

Modified Picha Basti in the management of Ulcerative Colitis - A Case Report

Surya Das S^{1*}, C Raghunathan Nair², Deepthi CV³

DOI:10.21760/jaims.10.9.56

^{1*} Surya Das S, Second Year Post Graduate Scholar, Department of Shalya Tantra, Sree Narayana Institute of Ayurvedic Studies and Research, Pangode Puthur Kollam, Kerala, India.

² C Raghunathan Nair, HOD and Professor, Department of Shalya Tantra, Sree Narayana Institute of Ayurvedic Studies and Research, Pangode Puthur Kollam, Kerala, India.

³ Deepthi CV, Professor, Department of Shalya Tantra, Sree Narayana Institute of Ayurvedic Studies and Research, Pangode Puthur Kollam, Kerala, India.


Ulcerative colitis (UC) is a chronic, relapsing and remitting inflammatory bowel disease (IBD), characterized by mucosal inflammation that typically begins in the rectum and extends proximally to involve the entire colon. It significantly impairs the quality of life and has a profound emotional and social impact on affected individuals. Despite advances in modern medicine, a completely satisfactory treatment for UC remains elusive.

Methods: A 37 Year male patient visited Shalyatantra department of Sree Narayana Institute of Ayurvedic Studies and Research Puthoor, Kollam complaining of watery stools, blood and mucus mixed bowel and general body weakness in the last 4 years. Modified Picha Basthi (Karma Vasthi Schedule) after 7 days of Snehapana with Dadimadi Ghritha along with internal medications given.

Results: After 41 days of treatment, faecal calprotectin test which is highly raised (756) before treatment is found to be less than 5 after treatment. There were also good symptomatic relief and improvement in general health of the patient.

Conclusion: Piccha Basti was prepared using easily available herbs and, upon administration, provided significant symptomatic relief in patients. Its Sangrahi (absorbent) and Shodhana (purificatory) properties promote healing of the colonic mucosa. Notably, hemoglobin (Hb) levels showed improvement following the Parihara Kala (post-treatment recovery period) of Basti, indicating an enhancement in the patient's overall health and vitality. This suggests that Piccha Basti not only aids in symptom management but also contributes to the general well-being of patients with ulcerative colitis. The findings of this study indicate that such an approach could potentially reduce the dependency on corticosteroids and the need for surgical interventions in the management of ulcerative colitis.

Keywords: Piccha Basti, Ulcerative colitis, Irritable bowel, Grahani, Sangrahani, Case Report

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Surya Das S, Second Year Post Graduate Scholar, Department of Shalya Tantra, Sree Narayana Institute of Ayurvedic Studies and Research, Pangode Puthur Kollam, Kerala, India. Email: drsuryasyam94@gmail.com	Surya Das S, C Raghunathan Nair, Deepthi CV, Modified Picha Basti in the management of Ulcerative Colitis - A Case Report. J Ayu Int Med Sci. 2025;10(9):347-353. Available From https://jaims.in/jaims/article/view/4738/	

Manuscript Received
2025-07-11

Review Round 1
2025-07-22

Review Round 2
2025-08-04

Review Round 3
2025-08-14

Accepted
2025-08-25

Conflict of Interest
None

Funding
Nil

Ethical Approval
Not required

Plagiarism X-checker
11.52

Note



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Introduction

Ulcerative Colitis (UC) is a chronic, idiopathic form of inflammatory bowel disease (IBD), characterized by an immune-mediated inflammation of the intestinal mucosa. It typically follows a relapsing and remitting course. While the exact cause remains unknown, UC is known to be confined to the mucosal and submucosal layers of the colonic wall, with the rectum being the most commonly and initially affected site. In over half of the cases, the disease extends to involve the entire colon.[1] During severe episodes, the colonic mucosa becomes hemorrhagic, edematous, and ulcerated, leading to significant clinical symptoms.

