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Sciatica (*Gridhrasi*) - An Ayurveda Perspective

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ABSTRACT

Large number of population suffers from low back pain. Chronic low back pain (CLBP) prevalence increases linearly from the third decade of life on, until the 60 years of age, being more prevalent in women. Sciatica is the most common debilitating condition causes CLBP. Radiating leg pain and related disabilities are the observed in sciatica. Nearly 40% people experience sciatic pain at some point in their life. The diagnosis of sciatica and its management varies considerably within and between countries. Conventional Medicine and surgery are widely used in the management of sciatica. There is radical rise in the use of Complementary and Alternative Medicine (CAM) in patients with sciatica. Ayurveda is one of the widely used CAM in the recent past. Sciatica resembles the disease *Gridharsa* of Ayurveda. *Gridharsa* is one among the *Vataja nanatmaja vyadhi*, where dysfunction of *Vata* affect *gridharsa nadi* characterized by low back pain radiating to lower limbs, stiffness and pricking type of pain. It starts from *kati- prishtha* (pelvic region and Lumbosacral) radiating to *jangha paada* (Thigh, Feet) with impairment of lifting the leg. The gait of the person is very similar to vulture (*Gridhra*) hence the name is given as *Gridharsa*. In this article, attempt has been made to review the Ayurvedic classics text and related literatures to understand the disease *Gridharsa* with emphasis on its samprapti on the basis of *Kriyakala* and role of *Shodhana* and *Shamana chikitsa* in the management of *Gridharsa*.

Key words: *Gridhrasi*, *Sciatica*, *Vata Vyadhi*.

INTRODUCTION

Modernization and sedentary lifestyle of human being in developing countries has created several disharmonies in biological system. Factors like improper sitting postures in offices, jerky movements in travel and sports lead to the low back pain and

sciatica. Low back pain (LBP) is the most frequently reported musculoskeletal problem in elderly adults. LBP due to lumbar disc prolapse is the major cause of morbidity throughout the world. Lifetime incidence of LBP is 50-70 % with incidence of sciatica more than 40%. However clinically significant sciatica due to lumbar disc prolapse occurs in 4-6 % of the population.

The prevalence of sciatica varies considerably ranging from 1.6% in the general population to 43% in a selected working population. Sciatica not only inflicts pain, but also causes difficulty in walking. It negatively impacts quality of life of patient and disturbs daily routine.^[1] Sciatica is very painful condition in which pain begins in lumbar region and radiates along the posterior lateral aspects of thigh and leg, in this condition patient walks with difficulty. It occurs because of spinal nerve irritation and characterized by pain in distribution of sciatic nerve. In reference to

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sciatica treatment; medical sciences have only symptomatic management and surgical procedures with interest of adverse reaction.^[2] The signs and symptoms are seen in 'Gridhrasi' can be correlated with 'Sciatica' in modern terminology.

Niruktti of Gridhrasi

In Ayurveda, diseases are named by different ways, viz. according to *Dosha* - *Dushya* involvement, according to symptoms etc. Here the word *Gridhrasi* is suggestive of the typical character of pain and also the gait of the patient.

Gridhra means vulture. Vulture is fond of meat and has a particular fashion of eating meat. It pierces its beak deeply in the flesh and then draws it forcefully, causing severe pain. The pain in *Gridhrasi* is also of the same kind, hence the name is given. Also, because of the persisting severe pain the patient has a typical gait i.e. slightly titled towards the affected side and affected leg in flexed position and another leg extended. This gait resembles with that of vulture.^[3]

In this disease the patient walks like the bird *Gridhra* and his legs become tense and slightly curved so due to the resemblance with the gait of a vulture, *Gridhrasi* term might have been given to this disease. *Gridhra* is bird called as vulture in English. This bird is fond of meat and it eats flesh of an animal in such a fashion that he deeply pierces his beak in the flesh then draws it out forcefully. Due to persisting severe pain the patient has a typical gait i.e. slightly titled towards the affected side and affected leg in flexed position and another leg extended. This gait resembles with that of vulture. Such type of pain occurs and typical gait observed in *Gridhrasi*.^[4]

