

AYURVEDIC MANAGEMENT FOR *GRIDHRASI* WITH SPECIAL REFERENCE TO SCIATICA- A CASE REPORT

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ABSTRACT

Gridhrasi (sciatica) is one among *Vata-vyadhi* caused by aggravated *Vata Doshas*. It is characterized by burning, stinging or numbing pain that is felt in the buttock, thigh, leg or foot. It may or may not be associated with low back pain. Purpose of the study was to ameliorate the clinical manifestation of *Gridhrasi*. In this case report patient who suffered from *Gridhrasi* of the left leg since one year was treated with combined *Ayurvedic* regimen. *Patrapinda Swedana* for 21 days and *Erandmuladi Niruhabasti* as *Karma Basti* schedule were used as *Panchakarma* procedure. *Ekanagaveera Rasa* 250mg B.D., *Dasmoola Kwatha* 40ml B.D., *Ashwagandha Churna* 3g B.D. and *Triyodashanga Guggulu* 2 Tablets B.D., were given for 1 month as oral medicine. Walking distance and SLR test were taken for assessment parameter, VAS score was adopted for pain. Before treatment patient was not able to walk even 4 to 5 steps due to severe pain and his SLR were 30° of left side. After one month treatment he can walk up to 500 meters without any difficulty, SLR was changed to 90° and patient had got 75% relief in pain. This case report showed that combined *Ayurvedic* regimen is potent and safe in the treatment of *Gridhrasi*.

Keywords: *Gridhrasi*; Sciatica; *Ayurvedic* Management

INTRODUCTION

Gridhrasi (Sciatica) is a disorder in which low back pain is found, that spreads through the hip, to the back of the thigh and down the inside of the leg. There are many causes for low back pain, however true sciatica is a symptom of inflammation or compression of the sciatica nerve. The sciatica nerve carries impulses between nerve roots in the lower back and the muscles and nerve of the buttocks, thighs and lower legs. Compression of a nerve root often occurs as a result of damage to one of the discs between the vertebrae. In some cases, sciatic pain radi-

ate from other nerves in the body. This is called referred pain. Pain associated with sciatica often is severe, sharp and shooting. It may be accompanied by other symptom, such as numbness, tingling, weakness and sensitivity to touch.

Although low back pain is a common condition that affects as many as 80-90% of people during their lifetime, true sciatica occurs in about 5% of cases. Sciatica is more common between 30 and 50 years of age¹. Pain in sciatica is very severe, which makes the patient difficult to walk; hampering the daily

routine of the individual. No satisfactory treatment available in modern medical science, patients depends on pain killers which has temporary action.

Case Report:

A male patient with average built of age 49 yrs. was admitted in IPD male ward, Department of *Kayachikitsa*, Y.M.T. *Ayurvedic* College Kharghar Navi Mumbai with

Chief complaints: Pain in low back region since one year

Radiating pain to left lower limb since one year.

Tingling sensation and numbness in his left lower limb since 10 months.

On examination-

Dashvidha Pariksha

Prakriti: Vaat-kaphaja

Vikriti:

Hetu: Vaat vardhak ahara vihara

Dosha: Vaat Pradhan

Dushya: Ashti-Majja

Prakriti: Sukhasadhya

Desha: Anup

Bhumi Anup

Rog Adhithan: Kati

Kaal: Adana kala and Vyakta awastha

Bala: Madhyama

Saaratah: Madhyam

Samhanan: Madhyam

Pramaantah: Sama

Satmyatah: Sarva rasa satmya

(madhur, katu rasa)

Sattwatah: Madhyam

Aahaar shakti:

Abhyaharan- Avara

Jaran- Avara

Vyayam shakti:

Vayatah:

Avara

vaya- (49 years)

Astavidh Pareeksha

Naadi: 80 /min, pitta-kaphaja

Mutra: Prakruta

Mala: Avastambh

Jihwa: Niraama

Shabda: Prakrit

Sparsha: Ushna

Drik: Pitta

Aakriti: Prakrit

SAMPRAPTI GHATAK

Dosha: Vaat

Dushya: Asti-Majja

Srotas: Astivaha-Majjavaha

Samutthan: Kati

Adhishthan: Kati,

General Physical Examination

BP 120/80 mmHg

PR 80 beats/min

RR 18/min

Temperature Afebrile

General condition Good

Pallor Absent

Icterus Absent

Cynosis Absent

Clubbing Absent

Lymph node not palpable

Oedema Absent

Local Examination: Inspection: Gait antalgic gait

Lumbar scoliosis was also present

SLR was 30° of left side

Investigation: Hb. 11.5 g%,

TLC 8400 th/ul,

ESR 09 mm/hr,

Neutrophil 60%,

Lymphocytes 34%,

Eosinophil 2%,

Monocytes 2%,

Basophil 0%,

RBS 90.4mg/dl. All the investigation was in normal limit. HIV,

MRI findings confirming the presence of severe thecal sac compression and mild narrowing of both neural foramina at L4-L5 due to diffuse circumferential bulging and posteriorly extruding disc.

