

THE ROLE OF VARDHAMANA MATRA OF SNEHA *BASTI* AS AN ALTERNATIVE TO SHODHANANGA SNEHAPANA

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ABSTRACT

Introduction -*Snehana* is the essential step prior to all the procedures done in *Panchakarma*. Administration of *Sneha* or medicated fat through anal route is called *Sneha Basti*. *Basti* is described as an internal route of drug administration by *Dalhana* and is considered as one of the methods of *Snehana*. Hence whenever patient is not ready for having medicated fat orally, anal route is selected as it is mentioned in the concept of *Vicharana Sneha*.

Aim: To evaluate the efficacy of *Vardhamana Matra of Sneha Basti* as an alternative to *Shodhananga Snehapana*.

Objectives: 1. to evaluate the effect of *Vardhamana Matra of Sneha Basti* as an alternative method to achieve the *Samyak Snigdha Lakshana*. 2. To observe the effect of *Vardhamana Matra of Sneha Basti* as an alternative to *Shodhananga Snehapana*, on the *Ritu Shodhana*.

Material and Method: 31 individuals of *Madhyama Koshta* were selected for the study from the OPD and IPD of Parul Ayurved Hospital Limda Vadodara and Parul Institute of Ayurved and Research Hospital Limda Vadodara.

Observation and Result *Deepana Pachana Days:* *Niramata* is attained in 8.82% subjects on 2nd day; 32.35% by 3rd days; 14.70% by 4th day; 11.76% by 5th days, 26.47% by 6th days and 5.88% by 7th days.

Kostha type: In this study all the subjects were taken with *madhyam kostha*. During the treatment vitals like pulse rate, blood pressure and strength of the subjects were found maintained, unlike the *Shodhana* through oral route of administration of *Sneha*; however, before and after *virechana* a significant reduction in the weight has been reported.

Discussion & Conclusion *Shuddhi Lakshanas* of *Virechana* in terms of *Vaigiki*, *Āntiki* and *Laingiki* were very promising. *Madhyama* to *Uttama Shuddhi* of *Virechana* can be observed, if *Anuvāsana Basti* is administered in escalating dose. At the end of the study a significant improvement reported in admitted patient's condition or *Samyak Snigdha Lakshana* observed. All the patients maintained normal pulse ranges, however before and after *Virechana* a significant reduction reported in the weight. A significant improvement reported before and after the treatment, so the null hypothesis rejected and *Vardhamana Matra of Sneha Basti* is effective to achieve the *Samyak Snigdha Lakshana* i.e. alternate hypothesis is proved.

KEYWORDS - *Vardhamana Matra*, *Sneha Basti*, *Shodhananga Snehapana*, etc.

INTRODUCTION

Snehana is the essential step prior to all the procedures done in Panchakarma. But it was found that many patients are reluctant towards Snehapana hence, may deprive the benefits of Shodhana. Panchakarma, a comprehensive and an integral part of Ayurvedic treatment and has its role in every therapeutic condition. Due to its long lasting and radical relief of chronic diseases, it is now globally accepted.[1] Administration of Sneha or medicated fat through Anal route is called Sneha *Basti*. It helps lubrication of each and every cell of body. *Basti* is described as an internal route of drug administration by Dalhana and is considered as one of the methods of Snehana. Hence whenever patient is not ready for having medicated fat orally, anal route is selected as it is mentioned in the concept of Vicharana Sneha. [Ch.Su.13/23-25]

Snehana or Snehapana (oleation) is an important pre procedure in shodhana (purification/cleansing). For this procedure, ghee or oil is used in increasing dose pattern. This causes utkleshana (precipitation or separation) of doshas from all body channels. In this Vardhmana Snehapana method (escalating dose pattern) Sneha pervades in all srotasas (body channels). The pathological bonds between dhatu and morbid Doshic matter are rendered and become loose by Sneha.[2] This Sneha counteracts Vayu attributes and make the body environment supple. Owing to laxity of dhatus they do not harbor doshas. So, when Snehana and Swedana is administered, doshas leave their anchorite dhatu (body tissues) easily without damaging the delicate dhatus, Siddhithana Kalpanasiddhi 1/7] This requires 3–7 days duration.[3] During this period a person can consume approximately 300–1000 ml of ghee. So, there is fear that patient may experience an increase in harmful lipids due to large amount of ghee consumption.[4]

Pravicharana Sneha is special mode of administration of Snehana explained in classics. They are indicated either in persons who are habituated or has utmost aversion towards the Sneha.[5] Pravicharana Sneha has twenty-four different modes of administration of Sneha.[6] Does these modes of administration applicable to Shodhana Purva Sneha is a debatable topic.[7] More over the indications of Pravicharana Sneha and Sadhya Sneha are similar to each other.[8] As Sadhya Sneha methods are either utilized as Shodhana Purva, Shamananga or Bramhananga Sneha, the principle may be reciprocated to Pravicharana Sneha too. Pravicharana Sneha comprises many external Snehana procedures as well as internal modes of administration of Sneha.

External oleation therapies may not be considered as Shodhana Purva Sneha as, it may not accomplish Vruddhi (increase in quantity of Dosha) and thus will not produce Koshta Snehana Lakshana (symptoms of internal oleation).[9] Internal oleation may be considered for the purpose of Shodhana Purva Sneha. But since time immortal, only oral administration of the Snehana is considered as pre operative procedure of Shodhana. Doubts were raised regarding the peripheral oleation symptoms when Sneha is administered rectally.

With this quest this **An Open Label Single Arm Clinical Study to Evaluate the Efficacy of Vardhamana Matra of Sneha Basti as an Alternative to Shodhananga Snehapana** was carried out to Sneha *Basti* be an alternate to Shodhana Purva Sneha and was this method able to produce all the Samyak Lakshana. These inconveniences made us think about effective and alternative methods to counter drawbacks of Snehapana. it was confirmed that, Sneha *Basti* can be administered as an alternative therapy for Snehapana before Shodhana.

AIM AND OBJECTIVES

AIM:

To evaluate the efficacy of *Vardhamana Matra of Sneha Basti* as an alternative to *Shodhananga Snehapana*.

OBJECTIVES:

1. To evaluate the effect of *Vardhamana Matra of Sneha Basti* as an alternative method to achieve the *Samyak Snigdha Lakshana*.

2. To observe the effect of *Vardhamana Matra of Sneha Basti* as an alternative to *Shodhananga Snehapana*, on the *Ritu Shodhana*.

CONCEPT OF SNEHA BASTI

Basti acts in the region of the colon and rectum (*Pakvashaya* and Guda). The major seat of Vata in the GI tract, the *Pakvashya* (colon) is critical in keeping Vata balanced in the entire body. In the stages of Samprapti (pathogenesis of disease), Vata first accumulates in the (*Pakvashaya*) colon and then as it begins to “spread”, it will spread and create imbalanced Vata in other susceptible parts of the body. This systemic imbalanced Vata can affect almost all system in the body, as Vata is a necessary presence throughout the body. *Basti* is a cleansing and nourishment therapy directly into the *Pakvashaya* (colon) and Aantra (intestines), without having to be digested by the stomach and upper GI tract, as would be the case with anything taken by mouth.

Basti can be used for various types of Apanavaayujanya Vaigunya like Vibandha (constipation), Shukradosha, Aartavadosha, Mutradoshaja Vyadhi and Purishdoshjanya Vyadhi. *Basti* is the primary treatment of Vatavyadhi (Neuro- musculo disorders) like Sandhivata, Katishoola, Avabaahuka, Manyastmbha, Amavata etc. *Basti* not only clean the Vatadosha but also pacify Vatadosha by its properties. *Basti* promotes overall well-being, a graceful aging process, luster and a healthy glow.[10]

Basti is contraindicated in Garbhani (pregnancy), Rajashrava (menstruation), Atisara (diarrhea), anal region or rectal bleeding disorders like Arsha (Piles), Bhagandara (Fistula in ano) etc. Generally, *Basti* is well tolerated in appropriate candidates and a proper *Basti* should result in 1-2 bowel movements with cleansing of the faecal matter as well as a feeling of lightness and a promotion of appetite and Agni.[11]

Basti can be classified in a variety of ways. Rectal *Basti* is usually two types: Niruha*Basti*, which is done with herbal decoctions and is purifying and cleansing in nature; and Anuvasana *Basti*, usually done with herbal oils, which is nourishing, strengthening and oleating in nature.[12]

Anuvasana Basti, which is best Brumhana*Basti*, herbal oil based, is meant for building and nourishing. Locally, providing oleation for any dryness caused by Vata can support a healthy, supple colon. More broadly, the oil helps to ground Vata and promotes energy and vitality. Anuvasana *Basti* is usually based in Tila taila (sesame oil), which may be plain with supportive Ayurvedic medicines. Anuvasana *Basti* can be held for longer periods of time, even up to a full day, as long as it is comfortable for the client, as it continues to provide a supportive effect.[13]

The measures undertaken to restore the Doshika equilibrium is called Chikitsa. The Ayurvedic approach to the treatment of a disease comprised of mainly two procedures.

1. Shodhana.
2. Shamana

ACCORDING TO DALHANA, COMMENTATOR OF SUSHRUTA SAMHITA,

- The Uttama Matra (standard and highest dosage) of *Sneha Basti* is 6pala or 24 tola or 3 Prasruta (288 grams approximately). Chakrapani, commentator of Charaka Samhita calls this dosage of *Sneha Basti* as ‘*Sneha Basti*’.
- The Madhyama Matra (moderate or intermediate dosage) of *Sneha Basti* is 3 pala or 12 tola or 1 ½ Prasruta (144 grams approximately). Chakrapani, commentator of Charaka Samhita calls this dosage of *Sneha Basti* as ‘*Anuvasana Basti*’.
- The Kaniyasi Matra (lowest dosage) of *Sneha Basti* is 1 ½ pala or 6 tola or ¾ Prasruta (72 grams approximately). Chakrapani, commentator of Charaka Samhita calls this dosage of *Sneha Basti* as ‘*Matra Basti*’.

- Thus, according to Chakrapani Sneha, Anuvasana and Matra *Basti* are all types of Oil enema. The dosage of each of these *Basti* 's will be half of its precursor. The subtypes and dosage of Sneha *Basti* are –

SNEHA BASTI – 6 Prasruta medicines is given

Anuvasana Basti – ½ of Sneha *Basti*, i.e. 3 Prasruta medicines is given

Matra Basti – ½ of Anuvasana *Basti*, i.e. 1 ½ Prasruta medicines is given

Vata the chief dominating factor because all dhatus and become functionless without vata. *Basti* not only cures vatika disorders but also samsarga and sannipata condition of dosha, kaphaj and pittaj disorders, sakhagata and koshtgata roga by of different *Basti* dravya ingredients. Panchakarma treatment.[14]

DEFINITION OF BASTI

The apparatus used for introducing the medicated materials is made up of *Basti* or animal urinary bladder.

