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A RANDOMIZED COMPARATIVE CLINICAL STUDY ON THE EFFECT OF DVATRIMSAKA GUGGULU AND RASNA GUGGULU IN THE MANAGEMENT OF GRIDHRASI W.S.R TO SCIATICA

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ABSTRACT

Objective: To compare the therapeutic effects of *Dvatrimsaka Guggulu* and *Rasna Guggulu* in reducing the signs and symptoms of *Gridhrasi*/Sciatica. **Design:** Open randomized comparative clinical-study with pre and post-test design. Setting: O.P.D. and I.P.D. of Sri Dharmasthala Manjunatheshwara College of Ayurveda & Hospital, Udupi. **Interventions:** The patients selected were randomly divided into 2 groups of 15 each by adapting the permuted block randomization method. Selected patients were treated with oral administration of *Dvatrimsaka Guggulu* for a period of 14 days with the *Anupana* of warm water in one group and another group was administered with *Rasna Guggulu*. **Main outcome measures:** Pain —

Greenough and Fraser Scoring method; Stiffness, Pricking type of pain, Twitching, Functional ability by Sugarbaker and Barofsky Clinical Mobility Scale; Functional Disability by Oswestry Disability Assessment Questionnaire; Restricted Limb Movement/SLR Tests; Neurological Deficit - Herron and Turners Rating. **Results:** *Dvatrimsaka Guggulu* and *Rasna Guggulu* are effective in the remission of the symptoms of *Gridhrasi* as evidenced by statistically significant reduction in the symptom score of various subjective and objective parameters. **Conclusion:** The effectiveness of the *Dvatrimsaka Guggulu* is supreme

comparing to that of *Rasna Guggulu* as evidenced by the various outcome measures and the statistical analysis shows that it is significant.

KEYWORDS: Gridhrasi, Dvatrimsaka Guggulu, Rasna Guggulu, Sciatica.

INTRODUCTION

Gridhrasi is one among 80 types of Nanatmaja Vatavyadhi. [1] Action of walking is the function of Karmendriya especially both the Pada. Site of Gridhrasi is usually both the lower limbs. Gati of affected person is altered like that of Gridhra bird referred to vulture due to extreme pain similar to vulture piercing its beak into prey. [2] Most of the Clinical features of Sciatica resemble to that of Gridhrasi. Sciatica can be defined as the radicular pain related to the sciatic nerve trunk. [3] Sciatica causes pain, burning sensation, numbness, tingling sensation, radiating from the lower back and upper buttock down the back of the thigh, calf and to the foot, that is along the course of Sciatic nerve. [11] Pain is the cardinal symptom of Sciatica. The lifetime incidence of this condition is estimated to be between 13% to 40%. [4] Most commonly found in people age 25 to 45 years, men are more frequently affected than women. Highest incidence is found in 5th decade and the disease has been reported to occur in 1% to 10 % of population. Conventional medicine treatment of sciatica is limited to NSAID's, Opioid and non opioid analgesics, muscle relaxants, corticosteroid injections, physiotherapy and surgery. [5] Despite of these expensive treatments and hospitalization the relapse of conditions intensify the gravity of problem. On other hand our science suggests cost effective and beneficial approach.

Shamana and Shodhana Chikitsa are explained for Gridhrasi. Shodhana includes mainly Snehana, Swedana, Basti, Virechana etc. Specific treatment modalities like Siravyadha, Agnikarma, Katibasti. Shamana Chikitsa includes medicinal preparations which are proved to be effective, one among that is Guggulu. It has Vatashamaka and Shulahara property. [6] Shamana treatment is cost effective as well as convenient to patients as it does not require hospitalization. Some of the Shamana Yoga specifically been mentioned for Gridhrasi itself include Dvatrimsaka Guggulu and Rasna Guggulu. [8] Dvatrimsaka Guggulu contains most potent 32 different drugs and there is no much research work carried on this formulation, Hence an effort will be put in this regard to compare the effect of Dvatrimsaka Guggulu and Rasna Guggulu in Gridhrasi.

Objectives

• To compare the therapeutic effects of *Dvatrimsaka Guggulu* and *Rasna Guggulu* in reducing the signs and symptoms of *Gridhrasi*/Sciatica.