Definition

According to *Acharya Charaka*, 'Gridhrasi' is one among the '*Nanatmaja Vata Vyadhi*'^[5] which is characterized by *Stambha* (stiffness), *Ruka* (pain), *Toda* (pricking pain) and *Spandana* (frequent tingling). These symptoms initially affect *Sphika* (buttock) as well as posterior aspect of *Kati* (waist) and then gradually radiates to posterior aspects of *Uru* (thigh), *Janu* (knee), *Jangha* (calf) and *Pada* (foot).^[6] According

to *Acharya Sushruta*, where two *Kandara* i.e. ligament of heel and all the toes are affected by vitiated *Vata*, So movement of the lower limb get restricted; it is known as *Gridhrasi*.^[7] As per *Acharya Harita*, *Gridhrasi* is a condition originates due to vitiation of *Vyana Vayu* which is responsible for all the types of voluntary movements i.e. expansion, contraction, upward, downward and oblique.^[8]

Concept of Vata in Gridhrasi

All *Acharyas* have unanimously accepted the role of *Vata* in causing *Gridhrasi*. The description of *Gridhrasi* in particular is very concise in the classics. Hence by knowing the physiological and pathological aspect of *vata*, will help to understand *Gridhrasi* in better way.^[9]

Physiological aspect

The science of Ayurveda revolves around three basic humors of body i.e. *Vata*, *Pitta* and *Kapha*. These three basic factors in their equilibrium, determine the state of health and in the disturbed state of their equilibrium cause disease. These three are the actual intrinsic factors of the disease and hence called '*Tridoshas*'.^[10]

Amongst the *Tridoshas*, *Vata* is the governing factor of other two *Doshas*, *Dhatu*s and *Malas* as their movement in the body depends on *Vata*.^[11] *Sushruta* describes that the word '*Vata*' is derived from '*Va*' which signifies *Gati* (motion or movement) and *Gandhan* means to enthrall, to make know, to become aware of induction, effort, to enlighten.^[12] *Acharya Charaka* says that *Sharira Vayu* is *Asanghata* and *Anavasthita*. It is responsible for the conduct, regulation and integration of all vital functions and structures of the body.^[13] According to *Acharya Sushruta*, *Sharira Vayu* which courses through the body is self-originated, subtle and all pervasive, although invisible in itself, yet, its works are manifested, it abounds in the fundamental quality of *Rajas*, it is instantaneous in action and radiates through the organism in constant currents.^[14] The characteristics of 5 types of *Vayu* are *Praspanan*, *Udvahanam*, *Puranam*, *Viveka* and *Dharanam*.^[15]

Pathological aspect

Vata gets vitiated because of over indulgence of the *Dravyas* which are having similar properties as that of *Vata*. The vitiated *Vata* causes various diseases in the body, according to the degree of vitiation and the site where the localization of *Doshas* takes place.^[16]

Prakopa Hetus of Vata

Various etiological factors for vitiation of *Vata* are mentioned in the classics. The important are ingestion of *Ruksha*, *Sheeta*, *Laghu Aahara*, excessive sexual indulgence, *Prajagarana*, *Upavasa*, excessive activities, physical trauma, excessive walking, *Vegadharana*, carrying heavy weights etc. seasonal variations like *Sheeta*, *Varsha Ritu*, *Jirnanna Kala* etc. are the *Vataprakopaka Hetus*.^[17]

Functions of vitiated Vayu

When *Vata* is vitiated in the body, it afflicts the body with various disorders and there by affects strength, complexion, happiness and life span, agitates mind, affects all the sense organs, destroys, deforms or detains the embryo for long period, produces fear, grief, confusion, anxiety and excessive delirium and may stop the vital breath.^[18]

The symptoms produced by vitiated *Vata* are *Sramsas* (subluxation), *Bhramsha* (dislocation), *Vyasa* (dilation), *Sanga* (obstruction), *Bheda* (tearing), *Sada* (malaise), *Harsha* (exhilaration), *Trashna* (thirst), *Kampa* (tremor), *Varta* (twisting), *Chala* (movements), *Toda* (pricking pain), *Vyatha* (aching pain), *Chesta* (movement), *Khara* (coarseness), *Parusha* (roughness), *Vishada* (non-sliminess), *Sushira* (porousness), *Arunavarna* (reddish luster), *Kashaya* (astringent taste), *VirasaMukhata* (tastelessness), *Shosha* (wasting), *Shoola* (pain), *Supti* (numbness), *Sankocha* (contraction), *Stambha* (rigidity, stiffness), *Khanja* (lameness) and others.^[19]

Acharya Vagbhata has also added *Ushnakamitwa* (affection for heat), *Aanaha* (flatulence), *Malabandha* (constipation), *Nidranasha* (insomnia), *Pralapa* (delirium) and *Deenata* (depressed).^[20]

