

ROLE OF ANUVASAN BASTI IN SUKHPRASAVA**Dr. Deepali Murlidhar Tate^{*1} and Dr. Hemalata R. Jalgaonkar²**¹PG Scholar (Stiroga and Prasuti Dept.), Ashtang Ayurved Mahavidyalaya, Pune.²HOD, Stiroga and Prasuti Dept., Ashtang Ayurved Mahavidyalaya, Pune.Article Received on
14 Feb. 2020,Revised on 04 March 2020,
Accepted on 24 March 2020

DOI: 10.20959/wjpr20204-17168

Corresponding Author*Dr. Deepali Murlidhar
Tate**PG Scholar (Stiroga and
Prasuti Dept.), Ashtang
Ayurved Mahavidyalaya,
Pune.**ABSTRACT**

Ayurveda has described the treatment pattern since preconception days, during garbhini avastha, at the time of prasava and continuing thereafter as sutika paricharya. Hence proper garbhini paricharya finally lead to sukhprasava i.e. prasava with minimal complications and stress to both mother and child. Anuvasana basti described in garbhini paricharya in ninth month of pregnancy plays an important role in normal delivery. Anuvasana basti is used for vatanulomana and for smoothness of pelvic region and related organs.

KEYWORDS: Sukhprasava, Garbhini paricharya, Anuvasana basti, Apana vayu, Vyana vayu.

INTRODUCTION

Anuvasan basti is best treatment of dushta vata. Administration of taila is the best remedy in affliction of vata and no other remedy is as beneficial as snehana for dushta vata. Acharya Sushruta^[1] and Acharya Vagbhata^[2] advised anuvasan basti as eighth month regimen, although Acharya Charaka advised in ninth month instead.

Nirukti^[4]

Anuvasan can be given day to day or retained inside the body for longer time doesn't harm body. It is sneha basti and has nourishing property.

Aatur pariksha^[5]

Before administering basti, vaidya should examine the patient whether the patient is fit for basti or not. Basti must be administered after examination of Dosha, Aushadh, Desh, Kala, Satmya, Agni, Satva, Oka satmya, Vaya, Bala. Patient with these properties is capable of giving significant results.

Anuvasan yogya^[6]

Anuvasan basti is given to those who are asthapana yogya, especially ruksha, tikshnaagni, keval vatarogi rugna.

Anuvasan ayogya^[7]

All those who are Asthapana basti ayogya are contraindicated for Anuvasan basti and other diseased conditions which are having guruta, snightata, medovruddhi, kaphavruddhi, abhishyandata, avarodhjanya samprapti, krurakoshthi, mandagni, jwara, pandu, kamala, arsha. One should be careful for haemorrhoids during pregnancy. If we administered anuvasana in contraindicated fellows it may adverse the disease condition.

Basti kala

Anuvasana basti should always be given immediately after food.^[8] If given empty stomach it does not stay in pakwashaya and it goes in upward condition. Administration of anuvasana during aamavastha may leads to abhishyand.

In sheeta kala and vasant rutu, anuvasana should be given in day time. While in sharad, grishma and varsha rutu, it should be given at night.^[9]

Basti vidhi**Poorva karma**

Snehan and swedan should be given prior to actual karma. Snehan suppresses vata, soften body, clears mala and dosha sanchay. Swedana liquefies stucked doshas and brings them out of minute channels of body. But, as Garbhini is asnehya and aswedya. Hence, snehan and swedan is contraindicated as poorvakarma of basti in Garbhini.

Pradhan karma

Quantitywise anuvasan basti must be one half of ideal quantity of sneha basti, so its twelve tola.

Position of patient

Basti should be given in left lateral position as this allow easy entry of dravyas in pakvashaya.^[10]

In Garbhini basti should be given in knee elbow position.^[11]

Paschat karma

After administration of basti, patient should be kept in supine position for some time (100 vakmatra). Both soles and buttocks of patients should be slapped slowly to prevent immediate spillage of basti dravya.

Basti pratyagama

Period of basti pratyagama is three yama i.e. eight prahara. If sneha doesn't come out within this period and if does not produce any discomfort then it should be neglected as this will not be harmful to the body.

Anuvasana basti karmukata during pregnancy

Basti is amongst panchakarma which includes drug administration through rectal route, it may be either medicated oil or decoction or both.

Rectum begins in front of third sacral vertebra. Therefore, posteriorly rectum is in contact with sacrum and coccyx, anococcygeal ligament, piriformis, coccygeous, levator ani and sacral plexus and hence sympathetic trunk.

