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Eranda Taila Bharjita Vartaka Prayoga in Gridhrasi : A Case Study

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ABSTRACT

Worldwide low back pain causes more impairment than any other conditions. Pain is complex and debilitating condition which can have a major impact on physical activity and quality of life. Low back ache may also be a symptom of disease. In some cases back pain can extend to the other areas of the body especially to the legs in the form of radiating pain. Although low back pain is a common condition that affects as many as 80-90% of people during their lifetime, true sciatica occurs in about 5% of cases. Sciatica is more common between 30 and 50 years of age.^[1] Sciatica is a term used to describe radiating pain that travels along the path of the sciatic nerve. *Gradhrasi* is one among the *Vataja Nanatmaja Vyadhi*, affecting the locomotor system in which pain is major symptom, which start from *Sphik Pradesha* and radiates downwards to *Kati, Prushtha, Uru, Janu, Jangha, and Pada* by which patient is unable to walk properly. *Gradhrasi* the name itself indicates the way of gait shown by the patient due to extreme pain just like a *Gradhra* (vulture).^[2] In Ayurveda various treatments for *Gradhrasi* are described to improve gait.

Key words: *Gradhrasi, Sciatica, Vartaka, Eranda Tail, Vatavyadhi.*

INTRODUCTION

Gradhrasi (Sciatica) is a disorder in which low back pain is found, that spreads through the hip, to the back of the thigh and down the inside of the leg.

There are many causes for low back pain, however true sciatica is a symptom of inflammation or compression of the sciatica nerve. The sciatica nerve carries impulses between nerve roots in the lower back and the muscles and nerve of the buttocks, thighs and lower legs. Compression of a nerve root

often occurs as a result of damage to one of the discs between the vertebrae. In some cases, sciatic pain radiate from other nerves in the body. This is called referred pain. Pain associated with sciatica often is severe, sharp and shooting. It may be accompanied by other symptom, such as numbness, tingling, weakness.

The disease considered as one of *Nanatmaja Vatavyadhi* hence, involvement of *Vata Dosha* in its *Samprapti* is clear. In spite of being *Nanatmaja Vatavyadhi* involvement of *Kapha Dosha* is also mentioned while discussing the symptom *Tandra, Gaurava* and *Aruchi* are the mentioned as symptoms of *Vata Kaphaja* type of *Gradhrasi*. So based on *Dosha* predominance *Gradhrasi* is two types: *Vataja Gradhrasi* and *Vata-Kaphaja Gradhrasi*.^[3]

Causes of Gradhrasi

In case of *Gradhrasi* specific *Nidana* has not been mentioned. So the causative factors mentioned producing *Vata Vyadhis* are considered as *Nidana* and it has been tried to understand the manner in which they produce the disease. Actually there is not much

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difference in the case of *Nidana* in *Vatavyadhis*. Mainly the difference is only in *Samprapti* in all *Vatavyadhis*. *Vata Prakopaka Karanas* are almost same and the difference like *Gradhrasi*, *Pakshaghata* etc. are only due to the *Samprapti Vishesha* of vitiated *Dosha*.^[4]

Symptoms of *Vataja Gradhrasi*^[5]

- 1. Ruk (Pain) :** This is an important symptom of *Gradhrasi* and in fact this typical pain readily opines that this pain starts at *Sphik* (hip) and later on it affects *Kati* (Waist), *Pristha* (back), *Uru* (Thigh) *Janu* (Knee), *Jangha* (calf) and *Pada* (foot) respectively. Obviously this pain is present along with the area distributed by sciatic nerve.
- 2. Toda (Pricking pain) :** Charaka and Madhava have mentioned this symptom. *Toda* is pricking like pain felt along the distribution of sciatic nerve.
- 3. Stambha (Stiffness) :** Charaka has mentioned the *Stambha* felt in the affected part of the patient of *Gradhrasi*. This is a feeling of lightness or rigidity throughout the leg. On account of the pain in the distribution of nerve the person tries to make as little movement as he can. As a result the muscles of the leg become rigid and the *Stambha* is experienced.
- 4. Spandana (Twitching) :** This also occurs as a sensation of something pulsating or throbbing. This is due to muscular twitching. This may be in the buttock region in the thigh, legs or even in the small muscle of the foot and is mostly in the muscle supplied by the sciatic nerve.

