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An Observational study to evaluate the effect of *Vaitarana Basti* in the management of *Vatakaphaja Gridhrasi vis-à-vis Sciatica*

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ABSTRACT

Sciatica refers to the low back pain radiating to lower limb in a dermatomal distribution. Sciatica is a common cause of pain and disability; it is more persistent and severe than low back pain. Sciatica prevalence from different studies ranged from 1.2% to 43%. Physical activity at work and occupational workload, such as lifting, work related twisting of the trunk, occupational exposure to whole body vibration for example machine operators, motor vehicle drivers have also been suggested to be risk factors for Sciatica. Obesity has previously been linked to Sciatica. All these factors create pressure on spinal cord producing low back ache and radiating pain. Signs and Symptoms of Sciatica shows close resemblance with *Gridhrasi*. In *Ayurveda*, *Acharya Vangasena* has mentioned *Vaitarana Basti* in the management of *Gridhrasi*. *Vaitarana Basti* adopted here in this study has a direct reference for *Gridhrasi* in *Vangasena samhita* and *Acharya Chakradutta* while mentioning *Vaitarana Basti* has indicated it in *Shula, Vatakaphaja vikaras*. Considering the ingredients, it is a *Shodhana, Teekshna* type of *Basti* which is beneficial in *Vatakaphaja Gridhrasi*. A minimum of 20 subjects who fulfilled the diagnostic and inclusion criteria were subjected to the intervention. The overall results in the study revealed statistically highly significant result.

Key words: *Vatakaphaja Gridhrasi, Sciatica, Vaitarana Basti.*

INTRODUCTION

Sciatica is a relatively common musculoskeletal disorder with an annual incidence ranging from 1-5%. It is the cause of high health related costs to society and a high disability burden to individuals suffering from Sciatica previous studies have found the

associations between Occupational factors and herniated lumbar disc. Specific strains such as lifting and carrying heavy objects, improper trunk postures, prolonged standing, prolonged sitting, whole body vibration, and constantly repeated series of movements are the risk factors for Sciatica. Usual onset of the disease is between 40 to 50 years of age. The Classic feature is aching type of pain in the buttock and paraesthesia's radiating into the posterior lateral thigh and leg. There may be motor and sensory deficits in the lower limb depending on which the root is involved.^[1]

Gridhrasi is one among the *Vataja Nanatmaja Vyadhi*^[2] the name itself indicates change of gait shown in the patients due to extreme pain just like *Ghrindra*, this disease not only inflicts pain but also causes difficulty in walking. It is of two types *Vataja* and *Vatakaphaja Gridhrasi*.^[3] *Lakshanas* such as *Sthamba, Ruk, Toda, Ghrunate, Muhurspandana* to *Sphik Purva Kati, Prusta-Uru, Janu, Jangha* and *Pada*

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in the same order and in *Vatakaphaja Gridhrasi* along with *Lakshanas* mentioned in *Vataja Gridhrasi* it also associated with *Tandra, Gaurava* and *Aruchi*.^[4]

As the condition is a *Vata Vyadhi* as well *Pakvashaya* is the *Sthana* for *Vata Dosha*, henceforth *Basti Karma* is considered as main line of *Chikitsa* as *Basti Karma* has *Anekakarmakarakatvat* action like *Samshodhana, Samshamana*, acts on the *Tridoshas* as well as *Samsarga* and *Sannipataja Doshas* and is considered as *Ardha* as well as *Sarva Chikitsa*.^[5] As per Acharya *Vangasena*, *Vaitarana Basti* is specifically indicated in *Gridhrasi* and according to *Acharya Chakradutta*, *Vaitarana Basti* is said to be best in relieving *Shula* and exerts *Amahara* as well as *Vata Hara* effect.^[6,7] Hence considering the above facts study has been planned to evaluate the efficacy of *Vaitarana Basti* in the management of *Gridhrasi*.

AIMS AND OBJECTIVES

To evaluate the efficacy of *Vaitarana Basti* in the management of *Vatakaphaja Gridhrasi* vis-à-vis *Sciatica*.

