

A CLINICAL STUDY OF RAKTMOKSHANA AND VAJIGANDHADI TAILA MATRA BASTI INGRIDHARSI W.S.R. SCIATICA

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ABSTRACT

The word '*Gridharsi*' indicates that the patient's gait is similar to that of a '*Gridhra* (Vulture)'. It is one of the debilitating disorders that causes a person's daily routines to be disrupted. Because of today's stressful lifestyle, its incidence is rapidly increasing over the world. *Gridharsi* is linked to Sciatica since it shares some characteristics with the disease. Sciatica is a condition in which the sciatic nerve is compressed or irritated by a problem in the lower back. Because there is no known cure for the ailment, numerous studies have been conducted in order to find a good answer. The condition has received a lot of attention from ancient *Ayurvedic* physicians. *Gridhrasi* is treated in *Ayurveda* using a variety of treatments, some of which are easy, safe, and cost-effective, such as

Bheshaja, Snehana, Swedana, Siravedha, Agnikarma, and Basti.

INTRODUCTION

In today's world of globalization, people from various countries and civilizations are becoming intently connected, resulting in a shift in people's lifestyles, which has resulted in several biological disharmonies. Competition and advancement have resulted in a stressful and demanding life in the modern period. They don't have enough time to take care of themselves. Fast food, irregular eating habits, ignoring natural impulses, and a lack of adequate sleep and relaxation are all factors that lead to the development of many diseases.

Ayurveda is the 'Science of Life,' which deals with all elements of life and attempts to not only cure sickness but also to keep healthy people healthy.

Diseases are caused by *Dhatuvaishamyata*, according to *Ayurveda*, whereas *Dhatusamyata* preserves regularity.^[1] The equilibrium of *Jathragni*, which is further regulated by the *Pragaapradh*, *Asatmendriya Samyoga*, and *Parninama*, is necessary for the appropriate production of *Dhatus*. *Dhtwagnis* and *Bhootagnis* are reliant on *Jathragani* to function properly. If these functions well, the homeostasis of the *Doshas*, *Dhatus*, and *Mala* is maintained, and the stable individual is referred to as being at the *Prakriti* stage. *Vikriti* is the exact opposite of it.

Panchakarma, a different type of *Ayurvedic* purification therapy, has recently gained a lot of attention. It is a treatment that rids the body of poisonous elements that have built up in the body as a result of sickness and/or inadequate diet. *Panchakarma* aids in the re-establishment of balance and longevity in the body. The majority of *Panchakarma* therapies are used to treat chronic conditions. Since *Panchakarma* totally eliminates vitiated *doshas*, it avoids disease recurrence.

The disease *Gridharsi* is counted in 80 types of *Nanatmaja Vata-vyadhi*, while *Kapha* as *anubandhi dosha* is sometimes discovered as the causative factor with *Vata dosha*.^[2]

Acharya Charaka mentioned *Ruka* (Pain), *Toda* (Pricking sensation), *Stambha* (Stiffness), and *Muhuspandana* (Twitching) in *Sphik* and radiating towards the *Kati*, *Prushtha*, *Uru*, *Janu*, *Jangha* and *Pada* respectively. These are the cardinal symptoms of *Vataja Gridharsi*. In *Vata-Kaphaja* type of *Gridharsi* in addition to the above symptoms, *Tandra* (Drowsiness), *Gaurava* (Heaviness) and *Aruchi* (Anorexia) are also present.^[3]

Siravedha, *Basti*, and *Agni karma* are considered the principal treatment techniques for *Gridhrasi*, according to the classics. *Siravedha* (one technique of bloodletting) is one of the fascinating subjects and satisfactory answers for *Gridhrasi-Roga* (disease).^[4] *Siravedha* and *Basti* both therapy approaches are mentioned in the classics in the treatment of *Gridhrasi*, each with their unique role in healing the disease. *Gridhrasi* has been demonstrated to have better results in many research trials of a single modality. The study's ultimate goal is to determine which procedure is more beneficial in *Gridhrasi*.

In Modern It is closely linked to "Sciatica". Sciatica is a painful ailment that starts in the

lumber region and spreads to the thigh and leg on the posterolateral side. As a result, the affected leg's range of motion is limited, and the patient is unable to walk normally. Low back discomfort is the second most prevalent complaint, after the common cold. Every year, around half of all working adults get a back injury. Sciatica affects anywhere from 11 percent to 40 percent of people.

