



Case Study

EFFECT OF *BASTI KARMA* IN *GRIDHRASI*-A CASE STUDY

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ABSTRACT

Gridhrasi is one of the *Nanatmajavyadhis* of *Vatadosha*. The term *Gridhrasi* indicates the typical gait that resembles of *Gridhra* i.e. vulture. *Ruka* (pain), *Toda* (pricking sensation), *Stambha* (stiffness) in waist, hip, back of the thigh, knee, calf and foot respectively are the main symptoms. *Gridhrasi* can be correlated with sciatica in modern science. Improper sitting posture, continuous and over exertion, jerking movements produce structural abnormality in spine may cause sciatica. A 48 years old female patient approached the OPD with radiating pain from lumbar region to left lower limb and difficulty in walking since one year and was diagnosed with *Gridhrasi*. As *Gridhrasi* is *Vatajavyadhi*, *Basti* is the best treatment for *Gridhrasi*. Hence for this patient line of treatment was *Sarvangaabhyanga* with *Sahachartail*, *Sarvangabashpaswed* with *Dashamoolkwath*, *Basti* in the form of *Erandmooladiniruhabasti* and *Sahachar tail Anuvasanbasti* followed by *Panchatikta ksheer basti* with *Guggultikta ghrut* is chosen here along with some oral medications *Sahacharadikashay Ghana vati*, *Prasarnyadikashay Ghana vati*, *Vishatindukvati*, *Guggultiktakashay* was given. This treatment provided marked improvement in signs and symptoms of *Gridhrasi*. Before treatment *Ruka* was 4, *Aruchi* was 1, *Toda* was 3, *Stambha* was 4, *Gaurav* was 2, *Spandana* was 2, SLRT left side was 4 and right side was 1, walking distance was 3 which turns after treatment to 2,0,1,0,1,1,0, left side-1, right side-0,1 respectively.

KEYWORDS: *Gridhrasi*, *Vataja Nanatmaja Vyadhi*, *Erandmooladiniruhabasti*, *Panchatikta ksheer basti* with *Guggultiktaghrut*.

INTRODUCTION

Gridhrasi is one of the *Nanatmajavyadhis* of *Vata Dosha*.^[1] The term *Gridhrasi* indicates the typical gait that resembles of *Gridhra* i.e. vulture. *Ruka* (pain), *Toda* (pricking sensation), *Stambha* (stiffness) in waist, hip, back of the thigh, knee, calf and foot respectively are the main symptoms.^[2]

Gridhrasi can be correlated with sciatica in modern science. Improper sitting posture, continuous and over exertion, jerking movements during travelling and sports produce structural abnormality in spine may cause sciatica. The main cause behind the irritation of sciatic nerve is degenerative pathology of intervertebral disc, reduction in intervertebral space, sacralisation of vertebra and spinal canal stenosis. In modern medicine, treatment for Sciatica is NSAID and surgical correction. Use of NSAID has temporary relief and surgical correction is expensive and risky.

In Ayurveda, as *Gridhrasi* is *Vatavyadhi*, *basti* is the best treatment for it.^[3] *Basti* is the treatment which can correct local and system pathology also.

Hence in the present case the patient was treated with *Sarvanga Snehana*, *Bashpasweda*, *Erandmooladi Niruhabasti*, *Sahachara tail Matrabasti* followed by *Panchatikta ksheer basti* with *Guggul tikta ghruta*^[4] along with certain Ayurvedic medicines. *Erandmooladi niruha basti* is specially indicated in conditions like pain in low back, thigh and feet as well as for correction of vitiated *Vatadosha*. This treatment provided marked improvement in signs and symptoms of *Gridhrasi*.

AIM

To study the efficacy of *Erandmooladi niruhabasti* followed by *Panchatikta ksheerbasti* with *Guggultiktaghruta* in management of *Gridhrasi*.

OBJECTIVES

1. To study details of *Gridhrasi* in Ayurvedic and modern science.
2. To study the efficacy of *Erandmooladiniruhabasti* in *Gridhrasi*.
3. To study the efficacy of *Panchatikta ksheer basti* with *Guggultiktaghruta* in *Gridhrasi*.