Symptoms of *Vatakaphaja Gradhrasi*^[6]

- 1. Tandra :** *Tandra* is one of the symptoms of the *Gradhrasi* caused by *Vatakapha*. *Acharyas* opine that *Tandra* is the outcome of the vitiated *Vata* and *Kapha*. In the case of *Gradhrasi* also it can be said that domination of *Vata* and *Kapha* causes *Tandra*. Charaka gives the causative factor of *Tandra* like food substances having the qualities like *Madhura*, *Snigdha*, *Guru* etc. and some

mental factors are *Chinta*, *Shoka* etc. It can be observed that the ultimate result of the above is the vitiation of *Vata* and *Kapha*.

- 2. Gaurava :** *Gaurava* is the feeling of heaviness of the body. Heaviness is the quality of *Kapha*. So when the *Kapha* is vitiated in the *Vata Kaphaja* type of *Gridhrasi*, *Gaurava* occurs. Anyway only Charaka has mentioned this symptom and others have not included it.
- 3. Arochaka :** Charaka, Madhava and Bhavaprakasha have mentioned *Arochaka* as a symptom of *Gridhrasi*. It is a subjective symptom where patient loses the taste but appetites remains intact. Comparing to *Vata* it seems that *Kapha* has the more roles in manifestation of *Arochaka* because the seat of *Bodhaka Kapha* is *Jiwha* (Tongue). So it is clear that this symptom is due to the vitiation of *Kapha* especially *Bodhaka Kapha*.
- 4. Agnimandya :** *Agni* is usually referred to as the state of *Pachaka Pitta* of the body. When affected by the vitiated *Kapha*, the *Pachakapitta* fails to perform its normal function. This may be due to the antagonist properties of the *Pitta* and *Kapha*. So in the case of *Gradhrasi* also where *Kapha* is dominant, role of *Ama* must be taken into consideration. *Agnimandya* leads to the formation of *Ama* which in turn produces further *Agnimandya*.
- 5. Mukhapraseka :** *Mukhapraseka* is caused by the vitiated *Kapha*. In *Madhavanidana*, *Mukhapraseka* has been mentioned in *Vatakaphaja* type of *Gradhrasi*.^[7] *Vata* may have a little role to play in case of *Mukhapraseka*. *Praseka* has been mentioned due to the involvement of *Ama* by some *Acharyas*.
- 6. Bhaktadweshya :** This symptom is also produced due to the involvement of *Kapha* and *Ama*. Here the patient shows aversion towards the food substances in general. Bhavaprakash have mentioned this symptom in the type of *Vatakaphaja Gradhrasi*.^[8]

Case Study

A 49year female patient, walked in OPD of Ayurveda Mahavidyalaya Hubballi on date: 14/11/2019 with the following details:

Patient name : YXQ

OPD/IPD No : XXX24/XX1

Age/Sex : 49yrs/female

Date of admission : 9/11/2019

Date of discharge : 2/12/2019

Chief Complaints

1. Pain in lumbar region radiating to left leg along with difficulty in sitting and standing more than 15 mins in same posture for more since 8 months.
2. Difficulty in walking for more than 100 mts since 8 months.
3. Difficulty in performing day to day activities since 8 months
4. As pain during walking, gait is also changed

H/O present illness

According to the patient she was asymptomatic 8 months ago, and suddenly developed symptoms like pain in lumbar region radiating to left leg. Pain was intolerable in nature, associated with tingling and dragging kind of sensation and restricted hip movements, it got aggravated by prolong standing and changing posture but subsides when the patient lies on bed with straight legs. Patient also noticed a change in her gait. Pain killers prescribed by general practitioner which gave symptomatic temporary relief, but reappeared after few days for which she again took allopathic interventions.

As pain killers not effective she was advised to undergo neurosurgery. To avoid surgery the patient came to the OPD seeking some Ayurvedic cure.

Clinical findings

Gait : Antalgic gait, short stepped. Spinal and hip movements restricted and painful.

SLR Test : Positive on left - 30° and negative on right

Femoral nerve stretch test : Positive.

Lassegue's sign : Positive.