For the treatment of sciatica, modern medicine offers a variety of options, including conservative treatment (analgesics), epidural steroid injection, peri-radicular infiltration, and surgical treatment. Each of these modalities has its own set of restrictions and drawbacks. Cold and hot packs are used to relieve pain temporarily.

AIM AND OBJECTIVES

1. To study the conceptual and clinical aspects of the disease *Gridharsi*/ Sciatica as per *Ayurveda* and Modern science.
2. To evaluate the effect of *Vajjigandhadi Matra Basti* in *Gridharsi*.
3. To evaluate the effect of *Raktmokhshan* in *Gridharsi* w.s.r. to Sciatica.
4. To study in detail about *Basti*.

MATERIAL AND METHOD

Selection of cases- An open labeled clinical study, in which 30 patients (including both group) will be selected from OPD/IPD of DSRRAU, Jodhpur on the basis of simple randomized sampling procedure satisfying the following inclusion criteria.

Grouping of patients - After complete examination and investigation, 30 patients will be divided randomly into two group (15 patients in each group).

Group A- Will be given *Vajjigandhadi Matra Basti* for 15 days.

Group B- Will be given *Siravedha* about 50 to 150ml of blood is letted for one time.

Inclusion criteria

1. Patients with classical sign and symptoms of *Gridharsi* and diagnosed cases of Sciatica.
2. Patient between age group of 16-70 years of either sex.
3. Sciatica due to L4-L5-S1 lumbar disc degenerative disease.
4. Patients willing to give written consent.

Exclusion criteria

1. Patients with severe renal and cardiac disease.

2. Pregnant woman.
3. Malignancy.
4. Infectious condition of spine.
5. Severe anaemic.
6. Specific fever like dengue.
7. Patient who have lost the control on bowel and bladder.
8. Trauma.

Assessment criteria

Table no. 1: Subjective parameter.

Parameters	Pain assessment	Score
1. <i>Ruka</i> (Site of pain)	No pain	00
	Radiation of pain up to <i>sphik,kati,pristha</i> and <i>uru</i> predesha of one leg or both	01
	Radiation of pain up to <i>sphik,kati,pristha,uru</i> and <i>janu</i> of one or both legs	02
	Radiation of pain up to <i>sphik,kati,pristha,uru,janu</i> and <i>jangha</i> of one or both legs.	03
	Radiation of pain up to <i>sphik,kati,pristha,uru,janu,jangha</i> and <i>pada</i> of one leg or both.	04
2. <i>Stambha</i> (Stiffness)	No stiffness	00
	For few minutes after sitting long duration but relieved by mild movements	01
	More than 1 hour or more than once in a day but routine works are not disturbed	02
	Mildly affecting the daily routines	03
	Episodes of stiffness lasting for 2-6 hours	04
3. <i>Toda</i> (Pricking sensation)	No pricking sensation	00
	Occasional pricking sensation	01
	Mild	02
	Moderate.	03
	Severe	04
4. <i>Gaurava</i> (Heaviness)	No	00
	Occassional heaviness	01
	Frequent feeling of heaviness affecting the normal movements	02
	Severely affecting the normal movements	03
	Totally hampering the normal movements	04
5. <i>Arochaka</i> (Anorexia)	No	00
	Feeling to take food but not having taste.	01
	<i>Anannabhilasha</i>	02
	<i>Bhktadvesha.</i>	03
	<i>Abhaktachanda</i>	04

Objective parameters**Table no. 2.**

S. no.	Test		Grade
1	Straight Leg Raised (SLR) Test	No pain at 90 ⁰	00
		Pain >71 ⁰ up to 90 ⁰	01
		Pain >51 ⁰ up to 70 ⁰	02
		Pain >31 ⁰ up to 50 ⁰	03
		Pain below 30 ⁰	04
2	Walking Distance Test (In Meter)	More than 80m up to 100m within 5mintues	01
		More than 60m up to 80m within 5mintues	02
		More than 40m up to 60m within 5mintues	03
		More than 20m up to 40m within 5mintues	04
		Up to 20m within 5mintues	05

Selection of drugs: *Vajigandhadi Tail* for *Matra Basti*.

