



SHOOLA-SHAMANA (PAIN KILLER) EFFECT OF RASON (ALLIUM SATIVUM LINN.) SIDDHA KSHEERA BASTI IN ASTHIMAJJAGATA VATA

Dr. Mrs. Vandana Anil Avhad*

*Associate Professor, Department of Panchakarma,
Sumatibhai Shah Ayurveda Mahavidyalaya,
Hadapsar, Pune, India

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Abstract

Shoola means pain. This is the main symptom of *Asthimajjagata Vata*. *Shoola* occurs when there is vitiation of *vata* in body. *Shoola* causes disturbances in day to day life and thus lowering the quality of life. Regular use of pain killers leads to decreasing pain threshold. To improve quality of life without any side effects this preparation of *Rason (Allium Sativum Linn.) siddha ksheerabasti* for treating *Asthimajjagatavata* was selected.

Rason, *godugdha* (cow milk), *goghrita* (cow ghee), *tail* (sesame oil), *makshika* (honey) all ingredients in *basti* have tendency to reach up to *asthi* and *majja dhatu*. It was open labelled randomized study. 30 patients of *asthimajjagata vata* were selected following inclusion and exclusion criteria. For pain assessment Symptom Gradation Score and Visual Analogue Scale are used. *Basti* treatment was given for 15 days. Collected data was analysed with student paired 't' test. Average pain relief according to symptom gradation score is 76.51% and according to VAS is 73.35%. Hence with this study, I conclude that without taking any pain killer and any *ayurvedic shaman chikitsa* (oral medication) patients got pain relief, only by administering *Rason siddha ksheera basti* for 15 days.

Key words: *Asthimajjagata Vata, Shoola, Ksheera – Basti, Rason*

INTRODUCTION

Physiological functions of the body will be governed by three *Doshas*, i.e. *Vata*, *Pitta*, and *Kapha*. Vitiation of these *Doshas* leads to disease manifestation. Consumption of unhealthy fast food, adopting a sedentary lifestyle and daily travelling a lot effects the whole body and mind unknowingly. After 40 years of age, there is progressive decaying in the body structures resulting in various degenerative disorders including *Asthimajjagata Vata* due to the predominance of *Vata*.

In India, the prevalence of *asthimajjagata vata* is more among women. *Shoola* (pain) is the most prominent symptom of *asthimajjagata vata*. The current pharmacological management of *asthimajjagata vata* includes the administration of analgesics, but their use neither provides adequate pain relief nor any decrease in disease process. In ayurvedic classics treatment for *Asthimajjagatavata* is described as *Bahya* and *Aabhyantar Snehan* (external and internal oleation). In classics treatment for *asthivaha* and *majjavaha srotasa* is described as *saghritha, tikta* (bitter) *ksheerabasti* and use of *madhur rasa dravyas*. *Rason* is such kind of *dravya* which have tendency to reach up to *asthi dhatu*. The objective of this study is to evaluate the efficacy of *rason siddhaksheera basti* in *asthimajjagata vata* as *shola shaman*.

MATERIALS AND METHODS**Address for correspondence:**

Dr. Mrs. Vandana Anil Avhad

Dept. of Panchakarma, Sumatibhai

Shah Ayurveda Mahavidyalaya

Hadapsar, Pune, India

Ph: +91 9890608788, +91 8007085198

Email: drvandanapalve@gmail.com

Thirty clinically diagnosed patients of *asthimajjagatavata* were selected from the O.P.D. and I.P.D. of S.T.R.H. Pune. Special case record form was prepared and findings were recorded at regular interval for proper assessment. S.O.P. of *basti* preparation and *basti* administration were done before the start of the study. The drug required for the clinical study were procured and prepared in the Panchakarma Department. The patients were assessed before and after 15 days of *basti* treatment. Follow up were taken on 16th day. Visual analogue scale was filled up daily by patients during *basti* treatment.

Standard Operating Procedure (S.O.P.) of Basti Preparation:

First Rason siddha ksheerapaka was prepared according to method mentioned in Sharangadhara samhita.

