



## SIGNIFICANCE OF SHARIR RACHANA (ANATOMY) IN POSITION OF GIVING BASTI AND NASYA

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## ABSTRACT

*Ayurveda*, the science of life which deals with the maintenance of physical, mental and spiritual well-being of an individual has its origin thousands of years ago from *Vedic* period. Among the four *Vedas*, *Atharva Veda* contributes more to *Ayurveda*. *Ayurveda* is also considered as fifth *Veda* or *Upaveda*. *Ayurveda* is divided into eight main branches for the convenience in clinical practice. They are *Shalya Tantra*, *Shalakya Tantra*, *Kaya Chikitsa*, *Kumarabritya*, *Bhuta Vidhya*, *Agada Tantra*, *Rasayana* and *Vajikarana Tantra*. In *Kaya Chikitsa* there are some therapeutic procedures included which was mentioned by ancient *Acharya*. They are five in number. Nowadays these procedures have their separate branch, known as *PanchaKarma*. Present article only based on position of giving *Basti* and *Nasya*. Correct position during these procedures helps in benefits of therapy. According to *Acharya Charak Vaman*, *Virechana*, *Niruha Basti (Asthapana Basti)*, *Anuvasana Basti*, *Nasya* are the five procedures of *PanchaKarma*. He mentioned further types of *Basti* and *Nasya* in *Chikitsa Sthan*.

**Keywords:** *Ayurveda*, *PanchaKarma*, Position, *Vaman*, *Chikitsa Sthan*.

## INTRODUCTION

In *Ayurveda Acharya Charak, Sushruta, Vagbhatta* have described about the position giving therapeutic procedures like *Basti* and *Nasya*. Both the procedures are including in *Pancha Shodhana Karma* or *PanchaKarma*. There was different-different *Karma* mentioned in *Brihatrayi*. According to *Acharya Charak Vaman, Virechana, Niruha Basti (Asthapana Basti), Anuvasana Basti, Nasya* are the five procedures of *PanchaKarma*. He mentioned further types of *Basti* and *Nasya* in *Chikitsa Sthan*. There are five types of *Nasya- Navana, Avapida, Dhmapana, Dhooma, Pratimarsha*. There are three types of *Basti- Anuvasana Basti, Niruha Basti (Asthapana Basti), Uttar Basti*. *Acharya Sushruta* merges both *Niruha* and *Anuvasana* as one so called as *Basti*. Because of importance of blood from surgical point of view he included *Raktamokshan* or bloodletting in *PanchaKarma*. So, according to *Acharya Sushruta* the procedures were as follows- *Vamana, Virechana, Basti, Nasya, Raktamokshan*. Further, there are two types of *Basti- Niruhika* and *Snehika Basti*. The former *Niruhika* also called *Asthapana Basti* or *Matra Basti* and *Snehika* also named as *Anuvasana Basti* or *Madhutailika Basti* or *Yuktaratha Basti* or *Siddha Basti*. *Anuvasana Basti* is unctuous formulation and *Asthapana Basti* is non-unctuous. *Acharya Sushruta* has mentioned two types of *Nasya* in *Chikitsa Sthan*. They are *Shirovirechana* and *Snehana*. Again, *Shirovirechana* and *Snehana* have two types. *Shirovirechana* has divided into *Avapida* and *Pradhamana* and *Snehana* has divided into *Nasya* and *Pratimarsha*. *Acharya Vagbhatta* has mentioned *Basti, Vamana, Kayavirechana, Shirovirechana* and *Raktavisrutti* or *Raktamokshan* in *PanchaKarma*. Here form *Basti, Acharya* considered *Asthapana Basti*. *Vagbhatta* not included *Anuvasana* in *PanchaKarma*. *Acharya Vagbhatta* has mentioned three types of *Basti- Anuvasana Basti, Niruha Basti (Asthapana Basti), Uttar Basti* same as *Acharya Charak*. According to *Vagbhatta Nasya* is divided into three types- *Virechana, Baranahan* and *Shamana*.