Ingredient of vajigandhadi matra basti taila

1. *Kawath Darvaya*-(*Aswagandha*, *Bala*, *Bilva*, *Salaparni*, *Prsniparni*, *Brahati*, *Kantkari*, *Goksura*, *Agnimantha*, *Patala*, *Gambhari*, *Syonaka*)- 1 Part
2. *Eranda Tail*- One Fourth part of *Kawath Darvya*.^[5]

Procedure***Raktmokhshan***

Purva karma: - Better performance of the *Siravyadhana* and for the management of the complications, the following material should be arranged

- Proper Instrumentation.
- Snehpan from *Goghrita*.
- To make patient fit for *Siravyadhana*.
- Take inform consent.
- Take *Abhyanga* and *Swedana*.

Pradhana karma: - In *Gridharsi Siravyadhana* should be done with flexion of knee joint.^[6] Puncturing should be of the size of the *Yava* (In muscular area).

It should be adopted after the patient has been satisfied with a drink of *Yavagu*.^[7]

Pashchata karma:- After completion of procedure whenever blood flow stops automatically, *Yantrana* should be removed and instrument should be withdrawing.

Basti karma**Poorva karma**

- Preparation of *Basti* dravyas.
- *Sthanika Abhyanga*.
- *Sthanika Swedana*.

Pradhana karma: - Patient should lie on his left side extending his left leg and folding the right knee then they should take the *Bastiputaka* (enema bag) by left hand pressing with the right one.

The lubricated nozzle should be introduced into the lubricated anus and the *Bastiputaka* should be pressed without moving the hand so that the content is let out into the *Guda Marga*. It should be pressed neither too fast nor too slow and without too great or little too force, towards the vertebral column keeping some residue in the *Bastiputaka*, as it contains the air.

Paschata karma

- Patient should rest for a while till *Basti Pratyagamana* kala.
- And *Nireekshan* followed with *Pathya Bhojana*.

OBSERVATIONS

- Majority of patients i.e. 36.67% were belonging to 31-45 years of age group. Maximum patients i.e. 53.33% were male, were *Hindu* (96.67%), were married (73.33%), were graduate (53.33%), were middle (53.33%), were house working (46.67%). Maximum patients i.e. 70% were having veg diet, and were having *Asamyaka Nidra* (43.33%).
- Maximum patients were of Vata-pittaj Prakruti (40%), had Rajasa Pradhana Prakruti (50%), Madhyama Satva (73.33%), Madhyama Satamaya (53.33%), Ras Sara (36.67%), Madhyama Samhanana (60%). Maximum patients were of Mandagni (46.67%), and were of Madhyama Koshtha (53.33%). Maximum patients were having chronicity below 1 year (66.67%), and were of gradual mode of onset in (83.33%). Maximum patients were consuming Laghu ahara (66.67%), were indulged in Kriya Atiyoga (Prolonged standing) (80%), and Vegadharana (63.33%).
- Maximum patients i.e. 65% were of Vataja type of Gridharsi, right leg affected in 20 patients (66.67%). Out of 30 patients, Ruk, Stambha, Gaurav were found in 100%, 96.67%, 93.33% patients, complains of Toda and Arochaka was seen in 90%, 83.33% patients. Basti Samyak Yoga Lakshana Out of 30 Maximum 100 % Patients had

Regulation of the excretory urges and 11 (73.33%) patients had Increase of strength, 10 (66.67%) patients had Good sleep, 6 (40%) Patients had Lightness of body, and 4 (26.67%) Patients had the clarity of Rakta, Mamsa etc. Dhatus and sense organs symptom.

- Siravedhan Samyak Yoga Lakshana reveals that 10 (66.67 %) Patients had Lightness of the body and 11 (73.33%) patients had cheerfulness of mind, 9 (60.00%) Subsiding of severity of the disease, and 5 (33.33%) Patients had Mitigation of suffering symptom.
- No side effect was reported by any of the patients during the course of therapy. All the patients tolerated Panchkarma procedure very well.

RESULTS

Table no. 3: Showing effect of therapy in Subjective Parameters (Wilcoxon Matched Pairs Signed Ranks Test).

