

A COMPARATIVE CLINICAL STUDY TO EVALUATE THE EFFICACY OF ASHTAKATVARA TAILA WITH GOKSHURADAI TAILA MATRABASTI FOLLOWED BY DASHAMULA KASHAYA AS SHAMANOUSHADHI IN GRIDHRASI VIS A VIS SCIATICA**Dr. Sangeetha N.^{1*}, Dr. Mythrey R. C.², Dr. Ananta S Desai³**

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ABSTRACT

Background: Low back ache is one of the most common clinical symptom experienced by substantial portion of the population. *Gridhrasi* is defined as *vata vyadhi* characterised by radiating pain from *Sphik kati purva* through *Uru, Janu, Jangha, Pada*. It can be conveniently concluded that *Gridhrasi* and *sciatica* represent the same disease. Considering all these the present study was undertaken to evaluate the efficacy of *Ashtakatvara taila* and *Gokshuradi taila matra basti* followed by *Dashamula Kashaya* as *shamanoushadhi*.

Objectives

- To Compare the efficacy of *Ashtakatvara* with *Gokshuradi Taila Matra Basti* followed by *Dashamula Kashaya* orally in *Gridhrasi*.
- To Evaluate the efficacy of *Ashtakatvara Taila Matra Basti* followed by *Dashamula Kashaya* orally in *Gridhrasi*.
- To Evaluate the efficacy of *Gokshuradi Taila Matra Basti* followed by *Dashamula Kashaya* orally in *Gridhrasi*

Methods: Study design- A double arm, open labelled comparative clinical study with pre, mid and post test design. Intervention- • Group A *Matra Basti* with *Ashtakatvara Taila* (72 ml) for 8 consecutive days. *Dashamula Kashaya* (*Prakshepaka of Hingu and Pushkramula Churna*) 48ml in two equally divided doses (24ml/dose) with lukewarm water before food orally for the next 30 days(i.e next day after completion of *Matra Basti*) • Group B *Matra Basti* with *Gokshuradi Taila* (72 ml) for 8 consecutive days. *Dashamula Kashaya* (*Prakshepaka of Hingu and Pushkramula Churna*) 48ml in two equally divided doses (24ml/dose) with lukewarm water before food orally for the next 30 days(i.e next day after completion of *Matra Basti*). **Results:** Group A and Group B showed equal statistical significance with assessment parameters like *stambha*, *Ruk*, SLR test, Bragard's sign, Sciatica bothersome index scale value with the significance "P" value of 0.005. On comparison, between the groups there was non significant results found. Hence, both the groups were effective in reducing the symptoms of *Gridhrasi*. The overall study revealed that the selected intervention has showed significant results in the management of *Gridhrasi vis-à-vis Sciatica*.

KEYWORDS: Sciatica, Gridharsi, Ashtakatvara taila, Gokshuradi taila, Dashamula kashaya.

INTRODUCTION

Changing life style of modern human being has created several disharmonies in his biological system. As the advancement of busy professional and social life, improper sitting posture in offices, factories, continuous and overexertion, jerky movements during traveling and sports – all these factors create undue pressure to the spinal cord and play an important cause for producing low back ache and pain radiating down the leg. Likewise, progressive disorders affecting the pelvis and nearer structures are also precipitating this condition. In this way, this disease is now becoming a significant threat to the working population.

As per *Charaka Samhitha*, *Gridhrasi* is described as a *Shoola Pradhana Vatavyadhi* and is mentioned under the umbrella of *Vataja Nanatmaja Vyadhi*.^[1] It is characterised by Stiffness, pricking sensation and pain radiating from *Sphik* to *Kati*, *Prushtha*, *Uru*, *Janu Janga and Pada* in an order^[2] The signs and symptoms of Sciatica closely resembles *Gridhrasi*. Sciatica is defined as radiating pain along the course of sciatic nerve and is felt in the back, buttocks, posterior of the thighs, legs and foot. The sciatic pain is shooting type and radiates down to one or both legs usually below knee in dermatomal distribution, often associated with numbness, tingling sensation and possible local weakness. The nerve roots affected are L4, L5 and S1.^[3]

