



ISSN 2456-3110

Vol 9 · Issue 8

August 2024

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Maharshi Charaka
Ayurveda

Indexed

The Ayurvedic management of Spastic Paralysis w.s.r. *Pakshaghata*: A Case Report

Ratnesh Kumar Shukla¹, Shraddha Sharma², Shrikant Lodhi³, Swati Nagpal⁴, Vivek Sharma⁵

^{1,3}Post Graduate Scholar, PG Dept. of Kayachikitsa, Pt. Khusilal Sharma (Auto) Ayurvedic College & Hospital, Bhopal, Madhya Pradesh, India.

^{2,5}Assistant Professor, PG Dept. of Kayachikitsa, Pt. Khusilal Sharma (Auto) Ayurvedic College & Hospital, Bhopal, Madhya Pradesh, India.

⁴Associate Professor, PG Dept. of Kayachikitsa, Pt. Khusilal Sharma (Auto) Ayurvedic College & Hospital, Bhopal, Madhya Pradesh, India.

ABSTRACT

In Ayurveda, *Vata Dosha* is considered to play a significant role in neurological health due to its association with movement and communication within the body. *Vata* governs the nervous system and is linked to the movement of nerve impulses and the coordination of bodily functions. When *Vata* is imbalanced, it can contribute to various neurological issues, including Nervous system disorders, Mental Health Issues, Cognitive Function, and Movement Disorders. *Vata Dosha* is associated with the movement and function of the nervous system, and imbalances can contribute to spastic paralysis (*Pakshaghata*). The pathology of paralysis related to *Vata dosha* is understood through its effects on the body's neurological and muscular systems. *Vata Dosha* influences paralysis by nerve Impairment, muscle dysfunction, circulatory Issues and joint and tissue degradation which may be associated with paralysis. In this study, an attempt has been made to describe the scientific effects of *Panchakarma* procedures and *Shamana Aushadha* in this case.

Key words: Spastic Paralysis, *Pakshaghata*, Ayurveda, *Vata Dosha*.

INTRODUCTION

Hemiplegia refers to paralysis affecting the muscles of the face, arm, and leg on one side of the body. Alongside motor impairments, individuals may experience other deficits, such as changes in sensation, memory, and cognition. Stroke is a major cause of disability and death in India. The prevalence of stroke in the country ranges from 40 to 270 cases per 100,000 people. Stroke is the most frequent cause of hemiplegia, typically damaging the corticospinal tracts

in one hemisphere of the brain. Other potential causes include trauma, such as spinal cord injuries, brain tumors, and brain infections. Based on morbidity rates, 45% of stroke patients are able to live independently, while 22% become dependent on others, and 20% require hospitalization. There are primarily two types of strokes: ischemic and hemorrhagic. Ischemic strokes are more prevalent and occur due to a disruption in blood supply, whereas hemorrhagic strokes result from the rupture of blood vessels or abnormal vascular structures.^[1,2,31]

Pakshaghata is a condition in Ayurvedic medicine characterized by sudden paralysis or weakness on one side of the body, often linked to *Vata dosha* imbalances. It is similar to hemiplegia and may be associated with strokes or neurological disturbances. According to *acharya charaka* हृत्त्वैकं मारुतः पक्षं दक्षिणं वाममेव वा | This verse suggests that in the context of treatment, one should address an imbalance or blockage in a single part of the body, particularly referring to the "*Marutah*" (*vata* or vital force) which might be affecting one side - either the right (*Dakṣiṇa*)

Address for correspondence:

Dr. Ratnesh Kumar Shukla

Post Graduate Scholar, PG Dept. of Kayachikitsa, Pt. Khusilal Sharma (Auto) Ayurvedic College & Hospital, Bhopal, Madhya Pradesh, India.

E-mail: drratneshs@gmail.com

Submission Date: 13/07/2024 Accepted Date: 22/08/2024

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.9.8.33

or left (*Vāma*) side of the body. कुर्याच्चेष्टानिवृत्तिं हि रुजं वाक्स्तम्भमेव च | गृहीत्वासर्धं शरीरस्य सिराः स्नायुर्विशोष्य च ||५४|| This verse elaborates on a therapeutic practice involving the cessation of abnormal movements or symptoms (*Cheṣṭā Nivṛtti*) that can help alleviate conditions like pain (*Ruja*) or speech impediments (*Vāk-stambha*). पादं सङ्कोचयत्येकं हस्तं वा तोदशूलकृत् | एकाङ्गारोगं तं विद्यात् सर्वाङ्गं सर्वदेहजम् | This verse deals with the specific practice of constricting (*Sankocayati*) one foot or hand to alleviate localized pain or symptoms (*Todaśūla-kṛt*). The approach is indicative of treating single-limb ailments or localized issues (*Ekāṅga-roga*). This *shloka*, likely from an *Ayurvedic* or traditional medical text, describes a particular condition affecting the body and its treatment.^[3]

