ISSN: 2322 - 0902 (P) ISSN: 2322 - 0910 (O)



# **Research Article**

# A CLINICAL INSIGHT INTO THE ROLE OF *PANCHAKARMA* IN *GRIDHRASI* WITH REFERENCE TO SCIATICA

# Arathi Badiger D1\*, Sangnor Smitha Laxman Rao2

\*¹PG Scholar, ²Associate Professor, Dept. of Panchakarma, Government Ayurveda Medical College, Bengaluru, Karnataka, India.

#### Article info

#### **Article History:**

Received: 20-08-2025 Accepted: 17-09-2025 Published: 15-10-2025

#### **KEYWORDS:**

Gridhrasi, Sciatica Vataja Nanatmaja Vikara, Prusta Basthi, Panchathikta Ksheera basthi, Sakthikshepa Nigraha.

#### **ABSTRACT**

*Gridhrasi* is one among the eighty *Nanatmaja vatavyadhi* described in the Ayurvedic text. In today's era the changing lifestyle shifting duties, inappropriate posture, excessive twowheeler travelling, irregular dietary habits, no exercise, these factors produce stress on spine and responsible for diseases like Gridhrasi. The cardinal signs and symptoms of Gridhrasi are Ruk, Toda, Spandhana in Sphik, Kati, Uru, Janu, Jhanga, and Pada in order Sakthikshep Nigraha which all these can be corelated to sciatica in the contemporary science. Sciatica is a painful condition that causes pain in the lower back radiating to lower limbs resulting from irritation of the sciatic nerve roots. The nerve extends from the lower back down each leg and when effected can cause severe discomfort varying from mild ache to sharp burning sensation even excruciating pain. It is more among the people of age between 30yrs and 50yrs. Panchakarma therapy is a unique potent approach of Ayurveda which attacks the very root cause of the disease cleanses the microcirculatory channels, removes the vitiated doshas and produces long lasting benefits. A female patient of age 53yrs approached our hospital with the history of pain in the lower back since 10 days radiating to bilateral lower limbs with the features of Gridhrasi that is sciatica, like pain, electric shock like sensation, stiffness, and burning sensation, difficulty in sitting, standing and walking for even for 5 minutes. Treatment plan included Abyanga, Choorna Pinda Sweda, Panchatiktha Ksheera Basthi, Prustabasthi, with Vasa Bala Ashwagandha Taila, along with Shamana Chikithsa. After 40 days of treatment patients' symptoms were assessed and outcome as good. The patient who was finding difficulty in standing for 5 minutes found remarkable improvement in the signs and symptoms and also in general quality of the life.

#### INTRODUCTION

Gridhrasi is one among the eighty Nanatmaja Vatavyadhi described in the ayurvedic text, which can be corelated to sciatica in the contemporary science. Sciatica is a painful condition that causes pain in the lower back radiating to lower limbs resulting from irritation of the Sciatic Nerve roots. The nerve extends from the lower back down each leg. The term Sciatica is used when the leg pain radiates posteriorly in the sciatic or L5/S1 distribution. It is caused by impingement of the L4, L5 or S1 nerve i.e., from herniated disc and manifests as unilateral



neuropatheic pain extending from gluteal region down the posterior-lateral leg to the foot characterized by excruciating pain and paresthesia in sciatic nerve distribution and can severely impact the quality of life of those effected. It is more common among the age group of 30 yrs and 50 yrs usually caused by herniated disc, bone spur, spinal stenosis or interarticularis compressive fracture. [2] Life time incidence is reported between 10% to 40% and annual incidence of 1% to 5% in India. As per library of science 90% of Sciatica are caused by Herniated disc with nerve root compression.

In Ayurveda *Gridhrasi* is of two types where in vitiated *Vata* inside the buttocks causes *Ruk, Toda, Sthambha, Spandana* in *Vataja* type of *Gridhrasi.* In *Vatakaphaja Gridhrasi,* one might see *Tandra* (drowsiness), *Gaurav* (heaviness), and *Aruchi* (anorexia).<sup>[3]</sup>

Panchakarama management of Gridhrasi includes Shiravyadha, Agnikarma, Basthi. [4] In the present case, Snehana, Swedana, Basthi Karma, Agnikarma, Prusta Basthi were adopted along with Shamana Oushadhi.

Case report: A female patient aged 53 years n/k/c/o Diabetes mellitus; hypertension hypothyroidism was apparently normal 10 days back. One day she experienced sudden pain in the lower back of the body after she had sudden jerk while travelling in the back seat of bus. It was associated with stiffness, burning sensation, numbness and tingling sensation. The pain was constant, aggravated on physical activity and also on coughing and sneezing. She had approached the nearby hospital immediately and was treated for the same for one day and found no significant improvement. As the patient preferred Ayurveda line of treatment, he approached our hospital and was admitted for the better management of the pain.