In Ayurvedic classics, management of *Gridhrasi* includes *Basti karma*, *Siravyadha* and *Agni karma*.^[4] *Basti karma* which is mentioned as *Ardha Chikitsa* for *Vataja Vyadhi*.^[5] is imperative in its management. Hence in the present study the efficacy of *Ashtakatva taila*.^[6] *Matrabasti* and *Gokshuradi taila*.^[7] *Matra Basti* was taken for comparative evaluation of the possible effect on *Gridhrasi*. In Group A, *Matra Basti* with *Ashtakatvara taila* followed by *Dashamula*.^[8] *Kashaya* was given, In Group B *Gokshuraditaila Matrabasti* followed by *Dashamula Kashaya* was given.

OBJECTIVE

To Compare the efficacy of *Ashtakatvara* with *Gokshuradi Taila Matra Basti* followed by *Dashamula Kashaya* orally in *Gridhrasi*.

- To Evaluate the efficacy of *Ashtakatvara Taila Matra Basti* followed by *Dashamula Kashaya* orally in *Gridhrasi*.
- To Evaluate the efficacy of *Gokshuradi Taila Matra Basti* followed by *Dashamula Kashaya* orally in *Gridhrasi*

MATERIALS AND METHODS

Study design- A comparative clinical study with pre, mid and post test design. Total of 40 subjects, 20 each individuals in each group.

Research design: A double arm open labelled comparative clinical trial with pre, mid and post test design.

Sample source

Subjects visiting Government Ayurveda Medical College & Hospital, Mysuru and Government Hitech Panchakarma Ayurveda Hospital, Mysuru and special medical camps who were fulfilling the diagnostic criteria were selected as study samples. Simple Random Sampling was used to categorize subjects into two different groups.

Grouping

Each group consists of 20 subjects

Intervention

Group A

Matra basti with *Ashtakatvara taila* (72 ml) for 8 consecutive days. *Dashamula Kashaya* (prakshepaka of *hingu* and *pushkramula churna* (250mg each per dose) 48ml in two equally divided doses (24ml/dose) with lukewarm water before food orally for the next 30 days (i.e next day after completion of *matra basti*).

Group B

Matra basti with *Gokshuradi taila* (72 ml) for 8 consecutive days. *Dashamula Kashaya* (prakshepaka of *hingu* and *pushkramula churna*) 48ml in two equally divided doses (24ml/dose) with lukewarm water before food orally for the next 30 days (i.e next day after completion of *matra basti*).

Duration of the study

38 days.

Inclusion criteria

Subjects with signs and symptoms of *Gridhrasi* between the age group of 20-60 irrespective of gender, religion, socio- economic status, occupation were selected for the study. • Both freshly detected and treated cases of *Gridhrasi vis-à-vis* Sciatica (with the wash out period of seven days) were taken for the study.

Exclusion criteria: • Subjects with history of recent fracture (250mg/dl), uncontrolled hypertension (>160/100 mm Hg) and other systemic disorders which will interfere with the intervention were be excluded. • Neoplastic/Infective/congenital conditions of the lumbar spine were excluded.

Diagnostic Criteria

1. Subjects with following symptoms of *Gridhrasi* were taken for the study as pain radiating from *sphik*, *kati*, *prushtha*, *uru*, *janu*, *jangha* and *pada*.
2. SLR test –Positive
< 20 degree- severe
20-40 degree- Moderate
40-60 degree- Mild
Positive Bragard's sign

Assessment criteria

1. Straight leg raising test

2. Bragards sign
3. Sciatica bothersome index and sciatica frequency index
4. Visual Analogue Scale
5. Stambha(Stiffness)

- No stiffness-ST0
- Mild stiffness-ST1 (With up to 25% impairment in the range of movement of joints. Patient can perform routine work with difficulty)
- Moderate stiffness-ST2 (With up to 25-50% impairment in the range of movement of joints. Patient can perform routine work with moderate difficulty.)
- Severe stiffness-T3 (With more than 50- 75% impairment in the range of movement of joints. Patient unable to perform routine work.

6. Ruk

No pain-R0

Mild pain- R1

Moderate pain- R2

Severe pain -R3

Assessment schedule

There will be total 3 assessment schedule in the following manner.

