

A CONCEPTUAL STUDY ON EFFECT OF LEKHANA BASTI ON POLYCYS-TIC OVARIAN SYNDROME

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ABSTRACT

Poly Cystic Ovarian Disease (PCOD) is a complex disorder affecting 5-15% women in their reproductive age and related to ovarian dysfunction, characterized by menstrual irregularities, hyperandrogonism, obesity, and infertility. In Ayurveda, these symptoms are found under various conditions, caused by vitiated *Vata* and *Kapha*. *Basti* is one of the five procedures of *panchakarma* in Ayurveda. Classically, it is advocated in the diseases of *Vata*. It is mainly of two types viz. *Asthapana* and *Anuvasana*. *Triphala Qwatha Asthapana Basti* and *Triphala Taila Anuvasana Basti* is said to be *Vata Kapha Shamak* and *Artavajanaka*. Probable mode of action of drugs is opposite *Guna* of *Vata* and *Kapha* due to which, it regularise menstrual cycle, reduction in weight, growth of follicle thus ovulation.

Keywords: PCOD, Hyper-Androgonism, Asthapana Bast, Anuvasana Basti

INTRODUCTION

Ovarian Poly Cystic Disease (PCOD) is a common cause of infrequent and irregular periods and affects as many as 5-15% of woman in their reproductive age. This disease is characterized by menstrual irregularities, clinical, and/or biochemical hyperandrogonism and hyperinsulinemia, which ultimately leads to infertility. Apart from infertility, some of the other symptoms associated with Poly Cystic Ovarian Syndrome (like hirsutism, obesity, and android fat patterning) may interfere with female self-perception and are in contradiction to culture-dependent beauty ideals. Symptoms of PCOD direct the way of involvement of Kapha and Vata Dushti causing Avarodha or Avarana in Artavavaha Srotas. Ayurveda has mentioned Bandhya² a type of *Yonivyapada* whose symptom is amenorrhoea or oligomenorrhoea. Similarly Arajasaka Yonivyapada indicating Amenorrhoea³.A combination of classical history, close observation of patient and the following investigations are important tools to confirm a case of polycystic ovarian syndrome. Ayurveda suggests that this is a *Vata* type disorder (*Apan vata*), though the involvement of other *Dosha* can be there but insome measure.

Vata⁴ predominance manifests with painful menses, severe menstrual irregularity, low weight, coldness. Pitta⁵ predominance manifests as excessive burning sensation, suppuration, fever, painful menses, clots. Kapha predominance manifests as increased weight, infertility, hirsutism.

The treatment principle is to clear obstruction in the pelvis, normalise metabolism, Assist cleansing and regulate the menstrual system (*Arthava Dhatu*).

Basti⁶ (the enema therapy) is the best choice to bring Vata in physiological proportion. The Matra Basti and Uttar Basti

are highly efficient to calm down *Vata* dosha.

Drugs used in *Lekhana Basti*: ⁷

Madhu, Saindhava, Sneha, Kshara, Prakshepaka Dravaya's (Ushakadi Gana), Gomutra, Triphala Owatha. Sneha: Triphala Taila

Triphala: Haritaki, Vibhitaki, Aamlaki Ushakadi Gana Dravaya's⁸: Ushaka, Tuttha, Kasis, Hingu, Saindhava, Shilajit

Kshara: Yava Kshara

Effect of each drug on dosha

Drugs	Botani-	Rasa	Guna	Virya	Vipaka	Doshghnata	Karma
	cal name						
Amlaki ⁹	Ambel-	Pan-	Ruksha	Sheet	Madhur	Tridosha-	Vrishya pra
	lica	charasa	Guru		a	hara	jasthapana
		Amla					
	Offici-	Pradhan					
	nalis	Lavana					
		Varjit					
Haritaki ¹⁰	Termi-	Kashaya	Laghu	Ush-	Madhur	Vatashamak	Vrishya
	nallia	Pradhana	Ruksh	na	а		garbhashay
	Chebulla		a				a sotha hara
Vibhit-	Termi-	Kashaya	Ruksh	Ush-	Madhur	Kaphasham	Vajikaran
aki ¹¹	nallia		a	na	a	ak	
	Belerica		Laghu				
Ushaka ¹²	Dorena	Tikta, Ka-	Ruksh	Ush-	Katu	Kapha Vata	Artava-
	Ammoni-	tu	a	na		Shamak	janana
	cum		Laghu				3
Hingu ¹³	Ferula	Katu	Laghu	Ush-	Katu	Kapha Vata	Vajikarana
	Narthrax		Tik-	na		Shamak	artvajanan
			shna				
Tuttha ¹⁴	Cuso ₄	Kashaya	Laghu			Kaphahara	Lekhana
	,	Madhura				1	bhedana
Kasis ¹⁵	Feso ₄	Tikta		Ush-	Katu	Vata Kapha	Raja
	7	Kashaya		na		Hara	pravartaka
Shilajit ¹⁶	Asphal-	Tikta		Ush-	Katu		Yogvahi
~	tum Pun-			na	210000		-08,000
	jabium			1.00			
Gomutra ¹⁷	jaciani	Katu	Tik-	Ush-		Vatapitta	
Somuna		nuu	shan	na		Hara	
D 1 11	N. 1 C /	e E			1 :- 4A	il A l D	1 2 41