Name	xyz		
Age	53yrs		
Gender	female		
Religion	Hindu		
Occupation	Homemaker		
Address	Deepanjali Nagar, Bengaluru		
OPD no	43893		
IPD no	3074		
DOA	09/09/2024		
DOD	20/10/2024		

#### Pradhana vedhana

C/O pain in the lower back radiating to B/L lower limb and paraspinal region since 10 days.

*Anubandha Vedhana*- Associated with stiffness and numbness. Difficulty in sitting and walking.

*Purva Vyadhi Vruttanta*- N/K/C/O DM, HTN, thyroid dysfunction.

Koutumbika vritanta - Nothing significant

# Vavaktika vruthanta

Ahara	Mixed
Nidra	Sound
Mala	Irregular after incident
Mutra	3-4 times /day
pravritti	2 times/ night

# **General examination**

General appearance	Healthy
Height	157cm
Weight	65kgs
BMI	26.4kg/m
Pulse rate	78bpm
Blood pressure	120/84mm of Hg.

Pallor	Absent
Icterus	Absent
Edema	Absent
Clubbing	Absent
Lymphadenopathy	Absent
Cyanosis	Absent

# Ashtasthana pareeksha

Nadi	Prakrutha	
Mala	Aprakrutha since the incidence	
Mutra	Prakrutha	
Jihwa	Lipta	
Shabda	Prakrutha	
Sparsha	Prakrutha	
Drik	Prakrutha	
Akriti	Madhyama	

# Samprapthi ghataka

Prakruti	Vata kphaja	
Pramana	Madhyama	
Dosha	Vata Kaphaja	
Dushya	Kandara, Snayu, Asthi, Mamsa	
Satmya	Madhyama	
Sara	Madhyama	
Bala	Madhyama	
Abhayavarana Shakthi	Madhyama	
Jarana Shakthi	Madhyama	
Samhanana	Madhyama	
Vyayama Shakthi	Avara	
Vaya	Madhyama	

#### Systemic examination

Central Nervous system- HMF intact.pt is conscious with time, place and person.

Respiratory system- Normal vesicular breath sound heard, no added sounds.

Cardiovascular System - S1 S2 heard, no murmurs Gastrointestinal system - P/A soft, non-tender Per Abdomen-soft and non-tender.

#### Nidhan Panchaka

vianan i anchana			
Nidana	Sudden jerk while travelling in the back seat of bus.		
Poorvarupa	Pain in the lower back		
Rupa	Pain in the lower back radiating to bilateral lower limbs. A/w with stiffness. numbness. burning		

#### Arathi Badiger D, Sangnor Smitha Laxman Rao. Role of Panchakarma in Gridhrasi with reference to Sciatica

	sensation and electric shock like sensation.	
Upashaya	Pain subsides on rest in sleeping position.	
Anupashaya	Aggravates on sitting and walking.	

#### Musculo-skeletal examination

Gait: Antalgic Range of Movement

Spine examination: Range of Movement:

Curvature of spine: Normal Flexion-painful and restricted

Tenderness: At L4-L5, L5-S1 and B/L paraspinal muscles Extension-painful

Doorbell sign: Positive at L4, L5, S1 Lateral- painful and restricted.

Coin pick test: Painful and restricted. Toe walk: pain

full and restricted

Heel walk: Painful and restricted

# Tests

	Right leg	Left leg
SLR	20°	30°
Bregards Sign	Positive	Positive
Bowstring Sign	Positive	Positive
VAS Score	9	9

# **Investigations**

 $MRI\ of\ lumbo\ sacral\ spine:\ Partial\ compressive\ fracture\ of\ L1\ vertebra.\ Hemangioma\ in\ L4\ vertebra.$ 

Grade 1 anteriolisthesis of L5 over S1 with annular tear of bilateral interarticularis defect and pseudo disc bulge at L5-S1.

# Treatment plan in first visit

Treatment	DURATION
Sthanika abhyanga with Kanaka taila followed by Choorna pinda sweda	3 days
Panchatiktha kashaya basthi followed by <mark>Pa</mark> ncha <mark>tikth</mark> a ks <mark>hee</mark> ra Basthi	12 days
Anuvasana basthi with Guggulu tiktha gri <mark>th</mark> a	16 days
Agnikarma	One sitting
Matrabasthi with Ashwagandha bala lakshadhi taila	8 days
Rasnadhi upanaha to lower back	7 days
Prusta basthi with Vasa and Ashwagandha bala lakshadhi taila	15 days
Dry cupping to lower back	8 days