बस्तीनादेयते बस्ती वापूर्वमन्वेत्यतो बस्ती ॥

The procedure in which the medicaments are introduced inside the body through the rectum with the help of animal urinary bladder is termed as *Basti*.

बस्तीभिर्देयते यस्मात्स्मादावस्ति स्मृतिः (Sharangdhara Samhita Uttarkhanda-5/1)

The bag made by animal bladder is termed as *Basti*.

बस्तीआजादिमुत्रधारनयातोदेयातेतो बस्ती ॥ (Ashtanga Sangraha Sutrasthan-28/2)

Acharya Charaka has defined *Basti* as the procedure in which the drug prepared according to classical reference is administered through anal canal which reaches upto the Nabhi Pradesha, Kati, Parshva, Kukshi, the accumulated Dosha and Purisha, spreads the unctuousness (potency of the drugs) all over the body and easily comes out along with the churned Purisha and Doshas is called *Basti*.

नाभिप्रदेशम कटिपार्श्वकुक्षिम गतवा शक्रिदा दोशाच्यम् विलोध्या। संसनेहाय कायम सपूरीशदोषः

सम्यक सुखनैति चा यह सा बस्ती ॥ (Charaka Samhita Siddhistan-1/40)

CLASSIFICATION OF BASTI

Basti Karma may be classified as follows –

1. Adhishtana Bheda (According the site of administration).
2. Dravya Bheda (According to drugs used is *Basti* Materials).
3. Karmukata Bheda (According to the action).
4. Sankhya Bheda (According to the number)
5. Anusangika (According to nomenclature).

Classification On the Basis of Adhithana

It Is Classified According to The Site of Administration of Basti

- a. *Pakvashayagata Basti* (Ano Rectal)
- b. *Mootrashayagata* (Urethro –Vesicle)
- c. *Garbhashayagata* (Uterine)
- d. *Vranagata* (wound/Abscess)

EXTERNAL

- a. *Shiro-Basti* (Over the scalp)
- b. *Kati-Basti* (Over the lumbosacral area)
- c. *Uro-Basti* (Over the Chest)

MODE OF ACTION OF BASTI:

Ayurveda is having its unique approach of explaining the complex subjects by giving the similes which are commonly seen in day-to-day life to understand the subject easily. Similes were used, because the objective parameters were not developed to an extent as they are today. Similes were used to explain complex mechanisms in the physiology, Pathology (Symptomatology) and in the therapeutic measures. The same is true in the case of *Basti*

also.[15]

a. ELIMINATIVE OR PURIFICATION ACTION OF THE BASTI:

Basti administered into the Pakwashaya draws the Dosha/Mala from all over the body from the foot to the head by virtue of its Virya, just as the Sun situated in the sky draws the moisture from the earth by virtue of its heat.

b. SYSTEMIC ACTION OF THE BASTI:

The Virya of the drugs administered through the *Basti* into the Pakwashaya reaches the whole body through the channels (Srotas), as the active principles in the water when poured at the root of the tree reaches the whole plant.

c. NUTRITIVE ACTION OF BASTI:

Just as a tree fed with water at its roots, puts forth green leaves and delicate sprouts, and in due time grows into a big tree, full of blossom and fruit, similarly does aman grow strong by means of Anuvasana *Basti*.

MATERIALS AND METHODS:

1. Sources of data

(a) Literary source:

All classical-literature and contemporary texts including the journals and internet sources about the *Vardhamana Matra of Sneha Basti* and its procedure was reviewed and documented for the study.

(b) Pharmaceutical source:

The medicine was prepared in G.M.P. certified Pharmacy of Parul Institute of Ayurveda.

(c) Clinical source:

31 individuals of *Madhyama Koshta* were selected for the study from the OPD and IPD of Parul Ayurved Hospital Limda Vadodara and Parul Institute of Ayurved and Research Hospital Limda Vadodara.

DRUG & POSOLOGY

Drug: 1. *Moorchita Go-Ghrita* is used for the *Vardhamana Matra of Sneha Basti*.

2. *Moorchita Tila Taila for Abhyanga*.

Posology: *Vardhamana Matra of Sneha Basti* according to *Vrunda Madhava*

Following drugs was used for the *Goghrita Moorchana*: -

S. NO	DRAVYA	AMOUNT
1	GO-Ghrita	16part
2	Haritaki	1part
3	Vibhataki	1part
4	Aamlaki	1part
5	Nagarmotha	1part
6	Haridra	1part
7	Bijora Nimbu	1part

Ref: B.R. JWARROGADHIKARA [1/1285]

Method of collection of data:

a) **Sample size:** 31 patients

b) **Study design:** Open Label Single Arm Clinical study.

c) **Duration of treatment:** 10 days

DIAGNOSTIC CRITERIA

Investigations:

1. CBC
2. RBS
3. ECG
4. Urine (routine & micro}

INCLUSION CRITERIA:

1. Individuals of either gender between the age group of 20 years to 60 years.
2. Advised *shodhana karma* irrespective of their disease.
3. Individuals who are indicated for *Anuvasana Karma*.

EXCLUSION CRITERIA:

1. Individuals who are suffering from anorectal-diseases (haemorrhoids, fissure, fistula, etc.).
2. Individuals who are contraindicated for *Anuvasana Basti*.
3. Patient who is not willing for the study.
4. Individuals suffering from severe systemic and metabolic diseases.

ASSESSMENT CRITERIA:

- a) **Subjective criteria-** *Samyak Snigdha Lakshana*
- b) *Samyak Anuvasana Lakshana*

All the patients are subjected to *Ritu Shodhana* after achieving the *Samyak Snehana Lakshanas* and observations were done for *Samyak Shodhana Lskshanas for Antiki, Laingiki and Vegiki shuddhi*

Assessment of the *samyak snigdha Lakshana* (Ref. article no. 5)

***Vatanulomana* = Improper evacuation of flatus, faeces and urine.**

0=*urdawavatapravritti = Udgara, Bahulya , Adhmana*

2=*proper evacuation of flatus, faeces and urine*

Agnidipti

<i>Agnidipti</i> (according to <i>kala</i>)	SCORE
Above 12 hours	5
Present 9-11 hours	4
Present 6-8 hours	3
Present 3-5 hours	2
Present 0-2 hours	1

***Twak/ gatra snigdhatata* (ghee drop test)**

1=	<i>Dry skin</i>
0=	<i>Mriduta</i>
2=	<i>Oiliness of skin</i>

Purisha snigdhatata

1=	<i>Rukshna purisha</i>
0=	<i>Soft stool</i>
1=	No aversion
2=	<i>Loose stool with Sneha</i>
0=	Minimum aversion without nausea
2=	Nausea

Snehodvega

Klama / glani

1=	Enthusiastic
0=	Reasonably active as usual
2=	Tiredness without exertion

Anghalagh vata

1=	Heaviness in body
0=	Usual lightness in the Body
2=	Feeling of lightness in the body

Score pattern:

7-8	<i>Avara samyak snigdha lakshana</i>
9-11	<i>Madhyama samyak snigdha lakshana</i>
12-14	<i>Pravara samyak snigdha lakshana</i>
≤7	<i>Asnigdha lakshana</i>

SAMYAK SNIGDHA LAKSHANAS

LAKSHANA	Day-1	Day-2	Day-3	Day-4	Day-5	Day-6	Day-7
Vatanulomana							
Diptagni							
Asamhatavarcha							
Snigdhavarcha							
Snigdha gatra							
Mardavata							
Anga laghava							

Glani							
Snehodvega							

VISHRAMAKALA:

Date.....to.....

Sarvanga abhyanga with Moorchita taila followed by Bhashpa Sweda

Snehana lakshanas: (ch.su.13/58) & (su.chi.31/53)

TABLE NO. 22

Samyak snigdha lakshana	Asnigdha lakshana	Atisnigdha Lakshana
Vatanulom ana	Agnimand ya	Panduta
Sneha dvesha	Grathita purisha	Sharira gauravata
Asamhata varchas	Vayu pratiloma ta	Tandra
Anga laghava	Gatra rukshata	Apakva purisha
Gatra mardawa	Urovidaha	Aruchi
Snigdha gatrata	Dourbalya	Utklesha
Agnideepti	Krichra annapach ana	Bhaktadve sha
Adastad sneha darsanam	Susnigdha viparyaya	Ghanashtrava
Snigdha twacha	Ruksha purisha	Pravahika
Shaithilyta	Gatra kharata	Purish atipravruti

Samyak lakshanas:(ch.si.1/ 44, 45, 46)

Samyak yoga	Ati yoga	Ayoga
Returning of faeces and oil separately without sticking with each other.	Nausea	Pain in the lower part of the body , abdomen, arms and back.
Clarity of senses, intellect and Raktadi dhatu.	Stupor	Dryness and roughness of the body.
Feeling of Lightness	Fatigue	Retention of faeces, flatus and urine
Increases of Strength	Exhaustion	
Proper sleep	Griping pain	
Regulation of excretory urges	Fainting	

METHODOLOGY

DipanaPachana-3 days or until appearance of *Nirama Lakshana*. *Snehana* by *Sneha Basti* in *Vardhamana Matra*-7 days.

Total duration of treatment: 10 days.

TABLE NO. 24

Day	1	2	3	4	5	6	7
Dose	4tola 48ml	5tola 60ml	6tola 72ml	7tola 84ml	8tola 96ml	9tola 108ml	10 tola 120ml

REF: V. m. Basti viddhi adhikara (chp.68 / 1, 12, 13 16/7,8)

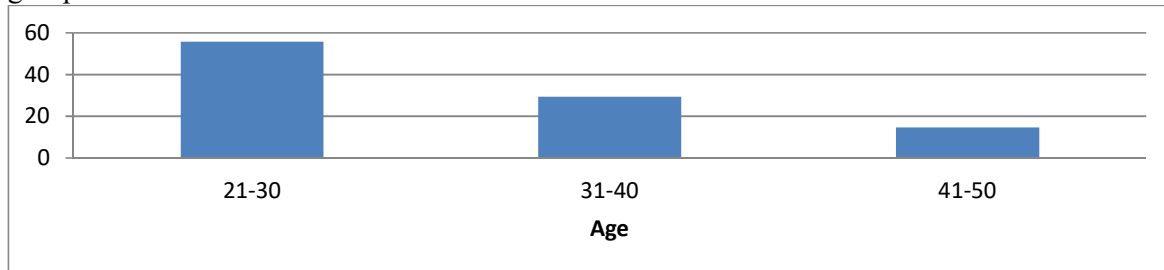
Snehana- Sneha Basti with Moorchita Ghruta was given after morning breakfast around 8am to 1pm in Vardhamana Matra according to Vrundha Madhava for 7 days.

