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Ayurvedic Management of Gridhrasi – Case Report

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Abstract

Introduction

The incidence rate of Gridhrasi (sciatica) is quite significant as more than three-quarters of the world's population are affected by the disease. It is characterized by the onset of Ruja (pain), Toda (pricking), and Stambha (stiffness), initially in Sphik (gluteal region) and then radiating distally to Kati-Prishtha (low back), Janu (knee), Jangha (thigh) till Pada (feet). The patients suffering from Gridhrasi have restricted movements due to painful limb, affecting the daily routine activities.

Aim

To assess the role of Raktamokshana (blood letting) done by cups in the patients suffering from Gridhrasi.

Materials and Methods

The study was conducted on 15 patients who had reported for the treatment of Gridhrasi at an Ayurvedic hospital Raipur (C.G.). Raktamokshana was done on Sphik, Kati, Jangha, Pada region with the help of 24 no. surgical blade and cups in four settings (0, 7th, 14th and 21st day). The sign and symptoms, namely Ruka, Toda, Stambha, and Spandana (fasiculation) were given scores depending on their severity. The patients were also assessed for straight-leg raise (SLR) test. Follow-up was done at an interval of 15 days for three times and the scores were noted down before and after treatment.

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Results

Marked reduction in severity of mean scores of Ruka, Stambha, Sakthiutkshepa Nigraha and walking time was seen in the patients after the use of Cupping therapy, which was statistically significant.

Conclusions

Cupping therapy is the simple and effective treatment (in adjunct to other treatment) for reducing Ruka, Toda, Stambha and Spandana in Gridhrasi.

Keywords- Cupping therapy, Gridhrasi, sciatica, straight-leg raise (SLR) test.

Introduction-

Life time incidence of low back pain is 50-70% and incidence of clinically significant sciatica due to lumbar disc prolapse occurs in 4-6% of the population.¹ Gridhrasi is such a Ruja Pradhan Vata Vyadhi. In Gridhrasi intense shooting pain characteristically radiates from Sphika (gluteal region) to Pada. On the basis of symptoms of Gridhrasi; it can be equated with the disease Sciatica in modern science.² Acharya Charaka quoted Gridhrasi as Vataja Nanatmaja Vyadhi in Maharogadhyaya (Ch.su.20/11) that indicates difficulty to cure it.³

The word Gridhrasi is derived from the Sanskrit word Gridhru that means the name of a birdie Vulture. The name given so is because the patient suffering from this disease walks like a Vulture. It implies the typical gait of the patient, slightly tilted at the affected side and affected leg in the flexed position and the another leg being extended.⁴ Gridhrasi has been discussed by all the Acharyas under the heading of Vatavyadhi. Symptoms of Gridhrasi is Spikapurva i.e., pain starts at hip and radiates to Kati (waist), Prista (back), Uru (thigh), Jaanu (knee joint), Jangha (calf muscle), Paada (foot) along with pain there is other complaints like Stambha (stiffness), Toda (pricking type pain), Muhur spandana (tingling sensation), and if there is association of Vatakapha Dosha than the symptoms like Tandra (lethargic), Gourava (heaviness) and Arochaka (anorexia) will be present.⁵

Sciatica is caused by impingement of the L4, L5, or S1 nerve (from a herniated disk) and manifests as unilateral neuropathic pain extending from the gluteal region down the posterolateral leg to the foot.⁶

In Ayurvedic views there are various method used as a line of treatment like Snehana, Swedana, Basti, Raktamokshana and Agnikarma.⁷ Acharya Sushruta has considered Siravedha, a type of Raktamokshana as Chikitsardha in Shaarira Sthana. In the present study, patients having symptoms of Gridhrasi were treated by Raktamokshana (Cupping Therapy) using a specific bell-like instrument. Raktamokshana gives spontaneous relief in the cardinal symptoms of Gridhrasi due to release of Impurities or vitiated Dosha along with Rakta Dhatu also Raktamokshana increases the blood circulation to that site and by that increased blood circulation the Ushna Guna of Rakta was increased, which may acts against the Sheet Guna of Vata Dosha. Hence Due to opposite Guna there will be Vata Shaman occur and ultimately will relief the symtoms.⁸

Material and Method

The study was conducted on the patients who reported in the outpatient department and inpatient department for the treatment of Gridhrasi (sciatica) at a Government Ayurvedic hospital Raipur (C.G.).

