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**“MANAGEMENT OF ACUTE CELEBRAL IMFARCT WITH AYURVED
APROACH : A SINGLE CASE STUDY”****Dr. Sonam G. Dhiwar¹, Dr. Mritunjay Sharma², Dr. Archana S. Dachewar³**

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ABSTRACT:

Pakshaghata is the major vyadhi of Vata dosha. Pakshavadha, or Pakshaghata, is a condition wherein the greatly aggravated vata dosha invades the shareera dhamanis, causing sandhibandhamoksha and paralyzing one side of the body, causing cheshtahani of the side with pain and loss of speech.

It can be likened to a cerebrovascular accident /stroke (hemiplegia) from a contemporary viewpoint. Stroke or CVA is characterized by the sudden emergence of a localized neurological deficit, caused by illnesses affecting the cerebral vasculature and its components. Ayurvedic management includes Matra Basti, Murdha Taila Pichu, Snehana, Swedana, and Nasya. The present study is a case report on the management of stroke in a female patient aged 61 years with chief complaints of loss of function of both lower limbs since 2 days ago. The case handled with the Ayurveda treatments was determined to be successful in alleviating primary issues while enhancing the overall well-being of the patient. The progress shown was encouraging and deserving of recording.

KEY WORDS:- Hemiplegia, Pakshaghata, Matra Basti, Murdha taila pichu, Nasya, Snehana, Swedana

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INTRODUCTION

Pakshaghata, also known as hemiplegia in modern medical science, is a neurological disorder. This is characterized by unilateral paralysis or weaknesses in the limbs and face. It's historical. It is documented in ancient texts such as Charak Samhita and Sushruta Samhita. Pakshaghata includes a variety of etiologies, including ischemic stroke and hemorrhagic stroke. And other neurologic hindrances. It affects one hemisphere of the brain.

According to Acharya Charak Prakupita Vayu, it resides in a specific area of the body, resulting in Sira Snayu Sushkata, which causes Sandhi Bandhana Shaithilya⁽¹⁾. According to Acharya Sushruta Prakupita, Vayu moves through Urdhwa Adho and Tiryaka Dhamanis, resulting in Sandhi Bandhana Moksha, which results in a loss of function on one side of the body⁽²⁾. Acharya Chakrapani explains Abhighata as one of the causes of Pakshaghata, especially Marmaabhighata.

Ayurveda offers a diverse range of treatments for cerebrovascular accidents. Both Panchakarma and internal ayurvedic remedies are effective at the same time in handling non-hemorrhagic infarcts. Panchakarma refers to five techniques, which consist of Vamana, Virechana, Basti, Nasya, and Raktamokshana⁽³⁾. Among these, Basti and Mrudu Virechana were recommended for the patient.

CASE REPORT

A 61-year-old female patient approached Pakwasa Samanvaya Rugnalaya, Nagpur, on January 1, 2025, with complaints of loss of motor function of both legs, headache, vertigo, slurred speech, and deviated mouth.

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CASE HISTORY :

A female patient aged 61 years was said to be healthy until December 31, 2024. She presented with a sudden loss of motor function of both legs, headache, vertigo, slurred speech, and deviated mouth. The patient was conscious; no H/O seizure was present. She was taken to Pakwasa Samanvaya Rugnalaya, Nagpur. She was advised to have a CT scan. As per the reports, the impression was moderate-sized hypodensity in the right cerebellum, possibly an acute infarct. She got admitted to our hospital for treatment of the same. He underwent Ayurvedic management and was discharged with remarkable improvement.

PAST HISTORY :

K/C/O Hypertension since 10 years on medication Tab Amlodep AT OD

K/C/O Diabetes Meliatus since 1 year on medication Tab.Glycomet 500mg SR OD

H/O Malaria,7 years before

No H/O Bronchial Asthma, IHD, Thyroid disorders

No H/O any other major illness.

Personal History

Bowel : normal

Micturation : normal

Sleep: Insomnia

Diet : regular

General Examination

BP: 150/90 mmHG

PR : 78/min

RR : 20 times/ min

Temp: 98.2F

Edema- No

Pallor- No

Icterus- No

Clubbing- No

Astha Vidha Pariksha

Nadi: Kapha Pittaja

Mala: normal

Mutra: normal

Jihva : Saam

Akruti : sthool

Shabda:Aspastha

Sparsha: Anushna sheeta

Systemic Examination

Respiratory sound: on Auscultation, AEBE equal, no abnormal sound detected

Cardiovascular sound: S1S2 normal

Gastrointestinal system: soft, non- tender, no organomegaly detected



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CENTRAL NERVOUS SYSTEM

• Higher function

Consciousness-conscious

Orientation- fully oriented

• Cranial Nerve Examination

Facial Nerve Examination- Asymmetry of face (deviation of mouth to Left Side)

• Motor Function

Gait- Unable to walk

•Muscle Power Grade

Left upper limb- 3/5

Left Lower limb- 4/5

Right upper limb- 5/5

Right lower limb- 4/5

• Reflexes

Deep reflexes such as biceps, triceps, brachioradialis, knee jerk, ankle jerk taken.

