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"A CLINICAL CASE STUDY ON THE MANAGEMENT OF GRIDHRASI THROUGH AYURVEDA W.S.R. SCIATICA"

Dr. Rekha Mehenge¹, Dr. Mritunjay Sharma², Dr. Archana S. Dachewar³

- 1. PG Scholar, Dept. of Kaychikitsa, Shri Ayurved Mahavidyalaya, Nagpur, Maharashtra
- 2. Asso. Professor, Dept. of Kaychikitsa, Shri Ayurved Mahavidyalaya, Nagpur, MH
- 3. HOD & Professor, Dept. of Kaychikitsa, Shri Ayurved Mahavidyalaya, Nagpur, MH

ABSTRACT:

Gridhrasi, a symptom of Sakhti Pradesh, is Vata Nanatmaj Vikar. H. Around the thighs. In literal terms, gridhrasi means "vulture walk." Men were most likely to be influenced more often than women in the 1940s and 1950s⁽¹⁾. The working population has a 3.8% prevalence of sciatica, while the non-edited population has a 7.9% prevalence⁽²⁾. Sciatica does not go away on its own. As a result, the patient naturally gravitates toward Ayurveda. When pain arises, modern medicine has few limitations. Simply operations is an additional choice. The Ayurvedic management of Gridrarasi, which includes shamans and Basti, Sunehan, Swedan, Katibasti, and Agnikarma, is far more promising. Materials and Procedures: One case study is presented here. For five days, the 67-year-old lady was linked to Panchakarma treatment, which included Basti with Shumur Nirha and Safchadaitai Anuvasan. At the same time, the 67-year-old woman and the Panchakarma treatment, which included Basti, Suedan, Katibasti, and Agni Karma, were linked to L5-s treatment. Results: After a month of treatment, a symptomatic assessment was conducted on the patient, which produced satisfactory results and markedly enhanced the patient's quality of life. In summary, the aforementioned therapies reduce symptomatic palliation in gridrushi patients.

KEY WORDS:- Gridhrasi, Agnikarma, Basti, Swedan, Sciatica.

Corresponding Details:

Dr. Rekha Mehenge Shri Ayurved Mahavidyalaya, Nagpur Mobile No. 8669442319

E-Mail: rekhagm96@gmail.com

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Dr. Rekha Mehenge, Dr. Mritunjay Sharma, Dr. Archana S. Dachewar

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INTRODUCTION

Nowadays, sciatica is the most prevalent presenting condition. According to Ayurveda, Sciatica and the Gridhrasi are related. There are two groups of Vatavyadhi described in the Charaka Samhita: Samanyaja and Nanatmaja⁽³⁾. Among these, "Ekadasha Indriya" has been cited in Ayurvedic texts. Gridha (vulture)-like gait with two types of Gridhrasi is caused by Padendriya Karmahani in Gridhrasi⁽⁴⁾.

- 1) Vatanubandhi symptoms like -
- In ascending order, "Stambha, Ruk, Toda, Graha, and Spandana in Sphika, Kati, Prishtha, Uru, Janu, Jangha, and Pada" (5)
- 2) Kaphanubandhi symptoms like Additionally connected are "Tandra, Gaurava, and Arochaka."

Because we live in a modern, technologically advanced world, people's lifestyles have changed, leading to various abnormalities in their biological systems. The development of a hectic social and professional life, poor sitting posture in offices and factories, excessive activity, jerky movement when traveling, and participation in sports all contribute to the development of sciatica and low backache by placing excessive strain on the spinal cord. A sharp, shooting pain in the lower extremities, gridhrasi is caused by irritation of the sciatic nerve and is made worse by limb movement.

This issue is also being triggered by progressive ailments that damage the pelvic and nerve structures. The working population is currently seriously threatened by this illness. Walking becomes difficult because to sciatica, which might be limited to the low back or relate to the leg, buttocks, or hip. It interferes with day-to-day activities and lowers the patient's quality of life. A patient case study has been presented here based on the discovery that Ayurvedic therapy principles are highly effective in the management of Gridhrasi.

AIM AND OBJECTIVE

To evaluate the effect of Panchakarma and Shaman

Chikitsa in the management of Gridhrasi.

CASE REPORT

There is only one case study. The patient gave her informed consent in her native tongue.

