



**EFFECT OF AYURVEDIC AND PANCHAKARMA TREATMENT IN GRUDHRASI  
(LUMBAR CANAL STENOSIS): A CASE STUDY**

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**ABSTRACT**

**Background:** Lumbar canal stenosis is painful condition, often referred for surgical correction. In chronic stages, it leads to painful and disabled routine activities and badly affects quality of life. It can be correlated with *grudhrasi*.

**Case:** Here is case of 66 years old male suffering from pain in lumbar region and both lower extremities along with tingling and numbness, difficulty in walking, standing for more than two minutes, for thirty years with increasing severity. MRI of lumbar spine showed lumbar canal stenosis with large posterior disc protrusion between second and third, fourth and fifth lumbar vertebrae, fifth lumbar and first sacral vertebrae. Patient was diagnosed as a case of *grudhrasi*. **Treatment** – Patient received oral ayurvedic treatment – *Yogaraja Guggulu* (500 mg) with *Dashamoola Rasnadi Kwatha* (50 ml) twice daily, powders of *Shatavari* and *Ashwagandha* (each 5 gm) twice daily with milk and *gandharva-haritaki* (3 gm) at night with warm water. Patient also received *sarvanga abhyanga* with *tila taila* and *bashpa sweda*. Patient also received *kala basti krama* (16 basti) initially followed by three sittings of *pancha-tikta-ghruta-ksheera basti* (14 basti each). Patient received the treatment from November 2003 to June 2006. **Results:** Patient showed significant improvement in pain and disability. Initially patient could walk for five minutes with assistance and stand for two minutes, that improved to walking for one hour without assistance and standing for ten minutes. SLR, hypoesthesia improved significantly. **Conclusion:** Ayurvedic treatment is useful in painful and debilitating conditions such as lumbar canal stenosis even in chronic stage.

**KEYWORDS:** Panchakarma, Ayurved, Basti, Pancha Tikta Ghruta, PID.

**INTRODUCTION**

Lumbar canal stenosis is a common condition in day to day practice that is referred to orthopedic surgeons and are corrected with surgical intervention. Published data shows that prevalence of lumbar canal stenosis increases with age and it is estimated as 5.7 %.<sup>[1]</sup> Conservative treatment of lumbar spinal stenosis includes physiotherapy, anti-inflammatory medications, lumbar corsets and epidural injectables. It is generally accepted that surgery is indicated if well-conducted conservative management fails.<sup>[2]</sup> Though surgical treatment is very well tolerated in such cases, it is associated with certain risk and also high costs. It becomes challenging task to treat such patient who is already indicated for surgery, using Ayurvedic treatment modalities. Here is a patient who was diagnosed as a chronic case of lumbar canal stenosis. The patient was advised surgery, but decided against it. Patient started using analgesics and NSAIDs, which were effective only in initial period and showed limited effects. Hence, patient decided to take Ayurvedic

treatment. Patient was treated extensively for 19 months using oral Ayurvedic medicines and multiple Panchakarma treatments. Patient received multiple courses of Basti. Excellent remission in symptoms and disability was seen in the patient.

**CASE REPORT**

A 66yrs old male patient came to outdoor patient department with symptoms pain and tingling sensation in both lower extremities, low back pain, difficulty in walking and flatulence since 20-23yrs. He was also suffering from constipation since long duration. The patient was diagnosed as a case of 'lumbar canal stenosis' by orthopedic surgeon at Sir J. J. Hospital, Mumbai and was advised surgical correction. Physical examination revealed stability of all vital functions. Straight leg rising test (SLRT) of right leg was performed by the patient actively and it was noticed painful at 50° while for left leg it was painful at 60°. During detailed history taking, it was found that he was a

