



A NOVEL APPROACH TO THE MANAGEMENT OF ULCERATIVE COLITIS WITH PICCHA BASTI

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Abstract: Ulcerative colitis (UC) is a form of inflammatory bowel disease that causes inflammation and ulcers in the colon. The main symptom of active disease is diarrhea mixed with mucus and blood. Ulcerative colitis newly occurs in 1 to 20 people per 100,000 per year. Ulcerative colitis is an autoimmune disease characterized by T-cells infiltrating the colon. The severity of disease at clinical presentation is important in determining the appropriate therapy. Patients in later stage with fulminant or toxic colitis, often have more than 10 bowel movements in a day, continuous bleeding, abdominal distention and tenderness, and radiologic evidence of edema and, in some cases, bowel dilation. These people most often require immediate colectomy because 10% have perforated colon at the time of surgery. This condition is correlated with Sarakt Pravahika in Ayurveda. Piccha Basti is a treatment, which can be used in this condition and may provide significant relief.

Key words: Ulcerative Colitis, Pravahika, Piccha Basti.

Introduction: Ulcerative Colitis is a mucosal disease that usually involves the rectum and extends proximally to involve all or part of the colon. The major symptoms of UC are diarrhea, rectal bleeding, tenesmus, passage of mucus, and crampy abdominal pain. The severity of symptoms correlates with the extent of disease. Although UC can present acutely, symptoms usually have been present for weeks to months. Usually in complicated cases the treatment leads to the surgical removal of colon [1]. It's correlation with Ayurveda can be made as: *Pravahmansyamuhurmalaktam.....*

Frequent defecation of less quantity of stool with mucus accompanied by pain and straining is named as Pravahika. The word Pravahana means to strain. In this condition vitiated Kapaha, which obstructs Apan Vayu and results in extra efforts for the specific action. Sushrut has described it as a separate disease entity while Charak and Vagbhata have included it in Kapahaj Atisara. Vagbhata has also given the synonym Bimbishi for Pravahika.

- Sushruta-Pravahika [2]
- Charaka-Kaphaj Atisara [3]
- Vagbhata-Kaphaj Atisara (Bimbishi)
- Kashyapa-Pravahika (Garbhini Chikitsa)

- Harita-Nischaraka

It is classified into four types according to Acharya Sushrut,

- **Vataj:** Sashoola Mala Pravritti (intestinal colic)
- **Pittaj:** Sadaha Mala Pravritti (burning sensation during and after defaecation)
- **Kaphaj:** Sakapha Mala Pravritti (stool with mucus)
- **Raktaj:** Sashonita Mala Pravritti (blood with stool)

Involvement of Srotas: Mainly Annavaha and Purishvaha Srotodushti is seen accompanied with the symptoms of other Srotas according to the Samprapti

Signs & Symptoms: Patients suffering from this disease often comes with

- Frequent watery stool with mucus (*Sapiccha-Sadrava-Muhur muhur mala pravritti*)
- Defaecation accompanied with strain and abdominal cramps (*Saprahana Udershool Poorvak Mala Pravritti*)
- Weakness followed by defaecation, muscle cramps (*Malavegotara Daurbalya, Pindikodwesh*)
- Anorexia, repugnance towards food. (*Anannabilashan, Arochaka*)

Patient seldom comes in early stage for Ayurvedic treatment, but often patient comes in later stage with diagnosis like Ulcerative Colitis, Crohn's disease, IBS etc whose symptoms

resembles with the symptoms of *Pravahika*... Many times the advanced stages of *Pravahika* is correlated with Ulcerative colitis.

Ulcerative Colitis	Pravahika
Bloody diarrhoea with mucus	Sarakt Picchil Mala Pravritti
Sometimes frequent small volume fluid stool or constipated and pellet stool	Muhurmuhu, VibaddhaVataVarchastwam, Sapravahana Mala Pravritti
Abdominal pain	Bahushoolam
Anorexia, Malaise, Fever, Weight loss	Agnimandya

Ayurvedic Line of Treatment: According to Sushruta, first it should be treated as Ama & Pakvatisara followed by Langhan- Pachan, Kshir, Tilataila & Piccha Basti should be given. Charak considers this disease as a specific condition of Kaphaj Atisara, and the treatment suggested is Piccha Basti^[4].

