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Research Article

A COMPARATIVE EVALUATION OF *MAHABALA OIL MATRA BASTI* VERSUS *MAHANARYANA OIL MATRA BASTI* IN THE IMPROVEMENT IN ASSESSMENT SCALE IN MANAGEMENT OF *GRIDHRASI* (SCIATICA): A STUDY PROTOCOL

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ABSTRACT

In Ayurveda*, Basti* (medicated enema) is regarded as a cornerstone of *Panchakarma*, often described as "*Ardha Chikitsa*" due to its extensive therapeutic reach. *Matra Basti* serves as a potent intervention for neurological disorders, neuromuscular conditions, and nutritional deficiencies. It is particularly effective in managing *Gridhrasi* (sciatica)- a condition characterized by radiating pain from the lumbar region to the lower extremities. **Aim:** To compare the efficacy of *Mahabala Taila Matrabasti* (a form of unctuous enema) with *Mahanarayana Taila Matrabasti* for the management of *Gridhrasi* (sciatica). **Materials and Methods:** A randomised controlled clinical trial will be conducted at Chaudhary Brahm Prakash Ayurved Charak Sansthan, Delhi, located in Khera Dabar, District West Delhi, Delhi, India, from March 2026 to March 2027. In this study, a total of 64 participants will be randomly assigned to two groups, each consisting of 32 patients. Participants in group A will receive a *Mahabala Taila Matrabasti* (a type of unctuous enema) at a dosage of 72ml, administered rectally after meals for 15 days. Conversely, group-B will receive a *Mahanarayana Taila Matrabasti* (an unctuous enema) at the same dosage and administration schedule. Parameters will be assessed on the initial day, the 15th day and again after 30 days for follow-up purposes. **Results:** The study data will be rigorously analyzed to evaluate the therapeutic efficacy of *Mahabala Taila Matra Basti* and *Mahanarayana Taila Matra Basti* across all identified subgroups. A comprehensive comparative assessment will be performed, focusing on key clinical parameters to determine the relative effectiveness of each intervention. **Discussion and Conclusion:** By correlating clinical outcomes with statistical data, this study will establish definitive conclusions regarding the role of *Basti* therapy. The findings will contribute significantly to the understanding of *Gridhrasi* management and provide a framework for enhancing Ayurvedic treatment strategies for patients with lumbar radiculopathy.

INTRODUCTION

Gridhrasi is primarily identified as a *Vataj Nanatmaja Vyadhi*, indicating the profound influence of *Vata* in its pathogenesis[1]. *Gridhrasi* symptoms include *Ruka* (pain), *Toda* (pricking sensation), *Stambha* (stiffness), and *Muhur Spandana* (twitching), which typically radiate from the hip region (*Sphika*) down through the back (*Kati*, *Prishta*), thigh (*Uru*), knee (*Janu*), calf (*Jangha*), and foot (*Pada*)[2]. A notable cardinal sign mentioned by *Sushruta* and *Vagbhata* is *Sakthikshepa Nigraha* (restricted leg lifting). In certain instances, an association with *Kapha Dosha* (*Kaphanubandha*) can lead to additional symptoms such as *Tandra* (drowsiness), *Gaurava* (heaviness), and *Arochaka* (anorexia)[3].

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Low back pain (LBP) is a pervasive global health concern, affecting between 70% and 80% of individuals at some point in their lives. It impacts people across all age groups, particularly those in their middle age and working demographics. It is often correlated with *Gridhrasi* in Ayurvedic texts. This

debilitating musculoskeletal condition is characterized by pain, weakness, numbness, and other discomforts that radiate along the sciatic nerve pathway. As a common affliction in adults, sciatica incurs billions of dollars in healthcare costs and contributes to more lost workdays than almost any other illness. Current lifestyle trends, marked by sedentary habits, improper postures, and jerky movements during travel, contribute to increased pressure on the spine, thereby compromising the functional ability of the lower limbs.

