

A Clinical case study of Ayurvedic Management of *Pakshaghat Vyadhi* with special reference to Cerebrovascular Accident

¹Dr. Kiran Damoo Ubhe. ²Dr. Prajkta Gundhar Patil.

¹ M.D. (*kayachikista*), PhD Scholar (Kayachikista) Associate Professor, Department of *kayachikista*

²M.D. (*kayachikista*) Scholar, Department of *kayachikista*,

¹M.A.M's Sumatibhai Shah Ayurveda Mahavidyalaya, Hadapsar, Pune -411028, Maharashtra, India.

Abstract

Cerebrovascular diseases include some of the most common and devastating disorders; ischemic and hemorrhagic stroke. stroke is the second leading cause of death worldwide. Cerebrovascular accident or stroke is defined as abrupt onset neurological disorder of vascular aetiology.^[1] *Pakshaghat* is an Ayurvedic term used to describe paralysis affecting one side of the body, In Ayurveda, it is classified under *Vata Vyadhi*, caused primarily by the vitiation of *Vata dosha*, leading to impairment of sensory and motor function on one side. The term “*Paksha*” means one side of the body and “*Ghat*” denotes loss or injury, signifying partial or complete loss of movement and strength. Paralysis or the suffix “*Plegia*” indicates weakness so severe that a muscle cannot be contracted at all whereas paresis refers to less severe weakness. The prefix “*hemi*” refers to one-half of the body, “*para*” to both legs, and “*quadri*” to all four limbs.^[2]

Pakshaghat is similar to a stroke caused by blockage or bleeding in the brain. Common risk factors include high blood pressure, diabetes, and unhealthy lifestyle habits. It usually causes weakness, numbness, difficulty in speaking, and poor coordination on one side of the body. In Ayurveda, management focuses on *Snehana Swedana*, *Basti*, and internal medications to balance *Vata*. A 76 years old male patient with complaining of left-hand heaviness, tongue heaviness, slurred speech, mouth angle deviation since afternoon. He was diagnosed with CVA. The patient was admitted in ICU and managed with Ayurvedic medication along with *Panchakarma* -*Snehana*, *Swedana*, *Basti* along with modern medication. he got relief in clinical symptoms in 10 days. The collected data emphasize the potential of Ayurveda interventions in CVA. This article aims to explore the conceptual correlation between CVA and *Pakshaghat* and highlights the potential role of Ayurvedic principles in understanding and managing this condition.

KEYWORDS: *Pakshaghat*, *Vata*, *Vyadhi*, *Dosha*, *Snehana*, *Swedana*, *Basti*, CVA.

INTRODUCTION:

The concept of *Ashtamahagada* includes *Vatavyadhi*.^[3] *Pakshaghat* disease is one type of *Vata vyadhi* belonging to *Madhyama Rogamarga* with *Karmakshaya* as the loss of function, pain, loss of speech and sensation affect in one half of the body are seen in *Pakshaghat*. *Pakshaghat* is an important *Vatavyadhi* described under *Vataja nanatmaja vyadhi* and *Mahavatavyadhi* can manifest either due to *dhatukshaya* and *margavarana*.^[4] The term *Pakshaghat* means, “Paralysis of one half of the body” where *Paksha* denotes either half of the body and *Aghata* denotes the impairment of *Karmendriyas* and *Gyanendriyas*. *Karmendriyas* are considered part of the motor system and *Gyanendriyas*, which is related to the sensory system. In Ayurveda, *Pakshaghat* arising from vitiated *Vata dosha* affecting *Sira*, *Snayu*, and *Sandhi*, *Sheera*, *Dhamani* manifesting as *Cheshta Nivrutti* (loss of voluntary movement), *Vakstambha* (speech impairment), and Pain.^[5] *Acharya Charak* explained that *Prakupita Vayu* take shelter in the half of the body and causes *Pakshaghat*, which is associated with stiffness of joints.^[6] whereas *Acharya Sushruta* explained that *Vata dosha* travels in *Urdhava Adhoga Tiryaka Dhamanis* and causes *Sandhi Bandhanamoksha*, which ultimately leads to loss of function in one half of the body is called *Pakshaghat*.^[7]

Pakshaghat is a term that refers to a stroke. Stroke is defined by World Health Organization as a clinical syndrome consisting of rapidly developing clinical signs of focal disturbance of cerebral function lasting more than 24 hours or leading to death with no apparent cause other than vascular origin. A stroke occurs when the blood supply to a part of the brain is blocked or when a blood vessel in the brain ruptures, leading to damage

of brain tissue. Stroke is mainly of two types: ischemic stroke, caused by blockage of blood flow, and hemorrhagic stroke, caused by bleeding in the brain. Ischemic stroke is the more common type. Common symptoms include sudden weakness or paralysis of the face, arm, or leg, difficulty in speaking, dizziness, vision problems, loss of balance, severe headache, and sometimes unconsciousness.

