PANCHTIKTA KSHEER BASTI – ANSWER TO MANY PROBLEMS: A CRITICAL REVIEW

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Abstract

In today’s modern era, sedentary lifestyle and various lifestyle modifications have resulted into many irreparable diseases like Osteoarthritis, Osteoporosis, Spondylosis, Ankylosing Spondylosis and Avascular Necrosis. Allopathic treatment has its own limitation in managing these diseases. It can provide either conservative or surgical treatment and is highly symptomatic and with troublesome side effects whereas such type of conditions can be better treatable by the management and procedures mentioned in Ayurvedic classics. These types of conditions can be co related with the Vākṛti of Vāyu or as Vatavyadi in Ayurveda as Vayu is the main factor involved in Kshaya of Asthi Dhatu. Basti is most widely used and highly effective treatment modality in Panchkarma. Though Basti is mentioned in vitiation of all the Vata, Pitta, Kapha, and Rakta Doshas, it is specially indicated for Vatika disorders. Acharya Charaka said that in the diseases related to Asthi, we should give Basti using Tikta Rasatamaka Aushadhi dravya along with Ghrita (Ghee) and Ksheera (milk). In the present context, Ksheera is used as Basti dravya which is prepared with Tikta rasa dravyas and ghrita. Thus, Tikta Ksheera Basti can be a better option to many diseases including Spondylosis, Osteoporosis, Osteopenia as well as many challenging conditions like Avascular Necrosis and Ankylosing Spondylosis.

Keywords: Vatavyadi; Kshaya, Basti; Tikta Rasatamaka Aushadhi; Tikta Ksheera Basti.
INTRODUCTION

Ayurveda is entitled as a “Divine science” due to its origin as well as its unimaginable potency in curing the diseases and protecting the health of a healthy person, physically and mentally. The word “Vatavyadhi” has been composed from the different words Vata and Vyadhi. Vata is considered to be the most powerful and active amongst the three Doshas. As we know that “Pitta Pangu Kapha Pangu Pangavo Mala Dhatavah Vayuna Yatra Niyante Tatra Gachhanti Meghavat”¹. Vayu is the main element of body among all three Doshas which give support to the body & controls all the activities of body. Pitta, Kapha, Mala & Dhatus are functionless without Vata. That means it motivates & controls all other Doshas, Dhatus & Malas. It has also predominant influence on the 3 principal routes of diseases namely as Shakha, Koshtha & Marmastisandhi. Moreover, Vayu is responsible for the formation, communication & spread of Sweda, Mala, Mutra, Kapha & other biological substances in the body. It increases the strength of muscles & maintains health and longevity. Although the entire body is the dwelling of three Dosha – Vata, Pitta and Kapha, but the prime importance has been given to Vata due to its capacity to move in the entire body without help of other Doshas. The word “Vyadhi” i.e. Disorder is suggestive of circumstances in which body and mind both are in distress. In this way the collective meaning of Vatavyadhi indicates the specific disorders occurring due to the Vata Dosha. While commenting on the word “Vatavyadhi” Chakrapani (the commentator on Charaka Samhita) has given definition of it– “Vata Eva Vyadhi Vatavyadhi”. Which means Vata, itself disordered and combined with particular Dushyas attains the form of generalized or localized affections and because of producing pain it is called as Vatavyadhi². When Dhatus undergo Kshaya, it leads to Vata Prakopa and making individual prone to many diseases among them Osteoarthritis (Sandhigata Vata), Spondylosis (Asthigata vata), Ankylosing spondylitis (Asthimajjagata Vata) Osteoporosis (Asthi kshaya), as well as many challenging conditions like Avascular necrosis are seen very much common.

Sandhi gata Vata can be correlated with Osteoarthritis mentioned in modern medicine. It is a type of joint disease that results from breakdown of joint cartilage and underlying bone³. The most common symptoms are joint pain and stiffness. Initially, symptoms may occur only following exercise, but over time may become constant. Other symptoms may include joint swelling, decreased range of motion, and, when the
back is affected, weakness or numbness of the arms and legs. The incidence of Osteoarthritis in India is as high as 12%, it is estimated approximately four out of 100 people are affected by it.

