

Effect of Kshara Basti in the Management of Gridhrasi: A Case Study

Dr. Akshata Hurali D¹, Dr. Suresh N Hakkandi², Dr. Manjunath Akki³, Dr. Guru Mahantesh T M⁴

¹PG Scholar, ²Professor and HOD, ³Professor, ⁴Associate Professor,
^{1,2,3,4}Department of Panchakarma, SJG Ayurvedic Medical College, Koppal, Karnataka, India

ABSTRACT

Background: In the human body the lumbar spine is the site of most conserving orthopaedic problem for the world's industrialized countries. The chances of occurrence is expected to increase in coming years due to the increasing tendency for Computerization, hectic routines resulting in postural abnormalities, increasing body weight, mental stress, unwholesome diet intake etc. all of which may play role as predisposing factors for the occurrence of *Gridhrasi*. *Gridhrasi* is one of the most common disorders of *Vata*, which closely resembles with sciatica, which is characterized by pain or discomfort associated with sciatic nerve. Contemporary medicine has limitations giving short-term relief in pain or surgical intervention with side effect. In classics, there are various methods for the treatment of *Gridhrasi* are mentioned, some of which are effective, simple, safe and affordable for common patients. *Bastikarma* one of the important principles for *Gridhrasi* which is capable of performing all sorts of actions like *Shodhana*, *Shamana*, *Brimhana* by virtue of the specific types and drugs utilized in it. Since it is *VataKapha* Vikara and associated with *Aavarana* is the strongest factor. Considering the *Vata* as *Pradhana dosha* along with *Kapha*, *Basti* is important and Superior *Chikitsa* in *Panchakarma*. *Basti* is explained as "Ardha *Chikitsa*" by Acharya Charaka. Here comes the role of *Kshara Basti* which mainly acts on *Vata-Kapha dosha* along with *Aavarana* condition. **Aim and Objectives:** The aim of this study was to access the efficacy of *Ayurvedic* management including *Kshara Basti* in *Gridhrasi*.

How to cite this paper: Dr. Akshata Hurali D | Dr. Suresh N Hakkandi | Dr. Manjunath Akki | Dr. Guru Mahantesh T M "Effect of Kshara Basti in the Management of Gridhrasi: A Case Study" Published in International Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-6470, Volume-6 | Issue-6, October 2022, pp.1033-1037, URL: www.ijtsrd.com/papers/ijtsrd52010.pdf



Copyright © 2022 by author (s) and International Journal of Trend in Scientific Research and Development Journal. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (CC BY 4.0) (<http://creativecommons.org/licenses/by/4.0>)



KEYWORDS: *Gridhrasi*, *Sciatica*, *Basti*, *Kshara Basti* etc

INTRODUCTION

Pain is the chief cause to visit a doctor, among which low back pain is common. Life time incidence of Sciatica reported between 10% to 40% and annual incidence of 1% to 5%. Peak incidence occurs in patients in their fourth decade. Rarely occurs before age 20 unless traumatic¹. Low back pain has been enumerated as fifth most common cause for hospitalization and the third most frequent reason for a surgical procedure². *Gridhrasi* is enumerated one among the *Vataja Nanatmaja* and *Samanyaja VataVikaras*³. The signs and symptoms of "Sciatica" found in modern medicine are quietly mimic with the condition of *Gridhrasi* mentioned in *Ayurveda*. *Gridhrasi*, the name itself indicates the way of gait shown by the patient due to extreme pain, that is, *Gridha* or Vulture. The cardinal signs and symptoms of *Gridhrasi* are *Ruk* (pain), *Toda* (pricking

sensation), *Muhuspandan* (Tingling sensation), *Stambha* (stiffness) in the *Sphik*, *Kati*, *Uru*, *Janu*, *Jangha*, and *Pada* in order⁴ and *Sakthikshepanigraha* (i.e., restriction in upward lifting of lower limbs)⁵. In *Gridhrasi*, *Tandra* (Drowsiness), *Gaurav* (Heaviness), and *Aruchi* (Anorexia) may be present if *Kapha* is associated with *Vata*⁶.

Gridhrasi is a *Rujapradhana Vata Vyadhi* particularly seen in most active period of life, causing hindrance in routine life. In spite of tremendous advancements in the field of modern medicine, the management of *Sciatica* is still limited and has a less favorable outcome and consumes more health resources. In the conventional system of medicine muscle relaxants NSAIDS, Narcotics, Corticosteroids, which give temporary relief are given & Surgery which is quite expensive and need hospitalization are practiced.

Hence Sciatica is a condition best approached from a multi-modal, multi-disciplinary perspective. To overcome the above expensive therapeutics an ayurvedic management seems to be the best. In this case study, a 31-years-old female complaints of pain in lower back region radiating to the posterior aspect of whole Right Leg since 2 months was prescribed for Kshara Basti, which resulted in excellent symptomatic relief.

