



## A Pilot Study on Drip Method of Tikta Ksheer Basti Administration at OPD Level Practice

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### Abstracts

Today's generation is crazy about having fast food, cold beverages, working late nights in A.C. room with computers, excessive bike riding or car driving and also environmental pollution. Vata dosha being the predominant dosha in the body gets primarily vitiated and manifests different diseases.

Basti karma" is the most perfect remedy, as it radically eliminates the morbid vata, the sole dosha responsible for management of all dosha, dhatu and malas in body.

Basti is administered by enema can method, one more method though less in practice is drip method especially Brihama Basti. The possible advantages of this method are

1. It's less expensiveness
2. It retends in the body for long time so it can increase the chance of absorption.

### Introduction-

*Basti* is considered as half or whole of the entire therapeutic measures (Ch.Si.- 1/40) and advocated best & quickest way to provide strength and immunity to even children and old peoples(A.S.K.-7/35). Many methods of *Basti* administration have been developed with the time as an easiest , simplest method is always adopted.

Now days, conventional method is in trend to give *Basti* through enema can. Many *Vaidyas* are administrating *Brimhana Basti* by drip method with help of a saline set and rubber catheter/infant feeding tube. It was reported that *Basti* administration by this method facilitates more absorption over conventional method and with low doses too it offers better results. Moreover, it was stay in body for long time too.

In the treatment of *Asthyashrit VikarasPanchakarma* and specifically *Tikta KsheeraBasti* is mentioned as a line of treatment which can be considered as *Brimhana* type of *Basti*. By keeping above *Basti* administration in mind, a study was planned to compare the two types of methods of *Basti* administration. To compare the results clinically patients with lumbar spondylosis (*Katiasthigata Vata*) have been selected as is it a most common degenerative vertebral column disease found in society. In this study two groups were registered.

Group A- *TiktaKsheera Basti* 400 ml. administered by conventional method for 8 days.

Group B- *Tikta Ksheera Basti* 100 ml. administered by drip method within 10-15 minutes for 8 days.

Before starting the study, a pilot study as required to fix exact method and dose for drip method *Basti* administration. It was done on healthy volunteers only. The details of the study are presented here.

**Aims:**

1. To fix and finalize the method of drip administration of *Basti* drug.
2. To fix the dose for drip method.
3. To evaluate the retention time.

**Materials:**

1. Consent form
2. Healthy volunteers
3. Normal saline drip
4. I.V set
5. I.V stand
6. *Basti Dravya*

**Methods:**

- A. Preparation
- B. Procedure

**A. Preparation**

1. For pilot study healthy volunteers were selected who need *Brimhana*.
2. Its ingredients are *Ksheer*, *Guduchi*, *Shatavari*, *Brihati* and *Kantkari*. However, *Kalka* had been added at the time of *Ksheerpaka* preparation in any group to facilitate the drip method of administration.
3. *Basti Dravya* composition and proportion is based on *Panch Prasratiki Ksheer Basti*.
4. The standard dose of *BrimhanaBasti* given by enema can method is 400ml where as it was reduced to half for drip method (200ml).
5. The composition of *Tikta Ksheer Basti* adopted for the study is as following.

Ingredients	Enema can	Drip method
1. <i>Ksheer</i>	160ml	80ml
2. <i>Madhu</i>	80ml	40ml
3. <i>Murchit Til Taila</i>	80ml	40ml
4. <i>Panchtikta Ghrita</i>	80ml	40ml
5. <i>Kalka</i>	10gm	5gm
6. <i>Saindhav</i>	5gm	2.5gm

6. Ingredients of *Kalka*: - *Guduchi*, *Shatavari*, *Brihati* and *Kantkari* in equal parts.
7. Preparation of *Basti Dravya*: - *Tikta Ksheer* was prepared by adding *Ksheer* and water in equal parts. *Kalka Dravya* was added to this and it is allowed to boil till the water evaporates. The *BastiDravya* mixing was as per classical method.

