

# Ayurvedic Management of Gridhrasi WSR to Sciatica: A Review

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## Abstract

*Gridhrasi* (Sciatica) is one of the severe debilitating syndromes among all the neurological disorders. The main symptoms of *Gridhrasi* are *Ruka* (pain), *Toda* (pricking sensation), *Stambha* (stiffness) and *Muhuspandana* (twitching) in the *Sphika* (Gluteal Region), *Kati* (Waist), *Prishtha* (Low Back), *Uru* (Thigh), *Janu* (Knee), *Jangha* (Calf) and *Pada* (Foot) respectively and *Sakthikshepa Nigraha* (restricted lifting of the leg). The above mentioned symptoms can be compared with sciatica syndrome which is characterised by severe pain starting from low back region and radiating down towards the foot. This is a common entity encountered in a clinical practice. The review elaborates the general description of disease *Gridhrasi* w.s.r. to Sciatica. The general principle of treatment and procedures for the management of *Gridhrasi*/Sciatica according to various *Ayurvedic* classics have been discussed.

**Keywords:** Ayurveda, *Gridhrasi*, Sciatica

## Introduction

On account of our busy lives, unknowingly our muscles, joints, and bones are put under strain. This stress can mount up incrementally and results in a serious impact on the body such as sudden fall or a misalignment of the spine resulting into low back pain. Millions of people in the world suffer from low back pain (LBP), both in the acute and chronic situations. Acute onsets commonly become chronic and chronic conditions may be complicated with acute exacerbations (1). Low back pain is the second most common reason for all physician visits(2) and it is a condition that affects as many as 80-90% of people during their life time, among them true sciatica cases occurs in about 5% of cases(3). Sciatica is more common among the age group between 30-50 years of age. Modern science describes 'Sciatica' as a benign syndrome characterized especially by pain beginning in the lumbar region and spreading down the back of one lower limb to the ankle and sometimes the foot.

Ayurveda had identified this problem long back and named it '*Gridhrasi*'. The word '*Gridhrasi*' itself suggests the gait of the patient which is similar to *Gridhra* (vulture) due to pain. *Gridhrasi* comes under 80 types of *Nanatmaja Vatavyadhi*(4) though, occasionally there is

*kaphanubandha*. The cardinal signs and symptoms of *Gridhrasi* are *Ruka* (pain), *Toda* (pricking sensation), *Stambha* (stiffness) and *Muhuspandana* (twitching) in the *Sphika* (Gluteal Region), *Kati* (Waist), *Prishtha* (Low Back), *Uru* (Thigh), *Janu* (Knee), *Jangha* (Calf) and *Pada* (Foot) in order and *Sakthikshepa Nigraha* i.e. restricted lifting of the leg. Due to *Kaphaanubandh*, *Arochaka* (Anorexia), *Tandra* (Stupor) and *Gaurava* (Heaviness) are found.

The above mentioned symptoms can be compared with sciatica syndrome. It is characterised by severe pain starting from low back region and radiating down towards the foot. This is a common entity encountered in a clinical practice.

In all *Ayurveda* classic, the description of the diseases is available. *Charaka Samhita*, *Madhavakara*, *Bhavaprakasha*, *Yogaratanakara*, *Sharagadhara* and *Vangasena* have been mentioned two types of *Gridhrasi*, *Vataja* and *Vatakaphaja*. According to Charaka, the symptoms of *Gridhrasi*(5) are as follows.

In *Vataja* type –

- Ruk (Pain)
- Toda (Pricking sensation)
- Stambha (Stiffness)
- Muhuspandanam (Tingling sensations)

In Vata-Kaphaja type–

- Tandra (Stupor)
- Gaurava (Heaviness)
- Arochaka (Anorexia)

*Sushruta*, the father of surgery has described all the details about the disease. *He* has given elaborated descriptions of aetiology, pathogenesis, symptomology, management and various other aspects of *Gridhrasi* in his treatise, named *Sushruta samhita*. The symptom ‘*Sakthikshepa Nigraha*’ has been described for the first time which can be correlated to the SLR test in modern medicine(6).