It is smooth and it can be placed easily on the affected body part. Other materials used for the procedure were spirit, betadine, sterilized gauze piece, 24no. surgical blade, gloves, Tray.

Total 15 patients of both sexes in the age group of 20-60 years were selected for the study for a period of 2 months. Patient was diagnosed mainly on the basis of sign and symptoms as mentioned in the texts of Ayurveda and modern medical sign like Ruka, Stambh ,Toda, Suptata Sakthiutkshepa Nigraha. On examination the restricted movement of leg. Stright leg raising test was noted . The laboratory investigation for blood was done before the treatment and was found within normal limits. Special investigation for HIV, HBsAg was done. The patients were adviced not to take any pain killers during the study period. A detailed history of the selected patients was taken, along with the signed informed consents.

Inclusion Criteria

Age group 20-60yrs, Sex both male and female, The patients who present the sign and symptoms of Gridhrasi like ruka, stambh, toda, suptata etc., Primary trauma like lifting heavy weight, Controlled Diabetes mellitus and Hypertensive patient.

Exclusion Criteria

Severe traumatic injury, fibrositis of sacral ligament, Severe anaemic patients, Malnourish patients (as per Age, Height, Weight), haemophilia, Patient with septicaemia, Age bellow 20yr and above 60yr, Pregnant women, Lactating mother, HIV, HbsAg infection, Patient with malignancy, Tuberculosis of spine , hip joint, Congenital spinal deformity.

Procedure-

1.Purvakarma-

Light or semisolid diet is preferable for before one day, do breakfast before one hour to the procedure, every visit sterile 11 number surgical pointed blade, sterile gloves, gauze, cotton, betadine solution, spirit, kidney tray, mask was used for aseptic precaution.



2.Pradhankarma -

Patient will be instructed to side lying position to projecting the target area (5 points from hip to heel). Targeted area will be shaved and cleaned thoroughly with antiseptic solution. Mild suction is made by disposable cups (1minute), maximum 12-15 small, longitudinal, superficial incision is made with 11 number surgical blade on the target area.

Strong suction is created on the same point. The skin lift upward and the blood from the incision are allowed to flow freely till it coagulates or required blood is evacuated. Pressure is released after 3-4 minutes. Blood is collected and the incision is cleaned properly with antiseptic solution and dressing with sterile bandage or gauze.





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3.Paschat karma -

No bath after procedure, no heavy diet after procedure, better to have bed rest for one day, keep hydration better for one day.

Assesment Criterias -

Assessment will be done on subjective criteria (Ruka, Stambha, Sakthi Utkshepa Nigraha, Walking Time) before, during, after treatment. The observation will be analyzed on the basis of assessment parameter (Subjective Parameter) Clinically & Scientifically and the result will be statistically analyzed for its significance with the consultation.

1.Ruka (pain on VAS SCALE)- As the sufferer himself expressed the pain in his own terms, so this was graded, starting from mild to severe at par with the Visual Analouge Scale (VAS).

0 - No Pain

1 - Mild Pain - Detected between 1-3 mark on scale (Pain that can easily be ignored)

2 - Modrate pain - Detected between 4-6 mark on scale (Pain that cannot be ignored)

3 - Severe pain - Detected between 7-10 mark on scale (Pain that cannot be ignored, interferes with daily routine)

2. Stambha (Stiffness)

- 0 No Stiffness
- 1 Sometimes for 5 min-1hours
- **2** Daily for 1-2 hours
- **3** Daily for more than 2 hours

3.Sakthi Utkshepa Nigraha (SLR Test)

- **0** Pain at Above 70° of hip flexion
- **1** Pain at 51° -70° of hip flexion
- 2 Pain at 31°-50° of hip flexion
- **3** Pain at Below 30° of hip flexion

Discussion

Referring to previous study in Gridhrasi the main affected area was Sphik, i.e., gluteal region and Kati, i.e., lumbar spine and there is often a history of trauma as twisting of the spine, lifting heavy objects, or exposure to cold; similar findings were also seen in the present study.