- 35 gm of *rasonkalka* was first taken.
- 280 ml cow milk was taken.
- 1120 ml pure drinking water was added in it.
- *Decoction (ksheerapaka)* of 480 ml was prepared by boiling.

This *ksheerapaka* was taken in a measuring vessel. In another vessel 80gm *makshika* was taken, then 5 gms *saindhava* was added in it. This mixture was stirred very well. In this mixture slowly *tila taila* and *go-ghrita* were added. This stirring procedure was done till the mixture become homogenous.

Methodology

STUDY DESIGN: Type of study – Open-labelled randomized study (n = 30)

Inclusion Criteria

1. Age – Between 30 – 70 years irrespective of gender and religion.
2. Willing to sign informed consent form.
3. *Bastiarha – Asthapyra* (Person suitable for *Decoction enema*)
4. Showing maximum signs and symptoms of *Asthimajjagata vata*.

Exclusion Criteria:

1. Subjects not willing to sign informed consent form
2. *Bastianarh* – Persons not suitable for *decoction enema*.
3. Presence of any other serious disease.

PARAMETERS OF STUDY

- i) *Sakthishoola* (pain in legs), ii) *Sandhishoola* (joint pain), iii) *Asthishoola* (pain in bones), iv) *Balakshaya* (functional disability), v) *Aswapnam* (insomnia), vi) *Santata Ruja* (continous pain)

ASSESSMENT CRITERIA

The improvements in the patients were assessed on the basis of relief in signs and symptoms of the *asthimajjagatavata*. For this purpose main symptoms were given the score according to severity.

Sakthishoola,sandhishoola,asthishoola

- Very severe pain - 4
- Severe pain - 3
- Moderate pain - 2
- Mild pain - 1
- Absent - 0

Balakshaya (functional disability score)

- Impossible - 4
- Possible with assistance- 3
- Possible with difficulty- 2
- Possible without difficulty- 1

Aswapna

- No sleep is scored as - 4
- Intermittent sleep, disturbed sleep or can sleep for 2 hrs continuously - 3
- Can sleep for 4hrs continuously Or get disturbed for 2 times - 2
- Can sleep 6 hrs continuously Or get disturbed once - 1
- Can get 8 hrs without disturbed - 0

SantatRuja

- Pain continuous for 24 hrs (unable to sleep) - 4
- At rest also, there is pain but pain less while sleeping - 3
- There is no pain at rest but pain on routine work - 2
- No pain on routine work but pain is there while performing little extra work - 1
- No pain - 0

Total effect of therapy on *asthimajjagatavata*

- Cured - 100%
- Markedly improved More than 50%
- Improved - Below 50%

PROCEDURE

Selected patients were administered *Rason siddha ksheerabasti*.

S.O.P. of Basti Chikitsa***Poorvakarma (prepreparation)***

Snehana – The patients were oleated with warm *tila oil*. Oil was applied on *katisphika-udara* region.

Swedana – The same region mentioned above was fomented by water steam bath.

Time of administration – Administered after having breakfast.

Basti yantra – Enema pot as *bastiputaka* (enema can) and simple rubber catheter no.10 as *bastinetra* was used.

Basti dravya – *Rason siddha ksheerabasti* was prepared as described in Sharangadhara Samhita.

Pradhana Karma (administration)

Position of patient – *Vamaparshwa* (left lateral) position was given to patient

Administration of basti – The enema pot was filled with mixture of lukewarm *basti*. Catheter was attached to the enema pot tightly. Air was removed. *Tila oil* was applied to anal opening and catheter. Catheter was introduced in the anal canal up to four finger distance or *chaturangula*. *Basti*

was given with uniform slow pressure and speed, within 2 to 3 minutes.

While administering *basti*, patients were asked to deep breath.

Dose: Up to 480 ml depending on individual patients retention time (*dharankala*).

Route: Per rectal.

***Paschata Karma* (post treatment)**

After administration of *basti* patient was asked to lie down in same position for a minute. Then patient was asked to lie down on his back and relax. Feet were given gentle massage. *Basti pratyagama* details were noted daily.

Patients were asked to fill up Visual Analogue Scale daily.

Duration: The same procedure was repeated for a period of 15 days.

