

National Journal of Research in Ayurved Science

The efficacy of *narayan taila parishek* in the management of muscle strain- a single case study.

Borude Priyanka^{*1}, Pathak Santosh², Sonambekar Vinay³, Dixit Pankaj⁴

1. P. G. Scholar

2. Assistant Professor, ☎ :- 9405369727, ✉:- drsantoshsp@gmail.com

3. Professor & HOD, ☎ :- 9822624890 , ✉:- sonambekar.chinmay@gmail.com

4. Associate Professor ☎ :- 9011045371, ✉:- pankajdixitofficial@gmail.com

Shalya Tantra Dept., A.S.S. Ayurved Mahavidyalaya,

Panchavati Nashik, Maharashtra, India 422003

*Corresponding author: ☎ :- 8097482577, ✉:- priyaborude2@gmail.com.

ABSTRACT-

The competitive and hectic lifestyle increases the incidence of muscular disease. Muscle strain usually causes acute pain and occurs during strenuous activity. In the lower leg strain there is sharp pain, tenderness, restricted planter flexion and patient is unable to walk. The line of treatment is PRICE i.e. Protection, Rest, Ice application, Compression, Elevation.

In *chikitsa sthana* Acharya Sushruta has described *Asthibhagna chikitsa* in which the *pratan abhigata* is explained. This condition closely resembles with muscular strain. In the treatment of *patana abhigata* he advised to apply *sheeta pradeha* or *Parisheka* at the site. Vitiating *Vata* starts destruction in joints by producing pain and inflammation in joints. In *Ayurveda*, it is known as *Shoola*. *Shoola* can be at any region, but it is caused due to the aggravation of the

Vata Dhosha.Narayan Taila is good *Vatashamaka*.

A 30-year-old female patient diagnosed with left lower leg muscle strain was treated with *Parisheka*. This procedure was performed daily for 20 minutes followed by kept soaked gauze with Narayana Taila and simple roller bandage for 7 days. Complaints like pain, stiffness mild swelling, and Range of motion was assessed before treatment and after treatment. At the site of strain there is accumulation of *vatadi doshas* and due to this *viated vata dosha* Pain gets aggregated. *Narayan Taila* has *Vatashamaka* properties and thus *Narayana Taila Parisheka* reduces pain, stiffness, and improved range of motion.

KEYWORDS: Muscle Strain, *Narayana Taila*, *Parisheka*.

INTRODUCTION-

Muscle Strain means stretching of the muscle or its tendinous attachment¹. A muscle strain occurs when muscle fibers cannot cope with the demands placed on them by exercise overload and leads to tearing of the fibers. It is a contraction-induced injury in which muscle fibers tear due to extensive mechanical stress. The lower leg is a vital biomechanical component during

locomotion. The calf complex is an essential component during locomotive activities and weight-bearing and injuries to this area is very common. Muscle strains commonly occur in the medial head of the gastrocnemius or close to the musculotendinous junction. In the lower leg strain there is sharp pain, tenderness at the touch point, restricted planter flexion and patient is unable to walk.

According to symptoms it divided in to 3 grades, Grade 1-Sharp pain at the time of activity or after, may have a feeling of tightness, May be able to continue activity without pain or with mild discomfort, Post activity tightness. Grade 2- Sharp pain at the time of activity in calf, Unable to continue activity, Significant pain with walking afterwards. May have swelling in muscle, Mild to moderate bruising may be present Pain with active plantar flexion Pain and weakness with resisted plantar flexion Loss of dorsiflexion .Grade 3- Severe and immediate pain in the calf, often at musculotendinous junction Unable to continue with activity ,May present with considerable bruising and swelling within hours of injury Inability to contract calf muscle May have palpable defect. On palpation swelling, thickening, tenderness, defects and masses if present. conservative management includes

PRICE, injection of local anesthetic and cortisone in and around the area .Gentle passive stretching exercises without pain to maintain range of motion in the plantar flexors, compressive wrap ,in the latter stages, once inflammation has resolved, applying superficial heat simultaneously with a low load static stretch improves the flexibility of muscles². *Acharya Sushruta* in the context of *Asthi-Bhagna* has mentioned “*Patanabhighatadwa*” which means *Patana*, *Abhighata* or both are the main causes for strain, where he has highlighted the application of *Sheeta Pradeha* and *Parisheka* to reduce *Vedana* and *Shopha*³.

