

Case study

Pakshaghata and its management through Panchakarma - A case study

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ABSTRACT:

A 57 years old female Patient with K/C/O of HTN and *Vamasharirardhe Karmalpata, Vaka-aspashtata, Mukhardha Vakrata, Lalastrava* Since one an half month, was Admitted in our institute. Ayurvedic Procedures (*Panchakarma*) i.e. *Abhyanga, Matrabasti & Shastikashalipinda Sweda* with internal *Ayurvedic Aushadhi* and Physiotherapy was given to the patient. The patient was admitted in our institute for near about two months and showed significant improvement in gradation of Power and gait. In this study an attempt has been made to describe all procedures conducted in the hospital. Scientific effect of *Panchkarma* treatment, *shaman aushadhi* and physiotherapy has been explained in this case.

KEY WORDS: *Pakshaghat, Panchakarma, Matrabasti, Shastika-shali-pindasweda.*

INTRODUCTION:

Pakshaghat has been enlisted amongst the 80 types of *Nanatmajavatavyadhis*^[1] by all *Brihatatrayi* i.e. *Acharya Charaka, Sushruta, Vagbhata*. The pathological phenomenon of vata playing a vital role in the manifestation of *Pakshaghat is Shuddhavata prakopa, Anyadoshassamsrishta vata prakopa & Dhatushayavata prakopa*.^[2] Due to the resemblance of signs and symptoms, it can be correlated with Hemiplegia in Modern science. Hemiplegic can be caused by a wide spectrum of this process like hypertensive encephalopathy, Vascular Disorders, infective disorders of brain tissue, Tumors or abscess, trauma, internal artery occlusion, etc. The Prevalence of Completed stroke in India ranges from 40-270 per 100000 Population.^[3]

In such conditions, the patient may get depressed psychologically due to immobility. The prognosis of the patient depends upon the condition in which he/she reaches the hospital. In Ayurveda also good prognosis is seen in acute conditions i.e. as early as the patient comes recovery is better. Here an attempt is made to show the Effect of Combined Therapy of *Basti, Snehana & Swedana, shaman* and physiotherapy.

Case Report:

A 57-year-old female patient came to our institute with complaints of

- *Daurbalyata*
- *Karmalpata*
- *Shoola in Both Upper and Lower Limb of left side including Face, Unable to Walk*
- *Unable to Speak*
- *Deviation of mouth*
- *Saliva Secretion since one an half month.*

At the time of admission, the patient was in conscious condition & her vital functions were normal.

Past History

- *H/o Vaginal irritation before 2 years.*
- *K/C/O - HTN -since one an half month.*
- *Not/K/C/O -DM/Allergy/Typhoid/Malaria/Dengue/TB.*
- *F/H-Mother-Asthma*
- *Brother-DM*
- *Hysterectomy (surgical History)*
- *No H/o-Any Trauma or Accidental Injury.*
- *O/H - G2A0FTND*

On Examination:

- General Condition-Moderate.
- Afebrile.
- Pulse rate-84/min.
- BP-150/60mm of Hg.
- Weight-58kg.
- Mala & Mutra-Regular.
- Nidra-Disturbed.
- Kshudha-Samyaka.
- Jiwha-Niram.

Table No. 1: Showing C. N. S. Examination

Sr. No	Exam	Left Extremity	
		Upper	Lower
01		Present	Present
02	Sensation	Present	Present
03	Power	0	0
04	Tone	Hypo	Hypo
05	Reflexes	Bicep- Exaggerated Tricep- Exaggerated Supinator -No	Knee - Exaggerated Ankle- Exaggerated Planter- Positive
06	Involuntary movement	No	No
07	Muscle movement coordination	No	No

Table No. 2: Showing Intervention during treatment

Day	Shaman	Shodhan
1 st day	*Pathyadi guggul 2-2-2 *Chandraprabhavati 2-2-2 *Rasona-Ksheerapaka50ml BD *Dashamoola Kashaya 80ml BD *Ekangvir rasa 1-0-1 *Physiotherapy	1. <i>Abhyanga</i> with <i>Sahacharaditaila</i> .f/b <i>NadiSwedana Karma</i> . 2. <i>Matra Basti</i> with <i>Sahacharadi taila</i> 30ml.
3 rd day	Same	Same * <i>Matra Basti</i> with <i>SahacharadiTaila</i> 40ml
4 th day	Same * <i>Sutashekhara Rasa</i> 2-2-2(newly added)	Same
5 th day	Same	Same * <i>ShashtikaShaliPindaSweda</i> .
60 th day	*Pathyadi guggul 2-2-2 *Chandraprabhavati 2-2-2 *Rasona-Ksheerapaka50ml BD *Dashamoola Kashaya 80ml BD *Ekangvir rasa 1-0-2 *Physiotherapy * <i>Sutashekhara Rasa</i> 2-2-2	Procedure-1. <i>Abhyanga</i> with <i>Sahacharaditaila</i> f/b <i>NadiSwedana Karma</i> . 2. <i>Matra Basti</i> with <i>Sahacharadi taila</i> 40ml. * <i>ShashtikaShaliPindaSweda</i> .