MATERIALS AND METHODS**Method-** Centre of study YMTAMC

Simple random single case study.

Materials**Case report-** A 48 years female patient approached the OPD with the chief complaints of

1. Radiating pain from lumbar region to the left lower limb which increases on standing and walking.
2. Difficulty in walking
3. Left lower limb tingling sensation

All above complaints were since one year, but increased since one month.

History of Present Illness

Patient was normal before one year. She developed lower back pain since one year. Since one month she has developed radiating pain from lumbar region to left lower limb which increases on standing and walking, difficulty in walking due to pain, left lower limb tingling sensation. Patient has taken some treatment for the same but symptoms gradually increased. So patient got admitted in YMTAC for treatment.

Personal history

Occupation- Housewife

Addiction- Nil

Ashtavidhaparikshana

Nadi- 76/min

Mala pravrutti- Malavibandha, once in 2-3days

Mutrapravrutti- 5-6 times/ day

Jivha- Saam

Shabda- Spashta

Sparsha- Anushna sheet

Druk- Prakrut

Aakruti- Madhyam

Bala- Avara

Raktabhara- 110/80mmhg

S/E- RS- AEBE, Clear.

CVS- S1 S2 Normal

CNS- Conscious oriented.

P/A- Soft

MRI Lumbar spine (27/6/18)

Sacralisation of the L5 vertebra: At L1-L2 and L2-L3 levels: diffuse disc bulge indenting theca sac, Ligamentum flavum hypertrophy is noted at these levels. At L3-L4 level: disc desiccation, central and b/l paracentral disc bulge indenting thecal sac, transversing nerve roots narrowing b/l neural foramina indenting b/l exiting nerve roots. Ligamentum flavum hypertrophy, annular tear and spinal canal stenosis are seen at this level.

ObjectivesTo study the effect of *Basti karma* in management of *Gridhrasi*.**Nidan Panchaka****Nidan:** Heavy weight lifting**Poorvarupa:** Not elicited**Rupa:** radiating pain from lumbar region to left lower limb which increases on standing and walking. Difficulty in walking and left lower limb tingling sensation.^[5]**Samprapti:** Hetusevana- Vataprakopa- Sphikpradesh, Katiprakshob- Kramanevedana at Kati, Prushta, Uru, Janu, Jangha, Pada- Gridhrasi.**Table 1: Showing gradation for assessment-Subjective criteria ^[6]**

| Ruka (pain) | | Aruchi (Anorexia) | |
|--|---|----------------------------|---|
| No pain | 0 | No anorexia | 0 |
| Occasional pain | 1 | Mild anorexia | 1 |
| Mild but not difficulty in walking | 2 | Moderate anorexia | 2 |
| Moderate pain and slight difficulty in walking | 3 | Severe anorexia | 3 |
| Severe pain with severe difficulty in walking | 4 | | |
| Toda (Pricking sensation) | | Tandra (Drowsiness) | |
| No pricking sensation | 0 | No Tandra | 0 |
| Occasional pricking sensation | 1 | Mild Tandra | 1 |
| Mild pricking sensation | 2 | Moderate Tandra | 2 |
| Moderate pricking sensation | 3 | Severe Tandra | 3 |
| Severe pricking sensation | 4 | | |
| Stambha (Stiffness) | | Gaurav (Heaviness) | |
| No stiffness | 0 | No Gaurav | 0 |

| | | | |
|-----------------------------|---|------------------------|---|
| Sometimes for 5-10 min. | 1 | Mild <i>Gaurav</i> | 1 |
| Daily for 10-30 min. | 2 | Moderate <i>Gaurav</i> | 2 |
| Daily for 30-60 min. | 3 | Severe <i>Gaurav</i> | 3 |
| Daily more than 1 hour | 4 | | |
| Spandana (Twitching) | | | |
| No twitching | 0 | | |
| Sometimes for 5-10 min. | 1 | | |
| Daily for 10-30 min | 2 | | |
| Daily for 30-60 min | 3 | | |
| Daily for more than 1 hr | 4 | | |

