

EFFECTIVENESS OF BASTI CHIKITSA IN ABHIGHATAJA GRIDHRASI- A CASE
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ABSTRACT

Background: There is about (70-80)% of persons who are suffering from the condition said as the low back ache. Most probably the persons develop radiating pain which starts in the buttock and radiating towards the lower limb till the ankle joint without the correct treatment and the diet aggravates the condition leading to the condition said as the Gridhrasi. It is one among the Vata vyadhi and also can be turned up to the Nanatmaja Vikara. The condition in modern terminology is said to be the Sciatica. It also alligns the condition in modern terminologies that is Sciatica Syndrome. **Aims & Objectives:** The main purpose of this study is to evaluate the effectiveness of Ayurvedic treatment which can heal the condition of Gridhrasi. **Material and Method:** The patient aged 60 years female complaints of lower back ache to bilateral lower limbs (Left>Right) since one and half year. Her MRI shows lumbosacral spine with whole spine screening lumbar spondylosis, transitional L5 vertebrae, disc desiccation at all levels scoliosis of lumbar spine with convexity to right, ligamentum flavum hypertrophy at L3-L4, L4-L5 level. The patient therefore underwent treatment for one month in our hospital. Later on at the time of discharge the patient was satisfied and also their symptoms have reduced. **Results:** After a month the patient again visited our hospital for the follow up and the update of the patient with effective outcome was well. The patient generally opted for the true quality of life and also there was a better improvement in the patient's body. **Conclusion:** As said by Vata vyadhi the first line of treatment of vata vyadhi is vata hara ahara vihara and also a few forms of basti abhyangam and pps done to the patient.

INTRODUCTION

In today's modern era, fast paced lifestyle the low back ache is a common musculoskeletal complaint in most of the age groups. Sciatica not only causes pain but also affects the lifestyle of the person and leaves a negative impact factor to the patient's life.^[1] The word Gridhrasi is derived from the Sanskrit word gridhra which is said as a bird that is a vulture. The name is why is it given? Because the person suffering from this walks like a vulture it also reflects the gait of the patient who suffers from gridhrasi at the sight where there is involvement of the nerve. It affects the leg in the flexed position and when the other leg is extended. According to Acharya Charaka and Acharya Sushruta its classification comes under 80 types of Nanatmaja vikaras of vata vyadhi.^{[2][3][4]} As per modern Sciatica is not a disease its a symptom. As the sciatic is the longest and thickest nerve in a human body, its origination is from the vertebral column at the level of 4th lumbar to 3rd sacral vertebra and it extends till the feet. The pain of the sciatic nerve damage or compression is basically felt in the lower back

which radiates from the lower back towards the posterior of the thigh and lower to the calf muscle and also affecting the feet. In short the pain radiates through the low back to the feet. There are many causes of the sciatic nerve pain like the imbalance of the vata dosha which can cause numbness, pain and also tingling sensation in the lower back and the legs. Poor posture also can be one of the reasons where it puts strain on the lower back and legs leading to pain and discomfort. Herniated discs can put pressure on the sciatic nerve causing pain and numbness in the lower limbs. Muscle strain can cause pain and inflammation in the lower back and legs. Sedentary lifestyle weekend the muscle and leads to gridhrasi. And the traumatic injury or fall also can lead to the condition of sciatica persons who are aged.^{[5][6]} Here in the current case the gridhrasi is termed as the abhighataja gridhrasi which was due to the fall leading to extensive pressure to the sciatic nerve leading to gridhrasi. It is a progressive disease or symptom but it's not life threatening. Frequently affecting females more than males.^{[7][8][9]}

METHODS AND MATERIALS

This case is reported as a type of abhigataja gridhrasi where the women had a trauma in RTA. Abhigataja here refers to the condition that is caused by an external blower injury which immensely leads to a condition said

as Abhigataja gridhrasi. The presenting symptoms may include sudden and severe pain in the lower back and legs. Numbness or tingling sensation in the legs. Weakness on the legs, difficulty in walking or standing due to pain and extensive weakness.

Samprapti Ghataka of Gridhrasi^[10]**Table 1**

Nidana	Vata prakopa
Dosha	Vata(apana and vyana) vayu, Kapha
Dushya	Rasa rakta mama asthi majja kandara sira snayu
Srotas	Rasa rakta mama asthi majja
Sroto dusti	Sanga, margaavarodha
Ama	Jatharagnimandyajanita, dhatav agnijanita
Agni	Jataraghi dhatava agni
Vyakti	Speak, kati, janu, jangha, uru, prista, pada
Bheda	Vata and vata kaphaja
Swabhava	Chirakari
Udbhavasthana	Pakwashayagata
Sancharasthana	Rasayani
Adhistana	Sphik, kati, janu, jangha, pada
Rogamarga	Madyama
Vyakta roopa	Ruk toda sthamba in adhosakti, sphik, janu jangha, kati, prista, pada

CASE STUDY

The patient was normal and was able to do her normal daily activities where one day she fell down from the vehicle. She was admitted in the modern hospital where the dressing was done and conservative treatment was given. She later on took some antibiotics and pain relieving medications as per the allopathy. Then she gradually developed pain in her lower back and she was neglecting the pain and was applying the local spray or balms to get rid of the pain. Later on the pain started radiating towards the lower limbs bilaterally and the patient was unable to do the normal day to day activities.

