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A case study on *Gridhasi* w.s.r. to Sciatica

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ABSTRACT

Gridhasi is one of the most common disease of *Vata Vyadhi*, which closely related with sciatica. This is characterised by low back pain and radiates towards posterior part of leg or discomfort associated with sciatic nerve. It has painful (*Shoola Pradhan*) condition which hampers the routine of life. In *Gridhasi* pain starts form *Kati-Prushta* (Pelvic & Lumbo-Sacral resion) radiating towards *Jangha* (Thigh), *Pada* (Legs) with impairment of lifting leg (Stiffness). The prevalence of sciatica varies considerably ranging from 3.8% in the working population to 7.9% in nonworking population. Contemporary medicine has limitations giving short term relief in pain or surgical intervention with side effect. The aim of this study was to access the effect of *Ayurvedic* management through *Shodhan* and *Shaman Chikitsa*. Here in this case study a 60 year female patient was suffering from sciatic pain (Low back Pain) radiating towards posterior part of leg due to herniation of L4-L5 and L5-S1 that is correlated with *Gridhasi* since 6 months approached to Ayurvedic Hospital and She was treated with *Panchakarma* treatment including *Dashmooladi Niruha Basti*, *Merudand Basti*, *Patra Pinda Sweda* and *Raktmokshan* along with *Shaman Chikitsa*. The treatment was continued for consecutive two months.

Key words: *Gridhasi*, *Sciatica*, *Vata Roga*, *Niruha Basti*.

INTRODUCTION

In *Ayurveda* Sciatica is considered as *Gridhasi* which included under 80 type of *Vataj Nanatmaja Vikara*.^[1] In this disease the gait of patient is typical patients leg become tense and slightly curved due to pain resembling walk to like vulture (*Giddha*). *Gridhasi* is divided by into two types based on *Dosha* involvement in it. One is *Kewal Vataja* and other is *Vata-Kaphaja*. The sign and symptom of *Kewal Vataja* is *Ruk* (Pain)

with *Toda* (Pricking sensation), *Stambh* (Stiffness) and repeated twitching in the *Sphik*, *Kati*, *Uru*, *Janu*, *Jangha* and *Pada* in order. *Sakthi Utkshepeni Graha* (restriction in upword lifting of lower limb). In *Vata-Kaphaja Gridhasi* there is *Tandra* (Drowsiness), *Gourava* (Feeling of heaviness) and *Aruchi* (Anorexia) is present.^[2] Sciatica refer to pain that radiates along the course of sciatic nerve, which is associated with tingling numbness, pricking sensation and stiffness. According to *Ayurveda Gridhasi* is mentioned as *Kricchrasadhya Vyadhi* which is very difficult to cure.

The prevalence of sciatica varies considerably ranging from 3.8% in the working population to 7.9% in nonworking population. It is most prevalent in people during their 40s and 50s and men are more commonly affected than women.^[3] Low back pain has been reckoned as fifth most common cause for hospitalization and the third most repeated reason for a surgical procedure.^[4]

The management provided by the immediate medicine for this condition is either conservative or surgical in nature. By taking that type of treatment more

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prevalence rate of *Gridhasi* and to overcome the above expensive therapeutics, so there is appreciable need to find out effective management of *Gridhasi*.

CASE REPORT

A 60 years old female lady comes to OPD of Panchakarma Department of Pt. Khushilal Sharma Govt. Auto. Ayurvedic Institute and Hospital, Bhopal. Patient was house wife by occupation. The Patients was apparently healthy before six month than she started following complaints.

Chief Complaints

On *Vam Pada*

1. *Ruk* (Pain)
2. *Toda* (Pricking sensation)
3. *Stambh* (Stiffness)
4. *Sanchar Vedana* (Radiating pain) in order *Sphik, Uru, Kati, Janu, Pada*
5. *Chankraman* and *Aasan Kashtata* (Pain while walk-in and sitting starts before 6 months).

History of Case Study

Patient had taken alternative treatment before came to our hospital as per need for her pain and she was not satisfied by it by having repeat episodes. Patient did not have history of any other illness.

Past History

History of Hypertention and Diabetes.

No any specific surgical History.

Family History

No any major illness.

On Examination

General Condition - Moderate, Afebrile, and No pallor was present.