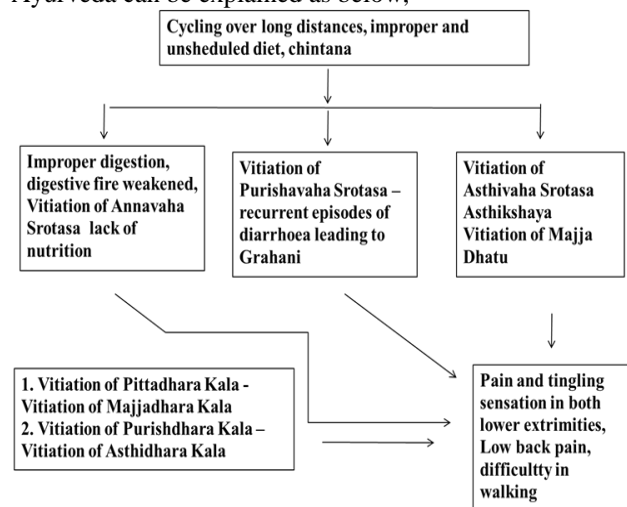
K/C/O HTN since last 2- 3 yrs and taking treatment for the same. Also in 1977, he had Jaundice and was hospitalized for 40 days. During 1965 to 1985 he suffered from recurrent episodes of diarrhea. His father and mother both were K/C/O Diabetes Mellitus type II and his daughter was suffering from Epilepsy. He had worked as bailiff in court and had to travel long distances through his bicycle to issue summonses. His MRI L-S spine reporting was, "Lumbar canal stenosis is noted. Large posterior disc protrusion at L2-3 level, L4-5 L5-S1 level, all compressing the respective thecal sac and L2, L3, L4, L5, S1 nerve roots. Small posterior disc protrusion at L1-2 level indenting the thecal sac without significant neural compression. Mild wedging of L1 vertebral body without significant neural compression. Degenerative facet arthropathy and ligamentous thickening between L2-3 and L5-S1 levels showing hypertrophic changes and focal canal stenosis at L4-5 and L5-S1 levels". All routine investigations were performed and found within normal limits.

### DIAGNOSIS

On the basis of clinical presentation and MRI reporting the patient was diagnosed as a case of Lumbar canal stenosis. From Ayurveda perspective he was diagnosed as a case of Ghrudhrasi with Katishoola.<sup>[3]</sup>

### Probable Pathogenesis from Ayurved point of view

Probable pathogenesis (Samprapti) according to Ayurveda can be explained as below,



**Figure 1: Probable Pathogenesis from Ayurveda's Point of View.**

### TREATMENT

In view of the chronic and complex pathology the patient needed multiple treatment modalities. The patient received Yogaraja Guggulu 500 mg thrice daily before food, powders of Shatavari (*Asparagus racemosus*) and Ashwagandha (*Withania somnifera*) in dose of 5 gm each twice daily with water, freshly prepared decoction of Rasna and Dashamoola 50 ml twice daily and Gandharva Haritaki powder 3 gm with warm water at bed time. Patient also received Sarvanga Abhyanga with

Tila Taila and Sarvanga Bashpa Sweda. The patient was treated extensively using Basti, precisely one course of Kala Basti and three courses of Pancha Tikta Siddha Ksheera Basti. Kala Basti Krama included Matra basti with Tila Taila of 60 ml with honey 10 ml and Saindhava 3 gm. Niruha Basti was administered with Dashamoola Kwatha 450 ml with Tila Taila 50 ml, honey 30 ml and Saindhava 5 gm. Kala Basti Krama contained administration of 16 Basti completed in 16 days. It was followed by Basti krama using Panchatikta Siddha Ksheera (80 ml) and Panchatikta Ghrita (20 ml) for 14 days. Matra Basti with 60 ml of Tila Taila was administered before and after Panchatikta Ghrita Ksheera Basti. After first course of Pancha Tikta Ghrita Ksheera Basti another two courses were administered in similar way. The only change made was that in last two courses of Pancha Tikta Ghrita Ksheera Basti, Kati Basti with Tila Taila for 40 minutes was also administered. The treatment was initiated from November 2003 while last course of Pancha Tikta Ghrita Ksheera Basti was completed in July 2005.

### TREATMENT OUTCOME [Table 1]

At baseline the pain, tingling and numbness in lumbar region and both lower extremities along with difficulty in walking and standing were increasing gradually. After first course of Basti (Kala Basti Krama) symptoms of the patient did not show any change, but the gradual increase in symptoms was halted.

After first course of Pancha Tiktra Ghrita Ksheera Basti, pain, tingling and numbness in lumbar region and both lower extremities showed mild reduction SLR test was painful at 70 degrees for both lower extremities. Patient could walk for 15 minutes with mechanical assistance and could stand for 2 to 3 minutes, but the intensity of pain was reduced.

After second course of Pancha Tiktra Ghrita Ksheera Basti, pain in lumbar region and both lower extremities were absent, while tingling and numbness was markedly reduced. SLR test was painful at 80 degrees for both lower extremities. Patient could walk for 30 minutes with mechanical assistance at a stretch, without stopping. Pain while standing was reduced and patient could stand for 3 to 4 minutes without any pain.

