A Comperative Clinical Study to Assess the Effect of Manjishtadi Kshara Basti and Bhadradaruvadi Basti in Siraja Granthi (Varicose Vein)

Dr. MANJUNATHA BHAT Professor & HOD Department of *Shalya Tantra*

Alva's Ayurveda Medical College and Hospital Moodabidire, -574227, Karnataka,

Abstract:-

Background: In the present era, everyone is more conscious about their beauty and even a small change in the skin texture or lustre is enough to create stress and tension in our mind, especially in ladies. Varicose vein of the lower limb is one of such clinical condition that hampers the beauty of the legs. Basthi, Sahacharadi Taila as internal medication, Upanaha with Vataharadravyas, Siravyadha, are given as treatment choices by Acharya Vagbhata for the treatment of Siraja Granthi. Objective: To assess the effect of Manjishtadi Kshara Basti and Bhadradaruvadi Basti in the management of Siraja Granthi and compare their efficacy in Siraja Granthi. H₀-There is no significant difference between the effect Manjishtadi Kshara Basti and Bhadradaruvadi Basti in the management of Siraja Granthi (varicose vein).H₁- There is significant difference between the effect Manjishtadi Kshara Basti and Bhadradaruvadi Basti in the management of Siraja Granthi (varicose vein).

Methodology: 40 patients diagnosed as *Sirajagranthi* (varicose vein)were selected strictly as per the pre-set inclusion and exclusion criteria and divided into Group A, who were treated with *Manjishtadi Kshara Basti* and Group B, who were treated with *Bhadradaruvadi Basti*. The observations procured on the assessment parameters

Varicose vein are more likely to develop in lower limb of human beings because of their erect posture. People who are habituated for long standing are more likely to affect lower limbs as compared to others. Varicose veins affects 10-20% of adults. Varicose veins are abnormal dilated, elongated and tortuous alteration in the saphenous veins and their tributaries called as varicose veins. The modern period is characterized by a wide range of ailments brought on by people's lifestyles and work habits.

According to Ayurvedic scriptures Sirajagranthi⁴ and Varicose vein can be co-related. Vayu enters the Siraas a result of Vataprakopaka Nidanas such as excessive physical efforts and straining, which results in Sampeedana, Sankocha and Vishoshana as well as formation of Granthi in Sira. This condition is known as Sirajagranthi. In the classics recommended therapy Sirajagranthi for Rakthamokshana^{5,9}.Acharya Vagbhata offers Basthi, Sahacharadi Taila as internal remedy, Upanaha with Vataharadravyas & Siravyadha as possible treatment choices for Siraja Granthi.

of 40 patients before treatment, Day 8th (AT1), Day15th (AT2),Day 22nd (AT3) and Day30th (AT4) day in both the groups i.e Group A and Group B & were analysed statistically to determine the treatment effect. *Manjishtadi Kshara Basti* (Group A) and *Bhadradaruvadi Basti* (Group B).

Results: In all attributes of *Sirajagranthi* (varicose vein) Group A and Group Bdemonstrated highly significant findings. *Bhadradaruvadi Basti* effect in the *Lakshanas* like *Grathana*, *Vaivarnya & Daha* were marginally better. Results of *Manjishtadi Kshara Basti* were marginally better in the *Lakshanas* such as *Kandu*, *Shotha and Shoola*.

Conclusion: In this clinical study, Both Group A and Group Bdemonstrated significant results in all subjective & objective parameters of *Sirajagranthi*(varicose vein)in this clinical research.

Keywords:- Sirajagranthi, Manjishtadi Kshara Basti, Bhadradaruvadi Basti, Varicose Vein.

I. INTRODUCTION

In contemporary surgery there are two types of choices for treatment of varicose veins (*Siraja Granthi*) i.e non-invasive (non-surgical) & surgical management .Sclerotherapy, elastic stockings, elevating the legs and exercises are examples of non-invasive (non-surgical) management. The main disadvantage of sclerotherapy is the potential for developing new varicose veins after the procedure, venous thrombosis and severe inflammation to appear following the procedures. The most commonly practiced stripping technique, may lead to complications like formation of hematoma, infection and saphenous nerve irritation.

Ayurveda medicine system offers efficient treatments for those who are suffering from varicose veins (Siraja Granthi) and can't afford more expensive management of varicose veins is one such area where Ayurveda has multiple answers.

