

A CLINICAL STUDY ON
BALA KORANDA TAILA MATRA VASTI
AND
ERANDA SAPTAKA KASHAYA
IN THE MANAGEMENT OF
GRIDRASI

By

APSARA SUDARSHANI NISHSHANKA

Dissertation

Submitted to the

Institute of Indigenous Medicine

University of Colombo

In partial fulfillment of the requirements of award of the degree

of

Doctor of medicine (ayurveda) on

Kaya chikitsa

Clinical study on Bala koranda taila matra vasti and Eranda saptaka kashaya in the management of Gridrasi

¹Nishshanka, A.S. ²Kulathunga, R.D.H. ³Herapathdeniya, S.K.M.K.

ABSTRACT

Gridrasi has been explained under Vata vyadhi in number of Ayurvedic authentic. It resembles with Sciatica explained in modern medicine. It is a pain pre dominant common disease. Pain in the lower back that radiates towards legs and disability of moving related joints of the body are the main clinical manifestations. The disease Sciatica makes the people incapable of their daily routine due to pain. According to the Ayurvedic textual references Bala Koranda taila (BKT) was recommended in the management of Gridasi. Eranda saptaka Kashaya (ESK) is also vata shamana decoction effective in low back pains. ESK has virechana property as well. In Gridrasi chikitsa siddhanta, it is mentioned performing Shodhana such as Vireka prior to do the Vasti, is helpful, to get maximum benefit of Vasti. In contrast Vasti is considered as best strategy to manage Vata vyadhi. Therefore both procedural as well as the medicinal effect of Vasti should be beneficial here. Present study was carried out as an open trial comparative clinical study in two groups. Patients in the age group 30-60 years of both sexes who were not diagnosed or suffered from other complicated illnesses and having 6 months to 2 year chronicity of the disease was included. Total number of 60 patients were randomly divided into Group A and group B as 30 patients in each. 25 in group A and 28 in group B were completed

¹MD Scholar Institute of Indigenous Medicine, University of Colombo, Rajagiriya, Sri Lanka.

^{*}Correspondence: Dr.A.S.Nishshanka E-mail: ayuapsara@yahoo.com

²Senior Lecturer Department of kaya chikita Institute of Indigenous Medicine, University of Colombo, Rajagiriya, Sri Lanka.

³Senior Lecturer Department of Dravya guna vignana Institute of Indigenous Medicine, University of Colombo, Rajagiriya, Sri Lanka.

the treatment. Group A was given ESK with its anupana for 28 days. Group B was given ESK for 28 days same way in group A along with BKT Matra Vasti for first 14 days. It was aimed to evaluate the separate as well as the comparative effect in both of the selected therapeutic measures, regarding its pain relieving property and ability to ease the joint movements in the management of Gridrasi. It was carefully observed the action of BKT as matra vasti. Positive level of Straight leg raising test and vertebral column movement according to the grade of forward bending, lateral bending extension and rotation were assessed as objective parameters. Pain, stiffness, pricking pain, stretching pain, heaviness, drowsiness, etc. were evaluated as subjective parameters. Data was collected and recorded before the trial, weekly within the trial and weekly within last two weeks follows up after the trial. Collected data was analyzed by using quantitative techniques using paired t test. Mean comparison for straight leg raising test (SLR test) was used and the significance of mean difference will be tested by 95% confidence level. Vertebral column movement also analyzed in same way as Objective parameter. Grading scale was used to analyze the other subjective parameters which mentioned in Ayurveda texts. Pain was assessed by using Visual analogue scale. Straight leg raising difficulty was a diagnostic feature that having all the participants at the beginning. When consider the statistical outcome of the study before and after treatment, improvement of straight leg raising ability and vertebral column movement which used as objective parameters were highly significance statistically ($p < 0.000$). Number of other symptoms also were showed significant improvement by the end of the treatment in both the groups. But comparatively it was great in the group B. The prime feature, pain (Ruk) in lumber sacral or gluteal region radiating towards the leg/s were presence in all cases. Highly significance ($p < 0.000$) improvement was indicated in pain with the treatments. But in group A some of the features had been showed reappearance tendency within last two weeks follow up after the trial. BKT Matra Vasti along with ESK showed significant pain relieving property as well as the possibility to enhance movement of related joints and vertebral column in Gridrasi patients. Further it had been given good relief in associated symptoms like numbness, constipation etc. The results suggest that the ESK along with BKT matra vasti is considerably more effective in the management of Gridrasi comparatively the unitary use of ESK.