- **Position for giving Basti (Drug administration through anal canal)**
- ❖ **Position for giving Niruha Basti-**

### According to Charak-

- While the patient lies on *Vaam Parshva* position, *Grahani* and *Guda* are situated on left side, the administering solution reaches easily, and the folds also disappear. Hence *Basti* should be administered to the patient in *Vaam Parshva* position. (Ca.Si.3/24-25)

### According to Vagbhatta-

- The person should lie neither too high nor too low, in *Vaam Parshva* position folding his right thigh at knee joint and extending the left thigh. (A.H.Su.19/23-24)

### According to Sushruta-

- The *Niruha Basti* should be administered to those persons who have already taken the *Sneha Basti*. The patient should be massaged well with oil and treated with sudation therapy; his bowel and bladder should be cleared. The room should be free from direct approach of wind and the *Basti* should be applied at noon. The patient should be in *Vaam Parshva* position on a wide bed which should be well provided with supports at the lower end, wide and rose at the pelvic region.
- The patient should keep his right thigh flexed at knee joint and left one extended. He should be relaxed and calm and taken his food 3-4 hours before procedure; should not be talking and should keep the body fully relaxed. After the procedure, the patient should be asked to get up after waiting for thirty *Matras* from the time of application of *Basti*. In order to help *Basti* fluid to come out the patient should be asked to sit in the squatting posture. The medicated enema takes a *Muhurta* to come out completely. (Su.Ci.38/3-4)

### ❖ Position for giving Basti in Garbhini (Pregnant women)

### According to Charak-

- If constipation occurring due to *Udavarta* during eighth month of pregnancy, is not relieved either by use of *Anuvasana Basti* (uncting enema) or else with unctuous edibles mixed with substances capable of suppressing *Vata* along with uncting enema with the oil prepared with *Madhuka*, then it

should be considered as incurable by this procedure and *Niruha Basti* (evacuation enema) prepared with drugs should be used. To a pregnant woman cleansing and uncting enema should be given keeping her in *Nyubjavastha*. (Ca.sha.8/29)

#### ❖ Position for *Uttar Basti* (Douche) in females

##### According to *Charak*-

- In case of female, the length of catheter should be ten *Angula*, with circumference similar to that of urethral canal in which the *Mudga* (green gram) may pass on. In genital tract, it should be inserted up to four *Angula* while in urethra up to two *Angula* and one *Angula* in female child and parallel to vertebral column. (Ca.Si.9/64-70)

The catheter should be inserted while she is lying in supine position, flexing her legs at knee joints. Thus, the uncting should be given through douche twice, thrice or four times in twenty-four hours. After the douche is given, suppository somewhat thicker should be inserted. In this way, the treatment should be continued for three days gradually increasing the dose of uncting substance. This should be repeated after three days in the same manner.

##### According to *Vagbhata*-

- The douche should be administered to the woman, who is lying in supine position with her legs folded at the knee joints, three to four times in a day and night. (A.H.Su.19/81)

#### ✚ Position for giving *Nasya* (Nasal drug administration)

##### According to *Sushruta*-

- The person, to whom head cleansing errhines are to be administered, should clear his bowel and bladder and should not be on empty stomach. The appropriate period for the *Nasya* is when the weather is normal. The person should clean his mouth and nasal passage by inhaling medicated fumes. His neck, cheeks and forehead should be mild fomented by the warmth of the palms. The room should be free from the direct approach of wind, sun rays and dust. The patient should lie supine with his hands and legs relaxed and the neck slightly extended. His eyes should be cov-

ered with a cloth and the physician should lift up the tip of the nose by the index finger of his left hand and administer the medicated oil into the cleansed nostrils of the patient with his right hand through an oyster shell or a cotton plug. The *Sneha* should be kept in a golden, silver, copper, *Mani* or an earthen pot or an oyster shell and warmed by hot water. This *Sneha* should be instilled in lukewarm state in an uninterrupted stream without undue haste so that it does not spill into the eyes. (Su.Ci.40/25)

##### According to *Charak*-

The physician should administer the saturating uncting into the nostrils of the person who has finished routine duties and lying in supine position comfortably on a cot which is well covered with slightly extended neck and raised feet. If the neck is not extended than the nasal drug does not reach to the head while on the other hand if it is too extended, then the medicine which is administered will remain in the brain. Hence one should foment the head of the person lying in such position for proper evacuation. After fomenting, the nose should be raised up with the left thumb and with the right hand one should administer the nasal uncting methodically with tube or tampon equally in both nostrils. Thereafter it should be fomented and the uncting substance with mucous should be drawn out frequently so that it does not stay. (Ca.Si.9/98-104)

##### According to *Vagbhata*-

- The person should be made to lie in supine position with extending his arms and legs, the legs slightly raised and the head slightly lowered. (A.H.Su.20/18)