In *Ayurvedic* classics, the condition can be correlated with several disorders, primarily *Grahani Roga*. According to *Ayurveda*, *Grahani* is considered the principal seat of *Agni* (digestive fire) and is responsible for the digestion, absorption, and assimilation of food.[2] *Grahani* retains undigested food and only allows digested material to pass through the intestines. Any disturbance in *Agni* leads to improper digestion, resulting in *Grahani Roga*.

Acharya Vagbhata describes a subtype, *Pitta-Kapha Grahani*, [3] which presents with symptoms closely resembling those of UC - such as recurrent passage of undigested food, alternating constipation and loose stools, sour belching, anorexia, abdominal discomfort, and weakness. Similarly, *Madhavakara* describes *Sangrahani*, which also shares comparable features. The main symptoms of UC- anorectal bleeding, watery discharge, abdominal pain, tenesmus, mucous in stools, malaise, and frequent bowel movements - can be found in these conditions.[4] From an *Ayurvedic* pathophysiological perspective, UC can also be related to *Purishavaha Srotas* disorders, including *Pravahika*, *Pittaja Atisara*, and *Raktaja Atisara*, all of which present with blood in stool as a key symptom. Additionally, *Arogya Kalpadruma* mentions *Jathara Vrana*, which exhibits similar symptoms and could further help in differential diagnosis.[5] UC is a long-standing condition that imposes a significant health burden and poses major challenges for medical professionals due to its high morbidity and potential complications.[6] While modern medicine offers symptomatic relief, it often relies on steroids and, in severe cases, surgical intervention - both of which carry long-term risks.

In contrast, *Ayurveda* offers a holistic approach through *Panchakarma* therapies, among which *Pichha Basti* is particularly effective. *Pichha Basti*, prepared from easily available herbs, possesses *Sangrahi* (absorbent) and *Shodhana* (purificatory) properties that aid in healing the colonic mucosa, reduce inflammation, and restore the function of *Apana Vata*. Notably, improvement in haemoglobin levels and general well-being has been observed following treatment, indicating its systemic benefits.

Therefore, there is a pressing need to globalize and integrate such traditional treatments, like *Pichha Basti*, into the broader medical system for the effective management of chronic conditions like ulcerative colitis.

Aim and Objective

To evaluate the efficacy of modified *Pichha Basti* in the management of Ulcerative Colitis.

Materials and Methods

Selection and source of patient

Patient was registered from OPD of Shalya Tantra Department and admitted in general IPD ward of Sree Narayana Institute of Ayurvedic Studies and Research, Puthoor, Kollam.

Plan of study

The drug required for *Basti Karma* were procured and prepared in *Panchakarma* theatre in Sree Narayana Institute of Ayurvedic Studies and Research, Puthoor, Kollam.

Case Report

A married male patient 37 years of age, senior manager, Airport Authority of India, who is a diagnosed case of ulcerative colitis visited our OPD, complaining of feces mixed with blood, abdominal pain, mucus discharge and generalised weakness since 4 years.

History of present illness

5 years back, the life style and dietary habits of the patient changed due to his profession. Gradually he started developing mild pain along with burning sensation in abdomen and vomiting especially during working hours. He also noted increased bowel movements after meals (7-8/day), mixed with blood and mucus.

Also had loss of appetite and marked weight loss during the period. He was not able to take proper treatment due to his work pressure. 6 months back, the condition aggravated, had severe abdominal pain with vomiting and burning sensation and increased frequency of bowel movements.

Had allopathic medications for 3 months got only mild symptomatic relief, so came to our OPD for further treatment.

Personal history

No family history along with no history of any other major illness such as Hypertension, Diabetes Mellitus, Tuberculosis, Hyperthyroidism, liver disease etc.

No history of any type of past surgery. Had non vegetarian diet with irregular food habits, skipping meals, frequently eating salty, spice, bitter oily food.

General physical examination

No pallor, Icterus, Oedema, clubbing was present.

- Temperature - 37°C
- Pulse rate - 72/min
- Respiratory rate - 16/min
- Blood pressure - 120/80mmHg
- Weight - 50 kg, lean and thin

Criteria for inclusion

- Signs and symptoms of ulcerative colitis
- Colonoscopic diagnosis of ulcerative colitis

Criteria for exclusion

- Patient who had undergone surgeries
- Patient who had complications like anal fistula.

