



## Case Study

### TO ASSESS THE EFFECT OF YAPANBASTI IN AGNIMANDYA AND DEHABALAKSHAYA- A CASE STUDY

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#### ABSTRACT

Ayurveda has a variety of ways for manifestations and managements for different *Vyaadhis*. Ayurveda believes that diseases occur mainly due to disturbance in *Jatharagni* (digestive fire). So in order to cure any disease, *Agni* is one of the important factors to be concentrated. Similarly, the *Dehabala* (strength of the body) is also important for healthy lifestyle. In order to normalize the *Agni* and *Dehabalakshaya*, various methods are given in Ayurvedic Classics. *Panchakarma* is one of them. In *Panchakarma*, *Basti* is said to be the best and can be used in almost all the *Vyaadhis*. *Yapanbasti* mentioned in classics is one of the types of *Basti* which can be used in the management of *Agnimandya* and for increasing *Dehabala*. A case study was taken for research having complaints of *Agnimandya* and *Dehabalakshaya*. Written informed consent was taken and *Basti Poorvakarma*, *Pradhankarma* and *Paschatkarma* were done for 8 days. **Observation and results:** *Jaranshakti*, *Abhyavaharanshakti*, *Ruchi*, *Vatamalamutramukti*, *Balavridhhi* and *Swaravarnayoga* were improved. However, there was no significant change in weight. **Discussion:** *Yapanbasti* if given for more than 8 days may be effective in increasing the weight. It is easy to administer it by considering today's busy schedule. It can be given in almost all the diseases. **Conclusion:** *Yapanbasti* is effective in *Agnimandya* and *Dehabalakshaya*. **Summary:** *Yapanbasti* is a *Niruha Basti* which can be used for the management of *Agnimandya* and for increasing *Dehabala*.

**KEYWORDS:** *Jatharagni*, *Agnimandya*, *Dehabalakshaya*, *Yapanbasti*.

#### INTRODUCTION

Ayurveda is a precious gift of Indian medical Science. It is flourishing day by day due to its increasing demand in various diseases. There are varieties of manifestations for identification of diseases and also various lines of treatments are given in Ayurveda classics. People nowadays are suffering from various diseases and lifestyle disorders due to the busy job schedule and its pattern, hectic duties, stress, unhealthy diet plan, lack of sleep etc, which ultimately affects various systems of the body especially the Gastrointestinal system. Ayurveda believes that diseases occur mainly due to disturbance in *Jatharagni*<sup>[2]</sup> (digestive fire). Whatever the diet we take, it has some effect on our *Agni* directly and indirectly. Hence, occurrence of diseases takes place. So in order to cure any disease, *Agni* is responsible for the digestion of the food we take and it is transformed into *Aahar Ras* and *Mala* further. The *Aahar Ras* is responsible for the formation and nutrition of the *Dhatus*. It influences *Dehabala* of an individual. The *Dehabala*<sup>[3]</sup> (strength of the body) is also an important factor for healthy lifestyle. In order to normalize the *Agni* and increase the *Dehabala*, different ways are presented in Ayurveda classics.

*Panchakarma* is one of them. *Agni* and *Dehabala* are given very much importance before during and after the *Panchakarma* procedures. *Basti*<sup>[4]</sup> is one of the *Panchakarma*, which is indicated in almost all the diseases. *Yapan Basti*<sup>[1&15]</sup> is one of the type of the *NiruhaBasti* mentioned in Ayurveda which can be given to different individuals with different diseases. Hence, a case study is taken for research to observe the effects of *Yapanbasti* in *Agnimandya* and for increasing *Dehabala*.

A 18 years old female patient residing in Ghanekhunt Lote, Tal Khed, Dist- Ratnagiri came to Parshuram Hospital with chief complaints *Agnimandya*, *Aruchi*, General weakness (*Dehabala kshaya*) since 4 months. The individual was a student. She had the family history of *Amlapitta* to both the parents. No other major illness was found. Also no surgical history was found. The patient has taken antacids whenever hyperacidity occurred and had temporary relief with the medications. She had menstrual history with regular, moderate and mild painful menses.

**Examination:** Written informed Consent for *Basti* was taken before examinations. Later following examinations were carried out.

*Nadi*- 78/min, *Mala*- *Ashrushta* (*Malapravritti* with discomfort in abdomen), *Mutra*- *Srushta*, *Jivha*- *Sama*, *Shabda*- *Prakrut*, *Sparsh*- *Natiushna*- *Natisheeta*, *Druk*- *Prakrut*, *Akruti*- *Krush*, BP- 110/70 mm of Hg.

S/E- RS- AEBE, clear.

CVS- S1S2 Normal, CNS- Conscious and well oriented. P/A soft.

