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## A comparative clinical study to evaluate the efficacy of *Eranda Beeja Payasa* and *Lashuna Ksheera* along with *Matrabasti* in the management of *Gridhrasi* w.s.r to Sciatica Syndrome

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### ABSTRACT

*Gridhrasi* is a *Rujapradhana Nanatmaja Vata Vyadhi*, intervening with the functional ability of low back and lower limbs. The aim of the study is to evaluate the efficacy of *Eranda Beeja Payasa* and *Lashuna Ksheera* along with *Matra Basti* in the management of *Gridhrasi* with special reference to Sciatica Syndrome. 60 patients of *Gridhrasi* were selected and randomly divided into two groups as Group A-30 patients and Group B-30 patients. Group A were subjected to *Matra Basti* with 60ml *Sahacharadi Taila* for 7 days followed by *Eranda Payasa* 40ml orally BD for 30days. Group B were subjected to *Matra Basti* with 60ml *Sahacharadi taila* for 7 days followed by *Lashuna Ksheera* 40ml orally BD for 30days. Overall effect of treatment was assessed on the basis of statistical analysis is observed that efficacy of *Eranda Beeja Payasa* is comparatively more than *Lashuna Ksheera* in the management of sciatica. The patients have shown improvement in all the criteria of assessment of *Gridhrasi* in both the groups. Marked reduction is observed in the total severity of the illness in both the group with better effect in group A when compared to group B.

**Key words:** *Gridrasi, Sciatica, Vatavyadhi, Eranda Beeja Payasa, Lashuna Ksheera, Matrabasti.*

### INTRODUCTION

Our Ancient Acharyas had identified this problem long back and named it '*Gridhrasi*'. The word '*Gridhrasi*' itself suggests the gait of the patient which is similar to *Gridhra* (vulture) due to pain. All the Ayurvedic classics including those written in medieval period have described the aetiopathogenesis and symptomatology of *Gridhrasi* in concise form. Best part is the description narrated in these classics exactly coincides to the description of 'Sciatica'

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including the important diagnostic test SLR which is described as '*Sakthinikshepanigraha*'<sup>[1]</sup> by our Acharyas. The prime cause of *Gridhrasi* is the vitiated *Vata*. Hence it is included in *Vata Nanatmaja Vyadhi* Sometimes *Kapha* may be associated with vitiated *Vata* localization of the vitiated *Doshas* in *Gridhrasi* is described in a particular order in which pain starts from *Sphik* and then radiates to *Pada* along with *Stambha, Toda* etc. Despite of the technological and pharmacological advancement in modern system of medicine, the management of Sciatica is still a medical problem where no permanent medical treatment is available except some palliative measures. Chances of recurrence are high even after surgery which are expensive with their limitations. To fulfill the expectations from the Ayurvedic field and to find out more effective and safe therapy for *Gridhrasi* we have selected *Gridhrasi* for the research work. Ayurveda has description of various therapies for treatment of *Gridrasi*, *Chakradatta* has explained *Eranda Beeja Payasa*<sup>[2]</sup> for *Gridhrasi Chikitsa* in *Vatavyadi Chikitsa Adhyaya* and *Charaka Samhita* has special formulation

*Lashuna Ksheera*<sup>[3]</sup> for treatment of *Gridhrasi* in context of *Gulma Chikitsa Adhyaya* and *Basti Ardha Chikitsa*<sup>[4]</sup> according to *Charaka*. So here an effort is made to compare the efficacy of *Eranda Beeja Payasa* and *Lashuna Ksheera* along with *Matra Basti* with *Sahacharadi Taila*.<sup>[5]</sup>

## MATERIALS AND METHODS

It is a comparative study done at BLDE'S AVS Ayurveda Mahavidyalaya Hospital and Research Centre, Vijayapur. In which 60 patients of *Gridhrasi* were selected and randomly divided into two groups as Group A - 30 patients and Group B - 30 patients.

Group A was subjected to *Matra Basti* with 60ml *Sahacharadi Taila* for 7 days and *Eranda Payasa* 40ml orally BD for 30days.

Group B was subjected to *Matra Basti* with 60ml *Sahacharadi Taila* for 7 days and *Lashuna Ksheera* 40ml orally BD for 30days. Total study duration was 37 days.