Radiological investigation : MRI findings : Dated: 23/10/2019

Diffuse bulge of L5/S1cisc with posteriocentral protrusion associated with bilateral facet arthropathy.

METHODS

1. Panchkarma therapy

- *Sarvanga Abhyanga* and *Sarvanga Swedana* with *Kottamchukadi Taila* (7 days)
- *Patra Panda Sweda* (7 days)
- *Eranda Taila Bharjita Vartaka (Mrudu Virechana)*^[9]
 - Medium sized *Vartaka* (brinjal) were baked in *Gandharvahastadi Eranda Taila* until get softened and given to eat on empty stomach with pinch of *Saindhava Lavana* and little amount of *Guda* (for taste).
- **Basti :** *Yogabasti*
- *Anuvasana Basti - Ketakimuladi Taila and Brihat Saindhavadi Taila* - 60 ml
- *Niruha Basti - Sneha - Ketakimuladi Taila and Brihatsindhavadi Taila* - 60 ml
 - *Kalka - Shatapushpa* 20 gms
 - *Kashaya - Rasnasaptaka Kashaya* 200 ml
 - *Water* - 600 ml
 - *Madhu* - 10 gms / *Saindhava* - 5 gms

2. Shamana Chikitsa:

A) *Tab. Trayodashanga Guggulu* 1 tab 250 mg thrice day

B) *Rasnasaptaka Kashaya* 10 ml twice day

RESULTS

We found that there was a marked improvement after the treatment. Painful and restricted movements of

hip are reduced. SLR test become negative on both side. Due to *Eranda Tail Bharjita Vartaka Prayoga* it is noticed that there is marked improvement in gait.

Parameters	Before treatment	After treatment
Gait	Antalgic	Improvement
Hip movement	Painful and restricted	Pain and restriction reduced
SLR test	Positive	Negative
Femoral nerve stretch test	Positive	Negative
Lassegue's sign	Positive	Negative

DISCUSSION

In Ayurveda etiology of *Vata* disorder is of two types; one is *Avaranajanya* and the other is *Dhatu - Kshaya Janya*.^[10]

As already discussed earlier, current case is of *Vataj Gridhrasi* which is usually associated with *Dhatu Kshaya*. The management is concerned with *Shuddha Vata Vyadhi* includes *Snehana* and *Swedana*. So, for all types of *Vata Vikara* associated with *Dhatu Kshaya*, *Snehana* and *Swedana* forms the first line of treatment along with *Basti* which is primary treatment for any *Vata Vikara*.^[11] In the management of *Gridhrasi* also, *Basti* is the choice of treatment.^[12] *Patra Pinda Swedana* was chosen as it is a *Prastara Sweda* which is *Snighdha – Ruksha* kind of *Sweda*,^[13] and it's not only pacifies *Vata* but also reaches out to *Kapha* present in *Vyadhi Sthana* i.e., *Sandhi*. *Patra Pinda Sweda* relieves pain, stiffness and painful conditions, pacifies the morbidity of *Vata*, *Pitta* and *Kapha* in the affected joints, muscles and soft tissues. For *Basti Chikitsa*, *Yogabasti* was selected in which three *Niruha Basti* were given by *Rasnasaptaka Kashaya*. *Rasna* as potency to cures all *Vata* disorders. It also possesses analgesic, anti - inflammatory as proven in studies. Five *Anuvasana Basti* were given by *Ketakimuladi Taila* and *Brahatsaindhavadi Taila* as it cures all *Vata* disorders including *Gridhrasi*. In oral medication *Trayodashnaga Guggulu* was given as it is

indicated in *Vata Vyadhi* and along with that *Rasnasaptaka* decoction as *Anupana* it is helpful in *Katigraha*.

CONCLUSION

In this present case the patient was not properly managed by allopathic medical intervention and was advised surgical treatment, by treating this patient we can conclude that *Panchakarma* along with oral medication is effective in management of *Vataja Gridhrasi* (Sciatica), and specially *Eranda Taila Bharjita Vartaka Prayoga* is very effective in improvement of gait, which was altered due to pain. The use of *Eranda Bhrajita Vartaka* in the form of *Mridu Virechana* found very effective in the present case.

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