_Asthi Kshaya_ is a condition in which there will be _Kshaya_ (diminution) of _Asthi Dhatu_ (bone tissue). _Asthi Kshaya_ may be compared to Osteoporosis, in which there is a decrease in bone mass leading to increased bone fragility and susceptibility to fractures. Osteoporosis is a commonest condition affecting the older population. According to the principle of _Aashraya Aashrayee Bhava_, when _Vata_ increases _Asthi_ decreases because, _Vata_ and _Asthi_ are inversely proportional to each other. Hence the etiological factors of _Vata Vriddhi_ are the etiological factors for _Asthi Kshaya_. In the contemporary science Osteoporosis is defined as a disease that is characterized by low bone mass, deterioration of bone tissue, and disruption of bone microarchitecture: it can lead to compromised bone strength and an increase in the risk of fractures. Worldwide, Osteoporosis causes more than 8.9 million fractures annually, resulting in an osteoporotic fracture every 3 seconds.

Ankylosing spondylitis (AS) is a chronic inflammatory disorder that primarily involves the sacroiliac joints and the axial skeleton. There is also a variable involvement of peripheral joints and articular structures. Musculoskeletal pain, stiffness, and immobility of spine due to AS is a major burden. Prevalence of AS in India is 0.03% as per surveys conducted by Bone and Joint Decade India from 2004 to 2010. Unavailability of satisfactory treatment in bio-medicine leads to permanent deformity in this disease. Ayurveda interprets these changes as vitiated Vata dosha that affect _Asthi Dhatu_ (bones).

Avascular necrosis (AVN) is defined as cellular death of bone components due to interruption of the blood supply; the bone structures then collapse, resulting in bone destruction, pain, and loss of joint function. In Ayurveda, there is no direct co-relation with AVN, in this condition the treatment modality of this disease is according to _Dosha_ and _Dushya_. Here in AVN, it seems that the predominant _Dosha_ is _Vata_ and _Dushya_ is _Asthi_ and on the chronic stage there is _Tridosha_ involvement.

_Asthimajjagata Vata_ (Spondylosis) is a common type of _Vatika_ disorder found in all races. Owing to distracting nature and difficult management. Due to change in life style like unsuitable sitting, sleeping, bike riding, standing and low nutritional value food as
the junk food; Asthimajjagata Vata has emerged in society as prominent disease. During the process of pathogenesis, when the vitiated Vata gets into the vertebrae (Asthi), then due to inverse relationship in Asthi & Vata, As Vata increases Asthi decreases i.e. Asthi kshaya causing pain, tingling sensation, numbness. Today the modern science deals with these kinds of diseases with analgesics and steroids but their side effects hamper the physiology more.

Allopathic treatment has its own limitation in managing these diseases. It can provide either conservative or surgical treatment and is highly symptomatic and with troublesome side effects whereas such type of conditions can be better treatable by the management and procedures mentioned in Ayurvedic classics.

Pancha Tikta Ksheera Basti fulfills the above demand because Ksheera and Sneha pacify provoked Vata as well nourish Asthi and Majja Dhatu while Tikta Rasa restores Asthi with its Khara property and Akasha and Vayu Mahabhuta dominance. Hence this principle was implemented by Charaka while giving the line of treatment of Asthi ashrita Vyadhi (bony disorders).