Role of Vata in Gridhrasi

Gridhrasi is one of 80 *Nanatmaja Vatavyadhis* i.e. it is caused only because of vitiated *Vata*. Hence, *Vataprakopaka Lakshanas* like *Shoola*, *Supti*, *Stambha* etc. are found as the cardinal symptoms in the disease. There is no direct mention about *Apana* and *Vyana Vayu* involvement in *Gridhrasi* except that *Harita* has mentioned it in *Vyanaprakopaja* diseases. Depending on the *Sthana* and *Karma*, we can assume that *Apana* and *Vyana Vayu* are involved in causing *Gridhrasi*. In *Gridhrasi*, the *Sthanasamshraya* takes place in *Sphika*, *Kati*, *Prishtha* affecting the *Kandara* of leg. Some Anatomical structures can be considered as follows in the involvement of *Gridhrasi*;

Kandara

Kandara is the *Upadhatu* of *Rakta Dhatu*. They are attributed to the function of movements of joints i.e. flexion, extension. *Kandaras* are the *Mahasnayus*.^[21] *Sushruta* has also included *Vritta Snayu* under the title of *Kandara*. *Chakrapani* quotes it as *Sthulasnayu*. The total number of *Kandaras* are 16 (4 each in *Hasta*, *Pada*, *Greeva* and *Prishtha*). Thus, *Rakta* and *Meda Dhatus* form the basis of *Kandara*.

Kati

Shroni and *Kukudmati* are the synonyms for *Kati*. It has *Ashtadashangula Vistara*. It is composed of five *Asthis*. *Kati* is the *Sthana* of *Vayu*. *Apana Vata* resides at *Kati*. *Trikasandhi* forms a part of *Shroni*. *Avalambaka Kapha* bestows strength to *Trika*. *Kati* has *Chestavan Sandhis* which are responsible for movements of lower extremity.^[22] *Vatashaya*, *Pakwashaya*, *Mutrashaya* and *Garbhashaya* are situated in the *Kati*. *Kati* is correlated with pelvis or pelvic region.

Prishtha

Sushruta mentioned it as *Pratyanga*.^[23] This can be correlated to lumbosacral region.

Sphika

It is the posterior muscular part of *Kati* and is included under *Pratyangas*. It is the *Sthana* of *Meda* as in *Medovridhi Sphika Lambana* is described. Thus

Mamsa, *Medadhatu* form the *Sphika*. It can be correlated to gluteal prominence.

Sakthi

Sakthi starts from *Kati* and extends up to *Padanguli*.^[24] It is the *Sthana* of *Vayu*. The whole lower limb is included under *Sakthi*.

Janu

The *Sandhi* of *Jangha* and *Uru* is *Janu Sandhi*.^[25] It is *Kora* type of *Sandhi* and is a *Vaikalyakara Marma*.

Jangha

The part of leg which lies between *Janu* and *Gulf* is *Jangha*. It is mentioned as *Pratyanga*.^[26]

Uru

The part of leg extending from *Vankshana Sandhi* upto *Janu* is *Uru*. It is the *Pratyanga* of *Adhashakha*.^[27]

Samprapti (Pathogenesis) based on Shadvidha Kriyakala^[28-31]

Samprapti of *Gridhrasi* can be understood through the *Shath Kriyakala* (six stage), it is as follows

Chaya

Nidanas leads to accumulation of *Aatmarupa* of *Vayu* i.e. *Ruksha*, *Sheeta*, *Chala Guna* (along with *Kapha* by its *Guru* and *Sheeta* property) in its own place, produces the symptoms of *Chaya*. This is the first stage of *Samprapti*. *Vata* when gets aggravated either due to exposure to factors similar to *Vata* associated with *Ushna* instead of *Sheeta Guna* or due to season or age increase first in its own sites. The condition is called *Chayavastha*. The individual feels aversion to the diet and drinks possessing qualities similar to that of *Vata*. *Sthabdha*, *Purnakoshtata* or a sense of dullness or fullness in the abdomen and *Katistahana* also occurs.