MATERIALS AND METHODS

Total 20 Subjects with the clinical features of *Gridhrasi* vis-à-vis *Sciatica* coming under the inclusion criteria approaching the Outpatient and Inpatient Department of Sri Kalabyraveshwara Swamy Ayurvedic Medical College, Hospital and Research centre, Bengaluru were selected for the study.

Diagnostic Criteria

- Subjects presenting with the *Lakshanas* of *Vatakaphaja Gridhrasi*.
- Subjects presenting with the Signs and Symptoms of *Sciatica*.
- Patients with positive SLR Test.

Inclusion Criteria

- Patients of either gender in between the age group of 18 to 70 years.
- Patients presenting with the *Lakshanas* of *Vatakaphaja Gridhrasi*.

- Patients with clinical features of *Sciatica*.
- Patients fit for *Basti Karma*.

Exclusion Criteria

- Patients with systemic disorders that may interfere with the course of treatment.
- Patients with fractures and dislocations of lumbar spine.
- Patients embedded with metallic implants.

Study Design

- A Single arm, open label clinical study.

INTERVENTION

Poorva Karma

Method of preparation of *Vaitarana Basti*

Table 1: Showing the ingredients of *Vaitarana Basti*

Ingredients	Quantity
<i>Guda</i>	80gms
<i>Saindhava Lavana</i>	6gms
<i>Moorchita Tila Taila</i>	120ml
<i>Amleeka (Chincha Jala)</i>	100ml
<i>Gomutra</i>	100ml

80 gms of *Guda* was taken in a *Khalwa Yantra* and adequate amount of *Ushnajala* was added and triturated properly till homogenous mixture was attained. 6gms of *Saindhava Lavana* was added and triturated thoroughly along with the paste made of *Guda*. Thereafter, 120ml of *Moorchita Taila* was added which was indirectly heated over hot water bath and was added slowly into the above mixture and triturated again for homogenous consistency. *Chincha* which was soaked in *Ushna Jala* was squeezed well and filtered, 100ml was taken and added into the *Khalva* and triturated. Later, 100ml of *Gomutra* was added as *Aavapa Dravya* and triturated.

Preparation of the Patient

Patients were subjected for *Sthanika Abhyanga* with *Moorchita Tila Taila* over abdomen, groin, buttocks and thigh region followed by *Sthanika Nadi Sweda* with *Ushnajala*.

For Matra Basti

Dhanwantaram Taila in the dosage of 30ml was taken and heated indirectly over hot water bath and pinch of *Saindhava Lavana* and *Shatapushpa Churna* was added. The warm *Dhanwantaram Taila* mixture was filled into *Basti* syringe fitted with rubber catheter.

For Niruha Basti

All the below mentioned ingredients were added sequentially as per *Basti Sammilana Vidhi* and were thoroughly triturated in *Khalwa Yantra* to get homogeneous mixture. It was filtered and heated indirectly over hot water bath. The warm *Niruha Basti Dravya* was poured into the plastic enema can fitted with rubber catheter. This prepared *Basti Dravya* contents were poured into a vessel which was indirectly heated over hot water bath and the contents were filtered and poured into enema-can just prior to administration.

Position of the patient

Patient was made to lie down in left lateral position with left leg stretched straight and right leg flexed at hip and knee.

Pradhana Karma

Basti Karma was administered in *Yogabasti* pattern

Table 2: Showing Yoga Basti pattern of Vaitarana Basti

Day	1	2	3	4	5	6	7	8
Basti	M	V	M	V	M	V	M	M

For Matra Basti - *Dhanwantaram Taila* in the dosage of 30ml with pinch of *Saindhava Lavana* and *Shatapushpa Churna* was administered immediately after the intake of food.

For Vaitarana Basti - *Basti Dravya* prepared as mentioned above as per *Basti Sammilana Vidhi*, was administered after intake of light food.

Paschat Karma

Immediately after the administration of *Vaitarana Basti*, lifting of both the legs, patting to the buttocks,

anti-clockwise massage over abdomen and rubbing the palms and soles was done.

Patient was asked to take bath using *Sukhoshna jala* and was asked to avoid *Astamaha Doshakara Bhavas* and *Basti Pratyagamana Kala* was noted.

