EFFICACY OF DASHAMULA TAILA KATI BASTI (OIL POOLING AYURVEDA PROCEDURE) IN THE MANAGEMENT OF GRIDHRASI W.S.R. TO SCIATICA

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ABSTRACT

Modifications in professional and social life, improper sitting posture in office, continuous work in one posture, overexertion, heavy weight lifting, jerky movements during travelling create undue pressure and stress injury to the spine and play role in producing disease like sciatica. The lifetime incidence of Sciatica is estimated to be between 13% and 40%. In Ayurveda sciatica can be correlated with Gridhrasi, mentioned under Nanatmaja Vata-Vyadhi, having symptoms like Ruka (pain), Toda (piercing pain), Stambha (stiffness), Suptata (numbness) and pain radiating from Kati-Pradesha (lumbosacral region) to Pada (foot). 30 patients were selected undergoing Kati Basti randomly from the panchkarma unit. Patients were observed during for the relief in symptoms. Dashamula oil Kati Basti had relieved pain, stiffness and other symptoms. Dashamula oil may have nourished the joints of the back region, pacified the Dosha. Dashamula has Vata Kapha Shamak property. Dashamula poses anti-inflammatory and analgesic action. By using Wilcoxon sign rank test Kati Basti with Dashamula Taila was found significant in the management of Gridhrasi.

Keywords: Gridhrasi, Sciatica, Ayurveda, Kati Basti

INTRODUCTION

Gridhrasi mentioned as one among the Vata Vyadhi has no specific /Vishesa Nidana, but the Samanya Vata prakopaka Nidanas and Vata Vyadhi Samanya Nidana can be considered as the Nidana for Gridhrasi. Gridhrasi is one among the eighty Nanatmaja Vatavikaras, the causative factors for Vata Prakopa is to be considered as the Nidana of Gridhrasi. Lifestyle changes, continuous work in one posture, overexertion, lifting heavy weight, jerky movements during travelling create undue pressure and stress injury to the spine and play an important role in producing disease like sciatica. The lifetime incidence of Sciatica is estimated to be between 13% and 40%. The prevalence of sciatic symptoms reported in the literature varies con-
siderably ranging from 1.6% in the general population to 43% in a selected working population. In Sciatica, pain radiates from the back into the buttock and into the lower extremities along its posterior or lateral aspect and is most commonly caused by prolapse of the intervertebral disc. In Ayurveda, sciatica can be correlated with Gridhrasi, mentioned under Nanatmaja Vata-Vyadhi, having symptoms like Ruka (pain), Toda (piercing pain), Stambha (stiffness), Spandana (twitching), Suptata (numbness) and pain radiating from Kati-Pradesha (lumbosacral region) to Pada (foot). In Ayurveda there are therapies like Snehana, Swedana, Siravedha, Agnikarma and Basti karma along with Shaman Aushadha which are simple, safe and cost effective. Ayurveda through its holistic approach corrects the basic pathology. Hence, the present research work was taken into consideration with the aim to assess the efficacy of Kati Basti with Dashamula Taila in the management of Gridhrasi w.s.r to Sciatica.

**MATERIAL AND METHODS**

The study was conducted in the department of Panchkarma, National Institute of Ayurveda, Jaipur. Patients were selected during the month of April to June 2017, procedures posted between 10-12 hours. Only the data of patients who had completed a course of 7 days of Kati Basti were considered for the study. Total 30 patients were registered undergoing Kati Basti for the study.

**Inclusion Criteria:**

- Patients with classical symptoms of Gridhrasi and diagnosed cases of sciatica were included.

- Patients between 20 -75 years of age, irrespective of sex and socio-economic status.

**Exclusion Criteria:**

- Patients with systemic diseases like Tuberculosis, Malignancy and Contraindicated for Kati Basti.

- Patient who have lost the control on bladder & defecation.

- Patients undergoing other modalities of treatment.

**Procedure:** Patients recommended for Kati Basti were initially advised to lie in prone position and then a Kati Basti ring was made with black gram dough prepared from black gram powder 200-400 gms and warm tolerable Dashamula Taila heated passively was poured in the ring after confirming that oil is Sukhoshna (tolerable and comfortable to patient).

<table>
<thead>
<tr>
<th>Sanskrit (Latin) Name</th>
<th>Rasa</th>
<th>Guna</th>
<th>Virya</th>
<th>Vipaka</th>
<th>Dosha ghnata</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bilva (Aegle marmelos)</td>
<td>Kashaya Tikta</td>
<td>Laghu, Ruksha</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha- Vata</td>
</tr>
<tr>
<td>Agnimantha (Premna mucrunata)</td>
<td>Tikta, Katu, Kashaya, Madhura</td>
<td>Ruksha, Laghu</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha- Vata</td>
</tr>
<tr>
<td>Shyonaka (Oroxylum indicum)</td>
<td>Madhura Tikta Kashaya</td>
<td>Laghu, Ruksha</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha- Vata</td>
</tr>
<tr>
<td>Patala (Stereospermum suaveolens)</td>
<td>Tikta, Kashaya</td>
<td>Laghu, Ruksha</td>
<td>Ushna</td>
<td>Katu</td>
<td>Tridosha</td>
</tr>
<tr>
<td>Gambhari (Gmelina arborea)</td>
<td>Tikta, Kashaya Madhura</td>
<td>Guru</td>
<td>Ushna</td>
<td>Katu</td>
<td>Tridosha</td>
</tr>
<tr>
<td>Shaliparni, (Desmodium gangeticum)</td>
<td>Madhura Tikta</td>
<td>Guru, Snigdha</td>
<td>Ushna</td>
<td>Madhura</td>
<td>Tridosha</td>
</tr>
</tbody>
</table>
Initially the oil was poured on the Inner border of the Kati Basti ring to avoid any unexpected discomfort due to heated oil. Care was taken to prevent any leakage of oil. No any specific guidance were given to patients neither any other specific intervention was done. All patients completed the trial successfully. Data was recorded and analysis was done.

