

INTERNATIONAL **AYURVEDIC MEDICAL JOURNAL**







Research Article ISSN: 2320-5091 **Impact Factor: 6.719**

EFFICACY OF AABHADI CHURNA ALONG WITH PATHYA AAHARA AND VIHARA IN GRIDHRASI W.S.R. TO SCIATICA - A RESEARCH ARTICLE

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https://doi.org/10.46607/iamj1209112021

(Published Online: November 2021)

Open Access

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Article Received: 25/10//2021 - Peer Reviewed: 05/11/2021 - Accepted for Publication: 06/11/2021



ABSTRACT

Nowadays due to changing lifestyle, lack of physical activity and long sitting postures lead to a disease called Gridhrasi. Symptoms of Gridhrasi closely resemble the clinical features of Sciatica. Sciatica is a severely painful condition where the sciatic nerve of one or both legs is involved. This study was undertaken to evaluate the clinical efficacy of Aabhadi Churna along with Pathya Aahara and Vihara in Gridhrasi with special reference to Sciatica. The study was conducted on 60 patients who fulfilled the diagnostic and inclusive criteria of sciatica. The clinical assessment was based on subjective parameters (Ruka, Stambha, Toda, Spandana) and objective parameters (Straight leg raising test, standing time and walking time). The subjective and objective parameters before and after treatment were analyzed by using the student "t" test. The t-test results were highly significant for both the groups when the therapy effect was compared before and after the treatment. The inter-group comparison showed that the Group-B treatment method where 84% of patients showed moderate to maximum improvement method was better when compared to Group-A where this percentage was 67% only.

Keywords: *Gridhrasi*, Sciatica, *Pathya Aahara*, *Vihara*, *Aabhadi Churna*.

INTRODUCTION

Ayurveda is the oldest medical system in the world. Long healthy life is a wish of every being since antiquity. Ayurveda is the science of life with the aim of attaining health and curing diseases of the ill. According to Charak Samhita, the aim of Ayurveda is to preserve the health of a healthy person and to treat a person who becomes ill. Ayurveda not only cures diseases but also prevents diseases from coming.2 Gridhrasi is one of the major diseases of the modern era. In the Modern era with continuous changing lifestyles and environment, changed diet habits, human has become the victim of many diseases caused by unwholesome dietary habits and Gridhrasi is one of them. Gridhrasi is considered as one of the important *Vatavyadhi* and mainly caused by vitiated Vata Dosha. Vata is one of the Tridosha. The Vata holds the organs of the body. It originates all the movements to the body by dividing it into five parts Praan, Udaan, Vyan, Samaan & Apana. Vasti (bladder), Purisadhan (rectum), Kati, both Uru (both thighs), both legs and (Asthi & Sandhi's) bones are the places of Vata. There is a special place of Vata which is Pakawasaya. 3 Gridhrasi is described in 80 types of Nanatmaja Vatavikara.4 Thus Vata is omnipresent. Although the air is pervading the whole body, yet the *Vata* remains particularly dynamic in the above places. The deformation of Vata has a special effect on this place. Vyana Vayu is responsible for five kinds of movement i.e., Extension, flexion etc. in normal conditions. So, when Vyana Vayu is involved in the manifestation of Gridhrasi, all the function of limbs gets affected along with pain. In all Ayurvedic literature, there is no direct reference regarding Nidana, but it is included in Vataja Nanatmaja Vyadhi where general Vata Prakopaka Hetus are to be considered. Gridhrasi is one of the major problems in the present era. As many as 40 per cent of people get it during their life, and it becomes more frequent as you age. 5 Gridhrasi as mentioned in Ayurvedic texts has a very close resemblance with Sciatica available in modern texts. Gridhrasi (Sciatica) starts from the hip & gradually comes down to the waist, back, thigh, knee, shank & foot and affects these parts with stiffness, distress & piercing pain, and frequent quivering.6

Aabhadi Churna was mentioned by Aacharya Yogratnakara for the Vatavyadhi Chikitsa, which contains Rasna, Ashwagandha, Guduchi, Shatavari, Ajamoda, and Sauth etc. These drugs have majorly contained with Vatakapha Shamak property and Ushna Veerya, which are beneficial for Vata Dosha and described for Sciatica. The primary requisites of living an Ayurveda-inspired healthy life include a wholesome diet (Pathya Aahara) and a good lifestyle (Pathya Vihara). If we are indulging in these are, we can prevent a lot of diseases, lead a happy life, and perform optimally every day. With the Ayurvedic way of life, we can beat diseases, which is one of the underlying causes of an array of health troubles that people suffer from in this modern world.