पतनादभिघाताद्वाशूनमङ्गयदक्षतम्।
शीतान्प्रदेहान्सेकांश्चभिषक्तस्यावचारयेत्॥४७॥
सु.चि.३/४७.

At the site of strain there is accumulation of *vatadi dosha*. This *viated vata dosha* aggravated the *pain*. *Acharya charaka* has mentioned that *swedana* therapy is the best treatment for *viated vata* and *kapha* dominated diseases⁴. *Parisheka* is one type of *swedan karma*. Pouring of hot *kwatha*, *Taila*, *Ghrita*, *Dugdha*, *Kanji*, *Gomutra*, liquids over the body from the specific height is known as *Parisheka sweda*. so in muscle strain *Narayana taila*⁵ *Parisheka* used for this study

CASE HISTORY-

A 30 year old female patient suffering from left calf pain since 2 months. Patient reported history of sudden jerk at left foot 2 months before. presenting with the complaints of pain at left calf region, mild swelling, tenderness.

N/H/O- Diabetics, Hypertention, Bronchial Asthma, or any major illness.

S/H- not any,

Family history: Not significant

LOCAL EXAMINATION-

1. Patient has difficulty in Walking.
2. Mild swelling at left leg upper calf region.
3. No E/O of redness or bruising.
4. Tenderness on superficial palpation.
5. Painful dorsiflexion (Angle above 15°)
6. Mild Restricted Planter Flexion. (Angle above 15°)

ON EXAMINATION:

1. Pulse ; 68/min
2. Bp:-130/90 mm hg
3. Temperature;- afebrile
4. Systemic examination: NAD
5. Respiratory examination: NAD
6. Per abdomen: NAD.

Pathological investigations: -

X- ray of Left knee joint in standing view: NAD.

Blood report:

Hb- 12.4gms%

BSL Random-112mgs%

Platelet count – 1.9 lakhs cells/cumm

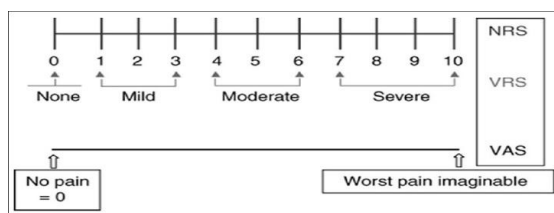
ASSESSMENT CRITERIA: -

1) Pain – Visual analogue scale

VAS is a simple, objective and reproducible method of quantifying pain for VAS.

The patients were asked to mark the line to show how intense degree of pain is.

Sr. no	V A Score	Grade
1	0	0
2	1-3	1
3	4-6	2
4	7-10	3



2. Tenderness

Grade	Criteria
0	No tenderness
1	Patient winces on deep palpation
2	Patient winces on superficial palpation
3	Patient does not allow to touch the part

3. swelling-

Grade	Criteria
0	No swelling
1	Mild swelling
2	Moderate swelling
3	Marked swelling

4) Dorsiflexion

Grade	Criteria
0	Angle of 25°
1	Angle above 15°
2	Angle above 5°

5) Plantarflexion

Grade	Criteria
0	Angle of 35°
1	Angle above 25°
2	Angle above 15°
3	Angle above 5°

METHODOLOGY-

1. *Narayana Taila* Parishekais the method of pouring the *Taila* on affected part from 10 inch distance for 20 minute. [Fig-1]
2. This *Parisheka* was for 7 days followed by kept soaked gauze

with Narayana Taila and simple roller bandaging.[Fig-2].

3. Uniform *Parisheka* was done daily about 20 minutes in the morning.

OBSERVATION AND RESULT:

Sr. no	Symptoms	Before treatment	After treatment
	Pain	2	0
	Tenderness	2	0
	Swelling	1	0
	Dorsiflexion	1	0
	Planter flexion	2	1

It is observed that Narayana Taila *Parisheka* was very beneficial to reduce the Pain, tenderness, swelling and improved Range of motion.

