

A CLINICAL STUDY ON THE EFFECT OF VAITARANA BASTI WITH MADANAPHALA KASHAYA IN THE MANAGEMENT OF GRIDHRASI

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ABSTRACT

Background: Panchakarma is a unique approach of Ayurveda which is especially designed for internal purification of body via nearest possible route. Vamana, Virechana, Basti, Nasya and Raktamokshana are the Panchakarma. Changing Lifestyle of modern human being has created several disharmonies in the biological system of the body as the advancement of busy, professional and social life, improper sitting posture in office, factories continuous and over exertion jerky movements during travelling and sports-which are major cause for creating undue pressure over spinal cord by postural impairments which in turn leads to many pathological conditions like lower backache, sciatica etc. Sciatica prevalence from different studies ranged from 16%-43%. 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 traumatic Conventional medical approaches often present limitations, typically offering only temporary pain relief or surgical interventions that carry potential side effects. **Aim and Objectives:** This study aimed to assess the role of vaitarana Basti with madanaphala Kashaya in the management of vata -kaphaja Gridhrasi. **Materials and Methods:** This is a single case study of a 31-year-old male clinically diagnosed as Vata-kaphaja Gridhrasi presenting with low back pain radiating to the lower limb, stiffness, walking difficulties, and a positive Straight Leg Raise (SLR) test. The patient was treated with Vaitarana Basti prepared with

Madanaphala Kashaya and appropriate adjuvants. Assessment involved subjective measures, including pain intensity, stiffness, radiating pain, and changes in gait. Objective measures included SLR Test and Range of Moments. **Results:** There was a significant reduction in pain, stiffness, and radiating symptoms after therapy. Improvement in SLR Test and gait pattern indicated better nerve mobility and functional capacity. No adverse reactions were reported during or after treatment. **Conclusion:** Vaitarana Basti with Madanaphala Kashaya proved to be an effective and safe treatment for Vata kaphaja Gridhrasi. The therapy provided notable symptomatic relief and improved quality of life. Further clinical studies with larger sample sizes are recommended to support these findings.

KEYWORDS: Gridhrasi, Sciatica, Vaitarana Basti, Madanaphala Kashaya, Vataja Nanatmaja Vyadhi, Panchakarma.

INTRODUCTION

Modernization, urbanization, and rapid changes in work patterns have significantly changed lifestyles in recent decades. Prolonged sitting in poor postures, sedentary work habits, mechanical strain during travel, and repetitive stress injuries have collectively increased stress on the lumbosacral spine. These factors, along with less physical activity and improper body mechanics, have led to a rise in low back problems, especially sciatica. Today, sciatica is increasingly common among those of working age, negatively impacting work efficiency, mobility, and quality of life.

Low back pain is among the most common musculoskeletal complaints worldwide, with a lifetime prevalence estimated between 60% and 90%. Sciatica, which involves pain radiating along the sciatic nerve, typically affects individuals aged 30 to 50. If not managed properly, it can lead to neurological issues such as sensory changes, motor weakness, or even bowel and bladder dysfunction.

Conventional medical treatment mainly involves pain relievers, non-steroidal anti-inflammatory drugs (NSAIDs), physiotherapy and in severe cases, surgery. However, these methods often provide only temporary relief, failing to address the root cause. Additionally, there may be risks of side effects or recurrence. This emphasizes the need for a complete and sustainable treatment approach.

In Ayurvedic texts Gridhrasi listed under Nanatamja Vata vyadhi in the Charaka Samhita. Gridhrasi, the name, itself indicate 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 pain), Muhuspanan (Tingling sensation), Stambha (stiffness) in the sphik, kati, uru, Janu, Jangha and pada in order and sakthikshepanigraha (i.e., restriction in upward lifting of lower limbs) 7 In Gridhrasi, Tandra (Drowsiness), Gaurav (Heaviness)and Aruchi (Anorexia) may be present if Kapha is associated with vata.

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Ayurveda offers a range of treatments for Gridhrasi. Basti is vital for treating Vata disorders and is considered an important therapy due to its extensive effects on the body. Classical texts, like Chakradatta, recommend Vaitarana Basti specifically for treating Gridhrasi. This treatment, due to its unique ingredients and effects, can detoxify and soothe, targeting the problematic Vata and related issues.

In this case study, a 31-year old man was planned for vaitarana basti with madanaphala kashyam which resulted in excellent symptomatic relief. Thus, this study aims to evaluate the effectiveness of Vaitarana Basti in treating Gridhrasi, to establish a viable, affordable, and holistic treatment option.

