EFFECT OF SIRAVYADHA IN THE PAIN MANAGMENT OF GRIDHRASI- A CASE STUDY

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ABSTRACT

**Introduction:** Gridhrasi is a condition characterized by Ruk, Toda, Stambha, Spandana in Sphik pradesha and radiates downwards to Kati, Prusta, Uru, Janu, Jangha and Pada. Gridhrasi can be compared with Sciatica. Siravyadha is the major line of treatment mentioned in Ayurveda classical texts.

**Case study:** A female patient aged 35 years; presenting with cardinal clinical signs and symptoms of Gridhrasi visited OPD with history of eight years and worsen in last two days. She was examined thoroughly and detailed history of illness was recorded. She was treated with Siravyadha atantara kandara gulpha sandhi by following proper Purva, Pradhana and Paschyat karma.

**Observation and Result:** patient got relief in subjective parameters i.e., Ruk and Stambha. There was marked improvement in SLR test, mild improvement in Rt. lateral flexion and backward extension of lumbar spine movement. Forward flexion and Lt. lateral flexion of lumbar spine movement remained unchanged.

**Conclusion:** Siravyadha is administered in Tridoshashti and Sarvangagatadushti. In Ghridrasi, Rakta and Kandara are Dushya and Vyana vata is major Dasha. Siravyadha corrects these imbalances by letting out the vitiated blood. The procedure was simple, economical and can be done in OPD level. It gives immediate relief of pain and stiffness.

**KEYWORDS:** Gridhrasi, Vatavyadh, Siravyadha, Sciatica.

INTRODUCTION

Gridhrasi is Shoola pradhana nanatmaja vatavyadh,\[1\] affecting the lower limb which hampers patient’s daily routine activity. Gridhrasi (Grighdra-vulture, asi-like) the name itself indicates the gait of patient due to extreme pain i.e., like Gridhra or vulture. It is a condition in which the Kandara (muscle tendons) which is passing towards the fingers of the feet, through Parshni (the region below Gulpha- ankle joint), gets vitiated by Vata, causes inability to lift the lower limb. The cardinal signs and symptoms in Gridhrasi is intense shooting pain which is initially affect sphik as well as posterior aspect of Kati and then gradually radiates to posterior aspect of thigh (Uru), knee (Janu), calf (Jangha) and foot (Pada). Gridhrasi is of two types - Vataja and Vatakaphaja like Tandra (drowsiness), Govuvara (heaviness), Arochaka (anorexia) will be there.\[2\] On the basis of symptoms of Gridhrasi; it can be correlated to sciatica. It occurs due to spinal nerve irritation and is characterized by pain in distribution of sciatic nerve.\[3\]

Low back pain is a common condition that affects as many as 80 to 90 percent of people during their lifetime, sciatica occurs in about 5 percent of cases. Sciatica is more common between 30 and 50 years of age.\[4\]

Conservative management of sciatica includes administration of muscle relaxants, NSAIDs, analgesics and corticosteroids. But their long term use can produce toxic effects to the different system of the body. And surgical procedures are carried out which are quite expensive and cause adverse effects like restricted movement of spine, bowel and bladder incontinence.

Line of Management of Ghridrasi includes Siravyadha, Bastikarma and Agnikarma.\[5-8\] Siravyadha and Agnikarma are considered as instant healers of pain. Raktamokshana by Siravyadha method is Ardhachikitsa according to Sushruta.\[9\] Siravyadha is specially indicated in case of Gridhrasi. It is a simple OPD level procedure affordable to all categories of patients and time saving. Hence in the present study is made to evaluate the efficacy of Siravyadha in the management of Gridhrasi.
CASE REPORT

Chief Complaints
1. C/o back pain which is radiating to right leg since 8 years. Got worsen since 2 days.
2. c/o twitching type of pain, difficulty in sitting-standing since 2 months.
3. Stambha, Aruchi and Gouravata since 1 month.

History of personal illness
A female patient aged 35 years presented with the complaints of back pain and then gradually radiates to posterior aspects of Uru, Janu, Jangha and pada of right side. Also c/o twitching type of pain, difficulty in sitting-standing since two months, associated with Stambha, Aruchi and Gouravata since one month. The patient consulted a physician in Hubli, and treated with NSAIDs for 7 days and patient felt little relief; but from last two days there is regression of symptoms severe than previous episode. Now the patient came to our hospital for further treatment.

Poorvavyadhivrittanta
Not a k/c/o DM/ HTN/ Other systemic illness.

Astastana Pariksha
Nadi = 82/min.
Mala = once/ day without difficulty
Mutra = 4-5 times/day, 1 time/night
Jiwha = coated
Shabda = Normal
Sparsha = slight tenderness present over the lumbar region
Druk = Normal
Akruti = Madhyma
B.P = 140/80 mm/Hg.