Plan of study and treatments

- Proforma compiled with detailed clinical history and physical examination of the patients.
- Routine clinical investigations before performing study.
- After confirming the diagnosis patient was subjected to *Piccha Basti* therapy and advised as follow:
- Patient was advised to take *Pitta Shamaka*, *Laghu*, *Grahi* and *Pathya Ahara*.
- Patient was also advised to follow treatment guideline strictly.

Criteria for assessment

The improvement in the patient was assessed on the basis of relief in signs and symptoms of disease before and after treatment. Clinical examination was also performed and reduction in lesion was also measured as improvement criteria.

Parameters

Subjective parameters

- Bowel frequency with loose stool.
- Abdominal pain.
- Blood with stool.
- Weakness
- Loss of weight

Dasha Vidha Pareeksha (ten-fold examination)

1. *Prakriti* - Vata-Pitta
2. *Vikriti* - Dosha-Dushya Samoorcchana
3. *Sara* - Madhyama
4. *Samhanana* - Madhyama
5. *Pramana* - Madhyama
6. *Satva* - Madhyama
7. *Saatmya* - Madhyama
8. *Ahara-Shakti* - Aavara
9. *Vyayaam Shakti* - Aavara
10. *Vaya* - Youvanam

Srotas Examination

1. *Pranavaha Srotas* - NAD
2. *Udakavaha Srotas* - NAD
3. *Annavaha Srotas* - Avipaka (indigestion)
4. *Rasavaha Srotas* - NAD
5. *Raktavaha Srotas* - NAD
6. *Mansvaha Srotas* - NAD
7. *Medovaha Srotas* - Alasya (lethargy)
8. *Ashtivaha Srotas* - NAD
9. *Majjavaha Srotas* - NAD
10. *Shukravaha Srotas* - NAD
11. *Manovaha Srotas* - NAD

12. *Artavaha Srotas* - NAD

13. *Mootravaha Srotas* - NAD

14. *Purishavaha Srotas* - *Raktvayukta Pureesha* (blood mixed stool defecation)

15. *Swedavaha Srotas* - NAD

Objective parameters: Hb%, Faecal cal protectin before treatment and after treatment

Assessment criteria: Improvement was assessed on the basis of relief in subjective and objective parameters.

1. Bowel Frequency

Grade	Evacuation
0	1 or 2 times in a day
1	3 or 4 times in a day
2	5 or 7 times in a day
3	8 or 12 times in a day
4	More than 12 times a day

2. Weakness

Grade	Features
0	No weakness
1	Tolerable weakness
2	Mild weakness
3	Moderate weakness
4	Severe weakness

3. Abdominal Pain

Grade	Features
0	No pain
1	Tolerable pain
2	Mild pain
3	Moderate pain
4	Sever pain

4. Blood In Stool

Grade	Features
0	No bleeding
1	Occasional bleeding in stool (not daily)
2	Bleeding daily but less than 4 times / day
3	Bleeding daily but less than 8 times /day
4	Bleeding daily more than 8 times / day

Treatment plan

Piccha Basti

1. *Poorva Karma*: *Sarwang Snehana Swedana* with *Dhanwantaram Tailam* & *Mrudu Bhashpa Swedana*.

2. *Pardhan Karma*: Patient was made to lie in left lateral position for administration of *Basti*.

Contents of *Piccha Basti*[7]

A. *Madhu* (honey)

B. *Indukantham Gritham*

C. *Madhuyashthyadi Tailam*

D. *Kalka Darvya*

- *Samanga Choorna*
- *Swetha Chandana Choorna*
- *Shatavari Choorna*
- *Nagkeshara Choorna*
- *Yastimadhu Choorna*
- *Nata Choorna*

E. *Kshirpaka*

- *Shatavari Choorna*
- *Manjishtha Choorna*
- *Plaksha Choorna*
- *Aswatha Choorna*
- *Udumbara Choornam*

Other Requirements

- Syringe 100ml
- Catheter 9 no.
- Gloves

3. *Pashchat Karma*

A) Patient is made to kept lie for 4- 5 minutes for better absorption of *Basti*.

