

Study of Efficacy of Panchamuli Kashaya in Gridhrasi

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Introduction:

In Ayurvedic classics 'Ashtomahagadas' are described which are difficult to treat and cure. 'Vatavyadhi' is one of them and 'Gridhrasi' is included in vata nanatmaja vyadhi. The prime cause of Gridhrasi is the vitiated vatadosha. Various aetiological factors for vitiation of vata have been mentioned such as excessive walking, continuous and over exertion, withholding of natural urges, trauma to vital organs, sleeping on an uncomfortable bed, excessive riding, jerky movements during traveling, lifting heavy weights, sedentary occupation and unwholesome dietary habits etc. All these factors cause localisation of the vitiated doshas leading to increasing incidence of diseases like Gridhrasi. The signs and symptoms of Sciatica are mostly mimic with lakshanas in Gridhrasi. The pain starts at sphik and then radiates kati, prishtha, uru, janu, jangha and pada in order along with stambha, toda, muhuspandana etc. Gridhrasi affects the daily routine of patient and causes a lot of difficulties in mobilization due to tremendous pain. Despite of the advancement in modern medicine, the management of Sciatica is still a medical problem, no permanent medical treatment is available and chances of recurrence are very high even after surgery. The purpose of selecting this topic for study was relatively high incidence of the disease and non-availability of reliable, long-lasting effective treatment modality. It's true a lot of work has been done on the topic but a relatively simple formulation which is easy to prepare and consume was a need of the hour. Hence I have selected the subject "Study of efficacy of Panchamuli kashaya in Gridhrasi"

Aims and objectives

1. To study the efficacy of Panchamuli Kashaya in Gridhrasi

2. To study the adverse effects of Panchamuli Kashaya if any.
3. To find out safe, quick cheap and effective remedy for this disease

Materials and Methods

The present study was carried out in two parts: Literary and clinical.

Review of Literature

1. Description of Gridhrasi - Nidan, Poorvarupa, Roopa, Samprapti and Chikitsa from various Ayurvedic classics.
2. Description of Sciatica referred from Modern literature.
3. Description of Panchamuli Kashaya (Ref. Bhaishajya Ratnawali Vatavyadhi Chikitsa 26/38)

Concept of Panchamuli Kashaya

Abhyantara Pana of Panchamuli Kashaya is advised in Bhaishajya ratnawali Vatavyadhi Chikitsa 26/38. It is prepared from Brihatpanchamulas which are best Vatakaphashamaka. Bilva, Agnimantha, Shonyaka, Patala and Gambhari are collectively known as Brihatpanchamulas. Eranda Taila, Trivrita churna and Goghrita are added as prakshep dravya in this Kashaya. Eranda Taila is best Vata shamaka and Virechaka. Trivrita is also having Sukhavirechana property with Kapha - pittaprashamana and Vatanashana. We all know that Goghrita is Tridoshashamaka, Yogavahi and Rasayana. So such Kashaya is used in the management of Gridhrasi.

Drug preparation

The Kashaya Kalpana was done according to Sharangadhara Samhita. For Group A, Panchamuli Kashaya was prepared as follows.

Panchamuli = Brihatpanchamula + Eranda + Trivrita + Goghrita Kashaya
Kashaya Taila churna
80ml. + 10ml. + 2.5gm + 10ml.

For Group B, Yashtimadhu Kashaya was prepared as per Kashaya Kalpana.

Both freshly prepared Kashayas were served luke warm.

Clinical Study Study Design

For the clinical part of the present study 60 patients suffering from Gridhrasi were randomly selected from OPD and IPD of late B.V.Kale Ayurved Medical College and Hospital, Latur. The clinical trial was carried out on 60 patients. Patients were divided in two groups and were subjected to following therapeutic regimen.

Group A: In this group Abhyantara Pana of Panchamuli Kashaya was given.

Group B: In this group Abhyantara Pana of Yashtimadhu Kashaya was given .

