



Role of Vajigandhadi Taila Matra Basti in Gridhrasi (Sciatica)

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Abstract

It is one of the most common musculoskeletal complaints encountered in clinical practice. Its prevalence has been estimated to be 1-5% in India. A large study reported an incidence of 28.0 episodes per 1000 persons per year and for low back pain with sciatica an incidence of 11.6 per 1000 persons per year. Sciatica affects men a little more than women and is most frequent in the working population, with the highest incidence seen in those aged 20-64 years. Due to busy professional working like improper sitting, over exertion, jerking movements during travelling, sports, increasing computerization trend, increasing body weight and mental stress create undue pressure on spinal structures which play an important role in causing sciatica. Being an alarming problem, it needs an effective and safe treatment. From the time immemorial, innumerable analgesics have been added to the arsenal of the modern physician only to reveal its futility. Though, modern therapeutics has a broad spectrum of the drug for management of this disease, aftermath of which is that they are having serious side effects. SCIATICA being a challenging lifestyle condition needs proper management. Modern medicine is not having no specific management sciatica that's why an elaborate study has been undertaken to have an in depth knowledge about the concept of sciatica in Ayurveda terms.

Keywords: Gridhrasi; Matra Basti; Sciatica; Vata Vyadhi; Agnikarma

Introduction

A Vata Nanatmaja vyadhi [1], Gridhrasi exhibits vitiation of the Vata Dosha afflicting Kandaras of lower limbs. These days, there are more abnormalities of locomotor system. The amount of human activity in terms of social and professional life is significantly reduced by these circumstances. Ayurvedic texts have named one of these severe, incapacitating diseases by the name of Gridhrasi. The name itself indicates the way of gait shown by patient due to extreme pain just like Gridhra (vulture) [2]. It is characterized by radiating pain starting from lower back to the gluteal region, posterior aspect of thigh, knee, calf and foot of the affected limb(s). The pain may

be made worse by sneezing, coughing, or sitting for a long period of time.

Due to symptomatic resemblance, Gridhrasi can be correlated with sciatica. Now a day's in India as well as in abroad sciatica is one of the very common complaints in every age group of population. Due to improper sitting caused by intensive professional work, jerky movements during travelling, sports, increasing computerization trend, mental stress and gaining body weight create undue pressure on spinal structures which play an important role in causing sciatica. Being an alarming problem, it needs an effective and safe treatment. Numerous analgesics have been added

to the arsenal of modern doctors since the beginning of time, yet this has only served to highlight their futility. Despite the wide range of medications available in modern therapeutics for the treatment of this disease, these medications have substantial negative effects.

When we examine the factors that lead to “Gridhrasi”, we discover that any Abhighat (trauma) impacting the lower portion of the spinal cord can result in this ailment. However, even minor pressures brought on by the aforementioned portion might significantly alter how the locomotor system functions. Studying the numerous aetiologies cited for the formation of Vata Vyadhi’s and their function in the formation of Vatavaigunya with a focus on Gridhrasi worthwhile. GRIDHRASI being a challenging lifestyle condition needs proper management. Therefore, search for a safer management is of great importance. BASTI is indicated by almost all the Acharyas for its effective management. The medicine administered through the anal orifice.

Ayurvedic Review Purvaroop

Acharya Charaka has explained Aavyakta as presentation of mild symptoms [3].

Rupa

A Vata Nanatmaja Vyadhi, Gridhrasi exhibits vitiation of the Vata Dosha afflicting Kandaras of lower limbs with a peculiar pain starting from sfigh - kati pradesh – uruh – janujangha – pada [4].

Symptoms of Gridhrasi

According to Acharya Charaka

Gridhrasi (sciatica) starts from waist, back and gradually comes down to hip, thigh, knee, calf and foot and affects these parts with stiffness, distress and piercing pain and also frequent quiverings. These symptoms are of vata but when the disorder is caused by vata and kapha it is associated with drowsiness, heaviness and anorexia [4].

According to Acharya Sushrut

When the Kandara i.e, ligament of heel and all the toes are affected by vitiated Vata, movement of the lower limbs get restricted [5].

