

INTEGRATED MANAGEMENT OF ACUTE AILMENT OF VATA-KAPHAJA GRIDHRASI W.R.T SPINAL CANAL STENOSIS- A CASE STUDY

*¹Dr. Chinmayi I. Koppad BAMS, MD(AYU) and ²Dr. D. S. Wodeyar

¹Consultant Physician, Samyama Arogyadhama, Nagarabhavi, Bengaluru.

²Director and Chief Yoga Consultant, Samyama Arogyadhama, Nagarbhavi, Bengaluru 72.

Article Received on
18 May 2025,

Revised on 08 June 2025,
Accepted on 29 June 2025

DOI: 10.20959/wjpr202513-37474



*Corresponding Author
Dr. Chinmayi I. Koppad

BAMS, MD(AYU),
Consultant Physician,
Samyama Arogyadhama,
Nagarabhavi, Bengaluru.

ABSTRACT

Background: 40% of the population experiences lower back pain linked to sciatica arising from herniated intervertebral discs. Approximately 90% of these instances opt for conservative therapy instead of surgical procedures. In 95% of cases of disc herniation, the L4-L5 and L5-S1 areas are the most frequently involved. Sciatica is a persistent, intense pain located in the lower back that extends to the buttocks, thigh, calf, and foot, linked to the lumbar sacral nerve root (sciatica), typically resulting from disc bulge, disc protrusion, or disc prolapse caused by degenerative changes in the lumbar spine. In Ayurveda, the traditional signs and symptoms of Sciatica align with a condition known as Gridhrasi. **Methods:** Efforts were focused on managing a case of L4-L5-S1 disc bulge with Spinal Canal Stenosis through an extensive Ayurveda, Yoga, and physiotherapy. The protocol consists of a series of treatment methods along with internal

medication. **Results:** Outcomes were noted using the pain Visual Analogue Scale (VAS), SLRT (Straight-Leg Raise Test), and Schober's test, tenderness, and range of motion demonstrated significant improvement. **Conclusion:** Integrated Management with Ayurveda, Yoga, and Physiotherapy is effective in managing Acute Pain in Vata-Kaphaja Gridhrasi w.r.t to Spinal Canal Stenosis resulting from Vata Prakopa and Kapha-Meda Margavarana. In the current study, patient have demonstrated the best response in the remission of functional impairment, neurological deficits, and other symptom criteria, coupled with an increase in functional capacity.

KEYWORDS: Kshara Basti, Kaphavatahara Basti, Gridhrasi, Canal Stenosis, Yoga, Physiotherapy.

INTRODUCTION

In today's world, low back pain is the most prevalent ailment across all age groups in India and worldwide, besides it is intensifying. Prevalent due to an evolution in living. Dominant issue in our community is Gridhrasi, a widespread ailment.^[1] In twelve- to sixty-four-year-old participants, the frequency of sciatica and low back pain was reported to be 11.6 per thousand people per year. Men are more likely than women to experience this condition, and it is especially common in the workforce. Various studies revealed a prevalence of sciatica ranging from sixteen to forty three percent.^[2] Gridhrasi is a Vataja Nanatamaja Vyadhi, Kapha is an Anugata Dosha. The primary considerations for Vataja Gridhrasi include Stambha, Ruka, Toda likewise, Muhuspanada in Sphik, extending up to Paada, Jangha, Jaanu, Uru, Kati, and Prishtha. Tandra, Gaurava, and Aruchi are also present, corresponding to hallmarks of the Vatakaphaja Gridhrasi.^[3] The presentation comparable to that of Gridhrasi can be observed under Gudasthita vata & Pakwashaya gata vata as per Charaka. Gridhrasi is Krucchasadya, thus as per avastha of the disease, the treatment should be planned various therapeutic modalities stated under Vatasya Upakrama such as Snehana-swedana, Mridu Shodhana, and more. And the selection of Shodhana will be beneficial depending on the Doshavastha and Avarana.^[4] Udavartahara chikitsa, such as Niruha Basti (Erandamoola basti, Vaitarana Basti) and Snigdha Virechana with Eranda taila,^[4] is used to counteract Gudgata vata and Apanavata.

