



**ROLE OF PANCHAKARMA WITH SPECIAL REFERENCE TO BASTI CHIKITSA IN
JANUSANDHIGATA VATA - A CRITICAL REVIEW**

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ABSTRACT

Sandhigata Vata is the commonest form of articular disorder affecting the musculoskeletal system and characterized by progressive degenerative changes in the articular cartilages especially in the old ages. *Janu* being a Marma and weight bearing joint, it is most affected by this condition characterized by pain, swelling, painful movement of the knee joint, crepitus and stiffness which further restricts a person's ability to indulge in his daily routine activities and can in turn affects mental status of the diseased. The prevalence of symptomatic osteoarthritis of the knee occurs in ~12% of person's age ≥ 60 years. The current line of treatment in contemporary field of medicine includes the administration of analgesics, NSAIDs, intra articular steroids and surgical interventions which later may have delirious adverse effect in all over the body. In contemporary field of medicine osteoarthritis can be compared with *Janusandhigata Vata* due to its similarities in signs and symptoms in classical texts and also stated under *Vata Vyadhi*. Treatment modalities have variety of options, among them *Basti* is said to be prime regimen for the treatment of *Vata Vyadhi*. By reviewing the classical text one can understand that *Basti* have servers multifaceted actions throughout the body, hence known as *Ardhachikitsa*. Through this article an attempt is made to explain the effect of *Basti Karma* in the management of *Janusandhigata Vata* and analyzing various researches available through websites and library for the betterment of patient and to spread awareness of this special treatment.

KEYWORDS: Osteoarthritis, Janusandhigata Vata, Basti Karma, Pachakarma, Vata Vyadhi.

INTRODUCTION

Osteoarthritis is a type of joint disease that results from the breakdown of joint cartilage and underlying bone. It is an increasing health care issue which is affecting a large number of population at some point in their life.^[1] *Janu* being a Marma^[2] and weight bearing joint gets most affected by this conditions characterizing mainly pain in the knee joint along with painful movements, stiffness, swelling and crepitus which further restricts a person's ability to indulge in his daily routine activities and can in turn affects mental status of the diseased.^[1] The prevalence of symptomatic Osteoarthritis of the Knee occurs in ~12% of person's age ≥ 60 years. The current line of treatment in contemporary field of medicine includes the administration of analgesics, NSAIDs, intra articular steroids and surgical interventions which later may have delirious adverse effect in all over the body.^[1] *Janusandhigata Vata* is a disease mainly persists with the complaint of pain and comes under the major heading of *Vata Vyadhi*. Most common features found in classical

texts are *Janusandhi Shoola*, *Janusandhi Shotha*, *Janusandhi Stambha*, *Janusandhi Prasarana Akunchana Vedana* and *Janusandhi Atopa*.^[3]

Pathogenesis of janusandhigata vata disorders

Before execution of any treatment one should be very clear about the *Nidana Panchakas*.^[4] then plan for the best suitable treatment. In *Sandhigata Vata* there is a mainly vitiation of the *Vata Dosha*, therefore its *Nidana* is similar to the *Nidana* of *Vata Vyadhi* which includes excessive intake of *Ruksha* (Dry), *Sheeta* (Cold), *Alpa Aahara*, excessive coitus, excessive exercise, *Vegodharna* (suppression of natural urges), excess riding horse which now a days are bikes and cars, prolonged fasting, due to depletion of *Dhatu*s or psychological causes like anxiety, stress, sorrow, anger, day sleeping, night awakening.^[5] In old ages *Vata Dosha* dominates the body^[6] this will in turn lead to *Kapha Kshaya*. As decrease in the *Shleshma Bhava*, there will be decrease in the *Shleshaka Kapha* in the joints in both quantity and