Material and Methods

It is a single case study. Informed consent was taken from the patient in his own language.

Case Report-

A 31-years-old female patient (Registration No-106352) from koppal, presented herself to the Panchakarma OPD of SJG Ayurveda Medical College and Hospital, Koppal on 26th July 2021, complaints of pain in lower back region radiating to the posterior aspect of whole Right Leg since 2 months.

HISTORY OF PRESENT ILLNESS

A 31-years-old female was apparently healthy before two months, then she started complaints of pain in lower back region and then gradually radiates to posterior aspect of thigh, knee, calf region, and foot of right leg. Along with above complaints, she had associated symptoms of loss of appetite, gaseous distension of abdomen, constipation, and difficulty while walking and bending forward since one month. Patient had also taken contemporary medicine for low backache for one month, but didn't get satisfactory relief and there was increase in the intensity of symptoms since last week. So she approached to Panchakarma OPD, of SJG Ayurveda Medical College and Research Centre, Koppal for better treatment.

PAST HISTORY

No history of trauma or fall.

No history of major medical illness (e.g., HTN/DM/bronchial asthma/dengue).

No history of any surgical intervention.

MEDICATION HISTORY

Patient had taken medicine, Inj.Diclo(SOS) and Inj.Nervigen

Tab.Alto-TC 1BD, Tab.Pan-D 1OD, Tab.Calcimax 1OD, Tab.Altigab NT 1OD

Advised physiotherapy for one month.

PERSONAL HISTORY

- Ahara: Vyamishra, Ruksha, Katu ahara
- Vihara: long hours of house hold work and tailoring

- Vyasana: Tea 6-7times/day.
- Nidra: Sound

FAMILY HISTORY: Not significant

- **Nidana:** Ahara: Ruksh, Katu ahara, akala bhojana
- **Vihara:** Diwaswapna, Long hours of sitting and standing working, lifting heavy weight
- **Purvarupa:** Low back pain on and off
- **Rupa:** Pain in lower back radiating to right lower limb, associated with restricted range of movements
- **Upashay:** At rest and under analgesics pain reduces
- **Anupashaya:** Pain increases on postural change while sleeping, heavy house hold works
- **Samprapti:** Due to nidana sevana and excess vitiation of *Apanavayu* due to constipation, which leads to vitiation of *Vata* and *Kaphaja doshas* along with vitiation of *Rakta* (blood), *Sira* (veins), and *Dhamani* (arteries). This ultimately causes obstruction to the neural conduction (*Vatavahini Nadi*) and elicited as radiating pain from *Kati* (lumbar region), *Prushtha* (back), *Uru* (thigh), *Janu* (knee), *Jangha* (calf), and *Pada* (foot), and leads to generation of *Gridhrasi* (sciatica). In this disease, the main *Dushya* are *Rakta*, *Kandara*.

Samprapti Ghatak

Dosha: Vyana Vata and Shleshmaka Kapha

Dushya: Rasa, Rakta, Asthi, Majja, Sira, Kandara, and Snayu

Srotas: Rasavaha, Raktavaha, Mamsavaha, Asthivaha and Purishavaha

Srotodushti: Sanga, Vimargagamana

Rogamarga: Madhyama

Agni: Jathargni and Dhatvagni

Udbhavasthana: Pakvashaya

Adhishtana: Kati and Prushthavamsha

Vyaktasthana: Sphik, Kati, Prushtha, Uru, Janu, Jangha, and Pada.

Diagnosis

Vata- Kaphaja Gridhrasi

Investigation

MRI Lumbo-Sacral Spine

Impression –

- Disc desiccation at L4/L5
- L3/L4 level: mild central disc protrusion, bilateral facet arthropathy causing thecal sac indentation.

- L4/L5 level: diffuse disc bulge with central disc protrusion

Clinical Examination

- She was examined through both locally and systemically. The general condition of the patient was stable, fully conscious, and well oriented. Her vitals were found to be normal limits, blood pressure-130/70 mmHg, pulse rate-82/min. Her body height was 5 feet and 1 inch, and her body weight was 48 kg. Cardiovascular system was found normal.
- Local Examination of Spine revealed normal curvature of spine. Tenderness present at L3,L4,L5, no swelling no scar was found. The local temperature was raised. The range of movement was decreased due to pain with limping gait.
- SLR Test – Right lower limb: active = +ve at 45 degree angle
passive = +ve at 60 degree angle
Left lower limb: active and passive = both are -ve

Table1: Diagnosis of Gridhrasi

S. No.	Signs and Symptoms	
1.	Shoola	Present
2.	Stambha	Absent
3.	Spurana	Present
4.	Gourava	Present
5.	Aruchi	Present
6.	Tandra	Present

