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A conceptual study on effect of *Manjishtadi Kshara Basti* in the management of Thromboangitis Obliterans

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ABSTRACT

Thromboangitis Obliterans (TAO) is a non atherosclerotic inflammatory disorder of unknown aetiology that affect small and medium-sized vessels of the extremities and has a strong association with smoking. The incidence is more in population who are under 45 years of age, current or recent history of tobacco use. It is noticed by presence of distal-extremity ischemia indicated by claudication, pain at rest, ischemic ulcers or gangrene. In the management of TAO various drugs like Analgesics, Vasodilators, Anticoagulants have been tried with questionable value which have drawbacks like bleeding tendencies, systemic adverse effects and most of the times the disease ends up with major or minor amputations. Hence in TAO, a holistic, natural mode of management under the *Vatarakta* line of treatment is to be adopted. Even though *Vatarakta* management encompasses wide range of treatment modalities; *Basti* is exemplarily useful.

Key words: *Manjishtadi Ksharabasti, Thromboangitis Obliterans (TAO), Vatarakta, Basti.*

INTRODUCTION

Thromboangitis Obliterans (TAO), an inflammatory vasculopathy also known as Buerger's disease, is a variety of disease where inflammatory endarteritis hampers the proper blood supply.

The condition has strong association with tobacco use. The onset of Buerger's disease occurs between 40 and 45 years of age, and men are most commonly affected.

It begins with ischemia of the distal small vessels of the arms, legs, hands and feet. Involvement of the large arteries is unusual and rarely occurs in the absence of occlusive disease of the small vessels.^[1]

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In Modern medicine, Analgesics, vasodilators, anti platelet aggregators are some choices for conservative management.

Lumbar Sympathectomy provides short-term pain relief and promotes ulcer healing in patients with Buerger's disease but carries no long-term benefit.^[2]

Vatarakta also known as *Vatasonita* is caused by the vitiated *Vata Dosha* and *Rakta* which impedes the *Gati* (movement) of each other. This condition mainly affects people who are not physically active and indulge in factors that vitiate *Rakta*. People of *Pitta Prakriti* are more prone to this condition.

Vatarakta is a group of inflammatory disorders which include gouty arthritis, rheumatoid arthritis, connective tissue disorders, inflammatory polyarthritis, vasculitis, etc. The causative factors for *Vatarakta* are in table 1.

Table 1: Showing various *Nidanas* of *Vatarakta*^[3]

Aharaja Nidana	Viharaja Nidana
Excessive intake of <i>Kashaya, Katu, Tikta, Amla, Lavana</i> and <i>Ksara Rasas Pradhana Ahara</i>	<i>Mithya Vihara</i>

<i>Snigdha, Ushna, Ruksha Gunayukta Ahar Sevana</i> in excess.	<i>Ativyayam, Vibhrama, Avyavaya.</i>
<i>Alpabhojana, Abhojan, Adhyashana, Virudhashana, Mishanna Sukhbhojana, Mithya Ahara Sevana</i>	<i>Sthula, Achankramansheelata, Divaswapna, Aswapna.</i>
<i>Rutu Satmya Viparyasat Snehadi Sevana</i>	<i>Adhva, Hasti, Ashva, Ushtrayana, Krodha, Prajagarana</i>
<i>Klinna Shushka Mamsa Sevana</i>	<i>Abhighata, Ambukrida, Plavana, Langhana</i>
Excessive intake of <i>Pinyaka, Mulaka Kulatha, Masha, Nishpav, Shaka, Palal, Ikshu, Dadhi, Hyaranala.</i>	<i>Sukumaranam</i>
Excessive use of <i>Sauvira, Shukta, Takra, Sura</i> and <i>Asava</i> preparations.	<i>Ushnakaleatyadhwa, Veganigrahana, Sthulanam, Sukhinam.</i>

Samprapti of Vatarakta

Vatarakta is caused by above said *Aharaj & Viharaj Nidana Sevana* i.e., *Vataprakopaka Hetu & Rakta Prakopaka Hetu*. In the initial stage, vitiated *Vata* gets obstructed by vitiated *Rakta*; later further vitiated *Rakta* in turn gets obstructed by further vitiated *Vata* resulting in mutual obstruction. This is told as *Anyonya Avarana* by *Chakrapani*.