In the management of *Gridhrasi*, classical texts by *Acharya Charaka* advocate for the use of *Basti*, *Agnikarma*, and *Siravyadha*[4]. *Basti*, in particular, stands out as the fundamental therapy for balancing *Vata*. It functions through both systemic detoxification (*Shodhana*) and symptomatic pacification (*Shamana*). Its versatility is reflected in its numerous types, which are selected based on the specific therapeutic objectives and ingredients used.

Need of the study: In Ayurvedic clinical practice, the selection of medicated oils is strictly tailored to the patient's constitution and the specific pathology. While both *Mahabala Taila* and *Mahanarayana Taila* are traditionally indicated for the management of *Gridhrasi* (sciatica) via the per-rectal route, there is a significant lack of comparative data regarding their relative therapeutic efficacy. This study is designed to address this clinical ambiguity by evaluating and comparing the effectiveness of these two formulations in alleviating sciatic symptoms. So here to fill the knowledge gap, I have selected this topic for my research work.

Review of Literature

A dual approach will be used for the literature review: first, a study of foundational Ayurvedic texts (*Brihattrayi*, *Laghutrayi*, and *Nighantus*) and modern textbooks; and second, a digital screening of indexed databases. Sources including PubMed, Google Scholar, and Scopus will be utilized to identify pertinent journals and research papers, ensuring the study is grounded in both traditional wisdom and current scientific evidence.

Drug Review

- *Mahabala Taila* (Reference*: Vangsena/ Vatvyadhi Rogadhikar/*241-244)[5]
- *Mahanarayana Taila* (Reference*: Bhaishajya Ratnavali/VatvyadhiRogadhikar/*325-336)[6]

Source of Data

Patients visiting Panchakarma OPD and IPD of Chaudhary Brahm Prakash Ayurved Charak Sansthan, Delhi and full filling the inclusion criteria shall be enrolled for the study after obtaining informed consent.

AIM AND OBJECTIVES

Aim

To compare the efficacy of *Mahabala Oil Matra Basti* and *Mahanarayana Oil Matra Basti* in the improvement in assessment scale in management of *Gridhrasi* (sciatica).

Objectives

1. To evaluate the efficacy of *Mahabala Oil Matra Basti* in the improvement in assessment scale in management of *Gridhrasi* (sciatica).
2. To evaluate the efficacy of *Mahanarayana Oil Matra Basti* in the improvement in assessment scale in management of *Gridhrasi* (sciatica).
3. To evaluate the comparative efficacy of *Mahabala Oil Matra Basti* with *Mahanarayana Oil Matra Basti* and in the improvement in assessment scale in management of *Gridhrasi* (sciatica).

Research Question

What is the comparative efficacy of *Mahabala Oil Matra Basti* versus *Mahanarayana Oil Matra Basti* in the improvement in assessment scale in management of *Gridhrasi* (sciatica)?

Hypothesis

Null Hypothesis (H0) *Mahabala Oil Matra Basti* has same efficacy as that of *Mahanarayana Oil Matra Basti* in the improvement in assessment scale in management of*Gridhrasi* (Sciatica).

Alternate Hypothesis (H1) *Mahabala Oil Matra Basti* is more effective than *Mahanarayana Oil Matra Basti* in the improvement in assessment scale in management of *Gridhrasi* (Sciatica).

Study Design

Type of trial: Interventional

Purpose: Treatment

Masking: Open label

Method of Randomization: Computer Generated randomization

Timing: Prospective

End point: Efficacy

No. of groups: 2 group

Subjects: 64 (32 in each group)

Allocation: Selection of patient according to criteria

Phase of trial: Phase 3

Duration of Trial: 12 months

Statistical tool: Appropriate tool will be applied

METHODOLOGY

The study will be conducted in Chaudhary Brahm Prakash Ayurved Charak Sansthan, Delhi, India.