After third course of Pancha Tikta Ghrita Ksheera Basti, pain and tingling numbness in lumbar region and both lower extremities were absent. SLR test was mildly painful at 90 degrees for both lower extremities. Patient could walk for 60 minutes with mechanical assistance at a stretch, without stopping. Pain while standing was reduced and patient could stand for 10 minutes without any pain.

**Table 1: Treatment Outcome.**

Sr.	Timeline	Treatment	Pain	Tingling and Numbness	SLR Test	Walking	Standing
1	Base line - November 2003	Treatment Initiated	Severe	Severe	50 degree for right and 60 degree for left	With mechanical assistance upto 15 min. with severe pain and minimum 3 to 4 intervals.	Maximum upto 2 min. with severe pain
2	2 weeks after treatment - November 2003	Kala Basti Krama	Severe	Severe	50 degree for right and 60 degree for left	With mechanical assistance upto 15 min. with severe pain and minimum 3 to 4 intervals.	Maximum upto 2 min. with severe pain
3	6 weeks after treatment - December 2003	Pancha Tikta Ghruta Ksheera Basti	Moderate	Moderate	70 degree for both	With mechanical assistance up to 15 min. with moderate pain and 1 to 2 intervals	Maximum 2 to 3 min. with moderate pain.
4	8 months after treatment - June 2004	Pancha Tikta Ghruta Ksheera Basti	Absent	Mild	80 degree for both	With mechanical assistance up to 30 min. with no pain and with no intervals.	Maximum 3 to 4 min. without pain.
5	19 months after treatment - June 2005	Pancha Tikta Ghruta Ksheera Basti	Absent	Absent	90 degree for both	Without assistance up to 1hr. with no pain and with no intervals.	Maximum 10 min. without pain.

[SLR – Straight Leg Rising]

## DISCUSSION

Lumbar canal stenosis is one of the most common condition associated with lumbar vertebrae. With high prevalence in older age, it is often referred for surgical correction. Surgical treatment has excellent effects and remission in symptoms is seen in 64% of patients.<sup>[2]</sup> But in cases which do not opt for surgery or who do not show remission after surgery alternative treatments such as Ayurveda can be useful.

In view of the etiological factors and symptomatology it can be aptly correlated with Grudhrasi. In this case Vata was identified as the sole causative Dosha, while Asthi, Majja, Rasa and Rakta were Dushya.

The aim of treatment in this case was to relieve symptoms and improve quality of life by improving movement such as standing, walking. In view of chronicity of pathology and severity of symptoms long term treatment was necessary. Yogaraja guggulu is a classical formulation useful in relieving diseases caused by vata, especially those which are associated with Asthi and Majja due to its Balya (strength promoting) effect.<sup>[4]</sup> Ashwagandha and Shatavari are sweet (Madhura), unctuous (Snigdha) are helpful in Anulomana of Vata and promote strength of all Dhatu. Gandharva Haritaki is another classical combination useful in relieving constipation and thereby helping in Anulomana of Vata and reducing pain, especially in lumbar area. Dashamoola is a combination of ten roots which are especially useful in pacifying Vata. All the ingredients are hot (Ushna), unctuous (Snigdha), help in nourishment of Dhatu and also useful in relieving pain, especially pain in joints. Rasna is also one of the best medicines useful in pacifying Vata and pain caused due to it. Hence use of Rasna and Dashamoola decoction was useful in reducing pain and nourishment.

Initially, it was necessary to evacuate Dosha, hence Kala Basti Krama was administered. Treatment of choice for diseases of Asthi and Majja caused due to Vata is Basti using medicated milk using bitter (Tikta) medicines.<sup>[5]</sup> Hence three courses of Basti using Pancha Tikta Siddha Ksheera and Pancha Tikta Ghruta were administered. It acts as Rasayana for Asthi and Majja Vaha Srotasa and helps improving their strength. Hence with each course of the Basti improvement in symptoms was observed. Published literature shows beneficial effects of Tikta Ksheera Basti in cases of osteoporosis.<sup>[6]</sup> It is also useful in improving joint function.<sup>[7,8]</sup> Hence the insight of ancient sages in Ayurveda becomes evident in this case as well.

It also becomes evident from the case that remarkable results can be seen in cases of lumbar canal stenosis in chronic cases, who are suggested surgical corrections, if principles of Ayurveda are followed for longer duration. However, it is the result seen in a single case and more such studies are necessary to substantiate effects of Ayurvedic treatment in cases of lumbar canal stenosis.

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