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## Clinical Management of Pakshaghata Through Ayurveda: Case Report

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**ABSTRACT:** Pakshaghata is a major neurological disorder described in Ayurveda, characterized by the sudden loss of motor functions affecting one half of the body. It is often accompanied by associated symptoms such as speech disturbances, sensory impairment, stiffness, and pain. Clinically, Pakshaghata can be correlated with hemiplegia, which commonly occurs due to cerebrovascular accidents such as stroke. According to Ayurvedic principles, the primary causative factor in Pakshaghata is the vitiation of *Vata dosha*, which governs all neurological and motor activities in the body. Aggravation of Vata leads to impaired functioning of nerves and muscles, resulting in paralysis of one side of the body. In the present case, a patient presented with right-sided Pakshaghata, exhibiting difficulty in walking, stiffness of limbs, slurred speech, and reduced motor strength. The patient was managed with a comprehensive Ayurvedic treatment approach combining both *Shodhana* (purification) and *Shamana* (pacification) therapies. The treatment protocol included *Basti Karma* (medicated enema), which is considered the prime therapy for Vata disorders, along with *Nasya Karma* (nasal administration of medicated oils) to enhance neurological function and improve sensory and motor coordination. In addition, physiotherapy was incorporated to support muscle strength, improve mobility, and aid functional recovery. Assessment of the patient was carried out using both subjective and objective parameters. Subjective improvements were noted in walking ability, reduction in stiffness, clarity of speech, and decrease in pain. Objective evaluation showed improvement in muscle tone, reflexes, muscle power, and gait pattern. Following the course of treatment, the patient demonstrated significant recovery in both functional and clinical parameters.

**KEYWORDS:** Pakshaghata, Hemiplegia, Vatavyadhi, Shamana Chikitsa, Shodhan Chikitsa, Basti Karma, Nasya.

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**INTRODUCTION:**

Pakshaghata is one of the major and one among the 80 vataja nanatmaja vikaras. It is mainly caused by occlusion of blood vessels of brain by different factors. It is characterized by sudden loss of motor functions of mainly one half of the body, often associated with speech disturbances and sensory impairment. It can be correlated with hemiplegia, commonly resulting from cerebrovascular accidents. Pakshaghata predominantly occurs due to vitiation of mainly Vata dosha. It is madhyammarga gat vyadhi. The treatment included Shodhan and Shaman Chikitsa. In brihatrayi Shodhan chikitsa is explained for upasthambhit pakshaghat. It helps to cleanse our body from all the toxic elements present in our Body. Basti is one of the Main shodhan chikitsa mentioned in the treatment for vata dosha. Charaka also mentions basti as ardha chikitsaa. Sarvang snehan and swedan help in decreasing stiffness and strengthen muscles then after snehan and swedan, Panchatiktakshir basti was given to increase dhatvagni thus increases bala of dhatu. Pakshaghsat is mentioned in asthi-majjagata vikara by Acharya charaka. This treatment helps in removing strotasavrodha and probably increases perfusion which leads to restoration of neurological functions. All the above treatment is helpful in reducing post stroke residual effect.

**Materials And Methods****Case Presentation:**

A 60 year old male patient was registered at IPD and OPD with UHID no. 394977 at our hospital. The patient had chief complaints of

- Right upper limb weakness
- Heaviness in right lower limb
- Stricted movement and generalized weakness since 2 months.

**Past History :**

- No history of any trauma .
- K/C/O- HTN On Rx Tab. Telma 40 mg OD
- DM On Rx Glimeperide 0.5mg and Metformin 500 mg OD

**Examination:**

- General examination: BP – 130/80 mmHg, P- 74/min, RR- 18/min
- RS-B/L
- CVS - S1S2 Normal
- CNS-Concious oriented
- Asthavidha Pariksha:

Nadi – Vata – kaphaj                      Jivha – Nirama  
 Mutra – Prakrut                              Drik - Prakrut  
 Mala- Prakrut                                Akriti - Madhyam  
 Shabda –slurred speech                  Sparsha –  
 Anushnasheeta Motor system  
 1.Muscle power

Grade	Power
0	No movement at all
1	Slightly movement
2	Difficulty in holding object
3	Hold object with less power
4	Normal

**2.Muscle Tone<sup>1</sup>**

	Muscle Tone
Right Upper Limb	Hypertonic Spasticity-Clasp knife spasticity
Left Upper Limb	Normotonic
Right Lower Limb	Hypertonic Spasticity-Clasp knife spasticity
Left Lower Limb	Normotonic

**3.Reflexes<sup>2</sup>**

	Right	Left
Biceps	N	Exaggerated

Triceps	N	Exaggerated
Knee	N	Exaggerated
Planter	N	N

**Investigations:**

The results of the conducted haematological and biochemical analyses were determined to be within the physiological range.

