| VOL- IX | ISSUE- XI | NOVEMBER | 2022       | PEER REVIEW<br>e-JOURNAL | IMPACT FACTOR<br>7.331 | ISSN<br>2349-638x                |
|---------|-----------|----------|------------|--------------------------|------------------------|----------------------------------|
|         | Effic     | ·        |            | U                        | ement of Grudhrasi     |                                  |
|         |           | W        | .S.R Sciat | tica- A Clinical Stu     | ldv                    |                                  |
|         |           | ••       |            | ilea- IX Chinear Ste     | luy                    |                                  |
|         |           |          |            | ica- it chincai bu       | ·                      | mol Powar                        |
|         |           |          |            |                          | Dr. A                  | <b>mol Powar</b><br>ayachikitsa) |
|         |           |          |            |                          | Dr. A                  |                                  |

### **Abstract :**

Grudhrasi is most common disease occurring in degenerative phase of life span. It is mainly due to vitiated Vaata dosha. This occurs mainly due aghatajanya vaat dushti. In present case study I have selected 30 patients diagnosed with Grudhrasi(Sciatica) and treatment provided was Punarnavadi Churna 5gm twice a day for 15 days. As this drug contains punarnava, guduchi, shunthi, mishreya, vrudhadaruk, shathi, mundi, etc. these are all vatahar and vedana shamak, so we came to know that there was good results with this regimen.

## Introduction :

affecting disorders our system are increasingly seen in present era. These conditions considerably reduce the human activity in terms of social and professional life. Among such disorders Avurvedic classics have described a disease in the name of Grudhrasi. The name itself indicates the way of gait shown by patient due to extreme pain just like a Ghrudhra(Vulture). In modern vernacular the above condition is described in which pains experienced along the course and in the distribution of sciatic nerve. It has now become

well known even among the layman, as sciatica. People having improper sitting postures in offices, factories, farm etc. created undue pressure to the spinal cord. In this way this disease is now becoming a significant problem to the working population. In an overall assessment major number of patients presented to the hospital has some symptoms related with pain on low back and leg. A variety of Vatavyadhi described in Charaka Samhita are divided into Samanyaja and Nanatmaja. Gridhrasi comes one of the 80 types of nanatmaja vyadhi.

The cardinal sign and symptoms are Ruk, Toda, Spandana, Stambha in the Sphik, Kati, Uru, Janu, Jangha and Pada in order and Sakthikshepa Nigraha i.e. restricted lifting of the leg. In modern medicine there is only use of NSAIDs. calcium supplementation. Physiotherapy and surgical method As there are so many adverse effect and limitations to allopathy treatment.

As Grudhrasi is eoncemed Vata Prakopa-Ayarveda proxides Shodhana and Shamana Chikitsa for Gridhrasi. As various types of Shamana Yogas are explained and even research work is also carried out. Although lots of work has been done on Grudharasi, still the disease challenges our medical science, so it requires further research and proper treatment by Ayarvedic medicine.

Churna in Bhaishajya Ratnawali Adhyaya No. 29 Aam-Rogadhikar.

### Aim & Objectives

To observe the effect of Punamavadi churna in Grudhrasi.

#### **Materials And Methods**

Patients of both sex, and age between 20 and 60 years, having signs and symptoms of disease Grudhrasi, and fulfilling inclusion criteria were selected and registered from O.P.D.

and I.P.D. of L.K.R.A.M, Gadhinglaj.

#### **Inclusion Criteria**

 Patient having the signs & symptoms of Grudhrasi like Ruka, Toda, Stambha, Gaurava in the Sphika, Kati, Uru, Janu, Jangha and Pad.

