



**A case study of Pakshaghat with the management of Ayurvedic Shaman and Shodhan treatment.**



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## **ABSTRACT:**

In the present era due to speeder change of the civilization, human habits and life style continuously changing without any consideration of their benefits or harms Adaptation of new diet, movement with fast moving vehicles, maintenance of wrong postures, avoidance or over-indulgence of exercise, suppression of natural urges, anxiety strain etc. of the present life are becoming responsible for increasing incidence of *Vatavyadhi* like *Pakshaghat* (Hemiplegia.) These diseases mostly treated by allopathic medicines (high dose of corticosteroids) which are having considerable side effects and could not be used for long term basis.

A 55 year old female patient showing the symptoms of Right side weakness Inability to walk With this presentation patient was admitted in our institute and ayurvedic treatment of, *sarvang snehan swedan, basti*, and internal medication with physiotherapy was given. Patient is in our institute for 15 days showed substantial improvement in subjective parameter. The recovery in the patient case was noticeable

**KEYWORD:** Pakshaghat, Paralysis, Vasantkusumakar Ras, Matra Basti, Sahachar oil

## INTRODUCTION:

Pakshaghata, is a vatavyadhi. It can be correlated to the biomedical cerebrovascular condition called 'stroke'. The lakshanas include, ruja, vakstambha, etc. Its types are kaphanubandha and pittanubandha. Even though pakshaghata is a vata vyadhi, and mentioned in the nanatmaja vataja vikaras of charaka, it is not a shuddha vataja condition. There is samsarga of Pitta and kapha, clearly mentioned by Susruta and Madhava nidana. In all the above explanations it is clear that raktadushti leading to vata prakopa is the underlying cause of the disease. The management of pakshaghata being reported in this paper is a case of ischemic stroke.

In Ayurveda there are specific treatments for paralysis. There are two types of treatment. One is Sodhan therapy and second is Shaman therapy. Shodan means purification of the body by eliminating morbid Doshas and Dushyas from body through Panchkarma, and main principal of Shaman therapy is to normalize and maintain the equilibrium of all their Doshas. After the Shodhan therapy comete Shaman chikitsa is indicated for pacifying remnant Doshas. In the present stage of socio-economic life the trend of disease management is to find

out more effective, easily available and quickly responding remedies, which do not have any ill effect on health and longevity of the patient.

### Aim and objectives

Efficacy of internal Ayurvedic medicines and Panchkarma in the management of patient suffering from Pakshaghata admitted in the Ayurvedic hospital.

### Case Report

Basic information of patient

Name	XYZ
Age	55 years
Sex	Female
Religion	Hindu
Socio –Economic status	–Lower middle class

**Pradhan Vednavishesh (Chief complaints since 7 days)**

1. Right side weakness
2. Difficulty in siting
4. Inability to walk
5. Loss of power in right extrimities

### Vartamanvyadhivritta

#### (History of present illness)

15 days before patient was all right. But after that she develops above symptoms suddenly .She was admitted in GMC, Nagpur for 7 days. but there is no relief in above symptoms. So for further treatment she was shifted to Ayurvedic hospital for Ayurvedic management.

**Purvavyadhivritta (History of past illness)**

K/C/O D.M. Since 8 yrs

K/C/O HTN since 5 yrs

**Kulajvritta (Family history)**

NAD

**Vayaktikvrittanata (Personal History)**

Aaharja – Patient have normal and healthy food habits.

Viharaja - Patient works in the farm.

Patient has moderate exertion.

Patient does physical exercise daily.

Vyasan - No addiction

**General Examination**

G.C. - Fair

Afebrile

Pulse - 74 / min

B.P. 150/ 100 mm hg

S/E –

RS- Chest Clear,AE=BE

CVS- S<sub>1</sub>S<sub>2</sub> normal

CNS-Conscious,Oriented

P/A Soft,Non tendor

**AshtavidhaPariksha**

1 Nadi - 80 / min

2 Mutra- Avishesh

3 Mala - Baddhata

4 Jivha- Saam

5 Shabda- Spasth

6 Sparsha - Ushna

7 Druk - Normal

8 Aakriti - Madhyam

**Examinations –**

1) Muscle power grade -

U.E. L.E.

Right 4/5 4/5

Left 5/5 5/5

**2) Reflexes-**

	Supinator jerk	Biceps jerk	Triceps jerk	knee jerk	Ankle jerk	Plantar jerk
Right	+	+	-	+++	+	+++
Left	++	++	++	++	++	++

**Treatment Protocol-**

Snehan – Bala tail

Total Duration- 30 days

Swedan – Naadi Swedan

Basti - Matra Basti (Sahacharadi tail  
60 ml)

### Internal medicines

- 1 Vaathara Samanya 5gm BD
- 2 Tapyadi Louha 125 mg  
+  
Aamalaki churna 1/2 gm } BD
- 3 Vasantkusumakar ras 10 gm  
+  
Guduchi Satva 250 mg } QID (sukshma)
- 4 Triphala churna 2gm  
+  
Nishottar churna ½ gm } H.S.

### Result and Discussion -

Response to the treatment was recorded and therapeutic effects were

evaluated by symptomatic relief of the patient. It was observed that the patient clinical symptoms were reduced gradually during treatment period

Sr.No.	Before treatment	After treatment
1	Inable to walk alone	Patient can walk alone.
2	Cannot hold objects by right hand.	. Can hold objects by right hand
3	Cannot sit without help.	Patient can sit without help.
4	MPG Rt side - 4/5 4/5	. MPG Rt side- 5/5 4/5

### Conclusion

The case report shows that combined Ayurvedic treatment is potent and effective in the management of Pakshaghat. There were no adverse effects found in combined Ayurvedic treatment.

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