Probable Mode of Action of Drugs

Basti works on whole body after entering into Pakvashaya or Guda. Guda is said as Sharira Mula having Shiras and Dhamanies, which spreads all over the body¹⁸. It exerts local as well as systemic effect. Basti Dravyas normalize Apana Vata making it to function normal. It also enhances the function of Purisha. One of the functions of

Purisha is 'Anila Anala Dharana', thus Basti leads to correction of Agni Dushti. At the end, Basti normalize the function of Apana Vata leading to normal Rajah Pravritti and normal Beeja Nirmana¹⁹. Here, Triphala Taila and Prakshepeka Drvyas used for the Basti and the Gunas of Triphala are Balya, Deepan, Pachan, Yonivishodhana, Artavajanana, and Beejotsarga.

As per modern appraise, any drug given via rectal route absorbs through mucosal layer of rectum and enters into systemic circulation. Entering into Gastro Intestinal Tract (GIT), Basti stimulates Enteric Nervous System (ENS) and generates the stimulatory signals for Central Nervous System (CNS) as ENS resembles CNS^{20,21}. These signals stimulate endogenous opioids present in GIT, mainly β-endorphin, which exerts the inhibition of gonadotropin releasing hormone release²². Thus, *Basti* given in the patient of PCOD regulates Hypothalamic-Pitutary-Ovary axis, which results into normalization of ovarian cycle and menstrual cycle too. Parasympathetic activity may be responsible for the function of Apana Vata. Basti introducing through rectum and may stimulate the parasympathetic nerve supply, which in turn helps for development of follicles and release of ovum from the ovary.

Avoid:

- ✓ Sedentary life
- ✓ Smoking and drinking alcohol
- ✓ Intake of tea and coffee
- ✓ Intake of junk foods
- ✓ Mental and emotional stress

DISCUSSION

Effect on menstrual irregularities:

Amapachana, Srotoshodhana, and Vatakaphashamaka properties of both Triphala qwatha and Triphala taila may be responsible for the efficacy. Ushna, Tikshna, Lekhana, Pachana, etc., properties of contents of Lekhana Basti are similar to Pitta increases Agneya Guna of Pitta, which is responsible for decreasing interval. This effect is also supported by Vatanulomana property of Anuvasana Basti.

Effect on follicular growth and ov-

ulation: This may because of removal of *Sanga* by *Kapha-Vata Shamaka Srotosho-dhana*, *Aama Pachana*, etc. properties of

both the drugs. After removal of *Sanga* created by vitiated *Kapha* and *Ama* in *Artavavaha Srotas*, *Apana Vata* functions well leading to normal *Rajah Pravritti* and *Beeja Nirmana*. It may be hypothesized that both the treatment modalities may decreases LH level thus preventing premature lutinization. Thus normal FSH level stimulates growth and development of follicle.

Effect on other symptoms: In additional properties like *Lekhana*, *Rruksha*, *Tikshana*, *Deepana*, *Pachana*, etc., of *Triphaladi Kwatha* adds this effect of reduction in body weight by regulating *Jatharagni*. Thus, it checks the excessive growth and accumulation of *Medodhatu* and thereby causing *Lakshana Upashamana* of disease PCOD.