DISCUSSION-

In the muscular strain pain is the main symptoms which due to stitching of the muscle. *Parisheka* is type of swedana. According to Acharya Charaka samyaka sweda lakshna swedana reduces Shoola, sthambha and Gaurav⁶.

शीतशूलव्युपरमे स्तम्भगौरवनिग्रहे
सञ्जाते मार्दवे स्वेदे स्वेदनाद्विरतिर्माता॥१३॥

च. सु. १४/१३.

At the site of strain there is accumulation of *vata dosha* and due to this *viated vata dosha* pain gets aggregated. *Taila* is the best medicine for *viated vata*. *Narayana Taila* is good *Vatashamakap* properties, so *Narayan Taila* was used For *Parisheka* and after *Parisheka* Bandaging done which helps in reduce the Pain and Swelling. Local *Parisheka* of *Narayana Taila* at the site of Muscle strain increase the absorption of *Taila* reaching to particular site. *Ushna guna* of sweda dilates the capillaries thus increase the circulation. Increased circulation enhances the elimination of waste products and more absorption of *Sneha*. It also stimulate muscle and nerves which promotes its renovation. Heat administration by swedana may produce hypno- analgesic effect by diverted stimuli⁷.

Parisheka produce vasodilatation. Higher temperature of the blood stimulates thermo receptors that send nerve impulses to the pre optic area of the brain which in turn stimulate the heat losing center and inhibits the heat promoting center. Nerve impulses from the heat losing center cause dilatation of blood vessels in the skin so the excess heat is lost to the environment via radiation and conduction. As a result of vasodilatation there is an increased blood flow through

the area so that the necessary oxygen and nutritive materials are supplied, and waste products are removed⁷.

So *Narayana Taila Parisheka* in Muscle strain Reduce the Pain, Tenderness, swelling, and improves the Range of Motion.

CONCLUSION-

The present single case study shows that the local *Parisheka* of *Narayana Taila* is effective on Muscle strain. Which effectively reduce the Pain, Tenderness, swelling and improves the range of motion

further investigation is required to identify the effect of *Parisheka* of *Narayana Taila* in the Management of the Muscle Strain and also study its mechanism of action in larger sample size.

Acknowledgements-

Dr. Pushalata Ingale, HOD of Department of Shalakya Tantra. A.S.S Ayurved college, Nashik, Minal Avhad Intern at Shalakya Tantra Department.

REFERENCE-

1. Dr. J. Maheshwari , Essential Orthopaedics, Mehata publication ,9th Edition 2011, Page no-4.

2. https://www.physio-pedia.com/Calf_Strain
3. Dr.KavirajAmbikadattaShatri , Susruta Samhita , Chaukhamba SanskutSansthana , Varanasi, Reprint 2014, Volume 1, Chikitsa sthana, Chapter 3, Sholk 47,Page no-31.
4. Dr. Brahmanand Tripathi, Charak Samhita, Chaukhamba Surbharti Prakashan, Varanasi. Reprint-2011, Volume -1, sutra sthana, Chapter 14, Sholk 3., Page no-.286
5. Pandit Sarangadharacarya , Sarangadhara-Samhita, Chaukhamba Surbharti PrakashanaVaranasi,Reprint 2007, Madhyamkhand,Chapter 9, Sholk 101,102,103,104,105,106,107,108, 109,110,page no -233.
6. Dr. Brahmanand Tripathi, Charak Samhita, Chaukhamba Surbharti Prakashan, Varanasi. Reprint-2011, Volume -1, sutra sthana, Chapter 14, Sholk 13., Page no-288.
7. Dr.Vasant Patil, Principles and Practice of Panchakarma, Chaukhamba Publications,New Delhi, Reprint-2017, Swedana Karma, Page no-223, 247.

Figures-



Figure 1-Narayana Taila Parisheka.



Figure 2-Bandaging after Parisheka.

Conflict of Interest: Non

Article Type: Case study

Source of funding: Nil

Cite this article:

*The efficacy of narayan taila parishek in the management of muscle strain
- a single case study.*

Borude Priyanka, Pathak Santosh, Sonambekar Vinay, Pankaj Dixit

Ayurlog: National Journal of Research in Ayurved Science- 2019; (7) (4): 1-7