

A CASE STUDY ON *GHRIDHRASI* WITH SPECIAL REFERENCE TO *SCIATICA*Dr. Snehal N. Dange\*<sup>1</sup> and Dr. Vijay Potdar<sup>2</sup><sup>1</sup>PG Scholar, Department of Rognidan, Govt. Ayurved College, Nanded.<sup>2</sup>Guide, Department of Rognidan, Govt. Ayurved College, Nanded.

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**ABSTRACT**

*Gridhrasi* is the one amongst the 80 types of *Nanatmaja* disorders of *Vatavyadhi*. *Gridhrasi* is a painful condition in which the person can not sit and walk properly that hampers his normal activity. *Gridhrasi* is characterized by low back pain radiating to lower limbs, stiffness and pricking type of pain. It starts from *kati- prishtha* (pelvic region and Lumbosacral) radiating to *Jangha*, *Pada* (Thigh, Feet) with impairment of lifting the leg. The gait of the person is very similar to vulture (*Gridhra*) hence the name is given as *Gridhrasi*. Almost all signs and symptoms of *Gridhrasi* resemble with the condition of sciatica, as described by the modern texts. Sciatica is pain in the lower extremity resulting from irritation of the sciatic nerve. The pain of sciatica is typically felt from the low back (lumbar area) to behind the thigh and can radiate down below the knee. The sciatic nerve is the largest nerve in the body and begins from nerve roots in the lumbar spinal cord in the low back and extends through the buttock area to send nerve endings down the lower limb. Sciatica is a relatively common condition with a lifetime incidence varying from 13% to 40%. Ayurvedic treatments for *Gridhrasi* concentrate on bringing back the aggravated *Vata* or *Vata Kapha* to the state of equilibrium and thereby to the state of health.

**KEY WORDS:** Gridhrasi, Sciatica, Panchatikta Kshira Basti, Majja Ghrita Basti.**INTRODUCTION**

*Gridhrasi* is caused mainly because of vitiated *Vata*. Hence, *Vataprakopaka Lakshanas* like *Shoola*, *Supti*, *Stambha* etc. are found as the cardinal symptoms in the disease. There is no direct mention about *Apana* and *Vyana Vayu* involvement in *Gridhrasi* except that *Harita* has mentioned it in *Vyanaprakopaja* diseases. Depending on the *Sthana* and *Karma*, we can assume that *Apana* and *Vyana Vayu* are involved in causing *Gridhrasi*. In *Gridhrasi*, the *Sthanasamshraya* takes place in *Sphika*, *Kati*, *Pristha* affecting the *Kandara* of leg. Some Anatomical structures can be considered as follows in the involvement of *Gridhrasi*. Ayurveda categorized *Gridhrasi* as one of diseases caused by vitiation of *Vata* (one of the principle *Dosha* in the body, responsible for the movement and functionality of the body). Sometimes even *Kapha* vitiation along with *Vata* (*Vata kaphaj*) also causes *Gridhrasi*. Sciatica is very painful condition in which pain begins in lumbar region and radiates along the posterior lateral aspects of thigh and leg, in this condition patient walks with difficulty. It occurs because of spinal nerve irritation and characterized by pain in distribution of sciatic nerve.

**CASE REPORT**

A 32yr old male patient came to the Rognidan OPD of Govt. Ayurved College, Nanded, Maharashtra.

Address- Aaundha, Hingoli.

DOA- 16/02/18

DOD- 25/03/18

OPD- 17119

IPD- 1088

With presenting c/o: Pain at low back region, (since 1month).

Continuous radiating pain in right leg, (since 1month).

Difficulty in walking (since 1 month).

**Past history**

Patient had taken Analgesic & Anti inflammatory medication from private hospital before coming to our hospital. Patient was thoroughly examined and detailed history was taken. Patient was Hotel worker (Waiter) by occupation, Patient had history of chikungunya before 8yrs and history of accidental trauma before 6 month.

**On examination**

General condition -moderate, afebrile.

PR - 76/min, regular.

BP - 120/80mm of Hg.

RR - 18/min, regular.

**Local examination of patient was having**

	Right Leg	Left Leg
Crepitations	Present	Present
Swelling	Absent	Absent
Local Temperature	Absent	Absent
Flexion and Extension	Painful	Painful

SLR test – Right leg – 45 degree  
Left leg – 90 degree

**INVESTIGATIONS**

Hb- 11.6 gm%                      Urine (alb)- +1  
RBC- 4.02                              (sug)- Nil  
WBC- 9.9  
Plt- 301  
BSL(R)- 92  
ESR- 10mm  
X-ray findings of LS Spine- 14/02/18  
Space reduction in L5 –S1

**Diagnosis**

*Gridhrasi*

**The treatment was planned as below**

1. *Snehana Swedana* for 15 days.
2. *Sthanik Katibasti* for 15 days.
3. *Panchatikta Ksheerghrut Basti* for 15 days
4. *Majja Ghrita Basti* for 15 days
5. *Yograj Guggul Vati* for 30 days.

**Contents of Katibasti**

*Sahachar tail* 200ml.  
*Udad dal flour* -500 gm.  
*Katibasti* done for 20 minute.