For cerebrovascular accidents. Ayurveda offers a diverse range of treatments Both *Panchakarma* and internal ayurvedic remedies are effective at the same time. *Acharya Charak* has given treatment protocol of *Pakshaghat* which is *Snehan*, *Swedana*, *Basti Karma*, *Nasya*, *Mruduvirechan*, *Jivhanirlekhan*.

1.CASE REPORT:

A 76 years old male patient reported to Sane Guruji Arogya Kendra's OPD 1, in conscious and oriented state with complaining of left upper limb heaviness, tongue heaviness, slurred speech since afternoon. He was admitted in icu for further management and investigation.

2.PAST HISTORY:

No H/O any major medical illness

No H/O any surgical illness.

No any drug and food allergy

Addiction – Chronic Tobacco chewer since 20 yrs

3.CLINICAL FINDINGS:

Asthavidha Pariksha

Nadi -Vata-Pittaj

Mala-Samyak Malapravrutti

Mutra-Samyak Mutrapravrutti

Jivha – Saam

Shabda -Aspastha

Sparsha -Samshitoshna

Drika- Prakrut

Akruti – Krusha

3.1 PHYSICAL FINDINGS:

O/E- Afebrile

Pulse-96/min

BP- 170/90 mmhg

RS- B/L clear

CVS- S1S2 Normal

CNS- Conscious and Oriented

P/A – Soft and no tenderness

3.2 NEUROLOGICAL EXAMINATION:

Higher Mantal Function

Handedness -Right Handed

Consciousness and Orientation- to time, place, person

Memory -Normal

Intelligence – Normal

Speech – Slurred

Motor System

Attitude – Normal

Muscle tone –Normal

Muscle- Normal

Muscle power

Extremity	Before Treatment	After Treatment
Right upper limb	5/5	5/5
Right lower limb	5/5	5/5
Left upper limb	4/5	5/5
Left lower limb	5/5	5/5

Superficial reflexes

Reflex	Right	Left
Corneal	Normal	Normal
Conjunctival	Normal	Normal
Jaw	Normal	Normal
Plantar	Normal	Normal

Deep tendon reflexes

Reflex	Right	Left
Brachioradialis	Normal	Normal
Bicep Tendon	Normal	Normal
Tricep Tendon	Normal	Normal
Patellar	Normal	Normal
Ankle	Normal	Normal

SENSORY SENSATION

Touch – Present

Temperature – Present

Pain -Present

3.3 INVESTIGATION

HGM:

Hb- 10.9

Wbc- 5470

Plt- 311000

Hct-35.1

Mcv-70.3

LFT- WNL

USG(A+P) –

Grade 1 fatty Changes in liver.

SR ELECTROLYTES

Sr. Sodium-137.1

Sr. Potassium-3.79

Sr. Calcium-1.15

RFT – Blood Urea-17.8

Creatinine-1.0

URINE (R) -WNL

2D ECHO –

Mild LVH, No RWMA, EF- 60% No PAH

MRI BRAIN (STROKE PROTOCOL)

Foci of acute non-hemorrhagic infarcts in the right fronto-parietal lobes in cortical and subcortical region and right centrum semiovale.

A chronic lacunar infarct is seen in the centrum semiovale.

Age appropriate neuroparenchymal atrophy with chronic white matter ischemic changes.

MR Angiography reveals mild atherosclerotic changes as described.