According to *Acharya Sushruta* अधोगमाः सतिर्यगा धमनीरुध्वदेहगाः When the descending (*Adhogama*), ascending (*Urdhvadehaga*) or *Tiryaka Dhamani* are disturbed in the body. यदा प्रकुपितोऽत्यर्थं मातरिश्वा प्रपद्यते When the condition becomes severe and leads to extreme distress, causing the *Vata Dosha* (*Matarishva*) to become aggravated. *Matarishva* is often a metaphorical reference to the *Vata Dosha*, तदाऽन्यतरपक्षस्य सन्धिबन्धान् विमोक्षयन्, At that point, it releases the *Sandhis* of one of the sides (or aspects of the body), causing its destruction. हन्ति पक्षं तमाहुर्हि पक्षाघातं भिषग्वराः, The *Shreshtha Vaidyas* refer to this as a '*Pakshaghat*' or a stroke, which affects one side of the body. यस्य कृत्स्नं शरीरार्धमकर्मण्यमचेतनम् In this condition, the entire half of the body becomes paralyzed or non-functional. ततः पतत्यसून् वाऽपि त्यजत्यनिलपीडितः The person may either collapse or abandon their body, being afflicted by the disturbance of the *Vata Dosha*. The *shloka* in question appears to be a classical description of a condition related to disturbances in the body's channels, potentially akin to a stroke, and its implications.

एकतरशरीरार्धमनीरुध्वधस्तिर्यगा आश्रित्य सन्धिबन्धान् कफसंहिताभिर्धमनीभिः कृतान् मोक्षयन् पक्षाघातं कुर्यात् |

एकतरशरीरार्धमनीरुध्वधस्तिर्यगा आश्रित्य Taking support from the vessels or channels that run along one half of the body, whether ascending (*Urdhva*) or descending (*Adhoga*) or transverse (*Tiryaka*). This phrase refers to the body's various vessels and channels, which include those running upward, downward, and horizontally. The condition discussed affects these channels, highlighting the significance of their proper functioning in maintaining health. Disturbances in these vessels can impact the entire system's balance and function. सन्धिबन्धान् कफसंहिताभिर्धमनीभिः कृतान् By disrupting the connections (*Sandhibandhan*) of these channels, which are managed by the *Kapha Dosha* and the channels governed by it. The term "*Sandhibandhan*" refers to the connections or junctions in the body where channels meet or interact. The *Kapha Dosha* is responsible for maintaining stability and structure in these channels. Disruption of these connections due to imbalances or disturbances can lead to significant health issues. मोक्षयन् पक्षाघातं कुर्यात् This disruption can cause a condition similar to '*Pakshaghat*' (stroke).^[4]

Pakshaghat and Hemiplegia both refer to conditions characterized by paralysis or weakness on one side of the body, though they originate from different medical viewpoints.

Pakshaghat is an *Ayurvedic* term that describes a condition similar to hemiplegia, involving weakness or paralysis on one side of the body. In *Ayurveda*, this condition is attributed to imbalances in the *Vata dosha*, affecting the nervous and muscular systems. It is often associated with sudden onset and may be linked to disorders like stroke or neurodegenerative diseases, reflecting disruptions in the body's channels or vital energies.

Hemiplegia is a term from contemporary medicine that denotes partial or complete paralysis on one side of the body. Paralysis treatment focuses on managing symptoms and maximizing function. Physical therapy is crucial for maintaining muscle strength and flexibility. Medications and surgery may address underlying causes or complications. Ongoing research explores emerging therapies like stem cells and periprosthetic for potential recovery.

Both conditions involve unilateral paralysis, but *Pakshaghata* is viewed through the lens of *Ayurvedic* principles focusing on *Dosha* imbalances and traditional therapies, whereas Hemiplegia is examined through a modern medical approach that emphasizes neurological damage and rehabilitation.

CASE REPORT

A 60 years old male patient came to the OPD. The patient reported being healthy until six months ago, when he abruptly developed spastic paralysis and associated pain affecting the left side of his body. He sought evaluation and treatment at our hospital.