| <ul> <li>2) Positive S.L.R. test(Straight Leg Raise test).</li> <li>3) The patients of Age group 20 to 60 years will be selected.</li> <li>Exclusion Criteria <ol> <li>Patient with CA Spine</li> <li>Age: &lt;20 years or &gt;60 years</li> <li>Tuberculosis of Spine</li> <li>Congenital Abnormalities in Lumbar Spine</li> <li>Surgical Indications</li> <li>Pregnancy</li> <li>Uncontrolled DM</li> </ol> </li> <li>Criteria for Dignosis <ol> <li>Positive SLR test in the affected leg.</li> <li>Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.</li> </ol> </li> <li>Laboratory Investigations <ol> <li>X-ray: Lumbosacral region—anteroposterior and lateral view</li> <li>A complete blood count (C.B.C.), erythrocyte sedimentation rate, serum</li> </ol> </li> <li>Stambha </li> </ul> <li>Stambha <ul> <li>Stambha</li> </ul> </li> <li>Stambha </li> <li>Stambha </li> <li>A bsent     <ul> <li>Moderate</li> <li>Mild, occasionally     <ul> <li>A complete blood count (C.B.C.), erythrocyte sedimentation rate, serum</li> </ul> </li> </ul></li>  | VOL- IX           | Aayushi I<br>ISSUE- XI | NOVEMBER            | 2022           | PEER REVIEW<br>e-JOURNAL | ]      | IMPACT FACTOR<br>7.331 | ISSN<br>2349-638 |
|--|-------------------|------------------------|---------------------|----------------|--------------------------|--------|------------------------|------------------|
| be selected.   Exclusion Criteria   1) Patient with CA Spine   2) Age: <20 years or >60 years   3) Tuberculosis of Spine   4) Congenital Abnormalities in Lumbar Spine   5) Surgical Indications   6) Pregnancy   7) Uncontrolled DM   Criteria for Dignosis   1. Positive SLR test in the affected leg.   2. Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.   Laboratory Investigations   1. X-ray: Lumbosacral region—anteroposterior and lateral view   2. A complete blood count (C.B.C.),   | ,                 |                        |                     |                | :                        | 3. Sta | mbha                   |                  |
| Exclusion Criteria       1       Absent       2         1) Patient with CA Spine       2       Mild, occasionally       1         2) Age: <20 years or >60 years       3       Moderate       2         3) Tuberculosis of Spine       3       Moderate       2         4) Congenital Abnormalities in Lumbar Spine       5       Surgical Indications       0         6) Pregnancy       1       Absent       0         7) Uncontrolled DM       2       Mild, occasionally       1         3       Moderate       2       4       Severe, persistant       3         1. Positive SLR test in the affected leg.       5       Aruchi       0       2       Mild, occasionally       1         3       Moderate       2       4       Severe, persistant       3       3         1. Positive SLR test in the affected leg.       5       Aruchi       1       3       Moderate       2         2       Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.       3       Moderate       2       4       Severe, persistant       3         1. Absent       0       2       Mild, occasionally   | ,                 | 1 0                    | c group 20 to 0     | o years will   |                          |        |                        |                  |
| 1) Patient with CA Spine 2 Mild, occasionally 1   2) Age: <20 years or >60 years 3 Moderate 2   3) Tuberculosis of Spine 4 Congenital Abnormalities in Lumbar Spine 5   5) Surgical Indications 6) Pregnancy 1 Absent 0   7) Uncontrolled DM 2 Mild, occasionally 1   3 Moderate 2   4 Severe, persistant 3   1 Absent 0 2 2. A complete blood count (C.B.C.),  5 Mild, occasionally 1 3 Moderate 2 4 Severe, persistant 3 3 1 4 5 5 4 5 5 4 5 5 6 7 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 7 1 4 5 6 6 7 1 4 5 6 6 6 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 2 1 2 1 2 1   |                   |                        |                     |                |                          | 1      | Absent                 | 2                |
| <ul> <li>2) Age: &lt;20 years or &gt;60 years</li> <li>3) Tuberculosis of Spine</li> <li>4) Congenital Abnormalities in Lumbar Spine</li> <li>5) Surgical Indications</li> <li>6) Pregnancy</li> <li>7) Uncontrolled DM</li> <li>Criteria for Dignosis</li> <li>1. Positive SLR test in the affected leg.</li> <li>2. Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.</li> <li>Laboratory Investigations</li> <li>1. X-ray: Lumbosacral region—anteroposterior and lateral view</li> <li>2. A complete blood count (C.B.C.),</li> <li>3 Moderate</li> <li>2</li> <li>4 Severe, persistant</li> <li>5.Aruchi</li> <li>1 Absent</li> <li>0</li> <li>2 Mild, occasionally</li> <li>1</li> </ul> |                   |                        | vine                |                |                          | 2      | Mild, occasionally     | 1                |