Group B was taken as control group. Single blind study was done for this group.

Patients of both groups were observed before, during and after treatment. The study was carried out on patients of both groups for a period of 21days. Follow up was kept on 7th,14th and 21st day. At the time of each follow up, patients were examined thoroughly. Pain gradation, Walking time and SLR angle were noted.

Method of Administration

For both groups Abhyantara Pana of freshly prepared luke warm kashayas 80 ml in quantity given orally vyanodankala for 21days

Inclusion criteria

- Patients having textual signs and symptoms of Gridhrasi irrespective of age group were selected
- Both male and female patients were included in the study.

Exclusion criteria

- Complicated cases like Pott's spine or tubercular disc lesions were excluded.
- Autoimmune disorders also excluded .

Assessment Criteria

Reduction in pain was prime criteria of assessment. Oxford Pain Chart was used for pain assessment. The changes in signs and symptoms were observed minutely and noted properly in the case proforma. In other assessment criteria,SLRT angle

and Walking Time also measured . The collected data analysed statistically and documented.

Observations

Classification As Per Various Related Criterias

1) Agewise :-

	Age in Years			Total
	30-40	41-60	61-80	
No. of Pts. In Group A	7	18	5	30
No. of Pts. In Group B	4	23	3	30
Total	11	41	8	60

2) Sexwise :-

	Sex		Total
	Male	Female	
No. of Pts. In Group A	9	21	30
No. of Pts. In Group B	5	25	30
Total	14	46	60

3) Prakriti Wise :-

	Prakriti			Total
	Vata Pradhana	Pitta Pradhana	Kapha Pradhana	
No. of Pts. In Group A	18	4	8	30
No. of Pts. In Group B	16	2	12	30
Total	34	6	20	60

4) Diet Wise :-

	Diet		Total
	Vegetarian	Mixed	
No. of Pts. In Group A	8	22	30
No. of Pts. In Group B	10	20	30
Total	18	42	60

5) Occupation Wise :-

	Occupation				Total
	House wives	Workers	Field Workers	Servicemen	
No. of Pts. In Group A	16	8	4	2	30
No. of Pts. In Group B	14	6	7	3	30
Total	30	14	11	5	60

6) Disease Type Wise :-

	Disease Type		Total
	Vataja	Vatakaphaja	
No. of Pts. In Group A	18	12	30
No. of Pts. In Group B	21	9	30
Total	39	21	60

7) SLR Angle Wise :-

	SLR Angle				Total
	0-45	46-60	61-80	81-90	
No. of Pts. In Group A	4	20	6	0	30
No. of Pts. In Group B	2	18	10	0	30
Total	6	38	16	0	60

8) Pain Gradation Wise :-

Pain Gradation	Group A		Pain Gradation	Group B	
	No. of Pts. B. T.	No. of Pts. A. T.		No. of Pts. B. T.	No. of Pts. A. T.
0	0	5	0	0	3
1	6	18	1	4	3
2	2	6	2	2	2
3	4		3	4	1

9) Symptom Wise :-

Sr. No	Symptoms	No. of Pts.	% a g e
1	Pain in sphika-kati-prishtha-uru-janu-jangha upto pada	60	100.00
2	Parshni pratyanguli Vedana	20	33.33
3	Ruk	60	100.00
4	Stambha	6	10.00
5	Toda	38	63.33
6	Janusandhi Sphurana	5	8.33
7	Sakhikshepanigraha	36	60.00
8	Tandra	10	16.67
9	Gaurava	18	30.00
10	Arochaka	21	35.00
11	Mukhapraseka	17	28.33
12	Bhaktadwasha	20	33.33
13	Urusphurana	25	41.67