Table 2: Showing Ayurvedic medicinal preparations used for the treatment

| S.No. | Dravya | Dose | Duration | Anupana |
|-------|------------------------------------|--------|--------------|-----------------|
| 1 | <i>Simhanadaguggul</i> | 250mg | 2-0-2 | <i>Koshnaja</i> |
| 2 | <i>Vishatindukvati</i> | 125mg | 2-0-2 | <i>Koshnaja</i> |
| 3 | <i>Sahacharadikashayghanavati</i> | 250mg | 1-1 | <i>Koshnaja</i> |
| 4 | <i>Prasaranyadikashayghanavati</i> | 250mg | 1-1 | <i>Koshnaja</i> |
| 5 | <i>Guggultiktakashay</i> | 20 ml | 20ml -0-20ml | <i>Koshnaja</i> |
| 6 | <i>Cap. Lumbatone</i> | 625 mg | 1-0-1 | <i>Koshnaja</i> |

Table 3: Showing Panchakarma done

| S.No | Panchakarma | Drug |
|------|---|---|
| 1 | <i>Snehana</i> | <i>Sahachartailam</i> |
| 2 | <i>Swedana</i> | <i>Bashpasweda</i> with <i>Dashmoolkwath</i> |
| 3 | <i>Yogbasti</i> | <i>Anuvasan</i> with <i>Sahachartailam</i> 120ml <i>Niruha</i> with <i>Erandamuladikwatha</i> 960 ml |
| 4 | <i>Panchatiktaksheer basti</i> with <i>Guggultiktaghrita</i> | <i>Panchatiktaksheer</i> (100ml) + <i>Guggultiktaghrit</i> (20ml) |

Table 4: Showing daily treatment plan

| Days | Treatment |
|-----------------|---|
| 1 st | Medicine <i>S.snehanaswedana Yog-A</i> |
| 2 nd | Medicine <i>S.snehanaswedana Yog-N</i> |
| 3 rd | Medicine <i>S.snehanaswedana Yog-A</i> |
| 4 th | Medicine <i>S.snehanaswedana Yog-N</i> |
| 5 th | Medicine <i>S.snehanaswedana Yog-A</i> |
| 6 th | Medicine <i>S.snehanaswedana Yog-N</i> |
| 7 th | Medicine <i>S.snehanaswedana Yog-A</i> |
| 8 th | Medicine <i>S.snehanaswedana Yog-A</i> |

| | |
|------------------|---|
| 9 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer Basti</i> |
| 10 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer basti</i> |
| 11 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer basti</i> |
| 12 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer basti</i> |
| 13 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer basti</i> |
| 14 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer basti</i> |
| 15 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer basti</i> |
| 16 th | Medicine <i>S.snehanaswedana</i> <i>Panchatiktaksheer basti</i> |

Table 5: Showing gradation for assessment- Objective criteria

| S.L.R. Test | | Walking distance | |
|-------------|---|--|---|
| > 90 | 0 | Patient can walk up to 1 km without pain | 0 |
| >71-90 | 1 | Patient can walk up to 500 meters without pain | 1 |
| >51-70 | 2 | Patient can walk up to 250 meters without pain | 2 |
| >31-50 | 3 | Patient feels pain on standing | 3 |
| Up to 30 | 4 | Patient cannot stand | 4 |

OBSERVATION AND RESULT

Table 6: Showing changes in gradations of signs and symptoms before and after treatment

| Symptoms | Before treatment | After treatment |
|------------------|------------------------|------------------------|
| <i>Ruka</i> | 4 | 2 |
| <i>Aruchi</i> | 1 | 0 |
| <i>Toda</i> | 3 | 1 |
| <i>Tandra</i> | 0 | 0 |
| <i>Stambha</i> | 4 | 1 |
| <i>Gaurav</i> | 2 | 1 |
| <i>Spandana</i> | 2 | 0 |
| S.L.R. Test | Lf side-4 Rt side-1 | Lf side-1 Rt side-0 |
| Walking distance | 3 | 1 |

