

A Clinical Study to Evaluate the Combined Efficacy of Virechanottara Gokshuradi Yoga Basti in Gridhrasi with Special Reference to Sciatica

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ABSTRACT

BACKGROUND

Gridhrasi is one of the Vatavyadhi and it is the commonest disorder found in clinical practice. Symptoms of Gridhrasi simulate that of Sciatica. Shodhana and other Panchakarma procedures give significant results in relieving the symptoms.

Objectives

To evaluate the combined efficacy of Virechanottara Gokshuradi Yoga Basti in Gridhrasi with special reference to Sciatica.

Methodology

- **Study Design:** An observational clinical study.
- **Intervention:** 30 patients of Sciatica were randomly selected based on the signs and symptoms. Patients were assigned into a single group and subjected to Virechanottara Gokshuradi Yoga Basti. Patients received pachana deepana with trikatu choorna, snehapaana with panchatikta guggulu ghrita, viechana with hingutriguna taila, basti with gokshuradi taila and gokshuradi kashaya in yoga basti pattern for duration of 37-39 days. Data was collected before intervention i.e., 0th day, after Basti karma(after treatment) and on 9th day of basti(after follow-up)
- Results were statistically analysed before treatment, after treatment and after follow-up by using descriptive and inferential statistics, 't' test –paired.

KEYWORDS: Gridhrasi; Sciatica; Hingutriguna taila, gokshuradi taila

Results

- Statistical results on parameters showed highly significant result on symptoms of RUK, TODA, STHAMBA, GAURAVA, ARUCHI, SLR, Lasegues sign, Bragards sign, Range of movements, Greenough and Fraser Scoring Method with 'p' value of 0.001 and significant result on symptom of TANDRA with 'p' value 0.056.
- The Virechanottara Gokshuradi Yoga Basti is found to be effective and safe in the management of Gridhrasi.

INTRODUCTION

Gridhrasi is Vataja Vyadhi. It is of Two types – Kevala Vataja, Vatakaphaja. The Pratyatma Lakshanas of Gridhrasi are Ruk, Sthamba, Toda and Spandana starting from Sphik and radiating to Kati, Prishtha, Uru, Janu, Jangha, and Pada and Sakthikshepa Nigraha. In Kaphanubandha Tandra, Gaurava and Arochaka are also present. Many of the clinical features of Gridhrasi resemble to that of Sciatica.

Sciatica is a serious medical condition which hampers day to day activities. It is Caused by the injury or

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compression on the sciatic nerve. In sciatica constant aching pain, burning sensation, numbness, tingling sensation, is felt in the lumbar region and may radiate to the buttock, Onset may be sudden or gradual. The life time incidence of low back pain is 50%-70% with the incidence of Sciatica being more than 40%.

Annual Incidence of an episode of Sciatica ranges from 1 % to 6 %. Very common in age group of 20 to 60 years. Males experience Sciatica up to three times more than females

In Gridhrasi Asthi dhatu involvement is seen predominantly, Panchakarma has been said to be the first line of treatment in Asthyashrita Vyadhis¹. Bhavapraksha Specially mentioned Virechana Followed by Basti in Gridhrasi². Virechana is line of treatment in Kaphavaruta Vata³ as Mala, Pitta, Kapha, Vayu Antiki in Virechana⁴ acts as Samprapti Vighatanavat Chikitsa. It is Pradhana Aushadi in Mamsagata, Sandhigata, Majjagata Doshas⁵. Basti is also effective in Lakshanas like Shoola in sphik, Kati, Prishta, uru, Janu, Jangha, pada and Gauravata⁶. Hingu Triguna Taila used for Virechana and Gokshuradi Qwatha used for yoga basti are vata kapha shamaka, Shoola Hara, Shotha Hara, both containing Eranda and Rasona are the drugs specifically indicated in Gridhrasi.