# Treatment plan for second visit

Sthanika abhyanga with Kanaka taila followed by Patra pinda sweda	7 days
Prusta basthi with Vasa and Ashwagandha bala lakshadhi taila	7 days
Panchatiktha kashaya basthi followed by Panchatiktha ksheera Basthi	6 days
Anuvasana basthi with Trivruth Sneha with Guggulu tiktha Gritha+ Vasa+ Ashwagandha bala lakshadhi taila	10 days
Dry cupping to lower back	7 days

#### **Observations**

# **Subjective parameters**

Signs and symptoms	Before treatment	After 1st visit	After 2 <sup>nd</sup> visit
Radiating pain	3+	2+	1+
Numbness	2+	1+	0
Burning sensation	3+	1+	0
Electric shock like sensation	3+	2+	0
Walking distance	Difficult to stand for 5 minutes.	Pt was able to stand for 30 minutes.	Patient was able to do morning walking for 1 hour.

#### **Objective parameters**

Tests and Signs	Before treatment		After 1st visit		After 2 <sup>nd</sup> visit	
SLR	RL	LL	RL	LL	RL	LL
	20°	30°	50°	55°	>70°	>70°
Bregards Sign	+	+	+	+	-ve	-ve
Bowstring Sign	+	+	+	+	-ve	-ve
Walking distance	Difficult to stand even for 5minutes		Standing for 30 minutes		Able to do morning walking for 1 hr	
VAS Score	9		5		2	

The patient demonstrated remarkable clinical recovery with significant improvement in overall condition. There was a considerable reduction in lower back pain, burning sensation, and numbness. Gait pattern showed notable correction, progressing from an antalgic to a normal walking posture. The patient regained comfort and confidence in performing forward bending and lateral flexion movements. Post-treatment MRI findings revealed correction of Grade I anterolisthesis, indicating radiological normalization. Following this improvement, the patient successfully resumed normal daily activities, which were previously hindered by the condition

#### **DISCUSSION**

The patient demonstrated remarkable clinical recovery with significant improvement in overall condition. There was a considerable reduction in lower back pain, burning sensation, and numbness. Gait pattern showed notable correction, progressing from an antalgic to a normal walking posture. The patient regained comfort and confidence in performing forward bending and lateral flexion movements. Post-treatment MRI findings revealed correction of Grade I anterolisthesis, indicating radiological normalization. Following this improvement, the patient successfully resumed normal daily activities, which were previously hindered by the condition.

#### Abhyanga

Abhyanga, being performed on the Twak (skin), effectively pacifies Vata Dosha. [5] Abhyanga acts as a potent measure to delay the aging process. Thus, it effectively retards the degenerative changes occurring in various Dhatus. Sneha applied for approximately 900 Matra Kala, it can permeate up to the Majja Dhatu. This deep nourishment helps in maintaining the integrity and strength of deeper tissues.

Swedana: Swedana plays a pivotal role in pacifying Vata Dosha, which is primarily responsible for Stambha (rigidity) and Sankocha (contracture) due to its inherent Ruksha (dry) and Sheeta (cold) qualities. [6] Swedana facilitates the normalization of neuromuscular and circulatory functions by liquefying the aggravated Doshas lodged within the Srotas.

Panchatiktha ksheera Basthi: Among therapeutic measures, Basti is considered the Pradhana Karma in the management of Vata vyadhis. Basti administered through the anal route enters into the Pakvashaya and removes the Doshas accumulated there. Khshira (milk) and Ghrita (ghee), being Snigdha and Madhura in nature, act as effective Vata-shamana substances. Tikta Rasa, constituted mainly of Akasha and Vayu mahabhutas, is characterized by its lightness and penetrating quality. They naturally tend to reach and nourish the Asthi dhatu after assimilation in the body.[7]

**Prusta Basthi:** an Ayurvedic therapeutic procedure for the back, involving a reservoir of warm, medicated oil placed on the spine to provide relief from pain, stiffness, and inflammation. It is effective for chronic back pain, sciatica, and degenerative changes like disc disease, strengthening spinal muscles, and improving flexibility and circulation.

Agnikarma: Agnikarma treatment is an ancient Ayurvedic para-surgical procedure involving the controlled application of heat to a specific point on the body using a specialized heated metal instrument to relieve chronic in musculoskeletal disorders, and skin conditions like corns and warts. The goal is to provide quick relief by reducing pain and inflammation, stimulating healing, and improving circulation.

