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TO ASSESS THE EFFICACY OF BASTI KARMA IN THE MANAGEMENT OF GRIDHRASI W.S.R.TO SCIATICA: A RESEARCH ARTICLE

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ABSTRACT

Sciatica is the *degenerative* changes affecting *lumber* region. The management of Sciatica in conventional medicine is *temporary* and in many cases *surgical treatment*. In this, the *Non-Steroidal Anti-Inflammatory Drugs* (NSAID's) and *analgesics* are the main drug; however they have *serious adverse effects* and have limitations for a *long term* therapy. **Gridhrasi (Sciatica)** produces *disability* in people affecting almost each and every routine work of a person. **Ayurvedic management** seems to be *more satisfactory* because of its *long lasting effects* and *multi systemic regenerative* actions without any *harm*. Therefore, it was decided to evaluate certain Ayurvedic management for a group of patients of Gridhrasi which could be *safe*, *effective* and *readily* available. **Basti Chikitsa** is the *best* treatment for Vatavyadhi like Gridhrasi. The study had been done on 30 clinically diagnosed registered patients from the IPD/OPD of JIAR, Jammu. In this study, *Karma Basti* was planned in 30 patients with *VrishadiNiruhaBasti* and VajigandhadiAnuvasanaBasti for 30 days. Observations and findings were documented and evaluated by using various assessment criteria. *Symptomatically* and *Statistically significant improvement* was observed in all clinically parameters in *majority* of the cases. The results obtained indicated *improvement* in *sign* and *symptoms* and *Basti* was *effective* in combating the disease.

KEYWORDS: Gridhrasi (Sciatica), Lumber, BastiChikitsa, KarmaBasti, Vrishadi NiruhaBasti, Vajigandhadi Anuvasana Basti.

INTRODUCTION

The *low back pain* is *common* problem seen in modern society. Out of which 40% persons have *radicular pain* and this comes underneath the **Sciatic Syndrome**. Such presentation was also *common* in old era and **Ayurveda** named it as **GridhrasiRoga**. It is considered as *Shool Pradhana Vata Vyadhi*.

Gridhrasi indicates the *typical gait* that resembles of a bird 'Gridhra' i.e.*vulture*, which is often seen in patients of GridhrasiRoga.

The **cardinal clinical features** of GridhrasiRoga are

- Ruka (Pain)- Toda (Pricking Sensation)-Stambha (Stiffness)-MuhurSpandana in the Sphika-Kati-Uru-Janu-Jangha-Pada in order.
- In Kaphanubandhi, Tandra, Arochaka and Gaurava are also present.
- Sakthikshapam- Nigrahai.erestricted lifting of lower limb.

The clinical features seen in Gridhrasi Rogacan be well

correlated with Sciatica of modern medicine. Sciatica is a set of symptoms including pain that may be caused by generalcompression and/or irritation of one of five nerve roots that give rise to each sciatic nerve, or by compression or irritation of the left or right or both sciatic nerves. The pain is felt in the lower back, buttock, and/or various parts of the leg and foot. In addition to pain, there may be numbness, muscular weakness, pins and needles or tingling and difficulty in moving or controlling the leg. Typically, the symptoms are only felt on one side of the body.

MATERIALS AND METHODS

Following materials and methods were employed for conducting the present research-

(A) Selection of Patients: The Study was conducted on the 30 *clinically* and *radiologically* diagnosed patients of *Gridhrasi*. They were registered in the OPD/IPD of P.G. Department of Kayachikitsa, JIAR, Jammu irrespective of religion, sex, occupation and caste etc. after obtaining due consent.

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(a) Inclusion Criteria

- 1. Patients in the age group of 25-60 years suffered from Gridhrasi.
- 2. Patients with Pratyatnalakshana of Gridhrasi.
- Patients had positive physical signs/special tests of Sciatica.
- 4. Patients had *chronicity of Gridhrasi* less than 5 years.
- 5. Sciatica due to *Disc prolapsed* (L4-5 and L5-S1), *Lumbar Spondylosis* and *Disc herniation*

(b) Exclusion Criteria

- 1. Bilateral sciatica
- 2. Patient suffered from Tuberculosis (spine), Tumours/neoplasm of spinal cord, pyogenic osteomylitis or any infective conditions of spine.
- 3. Pain due to Spinal deformity, fracture of hip bone, Sacro iliac Arthritis.
- Patients with Rheumatoid arthritis, Gout, arthritis, etc.
- Sciatica with uncontrolled Diabetes and uncontrolled Hypertension.
- (B) Selection of Basti Procedure: Basti relieves stiffness, contractions and adhesions. It is effective in paralytic conditions, effective in dislocations and fracture conditions. In addition to this Basti is effective in those conditions where Vata aggravated in extremities. It also relieves pain, effective in disorders of GI tract, beneficial to debilitated andweak persons. Basti is considered as ArdhaChikitsa or sometimes Sampurna Chikitsa.

Gridhrasi is a Vatavyadhiand counted under 80 NanatmajaVatavyadhi. Thus bastihad been choosen for the treatment of Gridhrasi. For Niruhabasti, Vrishadi Niruha Basti had taken from Sushruta Samhita and Anuvasanabasti had been taken from YogRatnakarai. eVajigandhadi AnuvasanaBasti.