Note: Sneha Basti was administered according to the SOP mentioned

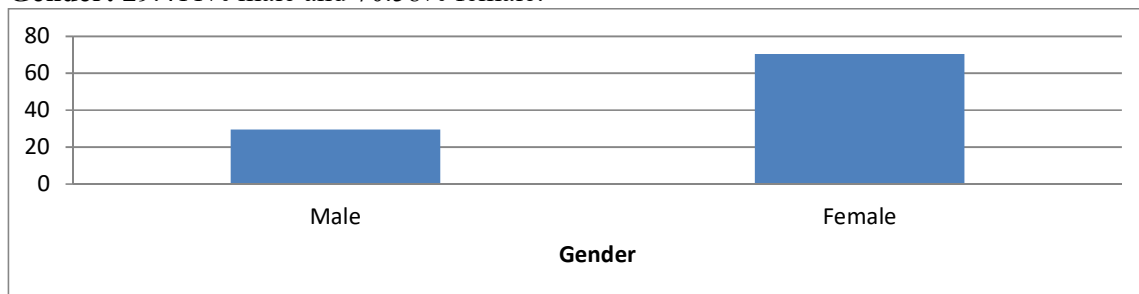
STUDY DURATION-18 months

OBSERVATION

Age: 55.88% were from 21 to 30 years, 29.41% 31 to 40, and 14.70 % from 41 to 50 years age group.



Gender: 29.411% male and 70.58% female.



OBSERVATION ON RESULT

Deepana Pachana Days: 8.82% patient's deepana pachana days were 2, 32.35% with 3 days, 14.70% with 4 days, 11.76% with 5 days, 26.47% with 6 days, and 5.88% with 7 days.

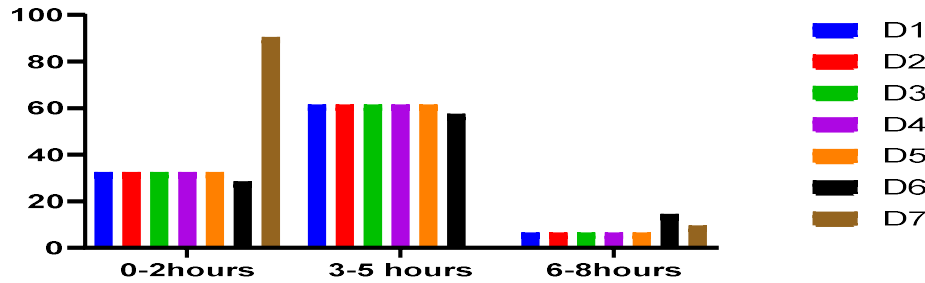
Sneha Basti Dose: 48 ml in day 1, 60 ml in day 2, 72 ml in day 3, 84 ml in day 4, 96 ml in day 5, 108 ml in day 6, and 120 ml in day 7 used for the treatment.

Drop out: 3 patients dropped the study rest 31 continued and completed the study.

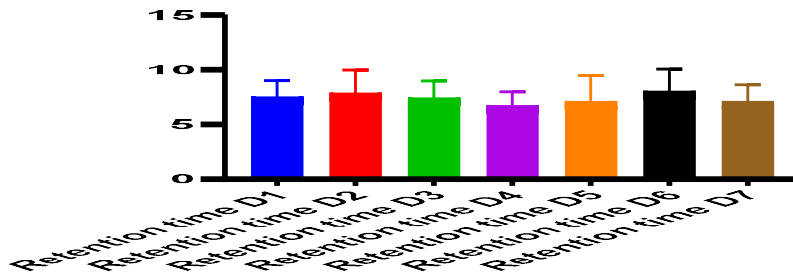
Pranidhana Kala: given 9 am -1 pm.

Pratyagamana kala: all the patients time was 0-9 hours in six days, but in 7 day some patient reported with 12 hour pratyagamana kala.

Kshudakala: in day1, 32.25% patients were with 0-2 hours, 61.29% with 3-5 hours, and 6.45% with 6-8 hours, in day2, 32.25% patients were with 0-2 hours, 61.29% with 3-5 hours, and 6.45% with 6-8 hours, in day3, 35.48% patients were with 0-2 hours, and 64.51% with 3-5 hours, in day4, 32.25% patients were with 0-2 hours, 61.29% with 3-5 hours, and 6.45% with 6-8 hours, in day5, 28.57% patients were with 0-2 hours, 57.14% with 3-5 hours, and 14.28% with 6-8 hours, in day6, 28.57% patients were with 0-2 hours, 61.90% with 3-5 hours, and 9.52% with 6-8 hours, while in 7 day 90.47% patients were with 0-2 hour kshuda kala and 9.52% with 6-8hour kshuda kala.



Retention time: a significant difference reported in all 7 days retention time, in day1 retention time was 3-11 hours, day2 retention time was 4-11 hours, day 3 retention time was 4-16 hours, day4 retention time was 5-12 hours, day5 retention time was 2.45-13 hours, day6 retention time was 3-11 hours and day7 retention time was 2-10 hours.



Vatanulomana: all the admitted subjects were reported as proper evacuation of flatus, faeces and urine.

Agnidipti: 6.45% patient's agnidipti hours was 6-8 hours, 70.96% patients with 3-5 hours, and 22.58% with 0-2 hours.

Gatrasnigdhatta: 35.48% with mriduta and 64.51% with oiliness of skin.

Purishsnigdhatta: 19.35% with soft stool and 80.64% with loose stool with Sneha.

Snehodvega: 87.09% with no aversion and 12.90% with nausea.

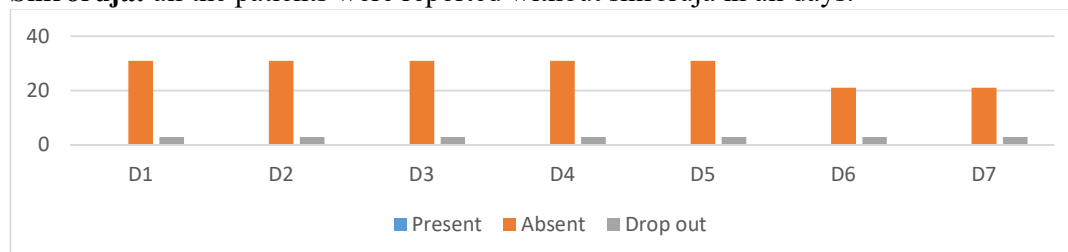
Klama/glani: 3.22% with enthusiastic, 61.29% with reasonably active as usual, 32.25% with tiredness without exertion.

Anghalagvata: 3.22% with heaviness in body, 16.12% with usual lightness in the body and 77.41% with feeling of lightness in the body.

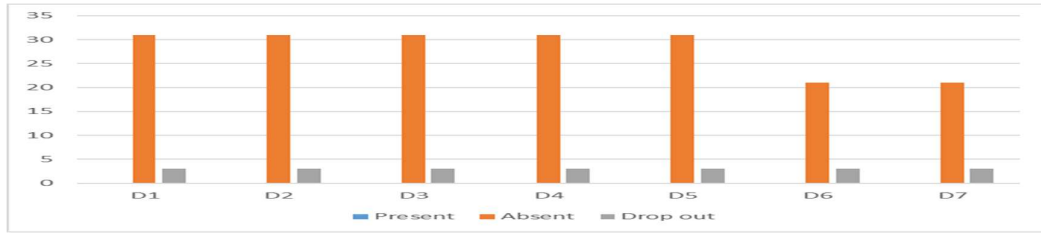
Score pattern: 19.35% with avara samyak snigdha lakshana, 61.29% with Madhyama samyak snigdha lakshana, 12.90% with Pravara samyak snigdha lakshana and 3.22% with Asnigdha lakshana.

JEERYAMANA LAKSHANAS

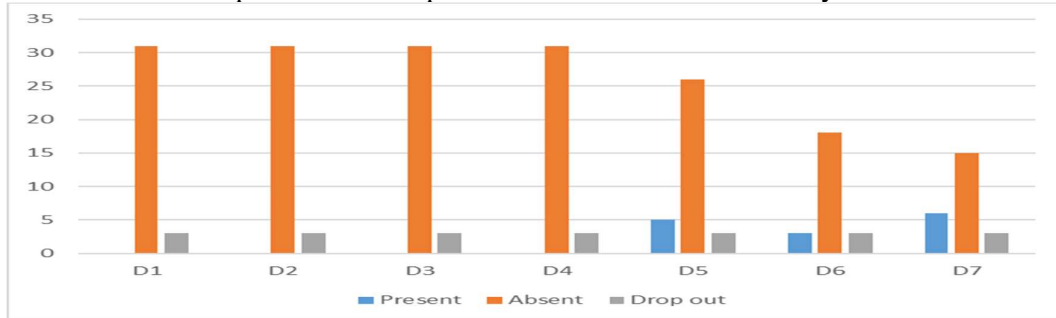
Shiroruja: all the patients were reported without shiroruja in all days.



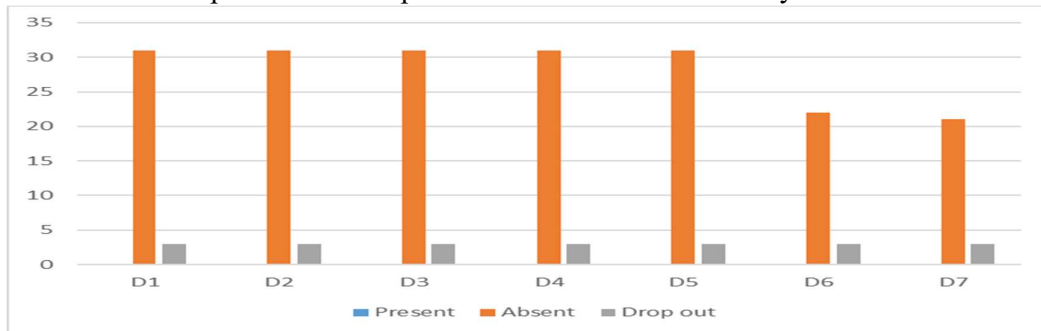
Bhrama: all the patients were reported without bhrama in all days.



