

ROLE OF AYURVED IN THE MANAGEMENT OF PAKSHAGHAT WITH SPECIAL REFERENCE TO ACUTE NON-HEMORRHAGIC INFARCT HEMIPLEGIA – A CASE REPORT

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ABSTRACT

Due to today's changing Lifestyle i.e. excess consumption of Junk food, Alcohol, stress, shifting duties many diseases occur easily like Diabetes Mellitus, Hypertension etc. Such diseases later help for more complicated conditions like stroke. Stroke is the 3rd most common cause of death in the developed world after Cancer and Ischemic Heart Disease. For the function of brain, constant supply of O₂ and glucose is required. In Stroke, Focal Brain Dysfunction occurs due to focal ischemia or Hemorrhage. This is a case of a 55 year old patient diagnosed with Acute Non-hemorrhagic infarct. First he was treated by modern system of medicine with very less effect. On 7th day of stroke, he was shifted to Parul Ayurved Hospital. He was successfully

managed by Panchkarma procedures e.g. Abhyanga, Swedana, Basti, Nasya and Shaman Aushadhi for 2 ½ months. The response obtained is highly encouraging and will help as a guideline to manage such patients in the future.

KEYWORDS: Pakshaghat, Shaman, Stroke, Basti, Abhyanga, Nasya.

INTRODUCTION

Stroke is a common Medical-Emergency with an annual incidence between 180 to 300 per 100000. The incidence rises steeply with age, adaptation of less healthy lifestyles.^[1] The normal function of the brain depends upon constant supply of O₂ and Glucose. A protective mechanism is present in the Brain i.e. Auto-regulation of vascular resistance due to which cerebral blood flow remains constant over a wide range of Blood Pressure and Intra Cranial pressure. The reduction of blood flow to the brain for a prolonged period results in Ischemia

and infarction of brain.^[2] Clinical manifestation may vary from Headache to total paralysis of the body. Hemiplegia is the most alarming result. According to Ayurved, this condition can be correlated with Pakshaghat. The main vitiated dosha is Vayu (Nanatmaja vyadhi).^[3] Ruksha, Khara, Vishada are the main properties of Vayu. Such vitiated vayu with its properties helps to decrease Drava-Snigdhatva of Rakta and Meda dhatu.^[4] Sira, kandara and Snayu are their respective upadhatus. In Pakshaghat, shoshana of these upadhatus occurs. In the management of such condition Ayurveda plays an important role. Here Panchkarma procedures followed by Shaman Aushadhi give excellent results. The management of Pakshaghat is reported in this paper. A case of Acute Non-heamorrhagic infarct stroke with the effect of Shaman, Abhyanga, Swedana, Basti, Nasya has been shown.

CASE REPORT- A 55 years old male patient came to our institute on date with the complaints.

- Weakness in left lower and upper extremities
- Difficulty in speech
- No movements of the same side
- Continuous headache
- Incontinence of urine (Catheterization done)
- Severe constipation,
- Less orientation since 6 days. Patient was normal before that period.

Past history of D.M- 15 yrs, Hypertension- 7 days (diagnosed at the time of stroke)

Family H/O-No

No H/O Specific Trauma or other Accident.

General Examination

General Condition- Moderate

Pulse- 64/Min (Kshina Vata-Pradhan Pitta)

B.P. - 110/80 mm of Hg

Systemic Examination

RS - CVS, G.I.T. - No Abnormality Detected

C.N.S –

Examination	Right Extremity		Left Extremity	
	Upper	Lower	Upper	Lower
Sensation	Normal	Normal	Normal	Normal
Tone	Normal	Normal	Hypo	Hypo
Power	5	5	0	0
Muscle movement co-ordination	Weak	Weak	Not possible	Not possible
Involuntary movements	Asent	Absent	Absent	Absent
Reflexes	Biceps - Normal Triceps - Normal Supinator- Normal	Knee - Normal Ankle - Normal Planter - Normal	Biceps - diminished Triceps - diminished Supinator - diminished	Knee - diminished Ankle - diminished Planter – diminished Babinski's sign-+

C.T.BRAIN-(31/5/2017)

- A small wedge shaped Non-enhancing hypo-density in the right frontal para falacine cortex suggestive of Acute Non-hemorrhagic infarct in right ACA.
- Generalized cerebral and cerebellar atrophy.

