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Management of Gridhrasi through Mustadi Yapana Basti with Mamsa Rasa Avapa: A Clinical Case Study

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Abstract

Gridhrasi is a *Vata*-dominant *Vatavyadhi* characterized by radiating pain originating from the gluteal region, extending downward, and leading to stiffness and significant functional disability. While conventional treatments often provide only temporary relief, Ayurvedic interventions such as *Mustadi Yapana Basti* with *Mamsa Rasa Avapa* offer both *Shodhana* (eliminative) and *Brimhana* (nourishing) properties suitable for managing chronic conditions. A 45-year-old male presented with a six-month history of lower back pain radiating to the right lower limb, accompanied by stiffness and difficulty walking. Clinical assessments revealed restricted lumbar movements, a right-sided Straight Leg Raising (SLR) test positive at 40°, and a positive FABER test. The patient was managed with an 8-day Kala Basti regimen of *Mustadi Yapana Basti* with *Mamsa Rasa Avapa*. Post-treatment, the patient experienced a marked reduction in pain, with the Visual Analog Scale (VAS) score decreasing from 8/10 to 2/10. Additionally, the right SLR improved from 40° to 70°, and functional activities improved significantly, yielding 70–80% overall symptomatic relief that was successfully maintained at a two-week follow-up. Ultimately, *Mustadi Yapana Basti* with *Mamsa Rasa Avapa* serves as a safe, effective, and holistic intervention for the management of chronic Gridhrasi.

Key words : Gridhrasi; Ayurveda; Mustadi Yapana Basti; Case Report.

***G**ridhrasi* is one of the most common *Vatavyadhi* described in classical Ayurvedic texts, characterized by radiating pain originating from the *Sphika* (gluteal region) and extending to the *Kati, Uru, Janu, Jangha,* and *Pada*[1]. Patients typically experience symptoms such as *Ruk* (pain), *Toda* (pricking sensation), *Stambha* (stiffness), and *Spandana* (tingling),

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leading to significant functional disability.

In Ayurveda, *Gridhrasi* is primarily considered a *Vata*-dominant disorder, though it is sometimes associated with *Kapha Dosha*. Treatment focuses on *Vata-shamana* and *Vata-anulomana* through therapies such as *Snehana*, *Swedana*, and Basti. Yapana Basti, a specialized form of Basti, possesses both Shodhana (eliminative) and Brimhana (nourishing) properties, making it highly suitable for chronic conditions[7]. The addition of *Mustadi Yapana Basti* with *Mamsa Rasa Avapa* provides extra nourishing effects that enhance tissue strength and neuromuscular function. Considering the limitations and temporary relief provided by conventional treatments, this case report highlights the clinical relevance and novelty of utilizing this specific Basti preparation to effectively manage chronic *Gridhrasi*.

Patient Information :

A 45-year-old male patient presented with a six-month history of lower back pain radiating to the right lower limb, associated with stiffness and difficulty walking. The patient's occupation involved prolonged standing, frequent bending, and repetitive strain on the lower back, which likely acted as precipitating factors. There was no history of systemic illnesses (such as diabetes, hypertension, or thyroid disorders), spinal trauma, surgery, or prolonged medication use. Family and psychosocial histories were non-contributory, with no history of smoking, alcohol use, or significant psychological stress.

Clinical Findings :

Physical examination revealed a guarded posture, restricted lumbar movements, and tenderness over the lumbosacral, right paraspinal, and gluteal regions. The Straight Leg Raising (SLR) test was positive at 40° on the right side, and the FABER test[8] elicited gluteal pain. Performance on the coin pick-up test was restricted, indicating impaired forward flexion; additionally, hamstring tightness and lumbar paraspinal muscle spasms were noted. A neurological examination revealed normal motor strength, intact sensory function (with the exception of occasional tingling), and preserved deep tendon reflexes, with no red-flag signs (*e.g.*, foot drop or bowel/bladder involvement).

Timeline :

Table-1. Timeline of Clinical Events and Therapeutic Interventions

6 Months Prior	Gradual onset of lower back pain radiating to the right lower limb; progressive stiffness and tingling. Managed with home remedies (oil massage, stretching) with temporary relief.
2 Months Prior	Worsening of symptoms affecting daily activities. Conventional treatment provided only short-term, partial relief.
Day 0 (Baseline)	Consultation. Positive SLR (40°), FABER, and coin pick-up tests. *Mustadi Yapana Basti* (8-day course) planned.