AIM & OBJECTIVES: To observe and evaluate the effect of *Aabhadi Churna* in the management of *Gridhrasi*, and to evaluate the efficacy of *Aabhadi Churna* along with *Pathya Aahara* and *Vihara* in the management of *Gridhrasi* W.S.R. To Sciatica.

MATERIALS AND METHODS: A total of 60 patients who fulfil the diagnostic and inclusive criteria were randomly selected from O.P.D. of Shri N.P.A. Govt. Ayurveda College & Hospital, Raipur (C.G.), grouped into two groups.

Inclusion and Exclusion Criteria Inclusion Criteria

- Patients between 25 to 65 years of age with signs and symptoms of *Gridhrasi* were included in the study.
- Patients presenting with classical signs and symptoms of *Gridhrasi*.

Exclusion Criteria

- Patients below 25 years and above 65 years of age.
- The patients suffering from CA spine, tuberculosis, CA of Lumbo-sacral plexus, leprosy etc.
- Pregnancy.
- Uncontrolled diabetes mellitus.
- Patients with a history of any direct or indirect trauma to the spine.

Diagnostic Criteria: Patients having cardinal symptoms of the disease like *Ruk*, *Toda*, *Stambha*, *Spandana* in the *Sphik*, *Kati*, *Uru*, *Jaanu*, *Jangha*, *Pada* etc.

Investigations:

- Complete Blood Count- Hb gm%, T.L.C., D.L.C., E.S.R.
- Urine analysis- Routine and Microscopic examination.
- Radiological Examination if required- X-ray of the lumbosacral region.

STUDY DESIGN

Group A: Patients were administered *Aabhadi Churna* (5gm.) twice a day with *Ushnodaka Anupana*.

Group B: Patients were administered *Aabhadi Churna* (5gm.) twice a day with *Ushnodaka Anupana* along with *Pathya Aahara* and *Vihara*.

Posology: *Aabhadi Churna* – 5 gm. / BD, With – *Ushnodaka Anupana* (after meal).

Duration of the study: The duration of the study was 90 days in both groups.

Follow-up: Follow-up was done for one month.

Composition of *Aabhadi churna*⁷

Ingredients, botanical name, quantity use in *Aabhadi Churna*: (Yogratnakara-Vatavyadhi Chikitsa- 1-5)

Table 1

S.no.	Name	Latin Name	Matra
1.	Aabha	Acasica arabica	1 part
2.	Rasna	Plucha lansiolata	1 part
3.	Guduchi	Tinospora cardifolia	1 part
4.	Shatavari	Asparagus recemosa	1 part
5.	Shunthi	Gingeber Officinalis	1 part
6.	Shatpupsha	Anethum sowa	1 part
7.	Ashwagandha	Withenia sominifera	1 part
8.	Hrivera	juniperous communities	1 part
9.	Vidhara	Argyrea speciosa sweet	1 part
10.	Yavani	Roxburghiamum ammi	1 part
11.	Ajmoda	Apium graveolens	1 part

CRITERIA FOR ASSESSMENT

To assess the effect of therapy, all the signs and symptoms were given scoring depending upon their severity which is as follows:

Subjective assessment

- 1. Ruka (Pain)
- "Severe Continuous severe pain" 3
- "Moderate Frequent mild pain" 2
- "Mild Pain after exertion" 1
- "No pain" 0
- 2. Stambha (Stiffness)
- "Severe Daily for more than 2 hours" 3
- "Moderate Daily for 1-2 hours" 2
- "Mild Sometimes for 5 min.-1 hours" 1
- "No stiffness" 0
- 3. Toda (Pricking Sensation)
- "Severe Does not allow passive movement" 3
- "Moderate Pain with winching of face" 2

- "Mild Pain without winching of face" 1
- "No Absence of Toda" 0
- 4. Spandana (Twitching)
- "Severe Daily for more than 1 hour" 3
- "Moderate Daily for 30-60 minutes" 2
- "Mild Daily for 10-30 minutes" 1
- "No Twitching" 0

Objective assessment

- 1. SLR Test
- "Below 30°" 3
- " 30° 45° " 2
- "45°- 60°"- 1
- "Above 60°"- 0
- 2. Standing time
- "Below 10 minutes"- 3
- "For 10 19 minutes" 2
- "For 20 29 minutes" 1
- "For 30 minutes & above" 0

3. Walking time (To cover 21 meters)

- "Up to 41 60 secs" 3
- "Up to 31- 40 secs" 2
- "Up to 21 30 secs" 1
- "Up to 20 secs" 0

TOTAL EFFECT OF THERAPY

Considering the overall improvement which has been shown by the patient in signs and symptoms, the result of therapy has been assessed as below.