The signs and symptoms were scored on basis of standard parameters and analysed statistically by using student 't' test for subjective criteria. Patients were reviewed on 38<sup>th</sup> day of treatment in both group. A detailed proforma was prepared for assessment of subjective and objective parameters by grading them. The data obtained was recorded statistically. Subjective criteria were 1. *Ruk*, 2. *Toda*, 3. *Stamba* and 4. *Sputatha* in *Sphik, Kati, Uru, Janu, Jangha* and *Pada*. Objective parameters were 1. SLR test, 2. Muscle power and 3. walking time

Considering the relief of major symptoms, the subjects were divided into the following poor response <24%, moderate response 25%-49%

Good response 50%-74% and excellent response 75%-100%.

**Preparation of *Eranda Beeja Payas*:** Remove the seeds of *Eranda* fruits and compound them, boil 25gms of this powder with 250ml of milk till it reduces to 40ml.

**Preparation of *Lashuna Ksheera*:** 4 *Palas* of dehusked *Lashuna* is boiled by adding 8 times of milk and water and reduced to the quantity of milk.

## Inclusion Criteria

1. Either sex and Age 20 -60 years
2. Patients with *Pratyatma Lakshanas* of *Gridhrasi* and cardinal symptoms of sciatica.
3. Patient with IVDP, spondylosis, spondylolisthesis, lumbar canal stenosis.

## Exclusion Criteria

1. Patients with DM, CA-spine, caries -spine, pott's disease and pregnancy
2. Patients with history of RTA following direct injuries to spine, emergency surgical intervention.
3. Patients with bladder and bowel incontinence.

## Assesment Criteria

A detailed proforma was prepared for assessment of subjective and objective parameters by grading them. The data obtained was recorded statistically.

## Subjective Criteria

- *Ruk* in *Sphik, Kati, Uru, Janu, Jangha* and *Pada*.
- *Toda* in *Sphik, Kati, Uru, Janu, Jangha* and *Pada*.
- *Stamba* in *Sphik, Kati, Uru, Janu, Jangha* and *Pada*.
- *Suptata, Spandana* in *Sphik, Kati, Uru, Janu, Jangha* and *Pada*.

## Objective Parameters

- SLR test
- Muscle power
- Walking time

The improvement in the patients was assessed mainly on the basis of relief in the cardinal symptoms of the disease. To assess the effect of therapy objectively, all the sign and symptoms were given scoring pattern depending upon their severity as below:

## Ruka (Pain)

No pain – 0

Occasional pain – 1

- Mild pain but no difficulty in walking – 2
- Moderate pain and slight difficulty in walking – 3
- Severe pain with sever difficulty in walking – 4

**Toda (Pricking Sensation)**

- No pricking sensation – 0
- Occasional pricking sensation – 1
- Mild pricking sensation – 2
- Moderate pricking sensation – 3
- Severe pricking sensation - 4

**Stambha (Stiffness)**

- No stiffness – 0
- Sometimes for 5 – 10 minutes – 1
- Daily for 10 – 30 minutes – 2
- Daily for 30 – 60 minutes – 3
- Daily more than 1 hour – 4

**Suptata (Numbness score)**

- No numbness – 0
- Occasional – 1
- Mild but continuous – 2
- Moderate – 3
- Severe – 4

**Spandana (Twitching)**

- No Twitching – 0
- Sometimes for 5-10 minutes – 1
- Daily for 10-30 minutes – 2
- Daily for 30-60 minutes – 3
- Daily more than 1 hour – 4

**Muscle power**

System of grading recommended for the patient of peripheral nerve injuries by committee of medical research council has given following valuation.

- No contractions present – 0
- Flicker of movement which can be seen and felt – 1
- Muscle contraction with gravity eliminated -2
- Muscle contraction against gravity -3
- Muscle contraction against gravity and resistance -4
- Normal muscle contraction -5

**Walking time**

For this purpose patient was asked to walk 20 feet distance in a Straight way in full speed and time taken was recorded by the help of a stopwatch in seconds.

- Able to walk 20 ft within 15 sec – 0
- Able to walk 20 ft within 15 -25sec - 1
- Able to walk 20 ft within 25 -35sec- 2
- Able to walk 20 ft within 35 -45 sec - 3
- Able to walk 20 ft in >40 sec - 4

**S.L.R. Test**

- More than 90 degree – 0
- 71 – 90 degrees – 1
- 51 – 70 degrees - 2
- 31 – 50 degrees – 3
- Up to 30 degree – 4

**Total effect of therapy**

Considering the relief of major symptoms, the subjects were divided into the following the total efficacy of each therapy.