Basti is told as Ardhachikithsa⁷. Basti not only enhances the growth, complexion and strength but also increases the life span of the individual when carried out properly. The administered Basti reaches Pakvashaya and eliminates all the

Prakupita Doshas from foot to head, as "Soorya absorbs the Rasa of the Bhoomi⁸.

In Ashtanga Hrudaya Bhadradaruvadi Gana are mentioned as Vatahara¹². And in Sahasra Yogam Manjishtadi Gana are indicated in Vataja & Raktaja vitiated conditions¹³. Kshara Basti Gunas are explained in Chakradatta, it is very useful in Vata vitiated conditions like Shoola, Udavarta, Gulma etc.14

Hence, in order to treat peoples suffering from varicose veins (Sirajagranthi) Manjishtadi Kshara Basti & Bhadradaruvadi Basti were planned.

II. METHODOLOGY

Sample source

- Patients suffering from Siraja Granthi (varicose vein) attending OPD and IPD of Alva's Ayurveda Medical College and Hospital were selected.
- Patients from Other camps and referrals were also included in the present clinical study.

Method of collection of data

- 1. Study Design: Present clinical study was comparative clinical study with pre and post test design.
- 2. Sample Size: Forth this present clinical study minimum of 40 patients suffering from Sirajagranthi (varicose vein) were chosen and were divided into 2 group's i.e Group: A and GroupB respectively with 20 patients in each
- 3. Selection Criteria: Patients of either sex, who met the diagnostic and inclusion criteria of Sirajagranthi

Group A: Was treated with *Manjishtadi Kshara Basti*.

Group B: Was treated with *Bhadradaruvadi Basti*.

(varicose vein) regardless of their financial situations, were selected for the present clinical study.

Diagnostic Criteria

- > Sampeedana, Samkochana and Vishoshana of Siras (dilated, elongated and tortuous veins) which areclinical characteristicss of Sirajagranthi (varicose vein) were used as the diagnosiscriteria for present clinical study.
- Multiple Torniquet test.
- Brodie- Trendelenburg test.
- Perthe's test,

Inclusive Criteria

- > Patient between ages of 16-70 years.
- Patient with Primary varicose vein.
- Patient having only lower limb with Siraja Granthi (varicose vein).
- Patients fit for Basti.

Exclusive Criteria

- > Patients suffering from Diabetes mellitus, anaemia and other systemic illness.
- Patient having coagulopathy or bleeding problems.
- Varicosity linked to venous ulcer, deep vein thrombosis, calcification, equines deformity.
- ➤ In Basti Anarhas.

Procedure

Materials Recquired: Measuring jar, Moorchita Tila Taila, Madhu, Saindhav Lavana, Khalva Yantra, Manjishta, Triphala, Guduchi, Vacha, Devadaru, Katuki, Nimba & Shatahwa, Bhadradaruvadi Gana, Nadi Swedana Yantra, Sterile cotton swab Gloves.

Course of Basti: Yoga Basti Pattern

Table no: 1 Showing Course of *Basti* in both the groups

Day1 st	Day2 nd	Day3 rd	Day 4 th	Day 5 th	Day 6 th	Day 7 th	Day 8 th		
A.B	N.B	A.B	N.B	A.B	N.B	A.B	A.B		

Note: - A.B - Anuvasana Basti N.B- Nirooha Basti

Anuvasana Basti:15

Poorva Karma: Consent was taken from the patient for the procedure. Sthanika Abhyanga with Moorchitha Tila Taila and Nadi Swedana was given to the lower abdomen, and thighs of the patient. Light food was given to the patient.

Pradhana Karma: Patient was instructed to lie in the left lateral position, with the left leg straight and right leg flexed at the knee and hip joints. Anus was anointed with cotton swab dipped in Taila before receiving of 80 ml of Brihat Saindavadi Taila (Group A) & 80 ml of Sahacharadi Taila (Group B) via Bastiyantra.

Paschat Karma: Sphik Thadana, Mardhana over Nabhi region was done and asked to rub the palms together briskly. Simultaneously rubbing of patient's sole was done. After that the patient was made to raise the legs by flexing the hip several times, avoidance of Ashta Mahadoshakara Bhava.

Nirooha Basti

Poorva Karma: Patient was instructed to be on empty stomach, and was made to lie down. Sthanika Abhyanga with Moorchitha Tila Taila was performed followed by Nadi Swedana over lower abdomen, back and thighs of the patient. Swedana over lower abdomen, back and thighs of the patient was done.