Vagbhata has suggested the use of Dharoshna Kshir for the management of this disease.

Case Study: A female aged 26 yrs from Indore visited to the OPD with clear diagnosis of Ulcerative Colitis resembling symptoms like Sarakta Pravahika.

C/O

- Sarakat- Sapiccha-Sadrava-Muhur muhur Sapravahana udershool poorvak mala pravritti 5-6 times / day
- Malavegottara Daurbalya ++
- Sakthisada
- Anannabhilashan, Arochaka
- Bharkshaya, since last 6-7 months she was having all these symptoms & due this she lost almost 9 kgs of weight during this period. (All symptoms were from 6-7 months)

History: Patient diagnosed with Ulcerative Colitis showing inflammatory patches at distal part of jejunum on colonoscopy. Partial jejunectomy was done Six months back. She got symptomatic relief in per anal bleeding, but she had the above mentioned complaints even after the surgery. So the status of disturbance in her life was maintained as it was before the surgery. That's why she approached for Ayurvedic treatment.

Family History: Not significant

Ashtavidha Pareeksha

- **Nadi:** Ksheena
- **Shabd:** Kshama
- **Sparsha:** Anushna
- **Jihva:** Saama
- **Mala:** Sarakat- Sapiccha-Sadrava-Muhur muhur Sapravahana udershool poorvak
- **Mutra:** Samyak, Kwachit peeta, Sadaha
- **Drik:** Avishesh
- **Akriti:** Madhyam

- **Prakriti Pareekshan:** Vatapittolbana
- **Annawaha:** Anannabhilashan, Arochaka
- **Purishawaha:** Sarakat- Sapiccha-Sadrava- Muhur muhur Sapravahana Udershool poorvak mala pravritti
- **Rasawaha:** Tandra, Glani, Shabdasahishnuta, Angamard, Twag Roukshya, Panduta, Palitya, Tamah pravesha
- **Pranavaha:** Alpayasena- Arohanena Shwasiti, Alpaprana
- **Udakavaha:** Kanthaasyashosha
- **Raktawaha:** Twak Vaivarnya- Prapadeshu Karshnyam
- **Mamsawaha:** Bharkshay
- **Medowaha:** Bharkshay, Swedkshay
- **Asthiwaha:** Asthishoola (pramukhtaha jangha pradeshi)
- **Majjawaha:** Tamahpravesha
- **Shukraartavwaha:** 1 Samvatsarat prak samyak, 3-4 masat Alpartava, Shool
- **Mootrawaha:** Kwachit Peeta, Sadaha
- **Swedwaha:** Swedkshay
- **Manowaha:** Satva- Pravara Samprati - Sanchintan, Nidralpata

In this particular case, the Probable etiological factors found were... Viruddhashan, Madhurpraya sevan (consumption of sweet food), Dadhi Sevana (Curd), Paneer, Cheese, Excessive cold drinks, biscuits with tea. According to the signs and symptoms she was diagnosed as a patient of Sarakt Pravahika with Vata Kapha Pittanubandha & having Dushti of Samana, Apana Vayu, Kledaka Kapha & Pachak Pitta. Since she already undergone with the jejunectomy therefore the disease became Yapya in this case.

Planning of Treatment: In such conditions, Picchabasti is the treatment of choice. It is named as Picchabastibecause of the use of Picchila Dravyas in its preparation. Picchabasti is indicated in: *alpalpambahushoraktam... vatashleshmavibandh.... Kaphevaatisaratyapi.... Shoolepravahikayam,...* In this particular case Jeevaniya and Sandhaniya Karma are also required due to advanced stage of this disease.

Materials and Methods

Classical Method of Preparation of Piccha Basti:

According to classical method given for Piccha basti^[5], Shalmali Patra Putapaka is prepared with general Putapaka method. With this juice (Shalmali), boiled milk, oil, ghee and paste of Yashtimadhu are mixed well and the emulsion is given as enema.