quality. *Asthi* being main participant of the *Sandhi*, its *Kshaya* leads to *Khavaigunya* in the *Sandhi*. In this condition further *Vata Prakopa Nidana Sewana* spreads the *Vata Dosha* in all over body by the *Srotas*. There is an increase in *Akasha Mahabuta* due to *Dhatukshaya* which occurs due to the excess intake of *Laghu Ruksha*, *Khara Guna* which leads to *Guru* and *Sneha Guna Abhava* due to opposite *Gunas*. This will create *Riktata* in *Sandhi* and *Sthansamshraya* of *Prakupita Vata Dosha* will accumulate in *Janu Sandhi* and manifests the disease *Janusandhigata Vata*.^[7] In *Sthulas* usually *Sandhigata Vata* occurs in weight bearing joints due to *Kaphamedasa Margavrana* which vitiates the *Vata Dosha*. Excess *Meda Dhatu* will produce obstructions for formation of future *Dhatu* i.e. *Asthi*, *Majja* and *Shukra*, leads to their *Kshaya* and manifest *Janusandhigata Vata*.^[8] Particular *Poorvaroopas* is not available in literatures therefore *Avyakta* features are to be considered as *Poorvaroopas*.^[9] Management of *Sandhigata Vata* in contemporary science mainly includes the administration of analgesics, NSAIDs, intra articular steroids and surgical interventions which later may have delirious adverse effect in all over the body.^[1] Treatment of *Sandhigata Vata* in Indian Medicine System i.e. *Ayurveda*, depends on 3 principles which are *Hetu* (cause), *Linga* (symptoms), *Aushadha* (drugs).^[10] As being a *Vata Disorder*, *Samanya Chikitsa* for *Vata Vyadhi* can be adopted as a regimen.^[11] *Sushruta* states a specific line of treatment for the same^[12] which includes *Snehana*, *Swedana*, *Agnikarma*, *Upanahana*, *Bandhana*, *Unmardana* etc. *Panchakarma* includes five major *Karma* of the *Chikitsa* in which *Basti* is a regimen which has multifaceted actions making it a unique therapeutic procedure and termed as *Pradhana Chikitsa* for *Vata Vyadhis*.^[13] It is also considered to be *Sreshtha* among all the regimens by *Sushruta*.^[14] *Basti* have a huge classification which will be too elaborate to describe from route of administration to *Dravya* and numbers of *Basti*. If we look to the ingredients it is classified into two, *Niruha Basti* having *Kashaya* as a *Pradhana Dravya* and *Anuvasana Basti* having *Taila* as *Pradhana Dravya* which classified further in *Matra Basti*. *Niruha* contains a homogenous mixture of *Madhu*, *Saindhava*, *Sneha*, *Kalka*, *Kwatha*, and *Avapa Dravya* and to be mixed in sequential order by *Manthana* method. *Basti* have an ability to move into *Sukshma Srotas* in all over the body and give its effect all over because of the qualities of the ingredients. Its large variety of actions is helpful in pacifying the vitiated *Vata* and to nourish the *Dhatu* which has gone *Kshaya* in a period of time. On reviewing it is found that a lot of researches have been done on the *Basti Karma* in *Janusandhigata Vata* using objective and subjective criteria in different regions of India. In *Janusandhigata Vata* the prime symptom is pain which brings the patients to the OPD. Pain is caused as the increased *Chala Guna* of vitiated *Vata* which has a *Sthansamshya* in *Janu*. *Basti Karma* can bring down the pain and also have a quality to nourish the degenerated tissues or *Dhatu* which overall is beneficial in relieving further occurring symptoms also.

Most commonly used niruha basti

Dashamoola Basti, *Erandamooladi Basti*, *Navaprasrutika Basti*, *Panchatikta Ksheera Basti*, *Panchaprasrutika Basti*, *Astaprasrutika Basti*, *Dwipanchamooladi Basti*, *Sahacharadi Basti*.

