

## Role of *Basti* and *Sirodhara* in the management of *Grahani* (Irritable Bowel Syndrome)- A Case Report

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### Abstract:

Irritable bowel syndrome (IBS) is a gastrointestinal disorder having a group of symptoms including abdominal pain and changes in the pattern of bowel movements without any evidence of underlying damage. The pathogenesis of IBS is not fully understood, although roles for abnormal gut motor and sensory activity, central neural dysfunction, psychological disturbances, stress, and luminal factors have been proposed. About 10-15% of the people in the developed world are believed to be affected by IBS, it is estimated that 45% of people globally are affected by IBS. In Ayurveda, IBS can be correlate to *Grahani Rogadue* to similitude in their clinical presentation. In this case an effort has been made to treat a 24 years old female patient having symptoms of *Muhurbaddha Muhurdravam* (episode of difficult evacuation of bowel and loose stools), *Udarashool* (pain in abdomen) and *Apakwa Malapravritti* (sticky stool with mucus). Patient treated with various *Panchakarma* (five Bio-cleaning Ayurvedic therapies) procedures like *Basti* (herbal medicated enema), *Taila Dhara* (pouring Herbal medicated oil on head) and oral medications. At the end of 45 days of treatment patient got significant improvement in the sign and symptoms of disease.

**Keywords:** *Grahani*, Irritable bowel syndrome, *Panchakarma*.

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**Introduction:**

Irritable bowel syndrome (IBS) is a gastrointestinal disorder having a group of symptoms including abdominal pain and changes in the pattern of bowel movements without any evidence of underlying damage. IBS is the most common cause of gastrointestinal referral and is second only to common cold as a cause of absenteeism from work. IBS can also severely compromise a person's quality of life.<sup>[1]</sup> IBS is a disorder of the young patients presenting before age 45. Women are affected 2-3 times more often than men. It usually involves the large intestine (colon) and small intestine with disturbances of intestinal/bowel (gut) motor function (motility) and sensation. Co-morbid conditions, such as Functional dyspepsia, depression, diabetes, fibro myalgia, panic disorder, schizophrenia are common.<sup>[2]</sup>

According to Ayurveda, the dysfunction of *Agni* is responsible for indigestion which is responsible for various functional and structural anomalies in the gastro-intestinal tract.<sup>[3]</sup> *Acharyas* mentioned the sign and symptom of *Grahani Rogai* in text are somehow related with IBS. In *Grahani Roga*, the digestions of food do not occur properly due to *Dushti* of *Agni*. From this phenomenon a vitiated material called "*Ama*" (Undigested food) forms which is responsible for producing various disorders. *Ama* disturbs the normal flora of GI tract, disturbs the normal physiology of entrails and acid fluid configuration of GI tract. Ultimately the end product of food didn't form appropriately and nourishment of body does not occur.

In today's era, number of patients suffering from the complaints related to

G.I.T. These complaints vary from loss of appetite to chronic abdominal pain, irregular bowel habit, chronic flatulence, constipation, diarrhoea, incomplete evacuation, and failure to thrive, hyperacidity etc due to irregular food habits and unhealthy food intake. Malfunctioning of *Agni* is the important factors which play a significant role in most of the digestive disorder and *Vata Dosha* along with significant contribution of mind in the physiological function of digestive system. *Basti* is one among *Panchakarma* treatment specially advised for the pacification of *Vata Dosha* and as a site of attain a disease of *Pakwashaya* (colon). To overcome the stress and other psychological factor Ayurveda advocates use of *Murdhnitaila*, *Shirodharacan* be a best option among four types of *Murdhnitailain* psychological condition, hence in this case, *Basti* and *Shirodharawith Taila* were used for the treatment.

**Case Report:**

A 24 years old female patient, diagnosed as Irritable Bowel Syndrome visited to *Panchakarma* OPD, IPGT & RA, Jamnagar having complaints of episode of difficult evacuation of bowel and loose stools (*Muhurbadha Muhurdravam*), abdominal pain (*Udarashool*), sticky stool with mucus (*Apakvamala pravritti*), Anorexia (*Aruchi*), heaviness in abdomen (*Udaragourava*), fatigue (*Alasya*), and indigestion (*Ajeerna*) since 1 year.

History of the patient revealed that before one year patient c/o abdominal pain for the same she had consulted physician, there she was advised for some analgesics (Tab. Meftal spas, Tab. Ranitidine hydrochloride) for 7 days. After 3 weeks

she further had distension in abdomen and loose stool for which again she consulted same doctor and was advised for some other medications (Tab. Metronidazole and probiotics) for 14 days. After few months her complaints like abdominal pain, sticky stool with mucus, heaviness in abdomen got worsened and she did not have sufficient result from any above mentioned medications. After five months of onset she had consulted gastro-enterologist and diagnosed for IBS. Hence, came to IPGT & RA, Jamnagar for better management. In past history there is no H/o DM/HTN/Trauma or any other major medical illness. In family history, there is no history of same illness in any of the

family members. The patient found to be well built, moderately nourished, afebrile, normotensive, other parameters like pallor, cyanosis, icterus, lymphadenopathy was absent.

