
“HETU VIVECHANA IN GRIDHRASI (SCIATICA) ”



Dissertation submitted as partial fulfillment for the degree of

AYURVEDA VACHASPATI

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Specialty – Rog nidan

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Hetu Vivechana in GRIDHRASHI (Sciatica)

ABSTRACT

Vatavyadhi is one of the most common health issues in our routinal clinical practice and Gridhrasi is one of the most commonest among the. The clinical presentation of symptoms of ghridhrasi are characterised by ruja, toda, spandana, gaurav etc. that is felt in the thigh, leg, buttock and or foot. It might be associated with low back pain or not. The disease Gridhrasi occur mostly in that types of patient which having sedentary occupation as well as those doing heavy work. A range of management and treatment have describes by various acharyas. But apart from that the management not includes treatment but also precaution to prevent the disease to be manifested. For the sake of that prevention we need to access the hetu of the disease so can help in nidaan parivarjan i.e. avoiding the causes of ghridhrasi.

Aims and Objectives of the study

Here the sStudy was to evaluate the Nidanas of vataja and vataja kaphaja gridhrasi, also to study the etiology of Sciatica as per available references.

Materials and methods

30 patients of Gridhrasi having classical symptoms of ghridhrasi were selected for the present observational study. They will be assessed clinically with a detailed history taking and physical examination.

Results

On the basis of obtained observation we came across the conclusion over the common hetu of ghridhrasi causes i.e.

Maximum numbers of patients' i.e.60 % were taking Atikatu Ahara, Vishmashana was observed in 53.33 % of patients. 30% of patients were taking Abhishyandi Ahara. While Virudhashana and Adhyashana observed in 23.33% and 16.66 % of patients. Alpashana was observed in 20% of patients.

Maximum no. Of patients i.e. 83.33 were not doing any physical exercises, Diwaswapa was observed in 60% of patients. Aticheshta in 36.66 % and Vegadharana in 60 % of the patients.

15% of patients were having habitual to Ratrijagarana while Vishamacheshta and Bharavahana were observed in 13.33 % and 10% of patients.

Manasika Nidana: Chinta was reported in 60 % patients, Krodha was reported in 23.33% of patients, Shoka in 13.33% and Bhaya in 3.33% of patients.

Aagantuka Nidana: History of Abhighata was observed in 36.66% of patients.

Discussion

The site and nature of pain of sciatica resembling Gridhrasi. So we can co-relate both on the basis of symptoms. Vata is involved predominant while kapha is anubandhi. On the basis of present study causes of sciatica noted as under nourishment, ankylosing spondylosis, muscle strain, spine pressure, smoking or tobacco chewing, degenerative disc disease, slipped disc