Hence, *Vatarakta* is considered as *Avaranjanya Vatavyadhi*. Due to properties of *Sukshmatva* and *Saratwa* of *Vayu, Dravatwa* and *Saratwa* of *Rakta*, they spread all over the body. The spreading is facilitated by *Vyana Vayu*. The *Doshas* get lodged in *Sirayanas*. The main and first site of manifestation is *Pada* or *Hasta* and from there onwards spread upwards. The process of spreading of manifestations can be understood by the similar nature to that of rat poison.^[4]

The symptoms of TAO can be well correlated with *Vatarakta* in *Ayurveda* is in table 2

Table 2: Showing similarities between Vatarakta and TAO in clinical features

SN	Clinical Features	In Vatarakta ^[5]	In TAO ^[6]
1.	<i>Asweda</i> (anhydrosis)	Present	Present
2.	<i>Karshnata</i> (blackish discolouration)	Present	Present
3.	<i>Sparshaghnatwa</i> (parasthesia)	Present	Present
4.	<i>Kshate Ati Ruk</i> (tenderness)	Present	Present
5.	<i>Supti</i> (numbness)	present	Present
6.	<i>Sheetalata</i> (coldness in limbs)	present	Present
7.	<i>Daha</i> (burning sensation)	present	Present
8.	<i>Khanjathwa</i> (lameness)	present	Present
9.	<i>Dhamani Anguli Sandhi Sankocha</i> (constriction of vessels and fingers)	present	Present
10.	<i>Sheeta Pradwasha</i> (aversion towards cold)	present	Present
11.	<i>Prashosha</i> (atrophy)	present	Present
12.	<i>Mamsakotha</i> (gangrene) as a complication	present	Present

Manjisthadikshara Basti is an *Anubhuta Yoga* (established through empirical use) and is effective in management of *Srotavarodha* (blocked channels).

Manjishtadi Kshara Basti is a combination of two *Bastis*, that is;

1. *Manjishtadi Kwatha Basti* - explained by *Acharya Sharangadhara*.^[7]
2. *Kshara Basti* - explained by *Acharya Chakradatta*.^[8]

Table 3: Showing Dravyas with their actions

SN	Dravyas	Actions
1.	<i>Manjishtadi Kwatha</i>	<i>Rakata Shodaka, Rakta Prasadaka</i> and <i>Tridosahara</i> .
2.	<i>Kshara Basti</i>	<i>Srotoshodaka</i>

Preparation of Manjishtadi Kshara Basti

Materials required are *Saindhava Lavana*, *Manjishtaditaila*, *Madhu*, *Manjishtadi Kwatha*, *Gomutra*, *Kanji*, *Khalwa Yantra*, *Basti Yantra*.

Method of preparation of Basti

Preparation of *Manjishtadi Kshara Basti*

The different components of *Basti* should be mixed in following pattern :

- *Gomutra*
- *Madhu*
- *Saindhava Lavana*
- *Manjishtadi Taila*
- *Manjishtadi Kwatha*
- *Kanji*

Manjishtadi Kwatha drugs with their botanical names are.^[9]

- *Manjishta - Rubia cardifolia*
- *Amalaki - Emblica officinallis*
- *Hareetaki - Terminalia chebula*
- *Bibhitaki - Terminilia bellerica*
- *Bhunimbha - Andrographis paniculata*
- *Nimbha - Azharidachta indica*
- *Haridra - Curcuma longa*
- *Guduchi - Tinospora cardifolia*

All ingredients are thoroughly mixed and a preparation in the form of emulsion was obtained, this was made *Sukhoshna* by keeping it inside the *Ushnajala*.