All systemic Examination were normal and lab investigations were also within normal limit except Hb%: 11.7 g/dl, ESR: 30mm, BSL(R):120mg/dl and occasional Pus cell in urine

#### AshtaVidhaPariksha:

Nadi: 78 b/ min, Mala: 4-5 times daily, irregular, Mutra: 5- 6 times, Jiwha: Aalipta, Shabda: Spastha, Sparsha: AnushnaSheeta, Druk: Avishesha, Akriti: Sthoola

**Table -1: Intervention with timeline:**

Days	Treatment	Duration
Day 1	<ul style="list-style-type: none"> <li>Sarvanga Abhyanga with BalaTaila<sup>[4]</sup></li> <li>SarvangaVashpaSweda</li> <li>Kala Basti - Niruha Basti: Makshika– 60 ml Lavana(Saindhava) – 10 gm Sneha (ChangeriGhrita)– 60 ml Kalka (Priyanguchurna) – 20 gm Kwath(Panchavalkala) – 240 ml Anuvasana Basti: ChangeriGhrita– 60 ml</li> </ul>	16 days
Day 1	<ul style="list-style-type: none"> <li>ShirodharawithHimsagarataila<sup>[5]</sup></li> </ul>	16 days
Day 17	<ul style="list-style-type: none"> <li>Nagradhachurna5 gm<sup>[6]</sup> with Madhu and Tandulambu</li> </ul>	17 <sup>th</sup> to 45 <sup>th</sup> day
Day 1	<ul style="list-style-type: none"> <li>Takrapana</li> </ul>	45 days

**Table 2: Pattern of Basti:**

1st day	2nd day	3rd day	4th day	5th day	6th day	7th day	8th day	9th day	10th day	11th day	12th day	13th day	14th day	15th day	16th day
A	A	N	A	N	A	N	A	N	A	N	A	N	A	A	A

A= Anuvasana Basti, N= Niruha Basti

### Observations:

The follow up was made on 16<sup>th</sup> day and 45<sup>th</sup> day. During this period patient did not developed any other complaints. After 45<sup>th</sup> day haematological investigations are carried out it shows following results i.e.ESR- 8mm,Hb %- 13.4 gm%,Urine Pus cell–Nil.

Patient reported gradual improvement in altered bowel habits, stool with mucus,

pain in abdomen, anorexia, indigestion, heaviness in abdomen. After treatment patient got significant relief and he gained weight up to 5kg. The changes observed in the signs and symptoms were assessed by adopting suitable scoring method and the objective signs by using appropriate clinical tools. Assessment was done before treatment, and on 16<sup>th</sup> day and 45<sup>th</sup> day after completion of treatment.

**Table 3: Clinical grading and assessment:**

Clinical features	Grading <sup>[7]</sup>		BT	AT	
				16 <sup>th</sup> day	45 <sup>th</sup> day
<i>MuhurbaddhaMuhurdravam Mala</i> (Episode of hard & loose stools)	Passing normal consistency Stool (1time/day)	0	4	2	1
	Passing stool irregular(1-2 times/day) without pain	1			
	Passing stool irregular (2-3 times/day) with pain	2			
	Passing stool irregular & just after meal (3-4 times/day) with pain	3			
	Passing stool irregular & just after meal (>4times/day) with Pain	4			
Distention of Abdomen	No complaint	0	4	1	0
	Rarely complaint once in a week	1			
	Distension of abdomen after taking meal up to 1Hour	2			
	Distension of abdomen after taking meal up to 1-3 hours	3			
	Distension of abdomen after taking meal up to 6 hours	4			
<i>Aruchi</i> (anorexia)	Taking normal diet with Interest	0	2	1	0
	No interest in taking normal diet	1			
	Food has taken forcefully	2			
	Not taken a food even Forcefully	3			
<i>Balakshya</i> (Weakness)	No weakness	0	3	1	0
	Weakness but performs day to day activities	1			
	Weakness & difficulty in Performing day to day Activities	2			

	Cannot able to get up from bed	3			
Tiktamlodgara(iron pungent odour burps)	No complaint	0	5	2	1
	Occasionally	1			
	1-3days/week	2			
	3-5days/week	3			
	5-7days/week	4			
	All the 7 days	5			
Antrakunjana(gurgling sound in abdomen)	No complaint	0	3	1	0
	Occasionally	1			
	2-3 times/day before passing stool	2			
	Persistent	3			
Passing mucus in stool	No visible mucous in Stool	0	2	0	0
	Visible mucous stickled to the stool	1			
	Passage of mucous with frequent stool	2			
	Passage of large amount of mucous in stool	3			