Pradhana Karma: Patient was made to lie in the left lateral position by keeping left leg straight and right leg flexed at the knee joint. Anus was anointed by using cotton swab dipped in Taila and appropriate quantity of prepared Nirooha Basti Dravva was administered accordingly in both the groups i.e Group: A and Group: B respectively.

Paschat Karma: The patient was advised to take bath with Luke warm water and light diet.

Astamahadoshakara Bhava should be avoided.

Method of Preparation of *Manjishtadi Kshara Basti* (Group A):

To prepare Manjishtadi Kshara Basthi, the contents of it were mixed in following ratio first 80 ml Madhu and 5 gm of Sandhava Lavana were mixed homogenously in Khalva Yantra and then 60 ml of Moorchitha Tila Taila was taken and mixed to form uniform mixture, 40 gms of Kalka out of Manjishta, Triphala, Guduchi, Vacha, Devadaru, Kutuki, Nimba and Satahwa were added to the above mixture. It was then mixed with of 100 ml of Kwatha prepared with Kwatha Choorna of Manjishta, Triphala, Guduchi Vacha, Devadaru, Katuki Nimba. Then 100 ml of Kanji & 100 ml of Gomutra was added und mixed to form a homogenous mixture before tested for Suyojita Nirooha Lakshana's.

The entire *Basti Dravya* was now filtered & administered after being made it lukewarm by indirect heating. The specific pattern of mixing the *Basti Dravya* is followed so that all the contents were mixed properly & a uniform mixture was obtained. The total amount of *Basti Dravyas* was maintained around 480ml.

Method of Preparation of *Bhadradaruvadi Basti* (Group B)—

To prepare Bhadradaruvadi Basti, Basti Dravyas were mixed in a specific manner as described in our classics, initially 60 ml of Madhu and 5gms of Saindhava Choorna was taken in a *Khalva Yantra* and mixed homogenously, then 80 ml of Sahacharadi Taila was taken and mixed to form uniform mixture. Then the above mixture was supplemented with 40 gms of Kalka made of Bhadradaruvadi Gana. Following that 300 ml of Kwatha prepared with Kwatha Choorna of Devadaru, Jatamamsi, Kusta, Dashamoola, Baladvaya was added and mixed thoroughly to form a homogenous mixture and tested for Suyojita Nirooha Lakshana's. The entire Basti Dravya was filtered and administered after being indirectly heated to lukewarm. The specific pattern of mixing the Basti Dravya so that all of the contents were mixed properly and finally a uniform mixture was obtained. The total quantity of Basti Dravya was maintained around 480ml.

Study period: Study was carried out for 60 days (For both groups A &B).

Interventions:

Table no: 2 Showing Interventions in both the groups

Day 1 st - Day 3 rd	Deepana and Pachana with Panchakola Choorna	
	Basti in Yoga Basti schedule:	
Day 4 th - Day 11 th	Group A: Manjishtadi Kshara Basti.Group B:Bhadradaruvadi Basti.	
Day 12 th -Day 30 th	Observation period which includes <i>Parihara Kala</i> also.	

Assessment was done before treatment and on the Day 8^{th} , Day 15^{th} , Day 22^{nd} and Day 30^{th} including follow up-total 60 days.

Assessment criteria:

Data were collected and documented on a detailed preformed case proforma. Subjective and objective parameters were evaluated by adopting standard methods of scoring of the condition & were analyzed statistically.

Subjective Parameters:

- 1. Shoola(Pain)
- 2. Kandu(Itching sensation)
- 3. Daha (Burning sensation)

Objective Parameters:

- 1. Grathana (Hardening of Sira)
- 2. Shotha (Swelling)
- 3. Vaivarnya (Pigmentation)

Observations:

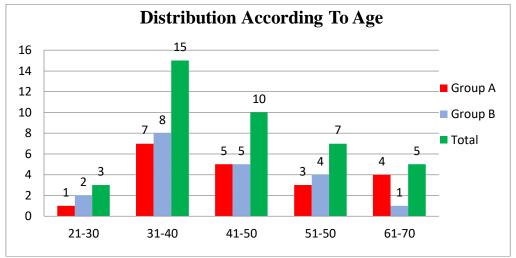
Observations on Demographic Profile:

1. Age Wise Distribution Of 40 Patients:

The age distribution of 40 *Sirajagranthi* (varicose vein) patients revealed that 7.5 % were between the ages of 21 and 30, and 37.5 % were between the ages of 31 and 40. 25% of patients were between the ages of 41 and 50, 17.5 % were between the ages of 51 and 60, and 12.5 % were between the ages of 61 and 70.