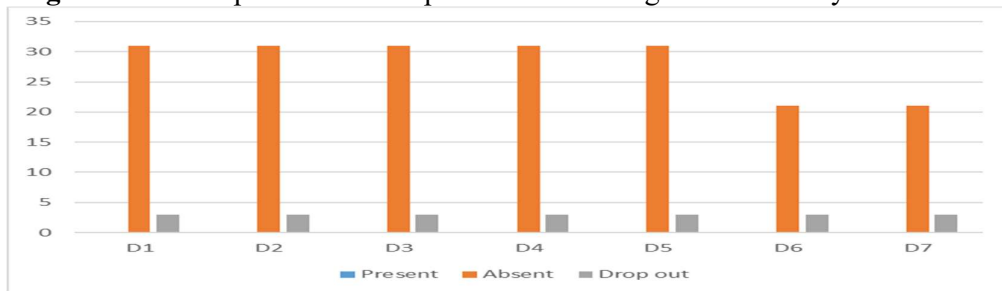
Lalasarava: all the patients were reported without lalasarava in all days.



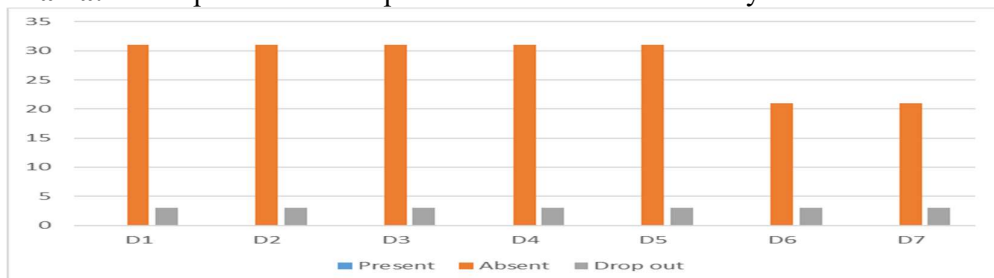
Murcha: all the patients were reported without murcha in all days.



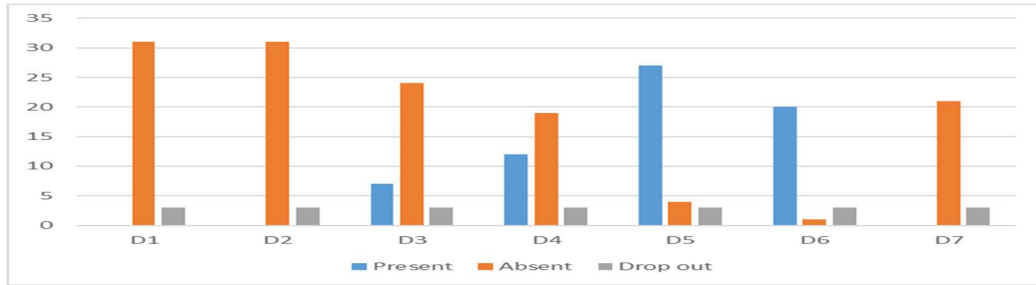
Angasada: all the patients were reported without Angasada in all days.



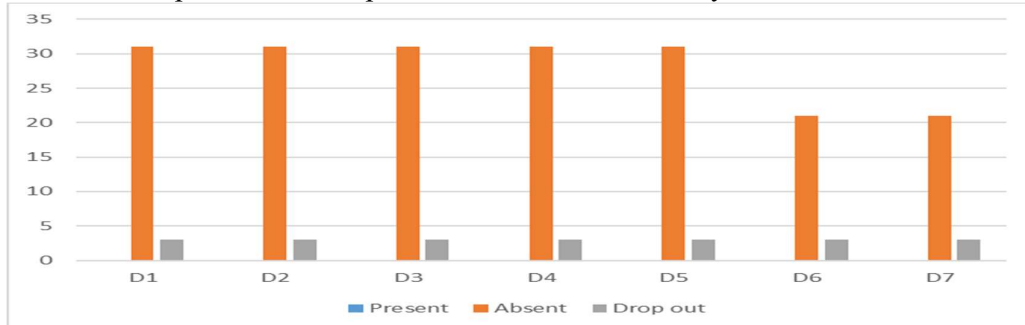
Klama: all the patients were reported without klama in all days.



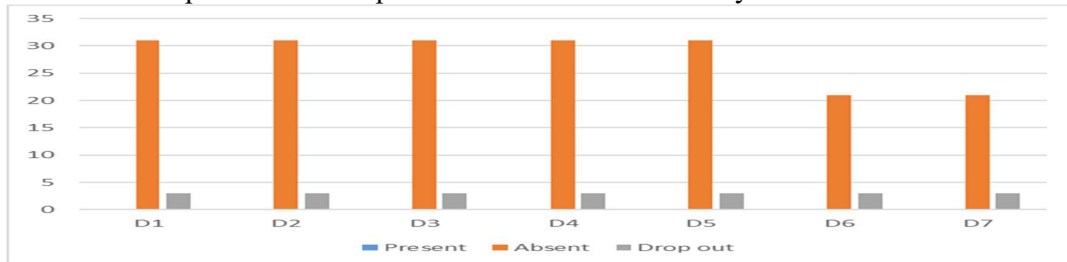
Trishna: In some patients trishna were reported absent in all days.



Daha: all the patients were reported without daha in all days.

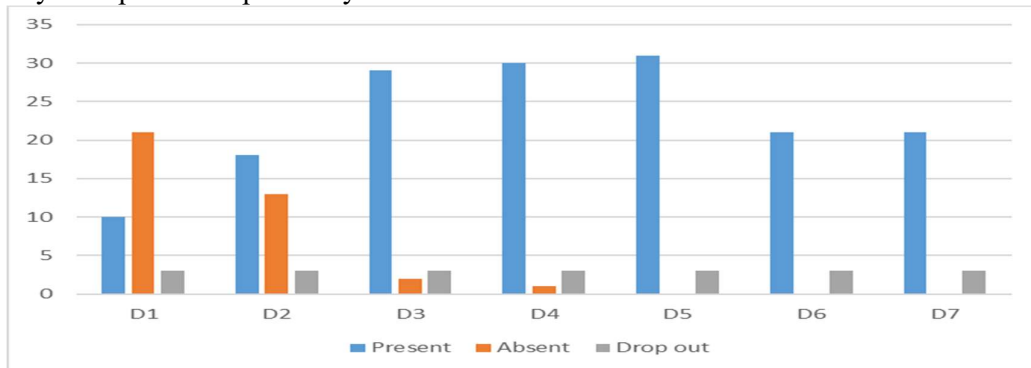


Aratti: all the patients were reported without Aratti in all days.

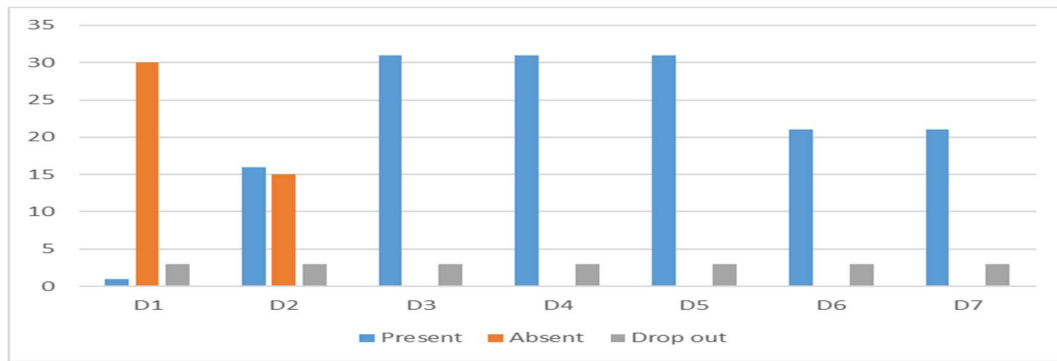


SAMYAK SNIGDHA LAKSHANAS

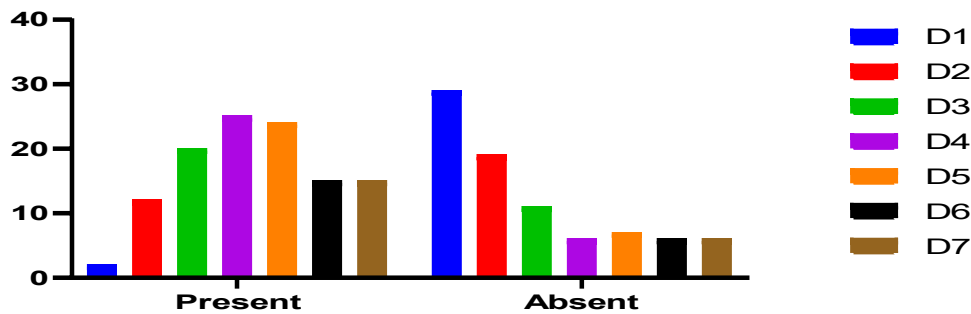
Vata anulomana: in day 1, 10 patients, day 2, 18, day 3 29, day 4 30, day 5 31, day 6 21 and day 7 21 patients reported by vatanulomana.



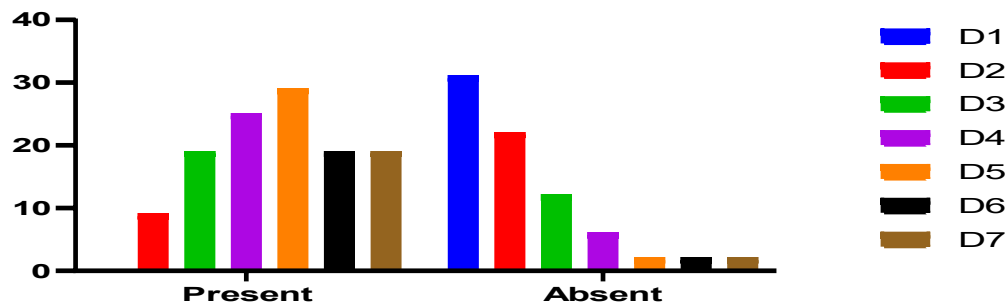
Diptagni: in day 1 one patient and day 2 16 patient while in day 3, 4, 5, 6, and 7 all patients were reported by diptagni.