### Result and Discussion:

*Basti* is a multidimensional therapy, the purpose of *Basti* is elimination and palliation of *Dosha*, nourishment and rejuvenation of *Dhatu* (tissues). In this study *Panchavalkala Kwath a*(for *Niruha Basti*) was selected for the treatment of *Grahan i*(IBS) because *Panchavalkala Kwatha* possess all the needful properties like *Kaphahara*, *Chedana*, *Lekhana*, *Tridoshgna*, *Grahi*, and ingredients of the compound pacify *KaphaDoshaby* virtue of their *Ruksha Guna*, *Katu Vipaka* and *Ushna Virya*, so it relieves in the symptom of stool with mucus due to its *Kaphahara*, *Chedana*, properties.<sup>[8]</sup> *Priyanga Churna* (*Kalka*) was selected because it have *TiktaRasa* and *SheetaGuna* by which it does *Purish-Sangrahana Karma*. In *Changeri Ghrita*<sup>[9]</sup>(used for *Anuvasan Basti*) contain *Changeri*, *Changeriis Ama*, *Vata* and *Kapha Nashaka* hence it relives in symptoms constipation, and abdominal

pain and may corrects pathogenesis occurring in IBS.

As it is known fact that the IBS is a Psycho somatic disorder so we selected *Himsagara Taila Shirodhara* for treatment, *Himsagara Taila* is known for its stress relieving effect. The ultimate aim of *Shirodhara* is to restore the equilibrium of *Sharira* and *Mansika Doshas* through the psycho somatic axis. When *Taila* is poured in a continuous stream over the forehead it might communicate with the deepest recesses of the brain by soothing the mind, through the limbic system, where the *Prana* (vital energy of the body) is present. So an improvement in psychic symptoms was achieved. Improvement in circulation to hypothalamus also improves the function of Autonomic Nervous System. *Taila Dhara* may also effects on Endocrine system, hypothalamus is the main regulator of endocrine system so effect of *Tailadhara* on hormone secretion

can also be postulated considering the effect on hypothalamus. The limbic system and hypothalamus regulates the feeling of rage, pain, aggression, pleasure and behavioural patterns. It can be postulated that *Tailadhara* may be having some effect on hypothalamus thus relieving most of the psycho somatic disorders like IBS.

*Nagaradhy achurna* is *Deepana*, *Pachana* and *Grahi* in nature and indicated in *Grahani Chikitsa*. If we take a look over main complain about *Grahani Roga* which is *Muhurbaddham Muhurdravam* means the power of retaining of intestinal musculature get sluggish, according to classics the site of *Ahara Pachana* is *Amapakwashaya Madhya*, and *Amapakwashaya* is the *Sthana* of *Pittadharakala*. we may consider it as *Saithilyata of Pittadhara Kala*.<sup>[10]</sup> *Dravya in Nagaradhy Churna* acts over the *Pittadharakala* and may help to attain his *Dharana Shakti*. *Anupana* is *Madhu* and *Tandulodaka* which are *Ruksha* and *Visadain* nature respectively and helps in to reduce *Paichilyata* (mucous) and *Dravata of Purisha*.

*Takarapana* was given to the patient for 45 days. *Acharaya Charaka* mentioned that *Takra* is best *Peya Dravain Grahani Roga* due to his *Deepana*, *Grahi* and *Laghu Guna*.<sup>[11]</sup> Because of its *Madhura Vipaka* it does not vitiate *Pitta Dosha*, due to *Kashaya*, *Ushna*, *Vikashi* and *Ruksha Guna* does not vitiate *Kapha Dosha* and due to *Madhura*, *Amla* and *Sandra Guna* it does not vitiate *Vata Dosha*. *Takra* is useful in to reduce the *Paichilyata* and *Dravata* of *mala* due to his *Grahi* and *Laghu Guna* and enhances the *Agni* due to its *Deepana Guna*.

### Conclusion:

The analysis of IBS in terms of Ayurveda concludes that the IBS is a symptom complex where we can correlate Ayurvedic term based on the symptoms as *Grahani Roga* and treated accordingly. The treatment methods explained in classics is helpful in giving significant relief in signs and symptoms like *Muhurbaddha-muhurdravam mala* (Episode of hard & loose stools), distention of abdomen, stool with mucus. On the basis of this study, it can be concluded that given treatment is found to be effective in relieving symptoms in IBS thereby improving quality of daily life of the patient. There was no adverse drug reaction seen during the period of study.

### Declaration of patient consent:

The authors declare that they have obtained consent form from patient for publication of clinical information blinding the identity of individuals.

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