A Case Study of Agnikarma Therapy in the Management of Gridhrasi w.s.r. to Sciatica

Dr. Divyabahen S. Ninama*, Dr. Jigna Patel, Dr. Sonal Panchal, Dr. Damini Parmar
Department of Shalya Tantra, Government Akhandanandand Ayurveda Mahavidhyalaya, Ahmedabad, Gujarat, India

ABSTRACT

Gridhrasi is a Shulpradhana Nanatmaja Vatavyadhi. According to Acharya Charaka, Stambha (stiffness), Ruka (pain), Toda (pricking sensation) and Spandana (twitching) are the signs and symptoms of Vataja Gridhrasi. Aruchi (anorexia), Tandra (drowsiness) and Gaurava (heaviness) are the additional symptoms of Vatakaphaja Gridhrasi. Sciatica is a major cause of illness among the working population in a developing country. It starts from hip and gradually comes down to waist, back, thigh, knee, shank and foot and affects these parts with stiffness, distress, piercing pain and with frequent quivering. In Ayurveda science, various modalities of treatment are explained for the management of Gridhrasi. Agnikarma Chikitsa is said to be superior. In modern medicine for the management of sciatica various modalities are available such as Conservative treatment, Epidural steroid injection, Peri-radicular infiltration and Surgical treatment. The purpose of the study was to evaluate the efficacy of Agnikarma therapy performed by Panch Dhatu Shalaka (five types of metals) in case of Sciatica. After giving Agnikarma sitting, we have got marked improvement in symptoms of Sciatica and also found moderately improvement in various clinical examinations of Sciatica like SLR, Cross SLR, Local tenderness etc.

Key words: Gridhrasi, Sciatica, Agnikarma, SLR.

ARTICLE INFO: Received 14 May 2023; Review Complete 25 June 2023; Accepted 05 Aug. 2023; Available online 15 Aug. 2023

INTRODUCTION

Gridhrasi is one among 80 types of Vatavyadhi. Gridhrasi is a Shulpradhana Nanatmaja Vatavyadhi which affects the daily routine of patients. Patient suffering from Gridhrasi is not capable to walk properly. According to Acharya Charaka, Stambha (stiffness), Ruka (pain), Toda (pricking sensation) and Spandana (twisting) are the signs and symptoms of Vataja Gridhrasi. Aruchi (anorexia), Tandra (drowsiness) and Gaurava (heaviness) are the additional symptoms of Vatakaphaja Gridhrasi.

Sciatica is a major cause of illness among the working population in a developing country. It starts from hip and gradually comes down to waist, back, thigh, knee, shank and foot and affects these parts with stiffness, distress, piercing pain and with frequent quivering. Ancient Acharyas given the name Gridhrasi as a disease, it may because of patient’s gait become similar to the gait of the Gridhra (Eagle). This change in the gait is because of the pain in the back and the lower limbs and the patient starts limping towards the affected side. In Ayurveda science, various modalities of treatment are explained for the management of Gridhrasi. Agnikarma Chikitsa is said to be superior. Gridhrasi is seen as a panic condition in the society as it is one of the burning problems. On the basis of symptomatology, Gridhrasi may be simulated with the disease sciatica in modern parlance. In modern medicine for the management of sciatica various modalities are available such as Conservative treatment, Epidural steroid injection, Peri-radicular infiltration and Surgical treatment. All these are having their complications and sideeffects. On the other hand, all these management tools are not affordable for the poor, particularly in developing countries like. Whereas in Ayurveda, various treatment modalities like Siravedha, Agnikarma, Basti Chikitsa and palliative medicines are used successfully. Among these, Agnikarma procedure seems to be more effective by providing timely relief. It is a classical
fact that this pain is effectively relieved by the Agnikarma and there is no fear of putrification and bleeding. Ultimately it produces balancing effect on vitiated Vata Dosha.

MATERIALS AND METHODS:
A 41 years old female patient visited OPD of Shalya Tantra Department of Government Akhandanand and Ayurveda Hospital, Ahmedabad with chief complaints of pain in low back region radiating to left lower limb and stiffness in back especially during morning hours since two years. Patient also had complaints of tingling sensation and numbness in her left lower limb since 10 months. Last six months patient also suffered with poor appetite. For this she was diagnosed as Sciatica problem and took treatment from different Govt. Allopathy Hospitals, but got no relief. Then she approached Govt. Akhandanand and Ayurved Hospital for better treatment.

On examination- general condition of the patient was found antalgic gait. She was not able to stand or sit or remain in a same posture for more five minutes due to severe pain starting in her back. SLR was 40° of left side and Cross SLR test (Figure of Four test) was positive. Blood pressure was 120/70 mmHg, Pulse rate was 86/minute, Weight-70 kg and Height-5.11”. All routine blood and urine investigations were carried out which seems to be normal. HIV, HBsAg, VDRL were negative. In Plain X-ray of LS Spine saw mild space diminished between L4 and L5 vertebral bodies. MRI findings confirmed the L4-L5: Grade I anterior listhesis of L4 over L5 vertebral body withspondylolysis of L4, bilateral moderate facet joint hypertrophy andposterior diffuse bulging of disc with lateral canal narrowing causing compression over dural theca, traversing & exiting nerves.L3- L4: Posterior bulging of disc with postero-central mild protrusion with bilateral mild facet hypertrophy causing compression over dural theca.