| <ul> <li>3) Tuberculosis of Spine</li> <li>4) Congenital Abnormalities in Lumbar Spine</li> <li>5) Surgical Indications</li> <li>6) Pregnancy</li> <li>7) Uncontrolled DM</li> <li>Criteria for Dignosis</li> <li>1. Positive SLR test in the affected leg.</li> <li>2. Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.</li> <li>Laboratory Investigations</li> <li>1. X-ray: Lumbosacral region—anteroposterior and lateral view</li> <li>2. A complete blood count (C.B.C.),</li> <li>4. Spandana</li> <li>4. Spandana</li> <li>4. Spandana</li> <li>4. Spandana</li> <li>4. Spandana</li> <li>5. Aruchi</li> <li>1</li> <li>4. Spandana</li> <li>5. Aruchi</li> <li>2</li> <li>4. Severe, persistant</li> <li>3</li> <li>4. Spandana</li> <li>4. Spandana</li> <li>5. Aruchi</li> <li>5. Aruchi</li> <li>1</li> <li>4. Spandana</li> <li>5. Aruchi</li> <li>2</li> <li>4. Severe, persistant</li> <li>3</li> <li>4. Spandana</li> </ul>  | -                 |                        |                     |                |                          | 3      | Moderate               | 2                |
| <ul> <li>4) Congenital Abnormalities in Lumbar Spine</li> <li>5) Surgical Indications</li> <li>6) Pregnancy</li> <li>7) Uncontrolled DM</li> <li>1</li> <li>Absent</li> <li>0</li> <li>2</li> <li>Mild, occasionally</li> <li>1</li> <li>3</li> <li>Moderate</li> <li>2</li> <li>4</li> <li>Severe, persistant</li> <li>3</li> <li>Moderate</li> <li>2</li> <li>4</li> <li>Severe, persistant</li> <li>3</li> <li>Moderate</li> <li>2</li> <li>4</li> <li>Severe, persistant</li> <li>3</li> <li>Moderate</li> <li>2</li> <li>Mild, occasionally</li> <li>1</li> <li>Absent</li> <li>0</li> <li>2</li> <li>Mild, occasionally</li> <li>1</li> <li>3</li> <li>Moderate</li> <li>2</li> <li>4</li> <li>Severe, persistant</li> <li>3</li> </ul>   |                   | •                      | •                   |                |                          |        |                        |                  |
| <ul> <li>7) Uncontrolled DM</li> <li>2 Mild, occasionally 1</li> <li>3 Moderate 2</li> <li>4 Severe, persistant 3</li> </ul> <ol> <li>1. Positive SLR test in the affected leg.</li> <li>2. Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.</li> </ol> Laboratory Investigations <ol> <li>X-ray: Lumbosacral region—anteroposterior and lateral view</li> <li>A complete blood count (C.B.C.),</li> </ol> Mild, occasionally 1 A complete blood count (C.B.C.),   | 4) Co             | ngenital Abnorn        | nalities in Lumba   | ar Spine       |                          | 4. Spa | ndana                  |                  |
| Criteria for Dignosis       1       3       Moderate       2         1. Positive SLR test in the affected leg.       2       4       Severe, persistant       3         2. Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.       5.Aruchi       0       2       Mild, occasionally       1         Laboratory Investigations       1. X-ray: Lumbosacral region—anteroposterior and lateral view       2. A complete blood count (C.B.C.),       6. Tendra       0         2. Mild, occasionally       1       Absent       0         2. Mild, occasionally       1       1       Absent       0         2. A complete blood count (C.B.C.),       2       Mild, occasionally       1   | 6) Pre            | egnancy                |                     |                |                          | 1      | Absent                 | 0                |
| <ol> <li>Positive SLR test in the affected leg.</li> <li>Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.</li> <li>Laboratory Investigations         <ul> <li>X-ray: Lumbosacral region—anteroposterior and lateral view</li> <li>A complete blood count (C.B.C.),</li> </ul> </li> <li>SAruchi         <ul> <li>Moderate</li> <li>Moderate</li> <li>Moderate</li> <li>Severe, persistant</li> <li>Severe, persistant</li> <li>Moderate</li> <li< td=""><td>7) Un</td><td>controlled DM</td><td></td><td></td><td></td><td>2</td><td>Mild, occasionally</td><td>1</td></li<></ul></li></ol>  | 7) Un             | controlled DM          |                     |                |                          | 2      | Mild, occasionally     | 1                |
| <ol> <li>Positive SLR test in the affected leg.</li> <li>Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.</li> <li>Laboratory Investigations         <ul> <li>X-ray: Lumbosacral region—anteroposterior and lateral view</li> <li>A complete blood count (C.B.C.),</li> </ul> </li> <li>SAruchi         <ul> <li>Moderate</li> <li>Moderate</li> <li>Moderate</li> <li>Severe, persistant</li> <li>Severe, persistant</li> <li>Moderate</li> <li< td=""><td></td><td></td><td></td><td>FOL</td><td>disciple</td><td>3</td><td>Moderate</td><td>2</td></li<></ul></li></ol>   |                   |                        |                     | FOL            | disciple                 | 3      | Moderate               | 2                |
