

**Case Study****ROLE OF KATI BASTI AND PATRA POTTALI SWEDA IN THE MANAGEMENT OF GRIDHRASI- A CASE STUDY****MD Haidar^{1*}, Md Tanzil Ansari²**¹PG Scholar, Department of Panchakarma, Institute of Post Graduate Ayurvedic Education & Research at Shyamadas Vaidya Shastra Pith, Kolkata West Bengal, India.²PG Scholar, Department of Kayachikitsa, Institute of Post Graduate Ayurvedic Education & Research at Shyamadas Vaidya Shastra Pith, Kolkata, West Bengal, India.**KEYWORDS:** *Gridhrasi*, Sciatica, *Kati basti*, *Patra pottali sveda*.**ABSTRACT**

The modern busy lifestyle of these days leads to several lifestyle disorders. Sciatica is one of the locomotory disorder occurs due to improper sitting posture, heavy weight lifting, stress injury and trauma to the spine. This disease became a great concern to the working people. Sciatica can be correlated with *Gridhrasi* in Ayurveda which is characterized as *Ruk* (pain), *Stambha* (stiffness), tingling sensation and numbness of lower limb. *Gridhrasi* is a type of *Vatavyadhi* mentioned in Ayurveda classics. Ayurveda through its advance treatment i.e. *Panchakarma* (Bio purification) eliminates the causative factors for disease. A male patient presented with signs and symptoms of *Gridhrasi* (sciatica) and MRI report suggesting of disc diffuse and disc protrusion and mild thecal compression. So In the present single case study patient was treated with *Patra pottali sveda* and *Kati basti* with some oral medicine. Both the therapies were effective in relieving symptoms like pain, stiffness, pricking sensation and numbness of leg.

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INTRODUCTION

The modern busy lifestyle and ill sitting posture for long time causes *Gridhrasi*. It is a type of *Vatavyadhi* mentioned in Ayurveda Classics. According to involved *Dosha*, *Gridhrasi* is of two types namely *Vataja* and *Vatakaphaja*. This name is given so because in this disease the patient walks like *Gridhra* (vulture). The main symptoms of *Gridhrasi* are *Sphikpurva Katiprishtha Urujanujanghapadam kramat ruk* (pain at hip region, pain radiates from hip to thigh, knee, calf muscle and foot posteriorly), *Stambha* (stiffness in leg), *Toda* (needling pain in the affected parts), *spandana* (twitching) *Tandra* (drowsiness), *Gaurava* (heaviness in body) and *Arochaka* (anorexia).^[1] These sign and symptoms is much similar to Sciatica. According to modern science, sciatica is characterized by a sharp shooting pain which starts in the back and radiates down towards one or both the legs and diminished sensations of lower limb. Movement of limb generally intensifies the suffering. Sciatic nerve is composed by primary

raimi of L4, L5, S1, S2 and S3 nerves. The symptoms of sciatica arises due to compression or trauma of the sciatic nerve or its roots, specially that resulting from ruptured intervertebral disc or osteoarthritis of lumbosacral vertebrae.^[2] Depending on how it is defined, less than 1% to 40% of people have sciatica at some point in time. Sciatica is most common between the ages of 40 and 59, and men are more frequently affected than women.^[3]

Sciatica hampers daily activities of the patient. In modern medical system no satisfactory treatment is available of sciatica. Patient depends on analgesics which has short action and marked side effects. *Panchakarma* is unique treatment of Ayurveda which eliminates the causative factors from the body and cures the disease. In the present study patient was treated with *Kati basti* and *Patrapinda Sweda* and showed marked relief in features like *Ruja* (pain), *Toda* (pricking sensation), *Sthambha* (stiffness) and tingling sensation.

Aims and Objectives

To evaluate the effect of *Kati basti* and *Patra pottali sveda* along with *Shamana aushadhi* in the management of *Gridhrasi* (sciatica).

MATERIALS AND METHODS

Method- For the present single case study the patient was selected randomly from the OPD of I.P.G.A.E. & R. at S.V.S.P. Hospital, Kolkata, India.