- Maximum Improvement More than 75%
- Moderate Improvement –50% to 75%
- Mild Improvement –25% to 50%
- No Improvement Less than 25%

EFFECT OF THERAPY

Table 2: Effect of therapy on the various sign and symptoms in 30 patients 0f Group - A

S.	Symptoms	Mean		Mean	Relief	SD	SE	T-Value	P-	Re-
No.				Diff.	%	(+/-)	(+/-)	(+/-)	Value	mark
		BT	AT							
1	Ruka (Pain)	2.467	0.667	1.800	72.97%	0.925	0.169	10.661	0.000	HS
2	Stambha (Stiffness)	2.100	0.633	1.467	69.84%	0.776	0.142	10.351	0.000	HS
3	Toda (Pricking Sensation)	1.267	0.200	1.067	84.21%	0.907	0.166	6.440	0.000	HS
4	Spandana (Twitching)	1.167	0.300	0.867	74.29%	0.860	0.157	5.517	0.000	HS
5	S.L.R. Test	2.067	0.567	1.500	53.23%	0.820	0.150	10.019	0.000	HS
6	Standing Time	1.933	0.900	1.033	53.45%	0.718	0.131	7.878	0.000	HS
7	Walking Time	1.667	0.900	0.767	46.00%	0.568	0.104	7.389	0.000	HS

Table 3: Effect of therapy on the various sign and symptoms in 30 patients 0f Group - B

S.	Symptoms	Mean		Mean	Relief	SD	SE	T-Value	P-	Re-
No.				Diff.	%	(+/-)	(+/-)	(+/-)	Value	mark
		BT	AT							
1	Ruka (Pain)	2.467	0.667	1.800	72.97%	0.925	0.169	10.661	0.000	HS
2	Stambha (Stiffness)	2.100	0.633	1.467	69.84%	0.776	0.142	10.351	0.000	HS
3	Toda (Pricking Sensation)	1.267	0.200	1.067	84.21%	0.907	0.166	6.440	0.000	HS
4	Spandana (Twitching)	1.167	0.300	0.867	74.29%	0.860	0.157	5.517	0.000	HS
5	S.L.R. Test	2.067	0.567	1.500	53.23%	0.820	0.150	10.019	0.000	HS
6	Standing Time	1.933	0.900	1.033	53.45%	0.718	0.131	7.878	0.000	HS
7	Walking Time	1.667	0.900	0.767	46.00%	0.568	0.104	7.389	0.000	HS

RESULT OF THERAPY

Table 4

	GROUP A		GROUP B		TOTAL		
	No. of Patient	Percentage %	No. of patient	Percentage %	No. of patient	Percentage %	
Maximum improvement (75% and above)	5	16.67%	8	26.67%	13	21.67%	
Moderate improvement (50 to 75%)	15	50.00%	17	56.67%	32	53.33%	
Mild improvement (25 to 50%)	10	33.33%	5	16.67%	15	25.00%	
No Improvement (<25 %)	0	0.00%	0	0.00%	0	0.00%	
Total	30	100.00%	30	100.00%	60	100.00%	