MATERIALS AND METHODS

The following materials were used in clinical trial

1. Trikatu Choorna⁷
2. Panchatiktha Guggulu Ghrita⁸
3. Nirgundi Taila⁹
4. Hingutriguna Taila¹⁰
5. Gokshuradi Niruha¹¹
6. Gokshuradi Taila

A. Diagnostic Criteria:

A special proforma incorporating all points of History taking and Physical examinations mentioned in

RESULTS

Effect of therapy on different parameters such as Ruk, Toda, Sthamba, Tandra, Gaurava, Aruchi, Staright Leg Raising test, Lasegue's sign, Bragards sign, NPRS, Range of movements are shown below.

Totally 30 subjects were registered for clinical trial. The inclusion criteria was clinical features of Sciatica (Gridhrasi) Age group between 20 – 60 of either sex and duration was more than 2 months.

Effect of procedures on RUK

Table No. 1

| Ruk (grade) | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|-------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| +4 | 25 | 83.3% | 0 | 0.00 | 0 | 0.00 |
| +3 | 5 | 16.7% | 4 | 13.3 | 2 | 6.7 |
| +2 | 0 | 0.00 | 16 | 53.3 | 4 | 13.3 |
| +1 | 0 | 0.00 | 10 | 33.3 | 14 | 46.7 |
| 0 | 0 | 0.00 | 0 | 0.00 | 10 | 33.3 |

Ayurveda as well as Modern Science will be prepared.

Diagnosis will be made on the basis of the classical signs and symptoms as mentioned in the texts.

1. Patients who present with Ruk, Toda, Sthamba and Spandana in Spik, Kati, Prushta, Uru, Janu, Jangha, Pada and Sakthnaaha Kshepana Nigraha.
2. Cardinal signs and symptoms of sciatica like aching pain, numbness, tingling sensation along the course of Sciatic nerve.
3. Straight Leg Raise Test(SLR)-Active and Passive
4. Lasegue Test
5. Bragard Sign
6. Range of Movements
7. Greenough and Fraser Scring Method

B. Inclusion Criteria

- Patients with Lakshanas of Gridhrasi like Ruk(pain), Toda (pricking pain), Sthamba (stiffness), Spandana (frequent tingling) over Sphik, Kati, Prushta, Uru, Janu, Jangha and Pada.
- Patients with signs and symptoms of sciatica.
- Subjects in the age group of 20 -60 years. Subjects irrespective of Gender.
- Subjects who are Yogya for Virechana karma and Basti karma

C. Exclusion Criteria:

- Patients with history of trauma causing fracture.
- Congenital deformities of the spine.
- Infective and Neoplastic conditions of the spine.
- Subjects with uncontrolled systemic disorders which interfere with the course of the treatment.
- Pregnant Women and Lactating Mother.
- Subjects with HIV & HBs Ag positive.
- RUK

Effect of procedures on TODA**Table No. 2**

| Toda | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| +4 | 23 | 76.7 | 0 | 0.00 | 0 | 0.00 |
| +3 | 6 | 20.0 | 5 | 16.7 | 2 | 6.7 |
| +2 | 1 | 3.30 | 17 | 56.7 | 4 | 13.3 |
| +1 | 0 | 0.00 | 8 | 26.7 | 16 | 53.3 |
| 0 | 0 | 0.00 | 0 | 0.00 | 8 | 26.7 |

Effect of procedures on STHAMBA**Table No. 3**

| Sthamba | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|---------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| +4 | 15 | 50.0 | 0 | 0.00 | 0 | 0.00 |
| +3 | 13 | 43.3 | 3 | 10.0 | 2 | 6.7 |
| +2 | 2 | 6.7 | 12 | 40.0 | 3 | 10 |
| +1 | 0 | 0.00 | 14 | 46.7 | 13 | 43.3 |
| 0 | 0 | 0.00 | 1 | 3.3 | 12 | 40 |

