

# EUROPEAN JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.ejpmr.com

Review Article
ISSN 2394-3211
EJPMR

## A CONCEPTUAL REVIEW ON BASTI WITH SPECIAL REFERENCE TO KATI BASTI

## 1\*Dr. Deepa Ramesh Talekar and 2Dr. Jyoti Vinod Tanpure

<sup>1</sup>PG Scholar In Kaychikitsa Department, At SVNHT's Ayurved College, Rahuri. <sup>2</sup>Associate Professor & Guide In Kaychikitsa Department, At SVNHT's Ayurved College, Rahuri.

\*Corresponding Author: Dr. Deepa Ramesh Talekar

PG Scholar In Kaychikitsa Department, At SVNHT's Ayurved College, Rahuri.

Article Received on 23/11/2021

Article Revised on 13/12/2021

Article Accepted on 02/01/2022

## INTRODUCTION

The word 'Basti' is used here with the meaning of "to reside" or "to retain". In 'Kati Basti' the medicine is made to retain over the Kati Pradesha for a prescribed period. None of our classics have explanations about Kati Basti as such. But when we go through the classics, some of the procedures have close resemblance with the Kati Basti followed now a day. Because of the contextual importance these procedures are reviewed in brief. Shiro Basti is the procedure in which the Sneha is made retain over the scalp with help of Masha Pishti and a Charma Patta (leather sheet) for a specified period of time. Observing the results of above procedures the later physicians developed a similar procedure over Kati and named it as Kati Basti. In this way, Kati Basti is evolved. Today, the same is performed over the Janu and Greeva regions and named respectively as Janu Basti & Greeva Basti. This procedure is unique, in the sense comprising both Snehana and Swedana or it may be put like this "Sneha yukta Sweda". This therapy is in practice in the management of conditions like Kati Shoola, Kati Graha and Prista Graha which is included under Nanatmaja Vata Vyadhi.

In Ayurvedic texts, also the Kati Shoola has been mentioned as a very common problem. It is a major symptom of provoked Vata. Panchakarma is a very unique therapeutic procedure because of its preventive, promotive, prophylactic and rejuvinative properties as well as providing a radical cure. Among these Panchakarmas; Basti Karma is such a Chikitsa that is applicable in all the Vatavyadhi.

# • CONCEPTUAL REVIEW

## Vvutpatti of Kati Basti

The term Kati Basti consists of two words i.e. Kati and Basti. The word Kati is in female gender. It is derived from Kat + In Pratyaya. The term Basti is in male gender. It is derived from Vas + Tich Pratyaya.

#### Nirukti

Kati – Sronidese, Kati is said as Shroni Pradesha, The hip or buttocks. Basti – (Dwelling, abiding, staying, bladder, the pelvis) Here the word "Vas Acchadane" can be considered for Kati Basti. Therefore Darana or maintenance of certain substances in the Kati Pradesha for a stipulated period of time may be considered as Kati Basti.

- Kati basti is conducted by heating taila, this should be considered as Sagni sweda.
- This procedure is performed in Kati Pradesha, not in whole body. Hence this is a type of Ekangya Sweda.
- In Kati Basti taila the media of the procedure is Taila. Hence it is considered as Snigdha Sweda.

- This procedure is not followed by any of the Samshodhana and meant only for Shamshamana Sweda.
- This is not coming under Mahan sweda because the whole body is not involved and the intensity of heat administration is also less. It is also Avara or Heena Sweda. Hence it is coming under the category of Madhyama Sweda.
- While dealing with Dravya Sweda Vagbhata said Parisheka and Avagaha which are othing but Drava Sweda. The oil whichever is used is retained in a specific place for specific time. It is nothing but immersion of certain area with oil. In the same way during the initiation & completion of the procedure there will be sprinkling of Oil. Both Parisheka and Avagaha are considered in restricted sense only.
- Harita said Jala Sweda which is nothing but Dravya sweda. So kati basti may be considered as Drava Sweda even though the literary meaning of Jala is water. So Kati Basti may be considered as a Sagni, Ekanga, Snigdha, Samshamaniya, Madhyama, Drava Sweda and Parisheka.

## Procedure

## **Materials Required**

Black gram flour- 700gms, Suitable oil- 250ml, Vessel-3, Spoon-1, Cotton- Q.S., Hot waterbath-1, Therapist-1.