Reflexes	Right	Left
Bicep	++	++
Tricep	++	++
Brachioradialis	+	+
Knee jerk	+++	+++
Ankle jerk	++	++
Plantar	Extension of all fingers	Extension of toe and no movements of remaining fingers

Specific Investigations

Computerized Tomography scan of head done on January 1,2025

-moderate sized hypodensity in right cerebellum,possibly Acute infarct

-Old infarct in left frontal lobe in periventricular location and in left anterior gangliocapsular region with mild ex-vacuo dilatation of frontal horn of left lateral ventricle.

-Chronic lacunar infarct in right thalamus

-Mild cerebral cortical atrophic changes.

MATERIALS AND METHODS

Centre of Study: Pakwasa Samanvaya Rugnalaya IPD, Nagpur

Simple random single case study

Treatment Advised**Table 1: Internal Medicine**

Sr No	Name of Medicine	Dose	Time	Anupana
1	Bruhatavata Chinamani Rasa	125mg	Vyana Udana Kaala	Koshna Jala
2	Dashmoola kwath	40ml	Apan Kaala	Koshna Jala
3	Gandharva Haritaki Churna	5gm	Apana Kaala	Koshna Jala
4	Brahmi Vati	250mg	Swapna Kaala	Jala
5	Vacha+Chitraka+ pipalli		Muhurmuhura (Jihva Pratisaran)	
6	Cap.palsineuron		Four times a day	Jala

Table 2: Shodhan treatment given to patient

Sr No	Procedure	Dose	No of Days
1	Sarvanga Abhyanga with Bala Taila		20
2	Sarvanga Swedana with Dashmoola Kwath		20
3	Bastikram	Anuvasan-60 ml Dashmooladi niruh 350ml	20
4	Murdha Taila Pichu with Brahmi Taila		20
5	Nasya with panchendriya vardhan Taila	2 drops each nostril	15
6	Kukutand pinda sweda	Mukhparshwa	

RESULT

As the course of treatment progressed, the patient's condition steadily improved. Both the upper and lower limbs' strength and power steadily grew. On admission, the patient was suffering from slurred speech, which improved gradually. Also, the patient started walking with minimal support within 2 months of treatment.

Table 3: Assessment of Results

	On Admission	After 1 Month	On Discharge
Consciousness	Conscious	Conscious	Conscious
Motor function	Unable to walk	Walking with support	Walking with minimal support
Power	Left upper limb- 3/5 Left Lower limb- 4/5	Left upper limb- 4/5 Left Lower limb- 5/5	Left upper limb- 4/5 Left Lower limb- 5/5
Speech	Slurred speech	Slurred Speech ↓	Slurred Speech ↓↓

DISCUSSION

In Pakshghata, vata is the main cause of illness and ought to be addressed first. One of the numerous causes of vata prakopa is dhatu kshya. In addition to causing vata shaman, BASTI's multifaceted actions also pacify other vata-related doshas and induce dhatu poshana⁽⁴⁾.

Swedana, Snehana, and Mrudu Virechana are the specific Chikitsa Sutras that Acharya Charak has described as a therapeutic method for Pakshaghata⁽⁵⁾. Acharya provided the therapeutic procedure in Sushruta Samhita in the following order: Snehana, Swedan Mrudu Samshodhana, and Basti Chikitsa⁽⁶⁾. Snehana, Swedana, Karma Basti, and Nasya were recommended in this instance.

SNEHANA

ABHYANGA

Since Pakshaghata is the primary location for Sira Snayu Sankochana, Snehana is crucial for this ailment. Even dry wood can bend when Snehana is used⁽⁷⁾. The muscles of the upper and lower limbs are strengthened and nourished by abhyanga. In terms of therapy, Abhyanga also promotes the body's Dhatu and affects the unbalanced Vata Dosha⁽⁸⁾. According to Acharya Charak Vayu, it is located in Twak and is primarily found in Sparshanendriya⁽⁹⁾. Therefore, by the activation of Sparshanendriya, Abhyanga stimulates the peripheral nerve system, which in turn stimulates the glands, vessels, and muscular system. In this case, Bala Taila was used to conduct Abhyanga.

SWEDNANA

Nadi Sweda:

Swedana is advised in accordance with Snehana Karma. The method that relieves Gauravta, Sheetata, and Sthambha is called Swedana⁽¹⁰⁾. Swedana relieves body portions that are chilly, heavy, or stiff⁽¹¹⁾. Ushna Guna, which Swedana possesses, helps with Aam Pachana and interacts with Dhatus on a Sukshma level. Swedana causes the body's Peshis and Vatavahini to become activated, which leads to Laghuta. Because of its Ushna Guna, Swedana helps to alleviate Sheetata. In this case, Dashmoola Kwath used Swedana. Bilav, Agnimanta, Gambhari, Shyonaka, Patala, Bruhati, Kanthakari, Gokshura, Prushnaparni, and Shalparni can all be found in Dashmool. Uttama Vatashamaka is what all of these Dravyas are.