Table No: 3- Showing the age wise distribution of 40 patients.

A 00	Group A		G	Group B	Total	
Age	Number	Percentage	Number	Percentage %	Number	Percentage %
21-30	1	5	2	10	3	7.5
31-40	7	35	8	40	15	37.5
41-50	5	25	5	25	10	25
51-60	3	15	4	20	7	17.5
61-70	4	20	1	5	5	12.5



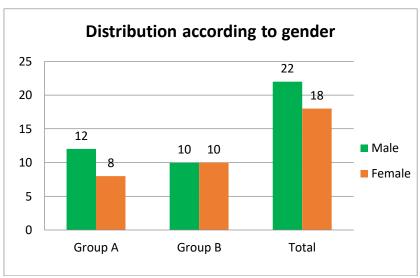
Graph No.:1 showing the age wise distribution of 40 patients.

2. Gender Wise Distribution Of 40 Patients:

Gender wise distribution of patients showed 55% of males and 45% of females.

Table No: 4 - Showing the gender wise distribution of 40 patients.

GENDER	Group A		Gr	oup B	Total	
	Number Percentage		Number Percentage %		Number Percentage %	
MALE	12	60	10	50	22	55
FEMALE	8	40	10	50	18	45



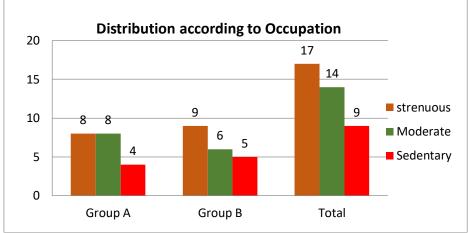
Graph No.:2 Showing the gender wise distribution of 40 patients.

3. Occupation Wise Distribution Of 40 Patients:

The prevalence of work type revealed that in the current study, 42.5 % of patients were engaged in strenuous work, 22.5 % in sedentary work, and 35 % in moderate work.

Table No: 5 - Showing the Occupation wise distribution of 40 patients.

Tuble 110: 5 Showing the Occupation wise distribution of 40 patients.							
	Group A		Group B		Total		
Occupation	No.	%	No.	%	No.	%	
Strenuous	8	40	9	45	17	42.5	
Moderate	8	40	6	30	14	35	
Sedentary	4	20	5	25	9	22.5	



Graph No.:3 Showing the Occupation wise distribution of 40 patients.

III. RESULTS

The observations procured on the assessment parameters of 40 patients before treatment, Day 8^{th} (AT1), Day 15^{th} (AT2), Day 22^{nd} (AT3) and Day 30^{th} (AT4) in Group A and Group B were analysed statistically to determine the treatment effect.

Group A-Manjishtadi Kshara Basti, **Group B**-Bhadradaruvadi Basti.

The parameters consisted of Shoola, Kandu, Grathana, Shotha, Vaivarnya and Daha.

Statistical methods used were as follows:

- The mean and standard deviation were used to calculate the average.
- The paired 't' test was used to compare pre-test and posttest data.
- The unpaired 't' test was used to compare two groups.

Comparative Effect Of Treatment Between Two Groups

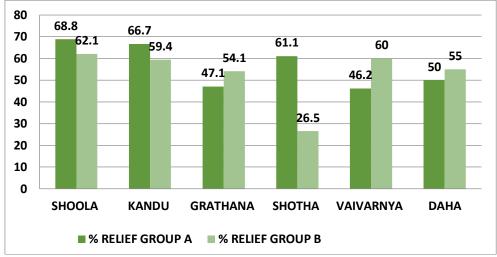
Table no.-6 Showing the Comparative Effect of Treatment Between Both Groups

	BT-AT	mean		Standard Deviation			
Symptoms	Group A	Group B	Mean difference	Group A	Group B	T value	P value
Shoola	1.65	1.8	-0.15	0.67	0.61	-0.73	0.7
Kandu	0.9	0.95	0	0.55	0.51	-0.05	0.7
Grathana	0.8	1	0.2	0.52	0.64	-0.20	0.2
Shotha	1.1	0.65	0.55	0.641	0.48	2.49	0.7
Vaivarnya	0.9	1.2	-0.3	0.718	0.82	-1.41	0.2
Daha	0.5	1.05	-0.5	0.510	0.61	-2.85	0.1

• Comparison between both Groups showed there is no statistically significant difference *in Shoola, Kandu, Shotha, Vaivarnya* of *Sirajagranthi* while comparing both the Groups the groups (P value >0.05).

