



Research Article

A CLINICAL TRIAL TO EVALUATE THE COMBINED EFFECT OF *EKAVIMSHATIKA GUGGULU* AND *BALA TAILA MATRA VASTI* IN SCIATICA

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ABSTRACT

Ekavimshatika Guggulu is mentioned in *Bhavaprakasha Madhyamakhanda Kushta Adhyaya* and *Bala Taila* mentioned in *Bhela Samhita Vata Vyadhi Adhyaya*. Most of the drugs in *Ekavimshatika Guggulu* are of *Vata-kapha Shamana* and also mitigate *Gridhrasi* as per the *Phalasaruthy*. *Bala Taila* is having *Vatahara* property and is *Balya* in nature. *Matra Vasti* possess the qualities of *Vata Anulomana* and *Snehana* properties. The study was an interventional study with pre and post-test, without control group. Subjects of either gender with age group 20-60 years registered in Pankajakasthuri Ayurveda Medical College & Post Graduate Centre, satisfying the inclusion and exclusion criteria were subjected to positive sampling and total of 27 subjects were selected and 27 subjects completed the clinical trial. The selected subjects were administered *Ekavimshatika Guggulu* in a dosage of 2 tablets orally thrice daily before food along with 75ml *Bala Taila as Matra Vasti* for 14 days. Assessment of the subjects was done on 0th day, 15th day and follow up done on 30th day with subjective and objective parameters. **RESULTS:** On analysing the results, it has been found that subjective parameters like tenderness, radiating pain, ODI scale, Sciatica Bothersomeness Index Scale, Sciatica Frequency Index Scale and objective parameters like SLR, Lessigues sign, also other parameters like *Gridhrasi lakshanas* got statistically significant improvement. Friedman test was used to assess the overall significance between three points. P-value <0.05 was found to be significant. Wilcoxon Sign Rank test was used to find out overall difference between before treatment and after follow up in subjective parameters. Significance in range of movements was assessed by repeated measures of Anova. **CONCLUSION:** Based on the observations and results of the clinical study, the alternate hypothesis, *Ekavimshatika Guggulu* and *Bala Taila Matra Vasti* is effective in the management of sciatica is accepted and null hypothesis is rejected.

INTRODUCTION

Sciatica is a condition stemming from the pathology related to sciatic nerve or its roots. Impingement of this nerve can lead to sharp, shooting pain along its pathway, accompanied by difficulties in walking, leg numbness, a burning sensation, and muscle weakness. This condition often arises from mechanical compression of the L5-S1 nerve root,

commonly due to disc protrusion, disc prolapse, or degenerative changes. The prevalence of sciatica varies widely, ranging from 49% to 70% in the general population. Fortunately, about 90% of patients recover through conservative treatment, which may include bed rest, analgesics, and local anesthetic or corticosteroid injections. The onset of sciatica can be sudden or gradual, often preceded by repeated episodes of low back pain that may last for months or even years. This condition has become one of the most significant ailments in society, severely impacting the daily activities of individuals during their most productive years.

The clinical features of sciatica closely resemble those of *Gridhrasi* in Ayurveda, presenting as aching pain that begins in the lumbar region and

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radiates to the buttock, thigh, calf, and foot. In Ayurvedic terms, degenerative conditions and disc protrusions are categorized as *Dhatukshaya* and *Margavarodha*. To address these issues, formulations with properties such as *Vatahara*, *Kaphahara*, *Agni Deepana*, *Shoolahara*, *Vatanulomana*, *Dhatuposhana*, and *Balya* have been selected. This approach aims to prevent the advanced limping stage of sciatica through conservative Ayurvedic treatment. *Ekavimshatika Guggulu*, a formulation from *Bhavaprakasha* in the *Madhyamakhanda Kushta Adhyaya*, consists of ingredients primarily aimed at *Vata-Kapha shamana* and *Deepana* properties. *Bala Taila* is noted for its *Balya*, *Rasayana*, and *Vatahara* qualities as described in *Bhela Samhita*. Additionally, *Matravasthi* offers *Shamana* for *Vatadosha* and *Snehana* for *Dhatu*, making it a suitable choice for treatment. Despite the rapid advancements and successes in other medical systems, the efficacy of this Ayurvedic formulation remains significant. The tolerability of commonly prescribed analgesics and adjuvant drugs for managing sciatica has not been thoroughly established. Most guidelines advocate for a course of conservative care, which can help treat the condition and prevent its progression to advanced chronic stages. Experiencing pain is often regarded as one of the most challenging things in life, impacting not only functional ability but also mental well-being. Along with pain, symptoms such as numbness, weakness in the foot must also be considered, as they collectively define the sciatica syndrome. Therefore, the selected procedures and the chosen drug aim to serve as effective alternatives for alleviating this condition.