Locomotor system:
SLR test: positive at 50° right leg
Gait: antalgic gait present

Investigations
Hb% = 11gm%
RBS = 110
PS = Normocytic normochromic blood picture

Clinical Study, Materials and Methods

Purva karma: Tila yavagu was administered for one Annakala. On the day of Siravyadha, Sthanika abhyanga was done around Gulpha sandhi using Tila taila, followed by Bhaspa swedana of Dashamula kashaya.

Pradhana karma: Patient was made to sit in a Jaanu Sama aasana (on a chair of his knee height), facing to east in a warm room, devoid of breeze and dust. The area around right ankle joint (Antarakhandara gulphasandhi) was slowly tapped with fingers to find the veins; Siravyadha is done by puncturing prominent vein using number 20 scalp vein set. Blood flowing out was collected in kidney tray till it stops by itself. There was total 120ml blood was collected in 12 minutes.

Paschat karma
The scalp vein set was removed and proper bandaging was done using Haridra churna. Patient was advised to take Laghu, Drava, Ushna ahara.

<table>
<thead>
<tr>
<th>Subjective parameters</th>
<th>Ruk</th>
<th>Sthamba</th>
</tr>
</thead>
<tbody>
<tr>
<td>BT</td>
<td>Moderate-painful walk with limping but without support.</td>
<td>Mild stiffness (1-10 min) - up to 25% impairment. Pts. can perform daily work.</td>
</tr>
<tr>
<td>AT</td>
<td>Relief was found in back pain</td>
<td>Relief was found in stiffness</td>
</tr>
<tr>
<td>FU</td>
<td>Relief was found in back pain</td>
<td>Relief was found in stiffness</td>
</tr>
</tbody>
</table>

Observation and Result
The values of SLR test, movement of lumbar spine were recorded before treatment, after treatment and on day of follow-up, and tabulated in the case proforma. Patient got relief from back pain, numbness and tingling sensation. There was improvement in gait.
The observations are tabulated below

<table>
<thead>
<tr>
<th>Objective Parameters</th>
<th>BT</th>
<th>AT</th>
<th>Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>SLR (right leg)</td>
<td>50° with pain</td>
<td>80° without pain</td>
<td>80° without pain</td>
</tr>
<tr>
<td>Movement at lumbar spine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Forward Flexion</td>
<td>20cm above ground</td>
<td>20cm above ground</td>
<td>20cm above ground</td>
</tr>
<tr>
<td>Rt. Lateral Flexion</td>
<td>30° with pain</td>
<td>35° without pain</td>
<td>35° without pain</td>
</tr>
<tr>
<td>Lt. Lateral flexion</td>
<td>35° without pain</td>
<td>35° without pain</td>
<td>35° without pain</td>
</tr>
<tr>
<td>Backward extension</td>
<td>10° with pain</td>
<td>20° without pain</td>
<td>20° without pain</td>
</tr>
</tbody>
</table>

**DISCUSSION**

*Gridhrasi* is included under the 80 types of *Nanatmaja Vata Vikara*. Diseases of lumbar spine are most expensive orthopedic problem. Herniation and degenerative changes in the disk are the most common causes of sciatica. There is often history of trauma as twisting of the spine, lifting heavy objects or exposure to cold.

Acharya Charaka has described *Siravyadha*, *Basti Karma* and *Agnikarma* in the management of *Gridhrasi*. Acharya Sushruta has mentioned diseases; those are not relieved so quickly by *Snehana*, *Lepanadi* therapeutic measures in these situation *Siravyadha* is an emergency management to achieve better results.

The symptoms of *Samyaksiravyadha* are *Laghavam* (Body and painful area) and *Vedanashanti* (pain reduction), *Visravitrakta* stop itself.

*Siravyadha* reduces pain of *Ghridhrasi* diseases immediately and also reduces other symptoms of *Ghridhrasi* pricking sensation, stiffness, tingling sensation, heaviness and increases the SLR angle in a single sitting procedure.

This procedure *Siravyadha* may help in this disease *Ghridhrasi* by correcting the Dosha- *vyana vata* and *Dushyakandara*; which is Upadhatu of Rakta. *Siravyadha* expels out vitiated Rakata and Vyanavata and facilitates normalcy of *Vayu*.

The entire treatment was accepted easily by the patients. There were no side effects noticed in the patients. There is no need to be hospitalization of the patient in the procedure.

Hence, *Siravyadha* can be used in pain predominant diseases.

**CONCLUSION**

This case study of effect of *Siravyadha* in the pain management of *Gridhrasi* gave a promising result. The procedure was simple economical and can be done in OPD level. *Siravyadha* shows immediate pain relief in *Gridhrasi*, but still to avoid the reoccurrence of the disease and to break the *Samprapti* the patient may need to maintain their lifestyle.

**REFERENCE**

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