Parihara Kala: After 15 days of *basti* treatment 30 days of *pariharakala* was followed.

Statistical Analysis:

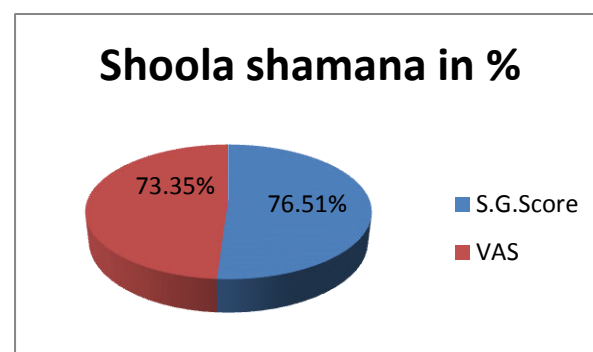
The improvement was assessed on the basis of relief in the clinical features of the disease before and after treatment. The obtained results were analyzed by Student paired 't-test'. The significance is discussed on the basis of Mean Scores, Percentage, 't' and 'p' values.

Level of significance: Values $p > 0.05$ is statistically insignificant. $P < 0.05$ is statistically significant.

RESULTS/OBSERVATIONS

In the demographic data of this study suggested that *Asthimajjagatavata* is prevalent in females (70%), age group of 41-60 years (53.33%), *shishirarutu* (season) (40%), housewives *vatapittatmaka prakriti* (36.66%), chronicity from 0-1 years (33.33%), having *aahariya hetu* (50%), eating mixed food (56.7%) and having irregular diet pattern (63.34%). It was observed that significant results were found in all clinical features. It was also observed that, after starting this treatment within 3-4 days patients were relieved of their pain up to 25% to 30%. It means the onset of action of this *basti* is fast. During *basti* treatment, on 8th day *shoolashamana* is observed is 35.75% and on the last day of treatment means on 15th day it was 73.35%.

Graph No.-1 Averageshoola shaman according to symptom gradation score is 76.51% and according to VAS is 73.35%



Maximum pain relief i.e. 75.84% was seen in the age group 61-70 yrs. This is because in this age though *vata* dominance is present, they got maximum pain relief because they don't have very much stress, strain and low

responsibilities and can take rest while treatment was going on. In *sharad* and *vasant rutu* patients got maximum pain relief i.e. 80% because in *sharad rutu* it is *vataprasham kala* and in *vasant rutu* it is *kaphaparakopa kala* in which predominance of *kapha*, results in *vata shamana*.

In *pitta pradhana prakriti* patients, they got maximum pain relief. When *vata prakriti* patients suffer from *vata* disease, it becomes difficult to cure. Contents of *rason siddha ksheerabasti* are *godugdha*, *goghrita* and *madhu*. Vitiation of *vata dosha* takes place by increasing in dry, *ruksha*, *khara*

properties which takes more time to subside as compare to vitiation of *pitta dosha*. *Pitta dosha* have *snigdha*, *drava* properties which are similar to *basti dravya* combination. This combination particularly acts on *majjadhara kala* which is considered as *pittadharakala*. *Tiktaksheerabasti* is main treatment for vitiated *vata* and *shoola* due to *asthidhatu* and *majjadhathu kshaya*. Hence *pittapradhana prakriti* patients got maximum relief. Therapy provided relief ranging from 50% to 94.44% with an average of 76.24% which is markedly improvement.

Table No. 1:
Effect of therapy on Total Symptom Assessment Score of all the Subjective Parameters

Sr. no. of patients	B.T.	A.T.	%	Remark
1	16	1	93.75	Markedly improved
2	20	5	75	Markedly improved
3	15	5	66.67	Markedly improved
4	15	4	73.33	Markedly improved
5	16	5	68.75	Markedly improved
6	17	5	70.58	Markedly improved
7	15	7	53.33	Markedly improved
8	15	5	66.67	Markedly improved
9	17	2	88.24	Markedly improved
10	16	5	68.75	Markedly improved
11	18	5	72.22	Markedly improved
12	11	1	90.90	Markedly improved
13	18	1	94.44	Markedly improved
14	13	2	84.61	Markedly improved