Class	Grading
<24%	Poor Response
25-49%	Moderate Response
50-74%	Good Response
75-100%	Excellent Response

**OBSERVATION AND RESULTS**

**Table 1: Comparisons between Groups A and B in Ruk**

Observations Recorded	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	2.07 (2.0)	0.64	333.00	0.038	HS
	Group B	30	2.4 (2.0)	0.498			
Follow up	Group A	30	1.37 (1.0)	0.72	420.00	0.623	NS
	Group B	30	1.47 (1.0)	0.63			

NS: Non significant

**Table 2: Comparisons between Groups A and B in Toda**

Observations Recorded	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	1.758 (2.0)	0.577	351.00	0.110	NS
	Group B	30	1.97 (2.0)	0.85			
Follow up	Group A	30	1.137 (1.0)	0.516	405.00	0.586	NS
	Group B	30	1.233 (1.0)	0.678			

IS: Insignificant

**Table 3: Comparisons between Groups A and B in Stambha**

Observations Recorded	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	1.83 (2.0)	0.592	420.00	0.590	NS

t	Group B	30	1.63 (2.0)	0.927	375.00	0.214	NS
Follow up	Group A	30	1.037 (1.0)	0.668			
	Group B	30	0.833 (1.0)	0.791			

NS: Non significant

**Table 4: Comparisons between Groups A and B in Suptatha**

Observations Recorded	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	1.483 (1.0)	0.785	379.00	0.358	NS
	Group B	30	1.6 (2.0)	0.814			
Follow up	Group A	30	0.896 (1.0)	0.618	364.500	0.221	NS
	Group B	30	0.7 (1.0)	0.596			

NS: Non significant

**Table 5: Comparisons between Groups A and B in Active SLR Left Leg**

Observations Recorded	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	0.967 (.5)	1.033	400.500	0.420	NS
	Group B	30	1.275 (2.0)	1.251			
Follow up	Group A	30	0.7 (0.0)	0.837	409.500	0.515	NS
	Group B	30	0.931 (1.0)	1.033			

NS: Non significant

**Table 6: Comparisons between Groups A and B in Active SLR Right Leg**

Assessment Observations Recorded on	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	1.967 (2.0)	0.809	445.50	0.943	NS
	Group B	30	1.965 (2.0)	0.944			
Follow up	Group A	30	1.433 (1.5)	0.728	422.50	0.662	NS
	Group B	30	1.41 (1.0)	0.946			

IS: Insignificant

**Table 7: Comparisons between Groups A and B in Muscle Power**

Assessment Observations Recorded on	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	4.53 (5.0)	0.681	331.00	0.017	HS
	Group B	30	4.87 (5.0)	0.432			
Follow up	Group A	30	4.57 (5.0)	0.626	332.500	0.018	HS
	Group B	30	4.87 (5.0)	0.432			

HS: Highly significant

**Table 8: Comparisons between Groups A and B in Walking Time**

Assessment Observations Recorded on	Descriptive statistics				Test Statistics		
	Group	N	Mean	± S.D.	Mann whitney U test	P value	Remarks
After treatment	Group A	30	1.5 (0.0)	1.776	362.0	0.1	NS

t	Group B	30	0.8 (0)	1.54	0	38	
Follow up	Group A	30	1.47 (5.0)	1.756	363.500	0.143	NS
	Group B	30	0.8 (0)	51.54			

NS: Not significant.

**Overall effect of treatment**

Response	Relief of Symptoms	Group A		Group B		Total	Total percentage
		N	%	N	%	N	%
Excellent	75-100%	0	0	0	0	0	0
Good	50-74%	19	63.4	18	60	37	61.7
Moderate	25-49%	10	33.3	11	36.7	21	35
Poor	<24%	1	3.3	1	3.3	2	3.3

The overall effect of *Eranda Beeja Payasa* in Group A had good response in 19 (63.4%) patients, moderate response in 10(33.3%) patients and poor response in 1 (3.3%) patient.

The overall effect of *Lashuna Ksheera* in Group B had good response in 18 (60%) patients, moderate response in 11 (36.7%) patients and poor response in 1 (3.3%) patients.

**DISCUSSION**

**Eranda Beeja Payasa:** This *Eranda Beeja Payasa* cures *Gridhrasi*. *Madhura, Katu, Kashaya Rasa, Snigdha* and *Teekshna Guna, Usna Veerya, Shothahara* like properties of *Eranda* collectively helps to mitigate *Vata* and *Kapha Doshas*. According to *Charaka Samhita* it is *Bhedaniya, Angamarda Prashamana, Svedopaga*. As *Bhedaniya* it acts by the property of purgation i.e. *Nitya Virechana, Vatanulomana* does *Vikrutavata* get relieved from *Katipradesha* thus helps to get rid of *Gridhrasi Vata*.

By *Angamarda Prashamana Guna Eranda* relieves radiating pain in the limbs.

