



### Effect of *Majjabasti* in the management of *Pakshaghata* w. s. r. to *Hemiplegia* due to infarct in a young patient: a case study.

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#### Abstract:

In *hemiplegia*, paralysis of one sided limb occurs. In the causative factors, ischaemia or bleeding in the brain is the major cause of this disease and the motor functions are lost of the corresponding limbs. Here we report the case of *hemiplegia* with the acute history of left *hemiplegia* in a young individual which is treated by the *ayurvedic* procedures and treatment. *Hemiplegia* is a paralysis caused muscle weakness affecting left hand and left leg. In *ayurvedic* text this can be compared with *Pakshaghata* or *Ardita* (*Charak*). It is one of the 80 *nanatmaj vaatvyadhi* according to *ayurveda*. According to *ayurveda* when *vata* vitiates it dries the *seera* and *snayu* of limbs of affected body parts. According to *Ayurveda*, *dushti of pran vaayu* is the special cause of *Pakshaghata*. The *vaat vardhak ahar vihar*<sup>1,2</sup> and trauma are the causes of *Pakshaghata*.

**Keywords:** *Hemiplegia*, *Ardita*, *Pakshawadha*, *Majjabasti*.

#### Introduction:

##### A Case Report:

A 30 years male patient came to OPD of *Kayachikitsa* Department of Vasantdada Patil Ayurvedic Medical College Hospital, Sangli (O.P.D./ I.P.D.No.5395/1048/2018) with chief complaints of-

- 1) *Vama hast chimachimayan* (Tingling numbness of left limbs)
- 2) *Vama Shareera Ardha Karma Alpata* (weakness of left limbs)
- 3) *Vama hastpada jadatva* (heaviness in left limbs)
- 4) *Vak aspashta* (Speech altered)

Patient was having above complaints since 12 days

- No history of hypertension or diabetes.
- No any history of major illness.
- No any maternal or paternal history of any diseases.
- No any history of addiction.

### History of Personal Illness:-

The patient was normal regular working farmer before 12 days. Then in August 2018 patient was having drowsiness, tingling sensation and heaviness in left hand and leg then suddenly he suffered from above complaints. Then patient was admitted in private hospital, he was advised and referred to higher centre in ICU for tertiary management and investigations.

After admission all the needful examinations are carried out like CT brain plain, 2-D Echocardiography, MRI stroke study, he was diagnosed as Right MCA territory large acute infarct with early hemorrhagic transformation<sup>(4,5)</sup>.

When the patient is admitted in he was bed ridden and unable to wake up and sit down. Then patient was discharged after an emergency management at hospital for 10 days. He got no relief so he came to Vasantdada Patil Ayurvedic Medical College, Sangli for the treatment. He was admitted for the same.

### Rugna parikshan:-

- Nadi(pulse) - 80/min
- Mala ( stool) - Malavashtambha (constipation)
- Mutra(urine) -mutrakshaya (oliguria)
- Jivha(tounge) – alpa saam
- Netra(eyes) - shwetabh
- Shabd(speech)- Atikshin
- Sparsh(skin) -Prakrut (normal)
- Akriti - Madhyam
- Bala - Uttam
- Raktachaap (B.P) - 140/90 mm of Hg.

O/E DTR were as follows:

|                      |                  |                 |
|----------------------|------------------|-----------------|
| Deep tendon reflexes | 26-11-18         |                 |
| Biceps               | Right            | Normal          |
| Left                 | Exaggerated      |                 |
| Triceps              | Right            | Normal          |
| Left                 | Exaggerated      |                 |
| Brachio-radialis     | Right            | Brisk           |
| Left                 | Brisk            |                 |
| Quadriceps           | Right            | Very Brisk      |
| Left                 | Exaggerated      |                 |
| Achilles             | Right            | Very Brisk      |
| Left                 | Exaggerated      |                 |
| Patella              | Right            | Very Brisk      |
| Left                 | Exaggerated      |                 |
| Ankle                | Right            | Very Brisk      |
| Muscle Power         | Grade            |                 |
|                      | Before Treatment | After Treatment |
| Left Arm             | 0                | 5               |
| Right Arm            | 5                | 5               |
| Left Leg             | 0                | 4               |
| Right Leg            | 5                | 5               |

### Aims and Objectives:

To study the effect *Dashmooladi Majjasneha Prayoga in Vata Vyadhi.*

To see the effect of *Majjabasti* in the management of *Pakshaghata* in patient with *hemiplegia* due to cerebral infarct.