## Management of Gridhrasi (Sciatica)

The treatment of Sciatica is a challenge for the modern medicine and surgery. The treatment option for Sciatica in present time includes.

- Conservative treatment
- Epidural steroid injection
- Peri-radicular infiltration
- Surgical treatment

In Ayurvedic texts, various types of treatment are described for *Gridhrasi*.

1. *Nidana Parivarjana* (Avoid the causative factors)
2. *Snehana* (Oleation therapy)
3. *Swedana* (Sweating therapy)
4. *Virechana* (Purgation therapy)
5. *Basti Karma* (Medicated enema therapy)
6. *Raktamokshana* (Bloodletting)
7. *AgniKarma* (Thermal cautery)
8. *Shamana* (Palliative therapy)

### 1. *Nidana Parivarjana* (Avoid the causative factors):

As the name suggests, the ‘*Nidana*’ stands for ‘the causative factors’ which produce the disease and ‘*Parivarjana*’ means ‘to give up’. The prime approach of an *Ayurvedic* treatment is analyzing the root cause of disease. This is the first and the foremost principle to be adopted in the treatment of each and every disease. *Nidana parivarjana* stops the further progression of disease, by restricting vitiation of *Doshas*.

The general causes of *Vatavyadhi* are considered as the causes of *Gridhrasi* since it is considered under eighty *Nanatmaja Vata Vyadhies*. The exclusive *Nidana* of *Gridhrasi* are not mentioned in the classics. In regard to causative factors of *Vata Vyadhi*, only *Charaka* (7) and *Bhavaprakasha* have explained in detail, while in *Sushruta Samhita*, *Ashtanga Sangraha* and *Ashtanga Hridaya* etc. the causes have not been clearly described. However in these texts, the causative factors provoking *Vata Dosha* are

described. The *Vataprakopaka Hetus* found in different *Samhitas* are listed below.

- *Rukshahara* (Dry food)
- *Sheetahara* (Cold food)
- *Alpahara* (Diet below the requirement)
- *LaghuAhara* (Light diet)
- *Kashayarasapradhana* (Diet with astringent tastes)
- *Katurasapradhana* (Diet with pungent tastes)
- *Tiktarasapradhana* (Diet with bitter tastes)
- *Ativyayam* (Excessive exercise)
- *Ratrijagarana* (Staying awake at night)
- *Ativyavaya* (Excess in sexual activity)
- *Langana* (Fasting)
- *Vegadharana* (Suppression of natural urges)
- *Vishama upachara* (Contradictory treatment)
- *Dukhashayya* (Uncomfortable posture while sleeping)
- *Shrama* (Excessive work)
- *Chinta* (Stress)
- *Shoka* (Grief)
- *Bhaya* (Fear)
- *Krodha* (Anger)
- *Abhighata* (Injury)
- *Rogatikarshana* (overtreatment)

**2. *Snehana* (Oleation therapy):** *Snehana* or oleation therapy is used externally and internally in case of *Gridhrasi*. Externally *Snehana* may be performed in the form *Abhyanga*, *Pizhichhil*, *Avagaha*, *Parisheka* etc. If the *Kapha Dosha* is involved in the pathogenesis as in case of *Vatakaphaja Gridhrasi*, *Snehana Chikitsa* should be restricted as this treatment tends to worsen the imbalance of *Kapha Dosha*.

**3. *Swedana* (Sweating therapy):** *Shula* (pain) and *Stambha* (stiffness) in the lower extremities are the cardinal symptoms of *Gridhrasi* and is best treated by the *Sweden Chikitsa*. *Swedana* also helps in the liquefaction of the *Dosha* there by assisting clearing the *Srotas*, or else rectifying the *Margavarana*. Among the different forms of *Swedana* procedures, *Avagaha Sweda*, *Pizhiccil*, *Nadisweda*, *Patrapinda Sweda*, *Pinda Sweda* and *Upanaha Sweda* may be efficiently performed in patients of *Gridhrasi*(8) but in *Vatakaphaja Gridhrasi*, *Valuka Sweda* is a better option for evident reasons.