(C) Management of Patients and Treatment Schedule *Karma Basti* were given to 30 registered patients with *Vrishadi – NiruhaBasti and Vajigandhadi Anuvasana Basti*.

- Dose of Basti
- 1. NiruhaBasti amount: 750 ml 1000 ml
- 2. AnuvasanaBasti amount: 80 ml 120 ml
- Total Duration 30 days
- Route of administration Per Anal
- Time of administration
- NiruhaBasti before meal at morning (10:00 11: 00 am)
- AnuvasanaBasti after meal at morning (10:00 11:00 am)

(D) Laboratory Parameters

- 1. Routine hematological investigations to rule out any infectious conditions.
- 2. Radiological examination (X- Ray) of the lumbo sacral spine in anteroposterior and lateral position

was taken.

OBSERVATIONS

In present study, total 30 patients were registered, in which 22 patients completed full trial while 8 patients were *LAMA*. Maximum number of patients i.e 63.16% were of *Vataja type* of *Gridhrasi*, 60.52% patients were having involvement of *Right limbs*, 39.47% patients were of *upto 1 year* chronicity, 55.26% patients were having history of *any type* of trauma as associated symptoms and 31.58% patients were having *habitual constipation*.

FOLLOW UP

In maximum number of patients i.e in 80%, no recurrence of symptoms was reported during the period of follow – up after one month. The explanation may be that selected treatment doesn't work only at symptom level, though it works at the level of Sampraptiand minimize the chances of recurrence of the disease. Thus satisfactory result persists during the period of follow up. Recurrences were observed in total 06 (20%) patients.

RESULTS

- In present study, 30 patients of GridhrasiRoga (Sciatica) were treated with Vrishadi – NirukaBasti and VajigandhadiAnuvasanaBasti in 30 days. Marked significant results were found in all clinical feature of the disease. Extremely significant result was found in Ruka, Toda, Stambha, Spandana and Aruchi. Highly significant results were found in Gauravaand Tandra.
- 2. On the basis of *improvement* in *objective* variables such as *S.L.R. Test* and *walking distance* shows the *extremely* significant result.
- 3. *Recurrences* were also found in *some* patients *after 1 month* from completion of therapy.
- 4. Overall 20% of patients show recurrence of disease while 80% patients show no recurrence.
- 5. In present study, *Visual Analogue Scale* shows that in the *maximum* patients i.e 53.33% *moderate*improvement were found, while 3.33% patients had *mild* Improvement, 33.33% patients got *marked improvement* and 10% patients were *completely cured* [100% complete, 75-99% *marked*, 50-74% *moderate*, 25 49% *mild and* 0 24% *no improvement*]

DISCUSSION

In this study, VrishadiNiruhaBasti has provided better relief in cardinal symptom, associated symptoms and general symptoms of disease. Here Basti is given in the format of Karma Basti. It was used in alternation with VajigandhadiTailaAnuvasanaBasti.

It is *thought* to be an *ultimate* solution for *eradication* of *VataDosha*and*Vata Vitiation* is the *main* cause of Gridhrasi. Moreover, it also has *action* on the *vitiated Pitta*, *Kapha*and Rakta.

As a whole the effect of Basti can be summarized as encolonic (action on tissue of colon), end colonic (action inside colon), and diacolonic (for systemic action). Thus, BastiDravya after reaching to large and small intestine get absorbed from intestine, now due to Guna of the BastiDravya, it breaks the obstructions and expels out the morbid material from all over the body (Srotoshodhana), thus help in breakingdown the pathogenesis of disease. Basti help in Vatanulomana thus helping correcting the Apanavayu. Action of Basti directly pacifies Apanavayu which in turn brings back the equilibrium of Agni which controls two other important Vayu - SamanaVayu andPranaVayu.Basti relieves Ruka, Toda, Stambha etc. It is very effective in conditions where Vata aggravated in shakha/extremities.

CONCLUSIONS

Gridhrasidescribed under 80 types of Nanatmaja Vatavyadhiand commonly seen in society as a prominent trouble. Vyana Vayu is an essential factor for manifestation of the disease Gridhrasi. Gridhrasi is a painful condition and so far there is no established therapy. Mainly VatavyadhiChikitsa has been advocated in Gridhrasi. Conventional management is just temporary and seems like a delusionwhile Ayurvedic management eradicates the root causeand brings about substantial relief. Basti being the preferentially best line of treatment in VataVikaraand very effective in Gridhrasi. Ayurvedic classics have describedVataDosha as the main offender in Gridhrasi. Sometimes Kapha is the AnubandhiDosha. It is supported clinically as maximum number of patients shows VataprakolpakaHetusas the cause.

As most of the patients hailed from Parihani Kala, degenerative changes occur at this stage. It is the main aetiological factor of sciatica. On the basis of Ayurvedic fundamentals, we can explain it as Dhatulakshaya leading to VataPrakopaand Gridhrasi. In this study Karma Basti was effective in combating the disease. Major improvement was observed on all signs and symptoms as well as on SLR. The selected management has potential effect on GridhrasiRoga (Sciatica), with the added advantage of being free from side effects. Preventive aspect and patientseducation play an important role in the management of Gridhrasi. Proper guidelines about posture etc. along with exercises strengthening the spineare helpful for effective management.

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