OBJECTIVES OF THE STUDY

1. To study sciatica in Ayurvedic view.
2. To evaluate the combined effect of *Ekavimshatika Guggulu* and *Bala Taila* as *Matra Vasti* in the subjective and objective parameters of sciatica.

MATERIALS AND METHODS

Source of Data

a) Literary Source: The main text books for literary search includes:

Charaka Samhita, Sushruta Samhita, Ashtanga Sangraha, Ashtanga Hridaya, Madhava Nidana, Bhavaprakasha, Sharangadhara Samhita, Chakradatta, Bhaishajya Ratnavali, Yogaratnakara

Intervention

Sample Size	27 Subjects
Intervention	<i>Ekavimshatika Guggulu + Bala Taila Matra Vasti</i>
Dose	<i>Gutika- 500mg, Vasti- 75ml</i>
<i>Anupana</i>	Warm water
Time of Administration	2 tablets thrice daily before food, <i>Vasti</i> afternoon 1.30 P.M
Duration	14 days

b) Drug Source

The medicine used in this study was prepared in a GMP certified company following all pharmacopoeia quality standards. CoA obtained from CARE KERALAM.

c) Sample Source

The subjects of age group 20 to 60 years, who satisfied the inclusion criteria, attending the OPD & IPD of Pankajakasthuri Ayurveda Medical College and PG Centre Hospital, Kattakada, were taken for study. Subjects were enrolled into the study after necessary investigations from a recognized standard laboratory. Dose and dosage regimens were fixed according to Ayurvedic classic.

Method of Collection of Data

Sample Size: 27 subjects irrespective of gender, religion, occupation, marital status, socioeconomic status, educational status, fulfilling the diagnostic criteria, inclusion criteria, and exclusion criteria were selected.

Study Design: Interventional study, pre- and post- test without control group

Inclusion Criteria

1. Subjects of either gender aged between 20 to 60 years.
2. Subjects presenting with signs and symptoms of Sciatica.
3. Subjects presenting with SLR grading < 90 degree.
4. Subjects who are willing to sign the consent form and agreeing to follow the protocol of the study.

Exclusion Criteria

1. Pregnant women, lactating mothers and mentally challenged persons.
2. Sciatica developed due to post-surgical complications.
3. Congenital deformity of spine.
4. Infective conditions and inflammatory conditions of spine.
5. Vertebral fractures/known case of IVDP.
6. Neoplastic conditions of spine.
7. *Anarhas* of *Matravasti*
8. Bilateral Sciatica.

Observation Period

Treatment period: 14 days

Days of assessment: Observations were done at baseline i.e., 0th day, 15th, 30th day

Assessment Criteria

Assessment of the condition was done based on detailed case proforma adopting standard scoring methods of subjective and objective parameters.

Subjective Parameter

Lumbo Sacral Tenderness Radiating pain towards lower limb

Oswestry Disability Index Scale (ODI Scale)

Roland- Morris Low back pain and Disability Questionnaire (RMQ)

Sciatica Bothersomeness index scale

Sciatica Frequency index scale

Objective Parameter

SLR

Lessigues test

Investigations

Specification of safety parameters: Laboratory test was performed before and after the trial Blood routine examination – CBC, RBS, LFT, CRP and RFT.

Radiological investigation – X ray of Lumbo Sacral spine- AP and lateral view, whenever found necessary.

Grading of the Combined Effect of *Ekavimshatika Guggulu* and *Bala Taila* in Subjective Parameters

	Case 1			Case 2			Case 3			Case 4			Case 5		
	BT	AT	AF	BT	AT	AF	BT	AT	AF	BT	AT	AF	BT	AT	AF
Lumbosacral tenderness (Grade)	2	0	0	2	0	0	2	0	0	3	1	1	2	0	0
ODI scale	21	7	7	22	7	7	20	4	4	24	10	12	14	3	3
RMQ	14	4	4	21	4	4	15	3	3	21	10	12	16	3	3
SBI	16	4	4	20	4	4	20	4	4	24	12	12	16	4	4
SFI	12	4	4	20	4	4	12	4	4	24	12	12	12	4	4

