

## The Effects of Siravyadha in Reducing Symptoms of Gridhrasi (Sciatica): A Retrospective Study

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### Keywords

Sciatica, Stambha, Toda, Spandana, Gridhrasi, Siravyadha

### Abstract

One of the most typical vatavyadhi-related health issues we regularly address is gridhra. Burning, stinging, or numbness in the leg, foot, thigh, or buttocks are its defining symptoms. It might or might not be related to back discomfort. Gridhrasi seems to have an effect on both physically sedentary and physically demanding patient types. Statements regarding Siravyadha made by Charya Charaka, Sushruta, Vagbhatta Yogratanakara, and Bhela can be found in Gridhrasi's Chikitsasutra. To assess siravyadha's effectiveness in Gridhrasi, a study was done. The objective of the study was to assess how well Siravyadha can help in managing symptoms of Gridhrasi. 30 patients with Gridhrasi symptoms and fit the criteria for Siravyadha were selected. Siravyadha was performed after drava snigdha yavagu pana, sthanika snehana, and swedana were added and samyak stravit lakshanas were detected. The patient data was assessed before and after the procedure of Siravyadha. Paired 't' test was used to tabulate results statistically.

### 1. Introduction

Ayurveda names the two categories as a treatment protocol for disease as Shodhana, Shaman kriya. Raktamokshan as explained by Acharya Sushrut, is a para surgical procedure for a variety of diseases where the rakta is vitiated. Rakatamokshan<sup>1</sup> is the process through which the body expels contaminated blood.

The majority of Raktamokshan falls into one of two categories i.e. Shastra and Nishastra. Pracchana and Siravyadha comes under Shastra type of Raktamokshana. The Gati yantra<sup>2,3</sup>, Alabu (Kapha), Jalukavacarana (Pitta), Shringa (Vata), comes under Raktamokshana without using a Shastra. Siravyadha is reputed to be one of these (ardha chikitsa).

Gridhrasi is produced by combining the term "Gridhraus," from which it is descended<sup>4</sup>, with "Din" prayataya. Because the patient's gait changes, it

resembles as the vulture walks, hence the illness was given the name Gridhrasi (Gridhra). Gridhrasi is caused by khavaigunya, which is produced in the bottom area of the body, where sthanasamshraya takes place, as a result of too much walking and driving. The symptoms include Stambha (stiffness), Ruk (pain), Toda (prickling pain), and spandana (frequent tingling) (foot)<sup>6</sup>. It belongs to the category of 80 nanatamaj vatavyadhi<sup>5</sup>. Pain starts in the kati, prushta and goes downwards, according to a distinct approach given by Acharya Sushruta. Vagbhata agreed with Acharya Sushruta's stance.

The main source of sciatica pain is tissue damage. The pain starts along the lower back and goes down along the course of sciatic nerve<sup>7</sup>. Sciatica and low back pain both occur more frequently than 40% of the time throughout the course of a lifetime. However, only 4-6% of individuals experience sciatica as a result of lumber disc prolapse<sup>8</sup>. Even though Ayurveda

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classifies this condition as kruchra sadhya, it effectively stops the disease's progression.

Siravyadha provided one of the satisfactory answers for Gridhrasi and many the Acharys also have mentioned Siravyadha and its uses in different diseases and in different places.

According to Bhela, Gridhrasi responds favourably to Raktamokshan. Siravyadha will be the sole healer of all illnesses, just as removing the field bunds will cause the rice and other crops to completely dry out. Therefore, we decided to execute Siravyadha on the gridhrasi patients. And the outcomes were evaluated before the siravyadha procedure and after the siravyadha process. The results were tabulated by observing the effect of therapy on Stambha, Toda, Spandana, Ruk and Gaurava. This course of treatment yielded a very successful result.

## 2. Methods

In total 30 patients who satisfied the inclusion criteria with Gridhrasi signs and symptoms were included from the OPD of Jain AGM Ayurvedic Medical College and Hospital, Varur (Karnataka).

### Inclusion Standards:

1. Patients between the ages of 20 and 60.
2. Notable symptoms and indicators such as Ruk, Toda, Spandana, and Gaurava were chosen.
3. A favourable outcome of Lasegue's test, the SLR Test.
4. Individuals seeking Siravyadha.

