



A COMPARATIVE CLINICAL STUDY TO ASSESS THE EFFICACY OF SHUNTI GOKSHURA KASHAYA AND RAASNA SAPTAKA KASHAYA IN KATIGRAHA W.S.R. TO LOW BACK PAIN

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ABSTRACT

Background; *Katigraha* is a condition in which patients experience *shoola* with *graha* in *katigraha*. Although *katigraha* is not described elaborately in Ayurvedic texts, but in present era, due to lifestyle the prevalence of its main symptom, low back ache is very high. It is one of the most common conditions now a day. *Katigraha* is explained as one among the 80 *nanatmaja vata vikara* & also as a symptom in other *Vyadhi*. It is described as a separate disease in the clinical text *Gadanigraha* & Acharya Sharangadhara considered it as a *nanatmaja vata vyadhi*.

Method-In the management of *katigraha*, *Acharyas* says the general principles of treatment of *vata dosha* should be adopted. After reviewing the classics, it is ideal to manage *katigraha* with following principles of treatment- *snehana*, *swedana*, *mrudu samshodhana*- *Virechana*, *Basti*. Here *shunti* & *gokshura* are utilized in the the form of *kwatha* & *rasna saphthaka kashaya* has been taken for comparative study in the management of *katigraha*.

Results-

Effect on stiffness After treatment & Before treatment(by Wilcoxon test)

Shunti gokshura kashaya (SGK) - Z value is -4.690, P value is 0.000<0.001

Rasna saphthaka kashaya (RSK)- Z value is -4.379, P value is 0.000<0.001

Effect on pain After treatment & Before treatment(by Wilcoxon test)

Shunti gokshura kashaya(SGK) - Z value is -4.788, P value is 0.000<0.001

Rasna saphthaka kashaya(RSK)- Z value is -4.245, P value is 0.000<0.001

Conclusion- In this study even though the patients had shown improvement in most of the criterias of assessment of low back ache in both the groups, better effect in SGK than in RSK, both the *kashayas* have equal results in the contest by statistical test performed. According to this study both the *kashayas* can be opted for all the *katigraha* case w.s.r Low back ache conditions.

Keywords: *katigraha*, low back ache, *shunti gokshura kashaya*, *rasna saphthaka kashaya*

INTRODUCTION

A normal daily life without mobility is almost impossible for any individual. Among the back bones, low back region or lumbar region has its own significance in maintaining the posture etc as the maximum body weight is being supported by this area.

As the advancement of busy professional & social life, improper posture etc creates under pressure over the low back & turns the daily life to misery. Today there is a need to find a drug which is cost effective, easily available & has excellent results with zero side effects. So *kashaya* which are of less

ingredients & good effect are taken here for the study.

AIMS AND OBJECTIVES

AIM:

To compare the efficacy of *Shuntigokshura kashaya*¹ to that of *Raasnasaptaka kashaya*² in *katigraha*³.

OBJECTIVES:

1. To prepare *Shuntigokshura kashaya* *Raasnasaptaka kashaya* & mentioned in classics.
2. To Study the effect of *Shuntigokshura kashaya* in *katigraha*.
3. To Study the effect of *Raasnasaptaka kashaya* in *katigraha*.
4. To compare the effect of *Shuntigokshura kashaya* and *Raasnasaptaka kashaya* in *katigraha*.

Materials and methods

Source of data: Patients who fulfill the inclusion criteria randomly selected from OPD and IPD of Karnataka Ayurveda Medical College - Hospital and also from referral sources and special camps conducted for the purpose.

Methods of collection of data

Patients were screened on the basis of prepared for the said purpose. A case report form was prepared with all points of history taking, physical science and symptoms of *katigraha*. The selected patients were subjected to detailed clinical history and complete physical examination before undergoing the clinical study.

Diagnostic criteria

Inclusion criteria:

- Patients of both the genders.
- 20 years to 60 years of age.
- Fulfilling the diagnostic criteria, having signs and symptoms of *Kati Graha*

Exclusion criteria:

- Post-surgical backache.
- Fracture of lumbar spine.
- Ankylosing spondylitis
- Pregnant women and all other gynaecology related causes resulting in back pain.
- Known patient of Carcinoma & T.B. of spine.

Laboratory Investigations: (if necessary)

1. Blood – haemoglobin, erythrocyte sedimentation rate, total W.B.C count, differential leukocyte count.
2. Urine – microscopic, sugar, albumin.
3. X-ray (lumbosacral region)

Intervention

- 60 patients of *katigraha* selected randomly and divided into two groups, as Group-A and Group-B.
- **Group-A** *Shuntigokshura kashayam* single dose of 96 ml before food in the early morning for 30 days.
- **Group-B** *Raasnasaptaka kashayam* two divided doses of 48 ml each before food in the morning & evening for 30 days.
- Clinical assessment done before the start of treatment, 15th day 30th and 46th day of study period.
- Follow Up- 15 days after the course of treatment.

Assessment criteria : The assessment done on the basis of following Subjective parameters and Objective parameters.

Subjective parameters:

- *Ruk* (pain)
Using Vas scale – Pain assessment scale
Severity of pain: on the basis of severity, scope of each site having the pain was noted & mean was calculated.