B) Patient is made to take light diet.

C) Patient is advised to avoid fast foods and spicy foods.

D) After complete cycle patient is advised to follow the *Samsarjan Karma*.

Method of preparation of *Piccha Basti*[8]

To prepare the mixture for decoction enema, first add honey and rock salt, mix properly, then add ghee, after mixing properly, fine *Kalka* of *Samangadi* herbs added and mixed thoroughly.

Finally, *Ksheerapaka* prepared from above drugs added and thorough mixing done and heated to luke warm temperature and contents transferred into an enema bag.

Duration of Treatment

Pichha Basti and *Anuvasana Basti* was given alternative to the patient, *Anuvasana Basti* was given after food (*Ardrapaani*) while *Pichha Basti* was given little empty stomach to the patient.

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Pichha Basti and Anuvasana Basti Schedule

	Pichha Basti Matra	Adana Kala	Pratyagamana Kala	Retention	Complication
1.	A - 120ML	1.30 pm and	5.15 pm	3hr & 45min	No
2.	P - 480ML	10:00am	10:10am	10min	No
3.	A - 120ML	1:30pm	4:30pm	3hrs	No
4.	P - 480ML	10:00am	10:15am	15min	No
5.	A - 120ML	1:30pm	4.45pm	3 hrs 15 mints	No
6.	P - 480ML	10.00am	10:20am	20min	No
7.	A - 120ML	1:30pm	5:30pm	4hrs	No
8.	P - 480ML	10:30am	10:45am	15min	No
9.	A - 120ML	1:30pm	5:00pm	3hrs 30 mint	abdominal heaviness
10.	P - 480ML	10:30am	10:50am	20min	No
11.	A - 120ML	1:30pm	6:30pm	4hrs	No
12.	P - 480ML	10:00am	10:30am	30min	Cramps
13.	A - 120ML	1:30pm	6:30pm	4hrs	No
14.	A - 120ML	1:30pm	4:30pm	3hrs	No
15.	A - 120ML	1:30pm	5:30pm	4hrs	No
16.	A - 120ML	1:30pm	4:30pm	3hrs	No

Sign and symptoms before treatment and after treatment

SN	Sign and symptoms	BT	AT
1.	Bowel frequency	3	0
2.	Weakness	3	0
3.	Abdominal pain	3	0
4.	Blood in stool	3	0

Laboratory results before treatment and after treatment

	BT	AT
HB% report	10.3gm	13.7gm
Faecal Cal Protectin	751	< 5

Results of colonoscopy before treatment

1. Ascending colon - normal.
2. Transverse colon - normal.

3. Descending colon - edematous erythematous mucosa with increased granularity, easily friability and erosions.

4. Rectum - edematous erythematous mucosa with increased granularity, easily friability and erosions.

Impressions: Chronic active colitis, favours Ulcerative Collitis.

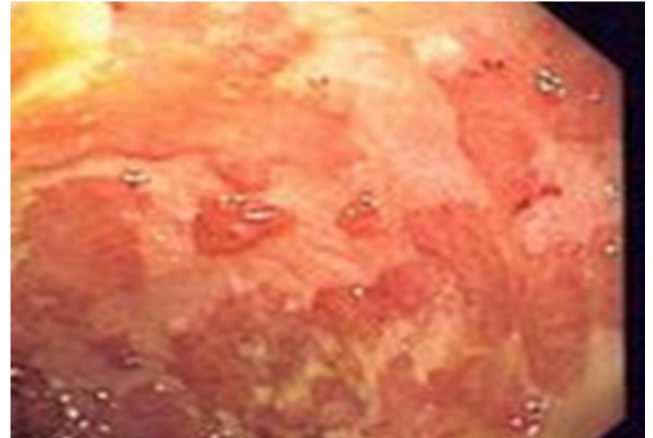


Image 1: Before Treatment

Results of colonoscopy after treatment

1. Anal canal - Normal
2. Rectum - Normal
3. Sigmoid colon - Normal
4. Descending colon - Normal
5. Transverse colon - Normal
6. Ascending colon - Normal
7. Terminal ileum - Normal