Modern Review

Sciatic nerve is the longest and thickest nerve in the body. It’s actually made up of five nerve roots: two from the lower back region called the lumbar spine and three from

the final section of the spine called the sacrum. Sciatica is a clinical diagnosis based on the presence of radiating pain in one leg, with or without the associated neurological deficits of parasthesis and muscle weakness [6]. Sciatic pain occurs due to irritation of a spinal nerve root may or may not be associated with disc herniation at L4 – L5 or L5 – S1. Sciatica is nerve pain from an injury or irritation to the sciatica nerve, which originates in your gluteal area.

Sciatica involves following symptoms;

- Shooting pain anywhere along the sciatic nerve; from lower back, through the buttocks, and down the back of either leg.
- Numbness in the leg along the nerve
- Tingling sensation (pins and needles) in the feet and toes.

Criteria for Diagnosis of Gridhrasi

The subjective criteria of diagnosis are based on clinical parameters of Gridhrasi and sciatica i.e,

- Ruk
- Toda
- Stambha
- Spandana
- Gaurava
- Tandra
- Aruchi

Objective criteria of Gridhrasi

- VAS (Visual analogue scale)
- Popliteal compression test
- SLR

Investigations

- CBC
- Blood glucose level (F.B.S, P.P)
- Serum uric acid
- CRP
- Rheumatoid factor
- Urine analysis routine and microscopic
- X-ray
- MRI (if required)

Chikista Sutra

The specific line of treatment for Gridhrasi as mentioned in different Ayurvedic classics are as follows: -

Gridhrasi should be performed via venesection in the vein located between the Kandara of the ankle joint, Basti, and Agnikarma (cauterization), according to Acharya Charaka [7].

Basti

The most crucial karma for treating vata vyadhi is basti. It is recommended for individuals with impairment, stiffness in the extremities, organ pain, and bone fractures. The majority of the symptoms are present in Gridhrasi patients, including severe constipation, loss of appetite etc.

Role of Vajigandhadi Taila Matra Basti

Vajigandhadi Taila: Ingredients:

- Ashwagandha
- Bala
- Bilva
- Dashmoola
- Eranda Taila (castor oil)

Taila is prepared according to the guidelines [8].

As Gridhrasi is Vata predominant disease and Vata Dosh is responsible for Ruk, Tod, Spandana like symptoms in Gridhrasi. Taila is considered the best treatment procedure for Vata and the constituents of Vajigandhadi taila, which have vata shamaka properties as well as bringhana properties make it ideal for sciatica.

Discussion

According to Acharya Charaka Basti is considered as Ardha chikitsa or Sampurna chikitsa. Basti is invariably useful in disease of vata, pitta, kapha, rakta, samsarga & sannipataja condition of doshas 11. Matra basti is a type of Anuvasana Basti having dose equal to the hrishava matra of snehapana. It can be practised any time in children, elderly, engaged in walking, exercise, coitus and thinking, also in Vata Rogi, bhagna, weak patient, weak digestive fire, and tender person. It pacifies the dosha, free from complications, increases strength, and evacuates the Mala comfortably.

As Mātrā Basti is a type of Anuvasana Basti, it should not be given after the patient has consumed excessively Snigdha Āhāra because fat taken in double quantity gives rise to Mada and Murccha. Before Mātrā Basti the patient should avoid the intake of excessively Ruksha Ahara because it causes decrease of Bala and Varna. Therefore patient should be given appropriate Ahara before Mātrā Basti. Patient should be given Yusha, Milk, Mamsarasa or any diet which is suitable to patient in less quantity i.e. 4th of routine diet.

Conclusion

The topic begins with an explanation of the disease, Gridhrasi a Vataja Nanatmaja Vyadhi, which provides precise information about its prevalence. This information reveals an incidence of 11.6 per 1000 people per year, which is a significant number. The condition is described in detail while maintaining the background ayurvedic ideas including its hetu, purvaroop, rupa & chikitsa, as well as brief correlation to sciatica. Also both contemporary and ayurvedic writings provide clear explanations of the disease's diagnostic criteria. The treatment section provides a scientific explanation of function of Basti with a focus on the Vajigandhadi Taila matra basti in Gridhrasi.

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