VIRECHANA

It is considered Virechana to remove Prakupita Doshas from Adho Marga, particularly Guda Marga⁽¹²⁾. The finest remedy for Pakshaghata, according to Acharya Vagabhata, is Virechana. In Pakshaghata, Virechana is advised because the Pitta and Vata Doshas are both disrupted, and Virechana plays a vital role in removing the disrupted Pitta and Vata.

BASTI

When basti is ingested, it spreads throughout the body and gets rid of waste and poisons in different parts. It also removes toxins from the feces and lubricates the body⁽¹³⁾.

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- **Niruha Basti (decoction-based enema)-**

Madhu, Yogavahi, and Sukshma Marga Anusarita are all part of Dashmoola Niruha Basti, which enters the Sukshma Srotas and functions as a catalyst. The Saindhava Lavana was aware of the Laghu and Tridosha Shamaka Gunas. Vata Shamana is the result of interactions between Ruksha and the Laghu Gunas of Vata and the Snigdha Guna of Sneha Dravya (Tila Taila). The main ingredients, Kalka (Triphala and Bala), strengthen the composition as a whole. It facilitates the breakdown of mala. Dosha, Anulomana, and Nirharana are addressed by Kwath⁽¹⁴⁾.

- **Anuvasana/Sneha Basti (an oil-based enema):**

Taila Sahacharadi Anuvasan basti safely retains the oil for a predetermined amount of time. The Snehana impact protects Pureeshadhara Kala. The Ruksha and Laghu Gunas of Vata are countered by Bala Taila, which has Guru and Snigdha Gunas, resulting in Vata Shamana. When analyzing Anuvasana Basti, Charya Charaka notes that Sneha is processed using the phrase "Sneham Pachati Pavakah," and that Dravyas can then be given to produce the intended physiological effect⁽¹⁵⁾.

NASYA

Nasya is the process of administering medicinal Kwath or Sneha through both nostrils (16). NASA is referred to as Dwar to Shira (brain) in Ayurveda. The brain is the primary site of pathology in Pakshaghata. When we utilize oil for Snehana, Nasya creates Vata Shaman.

BRUHATA VATA CHINTAMANI RASA

The Medhya, Rasayana, Balya, Ojovardhaka, and Yogavahi qualities of Bruhata Vata Chintamani Rasa are beneficial for Vata Vikara, especially Pakshaghata. This formulation prevents the progression of neurodegenerative diseases. It has a quick effect because of its Yogavahi Guna, which allows it to cross the blood-brain barrier.

DASHMOOLA KWATHA

As its name suggests, dashamoola is a potent, magical concoction of ten dried roots from ten different plants. Due to its exceptional health benefits, Ayurveda has long used it widely. It possesses those qualities that work in concert to offer efficient remedies for a range of medical conditions, especially those involving the lungs, muscles, bones, joints, and nerves.

Not only is this amazing herbal remedy used to treat pain and inflammatory diseases like osteoarthritis, rheumatoid arthritis, and gouty arthritis, but it is also frequently used as an enema because it relieves constipation, anorexia, abdominal lumps, bloating, flatulence, lower back problems, and pelvic and sacral inflammation. Its remarkable expectorant, analgesic nervine, and febrifuge qualities make it extremely important because it helps the body's air and space elements, or Vata doshas, flow downward and lessens the majority of nerve disorders associated with pain, weakness, and debility.

BRAHMI VATI

Brahmi Vati reduces inflammation and convulsions, improves memory, and strengthens the neurological system. Since Brahmi is considered to be Vaya Sthapana, Ayushya, Rasayani, and Medhya, it enhances cognitive function and nerve conduction.

GANDHARVA HARITAKI CHURNA

An old-fashioned Ayurvedic treatment is gandharva haritaki. This medicine is used to treat constipation and has mridu virechaka effects. This treatment is an oil-based gentle laxative. The two main ingredients in this formulation are erand and haritaki.

CAP.PALSINEURON

Throughout the course of treatment, Capsule Palsinueron was given. Ekangaveera Rasa, Mahavatavidhvamsa Rasa, Sameer Pannag Rasa, and Sutasekhara Rasa are all blended together to create this exclusive composition, which is especially recommended for Vataja Roga.

CONCLUSION

Because problems can occur at any time, diseases like acute hemiplegia are extremely challenging to control. However, one can achieve positive outcomes in Pakshaghata by following a suitable and rational therapy protocol.

In Pakshaghata, vata is the primary cause of illness and needs to be treated first. One of the many things that can cause vata prakopa is dhatu kshya. The complex effects of BASTI lead to dhatu poshana, vata shaman, and the calming of various vata-related doshas.

Based on Vyadhi Avastha, Rogi Bala, and Dosha Bala, the patient received Shamana Aushadhis, Physiotherapy, and Sthanika Chikitsa and Basti karma. The patient's condition significantly improved after undergoing Panchakarma treatments and certain Shamanaushadhis. Later on, the patient was able to walk on their own. The patient's quality of life increased as a result of the positive and encouraging results. Thus, it can be said that Pakshaghata can be effectively treated clinically with ayurvedic therapy.

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