4. TREATMRNT:

4.1

Sanshaman Chikitsa

1. *Erand Tail* with lukewarm water 6 tsf

2. *Ekangavir Rasa* -250 gm BD

3. *Vatavidhwansa Rasa* – 250gm

4. *Jivhadi Kashaya* – 4tsf BD with *sambhag Jal*
5. Dual Antiplatelet to prevent further complication
 - a) Tab Ecosprin 150 mg 1 HS
 - b) Tab Clopitab 75 mg 1 HS
 - c) Tab Atorva 20 mg 1 HS

6. Physiotherapy

4.2 Panchkarma Procedures

1. *Jivha Pratisaran* with *Akarakarabha Choorna*
2. *Sarwang snehan* with *Bala Tail* and *Bashpa Swedana*
3. *Basti* – *Niruha Basti* with *Dashmuladi kwatha*
Anuvasana Basti with *Sahchar Tail (100 ml)*
4. *Nasya* – *Panchendriya Wardhan Tail 4”* BD in each nostril

DISCUSSION:

In *Pakshagaht Vata* is main cause of illness. *Snehan*, *Swedan*, *Mruduvirechana*, *Basti karma*, and *Nasya* are specific *chikista sutras* that *Acharya Charak* has described as a therapeutic method for *Pakshghat*.^[8]

Snehan:

Abhyanga is one among the *Dincharya*. In *Pakshaghat*, *Sira Sanyu Sankochana snehan* is a very essential condition. It pacifies the *Vata doshas* and *Pushti prasada*. According to *Acharya Charak*, *Vayu* is located in *Sparshanendriya*, *Snehana* stimulates the peripheral nerve system, which in turn stimulates the vessels and muscular system. e.g., *Sahchar tail*

Swedan:

Swedan is advised in accordance with *Snehan karma*. The method that relieves *Gauravata*, *Sheetata*, and *Sthambha* is called *Swedan*.^[9] Dry sticks become flexible and bendable as a result of the effects of *snehana* and *swedan*.^[10]

Swedan medication by *Ushna* and *Tikshna guna* can penetrate the microcirculatory channels and trigger the sweat glands, causing them to produce more sweat. After dilation of the micro channels, *Laghu* and *Snigdha dosha* enter the channels and lead them to go towards *Kostha* or excrete them through the skin's micro pores as sweat resulting in *srotoshodhan*.

Basti:

Vata is seen as the main aggravating factor and *Basti Chikitsa* is regarded as the prime line of treatment. Because it immediately affects *Pakwashaya*, the principal seat of *vata dosha*, it concurrently induces detoxifying and pacifying treatment, resulting in *anulomana* of *apana vayu*. It results in *anulomana* of *saman*, *vyana*, *udana*, and *prana vayus*, which eventually pacifies the *vata dosha*. *Basti* approaches the illness from multiple angles like *Balya*, *Brimhana*, *Pushtikara*.

It is the most important as it drastically expels the vitiated *Vata* responsible for the movements of all *Dosha*, *Dhatu*, and *Mala* within the body. *Niruha Basti* serves the purpose of the elimination of vitiated *Vata Dosha*. As *Shosha* of *Sira* and *Snayu*, which is the most critical event in the *Samprapti* of *Pakshaghata*, the *Bruhana* effect induced by *Anuvasana Basti*, which pacifies *Vata*. Therefore, *Basti* is considered one of the foremost treatments for *Pakshaghata*, capable of eliminating *Doshas* from the body.^[11] It sustains life by maintaining the harmony between *Dosha*, *Dhatu*, and *Mala* in the body.

Niruha Basti:

Dashamula Niruha Basti, In *Niruha Basti Madhu* possesses *Yogavahi* and *Sukshma Marga Anusarita*, functions as a catalyst, penetrating the *Sukshma Srotas*. The *Laghu* and *Tridosha Shamaka Gunas* were introduced to the *Saindhava Lavana*. The *Snigdha Guna* of *Sneha Dravya (Tila Taila)* combats the *Ruksha* and *Laghu Gunas* of *Vata*, resulting in *Vata Shamana*.

Among various types of *Niruha Basti Dravyas*, *Dashamula*, is the best *Tridosahara*, especially has *Vatahara* property; it is highly efficacious for *Vata* predominant disorders. *Dashmoola Niruha Basti* is considered very effective, providing additional benefits of *Shodhana* and *Rasayana*, which are expected in *Pakshaghata*

Anuvasana Basti:

Anuvasana Basti with *Sahachara Taila*, *Anuvasana Basti* will hold the oil for a set period of time. *Pureeshadhara Kala* is protected by the *Snehana* effect. While reviewing the *Anuvasana Basti*, *Acharya*

Charaka notes Sneha's digestion with the words "*Sneham Pachati Pavakah*," and after digestion, Dravyas can be taken to cause the effect on the body.