DISCUSSION

Gridhrasi is one of the common diseases which is observed among people of various age groups. For the clinical study, 60 patients were selected across various gender, age groups and professions to account for any business. These 60 patients were categorized into group-A and group B and analysis was conducted. The statistical comparison for effect of therapy i.e., before and after treatment efficacy was carried out through paired t-test. The t-test signifies the statistical difference for the therapy effect on various signs & symptoms of Sciatica. For group-A, the calculated t-values obtained for symptoms Ruka, Stambha, Toda, Spandana, SLR Test, standing time & Waking time were 15.27, 8.80, 5.86, 6.95, 9.95, 9.28 & 5.46 respectively and the p-value for all the symptoms was less than 0.01 showing that therapy effect was highly statistically significant. Since the p-value for all the symptoms was <0.01 (99% confidence interval), it can be said that the corresponding pain after the treatment was reduced significantly & the effect of therapy was statistically highly significantly for Group A. For Group B, the calculated t-values obtained for symptoms Ruka, Stambha, Toda, Spandana, SLR Test, standing time & Waking time were 10.66, 10.35, 6.44, 5.51, 10.02, 7.87 & 7.39 respectively and the p-value for all the symptoms was less than 0.01 showing that therapy effect was highly statistically significant. Again, since the p-value for all symptoms is <0.01, with 99% confidence it can be said that the corresponding pain after the treatment was reduced significantly & the effect of therapy was statistically highly significant for Group-B also. Thus, for both Group-A & B treatment was effective, and improvement was observed in the patients. The overall effect across Group-A & Group-B was carried out by marking the maximum, moderate & mild improvement in the patients after the treatment. Treatment was completed for 30 patients of *Gridhrasi* (Sciatica) for Group-A, and it was observed from only 5 patients showed Maximum Improvement (>=75%). The majority of patients i.e., 15 showed Moderate Improvement (50%-75%) and 10 patients showed Mild Improvement (25-50%). No Improvement (<25%) case was observed in none of the patients. Similarly, for group B, out of 30 diagnosed patients of Sciatica for Group, Maximum Improvement (>=75%) was observed in 8 patients, Moderate Improvement (50%-75%) was observed in 17 patients and Mild Improvement (25%-50%) was observed in 5 patients. Again, none of the patients showed No Improvement (<25%). At an overall level, out of 60 patients, Maximum Improvement (>=75%) was observed in 13 patients, Moderate Improvement (50%-75%) was observed in 32 patients and Mild Improvement (25%-50%) was observed in 15 patients. Again, none of the patients showed No Improvement (<25%). This indicates that treatment was effective for both groups as a significant number of patients (20 from Group-A and 25 from Group-B) marked maximum & moderate improvements. However, the inter-group comparison shows that the Group-B treatment method was more effective compared to Group-A as 84% of patients from Group-B showed moderate to maximum improvement while for Group-A the percentage was 67% only.

PROBABLE MODE OF ACTION OF AABHADI CHURNA:

In Gridhrasi, Vata specifically Apana and Vyana Vayu Dushti are found but most of the time Kapha remains associated with Dosha. In the combination of Aabhadi churna, most of the drugs have Ushna Virya therefore it has Vatakapha Shamak properties. Ushna veerya drugs remove the Avarana of Vayu and retain its normal way. Content like Aabha. Rashna, Guduchi, Hrivera etc. have Katu, Tikta, and Kashaya Rasa which are also Vatakapha Shamaka. Guduchi, Shatavari, Shunthi etc. has Madhur Vipaka and Guru, Snigdha Guna properties that remove Rukshata from Srotasa. Tikshna Guna removes Shrotovarodha and results in Vataanulomana. Some of the drugs also have Vedanasthapana property i.e., Guduchi, Shatavari, Ashwagandha, Yavani, Ajmoda etc. All the above properties are very useful to alleviate the Vata which is aggravated by Dhatukshaya, Vata Prakopaka Aahara & Vihara, Panchakarma Vyatikarma, Abhighata etc. Following Pathya Aahara and Vihara properly balances the (Vata-Kaphaja) Dosha and normalizes Vikrti Dosha that helps in curing the disease.

CONCLUSION

Gridhrasi is the most common disease in the middle to old age groups all over the world. Gridhrasi is considered as one of the important Vata Vyadhi, which is mainly caused by vitiated Vata Dosa. Gridhrasi is such a Ruja Pradhana Vatavyadhi. Gridhrasi is a Krucchrasadya disease that is of a nature that is difficult to cure. The recurrence of similar symptoms in the treated patients supports the fact that Gridhrasi is difficult to cure. Gridhrasi disease is correlated with sciatica. Sciatica is the term given to describe the symptoms caused by irritation of the sciatic nerve. The trial drug Aabhadi Churna is a good combination of Vedana-Sthapana, Sotha-Hara, Deepan, Pachana, Shoolprashaman, Sheetprasamana and Anulomaka Dravyas, which is more beneficial for Vatavyadhis. Guduchi, Vridhadaruka, Shatavari are Rasayan Dravyas and have Balya property that helps in maintaining balance of *Doshas* and *Dhatus*. It is important to note that following proper *Pathya Aahara* and *Vihara* along with medicine provides more effective treatment to the patients compared to the treatment with medicine only.

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Source of Support: Nil Conflict of Interest: None Declared

How to cite this URL: Sarla Bandhe et al: Efficacy Of Aabhadi Churna Along With Pathya Aahara And Vihara In Gridhrasi W.S.R. To Sciatica- Research Article. International Ayurvedic Medical Journal {online} 2021 {cited November 2021} Available from:

http://www.iamj.in/posts/images/upload/2723 2728.pdf