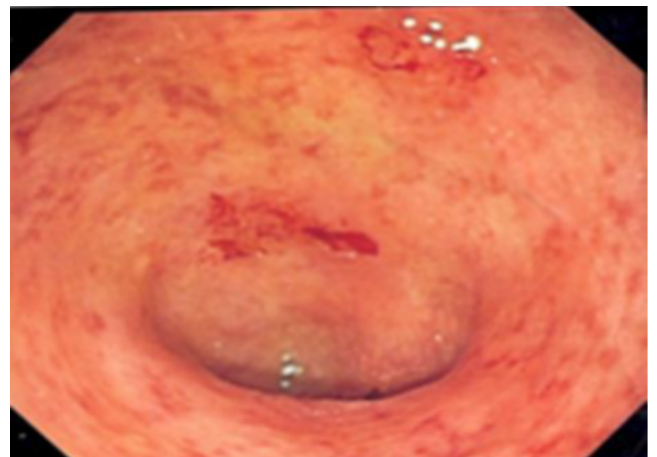


Image 2: After Treatment

Discussion

Grahani Roga is considered a major gastrointestinal disorder in *Ayurveda* and is frequently encountered in clinical practice.

It significantly disrupts the daily routine and overall well-being of affected individuals. In modern medicine, drugs such as sulfasalazine, aminosalicylates, corticosteroids, and anti-TNF agents may offer temporary or mild relief during the active phase of the disease⁹. However, over time, these treatments often require increased dosages and may lead to drug resistance, dependency, and a range of side effects. Moreover, a definitive medical cure for this condition is currently lacking, prompting patients to seek alternative therapies that offer more effective and safer outcomes.

Ayurveda presents a holistic approach to managing such chronic disorders. Among various *Basti Karmas* (therapeutic enemas) described in the classical texts, *Pichha Basti* is specifically noted for its effectiveness in conditions involving inflammation and ulceration of the gastrointestinal tract, such as ulcerative colitis.

Investigations and clinical experiences suggest that *Pichha Basti* provides significant symptomatic relief, particularly due to its inherent properties:^[10]

- *Sheetala* (cooling)
- *Pittahara* (pacifying *Pitta*)
- *Madhu* (antiseptic, soothing)
- *Sangrahi* (absorbent, stool-binding)
- *Sandhana* (healing, tissue-repairing)

Named after its "*Pichhila*" property (meaning sticky or lubricating in nature), *Pichha Basti* creates a protective layer over the intestinal mucosa, reducing friction and irritation, thereby promoting mucosal healing and comfort.

In the management of ulcerative colitis, a *Vata-Pitta* based treatment strategy should be employed, complemented with *Vrana Ropana* (ulcer healing) medications.^[11] The herbs and compounds used in *Pichha Basti* exhibit a multi-dimensional therapeutic effect, including:

- *Vata-Pitta Shamaka* (pacifying *Vata* and *Pitta*)
- *Rakta Stambhana* (arresting bleeding)
- *Vrana Shodhana* (cleansing of ulcers)
- *Vrana Ropana* (healing of ulcers)
- Furthermore, it enhances the function of *Apana Vayu*, which governs lower gastrointestinal tract (*Pakwashaya*), leading to noticeable improvement in ulceration and overall colonic health.

Mode of action

- *Shothahara* and *Vrana Ropaka* (Anti Inflammatory and Ulcer Healing).
- *Raktastambhaka* (Haemostatic Agent)
- *Sangrahi* / *Stambhana* (Anti Diarrheal & Anti Dysenteries)
- *Pitta Shamaka*
- *Agnideepaka*

Conclusion

Piccha Basti was prepared from easily available herbs and after administration gave good symptomatic relief. *Sangrahi* and *Sodhana* property of *Piccha Basti* facilitate healing in colon mucosa.

The Hb level also increases after the *Parihar Kala* of *Basti* so the general condition of the patient also improved. There is also marked changes in the colonoscopic report before and after the treatment.

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