

GUILLAIN-BARRÉ SYNDROME AYURVEDIC MANAGEMENT

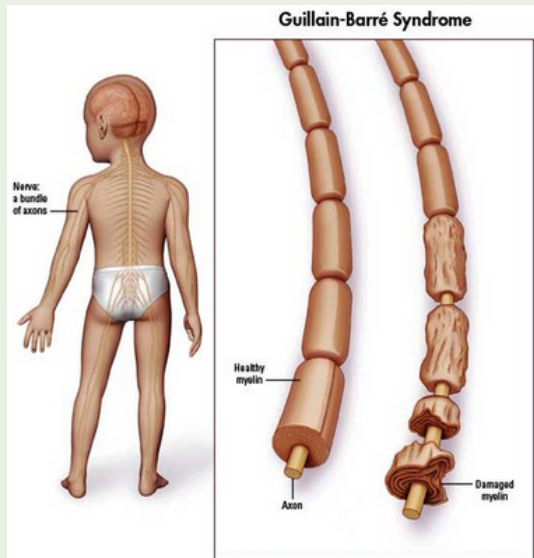
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INTRODUCTION



- **GUILLAIN-BARRÉ SYNDROME (GBS) IS AN IMMUNE MEDIATED POLYRADICULONEUROPATHY WITH AN ACUTE ONSET AND A VARIABLE CLINICAL COURSE .**
- **IT IS ALSO KNOWN AS LANDRY'S PARALYSIS AND FREQUENTLY PRECEDED BY AN UNSPECIFIED INFECTION .**
- **THIS SYNDROME MANIFESTS AS PROGRESSIVE AREFLEXIC OR HYPOREFLEXIVE MOTOR PARALYSIS WITH OR WITHOUT SENSORY DEFICIT.**
- **GBS INCLUDES WEAKNESS OF THE LIMBS, PARESTHESIA, AND PAIN**
- **AUTONOMIC DYSFUNCTIONS INCLUDING FLUCTUATING BLOOD PRESSURE, TACHYARRHYTHMIA AND BRADYARRHYTHMIA, ABNORMAL SWEATING, PAPILLARY ABNORMALITIES ARE ALSO COMMON IN PEDIATRIC GBS.**
- **GBS CAN BE UNDERSTOOD IN AYURVEDIC CONCEPT BASED ON ITS PATHOPHYSIOLOGY & CLINICAL PICTURE.**
- **AS THIS DISEASE CAN BE CORRELATED WITH SARVANGA VATA UNDER THE VATAVYADHI PRAKARANA BECAUSE IN GBS THERE IS PROGRESSIVE WEAKNESS IN THE BOTH LOWER LIMB & FOLLOWED BY UPPERLIMBS ALONG WITH SEVERE MYALIGIA IS SIMILAR TO THAT OF SARVANGA VATA.**
- **VATAVYADHI IN A CHILDREN IS RARE DUE TO DHATUKSHAYA BUT AVARANA IS ALSO ONE OF THE CAUSE FOR VATA VYADHI.**

