



Research Article

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Basti Therapy (medicated enema) in gynecological practice: A way forward in managing oligo-hypomenorrhoea (Artavakshaya)

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ABSTRACT

Artavakshaya (oligo-hypomenorrhoea) is a condition described in Ayurvedic classics in which vitiated *vata* and *kapha* dosha causes obstruction in the *artavavahasrotas* (channels that carries menstrual blood or *artava*). The characteristic features of *Artavakshaya* include *yathochitakalaadarshana* (prolonged intermenstrual period), *alpata* (scanty bleeding) and *yonivedana* (pain in vagina or pain during menses). *Artavakshaya* is a condition very much similar to the oligohypomenorrhoea which is characterized by cycle which are longer than 35 days and with bleeding less than 2 days. The principles of management of *Artavakshaya* are *vatakaphashamaka* (*vata* and *kapha dosha* pacifying) and *agnivardhaka* (stimulant, digestive and *pitta* analogue) therapy. *Basti* (medicated enema) which comes under *Panchakarma* (five biopurificatory measures) is considered as superior treatment in *vata* and *vata* predominant conditions. *Matrabasti* (low dose medicated oil enema) is a type of *anuvasana basti* (medicated lipid enema) which can be administered without much contraindication. *Matrabasti* administered with *vatakaphashamaka* and *agnivardhaka* drug can be better choice in the treatment of *artavakshaya*. *Basti* which is administered through *guda marga* (rectal route) reaches the *pakwashaya* (large intestine) and spreads the *virya* (potency) of the drug to *sarvasharira* (whole body) through the microchannels. *Basti* which can act on the enteric nervous system and thereby act on the Central Nervous System can further stimulate the Hypothalamo-Pituitary-Ovarian (HPO) axis. A well co-ordinated HPO axis can normalise the menstrual cycle.

Keywords: *Artavakshaya*, *Matrabasti*, *Pakwashaya*, Oligo-hypomenorrhoea, Hypothalamo-Pituitary-Ovarian axis.

INTRODUCTION

Artava is the *upadhatu* of *Rasa dhatu* [1]. *Artavakshaya* is a condition described by Sushruta in the context of *upadhatu kshaya* (depletion of bodily sub-tissue). The clinical features of the *artavakshaya* are *yathochitakala adarshanam* (prolonged intermenstrual period), *artava-alpata* (scanty bleeding) and *yonivedana* (pain in vagina or pain during menses) [2]. The signs and symptoms of *artavakshaya* are similar to oligohypomenorrhoea, which is characterized by menstrual bleeding occurring more than 35days apart and which remains constant at that frequency [3] and when the menstrual bleeding is unduly scanty and last for less than 2 days, it is called hypomenorrhoea [4]. In Ayurveda, the treatment protocol for *artavakshaya* is mentioned as *shodhana* (biopurification) and *agnivardhaka* (stimulant, digestive and *pitta* analogue) therapy with *vatakaphashamaka* (*vata* and *kapha dosha* pacifying) drugs as prescribed in *Nashtartava* (secondary amenorrhoea) [5, 6]. This combination of management may help to remove the *sanga* or *avarana* (obstruction) caused by the *vata* and *kapha* in the *artavavaha srotas* by promoting *amapachana* (digestion of incomplete chyme metabolic toxin), *agnideepana* (increases metabolic fire) and *vatakaphashamana*. *Basti* (medicated enema) is known as the superior treatment for *vatika* and *vatakaphaja* condition [7]. Thus, *matrabasti* (low dose medicated oil enema) having *agnivardhaka* and *vatakaphashamaka* drugs is effective in the treatment of *artavakshaya*.

MATERIAL & METHODS

Basti is considered to be the best therapy for disorders due to vitiation of *vata*. *Artavakshaya* is one of the gynaecological diseases, where association of *vata dosha* is being postulated. Hence, in this work, we have referred Ayurvedic literatures: Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya, Sharangadhara

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Samhita etc during the review process. We have also reviewed published scientific literature found in various databases: PubMed, Science Direct, Scopus, Web of Science, and Google Scholar, with the keywords: *Artavakshaya*, *Basti*, *Matrabasti*, *Pakwashaya*, *Oligo-hypomenorrhoea*, *Hypothalamo-Pituitary-Ovarian axis*. Then, a correlation is made about how effectively the *basti* could be used in the management of *artavakshaya* in more successful way in the gynaecological practice.