PATIENT INFORMATION

A 32-year-old male patient presented at the OPD of Samyama Arogyadhama, Nagarabhavi, Bengaluru with complaints of intense low back pain (lumbar area) radiating to both lower limbs (thigh, calf area, and extending to the left foot), accompanied by stiffness in the back, tingling sensations, and numbness. Symptoms worsened with traveling and were exacerbated by walking, prolonged standing, sitting, and bending forward. These issues, associated with numbness and tingling, persisted for the past 10 months. He attempted to manage the condition with conventional treatments like physiotherapy and consulted an orthopaedic surgeon, who recommended surgery, which the patient declined. Currently, the patient is seeking consultation at the Panchakarma OPD in Samyama Arogyadhama for Ayurvedic treatment. The patient was recommended to be admitted to our hospital for additional management involving Panchakarma, Yoga, and Physiotherapy. Patient adhered to the same and was

hospitalized on 9/6/2025 for a duration of 7 days.

CLINICAL FINDINGS

Table 1: Ashtavidha Pareeksha.

Nadi	Mandagati, vatapittaja	Shabda	Prakriti
Mala	Prakriti	Sparsha	Koshna ushna
Mutra	Prakriti	Drik	Prakriti
Jihwa	Lipta	Akruti	Madhyama

Table 2: Dashavidha Pareeksha.

Prakruti	Vatapitta	Satmya	Madyama
Vikruti	Kapha vata	Ahara shakti	Madyama
Sara	Madyama	Vyayama shakti	Avara
Samhana	Madyama	Pramana	Madyama
satvas	Madyama	Vaya	Madyama

Table 3: Vitals.

BP	120/70mmHg
Pulse rate	78bpm
Respiratory rate	22rpm

Table 4: General examination.

Pallor	Absent	Clubbing	Absent
Icterus	Absent	Lymph Adenopathy	Absent
Cyanosis	absent	Edema	absent

Table 5: Systemic examination.

CNS	Conscious and well oriented to place, time and person
CVS	S1 an S2 heard normally
RS	Air entry bilateral equilibrium

Table 6: Musculoskeletal examination- Lumbo-sacral spine examination.

Gait	Limping	Schober's test	Positive at 1 cm
Posture	Lordosis	Range of movements	Restricted flexion, painful
tenderness	Severe at L4, L5, S1	Faber's test	Negative
SLR test-positive Right lower limb positive at 55degrees Left lower limb positive at 50 degrees			
Pain Vas scale – 7/10			

DIAGNOSTIC ASSESSMENT

- Signs and symptoms of Vatakaphaja Gridhrasi^[3] Ruk, Thodha, Sthamba, Muhur Spandana in Sphik Pradesha radiating towards Kati, Prsta, Uru, Janu, Janga, Pada. Sakthanahkshepa Nigrahayat.

2. Magnetic resonance imaging report of LS spine with entire spine screening-disc bulge at L4, L5, S1 with protrusion resulted in compression of exiting nerves, spinal canal stenosis, cervical and lumbar lordosis due to paraspinal muscle spasm, cervical spine disc bulge noted at C3, C4, C5, C6 suggestive of cervical and Lumbar spondylosis.

SAMPRAPTI (PATHOPHYSIOLOGY)-Nidana sevana(causative factors), such as prolonged standing and excessive travel, vitiates Vata Dosha by increasing Rukshata (roughness) and Kharata (dryness) in the lumbar region. This contributes to an impairment of Shleshak kapha, consequently results in an impairment in the functionality and elasticity and adaptability of the vertebral disc. Additionally, decreased function of the lumbar region's joints results in disc bulge and disc protrusion (kaphavarana), which in ultimately results in nerve compression (Prakshobha of Vatavahini Nadi).

THERAPEUTIC INTERVENTIONS-Sarvanga abhyanga followed by Dashamoola Kashaya Parisheka for 3 days followed by Sarvanga abhyanga with Mahanarayana Taila followed by Baspa Sweda for 4 days. Sadyo Virechana with Gandharva Hastadi Taila 60ml with milk 100ml for 1 day. Kati basti with Brihatsaindhava Taila followed by Patra Pinda Sweda for 7 days, Matra basti with Dhanwantara Taila 30ml for 3 days. Kashaya Basti-Erandamoola Niruha Basti, Vaitarana Basti on alternative days for 6 days. Yoga therapy for 4 days, Physiotherapy- IFT for 3 days.