Prakopa

Prakopa is second stage of *Samprapti* in which accumulated *Vata Dosha* tends to become swollen and excited. When no therapies have been adopted to subdue *Vata* at its *Chayavastha* itself and allowed to get aggravated further due to exposure to its aggravating factors it reaches the stage of *Prakopavastha*. There are differences in views

pertaining to *Prakopavastha*. According to *Sushruta*, *Prakopavastha* is the 2nd stage of evolutionary process of manifestation of disease and there is four more stage of evolutionary processes. Whereas according to *Vagbhata* and *Charaka* there are only two stage of evolutionary processes of disease i.e. *Chaya* and *Prakopa*. According to them all the five stages of *Kriyakalas* mentioned by *Acharya Sushruta* except *Chaya* will come under the *Prakopa* stage. In the stage of the *Prakopa* the quantity of *Vata* if increased further will be in the maximum quantity at its own sites and is ready to expel. It will cause *Koshtatoda* (sensation of pinning pain) and *Koshta Sancharana* (movement of *Vayu* in abdomen).

Prasaravastha

Prakopa stage is followed by *Prasaravastha* in which the vitiated *Vata* propagates all over the body. This is the third stage of *Samprapti*. Symptoms of *Prasara Prakopa* mentioned in classic can be observed at this stage. When no therapeutic measures have been adopted at the stage of *Prakopa* the *Vata* being expelled from its own sites spread over and extends to other parts, organs and structure of the body. While spreading, *Vata* which possesses the power of locomotion will take lead in spreading other *Doshas* also in general. In the present context also *Vata* may spread itself throughout the body or spread along with *Kapha*. The process is general up to *Prasaravastha* for all disorder in general. When the *Vata* has not been treated at *Chayavastha* and allowed to expose to its etiological factors and when other conditions are favorable for morbidity it will precede to subsequent stages. In such a stage it is termed as *Chayapoorvaka Prakopa*.

This process will lead to *Gridhrasi* of gradual onset. At times when *Vata* is exposed to its etiological factors more intensively it may directly reach the *Prakopa* stage and immediately pass on to further stage resulting into the sudden manifestation of *Gridhrasi* which is termed as *Achayapoorvaka Prakopa* or sudden onset. The *Dosha Dhatu* vitiation inside the body which makes proper atmosphere for the manifestation of *Gridhrasi* would have been getting evolved for a very long time before its sudden

manifestation. In this stage, the *Prasaravaistha Vimargagamana* (spreading to other parts) and *Atopa* (painful distension of abdomen, intervertebral disc prolapses) accompanied by rubbing noise of enlargement of particular part are the clinical manifestation by *Vata*.

Sthansamshrayavastha

The previous three stages have been known as stages of *Dosha*. From fourth stage onwards, they are called as stages of the disease. Among later three stages *Sthansamshrayavastha* has the prime importance because interaction between *Dosha* and *Dushya* start to at this stage. If no treatment is adopted even at the stage of *Prasara* the *Dosha* while moving through out the body would settle in the part of the body where there is pre-existing *Khavaigunya* i.e. pre-existing degenerative changes like fibrillation and sequestra formation in the nucleus pulposus and development of fissure in the annulus in general displacement of *Kapha* (nucleus pulposus) resulting in to bulging of posterior longitudinal ligament, enough to touch the dura matter. The premonitory clinical features are only manifested at this stage. This stage is called *Poorvarupavastha*. No specific *Poorvarupas* have been described for *Vatavyadhis* and *Gridhrasi* in particular by *Acharyas* but have stated that the same clinical features will be manifested in an unclear (*Avyaktha*) form in this stage of *Poorvarupa*. In *Gridhrasi*, backache or lumbago are observed to occur in this stage.

It is an important pathological phenomenon which underlines different *Vatavyadhis* and is a result of active vitiation of *VataDosha*. *Gatatva* denotes the *Gati* of vitiated *Vayu* to the place where *Khavaigunya* is available and due to which *Dosha* gets enlodgement there.

During the disease process, in the 4th *Kriyakala* i.e. *Sthansamshraya* is the stage where *Poorvaroopas* are manifested. These prodromal symptoms are produced due to the accumulation of the *Doshas*, at the place of *Kha-vaigunya* i.e. *Kati* and *Guda Pradesh*. Because of the specificity of *Nidana* which produce affinity in *Vata Dosha* for the vitiation of particular *Sthana* or

Dushya.^[28] After this, the *Doshas* get localized in the impaired *Srotas* and pathology is produced, it leads to structural or functional abnormalities in *Adhisthana*, produces a set of symptom.

During *Sthansamshraya Avastha* the vitiated *Dosha* are said to have reached to particular *Sthana* and get obstructed here and intimately mix with and vitiate one, two or more *Dushyas* in that particular portion of body. This is the reason that though *Nidana* of all the *Vatavyadhi* are same but only due to the *Samprapti Vishesha* of disease *Vata* can produce so many *Vata* disorders. If vitiated *Vata* is accumulated in *Kati* and lower extremities by *Srotosanga* it produces *Gridhrasi*.

