



**INTERNATIONAL JOURNAL OF  
PHARMACEUTICAL SCIENCES**  
[ISSN: 0975-4725; CODEN(USA): IJPS00]  
Journal Homepage: <https://www.ijpsjournal.com>



## Case Study

# Efficacy of Siravedha and Eranda Taila orally in Vatakantak with special reference to Plantar Fasciitis- A case study

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## ARTICLE INFO

Received: 17 June 2024

Accepted: 01 July 2024

Published: 05 July 2024

### Keywords:

Plantar Fasciitis, Vatakantak, Siravedha, Eranda Taila, Dorsiflexion, Plantar flexion

### DOI:

10.5281/zenodo.12665289

## ABSTRACT

Plantar Fasciitis is characterized by pain in plantar region, tenderness and stiffness. In Ayurveda, this disease can be best correlated with *Vatakantak* as the clinical presentation of Plantar Fasciitis is similar to *Vatakantak*. *Siravedha* with *Eranda Taila* orally, this treatment procedure has been mentioned for *Vatakantak* in *Bhaishajya Ratnavali Vatavyadhi chikitsa adhyaya*<sup>1</sup>. In present case study patient diagnosed with *Vatakantak* was treated with *Siravedha* and *Eranda Taila* orally. Three sittings of *Siravedha* was required with interval of seven days. Before treatment and after treatment proper assessment of local tenderness along with measurements of range of angle of dorsiflexion and plantar flexion was done. Positive results obtained at the end of treatment. Local tenderness significantly reduced and range of angle of movements of ankle joint improved with the treatment. Hence from results of this case study it was found that *Siravedha* with *Eranda Taila* orally has significant role in treatment of *Vatakantak*.

## INTRODUCTION

Pain is an unfavourable sensation that brings an individual to physician due to a halt from his routine works. In today's modern era heel problems are often due to adopting modern lifestyle like using the ill-fitting shoes in males and high heel sandals in females. There are many other factors responsible for heel pain such as people who are overweight or obese, people who are on

their feet for long period of time, women during pregnancy, abnormal walking style such as rolling feet inwards, standing, running or jumping on hard surfaces or if any injury to heel such as stress fractures. All above factors contribute for arising the heel problems. Some of this pain subsides within short period but unfortunately as many as, these pains recur and may get converted in disease like Plantar Fasciitis.

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Relevant conflicts of interest/financial disclosures: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.



Plantar Fasciitis is a common cause of pain in the heel. It occurs from the inflammation of plantar aponeurosis at its attachment on the tuberosity of the calcaneum<sup>2</sup>. It is painful disorder of ankle joint which is characterized by pain in plantar region, stiffness, tenderness and local swelling may see clinically. In classics it has been said that when the foot is kept on the uneven ground or placing the foot improperly (while walking) or by over exertion of foot, Vata localized in the Khudaka gets aggravated and produces the pain<sup>3</sup>. If Vayu situated in Gulfa region produces pain in feet while placed unevenly it is known as Vatakantak<sup>4</sup>. Hence Plantar Fasciitis is clinically correlated with Vatakantak in Ayurveda.

According to Ayurveda Siravedha (Raktamokshana) is the shodhan therapy so it is recommended to remove vitiated Dosha or blood from nearest route of Rogadhishthan. Pacifying vitiated Dosha by Srivedya (bloodletting), ultimately reduces signs and symptoms of Vatakantak.

To reduce Prakopit Vata, Sneha is one of the best options given by Acharya Charaka. Eranda Taila has Vatshamaka properties and it is also Shophahar<sup>5</sup>. Hence Eranda taila is used to treat symptoms of vitiated Vata Dosha in Vatakantak.

#### **Hypothesis:**

Siravedha and Eranda Taila orally is significantly effective in treatment of Plantar Fasciitis.

#### **AIMS:**

1. To study the efficacy of Siravedha and Eranda Taila orally in treatment of Plantar Fasciitis.

#### **OBJECTIVES:**

1. To achieve the relief of pain in plantar fasciitis.
2. To evaluate the improvement in the movements of ankle joint and heel region.
3. To assess utility and efficacy of the ancient mode of treatment in the scientific era.

#### **METHODOLOGY:**

Proper case history was taken and thorough examination of patient was done.

#### **Patient's present illness:**

A 32 years old male patient presented with complaints of pain at right heel region which aggravates in morning since 6 months. Patient took NSAIDs, but he didn't get relief for longer duration. Hence, he visited Shalyatantra OPD of Government Ayurved College and Hospital, Nanded.

