



AYURVEDIC APPROACH TOWARDS MERALGIA PARESTHETICA

Ayurveda

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ABSTRACT

Meralgia paresthetica is an entrapment neuropathy of the lateral femoral cutaneous nerve. The condition is mainly caused due to direct trauma or stretch to the thigh region. The clinical features include pain, burning sensation and numbness in the upper lateral area of the thigh. In Ayurveda it can be studied under the heading of *gata vata*. The *lakshanas* of *twak gata*, *rakta gata* and *sira gata vata* are similar to the features of meralgia paresthetica. Treatment is basically *vatahara* and *rakta prasada* line of management. *Vishesha chikitsa* of the respective *gata vatas* can also be done. *Virechana* and *rakta mokshana* are the two modes of *shodhana* applicable in this condition. The *oushadha sevana kala* of *vyana* and *apana vata* can be adopted since there is involvement of the both *vatas*.

KEYWORDS

Meralgia paresthetica, *Rakta gata vata*, *Sira gata vata*, *Twak gata vata*

INTRODUCTION

Meralgia paresthetica is basically an entrapment neuropathy of the lateral femoral cutaneous nerve (L2-L3). It is classified under mono neuropathy or focal neuropathy. It is most commonly caused due to the entrapment of the lateral femoral cutaneous nerve as it passes through the inguinal ligament. Other minor causes include direct trauma, stretch injury or ischemia. Its incidence rate is 4.3 per 10,000 persons in a year. The cardinal features include pain, paresthesia (burning sensation) and numbness over the upper lateral thigh. The symptoms are mostly unilateral. Aggravating factors are walking and standing. Sitting and rest relieves the symptoms.¹

AYURVEDIC PERSPECTIVE

In Ayurveda it can be understood as a *vata vyadhi*. The cardinal features of the conditions are pain, burning sensation and numbness. These *lakshanas* are also present in *gata vata* – *twak gata vata* and *rakta gata vata*. Since the pathology happens mainly in the *adhoshaka*, *vyana vata* and *apana vata* are mainly vitiated. *Vata prakopa* in *twak* or *rasa dhatu* results in the manifestation of *supti* or numbness. *Supti* has been defined as *sparsha ajnanam* by *Dalhana*.² *Vata prakopa* in *rakta dhatu* results in the manifestation of *lakshanas* like *teevra ruja* and *daha* which can be understood as painful paresthesia i.e pain with burning sensation.³ Here the lateral femoral cutaneous nerve can be understood as a *sira* which is the *upadhatu* of *rakta*. The involvement of *sira* further results in the manifestation of *supti* or numbness.⁴ The main causative factor of this condition is direct trauma or stretch injury. In Ayurveda, the *nidana* can be understood as *abhigata* and *vicheshatana*.⁵ As there are no premonitory symptoms for meralgia paresthetica, *purva rupa* is also *avyakta*. The *upashaya* of this condition is *vishrama* and *anupashya* is *adhva gamana*.

PATHOGENESIS AS PER AYURVEDA

Abhigata or *vishama cheshta**Vyana* and *apana vata prakopa* in *twak* and *rakta**Vata prakopa* to *rakta upadhatu* - *sira* (Lateral femoral cutaneous nerve) in *urru**Lakshanas* – *teevra ruja*, *swapa* and *daha* in *urru pradesha*

DIFFERENTIAL DIAGNOSIS AS PER AYURVEDA

1. *Twak gata vata* – Due to the presence of *supti*, *toda*⁶
2. *Rakta gata vata* – Due to the presence of *teevra ruja* and *daha*⁷
3. *Sira gata vata* – Due to the presence of *supti*⁸

TREATMENT ASPECT

Line of management includes

1. *Vata hara chikitsa*
2. *Rakta prasada chikitsa*

3. *Twak gata vata chikitsa*
4. *Rakta gata vata chikitsa*
5. *Sira gata vata chikitsa*

The *gata vata chikitsas* in this condition are basically *vatahara* and *rakta prasada*. *Twak gata vata chikitsa* includes *swedana*, *abhyanga*, *avagaha* and intake of *hrudya anna*.⁹ *Rakta gata vata* includes *sheeta pradeha*, *virechana* and *rakta mokshana*.¹⁰ *Sira gata vata* includes *snehana*, *daha* and *upanaha*.¹¹ Hence the *shodhana chikitsa* in Meralgia paresthetica are *virechanam* and *rakta mokshanam*. *Bahya chikitsa* includes *abhyangam swedana* (*avagaha sweda*), *pradeha*, *agni karma* and *upanaha*.

SHAMANA OUSHADHIS

1. *Kashayas* – *Balaguduchyadi kashaya*, *Guduchyadi kashaya*, *Sahacharadi kashaya*
2. *Gutikas* – *Kaishora guggulu*, *Amrita guggulu*, *Dhanvantaram vati*
3. *Arishtam/Aasavam* – *Abhayarishtam*, *Balarishtam*, *Saribadyasavam*
4. *Taila* – *Pinda tailam*, *Ksheerabala tailam*, *Mahanarayana tailam*
5. *Ghrta* – *Yashtimadhu ghrta*, *Shatavaryadi ghrta*, *Amrita prasha ghrta*

EKAMOOLIKAPRAYOGA

Bala, *Ashwagandha*, *Shatavari*, *Sariva*, *Yashti madhu*, *Hareetaki*, *Guduchi* (in the form of *churna*) with *ksheera* as *anupana* or directly administered as *ksheerapaka*

OUSHADHASEVANAKALA

Annadou – for *apana vata* and *Anta* (*Prataraashasya*) for *Vyana Vata*. Hence medicines can be administered in the morning time before and after food.¹²

CONCLUSION

Meralgia paresthetica can be understood as *twak gata vata*/ *Rakta gata vata* / *Sira gata vata*. Here the basic *nidana* is *abhigata* and combined *lakshanas* of the three *gata vatas* are present in this condition. Since there is an involvement of *abhigata .vata* and *rakta* are having an inevitable role in the pathology. Hence the treatment in general is basically *vata hara* and *rakta prasada*. *Vishesha chikitsa* includes *twak gata*, *rakta gata* and *siragata vata chikitsa*.

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