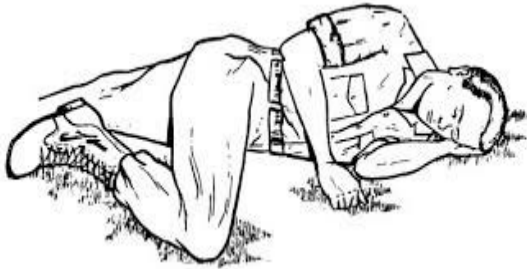
## DISCUSSION

#### ✚ Position for *Basti* (Drug administration through anal canal)

In *Ayurveda* text there is vast description to use anal canal as a route of drug administration. Their main aim was to deliver the drug into the sigmoid colon. To use this route, one should have the knowledge of the anatomy of lower gastro-intestinal tract. *Acharya* described various anatomical positions for administra-

tion of drug according to the clinical condition of patient and the mechanism of drug. Like-

- ❖ *Vaam Parshva* (left lateral) - In *Ayurveda*, the position for administering *Basti* was mentioned as *Vaam Parshva*. *Vaam* means left and *Parshva* means lateral; it means left lateral position. In modern science, there is description of many positions for giving drug through anal canal like left lateral position, knee chest position, lying on back position but the left lateral position or the Sims position is the most commonly used position. This position is similar to the position as described in *Ayurveda* for giving *Basti*. This position facilitates the flow of solution easily into the sigmoid and descending colon, which are on the left side. Having the right leg acutely flexed provides adequate exposure of the anus.



**Figure 1:** Left lateral position

*Nyubjavastha* (knee chest position) - According to *Charak*, this position is mentioned for *Garbhini* (pregnant lady) for giving *Basti* in 8<sup>th</sup> month. This position represents the knee-chest position of modern science. In the 8<sup>th</sup> month of pregnancy, the uterus is enlarged to such extent that it compresses the sigmoid colon. If the enema is given in left lateral position in this condition, the drug will not reach to the sigmoid colon. So, the enema is given in knee chest position in pregnancy. In this position the uterus moves towards the anterior abdominal wall and the pressure is released from the sigmoid colon.



**Figure 2:** Knee chest position

#### Position for *Uttar Basti* (Douche) in females

- ❖ *Uttanavastha* – This position is described for giving *Uttar Basti* in females. Our *Acharya* knew that in females there may be additional route of drug administration; that is vagina and urethra. For giving douche through this route the position mentioned in *Ayurveda* is somewhat similar to lithotomy/dorsal recumbent position described in modern science.



**Figure 3:** Dorsal recumbent position

The reason to administer drugs through the anal canal is that this area has two properties that make it excellent drug delivery system: it is moist, and this region has an excellent blood supply. This means drugs will be absorbed into the bloodstream and reach in circulation very quickly – often more quickly than any route of drug administration.

#### Position for giving *Nasya* (Nasal drug administration)

The nose is considered as a route of drug administration for systemic drug delivery, especially when rapid absorption and effect are deserved. Many positions are mentioned in modern science for administration of nasal drugs. These are head upright (HUR), lateral head-low position (LHL), head down and forward (HDF) and lying head back position (LHB). Among these positions, LHB position is preferred for nasal



administration. Lying down in supine position with the head in hyperextension, so that the chin is the highest point of the head is LHB position.



**Figure 4:** Position for *Nasya*

It is also known as proetz or mygind position. This is preferred because in this position the target region like pharynx (oropharynx, nasopharynx), internal nares, ethmoid, frontal and sphenoid sinuses are easily approached. The nasally administered medication contacts the olfactory mucosa. The olfactory mucosa is located in the upper nasal cavity just below the cribriform plate of the skull. It contains olfactory cells which traverse the cribriform plate and extend up into the cranial cavity. When medication molecules come in contact with this specialized mucosa they are rapidly transported directly into the brain, skipping the blood-brain barrier and achieving very rapid cerebrospinal fluid levels. This concept of transfer of molecules from the nose to the brain is referred to as the nose-brain pathway. Administering medications via the nasal mucosal offers several advantages:

1. Here the drug molecule is transferred quickly across the single epithelial cell layer directly to the systemic blood circulation without first-pass hepatic and intestinal metabolism.
  2. The rich vascular plexus of the nasal cavity provides a direct route into the blood stream for medications that easily cross mucous membranes.
  3. Easy, convenient and safe method of drug administration.
- Similar to modern science, in *Ayurveda*, for giving *Nasya* the person is said to lie in supine position with slightly extended neck which resemble to LHB position. It means our *Acharya* knew that nose can be used as route for drug administration and they also knew that it works more rapidly and

efficiently so they recommended it in emergency conditions too. They were also known about the anatomy of nose and position of person for nasal drug administration so it can be work most effectively.

## CONCLUSION

*Acharya Charak, Sushruta and Vagbhatta* have mentioned anatomical positions for *Nasya* and *Basti* procedures. It shows that they were well known about different routes of drug administration. The positions for different procedures like *Nasya, Basti* etc. mentioned in *Ayurveda* is followed by modern science in nowadays.

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