Method of administration of Basti**Purvakarma**

Procedure will be explained to patients in advance and written consent will be taken. Prior to *Anuvasana Basti*, *Laghu Bhojana* will be advised.

Pradhana Karma

Anuvasana Basti - Patients will be subjected to *Mridu Abhyanga* with lukewarm *Taila* and *Nadisweda* locally

over abdomen, buttocks and on the thighs. After *Abhyanga* and *Sweda*, Patients will be asked to lie on the *Droni* in *Vamaparshwa* (left lateral position with right leg flexed) and asked to take deep breath. *Sukoshna Anuvasana Dravya* will be administered slowly with the help of *Basti* syringe.

Niruha Basti - Patients will be advised to come in empty stomach, after confirming digestion of previously taken food and before developing hunger *Mridu Abhyanga* with lukewarm *Tila Taila* and *Nadi Sweda* locally will be done over abdomen, buttocks and on thighs. Patients will be asked to lie on *Droni* in *Vamaparshwa* (left lateral position with right leg flexed) and asked to take deep breath; *Sukoshna Basti Dravya* will be administered slowly with the help of enema can fitted with a rubber catheter. Extreme care will be taken to avoid all the possible *Basti Vyapat*.

Probable mode of action of Manjishtadi Kshara Basti in TAO

In TAO the blood vessels get inflamed and obstructing the lumen with clots



Leads to reduced blood flow to the body parts below the obstruction



The *Manjishtadi Kshara Basti* by its *Raktashodaka* and *Rakta Prasadaka* property reduces the inflammation and purifies blood



The *Kshara Basti* by its *Srotoshodaka* property helps in clear the obstruction in lumen and improves circulation to affected part



There by both combining helps in reduce the inflammation and clots and enhance good circulation to affected body part.

Based on the above-mentioned views *Manjisthadi Kshara Basti* was considered for a treatment modality for Thromboangitis Obliterans (TAO).

DISCUSSION

TAO is one of the most painful vascular disease. The long-term management of it is challenging for the modern surgeons too.

The sign and symptoms of TAO can be well correlated with *Vatarakta* in Ayurveda (table 1) In *Vatarakta*. due to the diet and lifestyle aggravating the *Rakta* (blood) gets vitiated and it does the *Avarana* (covering) of *Vata*. *Vata Prakopa* (aggregation) happens and it gets localized on different parts of the body manifesting the signs and symptoms of aggravated *Vata* like pain etc. In Ayurveda, *Manjistha* (*Rubia cordifolia*) is a renowned *Rakta Prasadaka* (Blood purifier), *Tridosahara* (balancing the 3 *Doshas*) and *Srotosodhaka* (cleansing the channels). So, use of *Manjisthadi Kvatha* (decoction) and *Manjisthadi Taila* (oil) purifies the *Rakta* (blood), pacifies the *Vata* and makes the proper flow inside the channels (*Srotosodhaka*). *Kshara Basti* (Alkaline Enema) has the fast-spreading activity which helps to clean the peripheral vascular channels. Hence, the combination *Basti* is very effective on Peripheral Vascular Diseases like TAO.

CONCLUSION

Thromboangitis obliterans (TAO) is a painful disease of mainly medium sized blood vessels. It is progressive and associated with severe pain according to ischaemic changes. It is directly associated with tobacco smoking. The symptoms of TAO can be well correlated with *Vatarakta* in Ayurveda. Ayurvedic enema (*Manjisthadi Ksharabasti*) is an *Anubhuta Yoga* (established by empirical use) showing promising results in TAO. *Ksharabasti* is mentioned by *Chakradatta* and decoction of *Rubia cordifolia* (*Manjisthadi Kvath*) is mentioned by *Sarangadhara*. *Rubia cordifolia* (*Manjistha*) is renowned blood purifier (*Rakta Sodhaka*), channel cleansing (*Srotosodhaka*) and the *Ksharabasti* removes the *Avarana* of *Vata* (blocking activity of *Vata*). Hence, TAO can be successfully

managed by Ayurvedic Enema therapy (*Manjisthadi Kshara Basti*).

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