Table No. 3: Showing Muscle power

Sr. No.	Before treatment		After treatment	
	Extremities	Grades	Extremities	Grades
1	Right U/L	+5- Normal	Right U/L	+5- Normal
2	Right L/L	+5- Normal	Right L/L	+5- Normal
3	Left U/L	0 – No Power	Left U/L -*Movement Against Gravity & Some Resistance	+4
4	Left L/L	0 – No Power	Left U/L -*Movement Against Gravity & Some Resistance	+4

Table No. 4: Showing Assessment of the Patient

SN.	Signs & Symptoms	Before Treatment	After Treatment
1.	Facial Deviation	Yes	No
2.	Shoulder Elevation	Yes	No
3.	Sensory Aphasia	Yes	No
4.	Trunk Balance	No	Yes
5.	Salivary Secretion	Yes	No
6.	Elbow Flexion-Extension	No	Yes
7.	Forearm Supination-Pronation	No	Yes
8.	Wrist Flexion-Extension	No	Yes
9.	Grip Power	No	Yes
10.	Holding of Objects When no initiation	No	Yes
11.	Grasp of object	No	Yes
12.	Release of Object	No	Yes
13.	Catching of Object	No	Yes
14.	Throwing of Object	No	Yes
15.	Tying the Knot	No	Yes
16.	Clothing	No	Yes
17.	Feeding with hand	No	Yes
18.	Holding & Drinking Glass of Water	No	Yes
19.	Standing Without Support	No	Yes
20.	Standing Balance	No	Yes
21.	Squatting	No	Yes
22.	Getting up from Squatting Position	No	Yes
23.	Climbing Stairs	No	Yes
24.	Toilet Activity	No	Yes
25.	Bathing	No	Yes

DISCUSSION:

Pakshaghat is one of the most important *Vata-vyadhi*. In *vata-vyadhisamanya Chikitsaupakrama Snehana, Svedana, Virechana, Basti*, etc have been described. In *Pakshaghat Chikitsa Svedana, snehana, Virechanais* advised. Here as per patient's condition below treatment was selected.

1. Abhyanga- BahyaSneha therapy helps to move all stagnant doshas from shakha i.e. Tvaka-rakta dhatu, which helps to increase the strength of muscles, pacifies vitiated Vayu, increases tolerance power of the body for Exercise.^[4]
2. Shashti-shalikapindasweda- one of the types of Sagnisankarsweda^[5], main ingredient is milk, balamoola, shali with the help of contents, it increases muscle tone and power, removes srotorodha which ultimately increases sneha absorption.
3. Matra-basti- here, sahacharaditailam is used for Basti. The quantity of sneha was decided as per retention time of sneha, it was 30ml 1st later 40ml till completion of treatment. Here Sahacharadisneha helps to remove srotorodha, pacify Pakvashayashthavayu which controls all remaining 5 subtypes of vayu, vyanavayu is responsible for Karma, matrabasti can be given without any side-effects.^[6]

4. Rasona Kshirapaka-With snigdha-guna, madhuravipakarasona has bhrihana, balya, medhya, Rasayan properties.^[7] With Kshirpaka more beneficial properties of rasona get added to Kshira also get readily absorbed in the body.
5. Dashmoola kwatha-Charakacharya has mentioned these drugs in Shothahara Mahakashay.^[8] It helps to reduce edema in the Brain area, will help to normalize the functions of the same.
6. Sutashekhara rasa- with its main contents i.e. Kajjali, suvarna, Tamrabhasma, dhatura^[9], etc it helps to remove srotorodha by Amapachan. One of the best Tridosh-shamakdravya. Also, it helps to the potency of other drugs used along with it. It is said to be Sarvarogahara.
7. Ekangavir Rasa- The main contents of this drug are Kajjali, Kant aloha, Vanga, Naga with Bhavana dravya Dashmoola Kwatha. Mainly used in Hemorrhagic condition of Stroke. Contraindicated in Pitta Prakruti Patients.
8. Pathyadiguggulu- Triphala, Guggulu are the main contents of these drugs, with other Prakshepdavyas it helps to increase the strength of the patient like an Elephant.^[11] This bala is important in Pakshaghat patients.

CONCLUSION:

Here current study shows that if *YuktiPramanis* used, proper *dosha-dushyavichara*, duly arranged line of treatment Ayurveda gives excellent results in *Pakshaghat* Patient. Here a fixline of treatment can not be given to the patient as it changes according to the *Dosha-avstha*.

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