Table 1: Personal History

Diet	Mixed
Appetite	Low
Bowel	Irregular
Sleep	Disturbed
Micturation	Normal

Family History - NAD

Table 2: Dashavidhapareeksha

Prakriti	Vata Kapha
Vikriti	Vata predominant Tridosha
Sara	Madhyama
Samhanan	Heena
Pramana	Madhyama
Satwa	Avara
Satmya	Madhyama
Ahar Shakti	Avara
Vyayam Shakti	Madhyama
Vaya	Pravara

Table 3: Ashta Vidha Pareeksha

Nadi	Vata
Mutra	Prakrita
Mala	Vibandha
Jivha	Lipta
Shabda	Ashpashta
Sparsha	Mridu
Drishti	Prakrita
Akriti	Avara

General Examination

- Pallor - Absent
- Icterus - Absent
- Koilonychias - Absent
- Lymphadenopathy - Absent
- Edema - Absent

On MRI Brain

- Area following CSF density seen in right frontoparietal region with prominent adjacent sulci and ipsilateral lateral ventricle due to volume loss with focal area of calcification are also seen.
- Encephalomalacia with gliosis.
- Diffuse cerebral atrophy.

Past history

- H/O Hypertension Since 3 years- On medication Since 3 years (Tab amlodipine 5mg of, Tab Atenolol IP 50 mg 1-0-0 A/F)
- H/O CVA Stroke 6 Months back (Tab Atorvastatin 40mg 0-0-1 A/F)
- Not K/C/O –Allergy, Typhoid, Malaria, Dengue.
- No H/O – Trauma or Accidental Injury

On Examination

- General condition: Moderate
- Pulse Rate: 75/min
- BP: 140/90 mm of Hg
- RR: 16/min
- HR: 72/min
- Mala: irregular

Table 4: Motor Examination

	RT	LT
Power	1/5	5/5
Nutrition		
Biceps	26 cm	27.5 cm
Forearms	23 cm	24.5 cm
Mid Thigh	44 cm	45.2 cm
Calf Muscle	29 cm	30.5 cm
Tone		
Upper Limb	Spastic	N
Lower Limb	Spastic	N
Involuntary Movements	Absent	Absent
Co-ordination	Intact	Intact
Sensory System		
Touch	Intact	Intact
Pain	Intact	Intact
Temperature	Intact	Intact
Vibration	Intact	Intact
Pressure	Intact	Intact

Table 5: Higher Mental Function

Consciousness		Fully consciousness
Behaviour		NAD
Orientation	Time	
	Place	Intact
	Person	

Memory	Immediate	Intact
	Recent	Intact
	Long Term	Intact
	Reasonable	Intact
Hallucination		Absent
Delusion		Absent
Speech Disturbance		Absent
Convulsion		Absent
Intra Cranial Tension		Normal
Handedness		Right Handed
Cranial Nerve Examination		
Olfactory Nerve	Smell	Intact
Optic	Vision acuity	NAD
	Vision field	NAD
	Colour Vision	NAD
Oculomotor, Trochlear, Abducence		
Eye ball movements		Possible in all direction
Pupil	Position	NAD
	Shape	NAD
	Size	NAD
	Symmetry	NAD
	Accommodation	NAD
Ptosis		Absent
Trigeminal		
Sensory	Touch	Intact
	Pain	Intact
	Pressure	Intact
	Temperature	Intact
	Vibration	Intact

Motor	Jaw jerk reflex	Present
	Lateral movements of jaw	Possible
	Forehead	Possible
Facial	Eyeball Raising	Possible
	Eye Closure	Possible
	Teeth Showing	Possible
	Blowing of Cheeks	Possible
	Smile	Normal
Auditory		Intact
Glossopharyngea I	Position of uvula	Centrally Placed
	Taste Sensation	Intact
	Gag Reflex	Normal
Vagus	Cough	Normal
	Soft Palate Upward movement	Centrally
Accessory/Spinal	Sternocleidomastoid movements	NAD
	Trapezius movements	NAD
Hypoglossal	Fasciculation	Absent
	Protrusion of tongue	Complete

Table 6: Reflexes

Deep Tendon Reflex		
Biceps	+3	+2
Triceps	+3	+2
Brachio-radialis	+3	+2
Knee jerk	+3	+2
Ankle jerk	+3	+2
Superficial		
Plantar	Babinski Present	Babinski Absent
Abdominal	Present	Absent
Gait	Spastic	

Treatment

स्वेदनं स्नेहसंयुक्तं पक्षाघाते विरेचनम् || Ch.Chi.28/100

स्वेदनं This refers to the process of sweating or inducing perspiration. In *Ayurveda*, *Swedana* is a therapeutic technique used to help open the channels in the body, loosen toxins, and promote circulation. It can be performed using steam or other heating methods. स्नेहसंयुक्तं This means combined with oil or other lubricating substances. In this context, it suggests that the sweating therapy is done in conjunction with the application of oils. This combination helps to nourish the tissues, enhance the effect of sweating, and facilitate the removal of toxins. पक्षाघाते विरेचन (*Virechana*) This is a purgation therapy used in *Ayurveda* to cleanse the digestive system and eliminate toxins from the body. It involves the administration of *Mridu Virechaka* drug to induce a controlled, therapeutic purge.^[5]