Modified Picchabasti Preparation

- Yashtimadhu-5gm
 - Mocharasa-5gm
 - Milk- 120ml
 - Water-120ml
- } 120ml+10ml
} Shatawari ghrith

In current practise it is not feasible to prepare fresh Putapaka everyday, so for the convenience Shalmali Patra Putapaka was replaced with Mocharasa and the process was modified by using the same constituents. 120 ml Milk, 120 ml water, 5 gm Yahtimadhu and 5 gm Mocharasa were boiled till 120ml decoction remains. 10ml of Shatawari ghrith was added as Prakshepa. Then this emulsion was administered to the patient in the morning.

Method of Administration

Discussion: The qualities of the constituents of Basti Dravyas are as follows:

Dravya	Rasapanchak	Karma
Yashti	Madhur-Madhur-Sheeta, Guru	Pitta Anilasrajit
Mocharasa	Kashaya-Madhur-Sheet,	Sandhaniya
Ksheer	Madhur-Madhur-Sheet,	Sandhaniya, Jeewaniya
ShatawaryadiGhritha		

Pravahika is a disease of Pakwashaya, which is governed mainly by Vata. This Vata is Ashukari in nature and also on the basis of the principle "Sthanam Jayati Poorvam tu" inference can be made that in such conditions first it is necessary to treat the vitiated Vata at its own territory. Here we are concerned with modified Picchabasti as Basti is the best treatment for Vata. Mocharasa is Kashay & Grahi, Cow's milk and course powder of Yashtimadhu both are having Madhur - Madhur -Sheeta Guna. Here in this case, Vata and Kapha Dosha are aggravated along with Rakta and Pitta. Apan Vayu is aggravated by its Ruksha and Chala Guna, where Ruksha Guna turns to normal Snigdha Guna of Kapha into Picchil and then ultimately into Styana (sticky), while Chala Guna is responsible for Muhur Muhur Pravahana. The accumulated Styana (sticky) Kapha sticks to the intestinal wall, it leads to straining. The vitiated Rakta and Pitta leads to Vranotpatti which inturn leads to Sarakt Sakapha Mala Pravrutti. It is accompanied with the symptoms like Dourbalya and Trishna. In this particular case Vatanulomana, Styana Kapha Nihssaran and Anulomana, Vranaropan and

- 120 ml in half an hour by drip method using enema pot. The duration of the treatment was 21 days.
- Purvakarma: Mridu Snehana with BalaTaila, and Mridu Swedana with hot water bag.
- Daily chart for Pratyagama Kala and other features was maintained.

The Basti Dravya was administered by drip method in half an hour because the absorption was needed for proper healing of Vrana present in the intestine. For the first five days patient passed motion within 5-10 mins after the insertion of catheter. By the next week patient was able to sustain the whole 120ml of emulsion for 1-3 1/2 hrs.

Results: After the completion of Picchabasti treatment for 21 days the patient got following results-Samyak Mala pravritti (Snigdha and Samhat)—once or twice in a day with no abdominal cramps and straining, weakness was reduced, patient was able to take proper food without any discomfort and overall general appearance was improved.

Rakta Stambhana were required. Therefore the planning of Basti was done accordingly.

Ksheer works as a medium to transfer different attributes of Dravya processed with it and is also Vatapittahara n Jeewaniya in nature. Shatawari ghrith which is used in Raktayoni can also be used in Raktatisara and Sarakt Pravahika. Thus collectively this combination was proved effective in the patient. And many symptoms were relived after a regular course of 21 days.

Conclusions: From this we can conclude that

- Piccha Basti has got an effective role in managing patient with Raktaj Pravahika (Ulcerative Colitis)
- Patients of critical illness can be treated successfully with the help of proper Nidan and Chikitsa as given in the text. Though the Method of preparation of Kalpa can be altered, the concepts and Avasthavisheha in which the preparation is to be used should not be misunderstood.

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