Ayurvedic Treatment given.: *Patrapinda Swedana* for 21 days and *Erاندmuladi Niruhabasti* as *Karma Basti* schedule were used as *Panchakarma* procedure. *Ekanagaveera Rasa* 250mg B.D., *Dasmoola Kwatha* 40ml B.D., *Ashwagandha Churna* 3g B.D. and *Triyodashanga Guggulu* 2 Tablets B.D. were given for 1 month as oral medicine. Satisfactory results were found after one month of treatment.

DISCUSSION

Gridhrasi is a *Shoolapradhana Nanatmaja Vata-vyadhi*, intervening with the functional ability of low back & lower limbs. In this disease onset of *Ruk* (pain), *Toda* (numbing pain) and *Stambha* (stiffness) is initially in *Kati* (lumbosacral region) and radiates distal to *Pristha*, *Janu*, *Jangha* till *Paada*². *Arundutta* in his commentary defined clearly that due to *Vata* in *Kandara* (tendon) the pain is produced at the time of raising leg straight and it restricts the movement of thigh³. This is an important clinical test for the diagnosis of sciatica known as SLR. In *Madhava Nidana*, *Dehasyapi Pravakranta* (Lumbar scoliosis) is considered in *Vataja* type of *Gridhrasi*⁴.

A similar condition in modern parlance is sciatica. It is the distribution of pain along the course of the sciatic nerve or its component nerve roots is characteristic. Radiating deep seated cramping pain in buttocks followed with numbness and paresthesia in lower extremities favors the diagnosis. Restricted SLR test consolidates the diagnosis clinically and even the illness can be confirmed by imaging techniques. Prolapse of intervertebral disc, external mechanical pressure and degenerative changes of the lumbar spine are the commonest cause for sciatica. In *Charaka Samhita*, *Gridhrasi* is counted as a *Swedana Sadhya Vyadhi*⁵ and *Basti Karma* also in-

dicated in *Gridhrasi Roga*⁶. Taking consideration of above fact a composite treatment plan was adopted. *Patrapinda Swedana*⁷ for 21 days and *Erاندmuladi Niruha Basti*⁸ as *Karma Basti* schedule were used as *Panchakarma* procedure. From the *Shamana* point of view various medications that soothe the severity of pain and improve functional ability are adopted in *Gridhrasi* as *Ekanagaveera Rasa*⁹ 250mg B.D., *Dasmoola Kwatha*¹⁰ 40ml B.D., *Ashwagandha Churna*¹¹ 3g B.D. and *Triyodashangaguggulu*¹² were also given for 1 month as oral medicine.

Before treatment patient was not able to walk even 4 to 5 steps due to severe pain and his SLR were 30° of left side. After one month treatment he can walk up to 500 meters without any pain and his SLR was changed to 90° after treatment and patient had got 75% relief in pain.

Patrapinda Swedana is a form of *Sankara Swedana*. The word *Sankara* as it suggests the mixture of different medications or drugs when used in form of *Pinda* or *Pottali*, it is called as *Pinda Swedana*. The probable mode of action of *Patrapinda Swedana* can be explained as- Thermal effect, Drug effect, Procedural effect.

Basti is the best treatment modality in the management of *Vata-vyadhi*¹³. Mixture of *Madhu*, *Saindhava Lavana*, *Sneha*, *Kalka*, *Kashaya* and *Avapa Dravya* are administered in the form of *Niruha Basti*. *Erاندmuladi Niruha Basti* Which contains 34 drugs among them maximum number *Dravyas* to *Ushna Veerya*, which is indicated in *Shoola* of *Jangha*, *Uru*, *Paada* and *Pristha* region and it is indicated in *Kapha-avruta* conditions also.

The *Shamana* like therapy generally employed to restore *Agni* and pacify the excited *Dosha*. When we consider *Samprapti* of *Gridhrasi* due to *Apatarpana* or *Abhighata* where *Vata Prakopa* takes place due to *Rikitata* of *Srotas* or damage of vital points. Here along with *Deepana Pachana* properties, the drugs having *Rasayana* and *Balya* property, that replace the damage nerve tissue and *Vata Shamaka* property were used i.e. *Triyodasanga Guggulu*, *Ashwagandha Churna*, *Ekanagaveera Rasa* and *Dasmoola Kwatha*.

In this Ayurvedic Management satisfactory relief was found in signs & symptoms of *Gridhrasi* and it may be adopted for other cases of *Gridhrasi* or sciatica & for further research in the management of *Gridhrasi* (sciatica).

CONCLUSION

This case report showed that combined *Ayurvedic* regimen is potent and safe and effective in the treatment of *Gridhrasi*. There were no adverse effects found in combined *Ayurvedic* regimen.

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