- First assessment - 0th day-Before starting the intervention.
- Second assessment -9th day- After completion of Matrabasti i.e before shaman aushadhi.
- Third assessment a -39th day: After the completion of intervention.

Statistical Methods

The results were analysed statistically by using descriptive statistics, paired t test, ANOVA test using service product for statistical solution (SPSS) for windows.

EC approval number

IEC No: **GAMC/IEC-PG(16)2023**

RESULTS

Group A and Group B showed equal statistical significance with assessment parameters like *stambha*, *Ruk*, SLR test, Bragard's sign, Sciatica bothersome index scale value with the significance "P" value of 0.005. On comparison, between the groups there was non significant results found. Hence, both the groups were effective in reducing the symptoms of *Gridhrasi*. The overall study revealed that the selected intervention has showed significant results in the management of *Gridhrasi vis-à-vis Sciatica*.

DESCRIPTIVE STATISTICS OF STAMBHA IN GROUPS A AND B (FRIEDMAN TEST STAMBHA

Symptom- <i>STAMBHA</i>	Mean Rank	Mean Rank
	Group A	Group B
0 TH day	2.95	2.95
9 th day	1.83	1.73
39 th day	1.23	1.33
Test statistics	35.565	35.292
P value	.001	.001

RUK

Symptom- <i>RUK</i>	Mean Rank	Mean Rank
	Group A	Group B
0 TH day	2.95	3.00
9 th day	1.98	1.75
39 th day	1.08	1.25
Test statistics	37.520	37.143
P value	.001	.001

SCIATICA BOTHERSOME INDEX

GROUP	0 th Day		9 th Day		39 th day	
	Mean	S.D	Mean	S.D	Mean	S.D
GROUP A	13.50	2.35	7.95	2.46	4.50	3.07
GROUP B	11.80	2.09	6.85	1.95	4.75	2.02
TOTAL	12.65	2.36	7.40	2.26	4.63	2.57
TEST STATISTICS	Change (Overall): F=430.856; p=.001					
	Change (between groups): F=6.468; p=.003					

STRAIGHT LEG RAISE TEST

GROUP	0 th Day		9 th Day		39 th day	
	Mean	S.D	Mean	S.D	Mean	S.D
GROUP A	42.875	9.04	71.25	16.9	83.0	13.8
GROUP B	46.87	8.91	76.75	12.16	84.5	11.9
TOTAL	44.87	9.09	74.0	14.81	83.7	12.74
TEST STATISTICS	Change (Overall): F=241.938; p=.000					
	Change (between groups): F=.604; p=.549					

The overall change over time was highly significant (F = 241.938, p = .000), indicating that both groups experienced a significant improvement during the study period.

DISCUSSION

EFFECT ON RUK, TODA, STAMBHA

All these *Lakshana* are due to *Vata Prakopa*. *Basti* is considered the best *Chikitsa Upakrama* for pacifying vitiated *Vata Dosha*. In the present study, *Basti Chikitsa* and *Shamana Aushadhi* were adopted using drugs possessing *Katu*, *Tikta*, *Kashaya*, and *Madhura Rasa*, with *Ushna Virya* and *Snigdha Guna*. These drugs exhibit properties such as *Tridosahara*, *Kapha-Vata Shamaka*, *Dipana*, *Pachana*, *Balya*, *Brimhana*, *Shothahara*, and *Rasayana*. The pharmacological actions of the drugs used in the study include anti-inflammatory, analgesic, and antioxidant properties, which help in reducing pain and inflammation of the sciatic nerve. Thus, through *Basti Chikitsa* and the combined *Guna* and *Karma* of the selected drugs, the *Samprapti* of *Gridhrasi* was effectively relieved.

EFFECT ON SLR TEST AND BRAGARD'S SIGN

Restricted SLR test in most of the subjects is due to pain caused by sciatic nerve root compression. After intervention, pain was relieved and SLR test was improved. A significant increase was observed from 0th day to 39th day in mean value of SLR in both the Groups. All subjects presented with positive Bragard's sign before intervention, after the completion of intervention in both the groups, subjects showed negative Bragard's sign.