Patient information

A 67-year-old woman from Sawarbande, Nagpur, arrived at the outpatient department of the Kayachikiysa department of the Shri Ayurved Mahavidyalaya Nagpur with complaints of

back pain (Katishool), left-sided radiating pain from the lumber, thigh, and calf muscles (Kati to Vam Padshool), difficulty walking (Chakramankashta), and difficulty sitting and standing (Asnouthankashta) that had persisted for five days.

History of current illness: According to the patient, she was well for five days before developing back discomfort, which led to the development of other symptoms such pain radiating from the calf, thigh, and back muscles, as well as trouble walking, standing, and sitting. When a patient's pain persisted after being treated in private hospitals with symptomatic allopathic medication, they sought additional management and therapy at Shri Ayurveda Pakwasa Rugnalaya Nagpur.

Associate complaints -

Bilateral knee joint pain since 1 month.

Past history - k/c/o type 2 Diabetes mellitus

Taking tab metformin 500mg once a day but not taking regularly.

Personal history -

family history-nothing significant

Surgery history - Tubal ligation 25 yrs ago

Addiction - Betel nuts daily basis since 25 yrs

Occupation - Housewife

Divaswap - daily for 3 hrs (day time sleeping)

Ushapan- 1 glass of water daily (drinking water in empty stomach in early morning)

Ahara - Mixed Diet, Katu-Lavan rasa, Ruksha

Ahara, Viruddha Ahara, Adhyasana, Vishamsana. Ayurveda & Yoga

Vihara -sleep and being a housewife

prolong standing, improper sitting posture.

Appetite -Decreased appetite but takes food regularly.

Bowel - regular bowel 1 time per day

Micturition - Normal

Sleep - Disturbed from 5 days due to pain

Mansik - Stressed since 1 yr due to family issues.

Menopause -15 yrs ago

General examination

■ B.P. - 149/80 mm Hg

- PR 78/Min
- R.R. 20/Min
- Height 5 feet 2 inches
- Weight 64 kg
- Temperature Afebrile
- Edema / lymphadenopathy / pallor / icterus /

clubbing / cyanosis - absent

Systemic examination

- R.S.- Centrally placed trachea, Normal breathing sounds and airway entry
- CVS S1 S2 normal, no murmur
- P/A Soft, non-tender, no organomegaly
- CNS Fully conscious and well oriented to time,
 place and person, all cranial nerves are intact

Mus

Musculo-skeletal system

- Gait Antalgic
- Upper limbs Normal
- Lower limbs Stiffness in the left calf and thigh region with restricted range of motion with Of Ayurveda & Yoga positive SLR test 40° and slump test positive.
- Redness and warmth / Weakness / Swelling /

Deformity - Absent

Examination of spine

- Inspection No visible deformity or sign of trauma
- Palpation Tenderness over L3,L4,L5 level
- Movements Cervical/Thoracic- NAD

Lumbosacral - Flexion Restricted, Extension -

Restricted, Left lateral flexion - Not possible, right

lateral flexion - Restricted.

• SLR test (active) • Positive at 40° on the left leg •

Negative on the right leg.

Slump test postive at 60°

X ray LS spine- mild straighting of lumber spine

End plate osteophytes seen along

With lumbar vertebrae

Mild reduction in L5 S1 disc space

Changes of lumber spondylosis

MRI of LS spine - Left paracentral disc bulge at L5-S1 level causing mild foraminal stenosis and left exiting nerve root compression.

Assessments

Ashta Asthana Pariksha

- Nadi 78 / min
- Mutra 4-5 Times / day
- Mala Saam, once daily, Krura Kostha
- Jihva Nirlipta
- Shabda Prakrita
- Sparsha Sama Sheetoshna
- *Drik Prakritional Journal of Ayurveda & Yoga
- Akriti Madhyam

Dasha Vidha Pariksha

- Prakriti Vata-Kaphaj
- Vikriti Hetu- long hours of sitting and working,

irregular duty hours and sleep, Ruksha and

Viruddha Ahara, weight gain, Vegadharana

- o Dosha Vata-Kaphaj
- o Dooshya Rakta (Kandara), Asthi, Majja

Desha - Bhumi-Sadharana

Atur - Kati, Vama Pada

o Kala - Ritu - Grishma, Kriyakala - Vyakta

Avastha

o Bala - Rogi - Madhyam, Roga - Madhyam

Sara - Madhyam

- Samhanana Madhyam
- Pramana Madhyam
- Satmya Madhyam
- Satva Madhyam
- Aharashakti Jarana Shakti Avara,