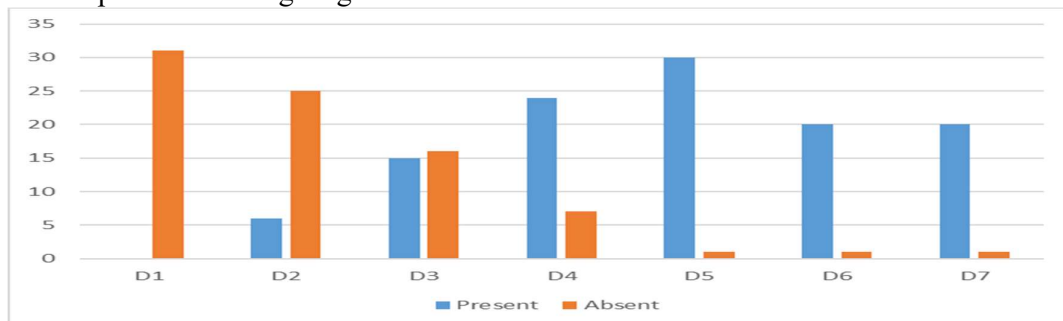
Asamhatavarcha: 2 patients in day 1, 12 in day 2, 20 in day 3, 25 in day 4, 24 in day 5, 15 in day 6 and 7 were reported positive for asamhatavarcha.



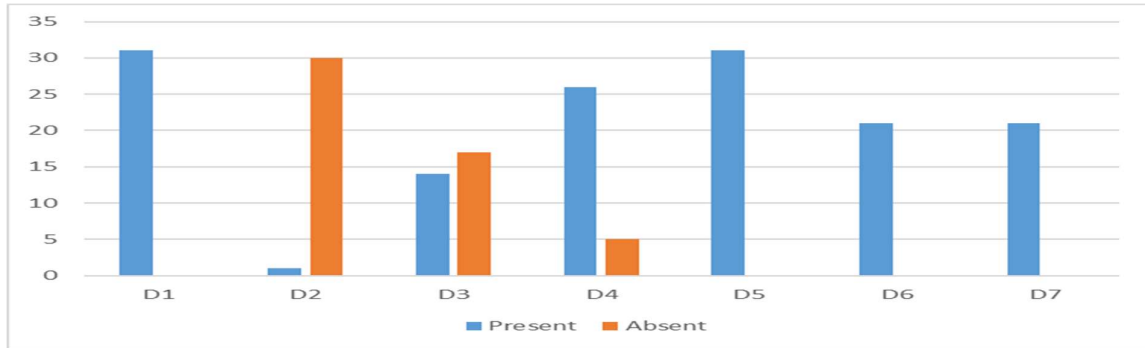
Snidhavarcha: 9 patients in day1, 19 in day 3, 25 in day 4, 29 in day 5, 19 in day 6 and 19 in day 7 were reported with snidhavarcha.



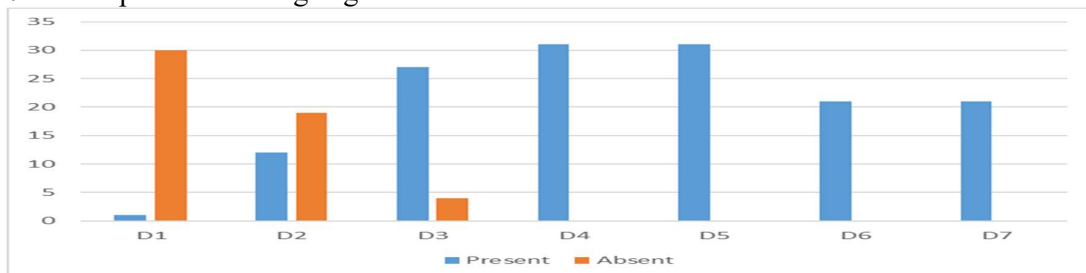
Snidhagatra: 6 patients in day 2, 15 in day 3, 24 in day 4, 30 in day 5, 20 in day 6 and 7 were reported with snidhagatra.



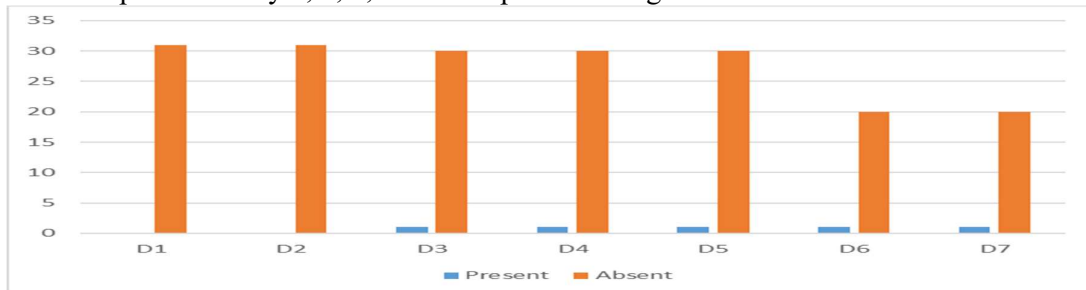
Mardavata: 1 patients in day 2, 14 in day 3, 26 in day 4, 31 in day 5, 21 in day 6 and 7 were reported with mardavata.



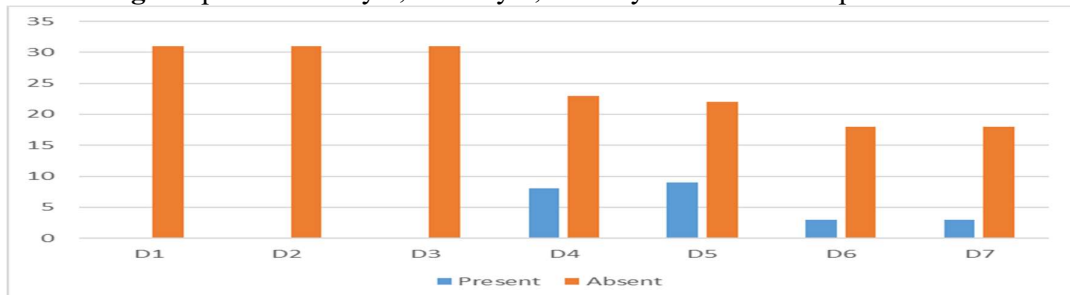
Angalaghava: 1 patient in day 1, 12 in day 2, 27 in day 3, 31 in day 4 and 5, 21 in day 6 and 7 were reported with angalaghava.



Glani: 1 patient in day 3, 4, 5, 6 and 7 reported with glani.

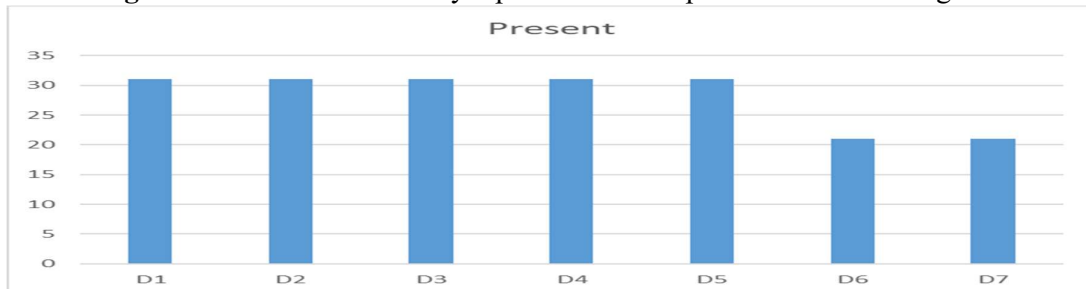


Snehodvega: 8 patients in day 4, 9 in day 5, 3 in day 6 and 7 were reported with snehodvega.



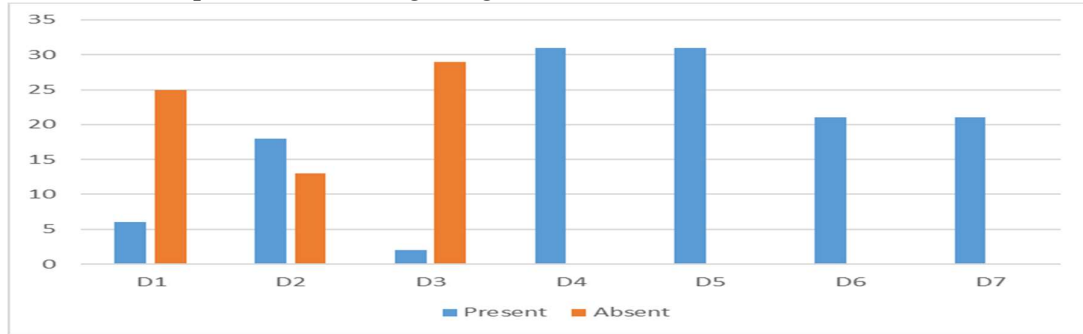
.SAMYAK ANUVASANA LAKSHANAS

Returning of faeces: all different day's patients were reported with Returning of faeces.

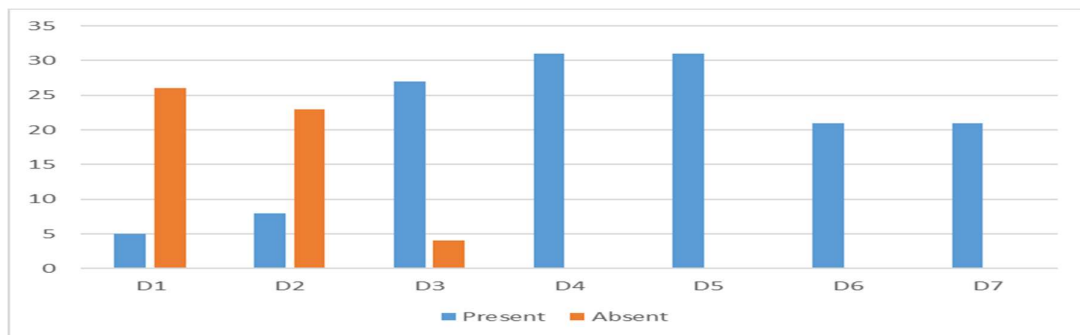


Feeling of lightness: 6 patients in day 1, 18 in day 2, 2 in day 3, 31 in day 4 and 5, 21 in day

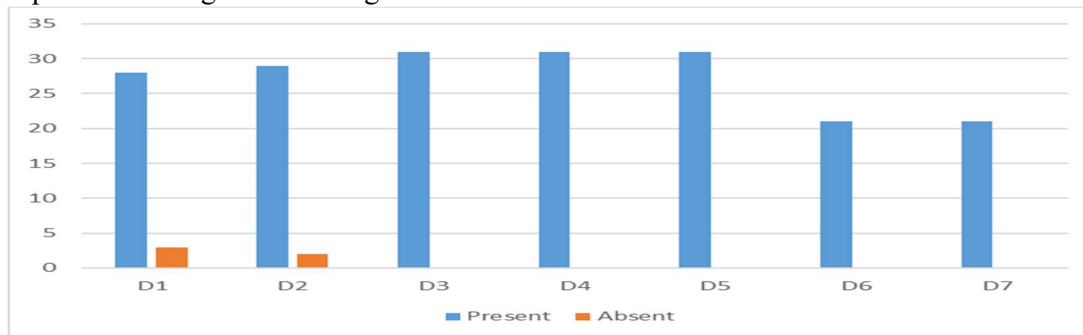
6 and 7 were reported with feeling of lightness.