EFFECT ON SCIATICA BOTHERSOME INDEX SCALE VALUE

There was significant increase in Sciatica bothersome index scale value in both the groups. There was statistically non-significant difference in between the groups.

PROBABLE MODE OF ACTION OF ASHTAKATVARA TAILA

Aṣṭakatvara Taila, mentioned in classical texts for the management of *Vata Vyadhi*, acts through its unique *Rasa Panchaka* attributes that directly counter the *Samprapti* of *Gridhrasi*. The formulation is dominated by *Katu* and *Amla Rasa*, which exert *Deepana-Pachana* effects, aiding in the digestion of *Ama* and clearance of *Srotorodha* (obstruction of bodily channels) that underlie sciatic pain. The *Laghu*, *Tikshna*, and *Snigdha Guna*

synergistically reduce *Rukshata* and *Sheetata* of aggravated *Vata*, while providing lubrication to joints, muscles, and nerves, thereby restoring mobility. The predominance of *Ushna Veerya* makes it particularly suitable for *Vata* disorders by alleviating *Stambha* (stiffness) and *Shula* (pain) through improved circulation and warmth. Its *Katu Vipaka* ensures long-term *Srotoshodhana* and prevents recurrence of *Kapha-Avarana*. Additionally, the formulation exhibits a specific *Prabhava* of *Vedanasthapana* (analgesic) and *Shulaprashamana* (pain-relieving) actions, making it highly effective in conditions like *Gridhrasi*.

From a modern perspective, the active phytoconstituents—such as piperine from *Pippali*, gingerols from *Shunthi*, and allyl isothiocyanates from mustard oil (*Sarshapa Taila*)—possess well-documented anti-inflammatory, analgesic, antioxidant, and neuroprotective properties. The heating and pungent nature of these compounds enhances local blood circulation, reduces inflammation around the lumbosacral nerve roots, relaxes muscle spasms, and desensitizes peripheral nociceptors, thereby alleviating neuropathic pain. The use of curd (*Dadhi*) and buttermilk (*Takra*) as adjuncts not only improves drug extraction and bioavailability but also enhances tissue penetration, facilitating deeper action on nerve pathways. Thus, *Aṣṭakatvara Taila* acts by pacifying aggravated *Vata* through both classical Ayurvedic mechanisms and modern pharmacological principles, ultimately reducing pain, stiffness, and nerve irritation in *Gridhrasi*.

PROBABLE MODE OF ACTION OF GOKSHURADI TAILA

Gokshuradi Taila is a classical Ayurvedic formulation prepared using *Gokshura Swarasa*, *Tila Taila*, *Shunthi Kalka*, *Guda*, and *Ksheera*, and is indicated in various *Vata Vyadhi* including *Gridhrasi*. The formulation exerts its therapeutic effect through the principles of *Rasa Panchaka*. It predominantly possesses *Madhura*, *Tikta*, and *Kashaya Rasa*, which are *Vata-Pittahara*, *Balya*, and *Shothahara*, thereby nourishing *Dhatus*, alleviating inflammation, and pacifying aggravated *Vata*. The *Snigdha*, *Guru*, and *Picchila Guna* counter the *Ruksha* and *Sheeta* attributes of *Vata*, providing lubrication to nerves and joints, whereas the *Laghu-Tikshna Guna* of *Shunthi* aids in *Srotoshodhana* and relieves *Avarana*.

The presence of both *Sheeta Veerya* (from *Gokshura*, *Guda*, *Ksheera*, and *Tila*) and *Ushna Veerya* (from *Shunthi*) ensures a harmonized effect—reducing *Pitta*-

Anubandha burning sensations and inflammation while enhancing circulation, warmth, and mobility. The *Madhura Vipaka* supports *Dhatu-Pushti* and *Vata-Shamana* by promoting tissue nourishment and regeneration. The formulation also exhibits *Mutrala*, *Shothahara*, and *Vedanasthapana Prabhava*, which collectively relieve pain, swelling, and stiffness—hallmarks of *Gridhrasi*.