पक्षाघातोपद्रुतमम्लानगात्रं सरुजमात्मवन्तमुपकरणवन्तं चोपक्रमेत् | This describes a person suffering from paralysis, with symptoms including a weakened body, pain (*Sarujam*), and an impaired condition, implying the person is either unable to use or has diminished function in the affected parts. तत्र प्रागेव स्नेहस्वेदोपपन्नं मृदुना शोधनेन संशोध्यानुवास्यास्थाप्य च यथाकालमाक्षेपविधानेनोपचरेत् | It suggests a treatment regimen for such a person. Initially, one should begin with gentle methods such as oil application (*Sneha*) and sweating therapies (*Swedopapanna*) to cleanse and purify the body. After the initial cleansing, one should use a mild treatment (*Mriduna Shodhana*) and apply medicinal oils (*Anuvasya*) as prescribed, ensuring the treatment is adapted according to the timing and progress (*Yathakalam*). वैशेषिकध्वात्र मस्तिष्क्यः शिरोबस्तिः, अणुतैलमभ्यङ्गार्थं, साल्वणमुपनाहार्थं, बलातैलमनुवासनार्थं | *Mastishkya* refers to treatments related to the head, indicating the importance of head and brain therapies. *Shirobasti* and *shiropichu* refers to a specific therapy where medicated oil is retained on the head for a period, used in conditions related to the head and nervous system. *Anutaila* kind of Light oil used for body

massage (*Abhyanaga*). *Salvana* is a type of therapeutic application for pain relief and healing (*Upanaha*). *Balataila* is a Stronger oil used for deep application and restoration (*Anuvasa*). एवमतन्द्रितस्त्रीधतुरो वा मासान् क्रियापथमुपसेवेत | The patient should remain active and attentive and follow the prescribed therapeutic regimen diligently for a period of up to three to four months (*Chaturah Masa*) to achieve optimal recovery.^[6]

Table 7: Treatment Plan

05/01/2024 - 15/01/2024	<i>Punarnavadi Guggula 2BD</i> <i>Maharasnadi Kwatha 20ml BD</i> <i>Capsule Palsineuron 1BD</i> <i>Brahmi Vati 2BD</i> <i>Erand Taila for Internal use 15ml at night as well as local application</i>	<i>Sarwang Snehana with Vatashamaka Taila</i> <i>Sarwang Swedana with Dashmoola Kwath</i> <i>Nasya with Anu Taila 2-2 Drop each nostril</i>
16/01/2020 - 31/01/2024	<i>Brihata Vata Chintamani Rasa 250mg BD</i> <i>Yograj Guggula 2BD</i> <i>Maharasnadi Kwatha 20ml BD</i> <i>Capsule Palsineuron 1BD</i> <i>Brahmi Vati 2BD</i> <i>Erand Taila for Internal use 15ml at night as well as local application</i>	<i>Sarwang Shastika-Shali Pinda Swedana</i> <i>Shiropichu with Bala Taila</i>
01/02/2024 - 16/02/2024	<i>Brihata Vata Chintamani Rasa 250mg BD</i> <i>Yograj Guggula 2BD</i> <i>Maharasnadi Kwatha 20ml BD</i>	<i>Sarwang Snehana with Vatashamaka Taila</i> <i>Sarwang Swedana with Dashmoola Kwath</i> <i>Kala Basti</i>

	<i>Capsule Palsineuron 1BD</i> <i>Brahmi Vati 2BD</i> <i>Erand Taila for local application</i>	<i>(Niruha Erandamooladi Kwatha 360 ml</i> <i>Anuvasana with Sahacharadi Taila 80 ml)</i>
17/02/2024 - 08/03/2024	<i>Rasaraj Rasa 250mg BD</i> <i>Yograj Guggula 2BD</i> <i>Maharasnadi Kwatha 20ml BD</i> <i>Capsule Palsineuron 1BD</i> <i>Brahmi Vati 2BD</i> <i>Erand Taila for local application</i>	<i>Sarwang Snehana with Vatashamaka Taila</i> <i>Sarwang Swedana with Dashmoola Kwath</i> <i>Matra Basti with Bala Taila 60 ml</i>