Materials**Case report**

A 29 years old male patient presented to the OPD with the complaints of low back pain radiating down to left leg associated with tingling sensation and numbness since 2 years. Patient was examined

Table 1: Demographic details

Name	XYZ
Age	29 years
Sex	Male
Religion	Hindu
Address	Sarat Bose Road, Kolkata
OPD	AYUR/OR2100003852
Occupation	Student
Marital status	Unmarried
Socioeconomic status	Middle class
Weight	60 kg
Height	5'7"

Table 2: Vitals examination

Blood pressure	120/60 mm Hg
Pulse	76 b/min
Respiratory rate	17/min

Table 3: Ashtavidha Pariksha (Eight fold examination)

<i>Nadi</i> (pulse)	76/min
<i>Mala</i> (stool)	<i>Samyak</i> (normal)
<i>Mutra</i> (urine)	<i>Samyak</i> (normal)
<i>Jeehva</i> (tongue)	Moist
<i>Shabda</i> (voice)	<i>Spashta</i> (clear)
<i>Sparsha</i> (skin)	<i>Anushanasheeta</i> (normal temperature)
<i>Drika</i> (Vision)	<i>Prakrita</i> (natural)
<i>Aakriti</i> (built)	<i>Madhyama</i> (medium)

Systemic examinations

CNS, CVS and Respiratory System- NAD

P/A- Soft, non tender and no signs of organomegaly.

thoroughly and planned for *Panchakarma* and admitted in *Panchakarma* IPD.

History of present illness

The patient was healthy before 2 years, then he started complaints of pain in lower back region and then gradually radiates to posterior aspect of thigh, knee, calf region, and foot of left leg since 2 years. He also had complaints of stiffness in lower back region and left leg since 1 year, tingling sensation in left leg, heaviness in both legs, and difficulty while walking since 2 years. Patient came to OPD after acute exacerbation of these symptoms. He had taken various analgesics but got temporary relief.

Locomotory examinations

Inspection: Limping gait

- Discomfort in walking and sitting for long duration
- No localized swelling
- No varicosities
- Reflexes are intact

Palpation: Tenderness 2 + at L4-L5 region

- Muscle tone-good
- Muscle power grade-Right extremities (upper and lower)-5/5
- Left extremities (upper and lower)-5/5
- Both SLR test and Lasagne’s sign were positive.

Investigation: MRI report of LS spine showed the followings important findings-

1. Disc desiccation at L2-L3 to L5-S1 levels.
2. Posterior central disc protrusion causing secondary spinal narrowing and mild thecal compression at L2-L3, L3-L4 and L5-S1 levels.
3. Mild diffuse disc bulge at L4-L5 level.

CBC: WNL

Assessment criteria

Table 4: Ruk (Pain)

SL	Symptoms	Grade
1.	No pain	0
2.	Occasional pain	1
3.	Mild pain but no difficulty in Walking	2
4.	Moderate pain and slightly difficulty in walking	3
5.	Severe pain with severe difficulty in walking	4

Table 5: Stambha (stiffnes)

SL	Symptoms	Grade
1.	No stiffness	0
2.	Sometimes for 5-10 min	1
3.	Daily for 10-30min	2
4.	Daily for 30-60 min	3
5.	Daily more than 60 min	4

Table 6: Toda (pricking sensation)

SL	Symptoms	Grade
1.	No pricking sensation	0
2.	Occasional pricking sensation	1
3.	Mild pricking sensation	2
4.	Moderate pricking sensation	3
5.	Severe pricking sensation	4

Table 7: SLR Test (Straight Leg Raising Test)

SL	Range of motion	Grade
1.	More than 70 degree	0
2.	51-70 degree	1
3.	30-50 degree	2
4.	Less than 30 degree	3