Diagnosis- PAKSHAGHAT

Sampraptighataka

- **Dosha-** Prana, Udana and Vyana Vayu, Sadhaka Pitta, Tarpaka Kapha
- **Dushya-** Dhatu- Rasa, Rakta, Mansa, Meda and Majja

Updhatu- Sira and Snayu

- **Srotas-** Raktavaha, Medavaha, Majjavaha
- **Type of Srotodushti -** Sanga, Siragranthi and Vimarg-gamana
- **Vitiation pattern-** Khara, Ruksha and Vishada Guna of Vata, Ushna and Tikshana Guna of Pitta
- **Agni-** Jatharagni, Dhatvagnis of Rakta, Mansa, Meda and Majja
- **Site of production-** Mastishka
- **Site of manifestation-** Sarvanga / Ardhangha

MANAGEMENT - Treatment given and observations per week

DATE	COMPLAINTS	EXAMINATION				CHIKITSA	
		POWER (LEFT EXTREMITY)		TONE (LEFT EXTREMITY)		SHAMAN (with Physiotherapy)	PANCHKARMA
		UPPER	LOWER	UPPER	LOWER		
6/6/17	Vama Sharirardhe Karmahani, Vak-Aspashtata, Shirah— Shoola, Tivra Mallavshthambha, Aniyantrit Mootra Pravartana, Tandra	0	0	HYPO	HYPO	Pathyadii Guggulu 2-2-2 Sutashekhar Rasa- 1-1-1 Smruti sagar Rasa-1-1-1 Dashmoola Kwatha 80ml Bds	Sarvanga Abhyanga With Bala Taila Mrudu Sweda Matra-Basti- Kshirabala Taila 60ml (7 Days)
13/6/17	Vama Sharirardhe Karmahani, Vak-Aspashtata, Shiirah- Shoola↓↓, Malla Ppravartana Sukhapoorvaka , Aniyantrit Mooootra Pravartana, Tandra↓	0	0	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila Mrudu Sweda Nasya with Mahamasha Taila 8 drops in each nostril (7 Days)
20/6/17	Vama Sharirardhe Karmahani, Vak-Aspashtata, Shirah - Shoola Absent, Malla Pravartana Sukhapoorvaka , Niyantrit Mooootra Pravartana (Catheter Removed), Tandra Absent	0	0	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila Mrudu Sweda Matra-Basti- Kshirabala Taila 60ml (7 Days)
27/6/17	Vama Sharirardhe Karmahani, Haste yathavat, pade↓, Vak-Aspashtata↓, Daurbalya	0	1	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila Mrudu Swedan, Nasya with Mahamasha Taailam 8 drops in each nostril (7 Days)
4/7/17	Vama Sharirardhe Karmahani, Haste yathavat, pade↓↓, Vak-Aspashtata↓, Daurbalya↓	0	2	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila, Mrudu Swedan, Matra-Basti - Kshirabala Taila 60ml (7 Days)
11/7/17	Vama Sharirardhe Karmahani, Haste ↓, Pade↓↓, Vak-	1	2	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila Mrudu Swedan

	Aspashtata↓, Daurbalya, Nidra-sukhapurvaka						Nasya with Mahamasha Taila 8 drops in each nostril (7 Days)
18/7/17	Vama Sharirardhe Karmahani, Haste ↓, pade↓↓ (patient can sit with support), Vak-Aspashtata↓, Daurbalya absent	1	2	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila Mrudu Sweda Matra-Basti- Kshirabala Taila 60ml (7 Days)
25/7/17	Vama Sharirardhe Karmahani Haste ↓, pade↓↓↓ (patient can walk with supoort), Vak-Aspashtata↓, Daurbalya	1	3	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila Mrudu Sweda Nasya with Mahamasha Taila 8 drops in each nostril (7 Days)
1/8/17	Vama Sharirardhe Karmahani, Haste ↓↓, Pade↓↓↓ (patient can walk without supoort), Vak-Aspashtata↓,	2	3	HYPO	HYPO	Uparokta Yathavat	Sarvanga Abhyanga With Bala Taila Mrudu Sweda Matra-Basti, Kshirabala Taila 60ml (7 Days)
8/8/17	Vama Sharirardhe Karmahani haste ↓↓, pade ↓↓↓, Vak-Aspashtata ↓↓	3	4	HYPO	HYPO		Sarvanga Abhyanga With Bala Taila Mrudu Sweda Nasya with Mahamasha Taila 8 drops in each nostril (7 Days)

DISCUSSION

Shaman

Pathyadii Guggulu – It has been indicated by many Acharyas in Vata vyadhi treatment protocol.^[5] It is said to be useful in *Gridhrasi*, *Khanjavata* as well as *Vatarakta*. It gives stability similar to elephant as well as speed or energy similar to horse. Thus it will help gain the posture as well as power of mobility which a patient of *Pakshaghat* lacks.