Past History

Patient has a history of hypertension for 1 year along with diabetes mellitus, and was under medication.

Chief Complaints Of The Patient

1. Pain over the left lower limb.
2. Radiating pain.
3. When standing or sitting for a long duration of time a patient is unable to withstand the pain.
4. Weakness felt over the lower limbs.
5. It worsens when the person is standing, sitting, coughing.
6. Straining while taking breath during the bowel movement also can lead to exaggerated pain.

Table 2

CHIEF COMPLAINTS	DURATION
1. Pain in the lower back region radiating towards the thigh and left leg. 2. Stiffness in the Lumbar region. 3. Numbness. 4. Walking difficulty.	1 and half years

Table 3

Nadi	86/min.	7. Druka	Avara
Mala	Samyak	8. Akriti	Madhyama
Mutra	Samyak	9. Prakruti	Kapha Vata
Jivha	Sama	10. Weight	78kg
Shabda	Sparsha	11. Blood Pressure	130/90
Sparsha	Anushnasheeta	12. Temperature	36.2°C

ASSOCIATED COMPLAINTS

1. Numbness over the left lower limb.
2. Tingling sensation over the left lower limb.
3. Weakness over the lower limbs.

ASTHA STHANA PAREEKSHA

Table 4

Astha Vidha Pareeksha	
1. Nadi	Vata+Pitta
2. Mala	Nirama
3. Mutra	Samyak
4. Jihwa	Nirama
5. Sparsha	Samasheethaushna
6. Shabda	Aspastha
7. Drik	Vikrit
8. Akriti	Madhyama

Table 5

Dasha Vidha Pareeksha	
1. Prakruti	Kapha vata
2. Vikruti	Vata kapha
3. Sara	Rasa, rakta, mamsa, asthi, majja, kandara, sira, snayu
4. Samhanana	Madhyama
5. Pramana	Madhyam
6. Satmya	Vyamishra
7. Satvam	Madhyam
8. Vayah	Vridhdha
9. Ahara shakti	Avara
10. Vyayama shakti	Avara

EXAMINATION BEFORE TREATMENT

EXAMINATION BEFORE TREATMENT			
Straight Leg Raise Test	Side	Right	Left
	Active	45 degree	30 degree
	Passive	50 degree	35 degree
Braggards Test		+	+
FNST		+	+
FABERS		+	+

Clinical investigations

MRI Lumbosacral spine with whole spine screening:

- The reports which were disclosed endured with lumbar spondylosis.
- Transitional L5 Vertebrae.
- Disc desiccation at all levels.
- Scoliosis of the lumbar spine with convexity to the right side.
- Ligamentum flavum hypertrophy at level L3-L4 and L4-L5 level.

DISCUSSION

The pain in the distribution of the sciatic nerve originating from the lower back spreading towards the buttocks, posterior of the thighs, spreading to the calf region and also the outside edge of the foot is the main identification criteria of the sciatica. As said in the above context, gridhrasi is one among the nanatmaja vyadhi which is caused due to the excessive aggravation of vata. As per Acharya Sushruta, he has mentioned that antara kandara gulpha is causing the ailment gridhrasi.

Treatment which was provided to the patient was shamshamana and samshodhana line of chikitsa.

1. Shamshamana Chikitsa

The internal medication was as follows:

Sr. No.	Oushadha	Matra	Anupana
1.	Rasnaerandadhi kashayam	15ml-0-15ml B/F	Wit warm water
2.	Gandharvahastadi eranda tailam	0-0-5 ml B/F	With warm water
3.	Tab. Myostal	1-1-1 A/F	With warm water
4.	Cap. Palsineuron	1-1-1 A/F	With warm water

2. Samshodhana Chikitsa

Sr. No.	Treatment	Medicine	Duration
1.	Abhyangam	Murivenna and Bestlin liniment	20 days
2.	Patra pinda sweda	—	20 days

3.	Niruha Basti	Makshika(100ml) + Lavana (10gm) + Sneha (75 ml Prabhanjana vimardana thailam) + Kalka (15 gms each of Ashwagandha churna and Shatapushpa churna) + Kwatha (400 ml Eranda moola kwatha)	8 days
4.	Anuvasana basti	Prabhanjana vimardana tailam	11 days