**4. Virechana (Purgation therapy):** *Virechana* has an important role in *Gridhrasi*. The action of *Virechana* is not only limited to particular site, it has effects on the whole body. In *Vata Vyadhi*, *Charaka Samhita* has mentioned *Mridu Virechana* (9). Oral administration of *Eranda Sneha* (castor oil) along with milk is ideal for the *Virechana* purpose (10).

**5. Basti Karma (Medicated enema therapy):** *Pakwashaya* is the primary location of *Vata Dosha*. It is true that *Vyana Vata* is vitiated in *Gridhrasi*. So, *Basti* is very helpful in pacifying *Vata*. Further it is glorified that *Basti Chikitsa* as “*Ardha Chikitsa*” of *Vata* (11). By these facts, *basti* is most important among the *Panchakarma* in the treatment of *Gridhrasi*. No other *Chikitsa* has the capacity to pacify and regulate the force of *Vata* apart from *Basti* (13).

**Niruha Basti:** *Erandamuladi Niruha* and *Dashamuladi Niruha* are the best choices.

**Anuvasanabasti:** *Anuvasana Basti* using *Vatahara Tailas* like *Bala Taila*, *Mulaka Taila*, *Ksheerabala Taila*, *Prasarani Taila* etc. are beneficial.

**6. Raktamokshana (Bloodletting):** It is a therapeutic blood cleansing and purification therapy. It is derived from two words, ‘*Rakta*’, which means blood and ‘*Mokshana*’ which means leave. Thus *Raktamokshana* means to let the blood out. The blood is expelled out from the body to reduce the quantity of toxic substances in the blood. Various methods given in *Ayurvedic* classics, are the use of *Shringa* (Horn application), *Jalauka* (Leech application), *Alabu* (Gourd), *Prachhana* (Scarification) and *Siravyadha* (Venepuncture). For *Gridhrasi Charaka* explained *Siravyadha* at the site of *Antara-Kandara-Gulpha* (13) and *Acharya Sushruta* (14) and *Vagbhata* indicated *Siravyadha* four *Angula* above or four *Angula* below at the site of knee joint.

**7. Agnikarma (Thermal Cautery):** Various *Acharya* mentioned *Agnikarma* in the management of *Gridhrasi*. According to *Sushruta* and *Vagbhata*, in the management of *Sira*, *Snayu*, *Asthi* and *Sandhigata Vyadhi*, *Agnikarma* is indicated and *Gridhrasi* is one of the diseases of these *Samprapti* (pathogenesis).

For the treatment of *Gridhrasi*, the following different places for *Agnikarma* are mentioned:

**Charaka:** *Antara kandara Gulpha*(15).

**Charkradatta:** *Pada Kanisthika Anguli* (little toe of the affected leg).

**8. Shamana (Palliative therapy):** This therapy is given for the *Shamana* of vitiated *Dosha*. They are in the form of *Aaushadhi* and *Ahara*.

**Shamanoushadhi–**

These are the internal medicines to cure the disease. There are several medicinal

formulations mentioned in different classics in the context of *Chikitsa*.

**Churna:** *Ajamodaadi Churna*, *Abhayaadi Churna*, *Krishnadi Churna*, *Rasnaadi Churna*.

**Kalka and Lepa:** *Maha Nimba Kalka*, *Rasona Kalka*, *Swalpa Rasona*, *Vaatahara Pradeh*

**Kashaaya and Arishta:** *Panchamoola Kashaaya*, *Maha Rasnaadi Kashaaya*, *Erandamoola*

*Kashaaya*, *Dashamoola Kashaaya*, *Balarishtha*, *Dashamoolarishtha*.

**Ghrita and Taila:** *Chagaalyadhya Ghrita*, *Bala Taila*, *Eranda Taila*, *Vajigandhadi Taila*, *Saindhavaadya Taila*, *Maashaadi Taila*, *Vishagarbha Taila*, *Prasaarani Taila*, *Mahaabalaadi Taila*, *Naraayana Taila*, *VishnuTaila* and *Ghrita*, *Vijaya BhairavaTaila*, *Rasnapooteeka Taila*, *Saptaprastamsa Taila*, *Datturaadi Taila*.

