**Case Report** 

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# THE EFFECT OF ASTHAPADA PANCHALOHA SHALAKA AGNIKARMA IN THE PAIN MANAGEMENT OF GRIDHRASI WSR TO SCIATICA: A CASE STUDY

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#### ABSTRACT

*Gridhrasi* is one of the "*Nanatmaja Vyadhis of Vata*". Sedentary lifestyle, improper sitting posture, continuous and over exertion, jerky movements during travelling and sports, produce structural abnormality in spinal cord. *Vata* is the prime *dosha* in the causation of *Gridhrasi*. The vitiated *Vata dosha* get localized in the sphik, *Kati* region. When *vata* associated with *kapha* producing *Vata kaphaj Gridhrasi*. *Gridhrasi* is *shoolpradhan vyadhi*. The pathognomonic sign of sciatica is radiating pain from low back to foot. Both medical and surgical interventions are available but there are no satisfactory results. We have found in classic *Ayurvedic* literature that *Agnikarma* is one of the treatments of Sciatica (*Gridhrasi*). Purpose of the study was to evaluate the efficacy of *Agnikarma* therapy performed by *Asthapada panchaloha shalaka* in case of *Gridhrasi*. Hence in this case study 48 yrs female patient reported with sign and symptoms of pain, pricking sensation and stiffness in the gluteal region, lumbar, thigh, knees, calf region and feet and unable to raise the hip. After *Agnikarma*, we got marked improvement in signs and symptoms of Sciatica within couple of hours and also found moderate improvement in various clinical test of Sciatica like straight leg raise test Lasegue's test.

Keywords: Gridhrasi, Agnikarma, Sciatica, Asthapada panchaloha shalaka.

#### INTRODUCTION

In Ayurvedic texts, Gridhrasi is Vata dominant disorder. Where as in this disease the patient walks like vulture (Gridhra) and his legs become tense and slightly curved so due to the resemblance with the gait of a vulture, Gridhrasi term might have been given to this disease. The symptoms of *Gridhrasi* initially affect *sphik (nitambha pradesha)* as well as posterior aspect of *Kati* and then gradually radiates to posterior aspect of *Uru, Janu, Jangha and pada*<sup>1</sup>. The symptoms are - *Stambha, Toda, Ruk, Muhuspandana. Acharya Sushruta* opines that when two *kandara* in the leg get affected with *Vata dosha*, they limit the extension of leg, resulting in *Gridhrasi*. On the basis of signs and symptoms *Gridhrasi* can be equated with the disease Sciatica in modern parlance. Sciatica is basically a symptom that arises due to compression and inflammation of sciatic nerve. On examination when performing SLR test, the patient is positioned in supine without pillow, the examiner lifts the patient's leg while knee is straight, if patient experiences pain and more specially pain radiating down the leg, when the straight leg is at an angle of between 30 and 70

degrees then test is positive. In general, an estimated 5%-10% of patients with low back pain have sciatica. The annual prevalence of disc related sciatica in the general population is estimated at  $2.2\%^2$ .

Sthamba is effectively relieved by Agnikarma. Research studies show that the diseases treated with Agnikarma are less recurrence rate<sup>3</sup>. The procedure of Agni karma eliminates the fear of bleeding with minimal scaring. It also yields quick relief. Acharva Sushruta and Acharya Vagbhata have described 4 types of Agnikarma and 6 types of agnikarma respectively. The classification done on the different shapes of shalaka as well as method of performing Agnikarma. According to Astanga sangraha he explained Asthapada and swastika akriti<sup>4</sup>.various metal instruments can be used for Agnikarma therapy in Ayurvedic literature but at the end "Samvak Dagdha Vrana"<sup>5</sup> (Therapeutic burn) should be obtained at the site of Agnikarma performed by any dahana upakaranas.

# PATIENT INFORMATION

**History Of Present Illness:** A female patient aged 48 yrs visited to Shalya Tantra OPD of SJIIM hospital, Bangalore on 03-08-2018. She presented with the complaints of radiating pain in the low back region to left lower limb since 20 days.

# **CHIEF COMPLAINTS**

Radiating pain from lumbar to thigh, knee, calf & foot region in the past 20 days.

Difficulty in walking in the last 4 months.

#### **Past History**

N/H/O HTN & DM.

#### **Family History**

Nothing significant.