Clinical Examinations

<table>
<thead>
<tr>
<th>Test</th>
<th>Right leg</th>
<th>Left leg</th>
</tr>
</thead>
<tbody>
<tr>
<td>SLR</td>
<td>+ve (80°)</td>
<td>+ve (40°)</td>
</tr>
<tr>
<td>Reverse SLR</td>
<td>-ve</td>
<td>+ve</td>
</tr>
<tr>
<td>Crossed leg raising Test (Figure of 4)</td>
<td>-ve</td>
<td>+ve</td>
</tr>
<tr>
<td>Tenderness of sciatic nerve root test</td>
<td>+ve</td>
<td>+ve</td>
</tr>
<tr>
<td>Sitting Test</td>
<td>-ve</td>
<td>+ve</td>
</tr>
<tr>
<td>Popliteal Compression Test</td>
<td>-ve</td>
<td>+ve</td>
</tr>
</tbody>
</table>

VAS Score: 6

Method of Agnikarma:

Purvakarma:
Written informed consent of patient.
Investigation.
Vitals monitored.
Preparation of required instrument, such as shalaka, glows, betadine solution, gas stove, aloevera, haridrachurna.
Heat the Panchdhatu Shalaka up to red hot.
Local part preparation.

Pradhana Karma:
Localization of the points selected for doing Agnikarma (if needed) with skin pencil/marker. Painting of demarcated area for Agnikarma with Bitadine Solution.
Drapping with sterile linen hole sheet to expose only operative area.
Shalaka should be touch at the most painful area. Agnikarma with Panchdhatu Shalaka with Bindu Dagda method leaving 0.5 cm gap between two points of Dagda.
Immediate Ghritakumari should be applied soon after the red hot shalaka touch and burnt the skin superficially.
Pashchat Karma:

Sprinkle turmeric powder at site of Agnikarma. 
Adviceto avoid water contact to Dagdha Vrana area for next 24 hours. 
Application of Shatadhautaghrita should be done. 
Burnt part shall be kept open.

Clinical Examinations of Sciatica

<table>
<thead>
<tr>
<th>Examination of left leg</th>
<th>Before treatment</th>
<th>After treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>SLR</td>
<td>+ve (40°)</td>
<td>+ve (60°)</td>
</tr>
<tr>
<td>Reverse SLR</td>
<td>+ve</td>
<td>-ve</td>
</tr>
<tr>
<td>Crossed leg raising Test (Figure of 4)</td>
<td>+ve</td>
<td>-ve</td>
</tr>
<tr>
<td>Tenderness of sciatic nerve root test</td>
<td>+ve</td>
<td>-ve</td>
</tr>
<tr>
<td>Sitting Test</td>
<td>+ve</td>
<td>-ve</td>
</tr>
<tr>
<td>Popliteal Compression Test</td>
<td>+ve</td>
<td>-ve</td>
</tr>
</tbody>
</table>

VAS score:

**DISCUSSION:**

Sciatica is one of painful condition which hampers the daily routine of the patient. As described by Acharya Charak it is of predominance of vata dosha and may have Kapha Anuhandh. Thus radiating pain from lumber region to the lower extremities may show stiffness in the lower limb and patient got difficulty in walking or continuous standing even for short period. As Ushnatreatment acts against the qualities of Vata and Kapha Doshas, cures all the Vataja and Kaphaj disorders. In this condition Agnikarma (ushnachikitsa) acts against the properties of Vata and Kapha Doshas, so by their virtue, they help in dissolving the Samprapti of Gridhrasi as it is a Vatapradhana and Kapha-
Vatapradhana disease. Relief from Pain and decreased SLR test with treatment were observed in this case.

The place where heat burns the local tissue metabolism is improved with various metabolic and rejuvenating changes which takes place at the site of heat burns, thus it leads to increase demand of oxygen and nutrients of the tissues at the site of heat burns. It also excretes the unwanted metabolites and toxins. Due to increased local metabolism, the waste products (metabolites) which are produced get excreted, which normalize the blood circulation thus resulting in reduction in intensity of pain. Agnikarma also explained in various ancient texts as very simple, harmless, and effective technique which has mainly indicated for Muscle, tendon, ligament, joint and bone pain (musculoskeletal pain). It also required no hospital staying for concern patients without involvement of any exogenous drugs or medications. Technically and skillfully if performed most of the time it is devoid of any major complications.

CONCLUSION:

From the present study, it may be concluded that Agnikarma therapy is potent, safe and effective in the treatment of Sciatica (Gridhrasi). There was no any adverse effect found during and after the whole procedure in this case. All the procedure of Agnikarma was simple, cheap and can be done in OPD level gives instant relief to most of the patients.

REFERENCES:

8. Chaturvedi sonal et. al., journal of biological and scientific opinion, volume 2014; 2(1).