**B. Procedure:**

**About instrument-**

For this procedure normal saline drip with I.V set has been taken and cut the bottle from the bottom partially (to fill the drug) and drum of I.V set from the junction of upper 1/3<sup>rd</sup> and lower 2/3<sup>rd</sup> to remove the mash. Both parts were fixed by using adhesive. Dial flow (drop controller) has also been taken but it appears to be of no use.

**About Basti preparation**

*Basti* was prepared by 2 methods.

1. In first 15 *Basties* we add *Ksheera* and water in equal parts. *Kalka Dravya* has added to this and it is allowed to boil till the water evaporates. The *Basti Dravya* has been mixed as per classical method, and we found that the retention time was very less. Patients were unable to hold the *Basti* as much required.
2. Then for next 15 *Basties* some changes were made. The *Kalka* was added as per classical method and the dose of *Basti* was reduced from 200ml to 100ml. By this alteration, it was noticed that the retention time was increased as expected.
3. *Basti* was given in left lateral position after local *Abhyanga* and *Vashpa Sweda*.

**Results of first 15 Basties given by drip method**

No. of Basties	Approx drops/min	Total time taken	Bastidharan kala	Other symptoms
1.	80-120	28/min	5min	Nil
2.	80-120	25/min	3min	Nil
3.	80-120	20/min	5min	Nil
4.	80-120	24/min	2min	Nil
5.	80-120	25/min	10min	Nil
6.	80-120	30/min	8min	Nil
7.	80-120	25/min	4min	Nil
8.	80-120	15/min	3min	Nil
9.	80-120	20/min	5min	Nil
10.	80-120	20/min	7min	Nil
11.	80-120	30/min	6min	Nil
12.	80-120	20/min	5min	Nil
13.	80-120	22/min	3min	Nil
14.	80-120	26/min	4min	Nil
15.	80-120	27/min	4min	Nil

**Results of second 15 Basties given by drip method**

No. of Basties	Approx drops/min	Total time taken	Pratyagamana kala	Other symptoms
1.	80-120	10/min	20min	Nil
2.	80-120	12/min	23min	Nil
3.	80-120	15/min	25min	Nil
4.	80-120	11/min	22min	Nil
5.	80-120	13/min	28min	Nil
6.	80-120	12/min	22min	Nil
7.	80-120	11/min	15min	Nil
8.	80-120	15/min	13min	Nil
9.	80-120	20/min	20min	Nil
10.	80-120	15/min	23min	Nil
11.	80-120	18/min	20min	Nil
12.	80-120	15/min	15min	Nil

13.	80-120	10/min	17min	Nil
14.	80-120	16/min	22min	Nil
15.	80-120	18/min	20min	Nil

**Discussion:**

1. In this study first 15 patients were administered 200ml *Basti* and Ksheera was added by kalka Dravya, it was seen that the retention time was so less.
2. Second 15 patients dose of *Basti* was reduced to 100 ml and the kalka Dravya was added as per classical method to improve the retention time. After these alterations it was found that the retention time was improved.
3. An attempt was made to count and fix drops per minute to introduce certain quantity of *Basti* Dravya in a fix time for every patient. However, even after painstaking efforts too it couldn't be standardized.
4. Probably, the rectal conditions and difference of rectal pressure per patient per day varies that's why even in same patient too, the counting of drops varies every next day. So it was not possible to fix the exact drops per minute.
5. Eventually, it was concluded that a range of drops per minute should be along with a fixed time period, which was 80-120 drops per 10-15 minute. This drop rate range and time was maintained in all patients.

**Conclusion:**

With above observations of the pilot study followings are the conclusions-

1. It is compulsory to remove mash and fix the cut parts of the drum of i.v.set.
2. Dose for drip method *Basti* should be reduced at least one fourth of the standard dose.
3. For better retention of *Basti* Dravya, kalka should be added as per classical method.
4. No complications were reported by anybody and administration was quiet easy to administer even at opd level, so it can be adopted for routine practice.
5. As the doses are reduced it is very cost effective.