Effect of procedures on TANDRA**Table No. 4**

| Tandra | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|--------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| +4 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +3 | 2 | 6.7 | 0 | 0.00 | 0 | 0.00 |
| +2 | 2 | 6.7 | 2 | 6.7 | 0 | 0.00 |
| +1 | 0 | 0.00 | 2 | 6.7 | 4 | 13.3 |
| 0 | 26 | 86.7 | 26 | 86.7 | 26 | 86.7 |

Effect of procedures on GAURAVA:**Table No.5**

| Gaurava | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|---------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| +4 | 5 | 16.7 | 0 | 0.00 | 0 | 0.00 |
| +3 | 5 | 16.7 | 3 | 10.0 | 0 | 0.00 |
| +2 | 3 | 10.0 | 8 | 26.7 | 2 | 6.7 |
| +1 | 1 | 3.3 | 3 | 10.0 | 10 | 33.3 |
| 0 | 16 | 53.3 | 16 | 53.3 | 18 | 60 |

Effect of procedures on ARUCHI:**Table No. 6**

| Aruchi | No. of patients (BT) | percentile (BT) | No. of patients (AT) | Percentile (AT) | No. of patients (AF) | Percentile (AF) |
|--------|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +3 | 3 | 10.0 | 1 | 3.3 | 0 | 0.00 |
| +2 | 7 | 23.3 | 3 | 10.0 | 2 | 6.7 |
| +1 | 2 | 6.7 | 7 | 23.3 | 5 | 16.7 |
| 0 | 18 | 60 | 19 | 63.3 | 23 | 76.7 |

Effect of procedures on STRAIGHT LEG RAISING TEST (SLR):

Table No. 7

| SLR Rt Leg | No. of patients (BT) | percentile (BT) | No. of patients (AT) | Percentile (AT) | No. of patients (AF) | Percentile (AF) |
|------------|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 16 | 53.33 | 2 | 6.66 | 1 | 3.33 |
| +3 | 8 | 26.66 | 2 | 6.66 | 1 | 3.33 |
| +2 | 4 | 13.33 | 7 | 23.33 | 4 | 13.33 |
| +1 | 1 | 3.33 | 10 | 33.33 | 7 | 23.33 |
| 0 | 1 | 3.33 | 9 | 30 | 17 | 56.66 |

| SLR Lt Leg | No. of patients (BT) | percentile (BT) | No. of patients (AT) | Percentile (AT) | No. of patients (AF) | Percentile (AF) |
|------------|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 15 | 50 | 1 | 3.33 | 1 | 3.33 |
| +3 | 10 | 33.33 | 3 | 10 | 2 | 6.66 |
| +2 | 4 | 13.33 | 9 | 30 | 3 | 10 |
| +1 | 0 | 0.00 | 12 | 40 | 6 | 20 |
| 0 | 1 | 3.33 | 5 | 16.66 | 18 | 60 |

| SLR Both Legs | No. of patients (BT) | percentile (BT) | No. of patients (AT) | percentile (AT) | No. of patients (AF) | Percentile (AF) |
|---------------|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 18 | 60 | 1 | 3.33 | 1 | 3.33 |
| +3 | 9 | 30 | 6 | 20 | 1 | 3.33 |
| +2 | 3 | 10 | 7 | 23.33 | 7 | 23.33 |
| +1 | 0 | 0.00 | 12 | 40 | 5 | 16.66 |
| 0 | 0 | 0.00 | 4 | 13.33 | 16 | 53.33 |

Effect of procedures on lasegue's test:

Table No. 8

| | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|---------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Lasegues test | 22 | 73.33% | 10 | 33.33% | 3 | 10% |

Effect of procedures on BRAGARD'S TEST:

Table No. 9

| | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|---------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Bragards Test | 21 | 70.00% | 11 | 36.66% | 7 | 23.33% |

Effect of procedures on NUMERICAL PAIN RATING SCALE(NPRS):