Table 7: Ingredients of Niruha basti.

Erandamoola niruha basti		Vaitarana basti	
Honey(madhu)	80ml	Guda(jaggery)	80gms
saindhava	5 gms	saindhava	5gms
Sneha -murchita tila taila	120ml	Sneha -murchita tila taila	60ml
Kalka - Erandamoola churna -	40gms	Kalka – shatapuspa churna	40gms
Kashaya – Erandamoola Kashaya	300ml	Kashaya – Erandamoola Kashaya	100ml
Goarka -50ml		Goarka	80ml
		Chincha jala	100ml
Matra basti with Dhanwantara Taila 30ml			

Table 8: Yoga intervention and its benefits.

Vyagrasana vinyasa ^[5]	Movements controlled with breathing. This renders the hamstrings, spine, and hips more flexible and strengthens the spine
Markatasana vinyasa ^[6]	Improving spinal flexibility, enhancing digestion, and calming the mind.
Breathing exercises ^[7]	Relieve stress and anxiety, enhance lung function, improve heart rate and blood pressure, and even aid in pain and sleep management.
Abdomen breathing ^[8]	Reduces muscle tension, strengthens abdominal and back muscles,

	spinal cord
Nadishodana pranayama ^[9]	Helps to rejuvenate the Nervous System
Brahmari ^[10]	is a beneficial yoga pose for stress, anxiety, pain, and restlessness
Makarasana ^[11]	It gives deep relaxation to the shoulders and the spine
Matsyakreedaasana ^[12]	It's a great relaxation pose, helps relieve lower back and sciatic pain
Shavasana ^[13]	Aids relaxation and impacts on nervous system
Nadanusandana ^[14]	Improves sleeps, relieves stress, anxiety

Table 9: TIMELINE.

Day	Date	Complaints	Treatment	Results
1	9-6-25	Pain in the low back, stiffness	Sarvanga abhyanga followed by dashamoola kashaya parisheka Koshta shodhana with gandharva hastadi taila 60ml with milk 100ml Kati basti with brihatsaindhava taila followed by patra pinda sweda Matra basti with dhanwantara taila 30ml	Pain VAS-7/10 Tenderness grade-2 SLR- positive Right limb- 55 degree Left limb -50 degree
2	10-6-25	Pain in the low back, stiffness reduced to 10-20%	Erandamoola niruha basti Sarvanga abhyanga followed by dashamoola kashaya parisheka Kati basti with brihatsaindhava taila followed by patra pinda sweda, yoga	Pain VAS-7/10 Tenderness grade-2
3	11-6-25	Pain in the low back, stiffness	Vaitarana Basti Sarvanga abhyanga followed by dashamoola kashaya parisheka	Pain VAS-6/10 Tenderness grade-1
		reduced to 20-30%	Kati basti with brihatsaindhava taila followed by patra pinda sweda Physiotherapy-IFT, yoga	
4	12-6-25	Pain in the low back, stiffness reduced to 40%-50%	Erandamoola niruha basti Sarvanga abhyanga followed by baspa sweda Kati basti with brihatsaindhava taila followed by patra pinda sweda Matra basti with dhanwantara taila 30ml Yoga, physiotherapy-IFT	Pain VAS-5/10 Tenderness grade-1
5	13-6-25	Pain in the low back, stiffness reduced to 60-70%	Vaitarana Basti Sarvanga abhyanga followed by baspa sweda Kati basti with brihatsaindhava taila followed by patra pinda sweda Yoga, Physiotherapy- IFT	Pain VAS-4/10 Tenderness grade -1
6	14-6-25	Pain in the low back, stiffness reduced to 70%-80%	Erandamoola niruha basti Sarvanga abhyanga followed by baspa sweda Kati basti with brihatsaindhava taila followed by patra pinda sweda	Pain VAS-3/10 Tenderness grade-0
7	15-6-25	Pain in the low back, stiffness reduced to 80%	Vaitarana Basti Sarvanga abhyangawith mahanarayana taila followed by baspa sweda Kati basti with brihatsaindhava taila followed by patra pinda sweda	Pain VAS-2/10 Tenderness grade-0 SLR- negative Right limb- 90 degree