## **4** Procedure

Make thick dough with black gram powder by mixing with adequate quantity of water. Using the thick dough

make a rim and fix it firmly on the low back (lumbosacral) region where the highest pain is present. Take the specified oil, warm it and pour on the inner wall of rim taking care not to spill out. When oil becomes cool, remove it with cotton & again refill with warm oil. Uniform temperature (42-450 C) should be maintained throughout the procedure. Time and duration of the procedure varies according to the disease condition. Usually Kaţi Basti is done for 30-45 minutes.

## Indications

Lumbar spondylosis, disc prolapse (IVDP), Lumbar canal stenosis, Ankylosing spondilitis, Radiculopathies, Fracture dislocation of vertebra, paraplegia, mechanical backache.

#### **Precautions**

- The dough should be correctly prepared and fixed to the back otherwise there are chances of leakage.
- ♣ The Taila should not be poured from height it should be glided over the Taila which is already present in the dough.
- While taking out the Taila from the dough for heating care should be taken that the skin is not exposed it may cause burn injuries while pouring the heated Taila as the skin will directly come in contact with the hot.
- ♣ The temperature of the oil should be checked regularly and patient should be enquired about excess heat.

## Mode of Action

Commentator Dalhana has explained in detail about the absorption of Sneha used in Abhyanga procedure. According to this, the oil used in Abhyanga can reaches up to the different Dhatu if applied for the sufficient time. Hence, it is clear that the drug used in the Abhyanga gets absorbed by the skin. Dalhana also mentions that when Snehana drug reaches to the particular Dhatu, it subsides or cures the diseases of that particular Dhatu. Sushruta has mentioned that Sneha used in Avagahana, through Siramukha (Opening of the veins), Romakupa (root of the hairs) and Dhamani (Arteries) nourishes the body and thus provides strength.

Same thing we can understand for Abhyanga also which is a type of external Snehana only. Thus, Sneha (oil) used for Snehana (Oleation) enters in the body through Romakupa, Siramukha and Dhamani and nourishes body. According to modern Science absorption through the skin can be enhanced by suspending the drug in an oily vehicle and rubbing the resulting preparation into the skin. In this way it is proved by both the sciences that, the drug used in Abhyanga is absorbed through the skin.

Acharya Charaka has described that Vayu dominates in the Sparshanendriya i.e. tactile sensory organ and this sensory organ is lodged in the skin. The Abhyanga is exceedingly beneficial to the skin, so one should practice it regularly. Sparshanendriya is present in all over the body and so it is present in the place of other Indriyas also. Other Indriyas are dependent on sparshanendriya for their Vishayagrahana.

Indriyas are in close contact of mind hence if Indriyas remain healthy, mind automatically remains healthy. Thus Abhyanga keeps body and mind healthy. The effect of Abhyanga can assume in two way i.e. physical manipulations and the effect of the drug in the medicated oil. Physical manipulation in the form of massage increases the circulation of blood and plasma, it can stimulate and strengthen the lymphatic system and remove internal waste products. Muscles and deep connective tissues get relaxation. The strokes used in Abhyanga viz. kneading and friction also have effects like —

- ♣ Increase in flow of circulation local to the area treated
- Reduction of tone in muscles, which are in a state of excess tension
- Stretching of tight fascia and restoration of mobility of soft tissues
- Relief in pain is obtained by releasing acute or chronic tension in muscles and by affecting pressure and touch nerve endings
- ♣ Where there is chronic edema, the fibrin within the fluid can be stretched, so facilitating drainage of the fluid in to lymph vessels.

There are three factors, which govern the permeability of the skin –

- The skin itself
- The vehicle which affects the transfer
- The substances which penetrate, permeate or is absorbed.

The intact normal skin is impermeable to water and electrolytes; this is neither due to presence of an oilywaxy cover nor due to the presence of the horny layer. Rather the absorption barrier is placed in the stratum granulosum and stratum lucidum, which represent an electric double layer with positive hydrogen ions, on the inner side. The dermal appendages however, afford a break in the intact epidermis. If a substance penetrates into follicular canals and reaches the duct of the sebaceous gland and then the gland cells, it has circumvented the absorption barrier.

