

# Emergency Management of Pakshaghata-A Case Report

Dr Supriya BM<sup>1</sup>, Dr Swetha BM<sup>2</sup>, DR Sudeep Konkani<sup>3</sup>

<sup>1</sup>Assistant Professor, Dept of Swastavritta, Rashmi Institute of Ayurveda Medical Sciences and Research Center, Kudligi

<sup>2</sup>Post Graduate Scholar, Dept. of Kayachikitsa, Ayurveda Mahavidyalaya and Hospital, Hubballi, Karnataka, India

<sup>3</sup>Consultant Physician, Deva Dhanvantari Ayurvedalaya and Panchakarma centre, Dharwad

**Abstract—Background:** Pakshaghata is one among the Vataja Nanatmaja Vyadhi. Margavarana and Dhatukshaya are the main cause for the manifestation of Pakshaghata. Pakshaghata can be correlated with Stroke of modern science.

**Objectives:** To study the effectiveness of Panchakarma followed by Shamanoushadhi in the patient of Pakshaghata.

**Method:** An 83 years old male patient, had complaints of sudden loss of sensation of left side of the body, giddiness and slurred speech.

**Result:** Complete relief from all the symptoms within 8 days.

**Conclusion:** The collected data of this study suggested that Panchakarma followed by Shamanoushadhi Chikitsa provided noteworthy relief in Pakshaghata.

The treatment provided to be highly effective within short duration.

**Index Terms—**Pakshaghata, Stroke, Panchakarma.

## I. INTRODUCTION

Pakshaghata is considered under Vatavyadhi where due to Vatakara nidana aggravates Vata Dosha, Sthana samshraya in Siras, Causes vishoshana of the sira and snayu on Vama or Parshva Bhaga of the body and results in manifestation of symptoms like Chesta Nivritti on either side of the body, Ruja and Vaksthambaleading to Pakshaghata<sup>1</sup>. Margavarana and Dhatukshaya are the main cause for the manifestation of Pakshaghata.

Various treatment modalities have been employed for the treatment of Pakshaghata, such as Snehana, Swedana and Virechana.

Pakshaghata by its symptoms can be correlated with Stroke of modern science. A Stroke is a medical

emergency which is divided into 2 types based on the cause.

a) Ischemic Stroke: occurs when a blood clot blocks a blood vessel, preventing blood and oxygen from getting to a part of the brain.

b) Hemorrhagic Stroke: occurs when a blood vessel ruptures or hemorrhages, which then prevents blood from getting to part of the brain. According to the World Health Organization, 15 million people suffer stroke worldwide each year, of these, 5 million die and another 5 million are permanently disabled<sup>2</sup>. The prevalence of stroke in India is approximately 200 per 100000 people<sup>3</sup>

In the present case study, the treatment was done for Pakshaghata with Panchakarma and Shamanoushadhi where significant result is obtained within 8 days.

## II. CASE REPORT

An 83 years old male patient, consulted came with the complaints of sudden loss of sensation of left side of the body, associated with giddiness and slurred speech.

### PRADHANA VEDANA

Sudden loss of sensation of left side of the body.

### ANUBANDHA VEDANA

Sudden onset of giddiness and slurred speech.

### VYADHI VRUTTANTA

The patient was apparently normal then he suddenly developed loss of sensation of left side of the body, associated with giddiness and slurred speech

POORVA VYADHI VRUTTANTA  
 Not a k/c/o HTN/DM  
 KULA VRUTTANTA-Nothing Significant  
 SAMANYA PAREEKSHA  
 Appetite-Reduced  
 Bowel-Constipated  
 Micturition-6-7 times/day  
 Sleep-Disturbed  
 Habits-Tea 2 times/day

Mala- Prakruta  
 Jihwa-Sama  
 Shabda-Prakruta  
 Sparsha-Anushna Sheeta  
 Druk-Prakruta  
 Akriti-Madhyama

DASHA VIDA PAREEKSHA  
 Prakruti - Pitta Vata Prakriti  
 Vikruti-Vata, Pitta, Kapha  
 Sara - Madhyama  
 Samhanana - Madhyama  
 Pramana-Madhyama  
 Satmya - Madhyama  
 Satva - Madhyama  
 Ahara Shakti - Avara  
 Jarana Shakti - Avara  
 Vyayama Shakti - Avara  
 Vaya - Vridha