MATERIALS AND METHODS

Source of data

The patients suffering from *Gridhrasi* will be selected for the study from OPD and IPD of Sri Dharmasthala Manjunatheshwara Ayurveda Hospital, Udupi. *Dvatrimsaka Guggulu* and *Rasna Guggulu* will be obtained from SDM Ayurveda Pharmacy, Kuthpady, Udupi.

Study design

• Study Type : Interventional with pre and post - test design

Estimated enrolment : 30 participants Allocation : Randomized

• Endpoint Classification : Comparative Study

• Intervention Model : Double group assignment

Masking : Open label study

Primary Purpose : Treatment

Intervention

The patient selected will be randomly divided into 2 groups of 15 each by adapting the permuted block randomization method.

Group A: Recruited subjects will be treated with oral administration of *Dvatrimsaka Guggulu* in the dose of 500mg 2 TID after food along with *Usna Jala*.

Group B: Recruited subjects will be treated with oral administration of *Rasna Guggulu* in the dose of 500mg 2 TID after food along with *Usna Jala*.

Patients will be reviewed on the 0th day - 14th day for recording the changes and asked to undergo follow up after 28days of treatment.

Duration

Group A: The study includes 14 days of medication with *Dvatrimsaka Guggulu* followed by another 28 days of follow up period. Total duration of study: 42 days.

Group B: The study includes 14 days of medication with *Rasna Guggulu* followed by another 28days of follow up period. Total duration of study: 42 days.

Follow up: 28 days after treatment.

Diagnostic criteria

- Symptoms of Gridhrasi like radiating pain which radiates from back of thigh, leg and foot stiffness, pricking sensation, twitching in buttocks, heaviness of the legs, drowsiness and tastelessness.
- Presence of radicular pain of sciatica that includes sudden or gradual onset of low back pain radiating to lower limb from buttock, thigh, calf and foot.

Inclusion criteria

- Patients with Prathyatma Laxana of Gridhrasi.
- Patients of *Gridhrasi* Sciatica between the age of 16 to 70 years.
- Patients having signs and symptoms of Sciatica.
- Patients with or without evidences of Lumbar Spondylosis.
- Patients with or without evidences of Disc Prolapse

Exclusion criteria

- Patient with Infective conditions of the spine.
- Neoplastic and Metastatic conditions of the spine with radicular pain.
- Patient with other systemic disorders associating Sciatica.
- Sciatica with Congenital deformities of spine.
- Pregnancy and lactating mother.

Assessment criteria

Subjective parameters:

- Pain(Ruk) Greenough & Fraser Scoring method
- Stiffness (Sthambha)
- Pricking type of pain(*Toda*)
- Twitching (Spandana)
- Functional Ability- Sugar baker & Barofsky Clinical Mobility Scale
- Functional Disability Oswestry Disability Assessment Questionnaire.

Objective parameters

- Restricted limb movement-SLR Test (Sakthiutkshepa nigraha)
- Neurological deficit-Herron and turners rating.

• The parameters of signs and symptoms along with investigations will be scored on the basis of standard method and will be analyzed statistically using paired and unpaired t test and Wilcoxon's signed rank test and Mann Whitney U test.

Investigations

- Radiological: X-ray of Lumbo-sacral spine AP & lateral view if necessary.
- Routine: Haematological investigations-Hb%, TC, DC, ESR, RBS. Urine routine and microscopic to rule out other condition.

RESULTS

Table 1: Effect of *Dvatrimsaka Guggulu* and *Rasna Guggulu* on the symptoms of *Gridhrasi*.