	Case 6			Case 7			Case 8			Case 9			Case 10		
Lumbosacral tenderness	3	0	0	2	0	0	2	0	0	2	0	0	3	0	0
ODI scale	21	7	7	15	5	5	22	5	5	25	6	6	24	8	8
RMQ	19	5	5	17	3	3	20	6	6	18	4	4	22	10	10
SBI	20	4	4	12	4	4	20	4	4	24	4	4	20	8	8
SFI	20	4	4	12	4	4	20	4	4	20	4	4	12	8	8

Grading of the Combined Effect of *Ekavimshatika Guggulu* and *Bala Taila* in Objective Parameters

	Case 1			Case 2			Case 3			Case 4			Case 5		
SLR	3	1	1	3	1	1	3	1	1	3	2	2	3	1	1
Lessigues sign	1	0	0	1	0	0	1	0	0	1	1	1	1	0	0

	Case 6			Case 7			Case 8			Case 9			Case 10		
SLR	3	0	0	3	1	1	3	1	1	3	0	0	3	0	0
Lessigues sign	1	0	0	1	0	0	1	0	0	1	0	0	1	0	0

RESULT

Subjective Parameters	Mean BT	Mean AT	Mean AF	Chi- square Value	P Value
Lumbosacral tenderness	3.00	1.50	1.50	54.000	<0.001
ODI	3.00	1.50	1.50	52.699	<0.001
RMQ	3.00	1.50	1.50	52.669	<0.001
SBI	3.00	1.50	1.50	54.000	<0.001
SFI	3.00	1.52	1.48	53.366	<0.001

Objective Parameters	Mean BT	Mean AT	Mean AF	Chi-square value	P Value
SLR	3.93	1.54	1.54	50.000	<0.001
Lasegue's Sign	2.89	1.56	1.56	48.000	<0.001

ROM	Mean BT	Mean AT	Mean AF	F value	P value
Flexion	33.77	43.81	46.70	1436.573	<0.001
Extension	16.51	24.85	26.70	1383.218	<0.001
Lateral Flexion	18.07	23.22	24.62	3475.589	<0.001
Rotation	3.88	6.33	8.29	975.683	<0.001

DISCUSSION

Discussion on Sciatica and Gridhrasi

Sciatica is considered to be a debilitating condition which affects the day-to-day life of an individual. Sciatica cases can be treated to an extent and advanced limping stage can be prevented. In this study sciatica was correlated to *Gridhrasi*. *Gridhrasi* occurs due to *Dhatukshaya* and *Margasyavarana*. Based on the symptoms, *Gridhrasi* was analysed in two forms: *Vataja* and *Vata-Kaphaja*. Among the subjects, symptoms of sciatica were mostly due to disc herniation and degenerative changes.

Sciatica due to disc herniation can be correlated to *Vata-Kaphaja* type. According to the etiopathogenesis, the continuous exposure to *Nidanas* such as *Bharaharana*, *Vegadharana*, leads to *Vata Prakopa* and intake of *Madhura Rasa*, *Divasvapna* results in *Kapha Prakopa*. Increased *Sheeta Guna* of *Vata* and *Kapha* in *Koshta* leads to *Agnimandhya* which in turn causes vitiation of *Rasa Dhatu* and exhibits *Lakshanas* like *Gaurava*, *Aruchi*, *Tandra*. Vitiating *Vata* reaches the *Kati Pradesha* as it is the main *Sthana* of *Vayu* which further vitiates *Asthi Dhatu* due to the *Asraya Asrayi* relation of *Vata* with *Asthi* at the same region. The *Chala*, *Ruksha*, *Sheeta Guna* of *Vata* is affected here which hampers the normal *Gati* of *Vata*. The *Sheeta Guna* further vitiates the *Kapha* along with *Vata*. The Vitiating *Vata* displaces the vitiating *Kapha* from its normal place. This causes *Lakshanas* such as *Ruk*, *Toda*, *Sthambha*, *Muhuspandana* and *Sakthiutshepanigraha*.