Sign & Symptoms	Gr	Mean score		Difference	% Relief	S.D ±	S.E ±	P value	Result
		BT	AT						
Ruka (Pain)	A	1.800	1.000	0.8000	44.44	0.7746	0.2000	0.0024	V.S.
	B	2.467	1.133	1.333	54.05	0.6172	0.1594	<0.0001	E.S.
Stambha (Stiffness)	A	1.933	1.200	0.7333	37.93	0.9612	0.2482	0.0134	S.
	B	2.000	0.8667	1.133	56.67	0.9904	0.2557	0.0009	E.S.
Toda (Pricking sensation)	A	2.200	1.067	1.133	51.52	0.6761	0.1746	0.0001	E.S.
	B	2.067	0.8667	1.200	58.06	0.6761	0.1746	0.0001	E.S.
Gaurav (Heaviness)	A	1.667	1.067	0.6000	36.00	0.7368	0.1902	0.0098	V.S.
	B	1.400	0.7333	0.6667	47.62	0.6172	0.1594	0.0020	V.S.
Arochaka (Anorexia)	A	1.267	0.6667	0.6000	47.37	0.5071	0.1309	0.0020	V.S.
	B	1.267	0.5333	0.7333	57.89	0.7037	0.1817	0.0020	V.S.

Table no. 4: Showing effect of therapy in Objective Parameters (Paired 'T' Test).

Variable	Gr	Mean score		Differ	% Relief	S.D ±	S. E ±	P value	T value	S
		BT	AT							
StraightLeg Raised Test	A	2.267	1.533	0.7333	32.35	0.7988	0.2063	0.0016	3.556	V.S.
	B	2.333	1.333	1.00	42.86	0.8452	0.2182	0.0002	4.583	E.S.
Walking Distance Test	A	2.533	1.467	1.067	42.11	0.5936	0.1533	<0.0001	6.959	E.S.
	B	2.733	1.133	1.600	58.54	0.9103	0.2350	<0.0001	6.808	E.S.

Inter group comparison of effect of therapies

Table no. 5: Showing inter group comparison in subjective parameters: (Mann-Whitney test).

S. no.	Subjective parameter	Mean diff. Group A	Mean diff. Group B	MW-U	P-Value	Result
1.	<i>Ruka</i> (Pain)	0.8000	1.333	76.50	0.0393	S.
2.	<i>Stambha</i> (Stiffness)	0.7333	1.133	88.50	0.1433	N.S.
3.	<i>Toda</i> (Pricking sensation)	1.133	1.200	105.00	0.3774	N.S.
4.	<i>Gaurav</i> (Heaviness)	0.6000	0.6667	109.50	0.4538	N.S.
5.	<i>Arochaka</i> (Anorexia)	0.6000	0.7333	108.00	0.4243	N.S.

Table no. 6: Showing inter group comparison in objective parameters (Unpaired t test).

Objective Parameter	Mean diff. Group A	Mean diff. Group B	T value	P value	Result
Straight Leg Raised Test	0.7333	1.00	0.8881	0.1910	N. S.
Walking Distance Test	1.067	1.600	1.901	0.0338	S.