**Dry Cupping:** Cupping therapy is a therapeutic technique that utilizes a vacuum force created beneath a small vessel applied onto the skin's surface. This approach focuses on blood and autologous healing substances in a specific area, stimulating metabolic activity, improving immune function, and stabilizing blood biochemistry.<sup>[8]</sup>

Guggulu tiktha gritha: 'Guggulutiktaka Ghrita, which is Vataghna (Vata pacifier) in nature. In Ayurvedic literature the Guggulu tiktaka ghrita is being used for treatment of Asthimajja kshaya and also the combination explained in Asthimajjagata Vata. This drug is mentioned by Ashtanga Hridaya in the management of bones and associated disorders administration of Guggulutiktaka Ghrita is an effective medicine in reduction of pain, swelling, tenderness and restrictions to movements without any noxious effect which is very important.<sup>[9]</sup>

**Balashwagandhadhi taila:** Balashwagandhadhi taila helps in mitigating *Vata, Nadibalya* and *Puatikara.*<sup>[10]</sup>

#### CONCLUSION

Gridhrasi is most common Nanatmaja Vatavyadhi which is Vatakapha predominant where the vitiated Vata dosha manifests as low back pain which radiates to lower limb accompanied by stiffness and numbness Ayurvedic classics have described various treatment modalities in management of Gridhrasi since ancient times. It can be managed by various Panchkarma treatments like Abhyanga, Swedana, Basthi and Agnikarma as well with each therapy being tailor made to suit to the patient, the benefit is tremendous. Thus, it may be concluded that the Ayurvedic management of Gridhrasi is a gift to the society, in todays paced world.

#### REFERENCES

- 1. Harrison's Principles of Internal Medicine 20<sup>th</sup> edition, Loscalzo J, Fauci A, Kasper D, Hauser S, Longo D, Jameson J, New York: The McGraw-Hill Companies, Inc; 2022, part 11 section 3 pn 2620 and 3222.
- 2. Harrison's Principles of Internal Medicine 20<sup>th</sup> edition, Loscalzo J, Fauci A, Kasper D, Hauser S, Longo D, Jameson J, New York: The McGraw-Hill Companies, Inc; 2022, part 11 section 3 pn 3222.
- 3. Acharya YT, ed., Charaka Samhita of Agnivesha elaborated by Charaka and Drdhabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, Chikithsa Sthana 28th chapter, Varanasi: Chaukhamba Surbharati Prakashan, 2015 versus 56-57
- Acharya YT, ed., Charaka Samhita of Agnivesha elaborated by Charaka and Drdhabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, Chikithsa Sthana 28th chapter,

- Varanasi: Chaukhamba Surbharati Prakashan, 2015 versus 101
- Acharya YT, ed., Charaka Samhita of Agnivesha elaborated by Charaka and Drdhabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, SutraSthana 22<sup>th</sup> chapter, Varanasi: Chaukhamba Surbharati Prakashan, 2015 versus 11
- Acharya YT, ed., Charaka Samhita of Agnivesha elaborated by Charaka and Drdhabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, SutraSthana 22<sup>th</sup> chapter, Varanasi: Chaukhamba Surbharati Prakashan, 2015 versus 11
- 7. Acharya YT, ed., Charaka Samhita of Agnivesha elaborated by Charaka and Drdhabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, Chikithsa Sthana 28th chapter versus 27 and 15th chapter versus 36, Varanasi: Chaukhamba Surbharati Prakashan, 2015 versus 11
- 8. Cupping Ghods R, Sayfouri N, Ayati MH. Anatomical Features of the Interscapular Area Where Wet Cupping Therapy Is Done and Its Possible Relation to Acupuncture Meridians. J Acupunct Meridian Stud. 2016 Dec; 9(6): 290-296. [PubMed]
- 9. Acharya YT, ed., Astanga Hridaya of Vagbhata with Ayurveda Rasayana and Sarvanga Sundara commentary by Shri Hemadri and Shri Arunadatta respectively, Chikithsa Sthana 21st chapter, 57-61 verse, Varanasi: Chaukhamba Surbharati Prakashan, 2015
- 10. Bhaishajya Ratnavali, of Kaviraj shri Govind Das Sen translated by Dr. G. Prabhakar rao Khudraroga adhikaara Verse 130-135 pg no 417

#### Cite this article as:

Arathi Badiger D, Sangnor Smitha Laxman Rao. A Clinical Insight into the Role of Panchakarma in Gridhrasi with reference to Sciatica. International Journal of Ayurveda and Pharma Research. 2025;13(9):41-45.

https://doi.org/10.47070/ijapr.v13i9.3854

Source of support: Nil, Conflict of interest: None Declared

# \*Address for correspondence Dr. Arathi Badiger D

PG Scholar

Dept. of Panchakarma

Government Ayurveda Medical College, Bengaluru, Karnataka.

Email: drarathivarma1979@gmail.com

Disclaimer: IJAPR is solely owned by Mahadev Publications - dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. IJAPR cannot accept any responsibility or liability for the articles content which are published. The views expressed in articles by our contributing authors are not necessarily those of IJAPR editor or editorial board members.