Degenerative changes in the vertebrae can be correlated with the *Vataja* type of condition. According to the etiopathogenesis of *Vatika Gridhrasi*, continuous exposure to *Vata Prakopa Nidhanas* and *Vardhakya janya Dhatukshaya* might result in increased *Ruksha Sheeta Guna* of *Vata*. Vitiating *Vata* reaches the *Asthi* and *Majja Dhatu* in the *Kati Pradesha* due to the *Asraya-Asrayi Bhava*. This results in increased *Ruksha* and *Sheeta* qualities of *Vata* in the *Asthi* and *Majja*, along with decreased *Snigdhamsha* of *Shleshaka Kapha*

in the *Majja Vaha Srotas*. Consequently, this leads to symptoms such as *Ruk*, *Toda*, *Muhuspandana*, and *Sakthiutshepa Nigraha*.

Discussion on Chikitsa

In *Vata-Kaphaja Gridhrasi*, the *Ruksha* and *Sheeta Guna* of *Vata*, as well as the *Guru* and *Sheeta Guna* of *Kapha*, need to be corrected. To address this, formulations with *Ushna Guna* and *Snigdha Guna* are utilized. The *Ushna Guna* helps to mitigate the *Sheeta Guna* of *Vata* and the *Guru Guna* of *Grathitha Shleshaka Kapha*. Following this, to restore the *Snigdha* aspect of *Prakrutha Kapha*, the *Madhura Rasa*, *Snigdha Guna*, and *Brimhana Karma* of the medicine are employed. *Pratiloma Gati* of *Vata* is maintained through *Anulomana Karma* of *Vasti*.

In *Vatika Gridhrasi*, the *Ruksha* and *Sheeta Guna* of *Vata* need to be mitigated, while the *Snigdha Guna* of *Kapha* has to be restored. The *Ushna* and *Snigdha Gunas* of the drugs in this formulation, along with *Vatanulomana Karma*, helps to mitigate the *Sheeta* and *Ruksha Gunas* of the *Dosha* and restore the *Snigdha Guna* of *Shleshaka Kapha*.

Discussion on Drug

Samprapthi Vighatana is considered to be the main aim of *Chikitsa*.

Probable Mode of Action of Ekavimshatika Guggulu

Ekavimshatika Guggulu possesses action on both *Vata Kaphaja* and *Vatika* type of *Gridhrasi*. In *Vata Kaphaja* type of *Gridhrasi*, *Deepana Karma* of *Chitraka*, *Hareetaki*, *Shunti*, *Maricha*, *Pippali*, *Ajaji*, *Chavya*, *Musta*, and *Amaradharu* increases *Agni*, which in turn corrects the *Rasa Dhatu* and thus reduces symptoms such as *Gaurava*, *Tandra*, *Aruchi*. *Laghu*, *Ushna Virya*, and *Katu Vipaka* of *Chitraka*, *Hareetaki*, *Bibhithaki*, *Shunti*, *Ajaji*, *Chavya*, *Vacha*, *Vidanga*, and *Guggulu* helps to reduce the *Vaikritha Guru Guna* of *Kapha*. The *Ushna Virya* of *Chitraka*, *Hareetaki*, *Bibhithaki*, *Shunti*, *Maricha*, *Pippali*, *Ajaji*, *Chavya*, *Karavi*, *Vacha*, and *Guggulu* mitigates the *Sheeta Guna* of *Vata*. The *Anulomana* property of *Hareetaki*, *Karavi*, *Maricha*, and *Ajamoda* also helps in

normalizing the *Chala Guna* of *Vata*. Obstruction of *Vata* by *Kapha* is hence removed. *Guggulu* also possess *Rasayana* property enhances the *Asthi Majja Dhatu Poshana*. In *Ekavimshatika Guggulu*, chemical constituents such as gallic acid and ellagic acid, present in *Haritaki*, *Bibhithaki*, and *Amalaki*, and piplartine in *Pippali* and *Chavya*, along with Quercetin and E-Guggulusterone in *Guggulu*, possess analgesic properties.

In *Vatika* type of *Gridhrasi Sheeta Guna* of *Vata* might be reduced by *Ushna Virya* of most of the drugs in *Ekavimshatika Guggulu* like *Chitraka*, *Hareetaki*, *Bibhithaki*, *Shunti*, *Maricha*, *Pippali*, *Chavya*, *Karavi Vacha*, *Athivisha*, *Kushta*, *Guggulu*. *Madhura Vipaka* of *Haritaki*, *Bibhithaki*, *Amalaki*, *Shunti*, *Pippali* Enhances the *Snigdhamsha* of *Shleshaka Kapha*.