DISCUSSION**Table 7: Showing actions of Ayurvedic drugs and Panchakarma procedure in management of Gridhrasi**

| Drug / Panchakarma | Action |
|-------------------------------------|--|
| <i>Simhanadaguggul</i> | <i>Vatshamaka, Anulomaka, Agnideepana</i> |
| <i>Vishatindukvati</i> | <i>Agnivardhak, Vatshamak, nerve stimulant</i> Brucine and Brucine N-oxide= analgesics and anti-inflammatory Acts on involuntary muscles- bowel movement regularised |
| <i>Sahacharadikashayghanavati</i> | <i>Vatshamak, Vedanashtapaka, Agnivardhak</i> <i>Shunthi- katishulhara (Vrundamadhav)</i> |
| <i>Prasaranyadikashayghanavati</i> | <i>Vataharkashay</i> <i>Nadisansthanbalya</i> <i>Vedanashamak</i> |
| <i>Guggultiktakashay</i> | <i>Vatahara, Vedanashamak, Agnideepan</i> |
| <i>Cap. Lumbatone</i> | <i>Vatashamak, Vedanashtapak, halts degeneration, halts nerve damage, restore mobility</i> |
| <i>Abhyanga with Sahachara tail</i> | <i>Vatahar, Kaphahara</i> |
| <i>Swedana</i> | <i>(Swedanarha) Shool, Sthambnashak</i> |
| <i>Yogbastikram</i> | <i>Niruha- vatahara, Anti-inflammatory, Analgesics</i> <i>Anuvasan- vatahara</i> <i>Apaan and vyanavayu</i> |
| <i>Panchatiktaksheerbasti</i> | <i>Asthigat vat dosh shaman, Vedanasthapan</i> Lactoferin & iron binding proteins in milk- boosts the growth and activity of osteoclast. |

Basti is the treatment which acts locally as well as systematically. *Basti* is the best treatment for *Vatajavyadhi* and the diseases of *Asthi, Sandhi and Marma*. In *Charakasamhita Chakrapani dattatika, Erandmooladiniruhabasti* is specially indicated in conditions like pain in low back, thigh and feet as well as for correction of vitiated *Vatadosha*. *Erandmooladiniruhabasti* acts mostly on *Vyan, Apana, Samanavayu, Pachaka pitta, Kledaka, Bodhaka* and *Shleshakakapha*.^[7]

Acharya Caraka has said that in diseases related to *Asthi*, we should give *Basti* using *Tiktarasatmakaushadhidravaya* along with *Ghritha* and *Ksheer*. *Guggulatiktaghrita* used in *Panchatiktaksheerbasti* specifically work on *Asthivikruti*. In *Arundattatika* he has said that the substance having *Singdha* and *Shoshana* (drying) properties and produces *Kharatwa* increases *Asthi*. But there is no drugs which have both *Snigdha* and *Shoshana* properties. *Soksheer, Ghritha* and *Tiktarasatmaka dravyas* are advised to use together in the form of *Ksheerbasti*.

Basti enters in to the *Pakvashaya* and goes till *Grahani*. *Pakvashaya* is main site of *Purishdharakala*. *Grahani* is the main site of *Pittadharakala*. According to *Dalhartika*, on *Su.ka.4/40 Purishdharakala* is *Asthidharakala* and *Pittadharakala* is

Majjadharakala. So *Basti* acts on *Vyadhis* of *Asthi* and *Majjadhatu*.^[8]

We can consider Spinal stenosis as *Sankocha*. *Vatadosha* is responsible for *Sankocha* and for vitiated *Vatadosha*, *Basti* is the best treatment. Disc bulge is due to degenerative changes which we can consider as a *Vataprakopjanya*. So for that *Basti* is the best treatment.

Medicines which were used along with *Panchakrama* treatment are having *Vatahara, Shothahara, Agnideepana, Rasayana* and *Asthidhatu Poshaka* properties which supported *Panchakarma* treatment for the correction of basic pathology.

CONCLUSION

Gridhrasi is one of the *Vatajvyadhi* which can be compared with sciatica in modern science having radiating pain to lumbar to lower limb, pricking sensation, stiffness etc. In this case study we have given *Erandmooladiniruhabasti, Shachara tail Anuvasanabasti, Panchatikta Ksheer Basti with Guggultiktaghrita*. After 16 days of treatment we have got up to 80% relief in signs and symptoms. So we can conclude that this *Panchakarma* treatment along with some Ayurvedic medicines can be effectively used in the management of *Gridhrasi*.

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