



Case Study

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GRIDRASI: A CASE TREATED WITH PANCHAKARMA

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ABSTRACT

In this high sedentary life, low backache is the most common emerging disease affecting day to day life of people, physically as well as psychologically. Low backache is the second most common disorder causing disability. Among its various causes, the most commonly appearing one is sciatica, which refers to the pain in the sciatic nerve and felt in the lumbar-sacral region, back of the thigh, leg, and foot. The features of sciatica are like the condition 'Gridrasi' mentioned in *Ayurveda*. It is explained as one among the 80 *nanatmaja vata vyadhis* described by *Acharya Charaka*. The case study being presented here is of a 27 yr old female patient suffering from radiating pain from the low back to the right lower limb. She was also having numbness and tingling over the right lower limb with difficulty walking. Her SLR test was positive at 30 degrees, so with all these clinical features, she was diagnosed with *Vataja gridrasi*. *Ayurveda* explains *Basti karma* as the choice of treatment in the case of *Gridrasi*, whereas *Snehana & Snigdha svedana* are the best treatments for any *Vataja* disorder. So, in this case, *Basti karma* (*Anubhuta yoga*) was administered in the *Kala basti* schedule, along with *Kati basti* with *Prasarani taila* as local external therapy for 16 days. After treatment, the results indicated that the patient got significant relief in presenting the features of *Gridrasi*, and the day-to-day activities were also improved.

Keywords: *Gridrasi*, Sciatica, *Kati Basti*, *Kala Basti*, *Shaman chikitsa*.

INTRODUCTION

Gridrasi is explained under the heading of *Vata nanatamaj vikara* by *Acharya Charaka*¹. All the *Acharyas* have discussed this disease under the title of *Vatavyadhi*. In *Charaka Chikitsa*, "*Sphikapurva katiprishthorujaujanghapadam kramat*", it is explained elaborately that in this condition, pain starts at the buttock region, i.e., *Spikapurva* and later it moves from lumbar region to thighs, knees and legs respectively sequentially.² It is classified into two types- *Vataja Gridrasi* and *Vata-kaphaja Gridrasi*³. In *Vataja* type of *gridrasi*, *stambha*, *ruk*, *toda* (pricking pain) is seen and while in *Vata-kaphaja gridrasi*, there is *tandra* (Drowsiness), *gaurav* and *arochak*. There are many causes for low back pain; however, true sciatica is a symptom of inflammation or compression of the sciatic nerve. The sciatic nerve carries impulses between nerve roots in the lower back and the muscles and nerves of the buttocks, thighs and lower legs. Compression of a nerve root often occurs due to damage to one of the discs between the vertebrae. In some cases, sciatic pain radiates from other body nerves called referred pain. Pain associated with sciatica often is severe, sharp and shooting. It may be accompanied by other symptoms, 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, less than 1 % to 40% of people suffer from sciatica at some point in a lifetime. Sciatica is most common between the ages of 40 to 59. Men are more frequently affected

than women.⁴ Pain in sciatica is very severe, making the patients challenging to walk, hampering the individual's daily routine. No satisfactory treatment is available in modern medical science, and a patient depends upon pain killers who have quick action. The surgery is not having a very successful rate every time. *Ayurveda* explains *Basti karma* as the essential procedure among *Panchakarma* due to its multiple actions. *Pitta* and *kapha* are dependent on *vata* as it governs their functions. *Basti* is best for *vata* disorders and equally effective in correcting the morbid *pitta*, *kapha* and *rakta*⁵. *Acharya Charaka* has considered *Basti* therapy as *ardha chikitsa* (half of the treatment) for all the diseases. At the same time, some authors also consider it *sampoorna chikitsa* (the complete remedy) for all ailments⁶.

CASE REPORT

A female patient aged 27 years visited OPD of Panchakarma, Abhilashi Ayurvedic College and Research Institute, Abhilashi University, Mandi, with chief complaints of low backache with dragging pain radiating to the right lower limb associated with stiffness over the low back, numbness and tingling sensation in the right lower limb since 6 to 7 months. But the symptoms were increased and severe from 1 month. She had localized tenderness, difficulty in movements, long standings, forward bending, etc. History revealed that the patient was not suffering from any other underlying systemic pathology and was consuming NSAID's and analgesics from a local chemist.

Table 1: Personal history

Aahara	Mixed diet, <i>Atisheet, drava, ruksha aahara</i>
Vihara	<i>Atichakramana, Ratrijagrana</i> and continuous sitting
Appetite	Normal (takes meals regularly)
Bowel	Regular
Micturition	Normal
Sleep	Disturbed (due to pain)
Habits	Late-night sleep, fond of travelling, Cold Beverages
Marital status	Unmarried
Gynaecological history	Menarche 15 year (Cycles 3-5 days/28days)

Table 2: General examination

BP	130/80 mm of hg
PR	78 b/min
RR	20/min
Height	5 feet 1 inch
Weight	50 kg

Table 3: Systemic examination

RS	Vesicular Sounds, NAD
CVS	S1 S2 Heard, NAD
P/A	Soft, Non-tender
CNS	Conscious and well oriented