Probable Mode of Action of *Bala Taila*

In *Vata Kaphaja Gridhrasi - Ruksha Sheeta Guna* of *Vata* and *Guru Sheeta Guna* of *Kapha* has to be mitigated. *Bala Taila* is *Vata Kapha Shamana* in nature and does the *Anulomana* of *Vata* in *Pakvashaya* and also helps in correcting *Vishamagni* which in turn does proper *Dhatu Parinama*. *Rasayana* Property of *Ksheera* also does the *Asthi Majja Dhathu Poshana*. In *Vatika Gridhrasi Snigdhamsha* of *Shleshaka Kapha* has to be maintained which is achieved by *Guru, Snigdha Guna, and Brimhana* property of *Bala* and *Ksheera*. In *Bala Taila* chemical constituents like Ephedrine, Quinazolines in *Bala* and chemical constituents in *Tila Taila* like oleic acid and linoleic acid possess analgesic property.

Probable Mode of Action of *Bala Taila* as *Mathra Vasthi*

Matra Vasthi acts as *Shamana, Brahmana* and *Anulomana*. Ingredients in *Bala Taila* possess drugs of *Ushna Virya* which acts against both *Vata* and *Kapha Dosh*. In *Matra Vasti Oushadha Virya* reaches *Pakvashaya* and there it corrects the *Apana Vayu* and *Virya* in *Oushadha* is taken by *Samana Vayu* since it is near to the *Jataragni, Pachana* of *Oushadha* takes place and it reaches the *Asthi Majja Dhatu* where *Sheeta Guna* of *Vata* and *Kapha* gets corrected and due to *Guru Snigdha Guna* of *Bala* and *Ksheera* it enhances the *Snigdhamsha* of *Shleshaka Kapha*. As a whole *Vasthi* is involved in *Pakvashayasthitha Dosh Nirharana* and *Apana Vata Anulomana* and hence the normal *Gathi* of *Vata* is attained.

Discussion on Methodology

This was an interventional study with pre and post test without control group intended for getting a statistical outcome. Subjects of age group 20–60 were selected because of the more prevalence rate of this disease during this age. Both Genders were taken for study because it does not influence the treatment. LFT and RFT were assessed on 0th and 15th day to avoid the adverse drug reactions. In this study Subjects with

symptoms of *Vataja* and *Vata Kaphaja* symptoms like *Ruk, Toda, Muhuspandana, Sakthiutshepa nigraha, Tandra, Aruchi, Gaurava* was assessed with grading. Dosage form of *Ekavimshatika Guggulu* was taken as 1 *Shana (3g)* which was considered to be the maximum dosage in (AFI). *Guggulu Shodana* was done on *Triphala Kashaya* which also acts as *Rasayana* which gives add on benefit to *Guggulu*. *Matra Vasti* was administered afternoon. At this time *Agni* is involved in the *Pachana* of *Ahara* and *Srotomukha* is opened. If *Matra Vasti* is administered at this time *Veerya* of the medicine circulates throughout the body.

Known cases of IVDP, Vertebral fractures were excluded because study period was for a shorter duration and also investigations such as MRI, X ray were not included in this study. Pregnancy, lactating mothers were excluded from the study as they were belonging to vulnerable groups.

Sample size of the subjects was 27 including drop out and it was calculated based on previous study. Certificate of Analysis was obtained for the study. Higher metals and microbial study and also physicochemical parameters were done on both the formulations which was under the normal limit.

CONCLUSION

This study had shown highly significant results for subjective parameters and objective parameters. Moreover, the safety parameters of the drugs were evaluated, ensuring their safe internal use. Hence the combined use of *Ekavimshatika Guggulu* and *Bala Taila* as *Matravasthi* can be utilized in the management of Sciatica.

REFERENCES

1. John Macleod, editor, Davidson's Principles and Practice of Medicine, 12th edition, Great Britain by Pitman Press P746-747
2. Koes BW, van Tulder MW, Peul WC. Diagnosis and treatment of sciatica. BMJ. 2007 June 23; 334(7607): 1313-7. doi: PMID: PMC1895638. 10.1136/bmj.39223.428495.BE.PMID: 17585160;
3. Nicholas A. Boon, Nicki R. Colleterial R. Walker, John A, Davidson's principles and practice of medicine 20th edition, Elsevier science publication 2006 P 1242
4. Bhava Mishra, Madhyama Khanda 54.69-70 In: Prof. KR Srikantha Murthy, editor Bhavaprakasha Nighantu Vol 2 elaborated by Bhavamisra, Varanasi, Krishna das Academy, Reprint 2002, P331- 332.
5. Dr. P. Srinivasa Rao, Bhela Samhitha 24.14-18, Chaukambha Krishnadas Academy, Varanasi, P-290.
6. M. A. Stafford, P. Peng, D. A. Hill, Sciatica: a review of history, epidemiology, pathogenesis, and the role of epidural steroid injection in management, BJA:

- British Journal of Anaesthesia, Volume 99, Issue 4, October 2007, Pages 461-473, <https://doi.org/10.1093/bja/aem238>.
7. The Atharva Veda, English Translation by Devi Chand M.A., Published by Munshiram Manoharlal Publishers Pvt. Ltd, New Delhi; 1997. Kanda VI/Hymn XLIV Pp: 233
 8. M. N Dutt, Sri Garuda Maha purana edited by S. Jain published by New Bhartiya Book Corporation; Delhi; Reprint Edition (2010) Adhyaya 167/ 51; P 410
 9. M.N. Dutt, The Agni Maha Puranam Edited by Maitreyee Deshpande, Published by New Bhartiya Book Corporation Delhi; Ch.192; P 687.
 10. Agnivesha, Sutrasthana 12.7, In: Vaidya Acharya Yadavji Trikamji, editor Charaka samhitha elaborated by Charaka and Dridhabala with Ayurveda Deepika commentary by Chakrapanidatta. Varanasi: Chowkhamba publications; Reprint 2016, P- 237
 11. Agnivesha, Sutrasthana 20.11, In: Vaidya Acharya Yadavji Trikamji, editor Charaka samhitha elaborated by Charaka and Dridhabala with Ayurveda Deepika commentary by Chakrapanidatta. Varanasi: Chaukambha publications; Reprint 2016, P- 363 Page | 123
 12. Agnivesha, Sutrasthana 14.20-24, In: Vaidya Acharya Yadavji Trikamji, editor Charaka samhitha elaborated by Charaka and Dridhabala with Ayurveda Deepika commentary by Chakrapanidatta. Varanasi: Chaukambha publications; Reprint 2016, P- 272
 13. Agnivesha, Sutrasthana 5.90-92, In: Vaidya Acharya Yadavji Trikamji, editor Charaka samhitha elaborated by Charaka and Dridhabala with Ayurveda Deepika commentary by Chakrapanidatta. Varanasi: Chowkhamba publications; Reprint 2016, P- 125
 14. Agnivesha, Sutrasthana 19.7, In: Vaidya Acharya Yadavji Trikamji, editor Charaka samhitha elaborated by Charaka and Dridhabala with Ayurveda Deepika commentary by Chakrapanidatta. Varanasi: Chowkhamba publications; Reprint 2016, P- 353
 15. Susrutha, Nidana Sthana 1.74. In: Vaidya Acharya Yadavji Trikamji, editor Susrutha samhitha with Nibandha Sangraha commentary by Dalhana. 2nd ed. Varanasi: Chaukambha publications; 2004. P- 472
 16. Susrutha, Nidana Sthana 8.17. In: Vaidya Acharya Yadavji Trikamji, editor Susrutha samhitha with Nibandha Sangraha commentary by Dalhana. 2nd ed. Varanasi: Chaukambha publications; 2004. P- 225.
 17. Vrddha Vagbhata: Astanga Samgraha with Sasilekha Sanskrit commentary by Indu edited by Dr. Shivprasad Sharma, published by Chaukhamba Sanskrit series office, Varanasi, 3rd edition-2012; Sutrasthana 20/15; Pp: 158-159
 18. Vrddha Vagbhata: Astanga Samgraha with Sasilekha Sanskrit commentary by Indu edited by Dr. Shivprasad Sharma, published by Chaukhamba Sanskrit series office, Varanasi, 3rd edition-2012; Sutrasthana 36/9; Pp: 246-247
 19. Vagbhata-Ashtanga Hridaya with Sarvanga Sundara Arunadatha Commentary and Ayurved Rasayana Hemadri Commentary Edited by Pt. Hari Sandiva Sastri Paradakara Bhisagacharya, Chaukhamba Surbharati Prakashan Varanasi, Reprinted in 2007. Sutrasthana 27/15; Pp: 328
 20. Kasyapa: Kasyapa Samhita, text with English translation and commentary edited by P. V. Tewari, reprint 2008, published by Chaukhamba Visvabharati, Varanasi; Sutra Sthana 27/20- 28; Pp: 41-42.

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