### Exclusion Standards:

1. Patients with co-morbidities or serious illnesses are excluded.
2. Trauma.
3. People who suffer from haematological or blood diseases.

All patients had routine blood tests, such as CT and BT, and signed consent was acquired.

## 3. Methodology

### Study Design:

Prior to siravyadha and sthanika abhyanga with Pinda Nilagiri taila and sthanika swedana, all patients had drava snigdha yavagu pana.

At Antara Kandara Gulpha, Siravyadha was carried out, and patients' clinical characteristics were studied for changes. Additionally, a follow-up evaluation was done on the tenth day after the siravyadha.

### ASSESSMENT STANDARDS

The findings of the evaluation of the subjective and objective parameters were collated and subjected to statistical analysis.

### REQUIREMENTS FOR EVALUATION

The primary disease-related indicators that were utilised to gauge the patient's development. Each sign and symptom was given a rating system based on the severity of that sign or symptom in order to assess the impact of therapy. The scoring system is described in full below:

1. Sthambha
  - a. No Stiffness - 0
  - b. Mild Stiffness - 1
  - c. Moderate Stiffness - 2
  - d. Severe Stiffness - 3
2. Ruk
  - a. No Pain - 0
  - b. Painful, walks without limping - 1
  - c. Painful, walks with limping but without support - 2
  - d. Painful, walks only with support - 3
  - e. Painful, Unable to walk - 4
3. Toda
  - a. No Pricking sensation - 0

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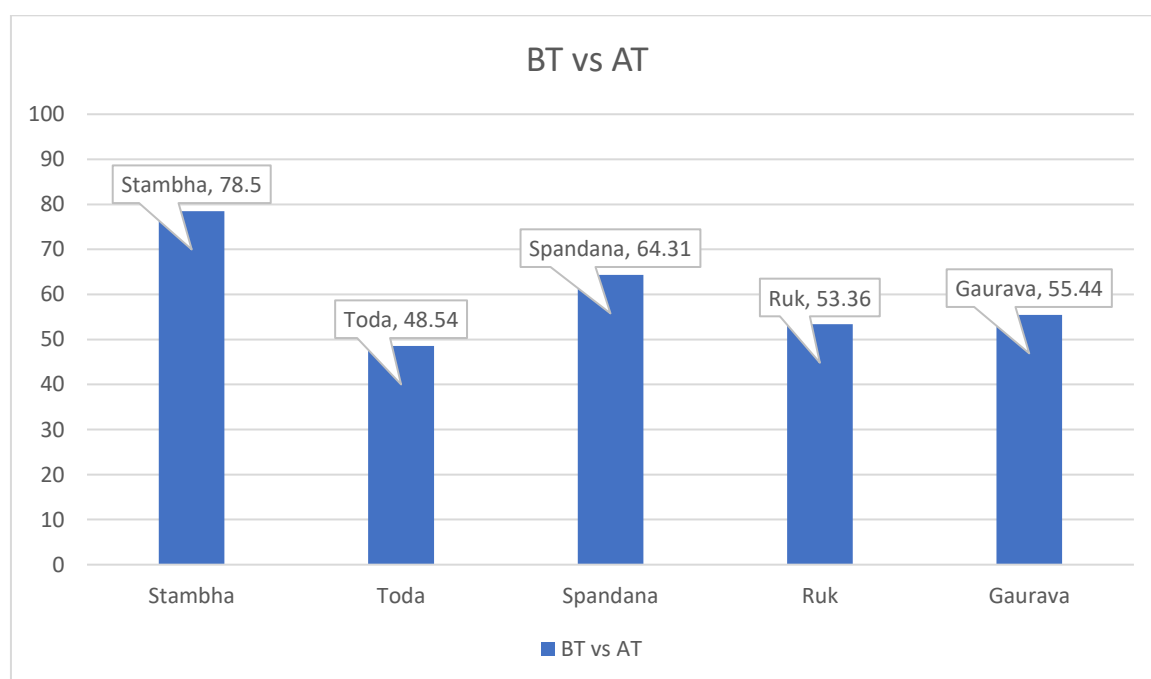
- |    |                             |   |   |    |                    |   |   |
|----|-----------------------------|---|---|----|--------------------|---|---|
| b. | Mild Pricking sensation     | - |   | b. | Mild Twitching     | - | 1 |
|    | 1                           |   |   | c. | Moderate Twitching | - | 2 |
| c. | Moderate Pricking sensation | - |   | d. | Severe Twitching   | - | 3 |
|    | 2                           |   |   | 5. | Gaurava            |   |   |
| d. | Severe Pricking sensation   | - |   | a. | No Heaviness       | - | 0 |
|    | 3                           |   |   | b. | Mild Heaviness     | - | 1 |
| 4. | Spandana                    |   |   | c. | Moderate Heaviness | - | 2 |
| a. | No Twitching                | - | 0 | d. | Severe Heaviness   | - | 3 |