1.1 Artavakshaya (oligo-hypomenorrhoea)

Menstruation may be defined as a periodic and cyclical shedding of progesterational endometrium accompanied by loss of blood [8]. It takes place at approximately 28 days intervals between the menarche (onset of menstruation) and the menopause (cessation of menstruation) [9]. Uterine bleeding may be slight in amount, short in duration, or both, but the menstrual function varies so widely within normal limits that the definition of an abnormally scanty loss is a matter of opinion. Bleeding which lasts 2 days or less is unusual, if not pathological, and is termed as hypomenorrhoea [10]. Oligomenorrhoea can only be defined arbitrarily as one in which the cycle lasts longer than 35 days [11]. *Artava*, *raja*, *rakta*, *pushpa* etc are some synonyms used in Ayurveda to denote menstrual blood or menstruation. The normal menstruation is that which has *maasaannishchita* (intermenstrual period of one lunar month), *pancharaatranubandhi* (duration of blood loss is five days), *na dahaarti* (not associated with pain and burning sensation), *naatibahu* (not excessive in amount), *naatyalpam* (not very scanty in amount), *padmalaktaka sannibham* (the colour resembles red lotus flower), *gunjaphalasavarnam* (colour resembles the rosary pea) or *indragopakasankaasham* (shines as red worm) [12]. *Artavakshaya* is one of the *artavavyapadas* (menstrual disorder), characterized by *yathocitakaala adarshana* (prolonged intermenstrual period), *artava-alpata* (scanty bleeding during menses) and *yoni-vedana* (pain in vagina or pain during menses) as the cardinal features.

1.2 Etymology and definition of basti

According to Vachaspatyam, the word Basti is derived from the root 'Vas' which when suffixed with 'Tich' forms the word 'basti' [13]. *Basti* (or *vasti*) means an organ where urine is collected, is situated below the umbilicus, the bladder, an injection-syringe made of bladder or the injection itself [14]. The term Basti is given due to the administration of medicated drugs into the rectum by means of urinary bladder of various animals [15].

1.3 Type and dose of anuvasana basti (medicated lipid enema)

In Ayurveda, there are many varieties of *basti* which are dependent on the amount of the drug, the quality of substance and the expected action of the *basti*. According to the drug used, it is classified into two and they are *niruha* and *anuvasana* [16]. In *anuvasana basti* only *sneha* (lipid) is used and according to the quantity of *sneha* given, this is again subdivided as follows:

- *Sneha basti*: In which the *sneha* should be administered in ¼ th quantity of *niruha basti* i.e 6 *pala* (approx. 240 ml)
- *Anuvasana basti*: In which the *sneha* should be administered in ½ the quantity of *Sneha Basti* i.e 3 *pala* (approx. 120 ml)

- *Matra basti*: In which the *sneha* should be administered in ¼ th quantity of *anuvasana basti* i.e 1 ½ *pala* (approx. 60 ml) [17].

Matra Basti (low dose medicated oil enema)

Matra Basti is a type of *anuvasana Basti*. It is termed so because of the dose of *Sneha* used in it is very less as compared to the dose of *sneha basti*. In *matrabasti* the dose of *sneha* is equal to *hraswamatra* of *snehapana* [18] i.e 1 ½ *Pala* (approx. 60 ml). *Basti* is always useful for persons emaciated by *karma* (work), *vyayama* (exercise), *bhara* (weight lifting), *adhwa* (walking long distance), *yana* (riding vehicle), *stree* (exhausted due to sexual activity), *durbala* (persons who are weak) and affected with *vatika* diseases [19]. There are no major contraindications mentioned for *matrabasti* except for person having *ajeerna* (indigestion) [20]. Patient should be given appropriate diet before administration of *matrabasti* and the diet should not be of excessive *snigdha* (unctuous) or *ruksha guna* (dry quality) because the former one causes *mada* (intoxication) and *murccha* (fainting) and the later one causes depletion of *bala* (strength) and *varna* (complexion) in the patient [21]. Otherwise the patient can take any food and may do any work. It can be safely administered in all the seasons. *Divaswapna* (day sleep) after administration of *matrabasti* is contraindicated [22].

1.5 Importance of Basti therapy (medicated enema) in Ayurveda

Basti is considered as a supreme therapeutic modality. *Shodhana chikitsa* (biopurification therapy) and *shamana chikitsa* (pacifying therapy) are the two different types of therapy in Ayurveda. *Shodhana* includes *Panchakarma* (five biopurificatory measures) procedures which are namely *vamana* (emesis), *virecana* (purgation), *asthapana basti* (medicated enema with decoction), *anuvasana basti* (medicated enema with oil) and *nasya* (instilling of medicine through nostrils) [23]. Among these *Basti* is said to be the half of the whole treatment and sometimes a complete treatment [24]. It holds a distinct position in contrast to other *Panchakarma* measures because of its wide spectrum and competent benefits.

1.6 Role of matra basti in Artavakshaya

Artava vyapat (menstrual disorders) became more common in this era of modernization due to faulty food habits, lifestyle, stress etc. It is advocated that *artavakshaya* should be managed with *shodhana* therapy with *agnivardhaka* and *vatakaphasamaka* drugs. Oil is also considered the best among vata pacifying drugs [25]. Therefore, *matrabasti* with medicated oil having *vatakaphasamaka* and *agnivardhaka* drugs can be effectively used in *artavakshaya*.

Vata plays a major role in physiology and pathology of reproductive tract [26] and *basti* can be given to pacify this aggravated *vata*. In *alpa-pushpa* (scanty menses) [27] and *rajonasha* (absence of menses) [28], *anuvasana basti* is being recommended by the ancient scholars. Therefore, *matrabasti* is therapeutically a good choice of treatment in *artavakshaya*.