- No pain- 0
- Mild pain (not powerful or strong)- 1
- Moderate pain (not extreme or excessive)- 2
- Severe pain- 3
- Oswestry Low Back pain Disability Questionnaire⁴

Objective Parameters

- *Graha*(stiffness)

Clinical assessment based on the assessment criteria done before the start of treatment, 15th day 30th and 46th day of study period. Follow Up- 15 days after the course of treatment.

OBSERVATION AND RESULTS

Effects of treatment in both groups (group A and group B before and after) as well as comparatively (between group A and group B) were computed by grading and finally the overall effect of the treatment (before and after) were statistically analyzed (Non Parametric tests like Wilcoxon signed rank test to compare the difference within the groups and Mann Whitney U to compare the difference between the groups) from the data available for significance. The obtained results were interpreted as: Insignificant P>0.05, Significant P<0.01, Highly Significant P < 0.001.

Since data does not follow normal distribution performing nonparametric test.

Effect of treatment in Group A and Group B on Subjective and objective parameters of Katigraha are as follows:

Table No.1 Effect of Shuntigokshura kashaya on ruk (pain) in Group A

Group	Parameter	Negative ranks			Positive ranks			Ties	Z	P	Remarks
		N	MR	SR	N	MR	SR				
A	AT:BT	29	15.00	435.00	0	0.00	0.00	1	-4.788	0.000	S
	AF:BT	30	15.50	465.00	0	0.00	0.00	0	-4.920	0.000	S

Table No.2 Effect of Raasna saphthaka kashaya on ruk (pain) in Group B.

Group	Parameter	Negative ranks			Positive ranks			Ties	Z	P	Remarks
		N	MR	SR	N	MR	SR				
B	AT:BT	21	11.00	231.00	0	0.00	0.00	9	-4.245	0.000	S
	AF:BT	26	13.50	351.00	0	0.00	0.00	4	-4.654	0.000	S

Table No.3 Effect of Shuntigokshura kashaya on stiffness in Group A.

Group	Parameter	Negative ranks			Positive ranks			Ties	Z	P	Remarks
		N	MR	SR	N	MR	SR				
A	AT:BT	28	14.50	406.00	0	0.00	0.00	2	-4.690	0.000	S
	AF:BT	29	15.00	435.00	0	0.00	0.00	1	-4.778	0.000	S

Table No. 4 Effect of Raasna saphthaka kashaya on stiffness in Group B.

Group	Parameter	Negative ranks			Positive ranks			Ties	Z	P	Remarks
		N	MR	SR	N	MR	SR				
B	AT:BT	20	10.50	210.00	0	0.00	0.00	10	-4.379	0.000	S
	AF:BT	27	14.00	378.00	0	0.00	0.00	3	-4.916	0.000	S

Table No.5 Effect of Shuntigokshura kashaya on LBA disability questionnaire Total score in Group A.

Group	Parameter	Negative ranks			Positive ranks			Ties	Z	P	Remarks
		N	MR	SR	N	MR	SR				
A	AT:BT	30	15.50	465.00	0	0.00	0.00	0	-4.786	0.000	S

DISCUSSION

Low back pain (LBP) is the fifth most common reason for physician visits, which affects nearly 60-80% of people throughout their lifetime. The lifetime prevalence of low back pain is reported to be as high as 84%, and the prevalence of chronic low back pain is about 23%, with 11-12% of the population being disabled by low back pain.

Probable mode of action of drugs :

Shuntigokshura kashaya : Mentioned in Chakradatta Amavatadhikara adhyaya. The Ingredients Shunti (dry ginger) and Gokshura (dried fruits).Where as Shunti is having *deepana pachana* property that which removes 'amatwa' from the kati by its *ushna veeryatwa* and Gokshura is *madhura vipaka* and *vata-pittahara* in nature by that it nourishes the kati and gives strength.

Rasna saphthaka Kashaya: Mentioned in Sharangadhara samhita dwiteeya khanda kashaya kalpana. It is specially indicated in *janga, katigraha* .

Potential ingredients which have following properties:

Shotahara/Vedanahara: (Rasna, Eranda, Punarnava),
Amahara: (Rasna, Guduchi, Aragwadha & Devadaru),
Agni Deepana: (Guduchi and Gokshura),
Rasyana: (Guduchi and Punarnava)
Balakaraka:(Guduchi, Gokshura)
Mootrala:(Gokshura) Nutrition (Gokshura)
Mrudu rechaka: (Aragwadha)
Sroto vibandhahara: (Devadaru)
Poshana: (Gokshura)

The combined effect of the compound successfully alleviates pain , inflammation & stiffness present in Back pain.

CONCLUSION

1. It is clear from the study, result of Group A is comparatively better than Group B by comparing the mean value of scores before treatment, after treatment and after follow up with respect to Group A and Group B.
2. Both the groups showed statistical significant result in reducing pain and stiffness soon after the treatment. But recurrence of the condition seen in few of the cases after the follow up period.
3. In Rasna saphthaka kashaya group most of the patients were complaining of

hard stools after starting the treatment. But was managed with proper diet advice.

4. Even though the *Kashaya* is given for a period of 30 days, improvement was observed. Hence, considering the improvement obtained in this period, it was logical to infer that if continued the same treatment for a longer duration, better results could be obtained. Also, could hope that this study will encourage further more clinical trials with a prolonged duration in this regard.

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