Vyakta and Bhedavastha

Different abnormalities produced in previous stage leads to production of symptoms of the particular disease is the fifth stage of *Kriya Kala* e.g. *Vyakti*. After *Dosha-Dushya-Sammurcchna* the body channels are impaired by the morbid *Doshas* leading to the production of specific features of the disease, whereas it is collectively known as *Lakshana-Sammucchaya*. On the basis of signs and symptoms diagnosis of the disease is possible. The impairment of *Gridhrasi-nadi* leads to the manifestation of *Gridhrasi* disease. All the *Pratyatma Lakshanas* i.e. cardinal features of *Gridhrasi* pertain to either one *Pada* or both *Padas*. Hence the site manifestation of clinical features i.e. *Vyaktasthana* are *Padas* in general. In bilateral sciatica where bowel and bladder are involved the clinical features of those functions also get manifested. Hence *Mootra* and *Malas* are also to be considered as *Vyakthasthana* rarely in such cases. The movement of one leg is usually impaired in *Gridhrasi*. The movement of the leg is controlled by *Gridhrasinadi* together, its branches and some other *Nadis* of lumbo-sacral plexus. Each movement is controlled by two spinal segments.

Curability and incurability of the disease depends upon the severity of the presenting symptoms. This is the unique stage of the illness, where in it is clearly recognizable as all its characteristic signs and symptoms manifest. At this stage *Gridhrasi* gets manifested completely and can be distinguished

according to *Doshik* predominance as *Vataja* type or *Vatakaphja* type.

Dhatukshaya and Margavarodha Samprapti of Gridhrasi

The actual manifestation of the disease occurs when the circulating vitiated *Doshas* get accumulated where *Khavaigunya* is already present. There are two main reasons by which *Vata* get vitiated. They are *Dhatukshaya* and *Margavarodha*. Because of the *Samprapti Vishesh*, the same *Nidanas* produce different *Vatavyadhis*. This is because the presentation of the disease changes according to the *Sthana* where *Dosha-Dushya Sammurchhana* takes place. *Khavaigunya* plays an important role in the disease process. In *Gridhrasi*, exposure to mild but continuous trauma to *Kati*, *Sphika* region because of improper posture, travelling in jerky vehicles, carrying heavy loads, digging etc. or sometimes spinal cord injury, improperly treated pelvic diseases are responsible for producing *Sthanavaigunya* at *Kati*, *Sphika*, *Prishtha* etc. They may not be able to produce the disease at the instance, but after acquiring some *Vyanjaka Hetu* (exciting cause), the disease may be produced. Here, the *Samprapti* takes place either by *Apatarpana* or *Santarpana* or *Agantuja*.

In the state of *Apatarpana*, all the *Dhatus* viz. *Rasa*, *Rakta*, *Mamsa* etc. are subjected to *Kshaya*. This *Dhatukshaya* results into the aggravation of *Vata* and this vitiated *Vata* fills up the empty *Srotasas* ultimately causing *Vatavyadhi*. Due to *Rukshadi Aaharas*, firstly the *Rasa Dhatu Kshaya* takes place and it leads to further *Dhatukshaya*, involving *Mamsa*, *Meda*, *Asthi*, *Majja* etc.

And another type of *Samprapti* occurs due to *Santarpana* or *Agantuja* *Nidana* *Sevana* causing *Margavarodha*. Here *Kapha* is found as *Anubandhi* *Dosha* along with *Vata*. *Atibhojan*, *Diwaswapa* etc. are the factors responsible for this kind of *Samprapti*. Deranged *Jatharagni* leads to formation of *Ama*. *Ama* produces obstruction to the normal *Gati* of *Vata*. To overcome the resistance *Vata* attempts to function hyperdynamically. This leads to *Vataprakopa*, also when *Amasamshrista Vayu* resides at *Kati*, *Prishtha*

etc. *Gridhrasi* may be produced. *Lakshanas* like *Tandra*, *Gaurav*, *Agnimandya* etc. are observed due to involvement of *Kapha* and *Ama*. Impaired *Dhatwagni* may lead to the production of *Adhyasthi*, *Arbuda*, *Granthi* etc. i.e. *Apachita Dhatus*. If they cause *Avarodha* in the *Vatavaha Nadi* of the lower limb, *Gridhrasi* may be produced.