Table 4: Ashta sthana parkiksha

Nadi	78/min
Mala	Twice a day
Mutra	4-5 a day
Jivha	<i>Alipta</i>
Shabd	<i>Prakrita</i>
Sparsh	<i>Sama Sheethushna</i>
Drik	<i>Vikruta</i>
Aakriti	<i>Vikrita (Altered Gait)</i>

Table 5: Dasha Vidha Prakisha

Prakriti	<i>Vata-pitta</i>
Vikriti	<i>Vata dosh, Asthi, Sandhi</i>
Sara	<i>Madhyama</i>
Samhanana	<i>Madhyama</i>
Pramana	<i>Madhyama</i>
Satmya	<i>Madhyama</i>
Satva	<i>Madhyama</i>
Aahar shakti	<i>Jaran Shakti- Alpa, Abhyavarana Shakti- Madhyam</i>
Vyayama Shakti	<i>Madhyama</i>
Vaya	<i>Madhyama</i>

Table 6: Nidana Panchaka

Nidana	<i>Aharaja- Ati Sheeta Jala Paan</i> (cold beverages), <i>Ruksha aahar</i> (<i>maida</i> items, bakery items) <i>Viharaja- Vegadharna, ratrijagrana</i> (late night sleep), <i>Atichakramana</i> (travel habit), Long hours of sitting and working.
Puvarupa	Localized pain on and off.
Rupa	Low back pain, radiating pain from right buttock region to posterior side of the leg, challenging to walk & pain aggravating while walking.
Upashaya	Resting in supine position with legs flexed.
Anupashaya	Walking, bending, and working.

OBSERVATIONS AND EXAMINATION

Gait: Slow, dragging slight twisting of the right foot.

Signs: Tenderness in L-S area.

Symptoms: Dragging type of pain radiating from lower back region to right limb, associated with numbness, tingling sensation and heaviness of the limb, stiffness over low back.

SLR test was Positive on the Right side- 30 degrees and negative on the left.

Femoral stretch test: Positive.

Lasegue's sign: Positive.

Based on all the above observations and examinations, the patient was hence diagnosed as a case of *Vataj Gridrasi* (Sciatica), and the following treatment plan was made-

Treatment

The patient was admitted in *Panchakarma* IPD; the following treatments were given during 16 days of stay, and proper observations & precautions were made during the entire treatment. (Table 7)

Details of therapy

Basti Karma (Therapeutic enema): The treatment *Basti karma* was given for 16 Days, i.e., in *Kala Basti* Schedule. Here 6 *Niruha Bastis* and 10 *Anuvasana Bastis* were given⁷.

Niruha Basti (Decoction enema): The composition of the medicine administered in the form of *Niruha Basti* contains *Madhu* (Honey), *Saindhava Lavana* (Rock salt), *Sneha* (medicated oil), *Kalka* (paste of herbal powder) and *Kwath* (herbal decoction)⁸.

Drugs and their quantity in Niruha Basti

- **Madhu-** 50 ml
- **Saindhava lavana-** 5 gm
- **Sneha dravya-** *Guggul tiktak ghrita*⁹ 50 ml
- **Kalka dravya-** *Putoyavanyadi kalka*¹⁰ consists of *Yavani* (*Trachyspermum ammi*), *Madanphala* (*Randia spinosa*), *Bilwa* (*Aegle marmelos*), *Kustha* (*Saussurea lappa*), *Vacha* (*Acorus calamus*), *Shatahva* (*Antheum sowa*), *Nagarmotha* (*Cyperus rotundus*), *Pippali* (*Piper longum*)- 50 gm
- **Kwath dravya-** Decoction prepared from *Rasna* (*Pluchea lanceolata*), *Erenda* (*Ricinus communis*), *Nirgundi* (*Vitex negundo*), *Punarnava* (*Boerhavia diffusa*) and *Dashmool*- 450 ml.

Table 7: Treatment module of 16 days

Day	Panchakarma Treatment Performed	Shaman Aushadi
Day 1 & Day 2	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Anuvasana Basti (100 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath - 40ml BD
Day 3	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Niruha Basti (600 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 4	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Anuvasana Basti (100 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 5	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Niruha Basti (600 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 6	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Anuvasana Basti (100 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 7	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Niruha Basti (600 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 8	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Anuvasana Basti (100 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 9	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Niruha Basti (600 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 10	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Anuvasana Basti (100 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 11	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Niruha Basti (600 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 12	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Anuvasana Basti (100 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD
Day 13	Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva. Niruha Basti (600 ml) Kati Basti followed by Nadi sveda	Tryodashanga guggul- 250 mg BD Ekangvir ras - 125mg Bd Kukutand Twak bhasm 250 mg BD Ashwagandha churna- 3gm BD Tab. Vatraj Gold 1BD Rasna saptak kwath- 40ml BD