III. VISHESHA PAREEKSHA: PHYSICAL FINDINGS

Table no 1: Showing physical findings in Pakshaghata

Gait	Hemiplegic
Higher Mental Function	Conscious, but not orientened to time, place and person.
Hallucination and Delusion	Absent
Speech Disturbance	Present

INVESTIGATION:

MRI OF BRAIN:

Linear hyperintensity seen in the sulcal space of the left parietal lobe on T1 and showing minimal blooming on GRE suggestive of sub arachnoid bleed. Minimal hemosiderin deposition seen in the bilateral posterior superior parietal and occipital lobe sulci. Foci of white matter ischemic changes due to small vessel disease seen in bilateral deep cerebral white matter

Mild atrophic changes in brain.

MR imaging reveals no other evident or significant abnormality in the brain parenchyma or other observed structures.

ASTA VIDHA PAREEKSHA

Nadi-Pitta Vata  
 Mutra-Prakruta

ROGA PAREEKSHA

Nidana

- Aharaja –Alpa and Sheeta Ahara ,
- Viharaja – Ati Chesta
- Manasika – Chinta, Shoka

•Poorvaroopo -Avyakta

- Roopa -Chesta nivritti in vama bhaga of Shareera, Brama, Vak sthamba
- Upashaya – Langhana,Ushnopachara
- Anupashaya – Katu, Tikta, Kashaya yukta ahara, Atisheeta ahara.

Samprapti: Nidana sevana leading to vitiation of Vata Pradhana Tridosha, Sthana samsraya in Sira, Causes vishoshana of the Sira and Snayu on Vama Bhaga of the Shareera and results in manifestation of symptoms like Chesta Nivritti on either side of the Shareera and Vaksthambaleading to Pakshaghata<sup>1</sup>.

CHIKITSA

Table no 2: Showing treatment protocol

DAYS	Symptom	TREATMENT
DAY 1	Sudden loss of sensation of left side of the body, associated with giddiness and slurred speech, not able to walk without support	Brihatvatachintamani rasa with gold tablet, made into churna mixed with honey, said to apply sublingually
		Anuvasana basti with 100ml Tila Taila
		Lashuna Ksheerapaka-50ml

DAY 2	Improvement in the sensation, Able to walk without support. Giddiness-Absent, Slurred speech-Present	Sarvanga Abhyanga with Balashwagandha Taila
		Erandamooladi Niruha Basti-200ML
		Grita Talam
DAY 3	Loss of sensation in left hand Slurred speech-Present	Sarvanga Abhyanga with Balashwagandha Taila
		Anuvasana basti with 100ml Tila Taila
		Lashuna Kalka for external application on hand. Brihatvatachintamani rasa with gold tablet given internally Grita Talam
DAY 4	Improvement in speech and sensation, Able to walk without support	Sarvanga Abhyanga with Balashwagandha Taila
		Erandamooladi Niruha Basti-200ML
		Grita Talam
DAY 5	Proper speech with Improvement in the sensation, Able to walk without support	Sarvanga Abhyanga with Balashwagandha Taila
		Anuvasana basti with 100ml Tila Taila
		Grita Talam
DAY 6	Proper speech with Improvement in the sensation, Able to walk without support	Sarvanga Abhyanga with Balashwagandha Taila
		Erandamooladi Niruha Basti-200ML
		Grita Talam
DAY 7	Proper speech with Improvement in the sensation, Able to walk without support	Sarvanga Abhyanga with Balashwagandha Taila
		Anuvasana basti with 100ml Tila Taila
		Grita Talam
DAY 8	Proper speech with Improvement in the sensation, Able to walk without support	Sarvanga Abhyanga with Balashwagandha Taila
		Anuvasana basti with 100ml Tila Taila
		Grita Talam

SHAMANOUSHADHI:

Table no 3:Showing shamanoushadhi with dosage and anupana

SHAMANOUSHADHI	ANUPANA	DOSAGE
Balamooladi kashaya(freshly prepared)	Ushna Jala	40ml,before food, twice a day.
Brihatvatachintamani rasa with gold	Madhu	1 tablet,after food, twice a day.
Lashuna Ghrita	Ushna Jala	1tsp,before food, twice a day
Kapikachu Churna+Ashwagandha Churna	Ksheera	1 tablet, after food, twice a day.