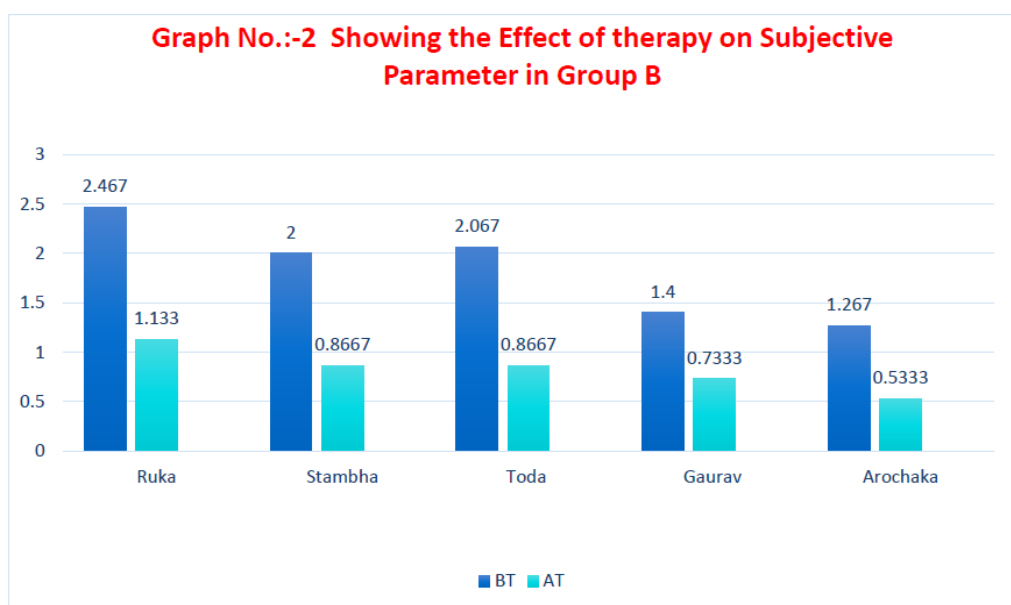
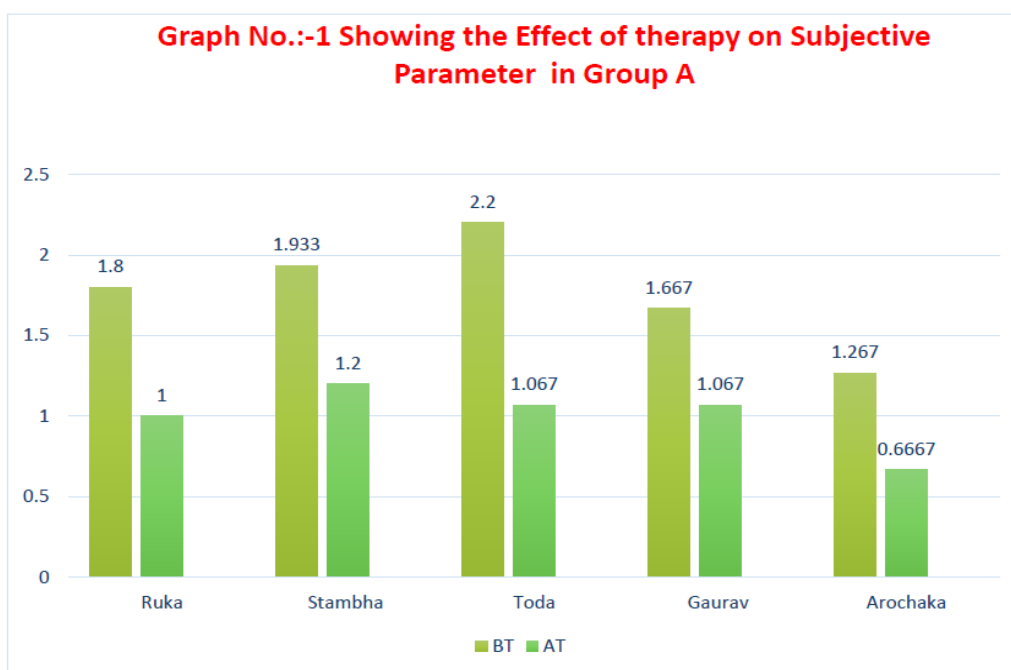
Total effect of therapy in the patients of *gridharsi* (Sciatica)

Table no. 7

Cured	100% relief in sign and symptoms
Marked improvement	>75% relief in sign and symptoms
Moderate improvement	51 to 75% relief in sign and symptoms
Mild improvement	25 to 50% relief in sign and symptoms
No Improvement	Below 25%

Table no. 8

	Group A (15Patients)	%	Group B (15 Patients)	%
Cured	0	0%	0	0%
Marked improvement	0	0%	1	6.67%
Moderate improvement	4	26.67%	6	40%
Mild improvement	9	60 %	8	53.33%
No Improvement	2	13.33%	0	0%



DISCUSSION

- Probable mode of action of *siravedha***

The *Kutharika Shastra*'s traditional *Siraveadha* process was modified by using a 20-number disposable scalp vein as equipment, which was readily available and proved to be suitable. Septic precautions are also not an issue. *Kutharika* and *Trikaurcha*, both very primitive *Shastra* were used in ancient times. It is nearly impossible in the modern era because the *Kutharika Shastra* may cause injury to the vein's posterior wall during the surgery, resulting in a subcutaneous hematoma. Due to his or her delicate physical structure, the patient will not

be able to prepare for such a procedure.

Pitta or *Raktaja Vyadhies*, or *Pitta* in *Anubandha* to *Vata Dosha*, are the most common indications for *Siravedha*. In such cases of *Vata Prakopa* caused by *Kapha* and *Pitta Avarana*, *Siravedha* can help in removing the *Avarana* of *Pitta* and *Kapha Dosha*, allowing *Anuloma Gati* of vitiated *Vata* to emerge, indirectly curing *Vatika* symptoms as well as *Kapha Dosha* symptoms.