Table 8: Results

Deep Tendon Reflex	RT		LT	
	BT	AT	BT	AT
Biceps	+3	+3	+2	+2
Triceps	+3	+3	+2	+2
Branchio-radialis	+3	+3	+2	+2
Knee jerk	+3	+2	+2	+2
Ankle jerk	+3	+2	+2	+2
Superficial				
Plantar	Babinski Present	Present	Babinski Absent	Absent
Abdominal	Present	Present	Absent	Absent
Gait	Spastic			
	RT		LT	
Power	1/5	4/5	5/5	5/5

Tone				
Upper Limb	Spastic	Slightly Spastic	N	N
Lower Limb	Spastic	Slightly Spastic	N	N

Table 9: Observation^[7]

S N	Signs and Symptoms	Before Treatment	After treatment
1.	Facial deviation	No	No
2.	Shoulder extension	No	No
3.	Sensory Aphasia	No	No
4.	Balance of trunk	No	No
5.	Elbow movements	No	Yes
6.	Forearm movements	No	Yes
7.	Wrist movements	No	Yes
8.	Gripping power	No	Yes
9.	Holding of object	No	Yes
10.	Grasping objects	No	Yes
11.	Releasing of object	No	Yes
12.	Catching of object	No	Yes
13.	Throwing of object	No	Yes
14.	Tying knot	No	Yes
15.	Clothing	Yes	Yes
16.	Feeding with hand	No	Yes
17.	Holding and drinking glass of water	No	Yes
18.	Standing without support	Yes	Yes
19.	Standing balance	Yes	Yes
20.	Squatting	No	Yes

21.	Getting up from squatting position	No	Yes
22.	Climbing the stairs	No	Yes
23.	Toilet activity	No	Yes
24.	Bathing	No	Yes
25.	Crossing the road	No	Yes
26.	Tingling sensation	Yes	No

DISCUSSION

Spastic paralysis, marked by increased muscle tone and stiffness, can be effectively managed through *Ayurvedic* treatment and *Panchakarma* therapies. By addressing underlying *Dosha* imbalances and employing techniques such as *Mridu Virechana*, *Basti*, and *Abhyanga*, these treatments help reduce spasticity in the affected right upper and lower limbs. Patients often experience improved muscle relaxation, enhanced flexibility, and overall better motor function.

Snehana

Sarwang Snehana with *Vata Shamaka Taila* used in *Pakshaghata* where *Abhyanga*, a form of oil massage, is crucial for treating *Pakshaghata* (hemiplegia) as it nourishes and strengthens the muscles of the upper and lower limbs. *Swedana*, which involves inducing sweating, helps alleviate symptoms like stiffness and heaviness while providing pain relief.^[8] *Abhyanga* is essential for managing *Pakshaghata*, a condition characterized by muscle contraction. This oil massage helps nourish and strengthen both the upper and lower limbs, addressing imbalances in *Vata Dosha* and supporting overall tissue health.^[9,10]

Swedana

Sarwang Swedana with *Dashmoola Kwath* provides relief from symptoms such as stiffness, heaviness, and coldness, which are commonly observed in conditions like *Pakshaghata*. Typically performed after *Snehana* (oil application), *Swedana* softens and relaxes the muscles, making them more flexible and easing symptoms of spasticity and pain. This combination of

therapies is highly effective for treating severe cases of *Vata* imbalances.^[11-13]

Nasya Karma

Nasya, a therapy targeting the nasal passages, is effective for disorders of the head, as the nose is considered a gateway to the brain. Since *Pakshaghata* is primarily a *Vata* disorder, treatments focus on strengthening and nourishing the body, with *Nasya* using *anu taila* to balance *Vata* and support recovery.^[14]

Matra Basti

Matra Basti is a specialized form of *Sneha Basti* used across all age groups and serves preventive, curative, and promotive roles. It is particularly beneficial for various *Vata* disorders. *Bala Taila*, as described by *Charak*, is known for its '*Marutaghna*' properties and helps in reducing *Vata* without increasing *Kapha*. This therapy supports overall strength and complexion, counteracting the *Vata* qualities of dryness, lightness, and coldness. *Basti* is highly effective for *Vataj* disorders, providing significant benefits.^[15]

Erandamooladi Niruha Kala Basti

Erandamoola is highly valued for its effectiveness in balancing *Vata dosha*. *Erandamuladi Niruha Basti*, which includes *Ricinus communis* (*Eranda*) as a key ingredient, is used to alleviate pain and stiffness by regulating *Vata*. This formulation has various therapeutic properties, such as anti-inflammatory, antioxidant, and analgesic effects. It consists of 34 ingredients with heat potency and attributes that help clear bodily channels and promote healthy tissue formation. *Erandamuladi Niruha Basti* is particularly beneficial for conditions involving *Kapha dosha*, helping to reduce symptoms like stiffness and heaviness, and also enhances digestion and appetite through its *Agni Deepaka* herbs.^[16-18]

Shashtika Shali Swedana

Shashtika Shali Swedana is known for its nourishing, strength-enhancing, and pain-relieving properties. When used with *Bala* and *Godugdha*, it provides significant benefits due to its warm, oil-infused nature.