Table No. 10

| NPRS Grades | No. of patients (BT) | Mean percentile (BT) | No. of patients (AT) | Mean percentile (AT) | No. of patients (AF) | Mean percentile (AF) |
|-------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 3 | 30 | 0.00 | 2 | 6.66 | 0 | 0.00 |
| 2 | 0 | 0.00 | 14 | 46.66 | 2 | 6.66 |
| 1 | 0 | 0.00 | 14 | 46.66 | 28 | 93.33 |
| 0 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |

Effect of procedures on RANGE OF MOVEMENTS:**Table No. 11**

| FF | No. of patients (BT) | percentile (BT) | No. of patients (AT) | percentile (AT) | No. of patients (AF) | Percentile (AF) |
|----|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +3 | 7 | 23.33 | 1 | 3.33 | 0 | 0.00 |
| +2 | 10 | 33.33 | 9 | 30 | 9 | 30 |
| +1 | 13 | 43.33 | 20 | 66.67 | 21 | 70 |
| 0 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |

| RLF | No. of patients (BT) | percentile (BT) | No. of patients (AT) | percentile (AT) | No. of patients (AF) | Percentile (AF) |
|-----|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +3 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +2 | 7 | 23.33 | 3 | 10 | 0 | 0.00 |
| +1 | 13 | 43.33 | 10 | 33.33 | 8 | 73.33 |
| 0 | 10 | 33.33 | 17 | 56.67 | 22 | 26.67 |

| LLF | No. of patients (BT) | percentile (BT) | No. of patients (AT) | percentile (AT) | No. of patients (AF) | Percentile (AF) |
|-----|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +3 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +2 | 7 | 23.33 | 2 | 6.66 | 1 | 3.33 |
| +1 | 8 | 26.67 | 6 | 20 | 6 | 20 |
| 0 | 15 | 50 | 22 | 73.33 | 23 | 76.67 |

| E | No. of patients (BT) | percentile (BT) | No. of patients (AT) | percentile (AT) | No. of patients (AF) | Percentile (AF) |
|----|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +3 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +2 | 8 | 26.67 | 3 | 10 | 1 | 3.3 |
| +1 | 18 | 60 | 14 | 46.66 | 11 | 36.67 |
| 0 | 4 | 13.33 | 13 | 43.33 | 18 | 3.33 |

| R | No. of patients (BT) | percentile (BT) | No. of patients (AT) | percentile (AT) | No. of patients (AF) | Percentile (AF) |
|----|----------------------|-----------------|----------------------|-----------------|----------------------|-----------------|
| +4 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +3 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 |
| +2 | 16 | 53.33 | 12 | 40 | 5 | 16.66 |
| +1 | 9 | 30 | 11 | 36.66 | 16 | 53.34 |
| 0 | 5 | 16.66 | 7 | 23.33 | 9 | 30 |

Effect of procedures on Grenough and Fraser scoring method:**Table No. 12**

| | BT | AT | AF |
|--------------------------|--------|--------|--------|
| Mean Percentile of Score | 54.07% | 63.00% | 68.93% |

Effect of Therapy (Subjective Parameters) using Paired 't' Test.**Before Treatment to After Treatment****Table No. 13**

| Subjective parameter | BT | AT | mean difference | S.D | S.E | 't' | Significance | P value |
|----------------------|-------|------|-----------------|-------|-------|--------|--------------|---------|
| Ruk | 3.83 | 1.80 | 2.033 | 0.669 | 0.122 | 16.655 | 0.000 | <0.001 |
| Toda | 3.73 | 1.90 | 1.833 | 0.791 | 0.145 | 12.687 | 0.000 | <0.001 |
| Sthamba | 3.43 | 1.57 | 1.867 | 0.730 | 0.133 | 14.00 | 0.000 | <0.001 |
| Tandra | 0.33 | 0.33 | 3.100 | 0.885 | 0.162 | 19.191 | 0.000 | <0.001 |
| Gaurava | 01.40 | 0.93 | 0.467 | 0.860 | 0.157 | 2.971 | 0.006 | <0.001 |
| Aruchi | 0.83 | 0.53 | 0.300 | 0.651 | 0.119 | 2.523 | 0.017 | <0.001 |