Table No: 7- Showing the Comparative Percentage of Relief Between both groups (Group A & Group B)

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SIGNS AND	MEAN DIFFI	ERENCE	% RELIEF						
SYMPTOMS	GROUP A	GROUP B	GROUP A	GROUP B					
SHOOLA	1.65	1.8	68.8%	62.1%					
KANDU	0.9	0.95	66.7%	59.4%					
GRATHANA	0.8	1	47.1%	54.1%					
SHOTHA	1.1	0.65	61.1%	26.5%					
VAIVARNYA	0.9	1.2	46.2%	60%					
DAHA	0.5	1.05	50%	55%					

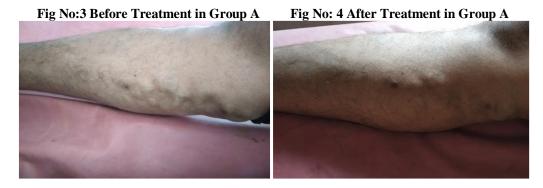


Graph No – 4: Comparative percentage of relief between Group A & B

Comparative Percentage of Relief Between Group A & B

- *Shoola* There was 68.8 % relief in Group A and 62.1 % relief in Group B.
- *Kandu* There was 66.7 % relief in Group A and 59.4 % relief in Group B.
- *Grathana* There was 47.1 % relief in Group A and 54.1 % relief in Group B.
- Shotha There was 61.1 % relief in Group A and 26.5 % relief in Group B.
- Vaivarnya There was 46.2 % relief in Group A and 60 % relief in Group B.
- Daha There was 50 % relief in Group A and 55 % relief in Group B.

Manjishtadi Kshara Basti showed slightly better results in the symptoms such as *Kandu* and *Shoola & Shotha*. *Bhadradaruvadi Basti* showed slightly better results in the symptoms such as, *Grathana*, *Vaivarnaya & Daha*.





IV. DISCUSSION

A) Discussion on Results

Overall effect of treatment:

In Group A, the effect of *Manjishtadi Kshara Basti* in various signs and symptoms of *Sirajagranthi* (varicose vein) were assessed on Day8th, Day15th, Day22nd and Day30th showed gradual improvement in clinical conditions and statistically significant changes was obtained.

In Group B, the effect of *Bhadradaruvadi Basti* in signs and symptoms of *Sirajagranthi* (varicose vein) were assessed on Day8th, Day15th, Day22nd, and Day 30th showed improvement in clinical conditions and showed statistically significant change.

1. Effect on Shoola

In Group A:

The mean *Shoola* score of 20 patients was 2.40 before t reatment and 0.750 after treatment. *Manjishtadi Kshara Bast i* had a statistically significant effect on *Shoola* (P <0.001). T his is mostlikely due to the *Manjishtadi Kshara BastiVataha ra* and *Vedanashapana* properties.

In Group B,

The mean *Shoola* score of 20 patients was 2.90 before t reatment and 1.10 after treatment. *Bhadradaruvadi Basti* had a statistically significant effect on *Shoola* (P < 0.00 1). This is Most likely due to the *Bhadradaruvadi Basti Vatahara* and *Vedanahara* properties.

2. Effect on Kandu

In Group A: The mean *Kandu* score of 20 patients was 1.35 before treatment and 0.45 after treatment. *Manjishtadi Kshara Basti* had statistically signific ant effect on *Kandu* (P < 0.001). This is most

likely due to the *Manjishtadi Kshara Basti Kandughana* and *Raktashodaka* properties.

In Group B:

The mean *Kandu* score of 20 patients was 1.60 before treatm ent and 0.65 after treatment.

Bhadradaruvadi

Basti had a statistically significant effect on Kandu (P < 0.00 1). This is

Most likely due to the *Bhadradaruvadi Basti* Rakthashodhana and Kandughna action.