#### **Patient's General History:**

- Medicinal history- No history of any major systemic illness
- Surgical history- No any surgical history
- Allergic history- No history of allergy to dust or any drug
- Blood transfusion history- No history of blood transfusion
- Catheterization history- No history of urine retention or catheterization.
- Family history- No history of any major systemic illness
- Personal history:

Issues- one male child Occupation- Grocery shopkeeper Addiction- Tobacco chewing Diet- Mixed diet Appetite- Normal Urine- Regular Stool- Regular

#### **General Examination:**

- General condition- Fair, Afebrile
- Blood Pressure- 120/80mm of Hg
- Pulse Rate- 78/min
- No pallor
- No icterus
- No clubbing of nails
- No inguinal lymphadenopathy

#### **Systemic Examination:**

- CVS - S1S2 Normal, No murmur
- CNS - Conscious and oriented to time, place and person
- RS - AEBE clear, No crept, no wheezing
- P/A - Soft, Non-tender

#### **Local Examination:**

- Tenderness in right plantar region.



- Limited ankle joint movements in all directions.
- No evidence of swelling or wound.
- Range of angle for dorsiflexion- 6°
- Range of angle for plantar flexion- 14°

**Investigations:**

- WBC- 6700/mm<sup>3</sup>
- Hb- 13.4mg/dL
- PLT- 223k/mm<sup>3</sup>
- BSL(Random)- 101mg/dL
- Sr. Urea- 24mg/dL
- Sr. Creatinine- 1.36mg/dL
- BT- 2.17min
- CT- 3.45min
- HIV- Negative
- HbsAg- Negative
- VDRL- Negative
- X-ray Right foot AP & Lateral- No evidence of fracture of calcaneum or calcaneal spur.

**Criteria for Assessment:**

1. Local tenderness:

Symptoms	Grades
No tenderness	0
Mild tenderness (pain on palpation)	1
Moderate tenderness (patient winces on palpation)	2
Severe tenderness (patient will not allow to palpate)	3

2. The movements were assessed measuring the angles using Goniometer.

Movements of ankle joint:

Grade	Range of angle for dorsiflexion
0	20°
1	14°-19°
2	7°-13°
3	0°-6°

Grade	Range of angle for plantar flexion
0	45°
1	30°-44°
2	15°-29°
3	0°-14°

**Treatment Given:**

Instruments used: Tourniquet, scalp vein set, spirit swab, kidney tray, cotton sticking.

**Procedure:**

After all routine investigations and written informed consent Patient was made to sit on stool of the height of the knee. A tourniquet was tied four fingers above the ankle joint. The raised vein tapped with middle finger to engorge it. The dorsal aspect of the diseased foot cleaned with spirit swab. A scalp vein no. 22 inserted in the dorsal metatarsal vein which is branch of long saphenous vein above the two fingers of Kshipra Marma<sup>6</sup>. The blood was allowed to let out till it stopped by itself. The tourniquet was released slowly. The scalp vein removed from the vein and cotton swab kept on the site and a cotton sticking was applied. This procedure was done once a week for three weeks. Along with this patient was asked to take Eranda Taila 5ml orally at night with one cup of lukewarm milk for 15 days.



**RESULTS:**

On 16th day of treatment, the tenderness was significantly reduced and range of angle of movements were also significantly improved.

Signs and symptoms	Day 1	Day 8	Day 16
Local tenderness	2	1	0
Range of Angle of movements:			
Dorsiflexion	6°	12°	18°
Plantar flexion	14°	26°	36°

**DISCUSSION:**

According to Ayurveda Siravedha (Raktamokshana) is the shodhan therapy so it is recommended to remove vitiated Dosha or blood

from nearest route of Rogadhishthan. In heel pain all pathology moves around kandaras (tendons). Kandaras are Upadhatu (subtissue) of Raktadhatu<sup>7</sup>. Therefore by pacifying vitiated doshas from raktadhatu ultimately upadhatu regains its health back. Rakta is Moola of Sharira<sup>8</sup>, Vatadushta Kandaras (tendons vitiated by vata) with Snayu's (ligaments) reflect on Raktadushti. Therefore by pacifying vitiated Dosha by Siravedha ultimately reduces signs and symptoms of Vatakantak. In general various mechanisms are going to change by Siravedha such as local blood supply improves, local drainage system is improved. Eranda Taila has Vatshamaka properties and it is also Shophahar. Erand Taila has purgative action<sup>5</sup>. Purgation is one out of five Shodhan methods given in ayurveda classics. Purgation has Madhyam Vatshamaka properties. Cumulatively Eranda Taila not only pacify Vata by its active principles but also by its Prabhav karma.

#### CONCLUSION:

Local pain and limited ankle joint movements are the main symptoms in Plantar fasciitis. These symptoms are significantly reduced after Siravedha and Eranda Taila orally. This treatment procedure works by pacifying vitiated Vata Dosha in plantar region. Hence it could be concluded that Siravedha and Eranda Taila orally has significant role in treatment of Vatakantak (Plantar Fasciitis).

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**HOW TO CITE:** Dr. Mataprasad Sharma, Dr. Aruna Sonekar, Dr. Rajendra Sonekar, Efficacy of Siravedha and Eranda Taila orally in Vatakantak with special reference to Plantar Fasciitis- A case study, Int. J. of Pharm. Sci., 2024, Vol 2, Issue 7, 369-372. <https://doi.org/10.5281/zenodo.12665289>