The permeability of the cells of the sebaceous gland is greater than that of the granular layer of the epidermis. The concept that the living of the epidermis allows the penetration of the cells by lipoid substances is theoretically true. The vehicles or other things that alter the permeability of the skin affect transfer must do so by modifying its structure or function in case of

- Cytolysis or destruction of the stratum lucidum and granular layer of the epidermis.
- Inflammatory hyperemia.

- Removal of the skin constituents such as cholesterol by precipitation (soaps) or solution (ether, chloroform, benzene) and
- mild irritation or stimulation of the epidermal cells.

An important characteristic of the substances which penetrates are absorbed through the skin in ratio between lipoid solubility and water solubility. Both solubilities are needed for a substance to move in and between the cells.

True fats and non-saponificable substances cannot pass through the skin. Theoretically, substances such as cholesterol, phospholipids, and fatty acids, which are miscible in water and fat, should penetrate the skin. It must be remembered too, that a true fat in contact with the skin may be subjected to the action of the "skin lipase" and thus attain hydro-phillic properties after that action. Animal oils penetrate the dermal appendages best, vegetable oils less and mineral oils the least.

The lipid like materials pass directly through cells, the lipids content of these cutaneous cell membrane permits such passage. Various enzymes are present in the skin, a diastase, a lipase; a protease and a peptidase have been identified. If applied in the direction of hair follicles, the Sneha are absorbed through the skin. Anything hot or warm applied to the skin will immediately cause capillary dilatation. Same phenomenon applies when Abhyanga is carried out. Fat enter through the dilated Capillaries can easily be absorbed into the system. According to Sushruta, by the Sarvanga Abhyanga body acquires softness, Vata & Kapha are controlled, Dhatu are nourished, luster, color and strength are increased.

#### REFERENCES

- Astangahrdaya (2003) Nidan Sthan 15/7: Vidyotani Hindi commentary. By Kaviraj Atridev Gupt Edi. Fourth Chaukhamba Sanskrit Samsthana, Varanasi.
- Astangahrdaya (2003) Nidan Sthan 16/6: Vidyotani Hindi commentary. By Kaviraj Atridev Gupt Edi. Fourth Chaukhamba Sanskrit Samsthana, Varanasi.
- 3. Madhav Nidana, Vol 1,4/17: Sanskrit Commentary by Vijayraksita & Srikanthadutta, and Vimala Madhudhara Hindi Commentary by Dr Brahmananda Tripathi, Edi. First Riprint 2002.
- Madhav Nidana, Vol 1,5/12: Sanskrit Commentary by Vijayraksita & Srikanthadutta, and Vimala Madhudhara Hindi Commentary by Dr Brahmananda Tripathi, Edi. First Riprint 2002.
- Madhav Nidana, Vol 1,5/28: Sanskrit Commentary by Vijayraksita & Srikanthadutta, and Vimala Madhudhara Hindi Commentary by Dr Brahmananda Tripathi, Edi. First Riprint 2002.
- 6. Madhav Nidana, Vol 1,25/7-8: Sanskrit Commentary by Vijayraksita & Srikanthadutta, and Vimala Madhudhara Hindi Commentary by Dr Brahmananda Tripathi, Edi. First Riprint 2002.

- 7. Madhav Nidana, Vol 1,27/19: Sanskrit Commentary by Vijayraksita & Srikanthadutta, and Vimala Madhudhara Hindi Commentary by Dr Brahmananda Tripathi, Edi. First Riprint 2002.
- 8. Ga. Ni Part 2, 19/160 15) Bh. Pr. Utt. Madhyama Sthana. 24/115-116.
- Madhav Nidana, Vol 1,22/14: Sanskrit Commentary by Vijayraksita & Srikanthadutta, and Vimala Madhudhara Hindi Commentary by Dr Brahmananda Tripathi, Edi. First Riprint 2002.
- Susruta Samhita (1975), Sutra Sthan 35/12, Hindi Comm. by Artideva, Motilal, Varanasidas Reprint 1994.
- Astanga Samgraha, Shareera Sthan 8/30: Vrddha Vagbhata with Commentary by Indu, and Saroj Hindi Commentary by Dr R D Tripathi Edi. Sixth 1996.
- 12. Astangahrdaya (2003) Sutra Sthan 12/18: Vidyotani Hindi commentary. By Kaviraj Atridev Gupt Edi. Fourth Chaukhamba Sanskrit Samsthana, Varanasi.

www.ejpmr.com Vol 9, Issue 2, 2022. ISO 9001:2015 Certified Journal 113