| <ol> <li>Positive SLR test in the affected leg.</li> <li>Patients having cardinal features of the disease such as presence of dull or piercing pain, twitching and stiffness in back, lumber region, buttock, thigh, back of knee, calf, feet area in successive order.</li> <li>Laboratory Investigations         <ul> <li>X-ray: Lumbosacral region—anteroposterior and lateral view</li> <li>A complete blood count (C.B.C.),</li> </ul> </li> <li>SAruchi         <ul> <li>Moderate</li> <li>Moderate</li> <li>Moderate</li> <li>Severe, persistant</li> <li>Severe, persistant</li> <li>Moderate</li> <li< td=""><td><b>Criteria</b> 1</td><td>for Dignosis</td><td></td><td>Inter</td><td></td><td>4</td><td>Severe, persistant</td><td>3</td></li<></ul></li></ol>  | <b>Criteria</b> 1 | for Dignosis           |                     | Inter          |                          | 4      | Severe, persistant     | 3                |
| disease such as presence of dull or piercing<br>pain, twitching and stiffness in back, lumber<br>region, buttock, thigh, back of knee, calf, feet<br>area in successive order.<br>Laboratory Investigations<br>1. X-ray: Lumbosacral region—anteroposterior<br>and lateral view<br>2. A complete blood count (C.B.C.),<br><b>1</b> Absent 0<br>2 Mild, occasionally 1<br>3 Moderate 2<br>4 Severe, persistant 3<br>6. Tendra<br>1 Absent 0<br>2 Mild, occasionally 1<br>4 Severe, persistant 3   |                   |                        | t in the affected 1 | eg.            |                          | Aruchi | P                      |                  |
| pain, twitching and stiffness in back, lumber<br>region, buttock, thigh, back of knee, calf, feet<br>area in successive order.2Mild, occasionally13Moderate24Severe, persistant31.X-ray: Lumbosacral region—anteroposterior<br>and lateral view6. Tendra2.Acompleteblood02.Acompleteblood12.Acompleteblood1  |                   | e                      |                     |                |                          | 1      | Absent                 | 0                |
| region, buttock, thigh, back of knee, calf, feet area in successive order.       3       Moderate       2         4       Severe, persistant       3         1. X-ray: Lumbosacral region—anteroposterior and lateral view       6. Tendra         2. A complete blood count (C.B.C.),       1       Absent       0         2       Mild, occasionally       1   |                   | -                      |                     | · ·            |                          | 2      | Mild, occasionally     | 1                |
| area in successive order.     4     Severe, persistant     3       Laboratory Investigations     6. Tendra       1. X-ray: Lumbosacral region—anteroposterior and lateral view     1     Absent     0       2. A complete blood count (C.B.C.),     2     Mild, occasionally     1   | -                 |                        |                     |                |                          | 3      | Moderate               | 2                |
| Laboratory Investigations       6. Tendra         1. X-ray: Lumbosacral region—anteroposterior and lateral view       1       Absent       0         2. A complete blood count (C.B.C.),       2       Mild, occasionally       1  |                   |                        |                     | ee, call, leet |                          | 4      | Severe, persistant     | 3                |
| 1. X-ray: Lumbosacral region—anteroposterior and lateral view     6. Tendra       2. A complete blood count (C.B.C.),     1  |                   |                        |                     |                |                          |        |                        |                  |
| and lateral view1Absent02. A complete blood count (C.B.C.),2Mild, occasionally1  |                   |                        |                     | eroposterior   |                          | 6. T   | 'endra                 |                  |
| 2. A complete blood count (C.B.C.), 2 Mild, occasionally 1   |                   |                        | 3 region unit       | ersposierior   |                          | 1      | Absent                 | 0                |
|  |                   |                        | blood count         | (C.B.C.).      |                          | 2      | Mild, occasionally     | 1                |
|  |                   | -                      |                     | . ,.           |                          | 3      | Moderate               | 2                |