Sr. no. of patients	B.T.	A.T.	%	Remark
15	15	5	66.67	Markedly improved
16	19	4	78.94	Markedly improved
17	16	5	68.75	Markedly improved
18	16	5	68.75	Markedly improved
19	17	2	88.24	Markedly improved
20	16	2	87.5	Markedly improved
21	16	2	87.5	Markedly improved
22	12	6	50	Markedly improved
23	16	6	62.5	Markedly improved
24	17	4	76.47	Markedly improved
25	17	5	70.59	Markedly improved
26	16	5	68.75	Markedly improved
27	19	6	68.42	Markedly improved
28	16	5	68.75	Markedly improved
29	15	5	66.67	Markedly improved
30	10	1	90	Markedly improved

All symptoms are statistically significant at 5% level of significance. During 15 days of treatment patients got significant relief in all symptoms.

DISCUSSION AND CONCLUSION

Rason siddha ksheerabasti is of *madhura* (sweet) and *tikta* (bitter) *rasa*, *ushna veerya*, *madhura vipaka*. *madhura rasa* nourishes *rasa-rakta-mamsa-meda-asthi-majja-oja-shukra dhatu*, (body entities) increases span of life, refreshes six sense organs, gives strength, brightens the colour pacifies *pitta*, *vata*, poison, maintains refreshment of body-life, makes body stout, durable, helps healing process, and is unctuous, cool and heavy. *Tikta rasa* has *aakasha* and *vayu mahabhuta pradhanya*. *Asthi dhatu* has also same *aakasha* and *vayu mahabhuta pradhanya*. Hence it have capacity of *asthigamitva* means it reaches up to *asthi dhatu*. With the help of this *tikta rasa*, *rason siddha ksheera basti dravya* mainly of *madhura rasa* reaches up to *asthi dhatu*. This *basti* is of *madhura rasa* and *madhura vipaka*. *Madhura rasa* has predominance of *pruthvi* and *jala mahabhuta* which is mainly *vatashamaka* and increases *saptadhatu*. Its *veerya* is *ushna* which is also *vatashamaka*. Due to *snigdha*, *pichchil* (mucilaginous), *bruhana* properties, it nourishes and maintain *majja dhatu*. Nourishment of *majja dhatu* means nourishment of *asthi dhatu*. When both *dhatu*s get nourished ultimately

vatashamaka occurs. Means whole *basti dravya* is *vatashamaka* acts as *shoolashamaka*. The analysis of *Rasonsidhdhaksheera basti* shows that after preparation of *basti dravya* potassium, calcium, magnesium, zinc values get increased by approximately six times increases than in raw milk. Fat contents also increased which helps in absorption of *basti* drugs. Calcium and Magnesium are helps to maintain health of bones and teeth, proper nervous system functioning and energy metabolism. Potassium improves nerve impulse function, muscle function. Zinc helps in cell reproduction, tissue growth and repair. *Basti dravya* enters into the *Pakwashaya* (large intestine). It is the place where the water and minerals are absorbed in proximal colon. Minerals are inorganic elements that occur naturally in the Earth's crust. In the body they appear in combination with organic compounds or ions in solution. From this analysis, the minerals in the *basti* are within the solution of *Rason siddha ksheera means in ksheerapaka*. Minerals constitute about 4% of the body mass and are concentrated most heavily in the skeleton. The body generally uses the ions of the minerals rather than the non-ionized form. Thus these minerals within this *basti* solution get absorbed through rectal mucosa. Thus from analysis of this *basti*, it acts on *Asthivaha* and

Majjavaha srotasa and hence shows positive effects on *asthimajjagata vata*.

Rason siddha ksheera basti gives significant improvement in all symptoms mainly on pain. *Rason siddha ksheera* was advised in *hridayaroga* (heart disease) and *vatavyadhi* (musculoskeletal diseases) orally. But from this study we got a new formulation of *basti* in *vatavyadhi* which can be used as ayurvedic *shoolashamaka* i.e. pain killer. Though *rason* is *ushna veerya* it didn't show any aggravation of symptoms in *pitta prakriti* patients. So it can use safely in all three *prakriti*.

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