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ROLE OF LEKHAN BASTI IN MEDOROGA- A CASE REPORT

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ABSTRACT

Sthaulya is an alarming health problem of modern society. It is a predominant metabolic disorder and described by Acharya Charak in Ashtaunindita Purusha. Many theory and medicament put toward us for the management of the disease but till now perfect remedy for this problem is not found in modern medicine also so people are expecting solution from ayurveda. It is mentioned among santarpana janita vyadhi in ayurvedic text. In sthaulya etiological factors mainly vitiate Meda-Kapha and Vata get avarita by excessive Meda. Thus if we used only aptarpaka Dravya, it increases the vitiated vata. Therefore treatment should be planed considering vitiated vata, meda and kapha. Panchakarma is the prime tool of Ayurvedic therapies. It mainly consider as Shodhana therapy. Acharya Charaka quoted that there is a chance of recurrence in disease treated by shaman therapy but Shodhana therapy cures the disease from its root and there is no chance of recurrence. Myocardial infarction ischemic heart diseases, atherosclerosis, hypertention, diabetes, osteoarthritis, impotency and mental disorder are some of the complication which are seen to have serious effect on the disease itself. Several studies were done in ayurveda and modern medicine. For the control of obesity (Sthoulyaroga). In ayurveda lekhan basti has a very important role to play in management of sthoulyaroga.

Keywords:sthaulya,meda, lekhan basti.

INTRODUCTION: The word basti is named so because the urinary bladder of animals (Cow, Buffalo, Goat and Sheep etc.) is used to inject or administration of medicated oils or decoctions into the rectum of the body to produce some effect. Sthoulyaroga is the most metabolic disorder and is one of the oldest documented vyadhis. An individual whose increased medo and mansa dhatu makes his hips, abdomen and breasts pendulous and whose vitality is much less than his body size is obese. Sthoulyaroga is due to alimentary factors like overeating, heavy eating, sweet, oily foods, having cold potency lack of exercise, sleeping during daytime, leading life, which is without any stress and strain and hereditary predisposition. It can be due to other disorder of pituitary, thyroid, adrenals, pancreas and hypothalamus. gonads, Derangement of agni or digestive power leads to production of aama, which disturbs dhatu agni of med dhatu and blocks the proper formation of further

dhatu. Improperly formed med dhatu accumulates in the body causing Sthoulyaroga. Accumulated med causes disturbance to the movement of vata, which in turn increases appetite. Patients therefore eat more and the entire food is than converted into improper med dhatu. Creating a vicious circle.¹

Accumulation of *medodhatu* on the abdomen, dysponea on execration (Shwaskashta), lethargy and perspiration apart from the sign. Such person develops excessive hunger (Suddha Aaddhiyaka) and thirst, weakness, loss of vitality, loss of sexual power (maithun ashamartha), excessive sweating with bad or foul smelling odor, and dyspnoea on mild execration. All the dhatu in the body are not properly formed which result in reduction of longevity, premature aging and mental confusion.

The deposition of excess *med* takes place on the abdomen and breasts of women, hence they become big and move during walking. Due to excess weight such people suffer from lethargy and loss of strength. If the condition of sthoulyaroga is not treated, various properly kinds complication like ischemic heart diseases, hypertension, hyperlipidemia, diabetes, arthritis, fistula, hyperacidity and kidney infection are produced.²

MATERIAL & METHODS:

Basti karmukatv: Basti is one of the good treatment. Basti works not only at pakvashaya and not limited upto shodhan but also it works sarvdehik.

If Samyak amount of Basti is given it stable at basti, Pakvashaya, Shroni and Nabhi and Basti dravya with the help of veerya strotas it spread all over the body.

CASE REPORT

Patient name: XYZ OPD NO:56211 Gender: Female

Age: 55

Date of first visit: 23/07/2013

Chief complaints: Ubhaya Janu Shul

Kati Shul Bhar Vrudhi

Sakashtachankraman

Shwaskashtata **Diagnosis**: stholya

Date of admission: 23/07/2013 Date of discharge: 07/08/2013

Principle of treatment: Reduce the weight

Criteria of assessment for observation: **Gradation of symptoms: Following** scoring pattern will be adopted for the assessment of sign and symptoms.

- 1. *Atikshudha* :(Excessive Hunger)
- Person not at all taking food
- Person taking food in less quantity once a day
- Person taking food in less quantity twice in a day ++
- Person taking food in moderate quantity twice in a day
- Person taking food in normal quantity twice in a day ++++

- Person taking food in excessive quantity twice or thrice +++++
- 2. *Kshudraswasa*: (Breathlessness)
- Dyspnoea after heavy work but relieved soon & upto tolerance
- Dyspnoea after moderate work but relieved later & upto tolerance
- Dyspnoea after little work but relieved later & upto tolerance
- Dyspnoea after little work but relieved later & beyond tolerance +++
- Dyspnoea in resting condition ++++
- 3. Gatrasada
- No fatigue
- Little fatigue in doing hard work +
- Moderate fatigue in doing routine work ++

Excessive fatigue in doing routine

- Excessive fatigue even in doing little work
- 4. Daurgandhya: (Excessive Body Odour)
- Absence of bad smell
- Occasional bad smell in the body removed after bathing
- Persistent bad smell limited to close areas difficult to suppress with deodorants ++
- Persistent bad smell felt from long distance is not suppressed by deodorants +++
- Persistent bad smell felt from long distance even intolerable to the patient himself ++++
- 5. Swedadhikya: (Excessive Sweating)
- Sweating after heavy work & fast movement or in hot season
- Profuse sweating after moderate work and movement +
- Sweating after little work and movement
- Profuse sweating after little work and movement +++

