

Basti in Klaibya

Dr. S. Bharath Narendra¹, Dr. Anita Patel²

¹Asst. Prof., Dept of Roga Nidana, SJSAC&H, Nazarethpet, Chennai 600123.

²Associate Professor and H.O.D, Dept. of Rachana Sareera, SJSAC&H, Nazarethpet, Chennai 600123.

Corresponding Author: Dr. S. Bharath Narendra

ABSTRACT

Lord Krishna in his Bhagavad Geeta says “O Partha! Do not lose the virility of a fighter! To you, it is not fitting. Shake this faint-hearted feeling and come on! O the banisher of your enemies!” However, this was when Partha knew his enemy and had a momentary confusion. What about the crores of people all over the world who suffer from erectile dysfunction(ED)? ED has a plethora of causes. Like it is said in our ayurvedic classics, knowing the Nidana is the basis for chikitsa. As, depending upon the Nidana, the treatment will differ from person to person. The same way in Klaibya, according to Caraka acharya there are 4 different types of Klaibya which are classified based on their Nidana. Out of Beeja, Beejabhaga and Beeja bhaga avayava, any one is affected in Beejopaghataja Klaibya. Erectile Dysfunction is Dwaja Bhanghaja, senility is the cause for Jaraja and Dhatu Kshaya is the cause for Sukra Kshayaja.

Carakokta Klaibya dealt in yoni roga chikitsa adhyaya has a lot of similarities when compared to the Erectile Dysfunction (ED) explained in western medical science. The authors of this paper have conducted a clinical trial and have published a research article on how basti is useful in Klaibya. Based on the subjective parameters like Duration of Erection, Duration of Intercourse & Duration of Ejaculation and, objective parameters like Quality of Erection Questionnaire (QEQ), IIEF (International Index of Erectile Function) and, hormones like FSH (Follicular Stimulating Hormone), LH (Luteinizing Hormone), Testosterone and Prolactin. In this study Bala Ashwagandhadi taila was used for the first time in Klaibya. Different forms of Basti and Abhyanga were used in permutation and combination in this

Key words: Klaibya, Erectile Dysfunction, Basti.

INTRODUCTION

Klaibya is defined as “a condition where a male is unable to attain an erection and sustain it to have a satisfying intercourse for both the partners.” Klaibya has been mentioned even in the era of Bhagavad Geetha. ^[1] Internationally renowned NGOs which have conducted studies in Erectile Dysfunction (ED) and sperm quality have come up with daunting results which suggest that almost every male suffers from ED atleast once in his life. the incidence always increases with age which is understandable. ^[2] An average male has

40% chance to get ED at the age of 40 and a 70% chance to get ED at the age of 70. Although, ED comes and goes in episodes, there is a 15% chance for men all around the world, above the age of 40, to get permanent ED.

Carakacharya in his caraka samhita has in detail discussed about Klaibya in chikitsa of yoni roga. ^[3] In this chapter, he has talked about the 4 main classifications of Klaibya namely Bijopaghataja Klaibya, Dwaja Bhanghaja Klaibya, Jaraja Klaibya and Sukra Kshayaja Klaibya. In all the 4 types, the clinical features show us that the

vitiated dosa is predominantly vata. When it is vata that is vitiated, basti becomes the natural choice of treatment^[3] hence, in this paper, the importance of basti shall be looked into critically with valuable scientific evidences and traditional ayurvedic references. The paper will also discuss about why basti is called as ardha chikitsa.

DISCUSSION

Male Infertility

The inability of a man to make his female partner pregnant naturally is called as male infertility. 40% - 50% of infertility cases are based on this one single factor. The other factors are hormonal problems in women, PCOD, disorders of the uterus and iatrogenic causes. At any given point of time, infertility affects atleast 7% of all men. Infertile men are afflicted by causes like deficiencies of semen in count, morphology and motility, cell debris in semen, DNA fragmentation > 30%, retrograde ejaculation and so on. These factors become yard sticks for a man's fecundity.^[4]

One Out of every 5 infertile couples who are anxious to conceive, the male partner is the sole reason for the couple not being able to conceive. All over the world, atleast 1 in 20 men suffer from any one type of sperm disorder like terato / astheno / oligo spermia. But, Azoospermia is 5 times rarer than any of these disorders.^[5]

Klaibya in Ayurveda

Acharya caraka has dealt with klaibya extensively in his samhita. The Yoni Vyapad chapter of the chikitsa sthana of Caraka samhita explains about 4 different types of Klaibya namely, Bijopaghaataja, Dwaja Bhangaja, Jaraja and Sukra Kshayaja. The word Klaibya is not to be confused only with Erectile Dysfunction (ED), it refers to a plethora of problems which make a man infertile. Bijopaghataja Klaibya means genetic problem leading to infertility. Dwaja Bhangaja Klaibya is erectile dysfunction. Jaraja Klaibya is infertility in senile men with age related

changes of the content of the sperm. And, Sukra Kshayaja Klaibya is found in men who indulge in excessive vyavaya (sexual intercourse) which leads to Kshaya of both Sthanika and Sarva Dehaja Sukra.