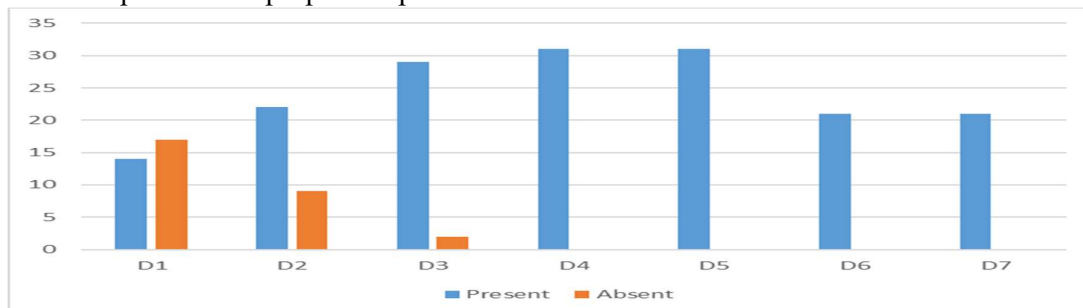
Increase in strength: 5 patients in day 1, 8 in day 2, 27 in day 3, 31 in day 5, 21 in day 6 and 7 reported in increase in strength.



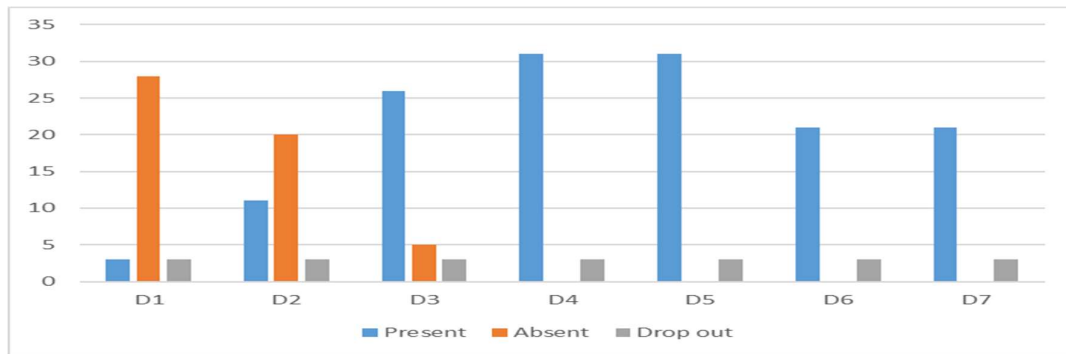
Regulation of urges: 28 patients in day 1, 29 in day 2, 31 in day 4 and 5, 21 in day 6 and 7 reported with regulation of urges.



Proper sleep: 14 patients in day 1, 22 in day 2, 29 in day 3, 31 in day 4 and 5, 21 in day 6 and 7 were reported with proper sleep.

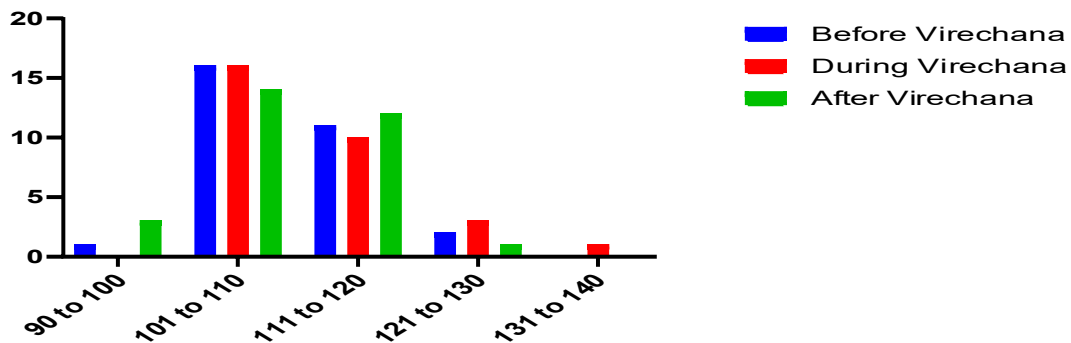


Indriraprasadana: 3 patients in day, 11 in day 2, 26 in day 3, 31 in day 4 and 5, 21 in day 6 and 7 reported with indriraprasadana.

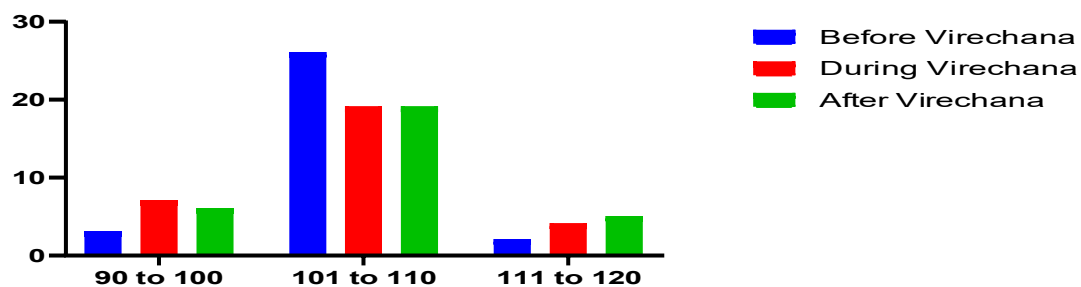


VIRECHANA ASESSMENT

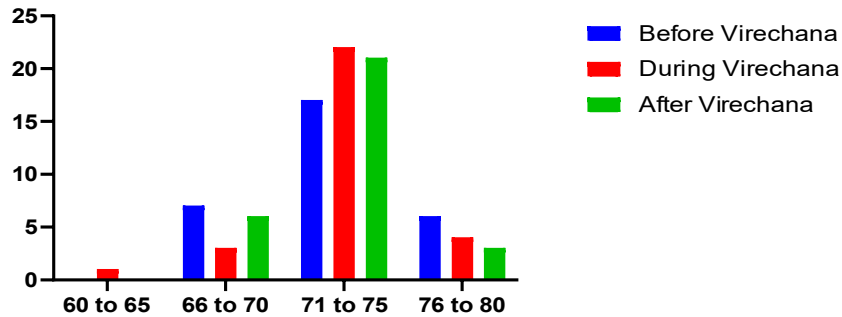
SBP: before virechana 1 patient were with SBP 90-100, 16 with 101-110, 12 with 111 to 120, 2 with 121-130. After virechana 17 with 101-110, 10 with 111-120, 3 with 121-130 and 1 with 131-140, while after virechana 3 with 90-100, 14 with 101-110, 12 with 111-120, and 2 with 121-130.



DBP: before virechana 3 patients DBP was 90-100, 26 with 101-110, and 2 with 111-120, during virechana 7 with 90-100, 19 with 101-110, and 5 with 111-120, while after virechana 6 with 90-100, 19 with 101-110, and 6 with 111-120.

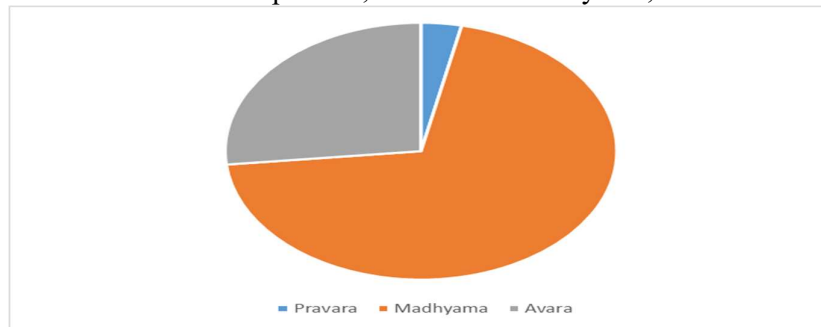


Pulse: before virechana 7 patients pulse was 66-70, 18 with 71-75, and 6 with 76-80, during virechana 1 with 60-65, 4 with 66-70, 22 with 71-75, and 4 with 76-80, while after virechana 6 patients pulse was 66-70, 22 with 71-75, and 3 with 76-80.



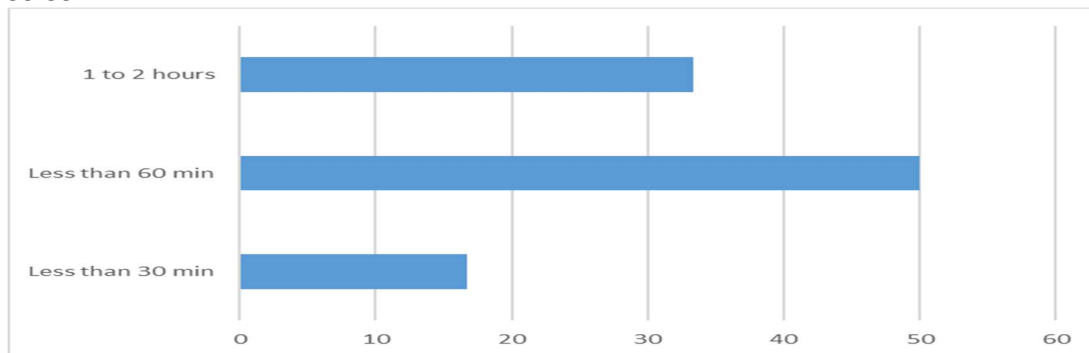
Samyak Virikta Lakshana: all patients were with Samyak virikta lakshana.

Samsarjana Krama: 3.33% with pravara, 70% with madhayama, and 26.66% with avara.