**Effect of Therapy (Subjective Parameters) using Paired 't' Test.
Before Treatment to After Follow-Up**

Table No. 14

| Subjective parameters | BT | AF | Mean difference | S.D | S.E | 't' | Significance | P value |
|-----------------------|------|------|-----------------|-------|-------|--------|--------------|---------|
| Ruk | 3.83 | 0.93 | 2.900 | 0.845 | 0.154 | 18.801 | 0.000 | <0.001 |
| Toda | 3.73 | 1.00 | 2.733 | 0.828 | 0.151 | 18.088 | 0.000 | <0.001 |
| Sthamba | 3.43 | 0.80 | 2.6333 | 0.890 | 0.162 | 16.208 | 0.000 | <0.001 |
| Tandra | 0.33 | 0.13 | 0.200 | 0.551 | 0.101 | 1.989 | 0.056 | <0.001 |
| Gaurava | 1.40 | 0.47 | 0.933 | 1.258 | 0.230 | 4.065 | 0.000 | <0.001 |
| Aruchi | 0.83 | 0.30 | 0.533 | 0.860 | 0.157 | 3.395 | 0.002 | <0.001 |

**Effect of Therapy (Objective Parameters) using Paired 't' Test.
Before Treatment to After Treatment**

Table No. 15

| Objective parameters | BT | AT | Mean difference | S.D | S.E | 't' | Significance | P value |
|------------------------------------|-------|-------|-----------------|-------|-------|--------|--------------|---------|
| SLR-Rt Leg | 3.23 | 1.27 | 1.967 | 1.098 | 0.200 | 9.810 | 0.000 | <0.001 |
| SLR-Lt Leg | 3.27 | 1.43 | 1.833 | 1.053 | 0.192 | 9.353 | 0.000 | <0.001 |
| SLR-Both Legs | 3.50 | 1.60 | 1.900 | 0.885 | 0.162 | 11.763 | 0.000 | <0.001 |
| Lasegues test | 0.27 | 0.67 | 0.400 | 0.498 | 0.91 | 4.397 | 0.000 | <0.001 |
| Bragards test | 0.30 | 0.63 | 0.333 | 0.479 | 0.088 | 3.808 | 0.001 | <0.001 |
| NPRS | 3.00 | 1.60 | 1.400 | 0.621 | 0.113 | 12.339 | 0.000 | <0.001 |
| ROM-FF | 1.80 | 1.37 | 0.433 | 0.504 | 0.092 | 4.709 | 0.000 | <0.001 |
| ROM-RLF | 0.90 | 0.53 | 0.367 | 0.556 | 0.102 | 3.612 | 0.001 | <0.001 |
| ROM-LLF | 0.73 | 0.33 | 0.400 | 0.621 | 0.113 | 3.525 | 0.001 | <0.001 |
| ROM-E | 1.13 | 0.67 | 0.467 | 0.507 | 0.093 | 5.037 | 0.000 | <0.001 |
| ROM-R | 1.37 | 1.17 | 0.200 | 0.407 | 0.074 | 2.693 | 0.012 | >0.001 |
| Greenough and Fraser Scorer Metod. | 54.07 | 63.00 | 8.333 | 3.194 | 0.583 | 15.319 | 0.000 | <0.001 |