Abhyavaharana Shakti - Madhyama

Vyayama Shakti - Avara

Samprapti- -Vata dosha vitiated due to Nidana sevana, excessive walking irregular posture, prolonged standing work

- -Vata prakopa (rukshata and kharata in lumbar region)
- (loss of functioning of shleshmaka kapha, decreses elasticity and flexibility at disc, ultimate result in disc herniation and nerve compression)
- complaints on left side
- Vataj Gridhrasi on Left side

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Diagnosis - Vataj Gridhrasi(Sciatica on left side)

Chikitsa(Treatment)-

CHIKITSA SUTRA

अन्तराकण्डरागुल्फं सिरा बस्त्यग्निकर्मच ॥ (cha chi 28/101)(6)

Advised treatment -

Shaman chikitsa -

- Cap Palsineuron 2 bd
 Content- Mahavatvidhwans Ras, Sameerpannag Ras , Ekangveer Ras, Sootshekhar Ras, Khurasani, Lajari Psnchang.
 - 2) Dashmool kwath 40ml bd before food- content -Bilva, Agnimantha, Shyonaka, Gambhari, Patala, Shalparni, Prishnaparni, Brihati, Kantakari, and Gokshura.

3) Trayodashang guggul

Content- Ashwagandha - Withania , somnifera ,Hapusha ,Guduchi ,Shatavari Gokshura, Vriddhadaru ,Rasna ,Shatahva ,Shati,Yamani,

Nagara ,Kaushika ,Sarpi

4) Tab Muscalt forte 1 tab bd Content- Ashwagandha, Erand, Devdaru, Guduchi, Guggulu, and Sunthi.

Shodhan Chikitsa -

- 1) Snehan with bala tail
- 2) Swedan with dashmool kwath nadisweda
- 3) Kaal basti -

Anuvasan with Sahcharaditai 60ml

Niruh with dashmooladi kwath 350 ml

Preparation of dashmool niruha basti

Madhu - 4oml

Saidhav- 10 gm

Shatpishpa kalka- 40 gm

Tiltaila-60 ml eevani Darshan

Dashmool kwath - 200ml (Dashmool bharad 50 gm + water 800 ml = 200ml Kwath)

Total - 350mltional Journal of Ayurveda & Yoga

Krama-Anuvasan alternate Niruha for 16 day.

Sthanik Chikitsa -

- 1) Katibasti with murrivenna taila
- 2) Agni and Vidhkarma
- 3) Physiotherapy

To reduce vat dosha and local swelling and pain.

Due to proper exercise help in reduced nerve compressions.

Subjective parameters -

Pain -

Grades.

SN	Sign & Symptoms	Criteria	Score	ВТ	AT
1	Pain	1 .No pain	0	3	0
		2.Painful movement without	1		
		3.Painful movement	2		
		with limping gait but			
		without support 4.Painful, can walk only			
		with support	3		
Sa	njee	5.Painful, unable to walk	i Da	rsh	an

Objective Parameters -

1)SLRT-

BT- positive at 40°

AT - Negative

2)Slump test - positive BT

-Negative AT

3) Gait - BT Antalgic

AT - normal

Observation and results - on subjective and objective Parameters shows 80% of relief within 1 months of treatment 15 days on ipd basis and 15 days on ipd basis with weekly follow up.

DISCUSSION

Chikitsa Sutra for According to the classics, Gridhrasi is Siravyadha, agnikarma, and basti karma. Since gridhrasi is a vata vyadhi, shodhana is required to calm vatadosha, and chikitsa of vata dosha is snehana. The concepts of vatashamana chikitsa and vedana stapana chikitsa are used to cure and manage medical conditions. Palsineuron⁽⁷⁾. enhances CNS and PNS metabolic functions and stimulates neuro-muscular connection. controls blood flow in impacted regions, combats anoxia, and increases brain activity. supports and nourishes blood vessels and nerves.