Grou	BT	AT	Diff D	% of		Wilcoxo	n Signed R	ank Test	;	Mann-	Whitney U test		
p	Mea	Mean	BT-AT	Relief	SD	SEM	Median	Z	P	T	U	P	
N=15	n				SD	SEWI	Miculan	Value	Value	Value	Value	Value	
Effect of Treatment on Stambha													
Group 1 Dvatri msaka	2.53	0.46	2.06	81.5	BT: AT:	BT: AT:	BT: AT:	3.53	<0.00	307	38	<0.00	
Group 2 Rasna	2.53	1.33	1.20	47.3	BT: AT:	BT: AT:	BT: AT:	3.44	<0.00				
Effect of	of Treat	ment on	Toda										
Group 1 Dvatri msaka	2.53	0.53	2	78.9	BT:0. 51 AT:0. 51	BT:0. 13 AT:0. 13	BT:3.00 AT:1.00	3.49	<0.00	315	30	<0.00	
Group 2 Rasna	1.93	1.00	0.93	48.2	BT:0. 96 AT:0. 84	BT:0. 24 AT:0. 21	BT:2.00 AT:1.00	3.27	<0.00	313	30	1	
	of Treat	ment on	Spandana		T	T	1	T	T	T			
Group 1 Dvatri msaka	0.93	0.13	0.80	85.7	BT:0. 96 AT:0. 35	BT:0. 24 AT:0. 90	BT:1.00 AT:0.00	2.58	0.008	259.5	85.5	0.222	
Group 2 Rasna	0.53	0.13	0.4	75	BT: AT:	BT: AT:	BT: AT:	2.44	0.031				

Dvatrimsaka guggulu group - The study proves that there was a remission by 81.5% in *Stambha*, recording a remission by 78.9% in *Toda*, and a remission by 85.7% in *Spandana*. 100% improvement was noted in case of *aruchi* and *Tandra*. 86.65 improvement was found

remission of *Gaurava*. *Rasna guggulu* group – The study proves that there was a remission by 47.3% in *Stambha*, recording a remission by 48.2% in *Toda*, and a remission by 75% in *Spandana*. 100% improvement was noted in case of *Aruchi* and 60% in *Tandra*. 52.6% improvement was found remission of *Gaurava*

Table 2: Effect of *Dvatrimsaka Guggulu* and *Rasna Guggulu* on various outcome measures.

Grou		AT Mean	Diff D BT- AT	% of Relief	Wilcoxon Signed Rank Test					Mann-Whitney U test		
p N=15	BT Mean				SD	SEM	Median	Z Value	P Value	T Value	U Value	P Value
Effect o	of Treatme	nt on Pai	n									
Group 1 Dvatri msaka	25.5	51.9	26.4	40	BT: 7.06 AT: 6.05	BT: 1.82 AT: 1.56	BT: 25.0 AT: 54.0	3.42	<0.00	318	27	< 0.00
Group 2 Rasna	27.2	45.2	17.9	27	BT: 8.04 AT: 6.61	BT: 2.07 AT: 1.70	BT: 23.0 AT: 47.0	3.41	<0.00	310	21	1
Effect o	of Treatme	nt on Net	ırologica	l deficit								
Group 1 Dvatri msaka	56.3	12.6	43.6	36.3	BT: 13.9 AT: 7.03	BT: 7.03 AT: 1.81	BT: 60.0 AT: 10.0	3.42	<0.00	291	64.0	0.045
Group 2 Rasna	56.0	21.6	34.3	28.6	BT: 20.5 AT: 10.9	BT: 5.30 AT: 2.83	BT: 45.0 AT: 20.0	3.41	<0.00	281	04.0	0.043
	of Treatme	nt on Fui	ectional a	ability		1		1	1	T	T	ı
Group 1 Dvatri msaka	16.5	22.5	6	25	BT: 2.53 AT: 0.91	BT: 0.65 AT: 0.23	BT: 17.0 AT: 23.0	3.42	<0.00	217	28.0	<0.00
Group 2 Rasna	16.8	20.6	3.74	15.5	BT: 2.61 AT:1 .84	BT: 0.67 AT:0. 47	BT: 18.0 AT: 21.0	3.45	<0.00	317	28.0	1
	of Treatme	nt on Fu	nctional 1	Disabilit		1		1	1	T	T	
Group 1 Dvatri msaka	22.4	3.93	18.5	37	BT: 5.15 AT: 1.87	BT: 1.33 AT: 0.48	BT: 24.0 AT: 4.00	3.41	<0.00	210	26.5	<0.00
Group 2 Rasna	21.4	9.86	11.5	23	BT: 5.84 AT: 4.38	BT: 1.50 AT: 1.13	BT: 20.0 AT: 10.0	3.419	<0.00	318	26.5	1

Dvatrimsaka guggulu group -A remission by 40% was found in Pain Criteria with statistically significant difference (P = <0.001). Neurological deficits improvement were 36.3% with highly significant P value <0.001, Functional ability increased by 25% and Functional disability decreased by 27%. **Rasna Guggulu** Group – A remission by 27% was found in Pain Criteria with statistically significant difference (P = <0.001). Neurological deficits improvement were 28.6% with highly significant P value <0.001, Functional ability increased by 15.5% and Functional disability decreased by 23%.