			Matra basti with dhanwantara taila 30ml	Left limb -90 degree
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FOLLOW UP AND OUTCOME

The pain reduction was assessed based on the Visual Analogue Scale (VAS) and tenderness grading. There was a significant improvement in pain, range of movements. Without any pain, the patient was able to stand, walk and, climb stairs. Assessment of Symptoms was done before, after treatment and at the time of follow-up. The patient was discharged with the advice to continue Shaman Aushadhi as follow up medications for 15 days.

Table 10: Shamana chikitsa (~palliative treatment) and follow-up medications.

S. No.	Drug Name	Dosage	Anupana
1.	Chandraprabha vati	2-0-2 after food	Luke warm water
2.	Capsule Neuron	1-1-1 after food	
3.	Rasnasaptaka Kashaya	15ml-15ml-15ml	
4.	Mahayogaraja guggulu	1-1-1 after food	

Table 11: Assessment criteria include before treatment, after treatment.

Assessment Criteria	Before treatment	After treatment (after 7 days on the day of discharge)
Pain	Continuous, aggravates on doing minimal activities VAS:7	Able to do activities without any pain. VAS:2
Tenderness	Grade 2	Grade 0
Range of movements	Restricted flexion, painful and Extension possible	Possible flexion and extension without pain
Schober's test	Positive at 1 cms	6cms
SLR test	Positive Right limb- 55 degree Left limb -50 degree	Negative Right limb- 90 degree Left limb -90 degree

DISCUSSION

Gridhrasi, similar to Sciatica as explained in modern medical science. Sciatica is brought on by the herniation of a disc, which happens when the fluid-filled middle of the disc protrudes outward, rupturing the outer ring of fibres, extending into the spinal canal, and pressing a nerve root against the lamina or pedicle of a vertebra. This liquid that has been forced out of the nucleus pulposus may inflame and expand the tissue around it, which may further compress the nerve root in the narrow spinal canal and exacerbate spinal stenosis. Spinal stenosis causing sciatica may be due to central canal stenosis and exit foraminal nerve stenosis in consideration to Dhatu Kshaya or Avarana Janya. In Vata Kaphaja Gridhrasi, which can be taken into consideration of Medasavrita Kapha. Here, due to Stoka Stoka dosha Nirharanam in

consideration to Gudgata vata and also due to Ushna snigdha guna of Eranda having Vatanulomana property without increasing Kapha and on considering the mechanical nerve obstruction caused by Medasavrita Kapha, Shodhana was subsequently implemented. Here, the concept of gut brain theory acts as "Shulahara" by blocking neurotransmitters, which in turn lowers pain receptors.

1. Sarvanga Abhyanga: Mahanarayana Taila performs Vata Shamaka and Shoolahara in Sarvanga Abhyanga (Oleation therapy). It reduces stored Vata by eliminating Rukshata, Kharata, and Parushata and brings out Snigdhatwa, Slaksnatwa, and Mriduta in the body.^[15]

2. Dashamoola Kashaya Parisheka^[16]- Being Saagni and Drava Sveda, Dashamoola Kashaya Parisheka contributes in eliminating obstruction and performs Vatanulomana. As an outcome, it has Shoolahara and Stambhagna.

3. Kati Basti: As it acts at the site of the lesion and reduces the Vata Dosha, Kati Basti with Mahanarayana Taila, a type of external Snigdha Sweda applied over the local ailment area of the lumbosacral region in Niramavastha, produces effects instantly. In order to relax the back and address any underlying issues, the warm herbal oil facilitates absorption into the muscles, ligaments, and tendons, reducing stiffness and pain. It helps cure degeneration, relieves spasms, restores flexibility, strengthens and nourishes muscles and nerves, and increases local circulation.^[15]