Sutashekhar Rasa – It is said to be useful in all types of *Gulma*, *Tridoshaja Atisaar* and also helps to palliate all types of diseases if administered for a period of 1 *Mandala* i.e. 40 or 42 days.^[6] It helps in *Yapana* of the body i.e. nourishment and replacement of *asaar dhatu* by *saar dhatu*. This property is also useful in patients of *Pakshaghat*.

Smrutisagar Rasa – It is one of the best *rasayana* drug for patients of *Pakshaghat*. It has 21 *bhavana* of *Vacha swaras*, 21 *bhavana* of *Brahmi swarasa* and lastly 1 *bhavana* of *Aparajita swaras*. All these drugs have very good action on the Central Nervous system.^[7] Also it has the capacity to bring the *murchhit* back to *sachetana avastha* i.e. it may bring the sensory as well as the motor function of the patient with *Pakshaghat* back.

Dashmoola Kwatha – It is said to be the primary treatment of any *Vatavyadhi*.^[8] It is *tridoshashamak* i.e. helps to palliate all types of *Doshas*. It can be used in all types of *Vatavikara* especially where strengthening and stability is expected.

Sarvanga Abhyanga - With Bala Taila- It brings smoothness (*Mardava*) in the body. It depletes morbid Vata and Kapha and replenishes all Dhatus. It reduces Kharatva of Mansa, Snayu and Asthi, and improves their strength.^[9] It mainly acts on Rasa, Mansa and Meda. Overall, it keeps the continuity of Sneha (*Dhatu Sneha Parampara*) and hence promotes Dhatus. Taila Abhyanga removes Doshas accumulated in Micro channels by virtue of its Sukshma, Ushna, Vyavayi Guna and Kashaya Rasa of Taila. This effect of Abhyanga promotes Agni, Medha (intellect) and Bala. Here both Bala and Ashwagandha are Mansabalya dravyas.

Mrudu Sweda- Snehana therapy alleviates aggravated Vata, softens Srotasas and separates the *doshas* to be removed from the *dhatus*, and *Swedana* applied after that liquefies the *doshas* even in the fine *Srotas* of the body and thus render them mobile to remove out of the body.^[10]

Matra-Basti- Kshirabala Taila - Vagbhata illustrated the whole phenomenon as follows - drugs in *Pakvashaya* act on whole body in a similar manner as Sun, who though placed in the sky, causes evaporation of water on the earth.^[11] Due to increased *Khara*, *Ruksha* and *Vishada* guna of *Vata* and *Ushna* and *Tikshna* guna of *Pitta*, *Sira* and *Snayu* *Shosha* is caused which further helps to form a clot in cerebral arteries and thus the stroke. In the management of Stroke, medicine which has properties exact opposite of *Khara*, *Ruksha*, *Vishada*, *Ushna* and *Tikshna* i.e. *Shlakshna*, *Snigdha*, *Pichhila* and *Shita*, *Mridu/Manda* is used.

Taila Kalpana exclusively intensifies *Vatahara* effect of *Bala*. Being a *Sneha* it can penetrate into micro-channels. Thus, *Bala Taila* is active at the level of *Rasa*, *Rakta*, *Mansa*, *Meda* and *Majja Dhatu*. *Matra Basti* contains *Sneha* and thus may nourish *Shirogata Sneha* i.e. *Mastishka*.

Nasya – *Nasa* is said to be the opening to the head. Medicine administered through *Nasya* reaches the *Shrungatak marma*, spread throughout the Brain and helps to expel out *doshas* of this region.^[12] The overall procedure of *snehan*, *swedan* and *nasya* helps in reducing the blood brain barrier and promotes absorption of some amount of drug in the central nervous system. For this purpose *Mahamasha Tailam* is used. Here the main content is *Masha* which is *kapha-vriddhikara*, will nourish *Prakrita Tarpaka kapha*, pacify *Vata* with its properties.

CONCLUSION

Pakshaghat is a *madhyam marga ashrit* disease where *marma*, *asthi* as well as *sandhi* are involved.^[13] Ayurved through the virtue of its *shaman* as well as *Panchkarma* treatment can definitely help in such cases. The main aim of the study is to help patient to get recover as early as possible by using *Yojana* of both *Shamana Aushadhi* and *Panchkarma*. The above case can be considered as an example to prove the immense potential of Ayurved line of treatment in such disease conditions.

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