Bahyaabhighata like *Agantuja* factors are responsible for the '*Achayapurvaka Prakopa*' of *Doshas*. *Abhighata* leads to *Dhatukshaya* directly and *Vata* provocation is liable to occur. The vitiated *Vata* may directly intermingle with *Asthi*, *Majja Dhatu* to produce *Gridhrasi*.

Mamsa and *Meda Dhatu* are *Snigdha*, *Guru Dhatu*. *Rukshadi Aahara* hampers the process of their *Poshan* leading to *Mamsa* and *Medakshaya*. Also *Sphika* is *Mamsa Pradhan Avayava*. *Sphika Shushkata* is mentioned in *Mamsakshaya Lakshana*. *Rukshata* at *Mamsa Dhatu* produces *Stambha* in the muscles of lower limb restricting its movement.^[32]

In the *Lakshanas* of *Asthi*, *Meda* and *Mamsa Kshaya*, *Sandhishunyata*, *Sandhi Shaithilya* and in *Asthi* and *Majja Kshaya*, *Asthi Saushirya*, *Asthi Daurbalya* and *Laghuta* are described. All these *Dhatukshaya Lakshanas* can be correlated to degenerative changes specifically in bone e.g. osteomalacia, osteoporosis, spondylosis, tuberculosis etc.

Chikitsa Siddhanta (line of treatment) of Gridhrasi (Vatavyadhi)

Nidana Parivarjana (avoidance of causative factors), is the first and foremost principle to be adopted in the treatment. Secondly the intensity of the *Dosha Prakopa* should be considered before deciding the line of treatment. If the *Dosha prakopa* is minimum *Langhana Chikitsa* is enough, if the intensity of *Dosha prakopa* is moderate then *Langhana* and *Pachana* treatment should be given. If, *Doshas* are in *Prakopa avastha*, *Shodhana* treatment should be decided.^[33]

Vishishta Chikitsa for Gridhrasi

The effective treatment of *Gridhrasi* cannot be unified, as the pathology involves multiple varying

factors. Vitiating *Vata* and association of *Kapha Dosha* coming out from the *Pakwashaya*, afflicting the *Asthi Dhatu* vitiating *Snayu* and *Kandara* affecting in the *Asthi* produces the illness. Therefore, the procedures mainly aimed at the modification of the imbalances of *Vata Dosha* as well as *Kapha Dosha*. Thus, the unique pathogenesis eases the planning of the treatment in case of *Vataja Gridhrasi*. But in case of *Vatakaphaja Gridhrasi*, the final treatment planned should pacify the *Vata* as well as *Kapha Dosha* effectively.

With consideration of this, following principles of treatment are advocated in the *Ayurvedic* classics;

Treatment	Ch	Su	AH	BP	YR	HS	BS	CD
<i>Snehana</i>	-	-	-	-	-	+	+	+
<i>Swedana</i>	-	-	-	-	-	+	-	+
<i>Vamana</i>	-	-	-	+	-	-	-	+
<i>Virechana</i>	-	-	-	+	-	-	-	+
<i>Niruha Basti</i>	+	-	-	-	-	-	-	-
<i>Anuvasana Basti</i>	+	-	+	+	+	-	+	+
<i>Siravyedha</i>	+	+	+	-	+	-	-	+
<i>Raktamokshana</i>	-	-	-	-	-	+	+	-
<i>Agnikarma</i>	+	-	+	-	+	+	-	+
<i>Shastrakarma</i>	-	-	-	-	-	-	-	+

Ch - Charaka; Su - Sushruta; A.H.- Astanga Hrudaya; B.P. - Bhava Prakash; Y.R. - Yoga Ratnakara; H.S. - Haritha Samhitha; B.S - Bhela Samhitha; C.D. - Cakradatta

1. Snehana

Snehana or oleation therapy is used externally and internally. In *Gridhrasi* external *Snehana* may be performed in the form of *Abhyanga*, *Pizhichhil*, *Avagaha*, *Parisheka* etc. One should remember that if the *Kapha Dosha* is involved in the pathogenesis as in case of *Vatakaphaja Gridhrasi*, *Snehana Chikitsa*

should be restricted as this treatment tends to worsen the imbalance of *Kapha Dosha*.^[34]

2. Swedana

Shula and *Stambha* in the lower extremities are the cardinal symptoms of *Gridhrasi* and best treated by the *Swedana Chikitsa*. *Swedana* also helps in the liquefaction of the *Dosha* there by assisting clearing the *Srotas* or else rectifying the *Margaavarana*.

