tablets thrice a day) after meals.

Duration: 30 days

Anupana: With luke warm water.

➤ GandharavaharitkiChurna – 4gms at night after meals.

Duration – 15 days.

Anupana – With lukewarm water.

Follow up - 0,1st Month

2) Group B

➤ Dashmoolaghanavati – 500 mg (2 tablets thrice a day) after meals.

Duration: 30 days

Anupana: With luke warm water.

➤ GandharavaharitkiChurna – 4 gms at night after meals.

Duration – 15 days.

Anupana – With lukewarm water.

KatiBasti using 400 ml of tila tail for 15 days.

Follow up-0,1st Month

Observation & Results

Out of 30 patients, maximum(64.33%) were male, 84.33% in between age group of 25-50 years, 74% married, 80% were engaged on strenuous work, 50.01% *Vata-Kaphaprakriti*

72% Krurakostha & 80% were non-vegetarians.

Statistical analysis was done using Z-test as both the groups were symmetrical.

The patients treated with *Dashmoolaghanavati* & *Gandharavaharitaki Churna* (Group A)

showed moderate improvement whereas in Group B i.e. patients treated with *Dash-moolaghanavati*, *Gandharavharitaki Churna* & *Kativasti* showed marked improvement on the sign & symptoms of Gridhrasi (Table 2)

Table 2: Effect of treatment in Group A& B

Group A	Mean							
Parameters	BT	AT	Difference	%	SP	SE	't'	P
Pain	2.533	1.4	1.133	44.73	0.3518	0.090	12.47	< 0.001
Tenderness	1.866	1	0.866	46.42	0.3518	0.090	9.539	< 0.001
Tingling sensa-	2.333	1.266	0.867	40.62	0.3518	0.0908	9.539	< 0.001
tion								
Forward bend-	2.406	1.33	1.13	45.94	0.351	0.09	12.47	< 0.001
ing								
SLR Test	2.2	1.066	1.13	51.51	0.35	0.09	12.47	< 0.00

Group B								
Parameters	BT	AT	Difference	%	SP	SE	't'	P
Pain	3.33	1.2	1.86	59.57	0.516	0.133	14	< 0.001
Tenderness	2.860	1	1.866	65.11	0.351	0.90	20.54	< 0.001
Tingling Sensa-	2.733	0.866	1.866	68.29	0.516	0.133	14	< 0.001
tion								
Forward Bend-	2.86	0.53	2.33	81.39	0.723	0.1868	12.48	< 0.001
ing								
SLR Test	3.333	1	2.33	70	0.617	0.159	14.64	< 0.001

DISCUSSION

Gridhrasi (Sciatia) is one of the "*Nanatma-jaVyadhi* of *Vata*" in the classic.⁶

The ingredient drugs of the formulations that administered orally have *Ushnavirya* & *Kapha-Vatashamaka* properties. This helps to correct *Vata&Kapha* which are the main factors involved in the *samprapti* of *Gridhrasi*.

The drug combination of *Dash-moolaghanavati* acts as *VataharaSulhara* (relieves pain) & *Srotosodhaka* (cleanses body channels) *Gandharavaharitki Churna* acts as *Vatahara* and has purgative and laxative action. It evacuates bowls and removes toxins from body.

There are various properties of *sne-hana* such as *Snigdhaguna* which lubricates

the body and acts as vata shaman, Guruguna which acts as vatahara, pustikara and as an anabolic agent, Shithaguna which enables refreshing and cooling effect on the body, pacifies thirsty feeling, burning sensation, stops perspiration etc., Mriduguna which brings softness in impaired body channels called *sro*tas helping to move the vitiated doshas to their respective locations for subsequent elimination by sodhan therapies, Dravaguna helps to bring the moistening effect in the body and vilayana of vitiated harmful doshas, Pichhliguna helps in the integrity-firmness of body parts, Saragunahelsp in moving vitiated doshas which are stand still to move out, Mandaguna causes sluggishness of the activity of snehadravya & Sukshamaguna is for quick and easy entry in minute srotamsis to effect cleansing action.

Similarly, There are various properties of swedana such as Ushna acts as Stabdahara (Stifffness Remover), Tikshna acts as Kaphavatanashak, Sara acts as anulomakara, Snigdha acts as vatahar, Mardhava&snehakruta, Ruksa acts as Drudata, Kathinya&Kaphahara, Sukshama having penetrative action, Drava acts as vilayana&kledana, Sthira specially useful in ekangaswedana, & Guru as brihmana, Pusti etc.

Kativasti, a kind of heat application through oily substances, have penetration through the skin and reaches to the site of lesion and increases the circulation in the region pacifies one of the primary sites of vata, relieving pain, soreness, tension and restoring flexibility.

Tilataila which is used in Kativasti as Vatahara in property which is effective for the correction of Vata. Tilataila is madhur rasa and vipaka, balya and rasayan in karma⁷, It nourishes and strengthens all the dhatus. Thus alleviates vata. Snigdha and Guruguna decreases rukshata of vata and with the help of ushna ,guna and virya. It alleviates vata. The vikasi property reduces the spasm, sukshamata dilates the channels and vishada prevents stickness of channels.

The combined effect of drug i.e. *Dashmoolaghanavati* & *Gandharvaharitaki* with the procedure (*Kativasti*) combination of *Snehana*, *Swedana* helped in relieving the sign & symptoms.

CONCLUSION

Both treatments have effect on Gridhrasi. Although *Dashmoolaghanavati* with *Gandharavaharitaki churna* showed good results, *Dashmoolaghanavati*, *Gand-*

haravaharitaki churna & Kati basti provided better relief of the signs and symptoms. Shamana therapy does not appear to be solely responsible for the end result. Therefore, Kati Basti & Shamana drugs both have better effect in recovery of patient.

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