The Role Of Matra Basti In The Treatment Of Malavshtambha (Constipation): A Case Study

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Abstract

Malavshtambha means any type of obstruction in the process of Malavisarjan (Defecation). Shushka or granthil mala, adhamana, atopa, udarshoola are symptoms associated with Malavshtambha. It can be correlated with Constipation as per Modern medical science. Constipation is a disorder in the gastrointestinal tract which can result in hard, dry stool with pain, less quantity of stool on extra pressure or no defecation for 2-3 days. Constipation among older people is far more common than younger people. Lack of proper diet, lack of adequate fluid intake, lack of adequate physical activity, illness or use of some drugs leads to constipation.

A male patient of age 83 yrs. old came with complaint of no defecation on taking higher doses of laxative medicines since last 3 days. I gave him Matra Basti as an Ayurvedic treatment for 30 days with diet plan and got very good results in overcoming Malavshtambha.

Keywords :- Malavshtambha, Malavisarjan, Constipation, Shushka mala, Matra Basti, etc.

Introduction

Malavshtambha means avrodha of mala i. e. change in natural evacuation of stool and its properties, here we must think of Purishmala only and synonyms of Malavshtambha are Vibandha, malavrodha, vitgraha, kabja, baddhakoshtata.

When purishmala visarjan i. e. normal evacuation is obstructed due to hard mala, shushka mala, sticky mala or granthil mala it is called as Malavshtambha. If malavisarjan occurs with an interval of 1,2 or 3 days again, it is Malavshtambha.

Constipation is a common gastrointestinal problem, which causes many expenses for the community with an estimated prevalence of 1% to 80% worldwide1. In this regard, this condition has a close relationship with the patients quality of life2 and consuming health resources3,4. Constipation among older people is far more common than younger people. Common causes of constipation in the elderly are linked to several factors including lack of normal bowel movements or aging, lack of proper diet, lack of adequate fluid intake, lack of adequate physical activity, illness or the use of some drugs.

Case Report :-
A patient of age 83 yrs. came with the complaints of No defecation since last 3 days

Mild pain in abdomen Abdominal distension Urge for defecation intermittantly.

Past History :-
Patient is regularly taking laxative churna since last 20 yrs. but during these years dose of laxative churna increased so much. And now after taking laxative churna in high dose since last three days but defecation did not occurred. There is no past history of any major illness, no H/O DM, HTN.

On Examination :-
- Patients pulse, B.P., Temperature, CVS, CNS were normal.
- Per abdomen there was mild tenderness in left iliac region and hard stool was palpable.
- On per rectum examination hard, sticky stool was felt.

Treatment :-
Matra basti of 60ml Til Tail (Sesame oil) was administered daily till adequate and daily stool evacuation didn’t occurred.

Method of administration of Matra Basti -
The procedure of administration of Basti can be divided into three stages as follows,

Purva Karma :
The patient were instructed to come after a light diet (neither too snigdha nor too ruksha and not more than three-fourth of his usual diet). He was
advised to urinate before. The patient was mainly subjected to local Abhyanga and Mrudu Swedana prior to the administration of Matra basti.

**Pradhana Karma :**

After purva karma, the patient was advised to lie down in the left lateral position on the basti table with the left lower extremity kept straight and the right lower extremity flexed at the knee and hip joint. The patient was asked to keep his left hand below the head. 60 ml. (dose of Matra Basti) of lukewarm Til Tail with saindhav added was taken in an enema syringe and a rubber catheter no. 9 lubricated with til tail attached with enema syringe. After expelling the air from the enema syringe the rubber catheter was passed through anus of patient upto the length 4 inches. The patient was asked to take deep breath and to lie still while the catheter and the tail is administered. The total amount of Taila was not administered in order to avoid the entrance of vayu into Pakvashaya.

**Paschat Karma :**

After the administration of Basti, the patient was advised to lie in supine position with the arms and legs spread out freely over the table. Both legs were raised for few minutes so as to raise the waist and gently tapped over his hips, thighs. After 15 minutes patient was advised to get up from table and advised rest at home.

**Pathya-Apathya :**

Patient was advised to take plenty of fluid intake, high fibre diet like vegetables, salad, fruits, etc.

Patient was advised to avoid bakery products, junk food, fast food, shabudana, non-veg. etc.

**Observations :-**

Basti Pratyagamana Kala was noted everyday. After administration of 1st matra basti there was no pratyagamana of it, then 2nd matra basti was administered then on next day small amount of stool was passed. On examination per abdomen there was no hard stool on palpation, which was palpated on 1st day. Then onwards defecation with small amount of stool passing started on alternate days till next 10 days. During this adhmana, atopa, udarshoola symptoms were gradually disappeared. After that there was daily defecation started but still it wasn’t satisfactory for patient, so matra basti continued and after 25th day patient was satisfied with defecation. After that again 5 matra basti given to patient and still Pratyagaman kala was upto 8-9 hours. After administration of 30 Matra Basti, patient had normal urge for defecation and evacuation of stool.

There were no any adverse effects observed during and after treatment. But definitely we saw other advantages like kanti,tej on patients face was observed significantly, which is described in Charaka Samhita, Shushruta Samhita as well.

**Probable mode of action of Matra Basti :-**

Basti therapy is considered as prime among all therapeutic measures, especially for management of Vatavyadhis and some Physicians accept it as a complete therapeutic measure. Basti dravyas act as Vataroga, Yogavahi, Agnideepaka and Rasayana.

Tila Taila is of madhura rasa and Vipaka, Balya and Rasayana in karma, it nourishes and strengthens all the Dhatus, checks Dhatukshaya and thus alleviates Vata. Snigdha and Guru Guna decreases Rukshata of Vata and with its Ushna guna and Virya it alleviates Vata. So in Malavshambha Vata is predominant dosha which is treated best with Til Tail Matra Basti. Vikasi property Of Til Tail reduces the spasms in Malavshambha. Tila Tail directly works on Apana Vata situated in Pakvashaya when administered in the form of Basti.

**Discussion :-**

Our Acharyas have considered the rectum as the root of the body. According to Acharya Charaka, As a tree in its roots attains blue branches with beautiful tender leaves, flowers and fruits in time and attains a big stature, so too the man with unctuous basti given through the rectum2.

On the action of Basti, Vagbhata8 says the virya of basti is conveyed to Apana and then to Samana Vata, which may regulate the function of Agni. It then act on Udana, Vyana and Prana, thus providing its efficacy all over the body.

Modern pharmacokinetic studies have also proved that drug administration via the rectum can achieve higher blood levels of the drug than administration through the oral route due to partial avoidance of hepatic first-pass metabolism. The rectum has a rich blood and lymph supply and drugs can cross the rectal mucosa as they can other lipid
membranes. Thus un-ionized and lipid soluble substances are readily absorbed from the rectum. The portion absorbed from upper rectal mucosa is carried by the superior hemorrhoidal vein into the portal circulation, whereas that absorbed from the lower rectum enters directly into the systemic circulation via the middle and inferior hemorrhoidal veins. Thus administration of drugs in the basti form has faster absorption and provides quicker results.

Conclusion:

From above case study, we can conclude that Matra Basti plays very important role in the treatment of Severe Constipation too, means in mild to moderate constipation (Malavshambha) it will be very useful treatment. Some further study on this is definitely required to strengthen our conclusion.

References:

1. Sanchez MI, Bercik P. Epidemiology and burden of chronic constipation. Gastroenterol. 2011;25:11B-L15B.