### Material and Methods:

Centre of the study: Vasantdada Patil Ayurvedic Medical College Hospital Sangli, Maharashtra.

### Material

*Majjabasti* preparation:As per textual reference<sup>(3)</sup> from *Charak Samhita Chikitsa Sthana VaatVadhyi Chikitsa Adhaya.*

The bones of goat in 250 grams quantity broken into bits done from the local shop, rinsed and washed thoroughly, cooked in 400 ml of water and *Asthimajja Sneha* 100 ml obtained. The unctuous fluid obtained again cooked in the decoction of the 400 ml dashamoola<sup>(6)</sup> to remain 100 ml only. Daily in this quantity of *Majjabasti* was prepared freshly and *Basti* was given by procedure by giving sarvaga snehana *tila taila* application and whole body *swedana* to the patient for seven days. *Pratyagama Kala* is observed.

Patient is observed for 15 days for his motor functions specially limb movements. Patient is given with physiotherapy.

#### Observation:

*Hetu :-*

- 1) *Aahar – Atishram* (heavy work in the field as he is a farmer)
- *Ruksha Tikshna Vaat vardhak aahar – Siragranthi and abhighata* (Cerebral hemorrhage and infarct)

*Samprapti Ghatak:-*

1. *Dosha – Vaat*
2. *Dushya – Asthi, Majja*
3. *Strotas - Asthivaha strotas, Mjjavaha strotas*

4. *Udbhavsthan – Shira*
5. *Adhishtan – Mansa Majja*
6. *Vyaktisthan- Shakha*

**Hetu :-**

- 1) *Aahar – Atishram* (heavy work)
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**Samprapti Ghatak:-**

1. *Dosha – Vaat*
2. *Dushya – Asthi, Majja*
3. *Strotas - Asthivaha strotas, Mjjavaha strotas*
4. *Udbhavsthan – Manya*
5. *Adhishtan – Mansa, Majja.*
6. *Vyaktisthan- Shakha*

**Result:**

After acute management, patient was admitted in the *Ayurveda* hospital, he was bed ridden and unable to wake up and sit down also. During treatment of the regimen of *Majjabasti*, motor functions of the patient improved, movements and muscle power increased. One week after the treatment, patient was able to walk, sit properly and do day today activities without any support.

**Discussion:**

| Sr. No. | Dravya                    | Mode of action  |
|---------|---------------------------|---|
| 1       | <i>Dashamoola Kwatha</i>  | <i>Vataghna Tridoshaghna , Rasayan. Dhatupariposhak.</i>  |
| 2       | <i>Tila Taila Snehana</i> | <i>Oil is the best vat shamak , contains vat shamak drugs.</i>  |
|         | <i>Nadi Swedana</i>       | <i>Spasticity of the muscle improved.</i>   |
| 3       | <i>Majja Basti</i>        | <i>This balances vaat dosha, for vaatpradhan vyadhi, Rasayana , Balapushtikaram, kshinamajja and kshin shukra oja pushtikaram. internal administration and unctuous enema, the morbid vata affecting the vessels, joints, bones and in kushtha gets quickly cured. For those suffering from loss of marrow as well as those who suffer from loss of semen and vital essence, this imparts strength and robustness and acts like nectar<sup>(7)</sup>.</i> |
| 4       | <i>Physiotherapy</i>      | <i>Gives strength to the muscles, and improvement of circulation.</i>   |

### Conclusions:

On the basis of above discussion, it can be concluded that Ayurvedic treatment can give significant effect on disease like *hemiplegia* (*Pakshaghata*). In *hemiplegia* there is the vitiated *vaat dosha* is the main cause and all the drugs that are given in *Majjabasti* acts as *vaat shamak*. And *Majjabasti* had very important role in this *samprapti bhanga*. Bone marrow in the *basti* acts as nerve tonic which improves cerebral function. Hence, it proved that the *ayurvedic* formulations in *panchakarma* like *majjabasti* are useful in disease like cerebrovascular accidents.

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