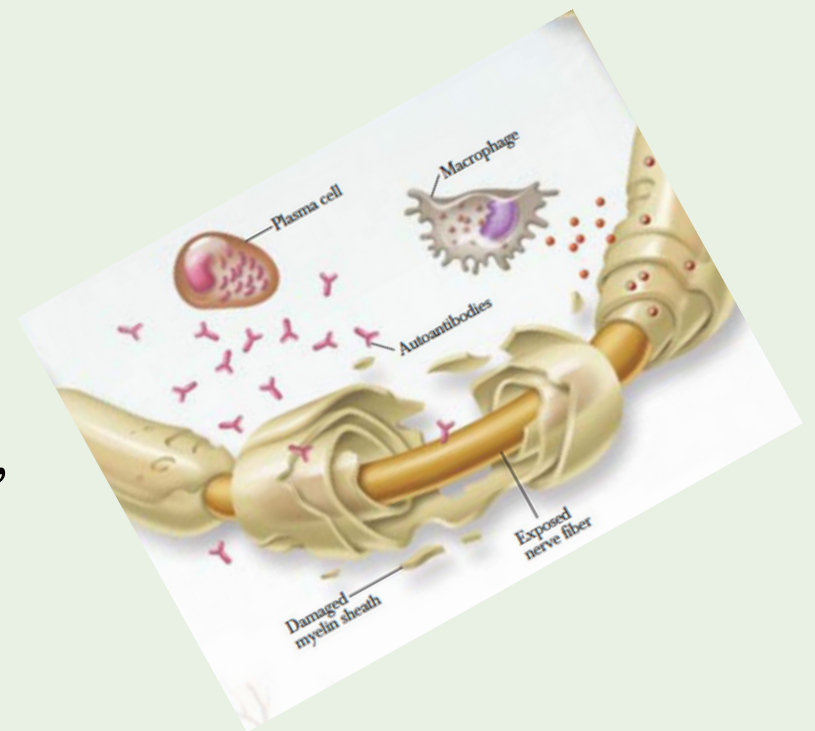
DISCUSSION

- **AVARNA LITERALLY MEANS OBSTRUCTION / TO COVER. IF VATA GETS OBSTRUCTED THEN ITS FUNCTION GETS HAMPERED AND RESULTS IN TO VATAVYADHI.**
- **THE MECHANISM OF GBS IS BELIEVED TO BE AN INFLAMMATORY NEUROPATHY DUE TO CROSS REACTIVITY BETWEEN NEURONAL ANTIGEN AND ANTIBODIES THAT IS INDUCED BY SPECIFIC INFECTIONS.**
- **BY CONSIDERING THE ABOVE CAN BE HYPOTHESIZED IN AYURVEDA LIKE AGUNTAJA KARMA (INFECTIONS) LEADS TO RAKTAPRAKOPA WHICH LEADS TO PITTAPRAKOPA RESULTING IN INCREASED DRAVATA GUNA OF PITTA, MAY BE OBSTRUCTED THE PATHWAY OF VATA THAT IS AVARANA RESULTING IN SARVANGA VATA.**
- **CONCLUSION CAN BE DRAWN LIKE PITTAVRUTA VYANA VAYU MAY BE RESPONSIBLE FOR PATHOGENESIS BACAUSE VYANA VAYU IS SITUATED IN THE HEART & LUNGS FLOWS THROUGHT THE ENTIRE BODY.THE VYANAVAYU GOVERNS THE NERVES ,VEINS, JOINTS ,MUSCLE FUNCTION AND IS A CONNECTIVITY FORCE OF ENERGY SUPPURATION TO OTHER FORMATION OF THE OTHER FOUR VAYUS.**

- **VITIATION OF THIS VAYU LEADS TO CLINICAL PICTURE IN GBS MAY BE SEEN IN THE FORM OF SEVERE MYALGIA, LOSS OF NERVE FUNCTION LEADS TO PANGUTA, ATROPHY OF MUSCLE .**
- **APART FROM VYANAVAYU, PITTA ALSO VITIATED LEADS INFLAMMATION IN THE PERIPHERAL NERVOUS SYSTEM & UNBEARABLE BURNING PAIN IN THE THIGH & SOLES .**
- **BY CONSIDERING THE ABOVE CONCEPTS TREATMENT CAN BE PLANNED.**

TREATMENT PLAN

VATASHAMAKA CHIKITSA
INCLUDES :
 DEEPANA,
 PACHANA ,
 ABHYANGA,
 SHASTIKASHALIPINDA SWEDA,
 NADISWEDA,
 YOGABASTI,
 VATAHARA OUSHADIS
 PHYSIOTHERAPY.



- **DEEPANA, PACHANA - CHITRAKADI VATI,
AGNITUNDI VATI**
- **ABHYANGA- KSHEERABALA TAILA**
- **YOGABASTI- MAHANARAYANA TAILA**
- **VATAHARA OUSHADIS(INTERNAL MEDICATIONS):**
ASHWAGANDHARISTA
AMALAKI CHOORNA
YASTI MADHU
BRIHATVATACHINTAMANI RAS

CONCLUSION

- **BY APPLYING KSHEER BALA TAILA WITH GENTAL PRESSURE CAN HELP IN REDUCTION OF MOTOR NEURON HYPER-EXITABILITY BY REDUCING THE ALPHA MOTOR NEURON ACTIVITY. INCREASES BLOOD CIRCULATION, PROVIDES NUTRITION, INCREASES STRENGTH OF MUSCLE.**

- **KSHEER BALA IS NEUROPROTECTIVE,ANTIOXIDANT BY ANTI INFLAMMATORY, ANALGESIC PROPERTY REDUCES OR INHIBITS THE INFLAMMATORY PROCESS DUE TO CROSS REACTIVITY IN GB SYNDROME.**
- **SWEDA IS ONE OF THE BEST BRIHMANA (SNIGDHA) SWEDA PROCEDURE WHICH WILL HELP IN COUNTERING THE RUKSHA & SHEETA GUNA PROPERTY OF VATA DUE TO ITS USHNAGUNA & SNIGDHA PROPERTY, RESULTING IN VATASHAMANA & BRIMHANA OCCURS.**
- **BECAUSE OF ITS USHNA PROPERTY ALSO ACTS AS VASODILATOR, INCREASES BLOOD CIRCULATION TO THE AFFECTED PART THERE BY NOURISHMENT OF ATROPHIED MUSCLES MAY OCCUR.**