Most commonly used anuvasana basti

Ksheerbala Taila, *Dashmooladi Taila*, *Bala Taila*, *Maha Tiktam Ghrita*, *Moorchita Tila Taila*, *Indukanta Ghrita*, *Bilwadi Taila*,

Researches done on basti used in janusandhigata vata

1. A comparative study of the effect of indukanta ghrita matra Basti and Jalaukavacharana on janusandhigata vata^[15]

According to this 30 days study two groups were compared, in one group (Group M) *Indukanta Ghrita* 60ml is given and in other group (Group J) *Jalaukavacharana* was performed and as conclusion he founds that the severity of pain and swelling were markedly decreased in both the groups and the results were statistically significant but no improvement in crepitus. On comparison between the groups, no significant difference is found but the Group M had longer sustained effect in comparison to Group J. The Gait parameter has more improved in Group M than group J. Clinically best remission was observed in majority of patients in both the groups, where in group M was more effective than group J in sustained effect, where as Group J was having instant relief in symptoms like pain and swelling.

2. Effect of anuvasana basti with ksheerabala taila in sandhigata vata (Osteoarthritis)^[16]

According to this study including 30 subjects, *Anuvana Basti* was given with *Ksheerabala Taila* for 10 days in dosage of 120 ml. They were assessed on the criteria of swelling, tenderness by ritchie articular index, pain by visual analog scale, crepitus, walking velocity and radiological by kellygren-lawrence index. There was significant reduction in subjective parameters such as pain, swelling, tenderness, crepitus and walking velocity. There were insignificant changes in radiological findings. *Anuvasana Basti* with *Ksheerabala Taila* was significant in reducing the subjective symptoms of *Sandhigata Vata*. There was no significant improvement in radiological findings.

3. A clinical study to evaluate the effect of navaprasrutika basti in sandhigata vata w.s.r. osteoarthritis of knee joint^[17]

In this study *Navaprasrutika Basti* is given as *Niruha Basti* and *Anuvasana Basti* is given by *Bilwadi Taila* in the pattern of *Yoga Basti* to 40 subjects. In the parameter like pain, discomfort after getting up from sitting without use of arms, climbing up the stairs, swelling, tenderness and crepitus, statistically significant improvement was observed. There is no statistically significant improvement in morning stiffness, increased pain on standing for 30min but had a mild improvements in

bending knees after follow up. *Navaprasritika Basti* helps in preventing degenerative tissue damage and reduced *Asthi Dhatu Kshaya*.

4. Role of *dashmooladi taila matra basti* in *janu sandhigata vata*^[18]

In this study, *Matra Basti* was given by *Dashmooladi Taila* in dosage of 60 ml for 15 days to 6 subjects and it was observed that the *Dashmooladi Taila Matra Basti* is beneficial to reduce the intensity of the taken parameters and was long lasting after follow up. The womac scale showed marked improvement. Among 6 subjects 4 got significant improvement while two of them got mild improvements.

5. Clinical evaluation of *panchatikta ksheer basti* in *sandhigata vata* w.s.r.to osteoarthritis of knee joint^[19]

In this study, Group A was given *Panchatiktaksheera Basti* to 30 subjects in dosage of 150 ml for 8 days and in Group B 30 subjects 60ml of *Anuvasana Basti* with *Tila Taila* and 500 ml of *Niruha Basti* with *Dashmoola* was given. In reducing *Shotha*, *Shoola*, *Sandhigraha* and *Vatapurnadruti Sparsha*, *Panchatiktaksheera Basti* was more effective than *Yoga Basti*.

6. Effect of *yoga basti* in *sandhivata* w.s.r. to osteoarthritis of knee joint^[20]

In this study, 30 subjects were given *Anuvasana Basti* with *Dashmoola Taila* in dosage of 150ml and *Niruha Basti* with *Erandamooladi Basti* in dosage of 600ml in *Yoga Basti* pattern. The observations were made on various parameters and significant results were found in all the symptoms. There is improvement noted in the walking velocity also. It was observed that *Yoga basti* is a effective treatment in the form of *Dashmoola Taila as Anuvasana Basti* and *Erandamooladi Niruha Basti* in *Sandhivata*. Pain and crepitus are mainly due to *Vata Dosha* and above data proves that *Yoga basti* controls *Vata Dosha* and relieves these symptoms.

7. The role of *matra basti* with *bala taila* in *sandhigata vata* w.s.r to ability to climbing stairs in patients of osteoarthritis - Knee joint^[21]

In this study 20 subjects were given *Matra Basti* with *Bala Taila* for 7 days effects were verified based on the parameter of ability to climb stairs .Statistically significant improvement was observed.