Among the different forms of *Swedana* procedures, *Avagaha Sweda*, *Pizhiccil*, *Nadi Sweda*, *Patrapinda Sweda*, *Pinda Sweda* and *Upanaha Sweda* may be efficiently performed in patients of *Gridhrasi*. But in *Vatakaphaja Gridhrasi*, *Baluka Sweda* is a better option for evident reasons.^[35]

3. Vamana

After the *Snehana* and *Swedana*, *Shodhana* is indicated in *Gridhrasi*. The authors like *Chakrapani* and *Bhavamishra* opine that without *Shodhana* of body, *Basti Chikitsa* will not give desired effect in patients of *Gridhrasi Shodhana* in the form of *Vamana* is advised in patients suffering *Gridhrasi* and is specially preferred in *Vatakaphaja Gridhrasi* for evident reasons.^[36]

4. Virechana

Virechana has an important role in *Gridhrasi*. The action of *Virechana* is not only limited to particular site; it has effects on the whole body. In *Vatavyadhi* most of the authors mentioned *Mridu Virechana*. Oral administration of '*Eranda Sneha*' along with milk is ideal for the *Virechana* purpose. This will help in both *Vata Anulomana* as well as smooth excretion of *Mala*. The *Sneha Virechana* clears obstruction in the *Srotas* and relieves *Vata* vitiation very quickly. Thus *Sneha Virechana* of *Mridu* nature helps in controlling *Shula* in *Gridhrasi*.^[37]

5. Basti

Pakwashaya is the primary location of *Vata Dosha*. It is true that *Vyana Vata* is vitiated in *Gridhrasi*. So, *Basti* is very helpful in pacifying *Vata*, further it is described that *Basti Chikitsa* as '*Ardha Chikitsa*' or '*Purna Chikitsa*' of *Vata*. By these facts, *Basti* is most

important among the *Panchakarma* in the treatment of *Gridhrasi*. No other *Chikitsa* has the capacity to pacify and regulate the force of Vata apart from *Basti*. Any type of *Basti* can be adopted but, initially one should purify the body by *Shodhana Karma* to get the desired effect.^[38]

- **Niruha Basti** - *Niruha Basti* like *Erandamuladi Niruha* and *Dashamuladi Niruha* are the best choices.
- **Anuvasana Basti** - *Anuvasana Basti* using *Vatahara Tailas* like *Bala Taila*, *Mulaka Taila*, *Ksheerabala Taila*, *Prasarani Taila* etc. are beneficial.

6. Siravyedha

Acharya Charaka explained *Siravyedha* at the site of *Antara-Kandara Gulpha*. *Acharya Sushruta* and *Vagbhata* indicated *Siravyedha* four *Angula* above and four *Angula* below at the site of knee joint.

7. Raktamokshana

It is a general rule that, when the regular treatment with *Shadvidhopakrama* fails to give any relief in any disease, one should consider the involvement of *Rakta Dhatu* in the pathogenesis and is best treated by *Raktamokshana*. This rule is also applicable in *Gridhrasi Roga*. As the disease *Gridhrasi* is characterized by affliction of *Rakta* along with *Vata*, several authors have advised *Raktamokshana*.^[39]

8. Agnikarma

Various *Acharyas* mentioned *Agnikarma* in the management of *Gridhrasi*. According to *Sushruta* and *Vagbhata*, in the management of *Sira*, *Snayu*, *Asthi* and *Sandhigata Vyadhi*, *Agnikarma* is indicated and *Gridhrasi* is one of the diseases of these *Samprapti*.^[40]

For treatment of *Gridhrasi*, different site for *Agnikarma* are as mentioned below,

- *Charaka* : *Antara Kandara Gulpha*
- *Chakradatta*: *Pada Kanistika Anguli* (little toe of the affected leg).

- *Harita*: Four *Angula* above the *Gulpha* in *Tiryak Gati*.

9. Shastra-Karma

Chakradatta has given the treatment of *Gridhrasi* in details. He has mentioned a small operation with prior *Snehana* and *Swedana* to remove *Granthi* in *Gridhrasi* and also *Siravedha* four *Angula* below *Indrabasti Marma*.