Day 14 to Day 16	<i>Abhyanga (Prasarini oil) and Nadi sveda over Udara, Kati, Pristha, Parshva.</i> <i>Anuvasana Basti (100 ml)</i> <i>Kati Basti followed by Nadi sveda</i>	<i>Tryodashanga guggul- 250 mg BD</i> <i>Ekangvir ras - 125mg Bd</i> <i>Kukutand Twak bhasm 250 mg BD</i> <i>Ashwagandha churna- 3gm BD</i> <i>Tab. Vatraj Gold 1BD</i> <i>Rasna saptak kwath- 40ml BD</i>
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Drugs of Dashmool*Bilwa (Aegle marmelos)**Agnimanth (Premna integrifolia)**Sonapaatha (Oroxylum indicum)**Paatala (Stereospermum suaveolens)**Gambhari (Gmelina arborea)**Shalparni (Desmodium gangeticum)**Prashniparni (Uraria picta)**Kantakari (Solanum surattense)**Bruhati (Solanum indicum)**Gokshura (Tribulus terrestris)*

Anuvasana Basti: Administration of medicated oil or other fat through the rectal route in a prescribed dose is called *Anuvasana Basti*¹¹. In this case study, *sneha yamak*¹² (mixture of two fats) of *Guggul tiktak ghrita* 50 ml and *Sahacharadi taila*¹³ 50 ml (100 ml) was used for *Anuvasana Basti*.

Kati Basti and Nadi sveda: Retaining the medicated oil over the lower back with the help of black gram paste for a particular time is known as *kati basti*. It possesses both the qualities of *snehana* and *svedana* and helps give quick relief from the pain and relaxes the muscles as it directly acts at the lesion site. *Prasarni Taila* was taken for this procedure, and then *Nadi sveda* was performed.

Parihara kala (Recovery Period): After completing the *Basti* course, a period of rest and follow up is advised. This is called *Parihara kala*. On discharge, the patient was advised to visit OPD after one month with a set of dos and don'ts during this period, along with oral medicines and some *Yogasana*'s.

RESULTS AND DISCUSSION

As per the improvement seen in the signs and symptoms of the patient, it was found that the dragging pain, numbness and tingling sensation were cured. Tenderness and stiffness in the L-S area were subsided entirely. Significant improvement was noticed in the gait and movements.

Walking distance before and after treatment: The patient had severe pain after a walk of 100 meters. After treatment Patient could easily walk, climb stairs and do the spinal movements without pain for long-distance. The straight leg raising test was also improved from 30 degrees to 70 degrees. Overall good improvement was observed.

The etiology of *Vata* disorders is of two types; one is *Avarana janya*, and the other is *Dhatu-kshaya janya*. Here, in this case, the prolapsed disc obstructed the movement of *Vata*, resulting in *Vata Prakopa*. As discussed earlier, the current case is of *Vataj Gridrasi*, and the management is concerned with *Shudha vata vyadhi* includes *Snehana* and *Svedana*. Also, the *Basti karma* is explained to be the best treatment for correcting *Vata Dosha*. So, here the *Snehana* and *Svedana* form the first line of treatment along with *Basti*, the primary treatment for any *Vata vikara*. For *Basti chikitsa*, *Kala basti* was selected, in which 6 *Niruha Basti* were administered along with 10 *Anuvasana Basti*. For *Niruha Basti*, *Dashmoola*, *Rasna*, *Nirgundi*, *Erenda*, *Punarnava*, used in the decoction, are known to have *vata shamak* action. They also possess analgesic and anti-inflammatory potential. Under these drugs, the *Avarana* of *Vata* may be reduced, which in turn makes

the free movement of *Vata*, which may be the reason for the reduction in pain, numbness, and improvement in gait. *Anuvasana basti* was given with *Guggul tiktaka ghrita* and *Sahacharadi taila*. Mainly, *Guggul Tiktaka Ghrita* used as *Sneha* in both *Anuvasana* and *Nirhua Basti* is mentioned explicitly for *Asthi Sandhi gata vikara*, due to its *Tikta Rasa* helps to reach the level of *Asthi-Sandhi* and corrects the degeneration that took place at the level of the disc by its *Snigdha guna*, *Balya* and *Brimhana* action. Also, the *Sahacharadi taila*, due to its properties, is known to be very useful in treating *vataj* disorders, muscle-joint stiffness, swelling and neurological conditions, hence very helpful in slowing down the progression of symptoms sciatica. *Bahiperimarjana* done as *Kati Basti* was given with *Prsasarni Taila*. It is a combination of both *Snehana* and *Svedana*. It is a very effective and essential procedure as it acts directly at the disease site and gives lubrication and strengthening to the affected part in the lumbar-sacral region. The *Prasarni taila* helps to overcome the accumulation of *Vata* at the site of pathology and also nourishes the underlying tissue.

CONCLUSION

Based on this single case study, we can say that the administration of *Panchakarma* treatments like *Basti therapy* and *Kati Basti*, along with oral medication, has been found very effective in reducing pain, inflammation, and numbness, other features of *Gridrasi*. Also, the treatments are very cost-effective and with almost no side effects compared to surgical interventions. Hence, *Panchakarma* therapies like *Snehana*, *Svedana* and *Basti* can be recommended to treat sciatica patients. At the same time, it can be advised that the repeat course of these should be carried out to get marked results.

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