

EFFICACY OF *PATRA PINDA SVEDA* AND *ERANDMOOLADI BASTI* IN THE MANAGEMENT OF *GRIDHRASI* W.S.R. TO LUMBAR DISC DISEASE.

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ABSTRACT

Lumbar disc disease is one of the commonest clinical conditions in *Ayurvedic* clinical practice. This is a common cause of chronic or recurrent low back and leg pain. Disc disease is most likely to occur at the L4-L5 or L5-S1 levels, but upper lumbar levels are involved occasionally. Disc herniation is unusual prior to age 20 years.^[1] The commonest presentation of Lumbar Disc Disease (LDD) is low back pain which often worsens by flexion. The pain may be located in the low back only or referred to a leg, buttock, or hip depending upon the site of disc involved and pressure on the underlying nerve. Nerve root injury (Radiculopathy) from disc herniation may be due to

compression, inflammation or both. As far as treatment is concerned only replacement of disc or surgical correction like discectomy is the choice of treatment. This condition can be correlated to the disease *Gridhrasi* described in *Ayurveda* which is one of the *Vatavyadhi*. *Panchakarma* procedures like *Patrapinda sveda* and *Basti karma* (internal administration of medicine through rectal route) to correct vitiated *Vata dosha* and to nourish *asthi dhatu* were selected for present study. Here a case study of male patient aged 28 years presenting with clinical features of sciatica and MRI findings suggestive of disc bulge and prolapse at the level of lumbar vertebrae was given *Panchakarma* treatment. The patient was treated with classical procedures like, *Patrapinda Sveda* and *Erandmooladi niruha Basti* with conventional oral medication. The results of the study are highly encouraging.

KEYWORDS: *Gridhrasi, Erandmooladi niruha Basti, Patra Pinda Sveda, Lumbar disc disease.*

INTRODUCTION

Degenerative disc disease in the lumbar spine refers to a syndrome in which a compromised disc causes low back pain. There is a slight genetic component to individuals who suffer from LDD, the true cause is probably multifactorial. It could be from simple wear and tear, or may have a traumatic cause. Prevalence figure for disc narrowing varied from 3% to 56%.^[2] Recent research indicates that heredity has a dominant role in disc degeneration, explaining 74% of the variance in adult populations studied to date. Since 1998, genetic influences have been confirmed by the identification of several gene forms associated with disc degeneration. The commonest cause for low backache is LDD (Lumbar disc disease). Degeneration is more predominant in lumbar and cervical region. In lumbar region it leads to sciatic nerve compression, which gives rise to symptoms like low back pain, buttock pain and pain numbness or weakness in various parts of the leg and foot. Other symptoms include tingling, pin pricking sensation and numbness. This condition can be co-related with a disease *Gridhrasi*^[3] described in *Ayurveda* under *Vatavyadhi*. It is characterised by *stambha* (~stiffness) *ruka* (~pain), *toda* (~pricking pain) and *muhurspandan* (~twitching of muscles). Pain starting from lower back and radiates downwards to thigh, knee, calf muscles and foot. In modern science management of lumbar disc diseases includes use of anti-inflammatory, analgesics, steroids, physiotherapy and finally correction by surgery is the last option. Each of them has its own limitations. It may cause ill effect on body in later stage. On the other hand *Ayurvedic* management for this looks into the correction of basic pathology specially through *Panchakarma* procedures like *Patra pinda sveda* (sudation with a bolus made up of herbs) and *Basti karma* (internal administration of drugs through rectal route).

CASE REPORT

A male patient aged 28 years admitted in National institute of Ayurveda hospital, Jaipur, India in Indoor patient department presented with the complaint of low back ache radiating to left lower limb associated with numbness, tingling sensation, and difficulty in forward bending since 4 years. Patients took analgesics and physiotherapy 3 years ago and found some relief in symptoms. Now again he was suffering with same complaints.

OBSERVATIONS

- **Signs:-** Tenderness in lumbosacral area

SLR (Straight leg raising) test was positive 30⁰ in left leg, 80⁰ in right leg.

Pain intensity on VAS (Visual analogue scale) was 7.

Decreased range of Flexion of lumbar spine.

- **Symptoms:** - pain radiating from lower back region to left limb, associated with numbness, tingling sensation and heaviness of the limb.

- **MRI report :-** Dated 08/05/2013
 1. At L4-L5 disc is degenerated and dehydrated. Posterior annular tear is noted.
 2. At L4-L5 diffuse circumferential bulging and postero-central protrusion of disc causes mild compression of thecal sac and mild narrowing of both neural foramina (L>R).