L/E- no specific rectal abnormality was observed. *Strotas Parikshan* was done.

### **Nidan Panchak**

*Hetu*- *Apathya* (potato chips, vada pav and fast food, not taking food when *Kshudhapravartan* is present, inadequate sleep)

*Poorvaroop*- *Aruchi*, *Daurbalya*

*Roop*- Gradual increase in *Agnimandya*, *Aruchi*, general weakness (*Dehabalakshaya*).

*Samprapti*- *Hetu Sevan* - effect on *Agni*- *Apathya* *Aahar* goes into *Amashaya*- *Jatharagni* has become weak- *Aamnirmiti* influencing the *Agnimandya*- unable to digest the *Aahar*- *Aahar Sevan* before the digestion of previous meal- *Agnimandya*- no proper *Aahar Ras* - no *Vyavsthitdhatu Nirmiti* and *Poshan-Dehabalakshaya*.

*Samprapti Bhang*- *Yapan Basti*- absorbed in the intestine- due to *Agnidipan* and *Pachan* properties of the *Dravyas*, *Agnibala* is increased- *Agnidipan*- *Aam*

*Pachan*- *Avaran* is removed which further helps in normalizing *Agni*- *Aahar Pachan*- proper *Aahar Ras*- proper *Dhatu Nirmiti* and *Pachan- Dehabalavridhi*.

*Upashay*- *Ushnodakpan*, *Samyak Nidra*.

After all examinations and *Pariksha* the procedure was carried out.

### **Drug preparation**

a) For *MatraBasti*- *SahacharTail* (120ml)+ *Saindhav* (5gm)

b) For *Niruha Basti/ YapanBasti*- *Madhu* (50ml)+ *Saindhav* (10gm)+ *Sahachar Tail* (50ml)+ *Godugdha* (100ml)+ *Goghruta* (50ml)+ *Mamsarasa* (80ml)+ *Kwath* of *Dashamool*, *Erandamool*, *Ashwagandha* and *Shatavari* (200ml). Drugs were mixed according to the above sequence one by one and emulsion was made.

### **Procedure**

a) *Poorvakarma*-Patient was asked to lie down on *Snehan* table. *SthanikSnehan* (10min) and *Swedan* (10min) were done.

b) *Pradhankarma*-

i) Patient was asked to take left lateral position for *Basti*. *Basti* was given. (*Matra Basti*- with syringe and *Niruha Basti*- with enema pot)

ii) *Tadan* was done and waited for *Pratyagaman* during *Niruha Basti*.

c) *Paschatkarma*- *Vishranti* for some time, *Snana* with warm water.

**Table 1: Schedule of Basti**

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8
<i>Anuvasan</i>	<i>Yapan</i>	<i>Anuvasan</i>	<i>Yapan</i>	<i>Anuvasan</i>	<i>Yapan</i>	<i>Anuvasan</i>	<i>Anuvasan</i>

### **Criteria for assessment<sup>[16]</sup>**

#### **Agnibala**

**Jaranshakti:** scoring according to *Jeerna Aahar Lakshana* present after 6-8 hrs after taking food. They are *Utsaha*, *Laghuta*, *Udgarshuddhi*, *Khsut*, *Trishna Pravritti*, *Yathochit Malotsarga*.

0- Presence of five symptoms.

1- Presence of four symptoms.

2- Presence of three symptoms.

3- Presence of two symptoms.

4- Presence of one symptom.

5- Absence of all the symptoms.

#### **Abhyavaharanshakti**

0- Taking food in good quantity twice/ thrice.

1- Taking food in normal quantity twice a day.

2- Taking food in moderate quantity twice a day.

3- Taking food in less quantity twice a day.

4- Taking food in less quantity once a day.

5- Person not at all taking food.

#### **Ruchi**

0- Equally willing towards all the *Bhojya Padartha*.

1- Willing towards some specific *Aahara/ Rasavishesha*.

2- Willing towards only one among *Katu/Amla/ Madhur* foodstuffs.

3- Willing towards only most liking foods not to the other.

4- Unwilling for food but could take the meal.

5- Totally unwilling for meal.

#### **Vatamalamutra Mukti**

0- Occurs easily in normal routine.

1- Difficulty in Defecation but *Malapravritti* daily with discomfort in abdomen.

2- Can't pass stool daily and feeling of heaviness in abdomen.

3- Passes stool after 2/3 days having gaseous distension.

4- Passes stool after 3/4 days with *Grathith, Sakashta + Malapravritti* and having gaseous distension with *Udgar Pravritti*.

#### Dehabala

##### Balavriddhi

- 0- No weakness
- 1- Slight weakness
- 2- Feeling of weakness but ability to work unaffected.
- 3- Ability to work affected.
- 4- Can't do any type of work.