**Guggulu and Rasayogas:** *Rasna Guggulu*, *Trayodasanga Guggulu*, *Yogaraaja Guggulu*, *Mahayogaraaja Guggulu*, *Pathyaadi Guggulu*, *Vataari Rasa*, *VatagajankusaRasa*, *Vatarakshasa Rasa*.

*Gridhrasi* is not a contemporary health problem but it has been familiar to the mankind since *Samhita* period. *Vata* is the *Dosha* responsible for the causation of the disease. The causes of *Gridhrasi* are not described in the classics, but the factors vitiating *Vata* are the *Nidana* for *Gridhrasi*. Bad posture, irregular and unwholesome dietary habits, travelling in jerky vehicles etc. are most commonly encountered factors in today’s life. Vitiating *Vata* especially *Apana* and *Vyana Vayu* are involved in the *Samprapti* (pathogenesis) of *Gridhrasi*. The *Samprapti* takes place either by *Dhatukshaya* (improper nourishment of *Dhatu*) or *Margavarana* (obstruction) or due to *Agantunja* (external factors) causes like *Abhigata* (injury) and *Prapatana* (fall from height). In *Dhatukshaya Samprapti*, due to improper nourishment of *Rasadi Dhatu*, these *Dhatu* land into *Kshayavastha*. *Dhatukshaya* further vitiates *Vata* causing *Gridhrasi*. This type of *Samprapti* can be correlated to the *Sciatica* caused by degenerative changes. These changes are osteoporosis, spondylosis etc. which lead to *Sciatica*. When *Vayu* is obstructed by *Kapha*, *Ama* etc. it gets vitiated leading to *Margavaranajanya Samprapti* of *Gridhrasi*. *Gridhrasi* is classified into *Vataja* and *Vatakaphaja*. It can be understood on the basis of aetiology as follows:

- *Vataja Gridhrasi (Dhatukshayajanya):* Lumber spondylosis, Disc Degeneration Disease (DDD), Degenerative Spondylosis, Lumber Arthritis, Disc Herniation, Lumber Compression Fracture etc.

- *Vatakaphaja Gridhrasi (Margavaranajanya) - Lumbar Spinal Stenosis, Tumor* etc.

## Discussion

It may be concluded that *Gridhrasi* can be equated with the condition Sciatica syndrome in modern parlance, which occurs because of spinal nerve irritation and is characterized by pain in the distribution of sciatic nerve which begins from buttock and radiates downwards to the posterior aspect of thigh, calf and to the outer border of foot. Modern science have so many treatments like Conservative treatment Epidural steroid Injection, Peri-radicular infiltration, Surgical treatment which are used in sciatica but there are complications in modern science. So *Ayurvedic* approach of treatment is much better

as compared to allopathic treatment. *Nidana Parivarjana*, *Sodhana Chikitsa* (*Snehana*, *Swedana*, *Virechana*, *Basti*, *Raktamokshana* etc.) and *Shamana Chikitsa* are main route of treatment for any disease. *Sodhana* may be recommended for *Bahu-dosha*, but *Shamana* is also essential for removing the remained *Dosha* after *Shodhana* process.

*Nidana Parivarjana* is the first and the foremost principle of *Ayurvedic* treatment of each and every disease. It stops the further progression of disease, by restricting vitiation of *Doshas*. *Gridhrasi* comes under 80 types of *Nanatmaja Vatavyadhi*. As told by *Acharaya Charaka*, there is no other drug equivalent to *Taila Sneha* for *Vata Shamana* <sup>(16)</sup> and he also described *Snehana* as a first line of management in *Vata Vyadhi* <sup>(17)</sup>. Internal *Snehana* (*Ghruta*, *Taila/Oil*) having *Snigdha Guna* undergoes digestion and gets absorbed through blood and reaches the *Sukshma Rasayani* by its *Sukshma guna* and nourishes *Dhatu* & pacifies vitiated *Vata Dosha*. External *Snehana* (*Abhyanga* or *Massage* with medicated oil) directly acts on muscles and makes them strong and *Swedana* is *Sandhichestakar* (improves the movements of joints), *Srotoshuddhikar* (clears up the micro channels), *Agni Deepaka*, and *Kaphavatanirodhan* (antagonist of *Kapha*). It decreases *Stambha* (stiffness). Heat administration by *Swedana* may produce hypno analgesic effect by diverted stimuli. In *Vatakaphaja Gridhrasi*, *margavarajananya Samprapti* is present *swedana*, by doing *srotoshuddhi*, this obstruction is relieved (18).