**DISCUSSION**

When Vata Dosha gets vitiated & obstructed by various Dhatus, then especially the skeletal and muscular tissues are more affected as these are the chief sites of Vata Dosha. As a result of this, Degeneration of Skeletal & Muscle tissue occurs. This pathogenesis leads to deactivation of Nervous tissues supplied to those affected parts. In this way the Pathophysiology of Vatavyadhi leads to Musculo-skeletal Disorders according to Modern Medical Science. According to Commentator Arundatta, the substance having Snigdha (unctuous) and Shoshana (drying) properties and produces Kharatwa (roughness) increases Asthi (Asthivardhan), as Asthi is also Khara by nature. But no substance is available that has both Snigdha and Shoshana properties. So Ksheera (milk) and ghrita (ghee) which are Snigdha in nature are advised to be used with the substances which are Tikta (Bitter) and possess Shoshana (drying) property. It is advised that Ksheera, Ghrita and Tikta dravyas should be used together in the form of Ksheera Basti. This combination has ability to produce Kharatwa. Hence it can be said that Tikta Ksheera Basti has ability to repair degeneration of bones and cartilage. So, Ksheera, Ghrita and Tikta dravyas will act on the site of lesion in Asthimajjagata vata i.e. joints and will be in a position to breakdown chain of reactions occurring in the form of
**Samprapti** at one hand and arrest the progress of the diseases on the other hand in addition to producing subjective improvement in patients. One more reference from *Ashtanga Hridaya Samhita* denotes that Excess use of *Tikta rasa* causes *Dhatukshaya* and *Vatavyadhi*. This states that *Tikta rasa* has ability to reach to *Asthi Dhatu* and deal with *vata dosha*. So, here we can say that *Tikta rasa* has definite effect on *Asthi* and *vata*.

In *Tikta Ksheera Basti* we are using *ghrita* and *Ksheera* which are good at *Vata shaman* and *Asthi Poshana*. Hence, we can say that *Tikta rasa* will lead the *vatashamak* & *Asthi poshaka Ghrita* and *Ksheera* to *Asthi Dhatu*. It will repair degeneration (*Dhatukshaya*) of *Asthi*. *Tikta Ksheera Basti* may also manifest its pharmacological actions in one or all the ways as mentioned below. These factors may act individually or in collaboration with each other to accomplish the task of *Basti* in the form of *Tikta Ksheera Basti* and there by producing desired effects in the form of:

1. Arresting progress of the disease; delaying the degenerative changes in *Asthi*.
2. Repairing the degenerative changes in *Asthi*.

**Probable Pharmacokinetics & Pharmacodynamics of Tikta Ksheera Basti according Scientific Parameters:**

According to modern science Basti as a process can be compared with the enema. There are two types of enemas:

1. Evacuant enema and
2. Retention enema.

*Ksheera Basti* may be considered as the nourishing retention enema.

**Retention Enema:** The fluid containing the drugs is retained in the rectum so that the drug may act locally e.g. steroid enema in ulcerative colitis, or systemically after absorption through the mucous membrane e.g. paraldehyde enema for the production of basal anesthesia. The rectum has rich blood and lymph supply and drugs can cross the rectal mucosa like the other lipid membranes; thus unionized and lipid soluble substances are readily absorbed from the rectum, through the rectal venous plexus. There are two rectal venous plexus; 1. the internal rectal venous plexus and 2. the external rectal venous plexus. The portion of the drug absorbed from the upper rectal mucosa is carried by the superior haemorrhoidal veins into the portal circulation whereas that absorbed from the lower rectum enters directly into the systemic circulation via the middle and inferior haemorrhoidal veins. The absorption of the drug
from the rectum follows the laws of transfer of the molecules across the biological membranes. Most drugs are absorbed by passive diffusion, a few by active transport or carrier mediated transport. Pinocytosis is a mechanism for transport of molecules across membranes. Usually unionized and lipid soluble substances are absorbed by simple diffusion or passive diffusion. “Diffusion is a law of transport of molecules from the region of higher concentration to the region of lower concentration”.

CONCLUSION

Thus, it can be concluded that Tikta Ksheera Basti can be a better treatment modality in treating many challenging diseases like Osteoarthritis, Spondylosis, Osteoporosis, Avascular Necrosis as well as Ankylosing spondylitis.

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