##### Swaravarnayoga- texture, lusture and voice

- 2- Patient looks gloomy.
- 1- Lethargic and tired.
- 0- Patient looks cheerful.

##### Sharir Upachaya

- 0- No change
- 1- Increased in weight by 2kg.
- 2- Increased in weight by more than 2kg.

##### Observations and results

Table 2: Agnibala

Symptoms	Before treatment	After treatment
Jaranshakti	3	0
Abhyavaharanshakti	3	2
Ruchi	4	2
Vatamutrapurisha Mukti	1	0

Table 3: Dehabala

Symptoms	Before treatment	After treatment
Balavriddhi	3	2
Swaravarnayoga	1	0
Sharir Upachaya	0	0

Table 4: Probable mode of action

S.No	Dravya	Rasa	Guna	Vipak	Virya	Doshagnata	Karma
1.	Dashamool <sup>[5]</sup>	Tikta, Kashaya, Madhura	Laghu	Katu	Ushna	Tridoshaghna	Brimha, Grahi, Aruchinashak
2.	Erandamool <sup>[6]</sup>	Madhura, Katu, Kashaya	Guru, Snigdha, Sukshma	Madhura	Ushna	Vatakaphaghna	Agnidipan
3.	Ashwa-gandha <sup>[7]</sup>	Tikta, Katu, Madhura	Laghu, Snigdha	Madhura	Ushna	Vatapittaghna	Balya, Rasayan
4.	Shatavari <sup>[8]</sup>	Madhura, Tikta	Guru, Snigdha	Madhura	Shita	Vatapittaghna	Agnivardhak, Poshak, Balya
5.	Tail <sup>[14]</sup>	Madhura	Guru	Madhura	Ushna	Kaphavatanashak	Balya
6.	Godugdha <sup>[11]</sup>	Madhura	Snigdha, Guru	Madhura	Shita	Vatapittaghna	Brimhan
7.	Goghruta <sup>[12]</sup>	Madhura	Guru, Snigdha	Madhura	Shita	Tridoshaghna	Agnivardhak
8.	Madhu <sup>[10]</sup>	Madhura, Kashaya	Shita, Laghu, Ruksha, Grahi, Sukshma	Madhura	Ushna	Vatavardhak, Kaphaghna	Agnidipak
9.	Saindhav <sup>[9]</sup>	Madhura	Laghu, Snigdha	Madhura	Shita	Tridoshagna	Agnidipan Aruchinashak
10.	Mamsarasa <sup>[13]</sup>	Madhura	Laghu, Snigdha	Madhura	Shita	Tridoshanashak	Balya

**Mode of Action:** The drugs used in the *Basti*, after getting administered in the *Pakvashaya* are absorbed in the blood circulation. They circulate throughout the body and bring the *Dosha* located in various parts of the body into the intestine and eliminate through rectal route. The absorbed drugs also stimulate local enteric nervous system and improvement at cellular level all over the body. The absorbed drugs stimulate

the intestine to secrete hormones for better digestion of food and nourishment of *Dhatu*s which help in increasing *Agnibala* and *Dehabala*.

#### DISCUSSION

- 1) *Yapan Basti* can be given in any patients. Hence can be used for successful improvement in various diseases.

- 2) *Yapan Basti* when used for 8 days, there might be minute improvement in weight of the patient. Hence, if it is administered for more duration can be helpful in increasing *Dehabala* and weight of the patient.
- 3) *Parihar Vishaya* are not mandatory for this *Basti*. Hence, can be used in today's era of busy schedule.
- 4) Generally, *Basti* is not given till the *Agni* is normalized. But *Yapan Basti* can be the *Basti* which is used to normalize the *Jatharagni*.
- 5) *Yapan Basti* can be used in *Karshya*, *Daurbalya* also helps in nourishment of *Dhatus* gradually.

#### CONCLUSION

- 1) *Agni* and *Bala* are very important factor of an individual and when hampered can cause various effects on body leading to occurrence of diseases.
- 2) *Yapan Basti* is one of the types of *Niruha Basti* which can be given in almost all the diseases.
- 3) When *Yapan Basti* was administered in the patient for 8 days, improvement in *Agnibala* and *Dehabala* was observed.

#### SUMMARY

*Yapan Basti* can be very useful treatment in the management of *Agnimandya* and *Behabalakshaya*. *Agni* and *Dehabala* are among the *Dashavidh Parikshaya Bhava*, so need to be concentrated and treated if necessary. Thus the *Yapan Basti* can be a very effective treatment in *Agnimandya* for normalizing *Agni* and also increasing *Dehabala*.

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