The *Sneha Virechana* clears obstruction in the *Srotas* and relieves *Vata* vitiation very quickly (19). Thus *Sneha Virechana* of *Mridu* nature helps in controlling *Shula* in *Gridhrasi*.

In *Gridhrasi*, *Vata* specifically *Apana* and *Vyana Vayu Dushti* is found. *Basti* stays at *Pakwashaya* and starts its action from there. *Pakwashaya* is the natural abode of *Vayu*. *Basti* conquers the vitiated *Vata* is its *Prakruta Sthana* by which *Vata* dwelling in other parts of the body is automatically

conquered (20). *Basti* removes *Malasanghata* (21) and thus maintains the *Anulomagati* of *Apana Vayu* which helps to pacify the symptoms of *Gridhrasi*. *Basti* acts on the natural bacterial flora of the intestines which is important for the synthesis of Vit. B6, B12. *Basti Chikitsa* decreases the ketoacid and pyruvic acid levels due to which Vit. B synthesis increases. This Vit. B restricts the demyelination process of the nerves and helps in regeneration. One theory proposes that the *Virya* of *Basti Dravyas* spreads through A.N.S. and expels out vitiated *Doshas* from the body. This signifies its action on the nervous system. This undoubtedly proves the efficacy of *Basti* therapy in the management of *Gridhrasi*.

*Acharya Sushruta* has mentioned diseases; those are not relieved so quickly by *Snehana*, *Lepa-nadi* therapeutic measures in these situation *Siravyadha* is an emergency management to achieve better results.

*Acharya Sushruta* mentioned *Agnikarma* is more efficacious than other therapeutic procedures as it gives instant relief in pain. The place where heat burns the local tissue metabolism is improved, thus various metabolic and rejuvenating changes take place at the site of heat burns and 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 normalizes the blood circulation, resulting in reduction in the intensity of pain. There may be generalizing dilatation of the heated blood vessels on the centres concerned with regeneration of the body temperature. Heating affects the vasomotor centres causing general rise in temperature.

## Conclusion

*Gridhrasi* is a painful condition and so far there is no established therapy. *Gridhrasi* can be equated with *Sciatica* in modern medicine. *Abhyanga* with medicated oil followed by *swedana* may be used as first line of treatment for both type of *Gridhrasi*. *Agnikarma* and *Raktamokshana* may be useful in severe painful condition and in chronic (degenerative) condition. *Basti* therapy may be better choice for the management of *Gridhrasi*. *Nidana parivarjan* may stop the further progression of disease. It may be concluded that various treatment modalities present in *Ayurveda* vary according to condition of disease, present.