Assessment criteria

Assessment was done BT (Before treatment) and AT (After treatment)

Stambha (Stiffness)

- No Stiffness - 0
- Mild Stiffness - 1
- Moderate Stiffness - 2
- Severe Stiffness - 3

Ruk (Pain)

- No Pain - 0
- Mild Pain - 1
- Moderate Pain - 2
- Severe Pain - 3

Toda (Pricking Sensation)

- No Pricking sensation - 0
- Mild Pricking sensation - 1
- Moderate Pricking sensation - 2
- Severe Pricking sensation - 3

Ghrunate (Catch)

- No Catch - 0
- Mild Catch - 1
- Moderate Catch - 2
- Severe Catch - 3

Muhuspandana (twitching)

- No Twitching - 0
- Mild Twitching - 1
- Moderate Twitching - 2
- Severe Twitching - 3

Tandra (Drowsiness)

- No Drowsiness - 0
- Mild Drowsiness - 1
- Moderate Drowsiness - 2
- Severe Drowsiness - 3

Gourava (Heaviness)

- No Heaviness - 0
- Occasional heaviness but does routine work - 1
- Persistent heaviness but continues routine work - 2
- Persistent heaviness which hampers usual work - 3
- Unable to carry out routine work due to heaviness - 4

Aruchi

- Very little desire towards food - 0
- Desire for food little late than normal time - 1
- Eating timely without much desire - 2
- Normal desire for food - 3

OBSERVATIONS**Distribution of subjects based on Age**

In the present study, 3 (15%) Patients belonged to the age group of 21-30yrs, 6(30%) Patients belonged to the age group of 31-40yrs, 6(30%) Patients belonged to the age group of 41-50 yrs. 4 (20%) Patients belonged to the age group of 51-60yrs. 1(5%) Patient belonged to the age group of 61-70yrs.

RESULTS

BT-AT	Mean	SD	Wilcoxon signed rank	N	MR	SR	Z Value	P	Remarks
<i>Sthamba</i>	0.20	0.410	NR	20	10.50	210.00	-4.030	0.000	HS
			PR	0	0.00				
			Ties	0					
<i>Ruk</i>	0.21	0.419	NR	19	10.00	190.00	-3.963	0.000	HS

Distribution of subjects based on Gender

In the present study, 11 (55%) Patients were Males and 9 (45%) Patients were Females respectively.

Distribution of subjects based on Occupation

In the present study, 6(30%) Patients were Homemakers, 2(10%) Patients were Tailor, 6(30%) Patients were Driver, 4(20%) Patients were Agriculturists and 2(10%) were Engineer.

Distribution of patients based on the Low back ache and Radiation of pain to the affected limb

In the present study, all 20(100%) patients had Low back pain, 9(45%) patients had Low back pain radiating to Right Lower Limb, 7(35%) patients had Low back pain radiating to Left Lower Limb and 4(20%) patients had Low back pain radiating to both the Lower Limbs.

Statistical Analysis

The assessment was done before treatment (BT) and after treatment (AT) and assessment parameters like *Sthamba*, *Ruk*, *Toda*, *Ghrunate*, *Muhuspandana*, *Tandra*, *Gaurava* and *Aruchi* were subjected to Wilcoxon Signed Rank Test.

Interpretation	P Value
Insignificant	>0.05
Significant	<0.05
Highly Significant	<0.01, <0.001

			PR	0					
			Ties	1					
<i>Toda</i>	0.26	0.452	NR	19	10.00	190.00	-3.895	0.000	HS
			PR	0	0.00				
			Ties	1					
<i>Muhuspandana</i>	0.50	0.607	NR	14	7.00	111.00	-3.037	0.001	HS
			PR	1	0.00				
			Ties	5					
<i>Ghrunate</i>	0.30	0.946	NR	16	5.50	136.00	-3.619	0.000	HS
			PR	0	0.00				
			Ties	4					
<i>Gowrava</i>	0.42	0.607	NR	10	5.50	55.00	-3.051	0.02	HS
			PR	0	0.00				
			Ties	10					
<i>Aruchi</i>	0.60	0.59	NR	11	6.00	66.00	-3.20	0.01	HS
			PR	0	6.00				
			Ties	9					
<i>Tandra</i>	0.26	0.45	NR	4	2.50	10.00	-2.000	0.04	HS
			PR	0	0.00				
			Ties	16					

In the present study, the Wilcoxon signed rank test on *Sthamba*, *Ruk*, *Toda*, *Muhuspandana*, *Ghrunate*, *Gowrava*, *Aruchi* and *Gaurava* revealed statistically highly significant result. And *Ghrunate* revealed statistically significant result.