PATHYA: Ksheera, Ghrita, Ushna ahara Sevana, Abhyanga

APATHYA: Vatakara Ahara, Abhishyandhi Ahara.

RESULT:

Complete relief from the symptoms within 8 days of treatment.

IV. ASSESSMENT

Table no 4: Showing assessment of physical findings before and after treatment

SYMPTOM	BEFORE TREATMENT	AFTER TREATMENT
GAIT	Not able to walk without Support	Able to walk without Support
SPEECH	Slurred Speech	Proper Speech
ORIENTATION TO TIME,PLACE,PERS ON	Not Oriented	Well Oriented

V. DISSCUSSION

Margavarana and Dhatukshaya are the main cause for the manifestation of Pakshaghata

Brihatvatachintamani rasa<sup>4</sup> having Strotoshodana, Yogavahi and Rasayana properties used predominantly to treat Pakshaghata.

Abhyanga<sup>5</sup> nourishes the Dathu and does Vata shamana, Here Balaashwagandha taila is selected for Abhyanga.

Basti is be said to be Ardha Chikitsa<sup>6</sup>in Vatavyadhi, here Anuvasana Basti with Tila Taila as it has Ushna veerya and Vata Shamana Properties and Erandamooladi Niruha Basti is done in Yoga Basti schedule.

Grita pacifies Vata by its Snigdha guna and Pitta by Madhura Rasa. Here Ghrita Talam is applied.

Lashuna<sup>7</sup> by its Ushna Veerya mitigates Sheetatva of the body and does Vata Shamana.Lashuna Kalka is used for external application and Lashuna Ksheerapaka and Lashuna Ghrita used as intenal medication.

Balamooladi Kwatha<sup>8</sup> having Vatashamana and Balya used extensively in Vatavyadhi.

Kapikachu and Ashwagandha churna having Balya and Rasayana properties.

Acharya Charaka has advised Snehana, Swedana and Virechana as the line of treatment of Pakshaghata. Here the patient was in need of Atyayika Chikitsa, so the procedures are done accordingly.

## VI. CONCLUSION

Atyayika Chikitsa is that entity which is being ignored in Ayurveda by many of our Vaidyas. But there are many references in our Samhitha regarding Atyayika Chikitsa in Ayurveda. It depends on our Jnana and Yukti to inculcate in our practice.

## REFERENCES

- [1] Acharya YT, ed., Charaka Samhita of Agnivesha elaborated by Charaka and Drdhabala with Ayurveda Dipika commentary by Sri Chakrapanidatta, Chikitsasthana, 28th chapter, 53-5th verse, Varanasi: Chaukhamba Surbharati Prakashan, 2014, pn.619
- [2] WWW.STROKECENTER.COM
- [3] WWW.AHA. Guidelines for stroke and heart disease
- [4] Api Textbook of Medicine Vol 2, 20th Chapter, 8th Edition, Edited by Siddhartha N Shah the Association of Physicians, The National Book Depot, and Mumbai.2003. Page No 1165-1624.
- [5] Sharma, R., & Das, V. (2011). Agnivesha's Charaka Samhita. (Chapter 22,) Varanasi: Chaukhambha Pg 388.
- [6] Acharya Y T, editor. Commentary Ayurvedadipika of Cakrapanidatta on Charaka Samhita of Agnivesha, Siddhi Sthana; Kalpana Siddhi: Ch. 1, Ver. 38-39. Varanasi: Chaukhamba Surbharati Prakashan, 2014; p.683-684.
- [7] [https://www.iamj.in/posts/images/upload/1420\\_1426.pdf](https://www.iamj.in/posts/images/upload/1420_1426.pdf)
- [8] <https://ayushdhara.in/index.php/ayushdhara/article/download/894/726/1946>