Treatment protocol

Purvakarma	On 26-07-2021 Anulomana dravya will be given on previous night i.e Nimbamrutadi Eranda taila -30ml From 27-07 to 03-08-2021 Sarvanga Abhyanga with murchita tila taila and Bashpa Swedana
Pradhanakarma	Kshara Basti for 8 days Saindhava – 12gms Murchita tila taila- 50ml Shatahva – 12gms Amlika – 96gms Guda – 96gms Gomutra – 384ml
Paschatkarma	Patient is advised to take rest after sukhaporvaka pratyagamana of basti dravya. Sukoshnajala snana. Advice to take Laghu aahara

Follow up period

In this Duration patient was advised to avoid *Ashtamahadoshkarabhava*. She was doing mild exercise regularly and asked to take light food and lukewarm water to drink. Proper posture was maintained during sleeping and sitting. After 16 days i.e on 24th day patient visited again. There was no persistant of symptoms like earlier.

Table2: Ashtavidhapareeksha (Eight fold examination)

Sr. No	Sthan	Lakshan
1.	Nadi(Pulse)	82/min
2.	Mutra(Urine)	Samyak
3.	Mala(Stool)	Vibandha
4.	Jihwa(Tongue)	Aliptata
5.	Shabda(Speech)	Prakrut
6.	Sparsha(Touch)	Prakrut
7.	Druk(Eye)	Prakrut
8.	Akruti(Shape)	Madhyama

Table3: Assessment Criteria

Sl. No	Signs and Symptoms	Gradings
1.	Ruk	0-absent 1-mild 2-moderate 3-severe 4-very severe
2.	Stambha	0-absent 1-mild 2-moderate 3-severe 4-very severe
3.	Walking time	0-upto 20 sec 1-21 to 30 sec 2-31 to 40 sec 3-41 to 50 sec 4-51 to 60 sec

SLR test: Test is assessed as positive at 0⁰ to 90⁰ with pain, negative at 0⁰ to 90⁰ without pain.

Observations

PARAMETERS	BEFORE TREATMENT	AFTER TREATMENT	AFTER FOLLOW UP
Ruk	2	0	1
Stambha	0	0	0
Forward flexion	65(0)	80(0)	70(0)
Backward extension	10(2)	20(1)	20(1)
Left lateral flexion	25(1)	25(0)	25(0)
Right lateral flexion	15(2)	25(1)	25(0)
SLRT	45(3)	70(1)	60(1)

Before treatment total gradings were 12. By the end of treatment i.e on 8th day and after follow up i.e on 24th day the gradings were reduced to 04. The patient got symptomatic relief up to 66% relief after treatment and follow up without any shamana aushadhi added during followup period. During the treatment period only her gait and appetite were improved. And constipation also relieved. In follow up period She was able to do her daily activities with ease. Treatment shown clinically significant results in reducing symptoms specially pain and ROM of lumbar spine.

Discussion

Chikitsa Sutra (treatment principle) of *Gridhrasi* involves *Vasti karma*, *Siravyedha*, and *Agnikarma Chikitsa*⁷. The treatment protocol, which was planned for this patient included *Shodhana Chikitsa* with *Vasti karma*. *Kshara Basti* is one among the *Niruha Basti* which is specially mentioned by *Acharya Vangasena Samhita*⁸. It is *shodaka* and *Kapha-Vata shamaka basti*. According to the indications of *kshara basti*, which infers that this *basti* acts in *Amavastha*, *Kapha pravruddhavastha*, *Shoola*, *Avaranajanya disease*. In *Vata-Kaphaja Gridhrasi*, there will be pain, stiffness, aruchi, gourava etc which indicates the *amavastha* of disease. And *Vata-Kaphaja Gridhrasi* is a *Kapha avaranajanya disease*. Hence *Kshara basti* significantly acts at this condition by relieving the pain and inflammation

The ingredients of *basti* are *Guda*, *Saindhava*, *Sneha*, *Shathava*, *Chincha*, *Gomutra* are classically mentioned..

- **Saindhava:** Due to *Sukshma* and *Tikshna* properties, it helps to pass the drug molecule in systemic circulation through mucosa. Thus, it helps the *Basti dravya* to reach up to the molecular level.
- It is also helpful for the elimination of *doshas* due to its irritant property. It is capable of liquefying the *doshas* and breaking it into minute particles.
- **Guda:** Along with *Saindhava* it becomes homogeneous mixture, to form a solution having properties to permeate the water easily. The retention of the irritant substances may be favoured by making its solution as nearly isotonic as possible by using colloidal fluids.
- **Moorchita Tila Taila:** It helps the easy absorption of fat soluble active principles into the colon.