Local Examination

# **Assessment Criteria**

Subjective parameters

# Table 01

Sl no	Symptoms
1	Ruk
2	Toda
3	Stambha
4	Spandana in sphik, Kati, uru, janu, jangha and pada

• *Ruk* (pain)

Pain - Pain is assessed by McGill pain score index<sup>-</sup> McGill pain score index<sup>6</sup>

Table 02:

Grading	Pain
0	None
1	Mild
2	Discomforting
3	Distressing
4	Horrible
5	Excruciating

#### Table 03: Toda

Grading	Pricking pain
0	No intermittent pain
1	Sometimes for 5-10 mins
2	Daily for 10-30 mins
3	Daily for 30-60 mins
4	Daily more than 1hr

#### Table 04: Stambha

Grading	Stambha
0	Absent
1	Present

**Table 05:** Spandana in sphik, kati, uru, janu, jangha and pada

Grading	Spandana
0	Absent
1	Present

# **Objective parameters**

**Table 06:** Straight Leg Raising Test<sup>7</sup> (30 – 70 DEGREE)

Grading	Degree
0	Above 70 degree
1	60-70 degree
2	50-60 degree
3	40-50 degree
4	30-40 degree

Table 07: Lasegue's Si	gn <sup>8</sup>
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Grading	Lasegues sign
0	Absent
1	Present

Gait of the patient: Limping gait. SLR TEST: positive at 30 degree.

LASEGUE'S SIGN: Positive.

Power in the Left Lower Limb was slightly lesser than right side.

# MATERIALS AND METHODS

Centre of the study: SJIIM HOSPITAL BENGALURU

Materials: Asthapada Panchaloha shalaka.

#### Purvakarma

- The patient was explained about the *Agnikarma* procedure & written consent took from the patient.
- Advised to take *Snigdha* and *Pichhila Ahara* prior to the procedure.
- Patient made to lie in prone position over the minor OT table. Lumbar region cleaned with sterilized gauze piece.
- The most tender point marked with a marker in the lumbar region.

# Pradhana karma

- The *Asthapada panchaloha shalaka* is heated to red hot.
- Asthapada type Agnikarma made on marked point till samyak dagda lakshanas (Shabda pradurbhava, Durgandhata, Twaksankocha) achieved<sup>9</sup>.
- Total 3 sittings of treatment given at 7 days interval each.

# Pashchat Karma

- Immediately after *Pradhana Karma, madhu and sarpi* is applied over the area of *Agnikarma* by using sterilized gauze pieces.
- Patient allowed going home with advice not to cover the area of Agnikarma with cloth or bandage. She is advised not to use water over that part for at least 24 hours and to avoid *Vatakara Ahara and Vihara*.

# **OBSERVATION**

Patient has got marked improvement in symptoms like stiffness and shooting pain. Stiffness is almost gone and has also got relief in numbness and tingling sensation. Moderate improvement in clinical examinations of Sciatica is observed. SLR TEST before treatment it was 30 degree after treatment it was of 70 degree.

#### Table 08:

SLR TEST	BEFORE	AFTER
Left side	30degree	70degree

#### Table 09:

Lasegues Sign	BEFORE	AFTER
Left Side Of Lower Limb	Present	Absent

# DISCUSSION

Probable mode of action of Agnikarma: According to Gate Control Theory<sup>10</sup>, Gate control system is located at the junction of first and second neuron. Large diameter fiber 'AB' is stimulated by touch and temperature. 'C' fibre is stimulated by pain. If 'AB' fiber once gets stimulated, blocks the Gate mechanism, then pain from 'C' fibre does not pass through the Gate to reach to the brain for perception. Thus, by Agnikarma pain perception is not felt to the patient. Moreover, Heat Induces metabolism at muscle fibre cells and removes waste products and release the stiffness of the muscles.

The Asthapada shalaka have larger circumference and more effectiveness when compared to bindu shalaka, as bindu will be having very less circumference and transformation of heat will be less, so *Asthapadashalaka* is more effective as it has larger circumference.

The mechanism of action of *Agnikarma* is still obscure. *Agnikarma* acts on a multi factorial level in the body. Mainly it is indicated in the disease caused by *Vata* and *kapha* because of its *teekshna, ushna, sukshma, vyavayi, vikashi* properties to remove *srotorodha*.

# CONCLUSION

This case report showed that *Agni karma* therapy is potent, safe and effective in the treatment of Sciatica. The number of *Agni karma* site required per sitting is considerably less. The Research on the subject is the first ever attempt in *Ayurveda* field. The procedure of *Agni karma* eliminates the fear of bleeding with minimal scaring. It also yields quick relief.

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