Criteria for assessment

# 1.Ruka

| 1 | No pain                       | IS. | 97 O  |       |
|---|-------------------------------|-----|-------|-------|
| 2 | Painful, walks without        |     | 1     | 349-6 |
|   | limping                       |     |       |       |
| 3 | Painful, walks With limping   |     | 2     |       |
|   | but without support           | N   | Vaiir | ourn' |
| 4 | Painful with severe difficult |     | 3     | ourr  |
|   | in walking                    |     |       |       |

protein, and alkaline phosphate.

2. Toda

| 1 | No pricking sensation          | 0 |
|---|--------------------------------|---|
| 2 | Mild, occasional               | 1 |
| 3 | Moderate pricking<br>sensation | 2 |
| 4 | Severe, Persistant             | 3 |

| 1 | Absent             | 0 |
|---|--------------------|---|
| 2 | Mild, occasionally | 1 |
| 3 |                    | 2 |
| 4 | Severe, persistent | 3 |
|   | 1                  |   |

<sup>7.</sup> Gaurav

| Ι  | Absent       | 0 |
|----|--------------|---|
| 2  | Mild,        | 1 |
|    | occasionally |   |
| 3  | Moderate     | 2 |
| 4  | Severe,      | 3 |
|    | persistent   |   |
| 1. |              |   |

# S.L.R. Test

| 1 | 71°c- 90°c | 0 |
|---|------------|---|
| 2 | 51°c-70°c  | 1 |
| 3 | 31°c-50°c  | 2 |
| 4 | UPTO30° C  | 3 |

|         | Aayushi I | International | Inter | disciplinary Re          | search Journal (       | AIIRJ)            |
|---------|-----------|---------------|-------|--------------------------|------------------------|-------------------|
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## Criteria For Assessing the Total Effect

| Cured    | Grade | >75% relief in      |     |
|----------|-------|---------------------|-----|
|          | I     | signs and           |     |
|          |       | symptoms            |     |
| Markedly | Grade | 51% to 75% relief   |     |
| improved | 2     | in signs and        |     |
|          |       | symptoms            |     |
| Improved | Grade | 25% to 50% relief   |     |
|          | 3     | in signs and        |     |
|          |       | symptoms            |     |
| Unchange | Grade | Below 25% relief in | dis |
| d        | 4     | signs and symptoms  | 10  |