Table 3: Effect of Dvatrimsaka Guggulu and Rasna Guggulu on various Test for Sciatica.

			Eff	ect of trea	atment o	n SLR T	Test Active			
	рт	A T	Diff	0/ -6		Paired t test			Unpair	ed t test
	BT Mean	AT Mean	D BT-AT	% of Relief	SD	SEM	T VALUE	P VALUE	T VALUE	P VALUE
Group 1 Dvatri msaka	38.3	69.6	31.3	81.7	BT: 6.98 AT: 11.4	BT: 1.80 AT: 2.94	14.194	<0.001	2.88	0.07
Group 2 Rasna	36.3	58.0	21.6	59.6	BT: 7.43 AT: 11.4	BT: 1.91 AT: 2.96	8.599	<0.001	2.80	0.07
Effect of	f treatme	nt on SL	R Test Pas	sive						
Group 1 Dvatri msaka	41	73.6	32.6	79.6	BT: 5.73 AT: 9.90	BT: 1.48 AT: 2.55	14.00	<0.001	- 1.76	0.08
Group 2 Rasna	44.3	70	26.6	57.9	BT: 7.28 AT: 14.6	BT: 1.88 AT: 3.78	8.034	<0.001		
Effect of	f treatme	nt on La	segue's test	t				•		•
Group 1 Dvatri msaka	36.3	70.0	33.6	92.6	BT: 7.43 AT: 14.1	BT: 1.91 AT: 3.92	12.11	<0.001	2.08	0.04
Group 2 Rasna	39.3	68.0	28.6	72.8	BT: 6.23 AT: 10.4	BT: 1.60 AT: 2.70	13.31	<0.001	2.08	0.04
Effect of	f treatme	nt on Scl	ober's test	t						
Group 1 Dvatri msaka	16.8	21.0	4.2	25	BT: 3.16 AT: 4.24	BT: 0.81 AT: 1.09	11.03	<0.001	0.97	0.33

Group 2 Rasna	17.1 21.8 4.	7 27.4	BT: 2.35 AT: 2.80	BT: 0.60 AT: 0.72	16.24	<0.001			_
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Dvatrimsaka guggulu group –The improvement in SLR Active and Passive were 81.7% and 79.6% respectively. There were 92.6% improvement in Lasegue's test and 24% improvement in Schober's test with P value <0.001. 33% improvement in time taken for walking 30 feet's, 38.7% in time taken for 10 sit ups, 36.3% improvement in time taken for climbing 10 steps, 41.3% remission in distance between floor and finger on forward bending with each having P value <0.001. **Rasna guggulu** group –The improvement in SLR Active and Passive were 59.6% and 57.9% respectively. There were 72.8% improvement in Lasegue's test and 27.4% improvement in Schober's test with P value <0.001. 40.3% improvement in time taken for walking 30 feet's, 32% in time taken for 10 sit ups, 30% improvement in time taken for climbing 10 steps, 27.5% remission in distance between floor and finger on forward bending with each having P value <0.001.

Comparison between the groups using Mann whitney U test showed that the results were statistically significant with p<0.001 and percentage of relief showed that *Dvatrimsaka Guggulu* benefitted better.

Table no. 4: Overall effect of the treatment.

Extent of	Change	Number	of Patients	}	% of Patients			
Change	Category	Dvatrimsaka Guggulu	Rasna Guggulu	Total	Dvatrimsaka Guggulu			
0%	No	0	0	0	0%	0%	0%	
1%-25%	Mild	0	0	0	0%	0%	0%	
26%-50%	Moderate	1	9	10	6.6%	60%	33.3%	
51%-75%	Marked	3	5	8	20%	33.3%	26.6%	
76% - 100%	Excellent	11	1	12	73.3%	6.6%	40%	

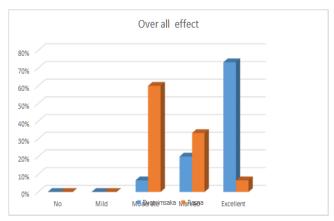


Figure no. 1: Overall effect of the treatment.