3. Effect of Grathana

In Group A:The mean Grathanascore of 20 patients was 1.700 before treatment and 0.90 after treatment. Manjishtadi Kshara Basti had statistically significant effect on Grathana (P <0.001). This is most likely due to the Manjishtadi Kshara Basti's- Vatahara and Raktashodaka properties.

In Group B

The mean *Grathana* score of 20 patients was 1.850 before treatment and 0.85 after treatment. *Bhadradaruvadi Basti* had a statistically significant effect on *Grathana* (P < 0.001). This is most likely due to the *Bhadradaruvadi Basti* – *Vatahara* and *Vedanahara* action.

4. Effect on Shotha

In Group A, out of 20 patients, the mean score of *Shotha* before treatment was 1.80 was reduced to 0.70 after treatment. This revealed statistically significant effect of *Manjishtadi Kshara Basti* on *Shotha* P<0.001. *Manjishtadi Kshara Basti* helps relive the intravascular pressure and helps to subsides the *Shotha*.

Swelling is mainly due to venous outlet obstruction this increases venous capillary hydrostatic pressure and collection of tissue fluid and by *Sothahara properties of Manjishtadi Kshara Basti* causing reduction in swelling.

In Group B, out of 20 patients, the mean score of *Shotha* before treatment was 2.45 was reduced to 1.80 after treatment. This revealed statistically significant effect of *Bhadradaruvad Basti* on *Shotha* P<0.001. This may be due to *Vatahara* and *Sothahara* action of *Bhadradaruvad Basti*.

5. Effect on Vaivarnya:

In Group A, Out of 20 patients, the mean score of *Vaivarnya* before treatment was 1.95 was reduced to 1.05 after treatment. This revealed statistically significant effect of *Manjishtadi Kshara Basti* on *Vaivarnya* P<0.001 This is due to *Varnya* drugs like *Manjishta*, *Nimba* of *Manjishtadi Kshara Basti* which helps reduce the pigmentation.

In Group B, Out of 20 patients, the mean score of *Vaivarnya* before treatment was 2.00 was reduced to 0.80 after treatment. This revealed statistically significant effect of *Bhadradaruvad Basti* on *Vaivarnya* P<0.001. This may be due to *Rakthashodhaka* & *Vatahara* action of *Bhadradaruvadi Basti*.

6. Effect on Daha

In Group A, out of 20 patients, the mean score of *Daha* before treatment was 1.100which reduced to 0.55 after treatment. This revealed a statistically significant effect of *Manjishtadi Kshara Basti* P<0.001. *Raktashodaka* properties of *Manjishtadi Kshara Basti* may helps to reduce burning sensation (*Daha*) over the part.

In Group B, out of 20 patients, the mean score of *Daha* before treatment was 2.00 reduced to 0.95 after treatment. This revealed a statistically significant effect of *Bhadradaruvadi Basti* on *Daha* P<0.001. This may be due to *Rakthashodhana* and *Daha*hara action of *Bhadradaruvadi Basti* thus reduces burning sensation (*Daha*) over the part.

b. Discussion on comparative effect of the both groups While comparing both the Groups there is no statistically significant difference in *Shoola*, Shotha, *Grathana*, *Kandu*, *Vaivarnya*, *Daha of Sirajagranthi* in between the groups. (P value > 0.05) in comparing the two groups.

Hypothesis:

Hence the Null Hypothesis is accepted.

H₀ – There is no significant difference between the effect *Manjishtadi Kshara Basti* and *Bhadradaruvadi Basti* in the management of *Siraja Granthi* (varicose veins).

When the two groups are compared, there is no statistically s ignificant difference in *Shoola*,

Shotha, Grathana,

Kandu, Vaivarnya, Daha, or *Sirajagranthi*. (P value greater t han 0.05)

while comparing the two groups i.e **Group A:** *Manjishtadi Kshara Basti*. **Group B:** *Bhadradaruvadi Basti*.

V. DISCUSSION ON BASTI AND ITS PROPABLE MODE OF ACTION

Basti is primarilyVatahara in action, working with Veerya and Prabhava, the given Basti reaches Nabhipradesha, Kati, Parshwa, and Kukshi region, the Veerya of Basti reaches the entire body and acts of Dosha Sanghata and eliminating the vitiated Doshas along with Puresha. The Moolasthana of Dhamani and Sira is Nabhi.Which transports materials through out the body.Vatatransports Veerya through Sira and distributes it throughout the body.