Diagnostic Assessment :

The diagnosis was made clinically based on classical Ayurvedic features, such

as radiating pain along the posterior right lower limb and restricted movements. Clinical assessments, including a positive SLR (40° on the right), a restricted coin pick-up test, and a positive FABER test, indicated nerve root irritation. Additionally, restricted lumbar range of motion (ROM) and tenderness in the right lumbosacral region were observed. Routine investigations (CBC, ESR, RBS, LFT, and RFT) were normal, thereby excluding systemic pathology. Differential diagnoses, including lumbar disc herniation, piriformis syndrome, facet arthropathy, and sacroiliitis, were ruled out based on the clinical presentation and the lack of severe neurological deficits[5].

Therapeutic Intervention: *Mustadi Yapana Basti* (an 8-day Kala Basti regimen) was administered with *Mamsa Rasa Avapa*.

Basti Prepared with,

- *Madhu* (60 ml)
- *Saindhava Lavana* (6 g)
- *Sneha* (60 ml Nirgundi Taila)
- *Kalka* (30 g *Shatapushpa*)
- *Mustadi Ksheerpaka* (300 ml)
- *Avapa* - *Mamsa Rasa* (50 ml)

Day	Type of Basti	Dosage	*Adana Kala*	*Pratyaga-mana Kala*	*Vega*	Intervention
0	-	-	-	-	-	Planned *Mustadi Yapana Basti* (8-day course) with *Māmsa Rasa Avapa*.
1	AB	60 ml	2:30 PM	6:45 PM	1	*Mustadi Yapana Basti* initiated
2	NB	500 ml	9:30 AM	9:33 AM	2	Continued therapy
3	AB	60 ml	2:15 PM	8:15 PM	1	—
4	NB	500 ml	10:00 AM	10:05 AM	2	—
5	AB	60 ml	2:30 PM	9:40 PM	1	—
6	NB	500 ml	9:40 AM	9:44 AM	3	—
7	AB	60 ml	2:30 PM	10:00 PM	2	—
8	AB	60 ml	2:15 PM	10:40 PM	2	Completion of *Basti* course
9	—	—	—	—	—	No further Panchakarma; advised exercises and posture care

- Procedures were performed daily in the left lateral position under aseptic conditions.

Outcomes and Follow-Up :

The patient showed progressive improvement without any adverse reactions. The VAS[2] score reduced from 8/10 to 2/10, and the right-sided SLR improved from 40° to 70°. Functional activities improved significantly, leading to 70–80% symptomatic relief. At the two-week follow-up, clinical stability was

maintained with no recurrence of severe symptoms.

Gridhrasi, as described in *Charaka Samhita* and *Sushruta Samhita*[6], is a *Vata*-dominant disorder characterized by radiating pain originating from the *Sphik* (buttock) and extending to the *Kati, Uru*, *Janu, Jangha,* and *Pada,* along with symptoms such as *Stambha* (stiffness) and *Toda* (pricking pain). These features closely resemble Sciatica in contemporary medicine, where nerve root irritation leads to similar clinical manifestations.

In the present case, the patient exhibited classical features of *Gridhrasi*, including radiating pain, stiffness, and restricted mobility, which were confirmed through objective assessments such as SLR, FABER, and functional tests. The chronic nature of the condition suggests the involvement of aggravated *Vata* along with possible *Dhatu Kshaya*, contributing to structural and functional impairment.

Basti is considered the principal line of treatment for *Vata* disorders due to its direct action on the *Pakvashaya* and its systemic therapeutic effects. *Yapana Basti,* having both *Shodhana* (eliminative) and *Brimhana* (nourishing) properties, is particularly effective in chronic and degenerative conditions. In this case, *Mustadi Yapana Basti* with *Mamsa Rasa Avapa* was administered in a *Kala Basti* regimen, ensuring a balanced approach of *Dosha* elimination and tissue nourishment.

The therapeutic effect can be attributed to *Vata-shamana, Dhatu poshana,* and the analgesic and anti-inflammatory properties of the formulation[4]. Additionally, *Basti* therapy may improve neuromuscular coordination and joint mobility[3]. Significant improvements in SLR, FABER test, and functional parameters, along with reduction in pain and stiffness, indicate effective management.

Overall, *Mustadi Yapana Basti* with *Mamsa Rasa Avapa* appears to be beneficial in *Gridhrasi,* particularly in chronic cases, by improving both symptoms and functional capacity.

Mustadi Yapana Basti with *Mamsa Rasa Avapa* is an effective, safe, and holistic intervention for the management of *Gridhrasi,* particularly in chronic cases where conventional treatments fail to provide sustained relief. Further large-scale, controlled clinical trials are recommended to validate these findings and establish standardized protocols.

Patient Perspective :

The patient reported noticeable, meaningful improvement in pain and mobility. He expressed satisfaction with the therapy due to an enhanced ability to perform daily activities and appreciated the careful monitoring during the follow-up.

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