In *Dvatrimsaka Guggulu* Group it is found that 73.3% patients had complete improvement, 20% of patients had marked improvement and 6.6% of them had moderate improvement. In Rasna Guggulu Group 40% patients had complete improvement, 26.6%% of them had mild improvement, 33.3% of patients had moderate improvement. In both Groups, none of them had any adverse reaction or symptoms unchanged.

DISCUSSION

Dvatrimsaka guggulu is mentioned in Yogaratnakara Vatavyadhi adhikara. As the name indicates the Yoga consists of thirty-two ingredients including Guggulu. Among that thirty – one ingredients are taken in equal proportion and same quantity of Guggulu is added. Dvatrimsaka Guggulu is a herbo mineral combination, most the drugs in the formulation are having Vata kapha hara property which alleviates both morbid Vata and Kapha Dosha. This Yoga is explained by Lord Danwantari himself, indicated in all types of Vatavyadhi especially Gridhrasi.

Due to *Ushna veerya* of drugs such as *Chavya*, *Chitraka*, *Vacha* and all morbid *Vata* get pacified. The *Deepana pachana* property of *Maricha*, *Pippali*, *Shunti Amapachana* action will be fulfilled. *Haritaki* and *Bibitaki* have *Vatanulomana* property that have in *Mridu Virechana* thereby helps pacifying the excessive *Vata* and *Kapha* in the body. Drugs like *Devadaru*, *Tumburu*, *Vatsanabha*, have *Shoolahara* property that provides symptomatic relief to the patient. *Guggulu* is excellent anti-inflammatory drugs which act as *Kapha vatashamaka* and also *Vendana shamaka* due to its *Ushana veerya*. *Amalaki* and *Pippali* will act as *Balya* and provides *Rasayana* effect to the *shareera*. *Dvatrimsaka guggulu* as effective in all patients despite of suffering from *Vataja* or *Vatakaphaja Gridhrasi* without any undesirable effects.

Rasna Guggulu is the herbal formulation which consist of Rasna and Guggulu in equal quantity. Rasna is well known Vatahara drug which is also have a Kaphahara property and Guggulu act as Kapha vata shamaka thus alleviating both Kapha and Vata Dosha. Rasna have Guru snigdha guna and Ushna Veerya and it act as Vayastapana. Due to Vata anulomana property it provides a mridu rechana action and helps to pacify morbid Vata. The agalanga content of Rasna act as analgesic as well as anti-inflammatory. Guggulu is also one of the main ingredient which have anti-inflammatory and analgesic property due to its

Ushna veerya. Guggulu is a Rasayana drug having Kaphavata shamaka and Vedanashamaka property. So Rasna Guggulu was beneficial in both type of Gridhrasi despite of any complication.

Vataprakopa is evident in Gridhrasi as it causes severe pain, stiffness and altered sensation of the limbs. One of the important Prathyanga of Shareera is Snayu. Utkshepa and Apakshepa is one among its Karma. In Gridhrasi this Snayu will be affected by the morbid Vata and causing impairment. The improvement in the functions are evident from the increased functional ability, reduced functional disability and improvement in time taken for walking, climbing stairs and sit ups after treatment. There was remarkable reduction in all these signs and symptoms of Gridhrasi in both groups. But Group A administered with Dvatrimsaka guggulu had better results statistically and found to be efficacious in reducing morbidity of Vata. The efficacy of Dvatrimsaka Guggulu is beyond doubt rectifying the etiopathogenesis of Gridhrasi irrespective of its cause as Dhatukshaya or Margavarana. Similar is the outcome related to Rasna Guggulu also.

CONCLUSION

Dvatrimsaka Guggulu and Rasna Guggulu, both have shown improvement in almost all the parameters, but comparatively Dvatrimsaka Guggulu showed better results. A maximum 73.3% and minimum 20% of patients showed complete and moderate remission in Dvatrimsaka Guggulu group respectively. Whereas in Rasna Guggulu group complete and mild remission has been seen equal to 26.6%, 33.3% respectively.

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