4. Patra pinda Sweda-Patrapinda Pottali Sweda is Snigdha Sweda and a manifestation of Shankara Sweda. A combination of the qualities of the components used it addresses the painful ailments that are mostly caused by Vata and Vata-kaphaja Dosha. The Vedanasthapana, Vata Shamaka (analgesic), Shothahara (anti-inflammatory), and Dhatuposhaka properties (strengthening and nutritional therapy) of Patra Pinda Swedana can help improve muscle tone and tissue function and may alleviate Sciatica symptoms. It also encourages the release of toxins, lowers inflammation, and strengthens the joints, muscles, and nerves (by releasing the stiffness and hence compression over the nerve roots) of the affected area.^[15]

5. Erandamoola Niruha Basti - An Ayurvedic enema treatment entitled Erandmooladi Niruha Basti improves lumbar stenosis through the use of a decoction of Erandmool Kwath, Til Taila, Shatpushpa Churna, Saindhava, and (honey) Madhu. Lumbar stenosis exacerbates Vata Dosha, which this combination helps balance. Madhu and Saindhava enhance the absorption of therapeutic substances and help remove doshas. Til Taila relieves stiffness and dryness by nourishing and lubricating tissues. In combination with Erandmooladi Basti, which has strong Vatahara (Vata-alleviating) effects and improves bowel movement,

Shatpushpa Churna has anti-inflammatory and analgesic properties that help promote the smooth flow of Vata and reduce nerve-related pain and stiffness. Which helps in detoxification. Erandmuladi Niruha Basti is Deepana (appetizer) and Lekhana (scraping), which helps to calm Kapha and reduce symptoms like stiffness and heaviness. The primary component of Erandmuladi Niruha Basti, Eranda (*Ricinus communis* Linn.), has anti-inflammatory, antioxidant, analgesic, and bone-regeneration qualities.^[17]

6. Vaitarana basti- Vangasena (Bastikarma Adhikara) and Cakradatta (Niruha Basti Adhikara) are two Samhitas that describe Vaitarana Basti. Vaitarana Basti is Mrdhu Kshara Basti. As a result, the Basti Dravya uses its Virya to reach both the micro and macro levels. Consequently, the diseased matter is brought to Pakwashaya for removal, which aids in both purifying and healing benefits.^[18] Matra basti with dhanwantara taila to overcome Vataprakopa, Kaphahara.

Internal medications: Rasnasaptak Kwatha has a great Vata Shamaka property. In addition to Aampachana, Rasna, Gokshura, and Eranda are all recognized for their analgesic, anti-inflammatory, and anti-arthritic properties.^[17] **Chandraprabhavati**, due to its anti-inflammatory and analgesic properties helps in conditions like spinal arthritis and lower back pain.^[19]

Mahayogaraja guggulu^[20] is used in Ayurveda practice in many conditions and has analgesic, anti-inflammatory, and neuroprotective effects. According to the classics it acts on Asti- Sandhi-Majjagata Vata and also does Amapachana.^[20] Capsule Neuron- Excellent cellular regenerator and nerve tonic Beneficial in acute cases of sciatica.^[21]

CONCLUSION

The current study's findings indicate that patients have shown the best response in terms of an improvement in functional capacity and the remission of neurological impairments, functional impairment, and other symptom criteria. Sadyovirechana works well in the context of Medasavrita Vatahara and Kaphavruta Vata Hara Chikitsa, Vatanulomana. Niruha Basti-Vaitarana Basti, Erandamoola Niruha Basti are important in resolving the aetiopathogenesis of Vatakapahaja Gridhrasi with respect to sciatica caused by exit nerve foraminal stenosis. External treatments including Parisheka, Kati Basti, Sarvanga Abhyanga, and Patra Pinda Swedana were successful in treating Shoola. The spinal cord will be strengthened and muscle spasms are alleviated with yoga therapy. IFT in physiotherapy is beneficial for radiculopathy and deep muscle spasm.

Declaration of Patient consent- Authors certify that they have obtained patient consent form, where the patient has given his consent for reporting the case along with the images and other clinical information in the journal. The patient understands that his name and initials will not be published and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

ACKNOWLEDGEMENT: Dr DS Wodeyar, Chief Director and Sumatha Rani, Samyama Arogyadhama, Nagarabhavi, Bengaluru.

FINANCIAL SUPPORT AND SPONSORSHIP- Samyama Arogyadhama, Nagarabhavi, Bengaluru.

Conflicts of interest- Nil.

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