MRI of brain-Acute to Subacute multifocal Cluster moderate size non haemorrhagic infract in the frontal-Praeital-Occipital lobe on left side.

The Shoulder joint X-Ray appeared to be normal.

**Samprapti Ghatak of Pakshaghat:**

1. Doshā- Pradhana Doshā: Vata
2. Anubandhi Doshā: Pitta / Kapha

3. Dushya - Rasa Rakta Mamsa Snayu Sira Majja
4. Srotas- Rasavaha Raktavaha Mamsavaha Majjavaha Pranavaha
5. Srotodushti Prakara- Sanga (obstruction), Vimargagamana (abnormal movement of Vata)
6. Agni- Jatharagni Mandya Dhatvagni Mandya
7. Ama- Ama present
8. Sanchara Sthana -Sira and Snayu of Urdhva and Adho Sharira
9. Adhisthana -Ardha Sharira (one half of the body)
10. Vyakti Sthana- Hasta, Pada, Vak, Mukha, Greeva
11. Roga Marga -Madhyama Roga Marga
12. Swabhava -Chirakari (chronic)
13. Sadhya-Asadhyata -Krichchhra-Sadhya / Yasya

**Treatment Plan**

Date	Sodhan Chikitsa	Shaman Chikitsa
Day 1-7	Sarvang Snehan with til and sahchar oil	Yograj guggul 2 TDS
	Sarvang Swedan with Dashmool bharad	Rasnasaptak kwath 20 ml BD
	Pratimarsh nasya with Anu tel nasya with 2 drops in each nostrils	Gandharva haritaki churna 3 gm HS
	Yog basti -Anuvasan -til taila and niruha -dashmool bharad	
Day 9-25	Sarvang Snehan with til and sahchar oil	Yograj guggul 2 TDS
	Sarvang Swedan with Dashmool bharad	Rasnasaptak kwath 20 ml BD
	Pratimarsh nasya with Anu tel nasya with 2 drops in each nostrils	Gandharva haritaki churna 3 gm HS
	Panchtik kshir basti	

**Observation**

After following the above treatment plan, the patient experienced significant relief in the signs and symptoms, pain and stiffness gradually decreased and there was a significant increase in the range of motions of the right upper and lower limb.

**Result**

PARAMETER	Before treatment	After treatment
Muscle tone	1/5	4/5
Muscle power	1/5	4/5

**Reflexes Grade<sup>3</sup>**

	Before treatment	After treatment
Biceps	3	2
Triceps	3	2
Supinator	2	2
Babinskis sign	Positive	Negative

### DISCUSSION:

Pakshaghat is a type of vat vyadhi. Vat dosha get vitiated due to kaphavrodha anoccupies rikt srotas in body.<sup>4</sup>

<sup>5</sup>Panchakarma plays vital role in the preservation, maintenance & conversation of health & promotion of longevity.

Importance of panchakarma in prevention of diseases:

Regular practice of it will prevent the achaya purvaka vata prakopa, dhatu kshaya and also does mala shodhana.

Practice of panchakarma in ritucharya will prevent the diseases by expelling the chaya poorvaka prakupita doshas and sthana samshraya avastha of shat kriyakala.

Maharshi charaka advocated shodhana followed by rasayana as prophylactic measures for the prevention of epidemics and pandemics.

Employing panchakarma followed by rasayana & vajikarana chikitsa for parents can effectively prevents the occurrence of autoimmune disorders and genetic diseases in the progeny.

The dosha that are nullified by shodhana never recurs but those pacified by langhana, pachana etc. may recur.

If the plant is destroyed except root, then it grows again, in the same way, if dosha are not destroyed from the root, they again cause diseases.

<sup>6</sup>Shodhana therapy acts on the root sites of dosha and remove them from the body so that there is no further nutrition to the other

dosha sthana leading to a healthy condition, thus panchakarma is a radical treatment.

Abhyantra Snehan-Mitigates vata & kapha, increases pitta, bala, varna, Mardavata, tvachya, krimighna, garbhashaya shodhaka, bhagna sandhanakara, it subsides yoni – sira – karna sula.

Svedana is the procedure which relieves stiffness, heaviness and coldness of them body and produces sweating.<sup>7</sup>Panchtikta kshir niruha basti is a specialized ayurvedic treatment that involve the administration of medicated enema containing a combination of five bitter herbs (panch tikta) and milk. this therapy is used primarily to treat condition related to vata disturbance such as pakshaghat (paralysis), by balancing doshas, rejuvenating the nervous system and symptoms like muscle stiffness, spascity, and loss of motor function.

### CONCLUSION:

This case report presents the significant improvement in the patient condition. In Ayurveda Panchakarma play very important role in management of any disease. Acharya Charaka describe basti as ardhha chikitsa. Snehana, Swedan mrudu shodhan and internal medicines play very special role in vat vyadhi chikitsa. After giving this combine treatment patient show significant improvement and symptoms get reduce upto effective remark.

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