Shamana Chikitsa

Following *Chikitsa* can be included under *Shamana Chikitsa*,

1. *Vedanashamaka Chikitsa* - To pacify the severity of pain.
2. *Vatahara Chikitsa* - Elimination of vitiated *Vata Dosha*.
3. *Kaphahara Chikitsa* - Pacification of vitiated *Kapha Dosha*.
4. *Deepana and Pachana Chikitsa* - To balance the *Agni*

▪ Vedanashamaka Chikitsa

Though no any treatments are describing such a classification but if we go through the recent texts, many *Vedanashamaka* combinations are prescribed in *Gridhrasi* that probably contain *Kupilu*, or *Guggulu*. As pain is one of the cardinal symptoms in *Gridhrasi*, these medications may be effectively prescribed.

▪ Vatahara Chikitsa

As mentioned earlier, *Vatahara Chikitsa* is the primary line of treatment in *Gridhrasi*. It includes both *Shamana* and *Shodhana* procedures. This is the unique principle of treatment in *Vataja Gridhrasi*.

▪ Kaphahara Chikitsa

When the *Gridhrasi* is caused due to vitiated *Vata Dosha* in association with *Kapha Dosha*, addition of *Kaphahara Chikitsa* forms the complete treatment. Planning of both *Vatahara* and *Kaphahara Chikitsa* simultaneously may not be easy as the individual treatment of *Vata Dosha* and *Kapha Dosha* is mutually

contradictory. Combinations containing *Guggulu* and *Shodhit Kupeelu* are the best in such conditions as it acts both on *Vata* and *Kapha*.

▪ *Deepana and Pachana Chikitsa*

In *Shamana Chikitsa*, *Deepana* and *Pachana Chikitsa* is most useful to destroy the *Ama* and to maintain the equilibrium of the *Agni*, thus achieving the physical harmony. *Acharya Chakradatta* have described in the context of *Amavata Rogadhikara*, *Ajamodadivati* in the case of *Ugra Gridhrasi*.

Pathya Apathya

Pathya

Those *Aharadi Dravyas*, which are beneficial to *Srotas* and have no adverse effect on body and mind are termed as *Pathya*. *Pathya* is a major to support the line of treatment of any disease; separately *Pathya* and *Apathya* of *Gridhrasi* are not described in classical texts. Hence *Pathya* and *Apathya* of *Vata Vyadhi* in general can be applied for patients of *Gridhrasi*.

Aahara

- *Anna Varga* : *Kulathi, Masha, Godhuma, Raktashali, Navina Tila, Purana Shalyodana.*
- *Phala Varga* : *Amla, Rasayukta Phala, Dadima, Draksha, Jambira, Badara.*
- *Shaka Varga* : *Patola, Shigru, Rasana.*
- *Dugdha Varga* : *Kshira, Ghrita, Navneeta.*
- *Dravya Varga* : *Mamsa Rasa, Mudga Yusha, Dhanyamla.*
- *Taila Varga* : *Tila Taila, Sasharpa Taila, Eranda Taila.*
- *Any Varga* : *Tambula, Ela, Kustha.*

Vihara

Sukhoshna Pariseka, Nirvata Sthana, Samvahana, Avagahana, Abhyanga, Brahmacharya, Ushna Pravarana, Agni Aatapa Sevana, Snigdha - Ushna Lepa.

Apathya

Those *Ahara* and *Vihara* which have adverse effects on body and are non homologatory to body are called *Apathya*.

Ahara

Kalaya, Chanaka, Kanguni, Kodrava, Shyamaka, Nivara, Nishpava Beeja, Rajmasha, Karira, Jambu, Trinaka, Tinduka, Shushka Mamsa, Dushita Jala.

Vihara

Vegadharana, Vyavaya, Vyayama, Vamana, Raktamokshana, Prajagarana, Diwaswapna, Adhava, Ati-Gaja-Ashwa-Ushtra-Yana Sevana.

CONCLUSION

The prevalence of Sciatica is on the rise and it demands multimodal approach while treating. Pain, disability, dissatisfaction with existing treatment modalities, financial burden of lead to increase use of CAM. Ayurveda is one of emerging CAM having its roots in India. The disease Sciatica resembles *Gridhrasi* of Ayurveda. A detailed explanation about *Gridhrasi* is found in Ayurveda classical texts, viz. *Nidana* (causative factors), *Samprapti* (pathogenesis), *Lakshana* (clinical features) and *Chikitsa* (conservative management, *Agnikarma, Siraveda* and *Panchakrama*). Ayurveda management seems to promising and a ray of hope in patients *Gridhrasi* (Sciatica). Quality research in the field may provide global acceptance of Ayurveda management in Sciatica.

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