Treatment given**Table 8: Panchakarma treatment**

SL	Therapy	Ingredients	Duration
1.	<i>Kati Basti</i>	<i>Mahanarayana taila</i>	14 days for 30 minutes/day
2.	<i>Patra pottali sveda</i>	<ul style="list-style-type: none"> Leaves of <i>Nirgundi (Vitex negundo)</i>, <i>Eranda (Ricinus communis)</i>, <i>Chincha (Tamarindus indica)</i>, <i>Dhatuara (Datura metel)</i>, <i>Shigru (Moringa oleifera)</i>, <i>Arka (Calotropis procera)</i>. Grated coconut, Lemon, <i>Mahanarayana oil</i>, <i>Saindhava lavana</i> (rock salt) 	14 days for 30 minutes/day

Table 9: Oral Medications

SL	Drug	Dose	Duration	Anupana
1.	<i>Trayodashanga Guggulu</i>	2 pills (250 mg each) BDPC	14 days	Lukewarm water
2.	<i>Vatagajankusha Rasa</i>	1 pill (250 mg) BDPC	14 days	Lukewarm water

The total duration of the treatment was 14 days.

Procedure of Kati basti

Sufficient amount of water was added to black gram flour and prepared dough. From this dough a round pit of about 15-20 cm, thickness of 3 cm and height of 5 cm. Then patient was made lie in a comfortable prone position exposing the lumbo sacral area. *Mahanarayana* oil was made warm. After ensuring the tolerable temperature, oil was poured inside along the sides of the dough. The temperature of the oil was maintained at 40°C-48°C by replacing a small quantity after reheating on hot water bath. After removing the dough, the part was massaged with circular and linear strokes. The part was given fomentation with *Patra pottali sweda*.

Procedure of Patra pottali sveda

Fresh leaves was cleaned and chopped finely. At first 50 ml of *Mahanarayana* oil was added into frying pan, to this added grated coconut and sliced lemon and fry till it turns to light tinged brown. Then added chopped leaves one by one. Mixed thoroughly and fried together till coconut scrapings attained a brown colour. It was divided into two equal parts and made into 2 *Pottalis* (bolus). This *pottali* was heated with *Mahanarayana* oil in a hot iron pan. Then it was applied at lumbosacral region with mild pressure.

RESULTS

Symptoms	0 day	7 th day	14 th day
<i>Ruk</i> (pain)	3	2	1
<i>Stambha</i> (stiffness)	2	2	1
<i>Toda</i> (pricking sensation)	2	2	1
SLR Test	2	2	1

DISCUSSION

The main cause of the disease *Gridhrasi* (sciatica) is aggravation of *Vata dosha* along with *Kapha dosha*. The bulging and disc protrusion occurs due to *Chalaguna* (mobility) of aggravated *Vata* resulting in obstruction and further aggravation of *Vata*.^[4]

Patra pottali sveda and *Kati basti* both therapy performs the combined action of *Snehana* and *Svedana*.^[5]

Ushna guna of oil used in *Patra pottali sveda* and *Kati basti* pacifies *Sheeta guna* of *Vata dosha*. Leaves which are used as ingredients of *Patra pottali* all are having *Vatakaphahara* properties.

Mahanarayana Taila: Indication of *Mahanarayana taila* for *Vatavyadhi* is mentioned in *Vatavyadhi chikitsa* chapter of *Bhaisajya Ratnavali*.^[6]

Trayodashanga Guggulu: Indication of *Trayodashanga Guggulu* in *Gridhrasi* and in other neurological disorders is mentioned in *Vatavyadhi chikitsa* chapter of *Bhaisajya Ratnavali*.^[7]

Vatagajankusha Rasa: Indication of *Vatagajankusha Rasa* in *Gridhrasi* and in other *Vatika* disorders is mentioned in *Vatavyadhichikitsa* chapter of *Rasendra Sara Sangraha*.^[8]

CONCLUSION

From the present case study it can be concluded that *Gridhrasi* (Sciatica) can be effectively and safely treated by *Panchakarma* procedure *Kati basti* and *Patra pottali sweda* along with medicine. There was no adverse effects seen during treatment. As this is a single case study so for validation of efficacy there is a need to conduct a study on large population.

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