DISCUSSION

Gridhrasi is a *Vatajananatmaja Vyadhi*, *Vatadosha* is mainly responsible for the state of normalcy as well as is a cause for vitiation of two other *Doshas*. *Basti Karma* is best among *Panchakarma* and *Taila* is best *Prashamanartha* to combat the *Vata Dosh*. The action of *Basti* is not localized but it has a systemic effect. *Basti* when administered the *Veerya* of *Basti Dravya* reaches the whole body through *Srotas* just like water when poured into the root of tree reaches

the whole plant. *Basti* when administered draws out the vitiated *Doshas* from the just like a cloth while colouring absorbs only colour not water.

Vaitarana Basti is *Vata Kapha Shamaka*, is *Shula Hara* and is directly indicated in *Gridhrasi*. The ingredients of *Vaitarana Basti* are *Guda*, *Saindava Lavana*, *Amleeka*, *Moorchita Tila Taila* and *Gomutra*, mainly these drugs are having *Ushna Virya* and *Kaphavatagna property*, acts as a *Teekshna Samshodhana Basti* by removing the *Marga Avarodha* caused by *Kapha* to the *Gati* of *Vata*. *Dhanwantaram Taila*, It is considered as best for *Sarva Vatapaha Vikaras* and it consists of *Kapha Vataghna Dravyas*.

Properties of the ingredients used in Vaitarana Basti

Saindhava Lavana - It has *Laghu*, *Snigdha*, *Sukshma Guna*. Due to its *Gunas* it helps to pass the drug

molecule in systemic circulation through mucosa helping *Basti Dravya* to reach up to molecular level, helpful for elimination of waste, liquefies viscid matter and breaking it into minute particle.

Chincha (Amleeka) - Is having *Vata-Kapha Shamaka, Ruksha* and *Ushna Guna*. *Ruksha Guna* helps in counteracting *Ama* which has similar *Gunas* to that of *Kapha*.

Guda - It has *Guru, Snigdha, Kshara Guna, Sheeta Veerya, Balya, Anabhishtyandi, Agnivardhak* and has *Vata-Pittaghna* property. Helps carrying drug to micro cellular level.

Moorchita Taila - It is best among all the *Tailas*, it alleviates *Vata* at the same time it doesn't aggravate *Kapha*, it is having *Teekshna, Vyavayi, Sukshma Guna* and *Ushna Veerya*. It is *Brimhana, Vrishya, Twakprasadana, Lekhana, Vatahara* property.

Ushna Jala - It does *Sneha Jeerna, Shleshma Bhinna, Maruta Anulomya*, does *Vatashleshma Upashamana*.

Gomutra - *Gomutra* is chief content in *Vaitarana Basti, Katu Rasa, Katu Vipaka, Ushna Veerya, Laghu, Ruksha, Tikshna Guna*, pacify *Kapha*. Due to *Veerya Basti Dravya* reaches up to cellular level helps to disrupt the pathogenic process carries out the morbid matter towards *Pakvashaya* for elimination.

Shatapushpa - *Shatapushpa* is having *Laghu, Teekshna Guna*, acts as *Deepani, Pachani, Shulanut, Agnimandhyahari, Baddha Vit Hrut, Anila Sleshmahrut*, Due to its *Laghu* and *Teekshna Guna* it helps in easy digestion and penetration property.

Hence, considering the properties of all these ingredients used in *Vaitarana Basti*, it is effective in treating *Vatakaphaja Gridhrasi*.

CONCLUSION

This Clinical study was undertaken to study the effect of *Vaitarana Basti* in the management of *Vatakaphaja Gridhrasi*. Present study has proved to be effective in reducing the *Lakshanas* of *Vatakaphaja Gridhrasi* and has shown good results in all assessment parameters taken into consideration. Hence it can be taken up as

better choice of treatment in the management of *Vatakaphaja Gridhrasi*.

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