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# Management of Spondylosis Induced Sciatica through Panchakarma w.s.r. to Vata Kaphaja Gridhrasi - A Case Study

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## ABSTRACT

**Introduction:** Low backache alone or along with radiating pain in the lower limb is a common entity encountered in daily clinical practice. Lumbar spondylosis is a major cause of lower back pain and also important clinical, social, economic and public health problem affecting the world wide population. Degeneration of the disc that affects the lumbar spine can cause low back pain (referred to as lumbago) or irritation of a spinal nerve to cause pain radiating down the leg (sciatica). So Lumbar spondylosis induced sciatica can be compared with *Gridhrasi* in Ayurveda on the basis of sign and symptoms described in Ayurvedic classics. **Material and Methods:** Presented case was 59-year-old male patient having the symptoms of *Vata- Kaphaj Gridhrasi* in bilateral leg (left>right). *Panchakarma* treatment such as *Valuka Swedana* (sand fomentation), *Abhyanga* (oil massage), *Vashpa Swedana* (steam bath), *Erandamooladi Niruha Basti* (herbal medicated enema) and *Kati Basti* (oil application on Lumbar region) along with oral Ayurvedic medicines were used. **Discussion:** Assessments were made using VAS (Visual Analogue scale) Pain score, SLR (Straight leg raise) test and Finger to floor test (FTF). At the end of the treatment, there was significant improvement in sign and symptoms of sciatica and overall improvement in quality of life of the patient.

**Key words:** *Erandamooladi Niruha Basti, Gridhrasi, Kati Basti, Sciatica, Spondylosis, Valuka Swedana*

## INTRODUCTION

Lumbar spondylosis can be described as all degenerative conditions affecting the discs, vertebral bodies, and associated joints of the lumbar vertebrae.

Spondylosis isn't a clinical diagnosis but instead a descriptive term utilised to designate spinal problems. Within the literature, lumbar spondylosis

encompasses various associated pathologies including spinal stenosis, degenerative spondylolisthesis, osteoarthritis and plenty of others. It also captures effects of aging, accident and just the daily use of the intervertebral discs, the vertebrae, and the associated joints. In older patients, the disease is said to be progressive and irreversible.

Lumbar region is the most affected because of the exposure to mechanical stress.

When a patient suffers from lumbar spondylosis, it's possible that osteophytes are formed. These osteophytes are bony overgrowths that occur due to the stripping of the periosteum from the vertebral body.

Pain can be produced when a neural foraminal stenosis is formed, that comes from the formation of osteophytes. Patient may also experience joint stiffness, which can limit motion.

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Patients with lumbar spondylosis may also have neurologic claudication, which includes: lower back pain, leg pain, numbness when standing and walking.<sup>[1]</sup>

The clinical presentation of lumbar spondylosis induced sciatica is similar to that of *Gridhrasi* described in Ayurveda. It is one of the *Vata Nanatamaja Vikaras*.<sup>[2]</sup> *Gridhrasi* is of two types i.e. *Vataja* and *Vata Kaphaja*. It is characterized by piercing type of pain (*Ruka*), stiffness (*Stambha*), cramps due to *Vata Dosha* beginning from *Sphika* (Hip) region and gradually radiates down to *Kati* (lower back), *Prishtha*, *Uru* (Thigh), *Janu* (Knee), *Jangha* (Calf) and *Paada* (foot) region. There are some other symptoms associated with *Kapha Dosha* like *Gaurava* (heaviness), *Tandra* (drowsiness) and *Aruchi* (anorexia).<sup>[3]</sup>

## CASE REPORT

A male patient with average built of age 59 yrs was admitted in IPD with UHID no. 199691, room number 438, general ward of AIIA, with chief complaints of pain in low back region radiating to bilateral lower limb (Left>Right) since one year. Patient also had complaints of tingling sensation, numbness, stiffness and heaviness in his bilateral lower limb. Since last one-month patient also suffered with poor appetite and mild constipation. For this he took different treatment from allopathic hospital but did not get any relief.

### Examination

Patient had Antalgic gait. He was not able to walk and stand properly due to severe pain.

### SLR Test - Positive

Left leg - 35°

Right leg - 50°

Blood pressure was 110/70 mmHg, Pulse rate was 76/minute, Weight-59 kg and Height -5.2".

### Investigations - MRI - Lumbosacral Spine

MRI - Lumbosacral Spine was suggestive of lumbar spondylosis with grade-1 anterolisthesis of L4-L5 with

posterior disc bulge with thickened bilateral ligamentum flavum and hypertrophied facet joints at L4-L5 level, causing severe spinal central canal and lateral recesses stenosis, impinging the cauda equina and traversing nerve roots and indenting the left existing nerve root.