## 4. Observations and Results

**Table No. 1:** Statistical analysis of 30 patients who received Siravyadha (both before and after the treatment).

Clinical Features	Mean		Mean Diff.	% Relief	S.D	'p' value	P	Significance
	B.T	A.T						
Stambha	2	0.433	1.56	78.5	1.10	6.01	<0.05	YES
Toda	2.06	1.06	1	48.54	0.70	5.15	<0.05	YES
Spandana	2.13	0.76	1.37	64.31	0.96	1.09	<0.05	YES
Ruk	1.93	0.9	1.03	53.36	0.73	1.65	<0.05	YES
Gaurava	1.93	0.86	1.07	55.44	0.75	4.79	<0.05	YES

**Chart No. 1** is a graphic representation of a statistical analysis of 30 patients who received Siravyadha (both before and after the therapy).

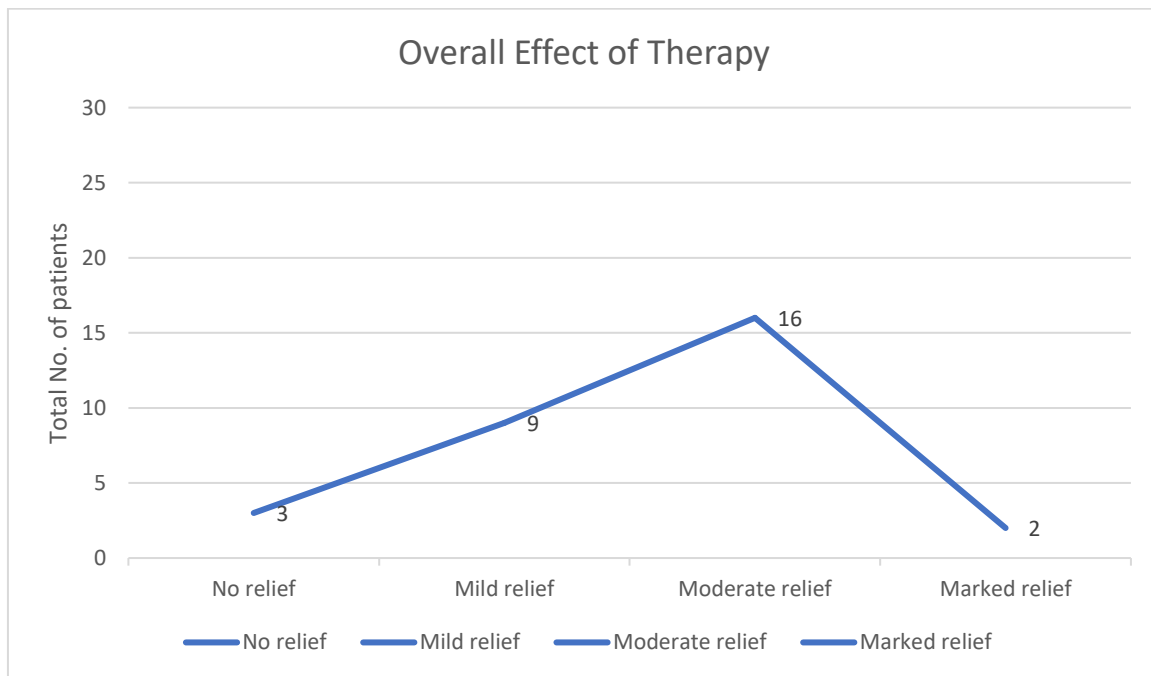


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**Table No. 2** - The overall effects of therapy before Siravyadha and just after Siravyadha are shown in