Nasya:

Nasa is referred to as *Dwar to Shira* (brain) in Ayurveda.^[12] Nasya is the process of administration of medicinal Kwath or Sneha through nostril. The brain is the primary site of pathology in *Pakshaghat*. *Shira Pradesh* is the primary *Adhishthana* of the *Indriya*. A drug given by Nasa travels to *Shira*, it simultaneously causes *Vata Shaman* and *Dosha Nirahana*. Nasya operates in *Urdhava Jatrugata Vikar*. In this case patient was given Shaman Nasya with *Panchendriya Vardhan Tail*. Tail has Vata properties and specially acts on *Urdhva Jatrugta Vyadhis*.

Jivha Nirlekhan:

Akarkarabh Churna is used in stroke (CVA) patients, especially when speech is affected. It helps stimulate the nerves of the tongue, improves speech, and supports recovery from facial weakness and paralysis. According to Ayurveda, its *Ushna* (hot) and *Tikshna* (sharp) properties help balance aggravated *Vata* and *Kapha doshas*.

Physiotherapy:

Physiotherapy is an essential part of the treatment and rehabilitation of patients with cerebrovascular accident. The primary aim of physiotherapy is to help patients regain lost motor functions, improve mobility, prevent complication, achieve the highest possible level of independence and improve quality of life.

Ekangveer Ras:^[13]

Main contents - *Shudha Gandhaka*, *Shudha Parada*, *Shudha Kanta Loha Bhasm*, *Vanga Bhasma*, *Naga Bhasma*, *Tamra Bhasma*, *Abhraka Bhasma*, *Tikshna Loha Bhasma*, *Nagaram*, *Marich*, *Pippali*

Bhavana Dravya – *Trihala*, *Trikatu*, *Nirgundi*, *Chitrak*, *Markav*, *Shigru Kushtha Amalaki*, *Kupilu*, *Arka*, *Guduchi*, *Aadraka*

In the treatment of *Pakshaghata* it is essential to pacify vitiated *Vata* and *Kapha Doshas*. According to Ayurveda pharmacodynamic properties, *Ekangveer Rasa* ability to pacifying vitiated *Vata Doshas* it is having *Madhura Rasa*, *Snigdha Guna*, *Ushna Veerya* and *Madhura Vipaka*. It pacifies vitiated *Kapha Dosha* by *Tikta*, *Katu*, *Kashaya Rasa*, *Laghu Guna*, *Ruksha Guna*, *Ushna Veerya* and *Katu Vipaka*.

Vatavidhwansa Rasa:^[14]

Main contents - *Shodita Parada*, *Shodita Gandhaka*, *Vanga bhasma*, *Naga bhasma*, *Tamra bhasma*, *Loha bhasma*, *Abhraka bhasma*, *Shodita takana*, *Pippali*, *Shunti*, *Marich*, *Shodhita vatsanabha*

Bhavana Dravya – *Trikatu*, *Triphala*, *Chitraka*, *Bhringaraja*, *Kushta*, *Nirgundi*, *Arka Ksheera*, *Bhumyاملaki*, *Chandrasura*, *Nimbu*

Vatavidhwansa Rasa is potent Ayurvedic medicine used for neuromuscular disorders. *Rasa* of *vatavidhwansa rasa* is *Katu* and *Tikta*, *Virya* is *ushna*, *Vipaka* is *Katu*. This *rasa*, *virya*, *vipaka* pacify aggravated *Vata* and *Kapha dosha*. The *ushna virya* counteracts the *sheet* and *ruksha guna* of vitiated *Vata*. The *katu rasa* dissolve *Ama* within the joint and body channels.

Conclusion:

In *Pakshaghata*, *vata* is the primary cause of illness and needs to be treated first. Based on *Vyadhi Avastha*, *Rogi Bala*, and *Dosha Bala*, the patient received *Shamana Aushadhi*, Physiotherapy, and *Sthanika Chikitsa* and *Basti karma*. The patient's condition significantly improved after undergoing

Panchakarma treatments and certain *Shamanaushadi* Later on, The patient's quality of life increased as a result of treatment. Thus, it can be said that *Pakshaghata* can be effectively treated with ayurvedic therapy.

Compliance with ethical standards

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Disclosure of conflict of interest:

The authors declare that there was no conflict of interest regarding the publication of manuscript.

Statement of Informed Consent:

Informed consent was taken from the patient.

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