Observation and Discussion

Vatavyadhi is one of the most common health problems now a days in clinical practice and Gridhrasi is one among them due to various aetiological factors and sedentary lifestyle. According to sex female patients were more in number than men may be due to workload and stress related to lumber region, long-term sitting, lack of exercise and faulty sitting positions. Maximum patients are observed in the age group of 41-60 suggestive of more hardwork, stress, excessive traveling and unwholesome dietary habits. Housewives and the workers'are the most affected patients in this study. Patients having Vata and Kapha prakriti were found to be more prone to Gridhrasi. Vataja Gridhrasi patients were seen more in number than Vatakaphaja Gridhrasi. When Vatavyadhi becomes chronic, it is difficult to treat, same thing was found in this project. Patients came in early stage of disease, obtained good results in comparison to chronic patients. It was observed that after treatment there was significant reduction in Walking time of patients of Drug Group. It is

because of significant regression in intensity of pain after treatment. It was observed that Panchamuli Kashaya Pana is much beneficial in patients of Vatakaphaja Gridhrasi than Vataja Gridhrasi, it is because Brihatpanchamulas have best Vatakaphaghna action due to its tikt kashaya rasa, katu vipaka, ushna veerya and its laghu, ushna, ruksha guna. It is given with Eranda Taila, Goghrita and Trivrita churna. Among these Goghrita is Tridoshashamaka, Yogavahi and Rasayana. Trivrita is having Sukhavirechana property, Eranda Taila is best malanulomaka, so virechan karma which is necessary occurs here. So I got good results. Control Group was observed to be having little effective in treating Gridhrasi. The patients in Drug Group who had mild pain, got complete pain relief, patients with moderate pain got good pain relief and who had severe pain, got moderate pain relief. In Drug Group, out of 30 patients, in 15 patients SLR angle increased by 10°, in 6 patients by 15° and in 4 patients by 20°

Results

According to Oxford Pain Chart, the patients in Drug Group who had Grade I (i.e. mild pain) got 83.33% results, those who had Grade II (i.e. moderate pain) got 42.5% results and those who had Grade III (i.e. severe pain) got 25% results. Significant decrease in intensity of pain is not observed in Group B. For statistical analysis, Paired t test and Unpaired t test are used. Unpaired t test is used for comparison between Group A and Group B. In this test it is observed that there is significant increase in SLR angle, significant decrease in Walking time and significant decrease in intensity of pain in patients of Drug Group over Control Group

Conclusion

The study clearly concludes that Group A Panchamuli Kashaya Pana is much beneficial than Group B. It is also observed that Panchamuli Kashaya Pana is much effective in Vatakaphaja Gridhrasi than Vataja Gridhrasi. Abhyantara Pana of this kashaya in the management of Gridhrasi is found to be clinically effective and statistically significant. No adverse effect of this kashaya is found in this study.

Bibliography :-

1. Charaka Samhita Vidyotini Hindi comm. by R. D. Shastri Part I, Part II
2. Charaka Samhita with Chakrapani teeka (sanskrit comm.) Vd. Y. T. Acharya
3. Sushrita Samhita by Kaviraja Ambikadatta Shastri edi. 2002 published by Choukhamba sanskrit sansthana
4. Ashtanga Hridaya by Bramhanand Tripathi edi 2000 published by Choukhamba Sanskrit sansthana
5. Ashtanga Sangraha by Vd. Anant Damodar Aathavale edi 1980
6. Bhavaprakash Nighantu by Dr. Krishnachandra-Chunekar edi 2002, Choukhamba Bharati
7. MadhavaNidana by Ayurvedacharya Yadunandanopadhyaya edi. 1996
8. Sharangadhara Samhita by Acharya Radhakrishna Parashara edi 1984
9. Bhaishajjyatatnawali by Vd. Rajeshwardatta Shastri edi. 1986, Choukhama Orientalia, Varanasi
10. B.D. Chaurasia human anatomy 6th edi 2017
11. Principles of anatomy and physiology. Tortora 8th edi.
12. Harrison's Principles of internal medicine I & II 11th edi.
13. Davidson's Principles and practice of medicine 19th edi.