Vata in Klaibya

If we look closely, Bija Dosa happens because of Vata, Dwaja Bhangaja means weakness in the Penis, even in the modern science it is said that, the blood supply decreases to the penis which is a clear indication of weakness and this happens due to atherosclerosis in many cases. Atherosclerosis can be taken as Sroto marga nirodhana, which is also a cause for Vata Vyadhi. Atherosclerosis means shrinking of the artery lumen^[6]

Basti

Definition of basti

In Caraka samhita, Siddhi sthana's 1st chapter, Acharya states how a basti acts in our body.^[7] This is also widely considered as the definition of Basti. The Basti Dravya given, after passing through the rectum, the action starts from the Nabhi Pradesha. Later, its action spreads to the kati then, the parshwa and lastly it reaches the kukshi. After this, it breaks the Sakrud-Vatadi dosa chaya which are collected in these places. In doing this, it gives snehana to the whole body as a part of the Sneha in the basti is left in these places and that Sneha is absorbed all over the body. The Sakrud along with the dosas it was holding are also eliminated through the rectum by pratyagamana.

Treatment of vata located in semen

In vata vyadhi chikitsa adhyaya of caraka, in the condition where vata is vitiated in semen, the following treatments are given, Harsha or sexual excitation methods, foods which are bala-kara and sukra-kara.^[3] However, if there is vibaddha marga, one must administer virechana. After which, the same food as said above is given.

Vata vyadhi – General line of treatment

In vataja conditions, Seka, Abhyanga and Basti with the 4 types of Sneha are advised.^[3] Therefore, it would be only right to

choose basti as a mode of treatment in Klaibya.

Importance of taila in vata vyadhi/Klaibya

According to Caraka Acharya, there is no better medicine than taila for treating a vata vyadhi. [3] as taila has Vyavaya, Guru, Ushna and Sneha gunas which are exactly opposite to the vata gunas like Ruksha, Laghu, Sheeta, Khara, Sukshma and Chala. Taila also attains more potency by processing it with vata alleviating drugs. [3] As established in this paper, Klaibya too is a vataja disorder hence, a medicine which in the form of taila may be the best option for treating klaibya.

Basti as ardha chikitsa

Caraka Acharya, in his siddhi sthana's 1st chapter, has opined that there is no other dosa than vata, which can create serious diseases in shaka, kostha, marma, urdhva bhaga of the body and the whole body. This is because; Vata can separate or bring together Vit, Mutra, Pitta and other malas in all the malashayas. When this vata is aggravated there is no other better treatment than Basti to alleviate it as according to the definition of basti, it acts in Nabhi, kati, parshwa and kukshi where all these malas and dosas are aggravated. Hence, basti will clear these malas and dosas in these places and cure the patient. This is the basic reason why it is called as ardha chikitsa. [7] The places in which Basti is acting are apana vayu sthana. Apana is also responsible for sukra nishkramana karma. By administering a taila through Basti will prove to be beneficial for a klaibya patient.

Importance of basti in vata vyadhi

After a patient of Vata roga has been given Snehapana and samyak Snigdha lakshana has been attained, he/she must be given reassurance that they will be fine soon. Then, they must be given snehana again with Milk and mamsa rasas of Gramya / Ambuja / Anupa desa animals. It can be given as payasa / krushara / mamsa rasa. Amla and lavana rasas added to this are beneficial. Basti, Nasya, Tarpana anna must be given and swedana may be done. [3]

Although Nasya and tarpana have been mentioned along with basti, this context in Caraka chikitsa is one where acharya is trying to explain the treatment for vata disorders all over the body. Other than basti (which will act all over the body), the dosas can be eliminated through the nearest route of administration. Nasya or tarpana are such treatments which supplement Basti. For example, when there is a Vataja Shirashoolam basti may be accompanied with Nasya. But, as its Klaibya that is the point of discussion here, Sthanika Abhyanga or Uttara Basti may be apt choices for Basti as supporting therapies.

How basti is important in Klaibya

With Vrushya yogas, ksheera etc are added and can be given as basti in Seminal Disorders like klaibya. [3] Other than Anuvasana and Asthapana Basti, Ksheera bastis are also an option. These ksheera bastis are viewed by many ayurvedic scholars as amalgamations between Sneha and asthapana bastis. They play a very important role in the treatment of klaibya.

In a klaibya patient, after Sneha and sweda, either Sneha samyukta virechana is given or, one may give asthapana and anuvasana. Hence, both Anuvasana and Asthapana bastis are helpful in Klaibya. [3]

Apana Vayu is the one responsible for Sukra / Arthava nishkramana. In klaibya there is a definite derangement of Apana Vayu. The sroto dusti is atipravrutti and sanga. This Apana vrudhhi in its own sthana needs a strong treatment to cure it as, dosa aggravated in its own sthana is naturally difficult to cure. As basti is hailed as ardha chikitsa in vata roga and as we have established in this paper, Klaibya is also vata predominant. Hence, Basti is the best way ahead to cure Klaibya.