Sweating even at rest or in cold season

++++

- 6. *Atipipasa*: (Excessive Thirst)
- Normal thirst
- Upto 1 litre excess intake of water

- 1 to 2 litre excess intake of water
- 2 to 3 litre excess intake of water +++
- More than 3 litre of water
- 7. Daurbalya: (Weakness)
- Can do routine exercise
- Can do moderate exercise without difficulty
- Can do only mild exercise
- Can do mild exercise with very difficult +++
- Cannot do even mild exercise
- 8. Alasya: (Laziness)
- No alasya (doing work satisfactory with proper vigour in time)

- Doing work satisfactory with initiation late in time
- Doing work unsatisfactory with lot of mental pressure & late in time ++
- No starting any work in his own responsibility doing little work very

Slowly

Does not have any initiation & not wants to work even after pressure

- 9. Nidradhikya: (Excessive Sleepiness)
- Normal sleeps 6-7 hrs. Per day
- Sleep upto 8 hrs. /day with Angagaurava
- Sleep upto 8 hrs. /day with Angagaurava and Jrimbha
- Sleep upto 10 hrs. /day with Tandra

+++

Sleep more than 10 hrs. /day with Tandra and Klama

++++

Table 1 Sthaulya yyadhiianya Lakshnik Sarani Clinical Assessment

No	Lakshana	5th day	10 th day	15 th day
1	Atikshudha	++++	+++++	++++
2	Kshudraswasa	+++	++	++
3	Gatrasada	+++	++	+
4	Daurgandhya	++	++	+
5	Swedadhikya	+++	++	++
6	Atipipasa	++	+	+
7	Daurbalya	++	+	+
8	Nidradhikya	+	+	+
9	Alasya	+	+	-

Total treatment schedule for 15 days snehan and swedan chikitsa.

1 Sarvang Snehan, Swedan - Daily during the course of Basti.

2 basti chikitsa

Anuvasan basti(Murchit til tail (200ml) and lekhan basti (500ml) alternate days 3 yoga: surya Namaskar etc,

During the above course of treatment oral medication was taken.³

Date of discharge: 7/08/2013

Follow up: After 8th day & 15th day same medicinal treatment given.

DISCUSSION:

The basti is one of the best treatments. It not only works upto the pakwashaya but also it work all over the body.

- 1. If basti is given in proper quantity it is stable at pakwashaya, shroni and lower lesion of *nabhi*. basti dravya spread all over the body by its virya along with strotas and shamanadhi karm done by virva
- 2. Work of *basti*: The *basti*, which returns from the work of the apanadi vayu, cleanses them by pulling all the flaws from the legs to the head through virya.

lekhan basti:

1) main ingredient churna yukta kwath

matra uttam - 750 ml madhyam - 500 ml hina - 350 ml

- 2) In this, the bowel is transmitted before being more than just the amount of matter. Then there is the basti of habitation by contracting with rebound action.
- 3) The components contained in this are ushna, tikshna, laghu, vyavayi ,vikasi, ashukari properties.

In lekhan basti:

Kwatha - More than just helps in bowel movement

sneha - Merges the stool saidhava - Good absorption Does not exploit. Pulls out flaws madhu -Does lekhan

Gomutra and due to the warm sharp skin yavakshar, there is spatial of the inflammation in the bowel. The basti is absorbed in the system due to the developmental properties of the portal, spreading through the portal through the spread of the whole body. The given habitat containing all the materials is the first of all, due to the presence of the arteries; the air is transmitted due to the excessive amount of heat. By which endocrine glands are encouraged and flows from them Whereby does this circular level work Better mesentery veins in the absorption system, then from the portal vein to the liver, the heart is again And after we give the 8,15 basti, the irritable center is very excited they are proposed together and (4 to 5 motion done). This is the bruhudda shudhhi due to this stop the process of basti then sadharan virechan

kendra get excited dosha becomes shakha to koshta and basti pratyagamana done. If the substance of the basti is highly acute, insertion root is *gudmarga* (anus) due to this the patient may be shock.

Signs after giving first day basti

- 1. udaradhman
- 2. malasamvedana
- 3. malavega
- 4. samyak sneha lakshana

bastipratyagaman pachhyat lakshana:

- 1. udarlgawata
- 2. angalaghawata
- 3. shudhapravrutti

vvapada:

1. Occasionally after attaining enema, it is a symptom of Hrullas, udgar, shirashula, shirogaurayta.

Treatment: Ushnajala, anuloman with dipanpachana.

- 2. Shakhagata
- 3. tiryakgata:

In symptom of *shitpitta*, *kandu* give *gairik* ghruta and Deepan pachana anulomak,haridrakhanda, aarogyavardini, laghusutshakhar is the used.

4. Sometimes the branch keeps the speed continuously after suffering the bowel while in the bowel. Due to this, Dravmala pravruti is in very high form; its treatment is Mocharas basti.

CONCLUSION: The study concludes that the factors responsible for this are lack of Aahar, Vihar & today's lifestyle. Lekhan basti is more effective, safe & economically best manager of sthaulya. In Group a gradation of relief noted in symptom Atikshuda was ++++. Kshudraswas relief was noted as ++. + in + in Durgandh, Gatrasad, swedadhikya, + in Atipipasa, ++ in Daurbalya, + in nidradiky and - in Alsya respectively.

According to Acharya sushrut reference (su.chi. 38-81) described Sthaulyadhikar the treatment Lekhan basti is best medicine for sthaulya.

Lekhan basti has given very good result in this session the patient was admitted for total 15 days. Lekhan basti provide very

good result for reducing weight. Lekhan basti provided very good significant result on sign and symtom's of sthoulyaroga. This is our one of best case of recovery of this kind. The result replicated the original showed substantial study. And improvement for the patient as she reduces her weight and increase her body function.

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