Some patients experienced immediate relief from their symptoms after the procedure, but the problems resurfaced three to four days later. It could be due to pure *Vataja Gridharsi* without *Kapha's Anubandha*. So, hypothetically, when there is *AvaranaJanya Samprapti* of *Gridharsi* in *Vata Kaphaja Gridharsi*, the *Siravedha* may be beneficial.

- **Probable mode of action of *vajigandhadi matra basti tail***

Dashmoola is well-known for its anti-inflammatory and analgesic properties. It's known as the "Ayurvedic Painkiller." Tridoshaghna, Deepana, Amapachaka, and Anulomana are also the characteristics. It not only reduces *Vata*, but it also reduces *Kapha* and relieves pain, which is the primary symptom of *Gridharsi*.

Bala is known for its *vatahara* and *balya* properties. One of its synonyms is *Sthira*, which denotes its ability to decrease *Vata's chala Guna* while also providing *Dhatus* with *Sthiratva*. It strengthens all *Dhatus* and may benefit in the fight against *Dhataukshaya*. *Mansa* and *Meda* *Dhatu*, in especially, are nourished. Its anti-inflammatory properties have already been proven.

Although *Bilva* is included in *Dashmula*, it is mentioned individually here because it refers to *Bilwa Twak*. Its aliases are *Asthapanopaga*, *Anuvasanopaga*, and *Shothaghna*. It is sometimes known to as *Kapha Vatashamaka*.

Ashwagandha is a well-known *Vatashamaka* adjuvant and *vatashamaka* medication. It also has *Vedana Sthapak* and *Shoola Prashaman* properties, which are beneficial in pain-related disorders such as *Gridharsi*. It also contains *Dipana*, *Anulomana*, and *Mutrala*, which help in normal digestion, the elimination of *Malas*, and anti-inflammatory qualities. Its versatility is increased by its *Bruhana*, *Balya*, and *Rasayana Karma*.

Snigdha, *Guru*, *Ushna*, and other *Gunas* in *Eranda Taila* are completely contradictory to *Vayu's* *Gunas*. As a result, *Vata* *kaphahara* is also known as *Shothahara* and *Shoolahara*. It affects

Kapha, Pitta, Vata, and Avrita Vata.

Many Acharya's praise it for its use in nerve disorders and rheumatic ailments like lumbago and Sciatica. As a result, each medicine in the combination has the qualities required to break the disease's Samprapti. As a result, the combination was selected for the current.

CONCLUSION

The following conclusions are drawn after logical interpretation of the results obtained in this clinical study, which are listed below:

- Gridhrasi can be well equated with sciatica syndrome in modern parlance.
- Though Raktmokshana is better treatment for management of pain (*Ruka*) but results never sustain for longer duration.
- In symptoms like *Stambha* (Stiffness), *Toda* (Pricking sensation), *Gaurav* (Heaviness), *Arochaka* (Anorexia) and *Gaurava* (heaviness) derived statistically similar effect on comparison between two groups.
- On comparison between two groups, *Siravedha* was found more effective than *Matra Basti* in *Ruka* (Site of pain), *Stambha* (Stiffness), *Toda* (Pricking sensation), *Gaurav* (Heaviness), *Arochaka* (Anorexia) and *Gaurava* (heaviness).
- Only statistically significant difference was found between the two groups in *Ruka* (Site of pain).
- Both the procedures are effective, simple, cheap and safe for the patients having *Gridhrasi*. But *Siravedha* is more effective in treating the cardinal symptoms of *Gridhrasi*.
- In this study none of the patients developed neither any adverse symptoms nor any side effects during the course of treatment. These medicaments in therapeutic doses are very safe. No significant changes have been observed in routine investigations like blood and urine as well as plain x-ray of Lumbo-sacral spine after treatment.

Suggestions for further study

- To exactly evaluate the changes, one should carry out M.R.I., CT-scan of spine etc. in radiological investigations.
- Sciatica is present in many different pathological conditions as a symptom. So specific condition can be taken for the further studies and the exact effect of the treatment can be assessed in the particular condition.
- Grouping should be based on Dosha Anshash Kalpana.

- Both Siravedha and Matra Basti should be evaluated in both Vataja and Vata Kaphaja varieties of Gridhrasi separately.
- Study sample should be large. The present thesis work is presented with the hope that the observations and the results wider the scope for further researcher and advancement in this aspect of Ayurvedic medicine for the betterment of mankind.

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