By *Swedopaga* property and *Sukshma Sara Guna* relieves *Srotoavaroda* of *Vatavaha Srotas*.

According to *Sushruta Samhita* it is *Adhobagahara*, *Vata Sanshamana*

By *Adhobagahara* property *Eranda* does *Virechana* and *Vatanulomana* thus relieving symptoms of *Gridrasi Vata*.

Major chemical constituents of *Eranda* (*ricinus communis*)<sup>[6]</sup> called ricinine, glyceroids, ricinolic acids have purgative actions. Researches have been already conducted to evaluate the anti inflammatory potential of *ricinus communis* and results showed the anti inflammatory activity in wistar rats.

Combined effect of *Eranda* and *Ksheera* as *Eranda Payasa* gives better results in sciatica.

*Mrudu Virechana* is mentioned in the line of treatment of *Vata Vyadhi* in general. Pain is produced mainly by *Vata Prakopa* which can be pacified by *Nitya Virechana*.

So *Nitya Virechana* acts as *Vatanulomana* and relaxes the spinal muscles controlling *Apana Vayu*. *Asthi* and *Sandhi* is being site of *Vata* and *Nitya Virechana* purifies the *Purishdara Kala*. As *Pakwashaya* is the main site of *Vata* and *Virechana* helps for *Vatashamana*, if we consider constipation as attributing factor for *Gridrasi Eranda* helps to relieve the *Vikrut Vayu* by *Nitya Virechana* which is obstructed by *Apana Vayu*.

*Eranda Beeja Payasa* has *Vata Kaphari*, *Amashodhana*, *Srotovishodana*, *Shothahara*, *Angamarda Prashamana*, so recommended in *Gridrasi*.

**Lashuna Ksheera:** Garlic improves circulation and cardiovascular health to get more blood flow where it needs to go. It strengthens the immune system and reduces the inflammation. The potent properties of calcium, protein and vitamin B-12<sup>[7]</sup> from milk gives relief from sciatica pain researches have proved. *Madhura* and *Lavana Rasa*, *Snigdha* and *Guru Guna*, *Ushnavirya*, *Katu Vipaka*, *Vatakaphaha* and *Rasayana Karma* collectively mitigate *Vikruta Apana Vayu* in

the *Pakwashaya* which is *Mula Sthana* of *Vata* and helps to relieve *Gridrasi Vata*. *Lashuna* by its qualities and processing techniques has been proved to be best *Naimittika Rasayana*. It depends on *Yukti* of *Bhishak* to administer in different forms especially *Lashuna Ksheera* form and ultimately bring out its rejuvenation action.

*Lashuna* has been rightly mentioned as *Amrita* by *Acharya Kashyapa* as it has got multi-dimensional positive therapeutic effects over the health. Basically *Lashuna* is known for its *Ushna* and *Teekshna* qualities which combats *Ama* and enhances *Agni*. It does *Srotoshodana* by removing deep seated *Ama* ensuring the anti oxidant properties and anti auto immune properties. It is the drug with typical *Pancha Mahabhuta* constitution which opens many therapeutic avenues in the treatment. It contains *Snigdha* and *Guru Guna* in combination with *Teekshna* and *Ushna Guna* which is very typical. This help to provide *Vatahara* action. *Madhura Rasa* and *Madhura Vipaka* helps in inducing strength and promotive effects and contribute to nutritive and promoting activity by yielding *Rasayana* property. As we know in *Rasayana* there will be subsequent nourishment of all *Dhatus*. Garlic extracts have been shown to exert anti inflammatory effects, one study indicated that thiace monone, a sulphur compound isolated from garlic inhibits neuro-inflammation.

## CONCLUSION

A marked reduction is observed in the total severity of the illness in both the groups with better effect in group A when compared to group B. Observing the clinical efficacy of *Eranda Beeja Payasa* and *Lashuna Ksheera* along with *Matra Basti*. None of the patients developed any untoward symptoms during the course which indicates the safety of both the procedures. Only 4 patients with *Pitta Prakruti* had the gastritis complaints in summer for *Lashuna Ksheera* after 10 days of *Pana*. Only 2 patients had loose stools and abdomen pain after 3 days of *Eranda Beeja Payasa* *Pana*. Elderly patients with *Vataja Gridrasi* symptoms and *Dhatu Kshayajanya Gridrasi* responded very well for *Eranda Beeja Payasa* and showed relief of

symptoms *Ruk, Toda* and *Suptata* where as young and middle aged patients with *Vatakaphaja Gridasi* symptoms responded very well for *Lashuna Ksheera* and showed relief of symptoms like *Stambha* and *Ruk*.

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