8. Role of *tikta ksheera Basti* and *Adityapaka guggulu* in the management of *sandhigata vata* (Osteoarthritis)^[22]

In this study 45 subjects were given *Adityapaka Guggulu* 2 tablets twice a day for 30 days (each tablet – 500mg) and *Tikta Ksheera Bati* as *Niruha Basti* in 250 ml and *Dashmoola Taila* 50ml as *Anuvasana Basti* in *Karma Basti* pattern. The research concludes highly statistically significant result in all the taken parameters.

DISCUSSION

Janusandhigata Vata is a disorder dominated by *Shoola* caused by *Vata Dosha*. *Basti* considered as *Ardhachikitsa* and prime modality for treating *Vata Vyadhi*, as *Basti* by having multifaceted actions it is very efficient to maintain the health and nourish the *Dhatu*s which have undergone *Kshaya*. By pacifying *Vata* it also pacify remaining *Doshas*. *Niruha Basti*, *Anuvasana Basti* is found to be effective also in the pattern of *Yoga Basti* or modified *Kala Basti*, but to pacify and gain full effect one must undergo *Karma Basti* Pattern and actual full effect can be seen after *Dwiparihar Kala* (follow up). It is found that there are many *Basti* available in the texts among them *Tikta Rasa Yukta Basti* was found to be more effective in *Asthigatavikaras* as *Vayu* and *Akash Mahabhuta* in *Tikta Rasa* has ability to go in *Sukshma Srotas* and act on *Vata Dosha* and *Tikta Rasa* along with *Ksheera* helps in managing *Asthi* or *Asthigata Roga*. Others *Basti* like *Anuvasana* with *Vata Ghana Taila* and *Niruha Basti* with *Vata Ghana Dravya* also found to be effective. In *Niruha Basti*, *Sukshma*, *Teekshna* and *Vyavyi Guna* of *Makshika* and *Lavana* help *Basti Dravya* to reach to minute channels of the body. *Srothomukha Vishodhana* will be caused by *Sneha* present in *Basti* which help in easily elimination of imbalance *Dosha*. The *Kalka* used, helps in attaining the consistency of *Basti*. All ingredients play a vital role and only get a homogenous mixture if mixed in sequence properly. *Anuvasana Basti* nourishes all the *Dhatu* and provides *Bala* to the *Sharira* which can reduce the symptoms of disease and stops its prognosis.

CONCLUSION

On reviewing the various literatures and research works, it has been found that *Basti Karma* is highly significant in the treatment of *Janusandhigata Vata*. *Basti* also give effect for long term, after follow up also its effects is seen all over the body. *Basti Chikitsa* can be made more efficient if some local regimens like *Upanaha*, *Agnikarma*, *Janu Basti* etc. are also opted along with it. Thus by adopting *Basti Chikitsa* by considering the *Sukshma* knowledge of *Dosha*, *Bheshaja*, *Desha*, *Kala*, *Bala*, *Sharira*, *Aharaadi* aspects and by applying *Yukti* for the different combinations will found to be highly statistically effective and can provide a scope of further researches. *Basti* is found to be effective in treating *Janusandhigata Vata* very significantly.

REFERENCES

- David T. Felson. Part15. Immune-Mediated, inflammatory, and rheumatological disorders. Osteoarthritis J. Larry Jamenson, Dennis L. Kasper, Dan L. Longo Et al. (Edi.). Harisson's Principles of Internal Medicine. 19th Edition. New York: MC Graw Hill Education, 2018; 2226: 3, 2, 394.
- Sushruta, Dalhana, Sushruta Samhita with Nibandhasangraha and Nyayachandrika Panjika Commentary, Sharira Sthana Reprint Edition, Chaukhamba Orientalia, 2014; 370: 6 – 6.

3. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary, Chikitsa Sthana Reprint edition, Chaukhambha Publications, 2015; 618: 28 – 37.
4. Dr. Bhrmahand tripathi. Chapter Madhava Nidana. Reprint Edition, Varanasi: Chaukhambha Publication, 2010; 12: 1 - 4.
5. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary, Chikitsa Sthana Reprint edition, Chaukhambha Publications, 2015; 617: 28 , 15-18.
6. Vagbhat, Ashtanga Hridaya with Arundatta and Hemadri Commentary, Sutra Sthana Reprint edition, Chaukhamba Subharti Prakashana; 2014; 7: 1 – 8.
7. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary, Chikitsa Sthana Reprint edition, Chaukhambha Publications, 2015; 617: 28 - 16.
8. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary, Chikitsa Sthana Reprint edition, Chaukhambha Publications, 2015; 619: 28, 57-58.
9. Dr. Bhrmahand tripathi. Chapter 22 Verse 5. Madhava Nidana. Reprint Edition, Varanasi: Chaukhambha Publication, 2010; 0510.
10. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary, Sutra Sthana Reprint edition, Chaukhambha Publications, 2015; 7: 1 – 24.
11. Agnivesha, Charaka Samhita with Ayurveda Deepika Commentary, Chikitsa Sthana Reprint edition, Chaukhambha Publications, 2015; 617: 28 – 35.
12. Sushruta, Dalhana, Sushruta Samhita with Nibandhasangraha and Nyayachandrika Panjika Commentary, Chikitsa Sthana Reprint Edition, Chaukhamba Orientalia, 2014; 420: 4 – 8.
13. Sushruta, Dalhana, Sushruta Samhita with Nibandhasangraha and Nyayachandrika Panjika Commentary, Chikitsa Sthana Reprint Edition, Chaukhamba Orientalia, 2014; 525: 35 – 3.
14. Sushruta, Dalhana, Sushruta Samhita with Nibandhasangraha and Nyayachandrika Panjika Commentary, Chikitsa Sthana Reprint Edition, Chaukhamba Orientalia, 2014; 525: 35 – 1.
15. Chanabasappa Pujar. A comparative study of the effect of Indukanta Ghrita Mara Basti and Jalaukavacharana on Janusandhigata Vata; Alva's Ayurveda Medical College & Hospital, Moodbidri, Karnataka; RGUHS, 2011.
16. Grampurohit P, Rao N, Harti S. Effect of Anuvasana Basti with Ksheerabala Taila in Sandhigata Vata (Osteoarthritis). AYU (An International Quarterly Journal of Research in Ayurveda), 2014; 35(2): 148.
17. Varun. D. A Clinical study to evaluate the effect of Navaprasrithika Basti in Janusandhigata Vata w.s.r. Osteoarthritis in Knee; S.D.M. College of Ayurveda, Udupi, Karnataka; RGUHS, 2012.
18. Wadhawa R, Role of Dashmooladi Tail Matra Basti in Janu Sandhigata Vata. Unique journal of Ayurveda and herbal medicines, 2015; 03(2): 51-54.
19. Sayyed A. Kulkarni S. Kulkarni E. Kulkarni R. Clinical evaluation of Panchatikta Ksheer Basti in Sandhigata vata w.s.r.to osteoarthritis of knee joint. Indian Journal of Pharmaceutical Science & Research, 2017; 7(1): 23-29.
20. Daksha Rathod, Kalpesh Dattani. Effect of Yoga Basti in Sandhivata w.s.r. to Osteoarthritis of knee joint. International Journal of Ayurvedic Medicine, 2017; 8(2): 73-79.
21. Vats Anurag, Bharadwaj Shreyasi, Sharma Satish, Richa. The Role of Matra Basti with Bala taila in Sandhigata Vata w.s.r to ability to Climbing stairs in patients of osteoarthritis - Knee Joint. International Journal of Ayurvedic Medicine, 2015; 6(3): 262-266.
22. Nikam Dattatrya, Singh J.P., Mishra Daya Shankar. Role of Tikta Ksheera Basti and Adityapaka Guggulu in the management of Sandhigatavata (Osteoarthritis). International Ayurvedic Medical Journal, 2013; 1: 2.