**Panchatikta Ksheerghrita Basti**

120 ml Decoction (*Kwatha*) of *Panchatikta Dravyas* was made.  
120 ml of *Godugdha* was added and the *Siddha Kshir* was prepared.

**Observations in present case**

Examinations	Score before treatment	Score after treatment	Percentage of Relief
Pricking pain	3	1	66%
Stiffness	2	1	50%
SLR Test	2	0	100%
Distance walked by patient within 10 minutes	2	1	50%

**DISCUSSION**

Pain is mainly due to *Vata prakop* and *Basti* is best treatment for *Vata*. So, *Panchtiktakshir basti* acts as *Vatanuloman* and relaxes the spinal muscles controlling *Apana Vayu*. *Basti* is best for *Vatavyadhi* so *Tikta* drugs were beneficial. *Pakwashaya* is the main site of *Vata* and *Basti* is mainly possess *Vata Shaman* property. The contents of *Majjaghrita basti* have *Ushna virya*, *Guru vipak* and potent *Vatahar* properties. Generally with increasing age there is reduction of *Dhatu*s and *Bala* etc. This phase is also recognized with hyperactive

Preparation of *Basti*: *Madhu* (5ml)+ *Lavan* (5gm)+ *Panchtiktaghrita* (20ml) +*Siddhaksheer* (120ml).

*Basti* was administered & *Bastipratyagaman Kala* was noted. Total 120 ml of *Panchatikta Ksheerghrita Basti* was given daily for 15days.

*Bastipratyagaman Kala* was found to be 4 to 6 hrs.

**Majjaghrita Basti**

*Majja Basti* was administered for 15 days as a *Matra Basti* with 60ml *Majja* (bone marrow of goat) along with *Kashaya of Musta, Patha, Amruta, Erandamula, Bala* (contents of *Yapana Basti*).

*Yograj Guggulu Vati*: 250mg 2 tablets TDS/day.

**Assessment Criteria****Pricking Pain**

Absent	0
Mild	1
Moderate	2
Severe	3

**Stiffness**

Absent	0
Mild	1
Moderate	2
Severe	3

**SLR Test**

80-90 degree	0
60-80 degree	1
30-60 degree	2
0-30 degree	3

**Distance walked by patient within 10 minutes**

90 feet	0
60 feet	1
30 feet	2
Less than 30 feet	3

*Vatadosha* resulting from *Dhatukshaya*. *Majja* has the properties of increasing *Bala, Shukra, Ras, Shelshma, Meda* and *Majja*. It has been described to rejuvenate especially *Asthi Dhatu*. So *Majja Ghrita Basti* plays very important role for *Asthidhatu* as *Balya* and *Rasayan*.

**CONCLUSION**

In this study we have got good results of *Panchakarma & Ayurvedic Shamana Chikitsa*. The treatment given for *Ghridhrasi* was *Snehana, Swedana, and Basti* which helped in *Vatadosha Shaman*, Relief in symptoms of

disease and also an attempt to provide safe and effective treatment to the patient.

#### REFERENCES

1. Dr. Brahmanand Tripathi, *Vatavyadhi Chikitsa Adhyaya, Charak Samhita, Chikitsasthana, Chapter 28<sup>th</sup> edition, Pub. Chaukhamba Surbharati prakashan, Varanasi, 2008. Pg. 947.*
2. Dr. Brahmanand Tripathi, *Maharogadhyaya, Charak Samhita, Sutrasthana, Chapter 20<sup>th</sup> edition, Pub. Chaukhamba Surbharati prakashan, Varanasi, 2006. Pg. 860.*
3. Dr. Brahmanand Tripathi, *Vividhsheetpitiya Adhyaya, Charak Samhita, Sutrasthana, Chapter 28<sup>th</sup> edition, Pub. Chaukhamba Surbharati prakashan, Varanasi, 2006. Pg. 550.*
4. Vagbhata, *Ashtang Hridayam, Nidana Sthana, Vatavyadhinidanam, 15/54, Arundutta's Commentary, Pt.Hari Sadashiva Shastri Paradakar Bhisgacharya, editor. Reprint ed.2010, 535.*
5. Vaidya Yadavji Trikamji Acharya, *Susruta Samhita of Susruta, Sutra sthana, Reprint edition, 2010, 33/7, Chaukhambha Sanskrit Sansthan, Varanasi, India.*
6. Stanley J. Swierzewski, *Remedy Health Media. Sciatica Overview, www.healthcommunities.com.*
7. Konstantinou, kika, *Sciatica, Review of epidemiological studies and prevalence estimates, journals.lww.com, 2014.*
8. Nicholas A Boom, Niki R Colledge, Brian R Walker, *Neurological disorders, Davidsons Principles and Practice of Medicine Chapter 26, 20<sup>th</sup> edition, Pub. Churchill Livingstone Elsevier, 2006, Pg. 1242.*
9. Michel Swash, Michael Glynn, *Locomotor System, Hutchisons Clinical methods, Chapter 9<sup>th</sup>, 22<sup>nd</sup> edition, Pg.160.*
10. M Heliovara, *Risk factors for low back pain and Sciatica, Schlor.google.co.in, 2014.*
11. Bhatta SR, Rao P, Joshua TV. *Manual of Surgery.5th Edition, Jaypee publishers (pg no.343).*