CASE REPORT

Patient Information

Age/Gender: 31-year-old male

Occupation: Civil engineer

Medical History: No known health issues

Chief Complaints - Duration

1. Low back pain radiating to both lower limbs for 6 months.
2. Associated heaviness in both lower limbs with intermittent numbness.

MATERIAL AND METHODS

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

History of Present Illness

A 31-year-old male was apparently healthy before 6 months. After a self-fall resulting in blunt trauma then he started complaints of low back pain and then gradually radiates to the posterior aspect of his thighs, knees, calf region and feet over the past month. After a self-fall resulting in blunt trauma. He consulted a local doctor and was given oral medications. However, this did not provide relief, and the symptoms worsened. He also reported heaviness in his lower limbs and numbness. So he approached to our hospital for further management.

Personal history

Appetite	Good appetite
sleep	Disturbed due to pain
Diet	Veg
Bowel	Twice a day
Micturition	5 times a day
Addiction	Ocassional Alcoholic

General physical examination

General condition	Moderate
Blood pressure	120/80mmofHg
Pluse rate	82/min
Respiratory rate	18/min
Tongue	Coated
Temperature	97degree
Pallor	Absent
Icterus	Absent
Cyanosis	Absent
Clubbing	Absent

Local examination

Tenderness – present over the lumbar region

SLR test positive -at right 45° left 55°

Gait- Limping

Astavidha pariksha

Nadi	Pitta kapha
Mala	Regular, once/day
Mutra	Normal, 5times/day
Jihwa	Liptata
Shabda	Prakrita
Drik	Prakrita
Akruti	Madhyama
Sparsha	Normal

Diagnosis – VataKaphaja -Gridhrasi**Investigation**

Hb%	12gm%
RBS	110
MRI	mild diffuse bulge at L4, L5 level

Therapeutic Intervention

Poorvakarma	Sthanika Abhyanga and Swedana with Murchita Tila Taila.
Pradhanakarma	Vaitarana Basti for 8 days.
Paschatkarma	Take rest after Sukhapurvaka Pratyagamana of Basti Sukoshna Jala Snana Advise to take Laghuahara

Treatment plan**Basti pattern**

Days	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
Basti	NB	NB	AB	NB	NB	AB	NB	NB

Note: AB-Anuvasana Basti NB-Niruha Basti.

Vaitarana basti

Content of Basti	Quantity
Guda	1/2pala(24gm)
Saindhava	1 karsha(12gm)
Sneha(tila taila)	Ishat (30ml)
Amleeka kalka	1 pala(48ml)
Madanaphala Kashaya	1 kuduva (192ml)

Anuvasana Basti is administered using Sahachardi taila.

Basti Retention time

S. no.	Date	Basti Name	Dose	Given Time	Retetion time
1	5/1/26	NB	310	8.30 am	5min
2	6/1/26	NB	310	8.32am	7 min
3	7/1/26	AB	100ml	9.00am	9hours
4	8/1/26	NB	315	8.30 am	3min
5	9/1/26	NB	315	8.30 am	6min
6	10/1/26	AB	100ml	9.00am	6hrs
7	11/1/26	NB	310	8.25am	2minn
8	12/1/26	NB	310	8.30am	6min

Outcome**At the End of Therapy**

Parameters	Before treatment	After treatment	After follow up
Ruk	3	2	1
Stambha	4	3	0
Gourava	2	1	1
Toda	1	1	1
VAS	6	4	1
SLR	3	2	1
Schobers test	2	1	0
Range of moments			
Forward flexion	2	1	1
Backward extension	2	1	1
Right lateral flexion	1	0	0
Left lateral flexion	1	0	0

DISCUSSION

Despite its Rectal administration, Vaitaran Basti was well – tolerated and accepted by patient, with no adverse effects reported. This therapy is cost-effective, easy to prepare and minimally invasive for both patient and practitioner. Since the pakwashaya is the primary seat of vata Basti directly targets the root cause of Gridhrasi more effectively than oral route.

Vaitaranabasti is a type of Niruha basti which is mentioned in Chakradatta, Vangasena Samhita^[9,10] and Vrunda Madhava. It is Shodhaka and Kaphavata Shamaka in nature^[11] Vaitarana basti can be administered in such patients in initial stage itself to relieve pain and inflammation immediately compared to other external therapies and internal oral medications.

Saindhava lavana, guda, chinchakalka, taila and gomutra are the ingredients of Vaitarana basti. Guda is having sara guna and Sristha vinmutra.^[12] Chinchakalka is anti-inflammatory and analgesic. Since, it is having Amla rasa it acts as a mudha vatanulomaka also.^[13] Vaitarana basti acts as Anti-inflammatory and analgesic. There are many treatment protocols for gridhrasi in its initial phase to reduce Aamavastha or anti-inflammatory phase like internal medication, ruksha basti, ruksha sweda, application of lepa etc. Among these, Vaitarana basti deserves the most important place.