**OBSERVATIONS AND RESULTS**

On observations maximum number of patients i.e. 15 patients (50%) belonged to age group 31-40 years, 20 patients (66.6%) were male, maximum i.e. 26 patients (86.6%) observed were Hindu, 28 patients (93.3%) were married. Majority i.e. 26 patients (86.6%) belonged to middle economical class. 17 patients (56.6%) were having 2 to 5 years chronicity. Maximum 25 patients (83.3%) reported gradual onset of pain. 20 patients (66.6%) were suffering from Vata-Kaphaja Gridhrasi whereas 10 patients (33.3%) were suffering from Vataja Gridhrasi. Significant results were obtained on all subjective parameters - Ruka, Stambha, Suptata, Gaurav. Similarly, significant results were obtained on VAS, Walking distance.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean BT</th>
<th>Mean AT</th>
<th>Diff. of Mean</th>
<th>Relief %</th>
<th>SD ±</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ruka</td>
<td>5.267</td>
<td>3.133</td>
<td>2.133</td>
<td>40.49</td>
<td>0.7432</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Stambha</td>
<td>3.333</td>
<td>1.733</td>
<td>1.600</td>
<td>48.004</td>
<td>0.5071</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Suptata</td>
<td>1.467</td>
<td>0.533</td>
<td>0.933</td>
<td>63.61</td>
<td>0.7988</td>
<td>0.0020</td>
</tr>
<tr>
<td>Gaurava</td>
<td>1.800</td>
<td>0.8000</td>
<td>1.000</td>
<td>55.55</td>
<td>0.6547</td>
<td>0.0005</td>
</tr>
<tr>
<td>Pain VAS</td>
<td>5.267</td>
<td>3.133</td>
<td>2.133</td>
<td>40.49</td>
<td>0.7432</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Walking distance</td>
<td>2.933</td>
<td>1.733</td>
<td>1.200</td>
<td>40.91</td>
<td>0.4140</td>
<td>&lt;0.0001</td>
</tr>
</tbody>
</table>

**DISCUSSION**

Maximum number of patients belonged to age group 31-40 years, indicating the incidence of sciatica were more common in middle age group people. 20 (66.66%) number of patients were showed Vata Pradhana Samprapti whereas 10 (33.33%) number of patients were showed Kapha Anubhandha Samprapti. Maximum had habit of Diwa Swapna that may be the cause for Kapha Vata Janya Gridhrasi. 30 (100%) patients had Ruka, and Stambha as Lakshana may be due to Gridhrasi being a pain predominant disease that arises due to vitiation of Vata. Samprapti of Gridhrasi is two types viz Vata-Prakopakara and Margavarodhakara. Most of the patients showed Vata Pradhana Samprapti followed by Kaphanubandha Samprapti. Suptata was found due to vitiation of Vata. Gaurvata was found to to Kapha Anubandha. Due to precipitating factors of Vata Kapha aggravating Nidana or Avrita Vata etc in an individual leading to Khavaigunya or chang-
es in channels at Kati Pradesha (back region) fulfill the phases of pathogenesis of Gridhrasi. Kati Basti is a treatment procedure in which medicated oils are poured and pooled for a fixed duration of time in a compartment or a cabin constructed over lower back using wet flour of black gram. Kati Basti provides Snahana and Svedana simultaneously. Snahana gives Snigdhata and provides Brimhana as therapeutic effect to the lesion in lumbar spine. Sweda increases sweat and brings out Maladravya along with sweat. Thus it decreases Kleda in the body resulting in the reduction of Stabddhata, Gaurava which are common symptoms in Vata Vyadhi. Dashamula Taila Kati Basti may have relieved pain and stiffness. Dashamula oil may have nourished the joints of the back region, pacified the Dosha. Dashamula has Vata Kapha Shamak property and most of the ingredients have Vata Kapha Shamak property. Dashamula poses anti-inflammatory and analgesic action. Kati Basti provides an alternative mode to administer the properties of drug directly to target point through the skin and cease the degeneration.

CONCLUSION
Kati Basti with Dashamula Taila was highly effective in the management of Gridhrasi. It can be concluded that Kati Basti with Dashamula Taila can be a better option in the management of Gridhrasi (Sciatica).

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