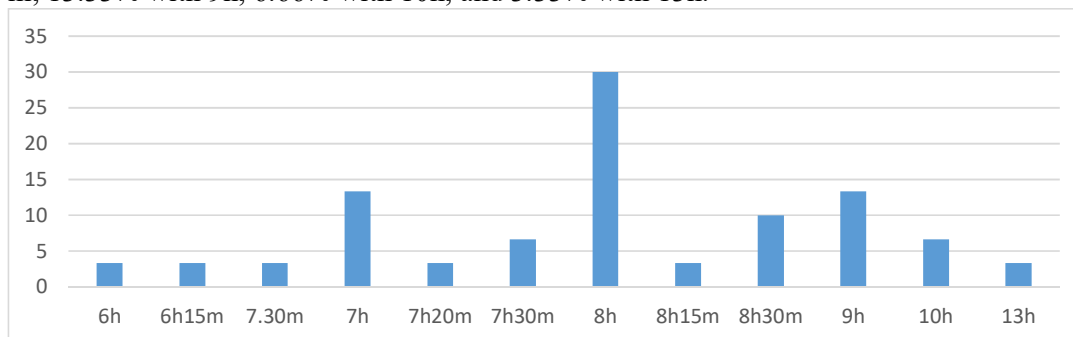


Virechana Palatability: all admitted patients reported with ACV palatability.

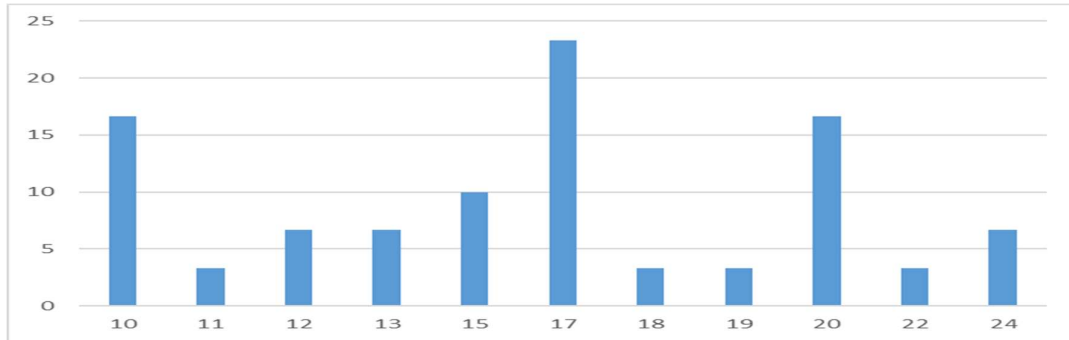
Virechana time of first VEGA: 16.66% with less than 30 min, 50% less than 60 min, and 33.33% with 1-2 hours.



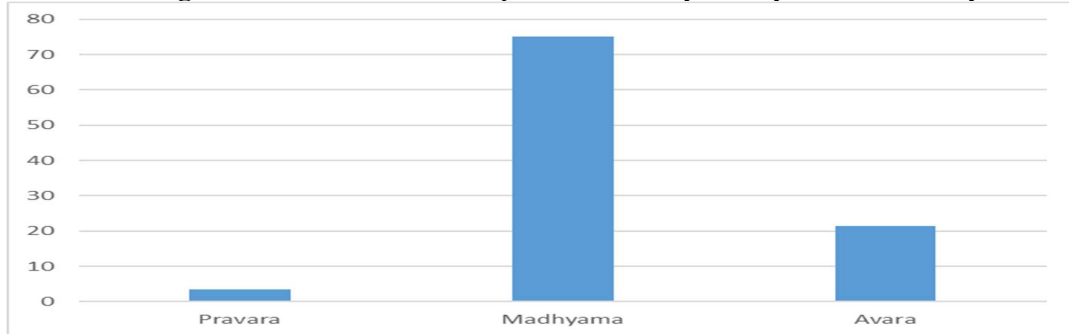
Virechana duration virechana: 3.33% with 6 h, 6 h 15 min, and 7.30 min, 13.33% with 7 h, 3.33% with 7h 20 min, 6.66% with 7.30 min, 30% with 8 h, 3.33% with 8.15m, 10% with 8.30 m, 13.33% with 9h, 6.66% with 10h, and 3.33% with 13h.



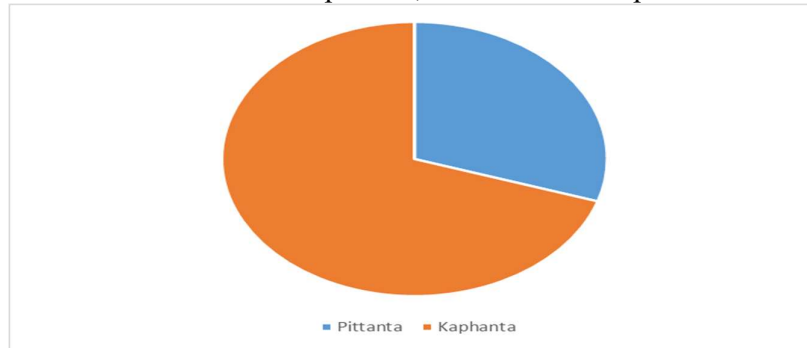
Virechana vega number : it was 10-24, highest number of patients reported with 17 and 11, 18, 19 and 22 with least number of patients.



Virechana vegiki shuddhi: 3.57% with pravara, 75% by madhyama, 21.42% by avara.



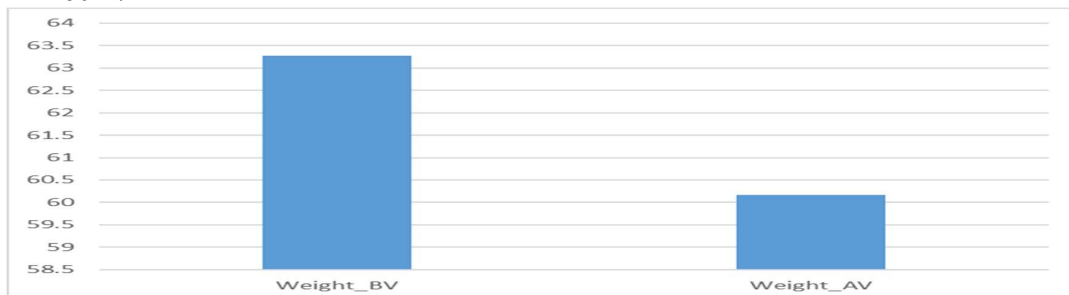
Virechana antaki shuddhi: 30% with pittanta, and 70% with kaphanta.



Virechana vyapat: all subjects were reported without the Virechana vyapat.

Management of Virechana Vyapat: all subjects were reported without Virechana management vyapat.

Weight: a significant reduction in weight reported when compared before and after the treatment. Before the treatment mean weight of group was 63.37 while after the treatment it was 60.17.



DISCUSSION

Age: most of the patients in the study were from 21-30 age group.

Gender: most of the patients in the study were female i.e., 70.58%

Religion: Hindu community members were maximum in the study.

Education: most of the patients were graduate (23.52%) and post graduate (50%), there was no relation of disease with education reported.

Socioeconomic status: 2.94 % poor, 5.88% lower middle class, 52.94% middle class, 47.05% upper middle class, and 20.58% rich. In the study no relation reported between the socioeconomic status and disease.

DISCUSSION ON RESULT

Deepana Pachana Days: *Niramata* is attained in 8.82% subjects on 2nd day; 32.35% by 3rd days; 14.70% by 4th day; 11.76% by 5th days, 26.47% by 6th days and 5.88% by 7th days.

Kostha type: In this study all the subjects were taken with madhyam kostha.

OBSERVATION OF SAMYAK SNIGDHA LAKSHANA THROUGH SNEHA BASTI

Vatanulomana-

- *Vatanulomana* was observed from day 1st in 10 subjects, but almost 3rd day shown in 29 subjects, by day 4th for 30 subjects, by day 5th for all 31 subjects were attained *Vatanulomana*, in day 6th for 21 subjects, in day 7th for 21 subjects were attained *Vatanulomana*.
- *Vatanulomana* is the first symptom mentioned by *acharyas* in the *samyak snigdhta lakshanas*, this symptom developed on the very first day of *anuvsana Basti*. Because *vatanulomana* is the most common symptom of correct *anuvsana Basti* administration, regardless of the dose, *vatanulomana* was seen in this study.
- *Vatanulomana* has been assessed by *samyak vata pravritti* and *mala pravritti* in each day

Deeptagni (Increase appetite)

- Almost all 31 subjects in day 3rd, 4th, 5th and 21 subjects in day 6th and 7th were reported by *deeptagni*.
- *Deeptagni* was the 2nd observed symptom for *samyak snigdhta lakshana* (SSL) by giving the *sneha Basti*, though the *anuvasana Basti* had been given after the attainment of *nirama lakshanas* at the *jathar agni* level.[16]
- The status of *agni* should be maintained throughout the whole duration of therapy.
- Here *deeptagni* had been considered for the increased appetite of subjects after *sneha Basti* course started.
- On the 3rd day all subject had been noticed for *deeptagni*.
- This denotes the *snehata* has been reached upto *pachyamanashaya* (bypass portal circulation to liver) by 3rd day of *snehaBasti*.

Asamhata Varcha (Evacuation of stool with oil)

- Most of the subject started achieving *lakshana* by 4th day and *asamhata varcha* continued for 6th to 7th days.
- As the *arohana sneha* is continued through the *sneha Basti*, *rukshata* has been reduced and increased *snehamshya* in the *purishavaha* and *annavaha srotas* and causing the *deeptagni* and *purisha asamhata*.[17]
- The *Arohana sneha* must have been reached the level of hepatic and the access unsaturated fat must not have been metabolised properly through the liver and it's evacuated through the bowels.