- **Gait :-** Slow, Dragging
- **Prakriti :-** Vata-Pitta
- **Vaya :-** Madhyama
- **Bala :-** Madhyama
- **Agni :-** Madhyama
- **Kostha :-** Krura

Treatment

Patra pinda pottali sveda (herbal bolus fomentation):- *Patrapinda Svedana* is a form of *Sankara Svedana*. The word *Sankara* as it suggests the mixture of different medications or drugs when used in form of *Pinda* or *Pottali*, it is called as *Pinda Svedana*. The probable mode of action of *Patrapinda Svedana* can be explained as- Thermal effect, Drug effect, Procedural effect. The procedure was done with leaves of *Nirgundi* (*Vitex Nigundo*) and *Eranda* (*Ricinus Communis*), *Sahijana* (*Moringa oleifera*) along with *Ajvayana* (*Carum copticum*) 50 gms, *Rasona* (Garlic) 15-20 pieces, *Nimboo* (Lemon), *Saindhav Lavana* (Rock Salt) and *Dashmool Taila* for 30 minutes for duration of 21 days.

Basti karma (Administration of drug through rectal route)

Niruha Basti (Decoction enema)

The composition of the medicine administered in the form of *Basti* contains *Kwath* (herbal decoction), *Sneha* (medicated oil), *Madhu* (Honey), *Saindhava Lavana* (rock salt) and *Kalka* (herbal powder).

Erandmooladi Niruha Basti was given in *Kaal Basti* schedule (16 days) with the following contents.

- *Madhu* -50gms
- *Saindhava lavana* -05 gms
- *Pancha-tikta ghrita* -25ml
- *Ashwagandha taila* -35 ml
- *Shatapushpa Kalka* -20gms
- *Erandamuladi kwatha* -350 ml

The contents of *Kwatha* are *Erandamula*, *Palasha*, *Laghu Pancha Mula*, *Rasna*, *Ashwagandha*, *Atibala*, *Guduchi*, *Punarnava*, *Aragwadha*, *Devadaru* and *Madanaphala*.

Anuvasana Basti: - Administration of medicated oil through the rectal route in a prescribed dose is called as *Anuvasana Basti*. In this case study *Dashmoola taila* was used for *Anuvasana Basti*.

Shamana aushdhi

1. *Yograja guggulu* -3 pills (750 gm) twice a day) with luke warm water.
2. *Dashmoola kwatha* -40 ml twice a day
3. *Ashwagandha churna*-3gms + *Nagradhya churna*-2gm + *Sankha bhasma*-500 mg+ *panchakola churna*-1 gm twice a day.
4. *Taruni kushumakara churana* -5 gm at bed time with luke warm water.

Result observed after the treatment were

Improvement in sign and symptoms of the patient. Relief was found in pain, tingling sensation and numbness. Feeling of lightness in lower limbs. Gait was improved.

Improvement in objective parameters

SLR –In right leg 90 degree and in left leg it was improved to 80 degree.

Pain intensity on VAS (Visual analogue scale) was reduced to 3.

Range of flexion of lumbar spine was improved.

Walking distance:-

Before treatment: - patient had severe pain after walking 100 meters.

After treatment:-patient could easily walk without pain about 200 meters.

DISCUSSION

Vata dosha is responsible for any kind of pain in body.^[4] *Basti* is the best treatment for correcting *Vata dosha*.^[5] Drugs used in *Erandmooladi basti* and *patra pinda sveda* having opposite *guna* of *Vata dosha*, hence it corrects vitiated *Vata dosha* and allows free movement of *Vata*. *Erandmooladi basti* was selected here for present study because it is specially mentioned for the treatment of *jangha* (leg), *uru* (thigh), *pada* (feets), *trika* (pelvis), *pristha* (back) *shoola*. By virtue of the drugs of ***Erandmooladi Niruha Basti***^[6] the *Avarana* of *Vata* may be reduced which in turn makes the free movement of *Vata* which may be reason for reduction in pain, numbness etc. and improvement in gait. *Panchtikta ghritha* used as *sneha* in *basti* is helpful in *asthisandhi gata vikara* due to its *Tikta rasa* which helps in reduction of *sotha* (inflammation) and corrects the degeneration that took place at the level of disc by virtue of *snigdha* *guna*. *Ashwagandha taila* contains *balya* drugs so it is *Brihmna* and *snehana* in nature helps to overcome the accumulation of *Vata* at the site of pathology and may nourish the underlying tissue.

Patrapinda Sveda^[7] is a type of *Svedana*. *Svedana* has its main actions like *Stambhaghna*, *Gouravaghna*, *Sheetaghna* and *Svedakarakatva*. The drugs used for *Patrapinda Sveda* are *Nirgundi*, *sahijana*, *Eranda*. All the Drugs used for *Patrapinda Sveda* are *Ushna Virya*. *Ushna Guna* of *Sveda* dilates the capillaries and thus increases circulation. Increased circulation enhances the elimination of waste products and more absorption of *Sneha* or drugs through the skin. Medicated oil along with active principles of drugs acts on target point. It has been scientifically proven that vegetable oils act as permeation enhancers (US Patent No-5229130). Due to thermal effect, *Patrapinda* causes relaxation of muscles, which leads to reduction in stiffness. It also stimulates muscles and nerves, which promotes its renovation.

CONCLUSION

On the basis this case study it can be concluded that *Panchakarma* procedures like *Patra pinda sveda* and *Erandmooladi niruha basti* had been effective in the management of *Gridhrasi* (*Sciatica*) due to disc degeneration.

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