A clinical trial conducted as a part of a research at SJSAC&H, Nazarathpet, Tamilnadu, has dealt with Arohana matra basti in Klaibya (ED) and. has yielded highly significant results too. [8] This study in depth dealt with more than 100 patients who were randomly placed in 4 different groups and were administered yoga basti

with Bala Ashwagandhadi Taila with Sthanika Abhyanga and, the patients were monitored for improvements with internationally renowned scales of measure like the IIEF(International Index of erectile Function), QEQ Scoring (Quality of Erection Questionnaire) and the trio of clinical features namely DOIC (Duration of Intercourse), DOER (Duration of Erection) and DOEJ (Duration of Ejaculation). This without doubt proves that basti is very effective in treating Klaibya.

In Saranghadhara Samhita there is mention of Arohana Matra Basti. This type of basti is given when the physician aims at giving more dose to the patient. [9] Ashtanga Hridaya also mentions the significance of basti in seminal disorders in guhya roga. It reiterates what Acharya Caraka has told. [10]

In Acharya Cakradutta's Chikitsa sangraha 72nd chapter, Anuvasanadhikara, there is mention of Arohana Matra Basti. [11] Shadphala or 240 ml is considered by him as sreshta matra, tripala or 120 ml as madhyama matra and saarddha pala or 60ml as the kaniyasi matra that is, the least possible matra that may be administered to the patient. [11]

Table no 1 Cakradutta's Arohana Matra Basti karma [11]

Sl. No	Matra / Dose	1 st day's dose	Daily increase in dose
1.	240 ml	Dwipala / 80 ml	Palaardha/20 ml
2.	120 ml	1 Pala / 40 ml	Aksha / 10 ml
3.	60 ml	Karsha dwayam / 20 ml	Vasumasha / 8 ml

Arohana Matra Basti is a novel type of basti where the dose is increased on a daily basis. Acharya Cakradutta has given the above said formula for the same. This formula is in accordance to the practice of increasing the sneha matra in Sneha pana. This may ensure that there is enough time given for the body to absorb the basti dravya and it also comes out with sukha. As, the dose starts with a very less dose, there is enough time before there is pratyagamana. This may help in the better absorption of the basti dravya from the intestines and in turn, improving the bio-availability of the drug in the patient. And, the daily increase in dose (like Sneha pana) will ensure that the person

doesn't become satmya to the last day's dose. So, the basti dravya will come out with sukha and not create any complications.

However, the starting dose in madhyama and kaniyasa matra may be very less to induce any action. So, a new dose with a higher starting dose than madhyama matra but, lesser than Uttama matra (as 80ml may not be readily acceptable for many on the 1st day of the basti karma) may be formulated and the pratyagamana kala must also be taken into consideration before increasing the dose on the successive days of the treatment. The maximum time allowed for the basti dravya to stay in the system is not more than 24 hours after the administration.

CONCLUSIONS

1. All the 4 types of klaibya are vata predominant.
2. As klaibya is vata predominant and as Apana sthana is affected.
3. Basti with taila is the best option to treat any form of Carakokta Klaibya.
4. Arohana Matra basti may be a better option than traditional Matra Basti in Klaibya.

REFERENCES

1. A.C. Bhakthivedanta Swami Prabhupada. Bhagavad Gita as it is. 37th Edition, Mumbai: The Bhaktivedanta Book Trust; 2011. Pg 70
2. <http://www.clevelandclinicmeded.com>, Cleveland, Cleveland clinic centre of continuing education, November 2012. Available from <http://www.clevelandclinicmeded.com/medicalpubs/diseasemanagement/endocrinology/erectile-dysfunction/>
3. Dr. Sharma.R.K. & Vaidya Bhagwan Dash (2005), Agnivesa's Caraka Samhita (Vol 5), Chowkhamba Sanskrit Series Office, Varanasi -1
4. https://en.wikipedia.org/wiki/Male_infertility
5. <https://andrologyaustralia.org/your-health/male-infertility/>
6. Dr. Anita Patel, Dr. D. Aravind (2014 Mar-Apr); Managing Chronic Arterial Occlusion

- with Ayurvedic Treatment: A Case Study; 'PunarnaV' ayurved journal; Vol 2, Issue 2; pg 1 to7.
7. Dr. Sharma.R.K. & Vaidya Bhagwan Dash (2005), Agnivesa's Caraka Samhita (Vol 2), Chowkhamba Sanskrit Series Office, Varanasi -1
 8. Dr. S. Bharath Narendra, Dr. Anita Patel; Management of Klaibya (Erectile Dysfunction) with Basti Variants and Abhyanga; IJAPC; Vol 10, issue 1; Page 1 to 9.
 9. Dr.P. Himasagara Chandra Murthy (2010), Sarangadhara Samhita, Chowkhamba Sanskrit Series Office, Varanasi.Pg 334
 10. Dr. K.R. Srikantha Murthy (1996), Ashtanga Hridayam (vol 1), krishnadas Academy, pg 23
 11. Priya Vrat Sharma. Cakradutta.3rd edition. Varanasi. Chaukhambha Publishers. 2002. pg 619

How to cite this article: Narendra SB, Patel A. Basti in klaibya. Int J Health Sci Res. 2019; 9(1):275-279.