From a modern pharmacological perspective, *Tribulus terrestris* (*Gokshura*) contains saponins and flavonoids with documented diuretic, anti-inflammatory, and antioxidant effects that reduce edema and oxidative stress around the sciatic nerve. *Sesamum indicum* (*Tila Taila*), rich in linoleic acid and antioxidants, functions as a potent carrier with deep tissue penetration, anti-inflammatory, and neuroprotective actions. *Zingiber officinale* (*Shunthi*) provides gingerols that exert strong anti-inflammatory and analgesic effects, improving local microcirculation and reducing nerve irritation. *Guda* and *Ksheera* act as *Brimhana Dravyas*, enhancing nutritional support, formulation stability, and tissue repair.

Thus, *Gokshuradi Taila* acts through a dual mechanism—classical Ayurvedic *Vata*-pacifying principles and modern pharmacological pathways—to effectively alleviate pain, inflammation, stiffness, and promote neural and muscular nourishment in *Gridhrasi*.

PROBABLE MODE OF ACTION OF DASHAMULA KASHAYA

Dashamula Kashaya, prepared from the *Kwatha* of the ten roots, is one of the most widely used formulations in *Vata Vyadhi*. The formulation is rich in *Madhura*, *Tikta*, *Kashaya*, and *Katu Rasa*, which act as *Vata-Pittahara*, *Shothahara*, and *Deepana*. The *Madhura Rasa* and *Vipaka* provide *Dhatu-Pushti*, nourishment, and long-term pacification of *Vata*, while *Tikta-Kashaya Rasa* reduce inflammation, burning, and stiffness. The presence of *Snigdha* and *Guru Guna* counter the *Ruksha* and *Sheeta Guna* of *Vata*, thereby restoring lubrication and stability of joints and nerves, whereas the *Laghu* and *Tikshna Guna* facilitate *Srotoshodhana* and relieve *Avarana*. The predominance of *Ushna Veerya* further pacifies aggravated *Vata*, alleviates *Shula* (pain) and *Stambha* (stiffness), and enhances circulation. Collectively, these attributes confer *Tridosahara*, *Vedanasthapana*, and *Shothahara Prabhava*, which are especially beneficial in *Gridhrasi*.

From a modern pharmacological perspective, *Dashamula* possesses a wide spectrum of activities attributable to its diverse phytoconstituents including flavonoids, alkaloids, glycosides, saponins, and tannins. Experimental studies demonstrate anti-inflammatory, analgesic, antioxidant, diuretic, and immunomodulatory effects, which help in reducing edema and inflammation around the sciatic nerve, modulating pain perception, protecting nerve and muscle tissues from oxidative damage, and promoting tissue repair.

CONCLUSION

Gridhrasi is a *Vataja Nanatmaja Vyadhi* characterized by pain radiating from *Sphik Pradesha* to *Kati*, *Prushta*, *Uru*, *Janu*, *Jangha*, and *Pada*, associated with *Stambha*, *Toda*, and *Muhur Spandana*. When *Kapha Dosha* is associated, symptoms such as *Tandra*, *Gourava*, and *Arochaka* are also observed along with the above features. The *Dushya* such as *Asthi*, *Majja*, and *Snayu*, and the *Srotas* like *Asthivaha Srotas*, play a significant role in the pathogenesis of the disease *Gridhrasi*.

- From a contemporary perspective, sciatica is a painful condition characterized by low back pain radiating to one or both lower limbs, often associated with a history of trauma, continuous lifting of heavy objects, improper posture, excessive bending, over-exercise, jerky movements during travel, or sports activities. These factors exert undue pressure on the spinal cord, contributing to lower backache and sciatica. The underlying causes may include degenerative disc changes, intervertebral disc prolapse, sprain, or trauma.
- The interventions employed in the study were found to be effective in both groups. Disc bulge, being a degenerative manifestation indicative of *Vata Prakopa*, justifies the application of *Basti Chikitsa* as the best line of treatment.
- In the present study, the overall effect of the intervention was assessed based on the reduction in the classical symptoms of *Gridhrasi* and improvement in the Straight Leg Raising (SLR) value and *Bragard's Sign*. Additionally, there was a marked improvement in the Sciatica Bothersome Index Scale.

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