In present days Gomutra is replaced with Madanaphala kashaya in the Vaitarana basti. It is intended to take Madanaphala kashaya in place of gomutra as due to fear of unhygienic, chances of infection from leptospirosis etc. and also due to reduced availability of hygienic Gomutra. Also the religious aspects binds the limitations in usage of Gomutra. Madanaphala

kashaya being Tikta, Madura rasa, laghu, ruksha guna kapha vatahara and Laghu ushna^[14] in nature and does the aamanirharana. In the Vatakaphaja Gridrasi the above said properties are helpful. Where Vaitarana is said to be Shodhaka and Kaphashamaka and amahara. It is less expensive, needs minimum man power, as the route of administration is rectal route, and there is no question of palatability. So an attempt was made to evaluate the efficacy of Madanaphalakashay Vaitarana basti in Gridrasi.

Saindhava lavana

RASA	GUNA	VIRYA	VIPAKA	KARMA
Lavana	Laghu Snigdha, Sukshma	Ushna	Ushna	Chakushya, Hridaya, Ruchikara

Action on Basti: Due to its sukshma and teekshna properties, it helps to pass the drug molecule in systemic circulation through mucosa. Thus helps in Basti Dravya to reach up to the molecular level. It also helpful for the elimination of waste due to its irritant property. It is capable of liquefying the viscid matter and breaking it into minute particles.

Guda (jaggery)

RASA	GUNA	VIRYA	VIPAKA	KARMA
Madhura	Snigdha, kshara	Natisheeta	Madhura	vata-pittaghna

Action on Basti: In this Basti instead of honey (Madhu) guda is used. It along with Saindava makes homogeneous mixture, to form a solution having properties to permeable the water easily. Here, Purana Guda should be taken as it is Laghu, Pathya, Anabhisyadi, Agnivardhaka, and Vatapittaghna. It also helps in carrying the drug up to micro-cellular level.

Amleeka Kalka

RASA	GUNA	VIRYA	VIPAKA	KARMA
Amla Madhura	Laghu, Ruksha	Ushna	Amla	Kapha-vataghna

Action on Basti-Chincha is having Vata-Kaphashanmaka, Ruksha and Ushna properties. Ruksha Guna helps in counteracting the Ama which is chief pathogenic factor of many disease.

Madanaphala Kashaya

This ingredient is traditionally known for its purifying and Vata-Kapha reducing actions. It helps clear blockages in the channels and improves neuromuscular function.

RASA	GUNA	VIRYA	VIPAKA	KARMA
Tikta, Madura	Laghu, Ruksha	Ushna	Katu	Vatakaphahara

Tila Taila

Sneha Dravyare helps reduce Vata Dushti, soften micro-channels, remove compact waste, and clear blockages within the channels. In this Vasti, Tila Taila mixed with Guda and Saindhava creates a consistent mixture. It also protects the mucous membrane from the negative effects of irritating substances in the Vasti Dravya.

Before Basti administration, Sarvanga Abhyanga and Swedana were performed as preliminary treatments. These helped relax the muscles, reduce stiffness, and direct aggravated Doshas toward the digestive tract. The scheduled YogaBasti treatment, which combined Niruha Basti and Anuvasana Basti, balanced both cleansing and nourishing aspects.

After the treatment, the patient showed significant improvement. Symptoms such as pain intensity, stiffness, and heaviness in the legs decreased. The improved SLR indicates better nerve root movement and less nerve compression. Functional tests, like Schober's test and spinal movements, also improved, showing better flexibility in the lower back area.

The success seen in this case may come from the combined purifying and calming effects of Vaitarana Basti. This treatment helped reduce the heightened Vata Dosha, clear blockages, and restore normal neuromuscular function. Therefore, this therapy is important in the overall management of Gridhrasi.

CONCLUSION

Gridhrasi is a troublesome condition that affects the lower back and legs, making daily activities challenging and also disturbs one's life style.

This case study shows that Vaitarana Basti combined with Madanaphala Kashaya is an effective treatment for Vata kaphaja Gridhrasi. It significantly reduced pain, stiffness, and radiating symptoms while improving mobility and SLR test results.

The treatment was safe, cost-effective, and well-tolerated, with no negative side effects noted during therapy. These findings illustrate the potential of Basti therapy as a key Panchakarma treatment for Vata-dominant neuromuscular disorders.

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