Again it will counteracts some of the irritating properties of both *Saindhava* and *Guda*.

- **Amlika kalka:** *Chincha* is having *Vata Kaphashamaka*, *Ruksha* and *Ushna* properties. This helps to get rid from the disease.
- **Gomutra:** Owing to its *Katu Rasa*, *Katu Vipaka*, *Laghu/Rooksha/Teekshnaguna* it pacifies *kapha* and considered as *Tridoshahara*, *Agnideepana*, *Pachana*, *Srotovishodana*, *Vatanulomana*.

These *basti dravya's* which are *teekshna*, *ushna*, *Sukshma* tackles the *vata-kapha dosha* thus relieving the *avarana*. *Tikshna Guna* is dominated by *Agni Mahabhuta* and it break downs the *Dosha Sanghata* in *srotas*, thus it help in removing *Sanga* in *Srotas*. By removing *Sanga* it keeps *Sanchrana marga* of *Vyana Vayu* in normal condition. Thus *Vyana Vayu* transport the nutrient to its related *Dhatu* and *Uttrotar Dhatu Nirmana* takes place properly. Hence the process of *aavarana* is checked. *Ushna Virya* is dominated by *Agni Mahabhuta* which is having *Laghu* and *Tikshna Guna*. *Ushna Virya* is responsible for the reduction of *Vata* and *Kapha*. It also has *Deepana-Pachana* and *Kapha Shamaka* property. By the virtue of *Deepana-Pachana*, *Basti Dravya* increases *Agni* at all levels and it reduces *Ama*, *Kapha* and *Avarana* and corrects the *samprapti* of *Vata-Kaphaja gridhrasi*. Thus, *Basti dravya* when administered reaches up to the micro and macro level due to its *virya* helps first to destruct the pathogenic process and carries out the morbid matter towards *pakawashaya* for the elimination. Thus it works as curative as well as purificatory measures.

Conclusion

Basti is the main treatment modality among *Panchakarma* procedure, specially indicated in *Vata Vyadhi*. *Acharya Chakrapani* has mentioned *Kshara Basti* in *Niruha Basti Adhikara*. *Kshara Basti* is a

kind of *Niruha Basti* classified based on drugs used in it, works by virtue of action of ingredients present in it. It is *shodaka* and *Kapha-Vata shamaka basti*. According to the indications of *kshara basti*, which infers that this *basti* acts in *Amavastha*, *Kapha pravruddhavastha*, *Shoola*, *Avaranajanya disease*. *Vata-Kaphaja Gridhrasi* is a *Kapha avaranajanya disease*. Hence *Kshara basti* significantly acts at this condition by relieving the pain and inflammation. This case study demonstrated that *Kahara basti* seems very effective for the treatment of *Vata-Kaphaja Gridhrasi* and this attempt was made to provide safe and effective treatment to the patient within short period.

From the above case, it can be said that *Vata-Kaphaja Gridhrasi* can be successfully managed through *Kshara Basti* as it relieves pain along with improved ROM, which makes patient to feel relax and comfort.

REFERENCES

- [1] [www.ncbi.nlm.nih.gov>books>NBK507908](http://www.ncbi.nlm.nih.gov/books/NBK507908) 11-3-2020
- [2] Armstrong P, Wastie M, Rockall A. Diagnostic Imaging. 5th ed. Blackwell Publishing: UK; 2004. Chapter 11. p. 362.
- [3] Acharya Vidyadharashukla, Charaka Samhita, Sutrasthana, 20th Chapter, Shloka no. 11 Varanasi; Chaukhambha Bharati Academy, edition - 2013, P G no.293.
- [4] Pt. Kasinath Shastri, Charak Samhita, Chikitsa sthana, 28th Chapter shloka no-56, Varanasi, Chaukhambha Bharati Academy, edition-2012, Pg no-700.
- [5] PV Sharma, Sushruta Samhita, Nidanasthana; Vatavyadhi Nidana Adhyaya. Chapter 1, Verse 74. Varanasi, Chaukhambha Visvabharati; 2005. p. 15.
- [6] Pt. Kasinath Shastri, Charak Samhita, Chikitsa sthana, 28th Chapter shloka no-57, Varanasi, Chaukhambha Bharati Academy, edition-2012, Pg no-700.
- [7] Acharya vidyadhara shukla, Charaka Samhita, chikitsa sthana, 28th Chapter, shloka no.101 Varanasi; Chaukhambha Bharati Academy, edition - 2013, Pg no.705
- [8] Dr. Rajiv Kumar Roy, Vangasena Samhita, Chikitsasara Sangraha, Bastiaadhikara, shloka no.179-181, Varanasi; Prachya Prakashana, edition -2010, P G no.704