EXAMINATION AFTER TREATMENT

Table 4

EXAMINATION AFTER TREATMENT			
Straight Leg Raise Test	Side	Right	Left
	Active	60 degree	70 degree
	Passive	75 degree	50 degree
Braggards Test		-	-
FNST		-	-
FABERS		-	-

Here the tailam which is used as Prabhanjana vimardana tailam has acted efficiently. The drugs in prabhanjana vimardana tailam like bala, sahachara, shigru, varunaka, arka, eranda, shatavari, ashwagandha, prasarini, brihat panchamoola all have the property of vata kapha shamaka, shotha hara, vedana sthapana, balyam even it is packed with rasayana properties. The other drugs of amarkastha, ea, choraka, shunthi, chitrak have the kapha hara properties, deepana and also hridyam. Rasna is kapha vata hara and also acts as rasayana. Sindhuta is tridosha hara and ksheera is madhura rasa madhra vipaka sheeta veerya tri dosha shamaka. Dadhi is vata hara in nature. Kanjika is vata hara. So all together the prabhanjana vimardana taila has the vata kapha shamana shothahara, vedana, sthapana, balya and rasayana properties. It not only helps in any inflammation but also helps in the abhigata vyadhis. As it has the analgesic properties. So when basthi is administered through the anal route it enters into the pakwashaya and also removes the faeces gases accumulated there. This is the local action of basthi chikitsa. Where the mala and apana vayu are removed. It is also said that basti is said a sthe ardha chikitsa or sampurna chikitsa. Drugs when administered through the anus it reaches the grahani and there the absorption also can occur in the jejunum. As a tree irrigated at its root level attains nourishment for the whole tree the same way the basti given reaches the blood vessels, lymphatic and also the nerves serving its properties and also nourishes all the limbs and organs of the body.

CONCLUSION

The term sciatica is the condition which makes the person cripple in a longer time period where careful observation and supervision will. Due to the lifestyle pattern the Ayurveda is the one of emerging therapies which tends to follow the body type and also it makes the body disease free. The treatment given to the patient has helped the patient to get better within a very short period of time and movements of lower limbs doing the daily activities have

REFERENCES

1. Sushrut Samhita, by Dr. Ambika Dutta Shastri, Nidana Sthana Chapter 1/74, published by

- Chaukhambha Surbharati Prakashana, Varanasi Anantkumar Shekokar, Kanchan Shekokar. Principles and Practices of Agnikarma. 2nd ed. Pune: Shanti Prakashan; 2007. P.47.
2. Charaka Samhita (Vaidya Manorama Hindi Commentary), Vol. I. 8th ed. Varanasi: Vidyadharshulka, Ravidatta Tripathi, editors. Chaukhambha Sanskrit Prakashan; 2004. Sutrasthana, 20/10.
3. Charaka Samhita (Vaidya manorama Hindi Commentary), Vol. I. 8th ed. Varanasi: Vidyadharshulka, Ravidatta Tripathi, editors. Chaukhambha Sanskrit Prakashan; 2004. Nidana Sthana, 1/6. p. 462.
4. Sushruta Samhita (Susrutavimarsa in Hindi commentary), Vol. I. 5th ed. Varanasi: Anantram Sharma, editor. Chaukhambha Surbharati Prakashan; Sutrasthana, 21/19.
5. Ibrahim M, Hurlbert RJ. Nonsurgical and postsurgical management of low back pain. In: Winn HR, ed. Youmans and Winn Neurological Surgery. 8th ed. Philadelphia, PA: Elsevier; 2023:chap 312.
6. Marques DR, Carroll WE. Neurology. In: Rakel RE, Rakel DP, eds. Textbook of Family Medicine. 9th ed. Philadelphia, PA: Elsevier Saunders; 2016: chap 41.
7. Charaka Samhita(Vaidyamanorama Hindi Commentary), Vol II 8th ed. Varanasi Vidyadhar Shukla, Ravidatta Tripathi, editor. Chaukhambha Sanskrit Prakashan; 2007. Chikitsa Sthana, 28/57.
8. Athawale PG, editor, (2nd ed.). Sushrut Samhita of Sushruta; Sharira Sthana, Chapter 7, Verse 9, Nagpur, Godavari publishers and book promoters, 2008; 377.
9. Shukla V, editor, (2nd ed.). Charaka Samhita of charak, chikitsa: Chapter 15, Verse 77. Varanasi: Chowkhambha Sanskrit Series, 2002; 518.
10. Tripathi B, editor. Sutrasthana; Doshopakramaniya Adhyaya. Vagbhata, Ashatanga Hrudaya Chapter 13, Verse 1–3. Delhi, India: Chaukhambha Sanskrit Pratishthan, 2015; 185.