**Effect of Therapy (Objective Parameters) using Paired 't' Test.
Before Treatment to After Follow-Up**

Table No. 16

| Objective parameters | BT | AF | Mean difference | S.D | S.E | 't' | Significance | P value |
|-----------------------------------|-------|-------|-----------------|-------|-------|--------|--------------|---------|
| SLR-Rt Leg | 3.23 | 0.73 | 2.500 | 1.075 | 0.196 | 12.740 | 0.000 | <0.001 |
| SLR-Lt Leg | 3.27 | 0.73 | 2.533 | 1.167 | 0.213 | 11.894 | 0.000 | <0.001 |
| SLR-Both Legs | 3.50 | 0.87 | 2.633 | 1.033 | 0.189 | 13.958 | 0.000 | <0.001 |
| Lasegues test | 0.27 | 0.87 | 0.600 | 0.498 | 0.91 | 6.595 | 0.000 | <0.001 |
| Bragards test | 0.30 | 0.77 | 0.467 | 0.507 | 0.093 | 5.037 | 0.000 | <0.001 |
| NPRS | 3.00 | 1.07 | 1.933 | 0.254 | 0.046 | 41.738 | 0.000 | <0.001 |
| ROM-FF | 1.80 | 1.30 | 0.500 | 0.572 | 0.104 | 4.785 | 0.000 | <0.001 |
| ROM-RLF | 0.90 | 0.27 | 0.633 | 0.615 | 0.112 | 5.641 | 0.000 | <0.001 |
| ROM-LLF | 0.73 | 0.27 | 0.467 | 0.730 | 0.133 | 3.500 | 0.002 | >0.001 |
| ROM-E | 1.13 | 0.43 | 0.700 | 0.535 | 0.098 | 7.167 | 0.000 | <0.001 |
| ROM-R | 1.37 | 0.87 | 0.500 | 0.572 | 0.104 | 4.785 | 0.000 | <0.001 |
| Greenough and Fraser Scorer Metod | 54.07 | 68.93 | 14.867 | 2.849 | 0.520 | 28.576 | 0.000 | <0.001 |

DISCUSSION

Ruk is the lakshana of vata dosha, either due to avaranajanya or dhatu kshaya janya. Karma Vishesha- virechana does avarana harana, rectifies dhatwagni mandya for the proper absorption of basti dravyas. Basti acts as Shulaghna, bala vrudhikara.

Toda is a type of pricking pain due to nerve root irritation and stretch in the nerve during movements. Karma Vishesha- Virechana does ashaya laghuta and Tridosha Nirharana. Basti- works on vata, pitta, Kapha and Raktha Doshas there by nourishing the Snayu and Khandaras, relieve the pain due to stretch

and relieves the compression decreasing the nerve root irritation.

Swedana by its Ushna and Sukshma property relieves Sthamba. Virechana dravyas having ushna, Sukshma, Vyavayi, Vikasi guna possesses the functions like, pachana, swedana, vilayana leads to Vatakapha Shamana there by relieves Sthamba. Basti is sthambahara, Sankochahara.

Tandra is outcome of the dushita vata kapha. Dravyas used in Virechana and basti are ushana veerya, which balances vata and on contrary does kapha Shamana which inturn causes shareera, shiro and indriya laghuta.

Virechana and basti does Shareera laghuta, agnideepti, srotoshodhana, ashayashodhana. Rasna, Vacha, saindhava, madhu with ushna, tikshna properties relieves Gaurava.

Virechana and Basti does agnideepana, prakruti Sthapana and improves ruchi by ama nirharana, srotovishodhana.

When Sthamba, Ruja, Toda, Gaurava are treated, limbs can be moved in all their range of movements without any pain and difficulty. Pain and numbness experienced on flexed hip and gradually extending the knee is relieved by Protecting the Sciatic Nerve from compression and Irritation.

HINGU TRIGUNA TAILA:

Hingu, saindhava, lashuna, eranda taila used in the preparation of taila according to classical methods as explained by Acharya vagbhata in the context of gulma chikitsa has the unique property of deepana, paachana, shoolaara, tridoshaghna, vrushya, krimikushtaghna and Amavatahara with Ushna Virya and Katu Vipaka, Eranda Taila is the base of this Taila having Madhura Vipaka, Snigdha Tikshna Sukshma Guna, it disintegrates the Ama by entering into deep tissues and purifies the passages, cures Vata and particularly purges the bowels, expels the disease causing impurities down the gut, cures low back pain. it possesses various healing properties, relieves joint pains, inflammation, swelling, lymphatic circulation, stimulates liver and gall bladder reduces toxins. Taila was prepared at our Rasa Shastra and Baishajya Kalpana Pharmacy, TGAMC Ballari.