Arterial supply of rectum^[13]

1. Superior rectal artery – Branch of inferior mesenteric artery.
2. Middle rectal artery – Branch of anterior division of internaliliac artery.
3. Median sacral artery – Small branch arising from back of aorta.

Nerve supply of rectum^[14]

The rectum is supplied by both sympathetic (L₁, L₂) and parasympathetic (S₂, S₃, S₄) nerves through superior rectal or inferior mesenteric and inferior hypogastric plexuses.

According to ayurvedic literature, there is strong nutritional relation between sneha and majja dhatu. Majja dhatu is priorly made of sneha. Head is considered as indriyatana i.e. central place of all the senses. Mastulunga is described as half melted ghrita which is basic supports of head system. Mastulunga is called 'Mastishkmajja' also. All nervous system is formed from majja itself. According to Acharya Kashyapa, adhonabhi, asthi and majja are the vatasthanam. Therefore, sneha plays very important role in nourishment of majja dhatu. Hence basti puforths important functions on central nervous system and peripheral nervous system.

Guda is considered as mulasthan of vata. It is central place of all siras. Therefore basti administered through guda can spread all over body and nourishes whole body just as the water pored at the root reaches all parts of the tree thus been through macro and micro channels.

Basti is considered as the paramoushadhi of vata. Apanavayu plays an important role in expulsion of fetus, while Vyanavayu in act of contraction and relaxation of uterus. Vyanavayu is situated in whole body, said to cause gati (motion), akshepa (contraction), prasarana (relaxation), etc. During aasannaprasava avastha, vyanavayu stimulates the act of contraction and relaxation in the uterine muscles and due to it, apana vayu becomes active to expel the garbha outside the garbhashaya. So, in pregnant woman prakruta apana and vyana vayu are very much essential for normal delivery. At the time of parturition, if anyone of these are vitiated, it will lead to prasava vyapada such as vilambit prasava, moodhgarbha, etc. Hence, to keep these vayus in their prakrut avastha, acharyas instructed basti. So, anuvasana basti facilitate sukhprasava.

CONCLUSION

Describing the benefits of this dietetic regimen prescribed for the woman normal development of fetus. Acharya Charaka says that by this she remains healthy and delivers the child processing good health, energy, and strength. Hence the whole garbhini paricharya is beneficial not only to mother but also to the fetus. It helps during the process of labour in order to overcome the complications which may occur during delivery.

REFERENCES

1. Kaviraja Ambikadatta Shastri, Sushrut Samhita sharirsthan, Varanasi Chaukhamba Sanskrit Sansthan, 2015; 10-4.
2. Dr. Brahmanand Tripathi, Ashtang sangraha sharirsthan, Varanasi Chaukhamba surbharati prakashan, 2015; 3-11.
3. Ravi Dutt Tripathi, Charak Samhita sharirsthan, Varanasi Chaukhamba surbharati prakashan, 2012; 8-32.
4. Kaviraja Ambikadatta Shastri, Sushrut Samhita chikitsasthan, Varanasi Chaukhamba Sanskrit Sansthan, 2015; 35-18.
5. Ravi Dutt Tripathi, Charak Samhita siddhisthan, Varanasi Chaukhamba surbharati prakashan, 2012; 3-6.

6. Ravi Dutt Tripathi, Charak Samhita siddhisthan, Varanasi Chaukhamba surbharati prakashan, 2012; 2-19.
7. Ravi Dutt Tripathi, Charak Samhita siddhisthan, Varanasi Chaukhamba surbharati prakashan, 2012; 2-17.
8. Kaviraja Ambikadatta Shastri, Sushrut Samhita chikitsasthan, Varanasi Chaukhamba Sanskrit Sansthan, 2015; 54: 37-53
9. Ravi Dutt Tripathi, Charak Samhita siddhisthan, Varanasi Chaukhamba surbharati prakashan, 2012; 4.
10. Ravi Dutt Tripathi, Charak Samhita siddhisthan, Varanasi Chaukhamba surbharati prakashan, 2012; 3.
11. Dr. Brahmanand Tripathi, Ashtang sangraha sharirsthan Varanasi Chaukhamba surbharati prakashan, 2015; 10-3.
12. Textbook of B. D, Chaurasiya Human Anatomy, 2(4): 33.
13. Textbook of B.D, Chaurasiya Human Anatomy, 2(4): 33.
14. Textbook of B.D, Chaurasiya Human Anatomy, 2(4): 33.