### Treatment plan

1. *Dashmoola Kwatha* 40ml twice a day morning - evening
2. *Simhnada Guggulu* 2 Tab (each 250mg) thrice a day after food
3. *Ashwagandha choorna* 3gm twice a day morning - evening with warm water
4. *Ajmodadi choorna* 3gm twice a day before food with warm water
5. *Gandharvahastadi* oil 5ml in night with warm water

Table 1: Showing Panchakarma procedure

SN	Procedure	Medicine Used	No. of days
1.	<i>Sarvanga Valuka Swedana</i>	<i>Valuka</i>	7 Days (each day 30 min)
2.	<i>Sarvanga Abhyanga</i>	<i>Dhanwantaram oil</i>	8 Days (each day 30 min)
3.	<i>Sarvanga Vaspa Swedana</i>	<i>Dashmoola Kwatha</i>	8 Days (each day 30 min)
4.	<i>Kati Basti</i>	<i>Murivenna oil + Dhanwantaram oil</i>	8 Days (each day 30 min)
5.	<i>Yoga Basti</i>  <i>Niruha Basti</i>	<i>Madhu - 60ml</i> <i>Saindhava - 5gm</i> <i>Guggulu Tiktak</i> <i>Ghrita - 90 ml</i> <i>Shatpuspa Kalka - 30 gm</i> <i>Erandamooladi</i> <i>Kwatha - 240 ml</i>	<i>Niruha Basti - 3 day</i> <i>(on 3<sup>rd</sup>, 5<sup>th</sup>, 7<sup>th</sup> day)</i>
	<i>Anuvasana Basti</i>	<i>Saindhavadi oil - 60ml</i> <i>Saindhava - 2gm</i> <i>Shatpuspa - 2gm</i>	<i>Anuvasana Basti - 5days</i> <i>(on 1<sup>st</sup>, 2<sup>nd</sup>, 4<sup>th</sup>, 6<sup>th</sup> and 8<sup>th</sup> day )</i>

Table 2: Showing Schedule of Yoga Basti

SN	Basti Type	Basti Given time	Basti Came out time	Retention time
1.	Anuvasana Basti	11.30am	2.30pm	3 hour
2.	Anuvasana Basti	11.20am	1.50pm	2 hour 30 min
3.	Niruha Basti	12.00pm	12.04pm	4 min
4.	Anuvasana Basti	11.30am	2.40pm	3 hour 10 min
5.	Niruha Basti	10.50am	10.53am	3 min
6.	Anuvasana Basti	11.15am	2.55pm	3 hour 40 min
7.	Niruha Basti	11.38am	11.40am	2 min
8.	Anuvasana Basti	12.20pm	4.20pm	4 hour

Table 3: Showing Observations VAS score, SLR test and Finger to Floor Test before during and after treatment

	VAS score	SLR		Finger to floor test
		Left leg	Right leg	
At the time of admission	7	35	50	35cm
On 7 <sup>th</sup> day	5	40	60	30cm
On 16 <sup>th</sup> day	2	70	80	15cm

After Valuka Swedana,<sup>[4]</sup> there was significant relief in Stiffness and heaviness in Lumbo-sacral region and lower limb and also improvement was noted in VAS score, SLR Test and Finger to floor test. Before treatment, VAS score was 7 which was reduced to 5 on 7<sup>th</sup> day of Valuka Swedana, on third assessment it came down to 2 i.e. on 16<sup>th</sup> day after yoga Basti.

There was a remarkable improvement in SLR test, the SLR angle raised from 35 degrees to 40 and then to 70 degrees of the left leg. Likewise, SLR angle improved from 50 to 60 and finally 80 degrees of right leg. There were note worthy changes in finger to floor test, it

stretched from 35cm to 30cm and eventually 15cm on 16<sup>th</sup> day. After completion of Yoga Basti<sup>[5]</sup> there was remarked reduction in numbness, stiffness and heaviness of bilateral limb and patient can sit and walk for longer duration.

There was improvement in Jaranashakti, Abhyavaharan Shakti, Deha Bala, sleep and feeling of wellbeing at physical and mental level suggesting improvement in Quality of life according to Ayurveda classics.

Post treatment MRI of Lumbo-sacral region was not done to find out any radiological changes in lumbo-sacral region due to patient financial condition.

## Discussion

Gridhrasi is a Ruja Pradhana (pain dominant) Vata Nanatmaja Vyadhi affecting locomotor system and leaving the person disable from daily routine activity. In the pathogenesis of disease, important components are Vata and Kapha. The vitiated Vata gets lodged in Katipradesha.

Patient was suffering from low back pain radiating to bilateral leg along with numbness, heaviness, and stiffness. These are symptoms of Kapha Dosha. So, Sarvanga Valuka Swedana was done initially for 7 days. According to Susruta, Valuka Swedana is a form of Tapa Sweda which relieves Stiffness, heaviness and does perspiration of the body. After assessing the Nirama Lakshana of Kapha Kshaya, further Panchakarma treatment was administered.