Angalaghava (Feeling of lightness in body)

- From day 3rd day onwards subject feels *laghuta* in *sharir* but from day 4th and 5th all subjects feel lightness in the body subject 21 in day 6th and 7th were reported with *angalaghava*.
- *Anga Laghava* refers to lightness in the body which can be observed when there is proper *Gati of Vata*. *Snehana* removes obstruction to the *Gati of Vata* by *Vatanulomana* property hence individual may feel *Anga Laghava*. As the *vileyana* of vitiated *Dosha* is increased during *Snehana*, it comes to the alimentary tract.[18]
- Also, when the obstruction of *Strotas* is removed, pressure of *Vata* helps to bring the *Dosha* in *kostha* from *shakha*, thus results into feeling of lightness in the body.
- Also drinking of Luke warm water is advised during *Snehana*, which produces *Vatanulomana* and *Srotoshodhana* by reducing *Ama* and thus gives *Anga Laghava*.
- *Arohana Snehana* through *sneha Basti* attains *Anga Laghava* indicates, proper *Srotoshodhana* (due to *Gati of Mala* towards *Koshtha*) and *Vatanulomana* which is important for appropriate *Shodhana* after *Snehana*.[19]

Snigdha gatra (oiliness of the body)

- From 3rd day onwards snigdha gatra was noticed by subjects but from day 4th, 31 subject achieved snigdha gatra in day 5, subject 21 in day 6 and 7 were reported with snigdhagatra
- *Twak Snigdhata* was found due to the steadily rising dosage of *Anuvasana Basti*.
- As per *Susruta Acharya* Veerya (potency) of *sneha Basti* travels throughout the body and spreads day by day.
- *Basti* reaches *Rasa Dhatu* on the fourth day and *Mamsa Dhatu* on the fifth day. As skin is *UpaDhatu* of *Mamsa* and *Vyaktsthna* (place of manifestation) of *Rasa*, it means that *Sneha* can reach skin in 5 days. And achieve *Snigdhata* and *Mrdutva* in the *Twak*.[20]

Snehodvega(Nausea feeling)- From the day 4th number of subject feel nausea i.e 8, after that in day 5th, 6th and 7th there were 9 and 3 subject who feels nausea during the course of *sneha Basti*.

Glani (feeling of uneasiness)- From day 4th onwards only 1 subject had shown with the symptom of *glani*

Nidra (Sleep)- From 3rd day onwards, all subjects reported with proper sleep i.e increased duration of sleep

Balavridhi (Increase in strength)- From 4th day onwards all subject reported in increase in strength

Discussion on Symptoms of Jeeryamana:

- 12-21 number of subjects displayed *Urdhvaga Utklesha* with symptoms such as *Kanthopalepa*, *lalasrava* and *trishna*. .
- If *Anuvasana Basti* is administered continually, *Acharya Charaka* claims that *Utkleshana* of *Dosha* and *Agnivridhi* would appear. In this study *Anuvasana Basti* was given for seven days and also in increasing doses as per the classics (ch.si.4/50)
- *Utkleshana of Dosha* occur as a result of large-scale ghee administration.
- However, in this study, given the maximum amount of *Anuvasana Basti* for seven days, which is the limit of *abhyantara Snehapana*.

- *Shiroruja* was also noticed on the third day in *snehapana* but in this study *shiroruja* was not found
- *Klama* was first noticed on the fourth day in *snehapana* but in this study *klama* was not found
- A blockage in the route of sense organ perception can cause tiredness without much effort.
- This lassitude arises as a result of *Guru* and *Manda* qualities in significant amounts of *Sneha*, and it may be recognized during *Sneha* digestion.[21]

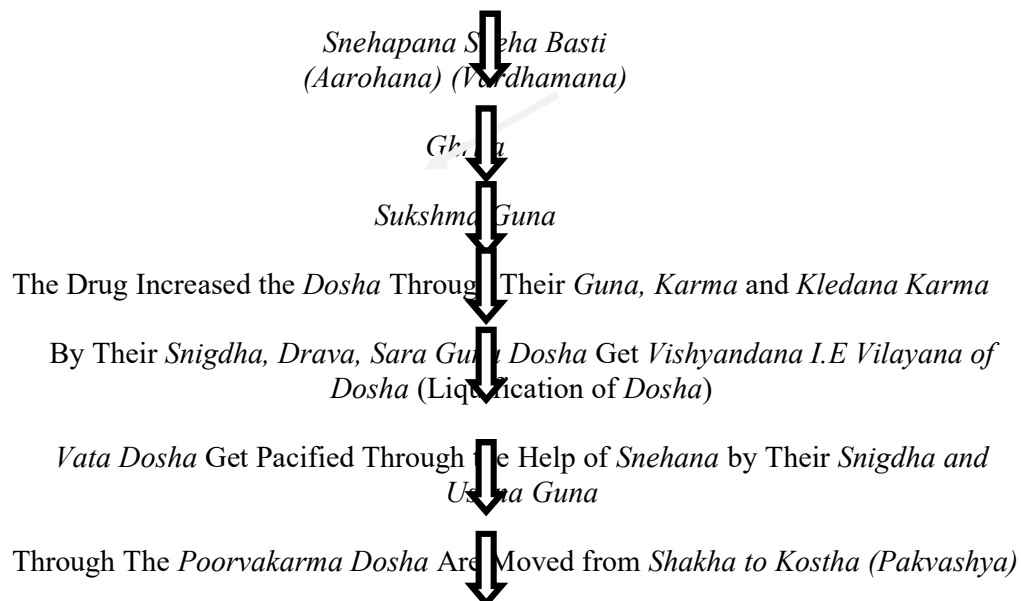
DISCUSSION ON VARDHAMANA MATRA OF SNEHA BASTI

- **Matra:** *Shodhananga sneha matra* refers to achieve or prepare the body to bring vitiated *dosha* from *shakha* to *kostha* by means of *vridhhi* (increasing).
- **Vischandana** (by dissolving or increased fluidity of *dosha*).
- **Paka** (digestion or resulting from loosening of *dosha*).
- *Srotomukhi vishodhanartha*, *Vata nigraha*
- So, the *matra* of the *shodhananga snehapana* must be as the virtue of bringing the *dosha* from *shakha* to *kostha*.

OBJECTIVE:

- In this study as the objectives is to attain the *samyak snigdha lakshana* through *vardhamana matra*.
- So, classically also the recent Authors like *Vrundamadhava*, *Vangesene* and *Kalyankaraka*, they have discussed in their text book about the concept of *vardhamana matra* through *Sneha Basti karma* (rectal route) .[22]
- Where in this *vardhamana matra* could be used as *Brumhana*, *snehana* or either *vishodhana matra*.

Flow Chart No. 1-Shodhananga Sneha Through Oral as Well as Rectal Route Snehana Through



UTKLESHANA SYMPTOMS WITH VARDHAMANA MATRA OF SNEHA BASTI

- In this study efforts have been done, through the *vardhamana matra*, through *Sneha Basti* to achieve the *utkleshana* of *dosha* and to achieve the *dosha* from *shakha* to *kostha* concept.
- It is also observed that the *pravara shuddhi* were found in 3% subjects and 70% subjects with *madhyam shuddhi* while administrating the *vardhamana matra* of *Sneha Basti* as per *Vrundamadhava*.
- Some *utkleshana* symptom like *Jeeryamana lakshana* like *trishna*, *lalarava* and *snehaodvega* were observed and no adverse effects has been noticed after the *shodhana karma*.
- So, we can say in the context as the 4th & 5th day onward the *utkleshana* were started in subjects 84ml and 96ml as a fixed dosage of *vardhamana matra* according to *Vrundamadhava* could be sufficient dosage to achieve the *utkleshana* of *doshas* / and to achieve the *shakha* to *kostha dosha gati* and to achieve a proper *shodhana lakshanas*.

DISCUSSION ON ONE DAY VISHRAMA KALA:

- This study was framed over the healthy individuals, one day *vishramakala* was given.
- It was observed that one day *vishramakala* would be sufficient for the *dosha* to attain from *shakha* to *kostha* and in this study one day *vishramakala* did not cause any of adverse observations /symptom over a subject.
- It also has been observed that one day *vishramakala* would be sufficient at the time of *shodhana* to bring *dosha shakha* to *kostha*, if proper *samyak snigdha lakshana* have attained especially in the case of *virechana karma*.
- *Utkleshana* of *kapha* as well as *pitta* has been occurred by the *snehana* through *sneha Basti* as the *samyak snigdha lakshanas* were properly observed on the subjects but not compared to the *snehapana* (orally).
- 70% of the subjects intervened with *virechana karma* were shown *kaphanta lakshanas* and 30% were *pittanta lakshanas* showing, the proper *utkleshana* of the *kapha* by *snehana* administered through *sneha Basti*.
- According to classics three days of *vishramakala* after *snehapana* should be given to achieve *manda kapha avastha* due to involvement of *amashya* i.e *kapha sthana* but in current study there is no direct contact of *amashya* so, *kapha utkleshana* as compare to oral route is minimal that's the reason one day *vishramakala* was decided.[23]
- As this study has got the objective of achieving *samyak snigdha lakshanas* for *utkleshana* of *dosha* through *sneha Basti*, the *utkleshta doshas* from all over might be infiltrating into *kostha (Pakwashaya)* and through *Shodhana (Virechana)* *doshas* got eliminated.
- It can be interpreted with above discussions, to get the *kapha utkleshta avastha* the *uttam matra* of *sneha Basti* in *vardhamana matra* could be planned for *vamanartha shodhana*.

CONCLUSION

- In this study more subjects were found having *Kaphānta Virechana* as compare to *pittanta virechana*.
- In more patients *Virechana Vegas* found between 10-24 i.e. *Madhyama Śhuddhī*. Hence by considering *Āntakī* and *Vegakī Śhuddhī*, it is clear that, *Avara Snigdhatā* cause improper *Śhuddhī* of *Virechana*

- In the present study, very positive results were obtained in terms of Vegakī, Mānikī and Laingikī Śhuddhi .
- Śharīra Lāghavata, Indriya-Mana Prasannatā etc. were found as immediate symptoms of Samyak Śhodhana .
- Even though digestion of Sneha taken orally and through rectal route is different, Samyak Snigdhatā Lakṣhanas were assessed in this study after administration of Anuvāsana *Basti*.
- Patients who were administered Anuvāsana *Basti* in increasing dose showed samyak Snigdhatā. It indicates that the absorption of Sneha through rectal route
- On the basis of this clinical study, the concept of Anuvāsana *Basti* as an alternative to Snehapāna is seemed to be proved.
- So, on the basis of this assessment and observation we can say rectal route is safe and alternative method to administered snehana to achieve the samyak snigdhta lakshana in place of oral route.
- This study proves a significant result to achieve Samyak Snigdha Lakshana with the Sneha *Basti* and the objectives of the study were fulfilled.
- During the treatment vitals like pulse rate, blood pressure and strength of the subjects were found maintained, unlike the Shodhana through oral route of administration of Sneha; however, before and after Virechana a significant reduction in the weight has been reported.
- So, the null hypothesis is rejected and we can say Vardhamana Matra of Sneha *Basti* is effective to achieve the Samyak Snigdha Lakshana, the alternate Hypothesis is proved.

CONFLICT OF INTEREST -NIL

SOURCE OF SUPPORT -NONE

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