Samprapti vighatana (dosha pratyani) – all the ingredients in this taila have katu and lavana as pradhana rasa, madhura anurasa. all the drugs have ushna veerya which pacifies both vata and kapha doshas. Hingu and Lashuna has Katu Vipaka which pacifies kapha dosha and on contrary lavana and eranda taila has Madhura Vipaka which pacifies Vata

dosha. The drugs have Snigdha, Tikshna, Sukshma, Laghu, Vyavayi and vikasi guna. Which helps to pierce the minute body channels and enters into the circulation there by causing Deepana, Amapaachana, Vatanulomana and Samshodhana which breaks the Margavarodha janya Vata Prakopa Samprapti.

Eranda taila nourishes the Dhatus by its Bala Varadhana Karma which RESULTS IN Vighatana of Dhatu kshaya janya vataprakopa samprapti. All these factors correct the Vata-Kapha Dushti. Regulate the functions of Samana Vata and Apana Vata.

GOKSHURDI TAILA

GOKSHURA-is Brihmana, Tridoshashamaka, Agnikrit, Shulaghna, Deepana, Balakrit, Pushtikrit, Sheetala, Basti Vataghna, Basti shodhaka, Anilahara.

PUNARNAVA- Shophaghna, Kaphavata hara, Deepana, Ruchya.

ERANDA MOOLA-it is Marga Shodhaka, Vatahara, Bastishoolahara, Shoolaghna, Shothaghna.

VACHA- Kaphavatahara, Vahnikrut, Rakshoghna, Jeevani.

RASNA- Kaphavatashamaka, Vayasthapaka, Amapachaka, Shophahara, Shoolahara, Anuvasanopaga.

Punarnava, Eranda, Rasna, Vacha have Katu, Tikta rasa, Katu Vipaka and Ushna Veerya acts on Kapha Dosha. Gokshura, Punarnava, Eranda have Madhura Rasa, Madhura Vipaka which acts on Vata Dosha. Gokshura is Sheeta Veerya, pacifies Vata.

Eranda is having snigdha and tikshana guna. Punarnava, Rasana, Vacha are having ushna guna pacifies both kapha and vata. Ushna, Tikshna, Ruksha properties of these drugs help in Amapachana, Kapha Shoshana and Sroto Vishodhana. Madhu added in Basti scrapes out the Dosha which are producing Upalepa in the Srotas by Lekhana karma. Saindhava Lavana with its Sukshma Guna carries the drug to minute parts and destroys Avarodha. Kalka helps in Dosha Sravana.

Conclusion:

The following conclusion are drawn after logical interpretation of the results obtained in this clinical study, which are listed below.

- Management of Gridhrasi (Sciatica) with Virechana followed-by Niruha Basti showed good result in the subjective and objective parameters of the present study.
- Amapachana followed by Snehapana, Saarvanga abhyanga, Virechana followed by Gokshuradi Yoga Basti, the sequence of

Panchakarma procedures played excellent role in relief of the major symptoms of Gridhrasi.

- Ruk, Toda, Sthamba, Gaurava, Aruchi, SLR, Lasegue's Test, Bragard's Test, Range of Movements, Greenough and Fraser Scorer method showed statistically highly significant effect in the present study. Tandra Showed Significant result.
- All the formulations used are effective and safe for the patients. Koshta Shodhana followed by Bast is more effective IN treating the disease from the root.
- The overall effect of each therapy was assessed at the end of completion of 36-39 days of study duration.
- In a group of 30,0(0%) patients were unchanged, 2(6.66%)gained mild response, 4(13.33%) gained moderate response, 24(80%) patients marked response, no patient remains unchanged at the end of treatment.
- The null hypothesis is rejected and an alternate hypothesis(h1) "Virechanottara Gokshuradi yoga bast is effective in gridhrasi" is accepted
- The present study proved remarkable results.

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