This treatment improves blood circulation, reduces muscle stiffness, enhances tendon flexibility, and alleviates pain. By preventing muscle wasting through local absorption, it aids in reducing spasticity and facilitates joint movement. Combined with *Abhyanga* and physiotherapy, *Shashtika Shali* helps prevent the progression of disabilities and contractures.^[19]

Shiro Pichu

Shiro Pichu is an *Ayurvedic* procedure that involves placing a sterile cotton pad soaked in medicated oils on the top of the head, specifically at the *Brahmrandhra* (anterior fontanelle), and securing it with a bandage. This treatment often uses a combination of *Jatamamsi*, *Amalaki* powder, and *Ksheerabala Taila*. *Shiro Pichu* is highly effective for alleviating stress and nervous tension by targeting *Tarpaka Kapha*, *Sadhaka Pitta*, and *Prana Vayu*. The oil's properties, such as its sharpness and penetration, help address mental imbalances and improve brain circulation, which is crucial for managing *Vata Dosha*.^[20]

Yograj Guggulu

Yograj Guggulu, with its properties of *Tikta*, *Kashaya*, *Katu Ras*, and *Ushna*, *Ruksha Guna*, is effective in balancing *Kapha* and *Vata*. It also offers pain relief, strengthens the nervous system, and reduces inflammation, making it essential for symptomatic relief in *Vata* disorders.^[21]

Palsineuron Capsule is designed to address neuro-muscular disorders affecting both the central nervous system (CNS) and peripheral nervous system (PNS). It contains a blend of *Mahavatvidhwans Rasa*, *Sameerpannaga Rasa*, *Sootshekhara Rasa*, *Ekangveer Rasa*, *Khurasani Owa* (*Hyoscyamus niger*), and *Lajari* (*Mimosa pudica*). *Mahavatvidhwans Rasa* enhances CNS and PNS metabolism and coordinates neuro-muscular activities. *Sameerpannaga Rasa* improves tissue oxidation, combats anoxia, and normalizes neuro-muscular metabolism. *Ekangveer Rasa* supports nerve and blood vessel repair, facilitates blood vessel recanalization, and stimulates sensory and motor functions. *Sootshekhara Rasa* offers nutritional support to aid faster healing of damaged organelles.

Lajari has regenerative effects on neuro-lesions, while *Khurasani Owa* reduces neuro-irritation.^[22]

Maharasnadi Kashayam

Maharasnadi Kashayam is an Ayurvedic herbal decoction designed to manage inflammatory and painful conditions, particularly those affecting joints and muscles. It is effective for reducing inflammation and relieving symptoms such as joint pain, stiffness, and muscle discomfort, making it useful for conditions like arthritis and rheumatism. This formulation helps improve joint mobility and flexibility while supporting detoxification by eliminating toxins from the joints and tissues. The primary action of *Maharasnadi Kashayam* is to balance the *Vata Dosha*, which regulates movement and can lead to joint pain and stiffness when out of balance. The herbal ingredients in the decoction contain compounds that reduce inflammation and block pain signals, while also enhancing blood circulation to the affected areas, aiding in healing and reducing swelling. Additionally, it supports the repair and strengthening of joint and muscle tissues.^[23]

Brihat Vata Chintamani Rasa

In managing *Nanatmaja Vyadhi*, the primary goal of *Shamana Chikitsa* is to alleviate *Vata*. *Brihat Vata Chintamani Rasa* contains ingredients with *Tridoshagna* properties that contribute to this effect. *Rajata Bhasma*, with its *Medhya* qualities, enhances mental clarity and communication. *Suvarna Bhasma*'s have *Lekhana* properties aid in clearing blockages in the channels. *Abhraka Bhasma* targets the *Pranavaha Srotas* and the heart, while *Loha Bhasma* addresses deficiencies and reduces excess. *Pravala Bhasma*, known for its strengthening and tissue-nourishing effects, helps combat deficiencies. *Mukta Bhasma* supports metabolism and overall vitality. *Rasa Sindura*, a form of *Parada Bhasma*, enhances the drug's effectiveness through its *Yogavahi* properties. *Kumari*, with its *Bhedhini*, *Granthihara*, *Vatahara*, and *Rasayana* properties, aids in balancing *Vata* and supporting overall health. Nanoparticles, including gold, silver, magnetic iron, and calcium, each play a role in neuroprotection: gold nanoparticles regulate anti-

apoptotic and pro-apoptotic proteins, silver nanoparticles reduce brain inflammation, magnetic iron nanoparticles help clear inflammatory by-products, and calcium nanoparticles manage calcium channels and synaptic plasticity. *Rasa Sindura* also contributes to reducing neurodegeneration by supporting protein clearance.^[24-28]