Ashtavidha Pariksha^[5]

Nadi - 76 /mins

Mutra - *Samyak*

Mala - *Samyak*

Jivha - *Sama*

Shabda - *Spashta*

Sparsha - *Samshitoshna*

Druka - *Spashta*

Akruti - *Madhyam*

Prakarti - *Vata Kaphaja*

Weight - 60 kg

Blood Pressure - 130/80

Temperature - 98.6°F

Systemic Examination

Inspection:

Gait - Antalgic gait

Deformity - No any deformity

Palpation:

Tenderness: Positive at L4 and L5

Muscles tone: Both Upper limb and Lower limb is good

Range of movement of spine:^[6]

Forward flexion: Limited to 30 cm above ground

Right lateral flexion: Limited to 40° with pain.

Left lateral flexion: Limited to 40° with pain.

Extension: Limited to 10° with pain.

Special Test:^[7]

Test	Right Leg	Left Leg
SLR Test	Negative	Positive at 45°
Lessigie Test	Positive	Negative

Assessment Criteria

Assessment of sign and symptoms of patient

1. Low back pain radiating towards thigh, calf and down to foot.

Pain in lumber region not radiated towards anywhere	G ₀
Pain in lumber region radiates towards thigh	G ₁
Pain in lumber region radiates towards thigh	G ₂

Pain in lumber region radiates towards foot	G ₃
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2. Stiffness In Lumbar Region

No stiffness	G ₀
Mild stiffness	G ₁
Moderate stiffness	G ₂
Severe stiffness	G ₃

3. Pricking sensation

No pricking sensation	G ₀
Mild pricking sensation	G ₁
Moderate pricking sensation	G ₂
Severe pricking sensation	G ₃

4. Difficulty and pain while walking and sitting

No pain	G ₀
Mild pain +No difficulty in walking and sitting	G ₁
Slight difficulty in walking and sitting	G ₂
Much difficulty in walking and sitting	G ₃

Overall assessment criteria:

Thus, the total effect of the therapies will be graded as follows

Complete remission	100% relief
Marked improvement	<100% to ≥75% relief
Moderate improvement	<75% to ≥50% relief
Mild improvement	<50% to ≥25% relief
No improvement	< 25% relief

Treatment

1 st Month			
SN	Procedure	Drugs	Duration
1.	Merudanda Basti	Vata Shamak Oil	Daily at morning
2.	Nadi Sweda	Dashmool Kwath	Daily After MB

3.	Shodhan Basti	Triphala Kwath, Mahanarayan Oil, Madhu, Saindhava, Satpushpa, Ajwain(750ml)	1 st - 3 days empty stomach
4.	Karma Basti ^[8] (Alternate Niruha and Anuwasan Basti)	Niruha Dashmool Kwath, Mahanarayan Oil, Madhu, Saindhava, Satpushpa, Ajwain (450ml) Anuwasana- Bala Oil- 60ml	After Shodhan from 4 th day of treatment
5.	Raktmokshan ^[9] (Leech therapy)		Every week

2 nd Month			
SN	Procedure	Drugs	Duration
1.	Merudanda Basti	Vata Shamak Oil	Daily morning
2.	Patra Pinda Swedana	Vata Shamak Oil	Daily morning after MB
3.	Karma Basti (Alternate Niruha and Anuwasan Basti)	Niruha - Dashmool Kwath, Mahanarayan Oil, Madhu, Saindhava, Satpushpa, Ajwain (450ml) Anuwasana - Bala Oil - 60ml	
4.	Raktmokshan (Leech therapy)		Every week

OBSERVATION

Assessment between before and after treatment

SN		Before treatment	After treatment
1.	Low back pain radiating towards thigh calf and down to foot	03	00
2.	Stiffness in lumber region	03	01
3.	Pricking sensation	02	01

4.	Difficulty and pain while walking and sitting	03	01
5.	Straight leg raise test (SLRT)	+Ve at 45°	+Ve at 70°

As observed in the above table, the patient score of symptoms of *Gridhasi* in left side was 11 and SLRT was +Ve at 45° respectively at the time of admission & was reduced to 03 and SLRT was +Ve at 70° at the time of discharge. It showed moderate improvement (72.7%) in left lower back & lower limb.

CONCLUSION

Sciatica is a major cause of morbidity makes a person unable to perform day to day activity. In this case we treated the patient by *Shodhan* and *Shamana Chikitsa* and we found that these treatments were very effective in treatment of *Gridhasi*. It was proved by significant improvement of patient primary symptoms. The patient is doing well with his daily activities. In last we can conclude that *Gridhasi* can be successfully managed by proper Ayurvedic assessment and treatment without any side effect.

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