CONCLUSION

Treatment with the combination of both *Triphala Kwatha* and *Triphala Taila Anuvasana Basti* has additional effect on the symptoms of PCOD. It will be effective in regularizing menstruation, achieving considerable reduction in body weight, substantial growth of follicles, and thus ovulation because drugs used in combination are opposite of vata and kapha. It helps to remove *Aavaran* of *Kapha*. For the good quality of life relief on following lines must be procured

- ✓ Gradual weight loss
- ✓ Regular menstrual cycle
- ✓ Cure from prolonged menses, scanty menses
- ✓ Alleviation of symptoms like pre- menstrual swelling, hair loss, acne
- ✓ Promotion of fertility with production of healthy ovum

REFERENCES

1. American Academy of Continuing Medical Education. Module-1, Update

- on PCOS and its Clinical Management. 2009. p. 3.
- Sushruta . Sushruta Samhita, Sharira Sthana, 2/14, Ambikadutta Shastri. 2nd edition. Varanasi: Chaukhamba Sanskrit Sansthan
- 3. Charaka Samhita of Agnivesha, revised by Charaka and Dridhabala with the Ayurveda Dipika commentary of Chakrapanidatta, edited by Vaidya Jadavji Trikamji Acharya, Munshiram Manoharlal Publishers pvt. Ltd. 2011 reprint ed. Varanasi: Chaukamba Orientalia; 2011.
- 4. Charaka Samhita of Agnivesha, revised by Charaka and Dridhabala with the Ayurveda Dipika commentary of Chakrapanidatta, edited by Vaidya Jadavji Trikamji Acharya, Munshiram Manoharlal Publishers pvt. Ltd. 2011 reprint ed. Varanasi: Chaukamba Orientalia; 2011.
- Sustrutasamhita of susruta, uttarsthana-38/14, with nibadhasngraha comm.- of sridalhanacharya- edited by YKT Acharya- Varanasi- chaukambhaorietalia-2007
- 6. Acharya mukundilal dwivedi et al, Aurvrdiya panchakrama part 2, Delhi Choukhambha Sanskrit pratishthan 2008 page no.573
- 7. Sustrutasamhita of susruta, Chikitsa sthana- 38/82, with nibadhasngraha comm.- of sridalhanacharya- edited by YKT Acharya- Varanasi-chaukambhaorietalia-2007; p 174
- 8. Sustrutasamhita of susruta, Sutra sthana-38/37, with nibadhasngraha comm.- of sridalhanacharya- edited by YKT Acharya- Varanasi- chaukambhaorietalia-2007; p 144
- 9. Acharya priyavat sharma, Dravya guna vigyana part 2, Varanasi; Choukhambha Orientalia Publication,2013: p.n 758

- 10. Acharya priyavat sharma, dravya guna vigyana part 2, Varanasi; Choukhambha Orientalia Publication,2013: p.n 758
- 11. Acharya priyavat sharma, dravya guna vigyana part 2, Varanasi; Choukhambha Orientalia Publication,2013: p.n 239
- 12. Acharya priyavat sharma, dravya guna vigyana part 2, Varanasi; Choukhambha Orientalia Publication,2013: p.n 362
- 13. Acharya priyavat sharma, dravya guna vigyana part 2, Varanasi; Choukhambha Orientalia Publication,2013: p.n 350
- 14. Angdi ravindra, a text book of rasa shashtra, varanasi choukhmabha subharti prakashan oriental publication, 2014; page no.215
- 15. Angdi ravindra, a text book of rasa shashtra, varanasi choukhmabha subharti prakashan oriental publication, 2014; page no.245
- 16. Angdi ravindra, a text book of rasa shashtra, varanasi choukhmabha subharti prakashan oriental publication, 2014; page no. 206
- 17. Sharma anant ram, ashtangahridyum sutra sthana, varanasi choukhmabha subharti prakashan oriental publication,2009; page no.108
- 18. Ibidem. Charak Samhita, Siddhi Sthana. 1/31
- 19. Ibidem. Charak Samhita, Siddhi Sthana. 1/44-45
- 20. Gershom MD. Nerves, reflexes and the enteric nervous system: Pathogenesis of the irritable bowel syndrome. J Clin Gastroenterol. 2005;39((5, Suppl 3)):S184–93.
- 21. Furness JB. The Enteric Nervous System. Oxford: Blackwell; 2006. p. 274.
- 22. Rajan R. Postgraduate reproductive endocrinology. 4th ed. New Delhi: Jaypee Brothers Publication; 2004. pp. 201–5.

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