Rasaraj Rasa

Rasaraj Rasa was chosen for this study to manage post-stroke depression due to its blend of *Vatashamaka* (*Vata*-balancing) drugs and its antidepressant properties. It is specifically recommended in the *Bhaishajya Ratnavali* for treating *Vata*-related disorders. In the other trial group, *Vajigandhadi Basti* was administered, as *Pakshaghata* and *Vishada* are associated with *Vata Dosha* imbalances, and *Basti* is considered an effective treatment for *Vata* disorders. Additionally, *Acharya Charak* noted that physical and mental conditions can significantly affect one another.^[29]

Erand Tail

Ayurvedic *Erand Tail*, or Castor Oil, alleviates pain through various mechanisms. It contains ricinoleic acid, which has strong anti-inflammatory properties that reduce inflammation in tissues, joints, and muscles, helping to ease pain from conditions like arthritis and muscle strains. When applied topically or used in massages, *Erand Tail* acts as a natural pain reliever by blocking pain signals locally. It also helps relax muscles, improves blood circulation, and reduces muscle tension and spasms, further alleviating pain. Enhanced circulation aids in removing metabolic waste from tissues, supporting healing and reducing discomfort. Additionally, *Erand Tail*'s detoxifying effects assist in removing toxins from joints and muscles, contributing to reduced pain and inflammation.^[30]

CONCLUSION

In conclusion, this case report highlights the complex presentation and management of a 60-year-old male patient who developed spastic paralysis and associated pain affecting the left side of his body. Despite a sudden onset of symptoms and an initial lack of a clear

aetiology, the patient demonstrated notable improvement following 62 days of *Ayurvedic* treatment. This case underscores the potential of integrating traditional *Ayurvedic* approaches in the management of neurological conditions and suggests that further research is warranted to evaluate their efficacy and mechanisms in treating spastic paralysis. Continued exploration into complementary treatment modalities may offer valuable insights and alternative options for managing similar cases in the future.