## **Observations And Result**

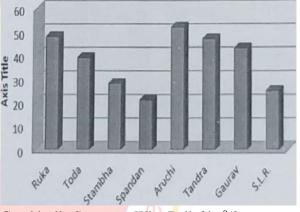
A total of 30 patients of Grudhrasi were registered, and out of those, 30 were completed the treatment. Maximum, that is, 72.5% of the patients were female, 42.5% belongs to age group 38—50 years, and 62.5% were homemaker. BMI showed that 32.5% of patients were obese, and 17.5% were overweight.

|        |     |    | 1 - |     |     |        |                |    |
|--------|-----|----|-----|-----|-----|--------|----------------|----|
| Syrnpt | Da  |    | Day | 30  | %   | Wilco  |                |    |
| oms    | y 0 |    |     |     | Rel | xon    | Р              | 1  |
|        | Me  | S. | Me  | S.  | ief | Signe  |                |    |
|        | an  | D. | an  | D.  |     | d      |                |    |
|        | sco |    | sco | Sh  |     | Rank   |                |    |
|        | re  |    | re  | ED. |     | W      |                |    |
| Ruka   | Ι   | 0. | 0.8 | 0.  | 48  | -3,947 | <0.            |    |
|        | .53 | 63 | 0   | 66  |     |        | OOI            |    |
| Toda   | 1.3 | 0. | 0.8 | 0.  | 39  | -3.557 | <u>&lt;</u> 0, |    |
|        | 7   | 61 | 3   | 70  |     |        | 001            | 54 |
| Stamb  | 1.5 | 0. | 1.1 | 0.  | 28  | -3.357 | <0.            |    |
| ha     | 3   | 63 | 0   | 55  |     |        | OOI            |    |
| Spand  | 0.4 | 0. | 0.3 | 0.  | 21  | -1.732 | <0.            |    |
| ana    | 7   | 57 | 7   | 56  |     |        | OOI            | C  |
| Aruchi | 0.7 | 0. | 0.3 | 0.  | 52  | -3.464 | <0.            |    |
|        | 7   | 77 | 7   | 49  |     |        | OOI            |    |
| Tandr  | 0.5 | 0. | 0.2 | 0.  | 47  | -2.646 | <0.            |    |
| а      | 0   | 57 | 7   | 45  |     |        | OOI            |    |
| Gaura  | 0.7 | 0. | 0   | 0.  | 43  | -3.000 | <0.            |    |
| v      | 0   | 75 | .40 | 50  |     |        | OOI            |    |
| S.L.R. | 1.8 | 0. | 1.4 | 0.  | 25  | -3.74  | <0.            |    |
| Test   | 7   | 63 | 0   | 50  |     |        | OOI            |    |

## Symptom wise Relief

| Symptoms | % of Relief |
|----------|-------------|
| Ruka     | 48          |
| Toda     | 39          |
| Stambha  | 28          |
| Spandan  | 21          |
| Aruchi   | 52          |
| Tandra   | 47          |
| Gaurav   | 43          |
| S.L.R.   | 25          |





Graphically Symptom Wise Relief in %.

# Discussion And Conclusion

Grudhrasi is one of the "Nanatmaja vyadhi of Vata". Improper sitting postures continuous and over exertion, jerking movements during travelling and sports produces structural abnormality in spinal cord, Gridhrasi is shoolpradhan vyadhi so it causes great discomfort to the patient. This type of Samprapti can be corelated to the Sciatica caused by degenerative changes, These changes are osteoporosis, spondylosis etc. which lead to Sciatica.

30 patients of either sex showing classical signs and symptoms of Grudhrasi. Punarnavadi Chuma was given and course of treatment weekly assessment were done for a period of one month. Among the 30 patients included in the study maximum numbers of patients are from age group 38-50 years. The data signifies working age may be more prone.

The commonly affected were Farmers, heavy manual workers, housewives, vehicle riders. So, we can come to a conclusion that weight lifting, vehicle

|        | Aayushi     | Internationa | al Interd | lisciplinary Res | earch Journal (A       | IIRJ)             |
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riding, improper sitting postures for prolonged period etc. are triggering factors, however more cases observed in housewives.

In most of the patients vegvidharan is observed due to work which is a cause for vataprakop.

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