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Acharya Charaka has described Siravyadha, Basti Karma and Agnikarma in the management of Gridhrasi. Acharya Sushruta has mentioned that diseases, which are not relieved by Snehana, Lepanadi therapeutic measures can be treated with Siravyadha as an emergency management. Siravyadha is also accepted as half of the therapeutic measure in Shalya Tantra like Basti in Kayachikitsa. In Panchakarma Chikitsa, the vitiated. Doshas are purified whereas in Siravyadha vitiated Rakta Dhatu is removed.

The susceptibility of Rakta towards impurity is so versatile that the classics were compelled to agree upon Rakta as fourth Dosha. Dushita (vitiated) Rakta from the related Sira (veins) should be let out to protect the health or to remove the disease. The symptoms and Samyaka Siravedha are Laghavam (body and painful area) and Vedanashanti (pain reduction), bleeding stop itself, it means the pain arising from a disease condition get subsided followed by decrease in the symptoms of the disease so Siravedha can be used in pain predominant diseases.

Result

After 2nd sitting patient got 20% relief in Ruka, Stambha, Sakthiutkshepa Nigraha. S.L.R was increased up to 40°. After 3rd sitting she got 40% relief in above symptoms. S.L.R. raised up to 55°. After 4th sitting she got 70% relief in above symptoms S.L.R. raised up to 70°. Patient has no pain during walking. Patient can perform their daily routine work without pain and comfortably.

Conclusions

After using Cupping therapy as a treatment modality in patients with Gridhrasi, it can be concluded that the use of cups imparts measurable reduction in the intensity of Ruja, Toda, Spandana, and Stambha which are the major symptoms of Gridhrasi. Cupping therapy is the simple and effective treatment (in adjunct to other treatment) for Gridhrasi.

In previous studies, researchers used Siravyadha to let out Rakta Dhatu along with vitiated Doshas and reported that Siravyadha gives spontaneous relief in the cardinal symptoms of Gridhrasi due to release of impurities or Doshas from the affected area. Similarly in the present study vitiated Doshas along with Rakta Dhatu was let out by pricking with needle on affected area, the vacuum created by the Ghatiyantra helps the vitiated blood to ooze out. Which gives spontaneous relief from symptoms of Gridhrasi due to release of release of Doshas with the blood from the body.

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References-

1.A Comparative Clinical study of Siravedh and Agnikarma in management of Gridhrasi (Sciatica) <Pubmed.ncbi.nlm.nih.gov>

2.A Comparative clinical study of Siravedha and Agnikarma in management of sciatica <www.ncbi.nlm.nih.gov>

3. Shastri Kashinath and Chaturvedi Gorakhnath, Charaka Samhita, vol-1, Sutra sthana, 20 Chapter, 11th Shloka, chaukhambha bharti academy, Varanasi, Reprint-2018, page no. 399

4. Bhattacharya Shri Taranath Tarkavachaspati, Vachaspatyam Part -4, Published by Chaukhambha Sanskrit Sansthan Vranasi, Reprint Edition 2002, page no.-2631.

5. Shastri Kashinath and Chaturvedi Gorakhnath, Charaka Samhita Vol-2, Chikitsa sthana 28/56, Published by Chaukhambha Bharti Academy Varanasi, Reprint Edition 2018, page no. 787.

6. Harrison's Principles of Internal Medicine - 18th Edition, Edited by Longo, Fauci, Kasper, Hauser, The McGraw-Hill Medical Publication, page. no. -139.

7. Shastri Kashinath and Chaturvedi Gorakhnath, Charaka Samhita, Vol-2, Chikitsa sthana 28th chapter,
101 shloka, chaukhambha bharti academy, Varanasi Reprint-2018, page no. 795

8. Role of Raktamokshana by Gatiyantra in Treatment of Gridhrasi (Sciatica) <www.ncbi.nlm.nih.gov>