Relief	Criteria	No. of Patients
No relief	< 25%	3
Mild relief	25% to 50%	9
Moderate relief	51% to 75%	16
Marked relief	> 75%	2

**Chart No. 2** - Shows a graphic picture of the therapy's overall impact before and just after Siravyadha.



## 5. Discussion

Such a disorder is called gridhrasi, and it first appears in the lumbar region, more especially in the Sphika, Kati, and Pakvashaya. One of the 80 varieties of Vata Vikara, Gridhrasi is referred to in the classics as a unique clinical entity. According to industrialised nations, the most costly orthopaedic ailment in the human body is found in the lumbar spine. In contemporary medicine, sciatica is a disorder that resembles gridhrasi.

Disc herniation and degenerative changes are the most common reasons. trauma from the past, such as back injuries from carrying heavy loads or being exposed to the cold. The disease's disability restricts the patient's

ability to perform daily tasks and renders them incapacitated.

स्नेहादिभिः क्रियायोगैर्न तथा लेपनैरपि ।

यान्त्याशु व्याधयः शान्तिं यथा सम्यक् सिराव्यधात् ॥२२॥<sup>9</sup> Su Sha 8/22

Acharya Charaka discussed Siravyadha, BastiKarma, and Agnikarma while controlling Gridhrasi. In some cases, the Snehana or Lepamadi therapeutic methods do not provide relief from the diseases mentioned by Acharya Sushruta. emergency preparedness Siravyadha will result in improved outcomes in Gridhrasi situations.

सिराव्यधश्चिकित्सार्थं शल्यतन्त्रे प्रकीर्तितः ।



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यथा प्रणिहितः सम्यग्बस्तिः कायचिकित्सिते ॥२३॥<sup>10</sup> Su. Sha. 8/23

In the same manner that basti is viewed as ardhha chikitsa in Kayachikitsa, Siravyadha is regarded in Shalya Tantra as ardhha chikitsa.

नर्ते देहः कफादस्ति न पित्तान्न च मारुतात् ।

शोणितादपि वा नित्यं देह एतैस्तु धार्यते ॥४॥<sup>11</sup> Su. Su. 21/4

Therefore, Dushita (vitiated) Rakta from the connected Siras (veins) to be discharged in order to maintain health or treat disease.

सम्यग्त्वा यदा रक्तं स्वयमेवावतिष्ठते ।

शुद्धं तदा विजानीयात् सम्यग्विस्त्रावितं च तत् ॥३२॥

लाघवं वेदनाशान्तिर्व्याघेर्वेगपरिक्षयः ।

सम्यग्विस्त्राविते लिङ्गं प्रसादो मनसस्तथा ॥३३॥<sup>12</sup> Su. Su. 14/32-33

Samyak Siravyadha has the symptoms of Laghavam and Vedanashanti, which signify that the pain reduces followed by a decrease in the symptoms of the disease. As a result, Siravyadha can be used to treat diseases where pain, pricking, and heaviness predominate.

Each had a history of no more than three years. Nidanataha was detected in five of the cases. It was easy to see raksha aahara and katu tikta aahara, as well as Ativyayama, Vishamaasana, and vegasandharana. During Siravyadha, there was a lot of rapid blood flow, with an average raktavisravan of 88 ml for each patient. None of the patients encountered any severe problems.

## 6. Conclusion

The above said clinical trial was carried out to determine Siravyadha procedure can help in management of pain, pricking, and heaviness in Sciatica. Patients demonstrated 78.5% stambha is reduced, 48.54% toda is reduced, 64.31% spandana is reduced, 53.36% pain reduced, 55.4% decrease in gaurava. Therefore, the research suggests that siraveda is effective in lowering stambha, spandana, and pain in Gridharsi. More study is needed to generalise its effectiveness in Gridharasi on a large sample basis.

It was clear that Siravyadha was effective in lessening Gridhrasi's symptoms. This study indicates that after Siravyadha, Gridhrasi symptoms greatly improve, as shown in the accompanying tables. It was shown that, of the 30 patients, 3 experienced considerable alleviation, 16 experienced moderate relief, 9 experienced mild relief and 2 patients experienced great relief right away following the Siravyadha process.

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