DISCUSSION

In the current clinical practice, we come across various menstrual irregularities in the outpatient department and, *artavakshaya* is one of the most common disorders. Though menstrual irregularities are common among women in reproductive age group but it can affect the

normal functioning and thereby social life of a woman. Therefore, this is to be diagnosed at the earliest and to be addressed to improve the quality of life. *Artavakshaya* is a condition in which the *artavavaha srotas* get blocked due to the *sanga* or *avarana* (obstruction) caused by *vata* and *kapha*. In this condition, the line of management includes *shodhana* and *agnivardhaka* therapy with *vatakaphashamaka* drugs to normalize the *vata* and *kapha* and thereby clears the *margavarodha* (channel obstruction). *Agnivardhaka* drugs act as stimulant, digestive and increase the diminished *artava*, which is igneous in nature by virtue of similarity in *agni*, *pitta* and *artava*. *Matrabasti* with *taila* processed with *vatakaphashamaka* and *agnivardhaka* drugs is effectively administered in this condition. As *taila* is *vataghna* (pacify *vata*), *naatishleshmavardhana* (do not causes the aggravation of *kapha*) and also promotes *yonivishodhana* (cleanses the uterus) [29] further augment the desired pharmacodynamic properties and actions of *matra basti*.

Probable mode of action of *Basti*

According to Ayurveda

Basti administered into the *pakvashaya* (large intestine) draws the *dosha* or *mala* (metabolic waste) from all over the body from the foot to the head by virtue of its *virya* (potency), just as the sun situated in the sky draws the moisture from the earth by virtue of its heat [30]. As trees irrigated in its root yield branches with beautiful tender leaves, flowers and fruits in time and attain big stature in the same way *anuvasana basti* (medicated oil enema) administered in the rectum yields significant results from head to toe [31].

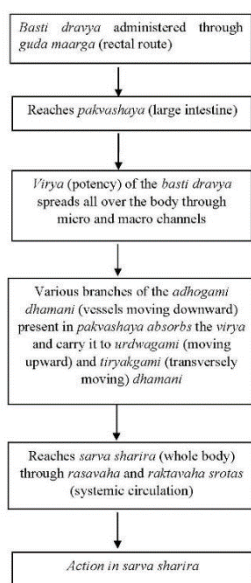


Chart 1: Mode of Action of Basti in Ayurveda

According to modern

Basti given through rectum reaches instantly into systemic circulation thus has faster absorption and quick results. Enteric nervous system controls motility, exocrine and endocrine secretions and microcirculation of the gastrointestinal tract (GIT). Enteric Nervous System (ENS) closely resembles the Central Nervous System (CNS). Endogenous opioids are mainly present in G.I.T and in brain (hypothalamus, pituitary). Beta- endorphin has a role in regulation of

normal menstrual cycle. The essence of *basti dravya* stimulates endogenous opioids which are usually present in G.I.T. These endogenous opioids influence GnRH release aids to regulate Hypothalamo- pituitary- ovarian axis and thus regulate the menstrual cycle. Thus, *Basti* stimulates the ENS, generates the stimulatory signals for CNS causes stimulation of Hypothalamus for GnRH and Pituitary for Follicle Stimulating Hormone & Luteinizing Hormone with the help of neurotransmitters [32]. The mode action of *basti* according to modern is given in Chart. 2 [33].

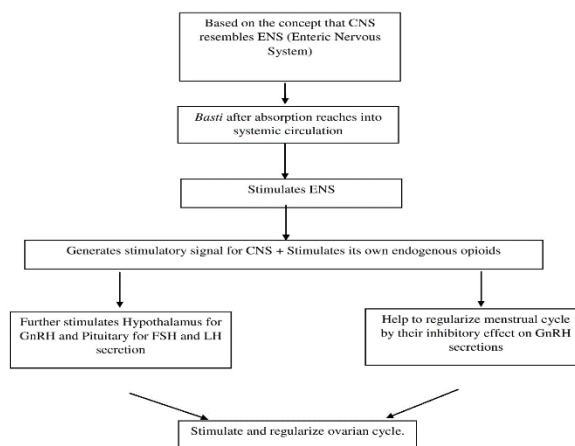


Chart 2: Mode of action of *Basti* According to Modern

CONCLUSION

Artavakshaya (oligo-hypomenorrhoea) is a clinical condition characterized by prolonged intermenstrual period (*yathochitakala adarshanam*) and scanty bleeding (*artava- alpata*) along with pain in vagina or pain during menses (*yonivedana*). *Vata* and *kapha* are responsible for this particular condition by causing *avarana* or *sroto-avarodha*. *Basti* is considered as best treatment for *vataja* and *vatakaphaja* disorders in Ayurveda. *Basti dravya* enhances the normal functioning of *apana vayu* and thereby leads to normal menstruation (*rajas pravritti*). According to modern appraise, any drug given via rectal route stimulates the ENS and generates the sensory signals for CNS. Thus, *Basti* regulates the Hypothalamo-Pituitary-Ovarian axis and then normalize the menstrual cycle. Therefore, *matrabasti* might improve menstrual irregularities and pain in *Artavakshaya* and bring down to normalcy.

Conflict of Interest

None declared.

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