Erandamooladi Basti<sup>[6]</sup> was administered along with Abhyanga,<sup>[7]</sup> Vasha Swedana<sup>[8]</sup> and Kati Basti. Sarvanga Abhyanga was done with Dhanwantaram Taila<sup>[9]</sup> and Vashpa Swedana was done with Dashmoola Kwatha<sup>[10]</sup> as Purvkarma of Basti Karma.

Kati Basti is a procedure in which both the properties of Snehana and Swedana (oleation and fomentation) are incorporated. As Vata Dosha is Sheeta, Ruksha in nature and Sweda being Ushna and with prior Snehana, alleviates Vata (Snehana and Swedana is the first line of treatment for Vata Swedana), Swedana induces sweating. Thus it decreases Kleda (fluid) in the body resulting in the reduction of Kapha and in

turn reduced *Gaurava* (Heaviness) and *Stambha* (Stiffness).<sup>[11]</sup> *Sushrutha* describes that, out of four *Tiryak Dhamani*, each *Dhamani* divides into hundred and thousand times and become innumerable. These *Dhamani* form a network and spreads all over the body. They have their openings in the *Loma Koopa*. The *Dravya* applied over the skin is absorbed through these openings and undergo *Pachana* by the help of *Bhrajaka Pitta* which is situated in the skin and providing the nourishment to the affected part. The properties of *Dhanwantaram Taila* and *Murivenna Taila* are *Snigdha*, *Guru* and *Ushna* which are totally opposite to the properties of *Vata*. Thus these properties of *Dhanwantaram Taila* and *Murivenna Taila* acts against in turn relieve *Ruja* (Pain).

*Erandamooladi Basti* is told as *Deepana* and *Lekhana* in nature which helps in pacifying *Kapha* and reducing symptoms like heaviness and stiffness. Anti-inflammatory, anti-oxidant, central analgesic, antinociceptive activity, bone regeneration activities are found in *Ricinus communis* (*Eranda*) which is the main content of the *Erandamooladi Niruha Basti*. *Eranda* is said to be the best in pacifying *Vata* by *Acharya Charaka*. *Erandmuladi Niruha Basti* Which contains 34 drugs among them maximum number drugs having *Ushna Veerya*, which is specially indicated in pain and stiffness located in *Jangha*, *Uru*, *Paada* and *Pristha* region and it is indicated in *Kapha-Avruta* conditions also.

*Guggulutiktaka Ghrita*<sup>[12]</sup> is *Vataghna* (*Vata* pacifier) in nature. In Ayurvedic literature, *Guggulutiktaka Ghrita* is indicated in *Asthimajjagata Vata*.<sup>[13]</sup> Also *Acharya Charaka* has advised to use *Basti* of *Tikta Dravya* mixed with *Ghee* and milk in those diseases which are caused due to vitiation of *Asthi Dhatu*. So *Guggulutiktaka Ghrita* was used as *Sneha* in *Basti*. *Saindhavadi Taila* is administered as *Sneha* in *Anuvasana Basti* because of its *Vata* and *Shleshmahara* property and also *Acharya Vangasen* advised to use *Saindhavadi Taila* in *Ghrirdrasi* and *Urusthama* and all type of *Vatika* disorders.

Internal medicines were also given on the same line. *Dashmool Kwatha* was given to pacify *Vata Dosh* and

*Gandharvahastadi* oil was given for *Mridu Virechana*<sup>[14]</sup> and *Vatanulomana*. *Simhnada Guggulu* was given because it is *Vatakaphahara*, *Deepana*<sup>[15]</sup> and *Pachana*,<sup>[16]</sup> *Srotoshodhana*, *Amapachaka* and *Shulahara*. *Ashwagandha Churna*<sup>[17]</sup> was given for *Rasayana*<sup>[18]</sup> purpose as it is a chronic disease with *Asthi Dhatu Kshaya*. *Ajmodadi Churna*<sup>[19]</sup> was given for *Ama Dosh Pachana* and *Vatanulomana*.

## CONCLUSION

*Gridhrasi* is one of the *Nanatamaja Vata Vyadhi* commonly seen now-a-days and affecting a large group of the society in patients with spondylosis having degenerative changes in the lumbar disc and vertebrae. In modern medicine conservative medicine is only for pain management and surgical correction are costly affair and sometime results in serious complication. This case report showed that *Panchakarma* (Ayurveda Specially treatment) like *Valuka Swedana*, *Erandamooladi Kwatha*, *Kati Basti*, *Abhyanga* and *Swedana* along with internal medicine are potent, safe and effective in the treatment of Spondylosis induced *Gridhrasi*. There were no any adverse effects noted during and after the treatment.

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