Inclusion Criteria

1. Patient willing to participate in the study with written and informed consent.
2. Diagnosed cases of *Gridhrasi.*

3. Without barring any gender.
4. Age group: Between 20-60 years

Exclusion criteria

1. Pregnant and lactating women.
2. Congenital spine anomalies
3. Debilitated patients, patients affected with multiple wounds, and cases with vertebral fractures.
4. Persons for whom *Basti* treatment is contraindicated.

Withdrawal Criteria

1. Patient himself wants to withdraw from the clinical trial.
2. During the course of trial if any serious condition or any serious adverse effect occurs this requires treatment.

Plan of Study

Table 1: Groups

Group	Group A	Group B
Name of drug	*Mahabala Oil*	*Mahanarayana Oil*
Number of patients	32	32
Dose	72ml	72ml
Duration	15 days	15 days
Timing	After lunch	After lunch
Route of administration	Anal	Anal

Statistical Analysis

The observations and result will be analyzed and presented on the basis of respective and applicable statistical.

Time Duration till Follow up

In both the groups initially 15 days of treatment and follow up period 30th day.

Criteria For Assessment

Assessment of Cardinal Symptoms[7]

Table 2: *Ruka* (Pain)

S.No	Criteria	Score
1	No pain	0
2	Painful movement without limping	1
3	Painful movement with limping gait but without support	2
4	Painful, can walk only with support	3

Table 3: *Stambha* (Stiffness)

S.No	Criteria	Score
1	No stiffness	0
2	Mild stiffness for 5-10 minutes	1
3	Moderate stiffness for 10-60 minutes	2
4	Severe stiffness more than 1 hour	3

Table 4: *Toda* (Pricking sensation)

S.No	Criteria	Score
1	No pricking sensation	0
2	Mild pricking sensation	1
3	Moderate pricking sensation	2
4	Severe pricking sensation	3

Table 5: *Aruchi* (Anorexia)

S.No	Criteria	Score
1	Normal taste, feeling to eat food on time	0
2	*Anannabhilasha*- No feeling to take food even if hungry.	1
3	*Bhaktadvesha*- Irritability to touch, smell, seeing and listing about food.	2
4	*Abhaktachhanda*- Aversion to food because of anger, stress etc.	3

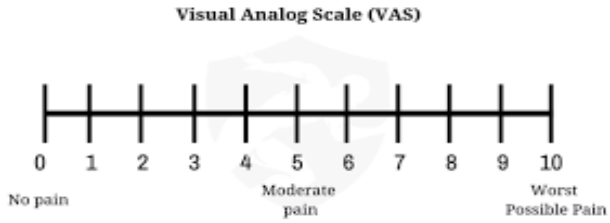
Table 6: *Tandra* (Drowsiness)

S.No	Criteria	Score
1	No drowsiness	0
2	Mild with no interference in daily activities	1
3	Moderate with manageable interference in daily activities	2
4	Severe with unmanageable interference in daily activities	3

Table 7: *Gaurava* (Heaviness)

S.No	Criteria	Score
1	No feeling of heaviness	0
2	Mild with no interference in daily activities	1
3	Moderate with manageable interference in daily activities	2
4	Severe with unmanageable interference in daily activities	3

VAS Scale: Pain gradings as following:



Distance on the scale (in mm)	Severity of pain
0 to 4	No pain
5 to 44	Mild pain
45 to 74	Moderate pain
75 to 100	Severe pain

Primary outcomes: Improvement in Assessment Scale of *Gridhrasi*

Data Management: Data coding will be done by principle investigators.

Statistical Methods: Unpaired and Paired t-test.

Consent: Subjects will be given detail information regarding their treatment in Hindi and English. Then written consent will be taken from patients before starting the study.

Approval: Approved by IEC, IRC of the concerned University. Trial is registered under Clinical Trials Registry – India[8]

Dissemination Policy: Will be in the form of paper publication and presentation.

Strengths: If proposed study will result in the positive outcome, then it will be established new mode of management for *Gridhrasi*.

RESULTS

Results of the treatment will be tabulated and analyzed statistically with relevant tests and level of significance will be reported.

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