REFERENCES

1. Imandas, S., A.S., P., & Kumar, R. (2016) Clinical evaluation of *Basti* and *Nasya* in *Pakshaghata* (Hemiplegia). *PIJAR*, 1, 4354th ser. 6. Nanda, B., & Mandal, A. (n.d.). *Stroke* (adult hemiplegia).
2. Nanda, B., & Mandal, A. (n.d.). *Stroke* (adult hemiplegia) Pg230.)
3. *Charak Samhita, Chikitsa sthan* 28\53, Choukhamba Surbharti Prakashan, Varanasi, 2015; 946.
4. *Sushrut Samhita Nidansthan* 1\60-63, Choukhamba Sanskrit Sansthan Varanasi, 2018; 302.
5. *Charaka Samhita- Chikitsasthan* 28/100 H.S.Kushwaha-Chaukhamba orientalia- 2011
6. *Sushrut Samhita dalhan teeka- Chikitsasthana* 5 /19 Trivikram Yadav-Choukhamba Surbharti- 2008
7. Thakur, K., Toshikhane, S. H., Patil, D., & Desai, S. (2021). *Pakshaghat and its Management through Panchakarma: A Case Study*. *International Journal of Ayurvedic Medicine*, 12(1), 159–165. <https://doi.org/10.47552/ijam.v12i1.1772>
8. *Charak Samhita*, Editor acharya vidyadhar Shukla, prof.ravi dutta Tripathi, Chaukhamba Publication Vol-1 sutra sathan-13,14.
9. Patil, V. (2017). *Principles and practice of Panchakarma* chap 8 ,New delhi, Chaukhamba Publications Pg 120.
10. Sharma, R., & Das, V. (2011). *Agnivesha's Charaka Samhita*. Chapter 22,)Varanasi: Chaukhamba Publication Pg 388.
11. Sharma, R., & Das, V. (2011). *Agnivesha's Charaka Samhita*. (Chapter 22,) Varanasi: Chaukhamba Pg 388.
12. Sharma, R., & Das, V. (2011). *Agnivesha's Charaka Samhita*. (Sutra Sthana, Chapter 14) Varanasi: Chaukhamba Pg. 224.
13. Sharma, R., & Das, V. (2011). *Agnivesha's Charaka Samhita*. (Sutra Sthana, Chapter14) Varanasi: Chaukhamba Pg 218.
14. *Charak Samhita*, Editor acharya vidyadhar Shukla, prof.ravi dutta Tripathi, Chaukhamba Publication Vol-2 Sidhi sthan chap-9 p -958.
15. *Charak Samhita*, Editor acharya vidyadhar Shukla,prof.ravi dutta Tripathi,Chaukhamba Publication Vol-2 sidhi sthan chap-4 sloka no 53-54 p-915.
16. Acharya YT, editor. *Charaka Samhita of Agnivesha, Sutrasthana*. Ch.25, Ver. 40. Varanasi: Chaukhamba Sanskrit Sansthan; 2016. P.131.
17. Manpreet Rana, Hitesh Dhamija, Bharat Prashar, ShivaniSharma. *Ricinus communis L. – A Review*. Department of Pharmacy, ManavBharti University, Solan H.P. *International Journal of Pharm Tech Research*, (IJPRIF) CODEN (USA); Oct-Dec
18. Pandey RK, Bhatted S. Effect of Eranda Mooladi Basti along with other Ayurvedic formulation in gridhrasi (sciatica): A case report. *Ann Ayurvedic Med*. 2013;2:109–13.
19. Choudhary KR, Kumar A. A clinical study to evaluate role of Ayurvedic management for improving activities of daily living in cerebral palsy affected children. *Iamj J Ayur Pharma Research*.2014;2(4):68
20. Vasant C. Patil. *Principles and Practice of Panchakarma*. 3ed. Bangalore; Atreya Ayurveda Publications; 2016. 155-156p.41.Ravidutta Tripathi. *Ashtanga Sangraha of Vagbhata Sutrasthana*. Reprint edition. Varanasi; Chaukhamba Surbharti Publications; 2001. 107p
21. *Rastantrasaar and siddhaprayog sangharha part-1 Prakshak - krishana gopal ayurved bhavan Taila Prakarn p no-422 and Guggulu Prakaran p no-322*.
22. *Palsinuron Capsule-Uses, Side-effect, Reviews and precautions*. S. G Phyto pharma- Tablet Pg13.
23. Pathak Ramraksh, *Ayurveda Sara sangriha, shri baidyanath ayurveda bhawan ltd*, edition 2009, Page no 714. *Maharasnadi kwath*
24. P. Himasagara Chandra Murthy, *Rasasastra –The Mercurial System*, Choukhamba Sanskrit Series Office, Varanasi, 2011;310.
25. Sri Sadananda Sarma, *Rasa Tarangini*, Dr. Ravindra Angadi, Chaukhamba Surbharati Prakashan, Varanasi,2015;332.
26. P. Himasagara Chandra Murthy, *Rasasastra –The Mercurial System*, Choukhamba Sanskrit Series Office, Varanasi, 2011;374.
27. Anand S. Kahalekar, *A Practical Approach to Ayurvedic Drug Manufacturing*, Chaukhamba Visvabharati, Varanasi, 2013:112.
28. Liu, Zhengxia; Shen, Yujie, Yucheng; Yang, Yujiao; Wu, Jin; Zhou, Ping, Xiang; Guo, Zhiru, *An Intrinsic Therapy of Gold Nanoparticles in Focal Cerebral Is-chemia-Reperfusion Injury in Rats*, American Scien-tific Publishers, Volume 9,2013; <https://doi.org/10.1166 /jbn.2013.1597>

29. RJ, KNM, GS, KT, J.S.Tripathi . Randomized Controlled clinical trial of Rasaraj Rasa and Vajigandhadi Basti in the management of Post-Stroke Depression (PSD). AAM. 2023; 12(3): 272-283. doi:10.5455/AAM.51720
30. Bhatta Gopal Krishna. Rasendra Sar Sangraha. Rasavidyotini Hindi Commentary, Tripathi Indradev. Editor, Chaukhambha Orientalia publications, 17 th Edition; 1991. Varanasi. Chapter 1 verse 402, p. 98
31. Satish, V. (aug 2016). Ayurvedic management of pakshaghat (Right middle cerebral artery hemorrhagic infrarc) A case report. Int. J. Res Ayurveda Pharma Jil, 10. Retrieved from [http// dx.doi org/10.](http://dx.doi.org/10.)

How to cite this article: Ratnesh Kumar Shukla, Shraddha Sharma, Shrikant Lodhi, Swati Nagpal, Vivek Sharma. The Ayurvedic management of Spastic Paralysis w.s.r. Pakshaghata: A Case Report. J Ayurveda Integr Med Sci 2024;8:211-221.
<http://dx.doi.org/10.21760/jaims.9.8.33>

Source of Support: Nil, **Conflict of Interest:** None declared.