## References

1. Andersson, G.B.J. The epidemiology of spinal disorders. In *The Adult Spine: Principles and Practice*, 2nd ed.; Frymoyer, J.W., Ed.; Lippincott-Raven Publishers: Philadelphia, PA, USA, 1997; pp. 93–141.
2. Harrison's principles of internal medicine. Anthony S.Fauci editors. Mc Graw hill Publication. 18th ed. Vol 1, 2013. Page No.341.
3. Valat JP; Genevay S; Marty M; Rozenberg S; Koes B. Sciatica, Best Pract Res ClinRheumatol. 2010 Apr;24(2):241-52. doi: 10.1016/j.berh.2009.11.005.
4. Agnivesha, Charaka Samhita with Charaka Chandrika Hindi Commentary by Dr. BrahmanandTripathi, Part 1<sup>st</sup>, Sutrasthana 20/11, 1<sup>st</sup>edn (reprint), Varanasi: ChaukhambhaKrishnadas Academy;2009;p389
5. Agnivesha, Charaka Samhita with Ayurveda Dipika Commentary. Chikitsasthana 28/56, DwivediLakshmidhar editor. 1<sup>st</sup>edn(reprint), Varanasi: ChaukhambhaKrishnadas Academy; 2004; p 700
6. Sushruta, Sushruta Samhita with NibandhaSangraha commentary.Nidanasthana 1/74, 1<sup>st</sup>edn(reprint), Varanasi: Chaukhambha Sanskrit Series; 2008; p 268
7. Agnivesha, Charaka Samhita with Ayurveda Dipika Commentary. Chikitsasthana 28/15-18, DwivediLakshmidhar editor. 1<sup>st</sup>edn(reprint), Varanasi: ChaukhambhaKrishnadas Academy; 2004; p 619.
8. Agnivesha, Charaka Samhita with Ayurveda Dipika Commentary. Chikitsasthana 28/78, DwivediLakshmidhar editor. 1<sup>st</sup>edn(reprint), Varanasi: ChaukhambhaKrishnadas Academy; 2004; p 651.
9. CharakaChikitsaSthana 28/83 Charaka Samhita, Ayurveda Deepika, YadavjiTrikamji, Reprint Edition 2009, Varanasi, ChaukhambaOrientalia p 620.
10. AshtangaSangrahaChikitsaSthana 23/4, AshtangaSangraha of with 'Sasilekha' commentary by Indu, Prof.JyotirMitra Reprint Edition 2009 varanasiChaukhambha Sanskrit Series p 564
11. Charaka Sutra Sthana 1/40 Charaka Samhita, Ayurveda Deepika, YadavjiTrikamji, Reprint Edition 2009, Varanasi, ChaukhambaOrientalia p 8.
12. SushrutaChikitsaSthana 35/29-30 Sushruta Samhita, NibandhaSangraha, YadavjiTrikamji Reprint edition 2010 Varanasi, ChaukhambasurbhartiPrakashana p 528.
13. CharakaChikitsaSthana 28/100-101 Charaka Samhita, Ayurveda Deepika, YadavjiTrikamji, Reprint Edition 2009, Varanasi, ChaukhambaOrientalia.
14. Susruta, Susruta Samhita, AyurvedTatvaSandipika Hindi commentary by KavirajAmbikaduttaShastri, Part 1st, Sharirsthana 8/17, ed. (1st) reprint; Varanasi: Chaukamba Sanskrit Sanasthan; 2010. p88
15. CharakaChikitsaSthana 28/100-101 Charaka Samhita, Ayurveda Deepika, YadavjiTrikamji, Reprint Edition 2009, Varanasi, ChaukhambaOrientalia.
16. Agnivesha, Charaka Samhita, Charaka Chandrika Hindi Commentary by dr. BrahmanandTripathi, vol. 2<sup>nd</sup>, Chikitsasthana 28/181, Varanasi: ChaukhambhaKrishnadas Academy; 2014; p 970
17. Agnivesha, Charaka Samhita, Charaka Chandrika Hindi Commentary by dr. BrahmanandTripathi, vol. 2<sup>nd</sup>, Chikitsasthana 28/75, Varanasi: ChaukhambhaKrishnadas Academy; 2014; p 951
18. Singh SK, Rajoria K. Ayurvedic approach in the management of spinal cord injury: A case study. AncSci Life 2015;34(4):230-4.
19. AshtangaSangrahaChikitsaSthana 23/4, AshtangaSangraha of with 'Sasilekha' commentary by Indu, Prof.JyotirMitra Reprint Edition 2009 varanasiChaukhambha Sanskrit Series p 564
20. Agnivesha, Charaka Samhita with Ayurveda Dipika Commentary. Sutrasthana 20/13, DwivediLakshmidhar editor. 1<sup>st</sup>edn(reprint), Varanasi: ChaukhambhaKrishnadas Academy; 2004.
21. Agnivesha, Charaka Samhita with Ayurveda Dipika Commentary. Siddhisthana 11/8, DwivediLakshmidhar editor. 1<sup>st</sup>edn(reprint), Varanasi: ChaukhambhaKrishnadas Academy; 2004.