Guggul Trayodashang⁽⁸⁾ Being Ushna Virya, it inhibits Stambha and Toda symptoms and lessens pain through Madhur Vipaka's Snigdha Guna. Asthi, Majja, and SnayuGata Vata are all affected by it. Glycosaminoglycan (GAGs), collagen, and protein are necessary for intervertebral disc repair, and Madhur Vipaka and Trayodashanga Guggulu's Rasayana property make this feasible. Muscle forte: reduce inflammation, discomfort, and swelling. controls the production of toxins and regulates metabolism. serves as a supplement that is energetic, revitalizing, and adaptogenic.

Dashmool kwath is an anti-inflammatory and pain reliever. Dashmooladi Niruha Basti-Basti is the best remedy for balancing Vata and treating Asthi, Sandhi, and Marma illnesses. It also corrects both local and systemic pathology. In addition to causing vata shaman, BASTI's multifaceted actions also pacify other vata-related doshas and induce dhatu poshana.

In contrast to Vata and anti-Kapha qualities, Agnikarma-Agni has Ushna, Tikshna, Sukshma, and Aashukari qualities. Twak Dhatu receives therapeutic heat from Shalaka, which is physical heat. This healing heat from Twakdhatu works in three ways. First, it eliminates the Srotavarodha, calms the vitiated Vata and Kapha Doshas, and preserves their balance because of Ushna, Tikshna, Sukshma, and Ashukari Guna. Second, it improves the damaged site's blood circulation, or Rasa Rakta Samvahana. The patient experiences symptom relief as a result of the extra blood flow to the afflicted area, which flushes away the toxins that cause discomfort.

Because of the qualities of the substances utilized, Sthanik Karma (Katibasti, Snehan, Swedan) cures painful ailments mostly brought on by Vata and Vatakaphaja Dosha. Vedanasthapana, Vata Shamaka (analgesic), and Shothahara (anti-inflammatory) all help to lessen inflammation and strengthen the affected area's joints, muscles, and nerves (by reducing stiffness and therefore compression over the nerve roots).

CONCLUSION

Sciatica is a serious illness that makes it difficult for a person to carry out everyday personal and professional tasks. This example demonstrates how well shaman and shodhana chikitsa

worked to treat gridhrasi. It produces notable outcomes in Both subjective and objective metrics show that the patient's quality of life has improved, and he is currently doing well in his everyday tasks. We can determine if gridhrasi can be well handled and produce satisfying results without any complications by properly analyzing the course of treatment.

REFERENCES

- 1. Armstrong P, Wastie M, Rockall A Text of Diagnostic Imaging. 5th ed. Blackwell Publishing: UK, 2004; 11: 362.
- 2. Mohan M, Sawarkar P. Ayurvedic management of Gridhrasi with special respect to sciatica: a case report. Journal of Indian System Medicine, January 2019; 7: 131-8.
- 3. Sharma PV, editor. Charaka Samhita of Agnivesha. Sutrasthana; Maharoga Adhyaya. Chapter 20/11. Chaukhamba Orientalia; Varanasi, India:year, 2007; 139.
- 4. Deb RR. Shabdakalpadruma. Vol-2. Delhi: Nag Publishers; 1987. p. 348.
- 5. Agnivesha M. Chikitsasthana Vatvyadhichikitsa (28/56-57). In: Shastri SN, editor. Charaka Samhita, Vidyotini Hindi Commentary. Reprint ed. Varanasi: Chaukhambha Bharati Academy; 2016. p. 787. (Vol.2).
- 6. Agnivesha ,Charaka samhita, Ayurveda dipika commentary of chakrapanidatta edited by vaidya yadavaji trikamji acharya, publication by chaukhambha orientalia varanasi, edition year, chikitsa stana, 2015; 28/101: 621.
- 7. Dr.k.nishateswar and Dr.R.Vidyanath, Sahasra yogam, kashaya prakarana ,choukhambha press varanaashi,3rd edition, 2011; 367.
- 8. Dr.k.nishateswar and Dr.R.Vidyanath, Sahasra yogam, kashaya prakarana choukhambha press varanaashi,3rd edition, pg no.384 and Agnivesha ,Charaka samhita, Ayurveda dipika commentary of chakrapanidatta edited by vaidya yadavaji trikamji acharya, publication by chaukhambha orientalia varanasi, edition year 2015, sutra stana, 2011; 4/16: 34.

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