Manjistadi Kshara Basti is a Tikshna Niruha Basthi with special indication for Vata and Rakta imbalances. Manjishtadi gana is indicated in Vataja and Rakthaja vitiated condition. Kshara Basthi possess Shoolagna property and Srothoshodana property. Manjishta is endowed with Varnya, Raktadoshahara, Kushtahara and Shothahara properties.

Nimba is endowed with Kandugna, Vedanasthapak and Raktadoshahara. Guduchi is having Rakta Doshahara Vedanasthapaka. Amalaki is Balya and Rasayana helps increasing vascular tone of the vessels. Gomutra act as Sroto Shodhaka due to having Ushna Virya, Laghu, Ruksha and Tikshnaguna, Katu rasa, Katu Vipaka.

Brihat Saindhavadi Taila was used for Anuvasana Basthi .Eranda Taila and most of its contents have basically Ushna, Vata Kapha Shamaka, Shothahara, Vedana Sthapana and Deepana properties, tikshna guna and act as having Lekhana property as well as Vyadhihara for the disease Siraja Granthi(varicose veins).

Manjishtadi kshara basthi has antagonistic qualities towards Kapha due to Gomutra and Pitta as well as Rakta as it contains Manjishtadi Kwatha, and act as Rakta prasadaka and Tridoshahara.

Bhadradaruvadi Basti is classified as *Vatahara Basti*. It is indicated in *Vataja* conditions. It acts as *Shothahara*, *Shoolahara*, *Srothoshodhana* property. *Sahacharadi Taila* has special indication in *Sirajagranthi* (varicose vein) has *Vatahara* property.

➤ Modern view of Action of Basti:

In Chikithsa of *Vata*, *Basti* is explained as superior & *Ardachikithsa*. However, Modern Science may not accept it completely.

Probable mode of action of Basti:

- Mechanism of absorption
- Neural stimulation
- Chemical action
- Mechanical action

Despite the fact that rectum is not a typical site for nutrients absorption, drugs introduced by rectum may be absorbed here. As a result drugs introduced through this route have systemic effect as well as local effect. The water soluble content easily get absorbed as it as the ability to move in both the directions across the mucus membranes of small and large intestine. Short chain fatty acids are also absorbed in the colon mucosa under the influence of medication, which can also be used to absorb the unusual substances.

- > Follow up
- 1) The improvement in the disease condition observed during the study period persisted as such in both the groups in course of the follow up period.
- 2) During follow up no complications such as burning, itching, redness etc. were observed.
- 3) No recurrence was observed during follow up period.

VI. CONCLUSION

Based on the review of literature and observations made in clinical study, the following conclusions are drawn.

- *Sirajagranti* (varicose vein) is common clinical condition affecting the lower limbs with an increased in this era due to hectic pace of life.
- Varicose veins (*Sirajagranthi*) were more in the peoples belonging toprolong standing occupation.
- Manjishtadi Kshara Basthi and Bhadradaruvadi Bashti are simple, low cost OPD procedures that have miraculous effect on varicose veins (Sirajagranthi).
- Basti acts through its Veerya and Prabhava, when Basti is administered, the Veerya of Basthi spreads all over the body, eliminating the vitiated Doshas as well as Pureesha. Nabhi is located between Amasaya & Pakvashaya & Mulasthana of Dhamani & Sira. Vatatransports Veerya through Sira & distributes it throughout the body.
- Manjishtadi Kshara Basthi is a Tikshna Niruha Basthi that has both Lekhana & Vyadhihara action.
- Bhadradaruvadi Basthi is Vatahara Basthi, Bhadradaruvadi Gana is indicated in Vataja conditions & it has Shothahara, Shoolahara, Srotoshodhana properties.
- Sahacharadi Taila has special indication in Sirajgranthi (varicose veins).
- In this clinical study, both Group A and Group Bdemonstrated significant results in all attributes of *Sirajagranthi*.

- Manjishtadi Kshara Basti has slightly better results for Kandu and Shoola & Shotha. Bhadradaruvadi Basti slightly better results for Grathana, Vaivarnaya & Daha.
- Based on the findings of the study, it is possible to conclude that the overall effect of *Manjishtadi Kshara Basti* and *Bhadradaruvadi Basti* are nearly identical with minor difference in specific features, even though *Bhadradaruvadi Basti* showed percentage wise slightly better result which is statistically insignificant.
- Based on superior results in various symptomatologies we can advise either *Manjishtadi Kshara Basti* or *Bhadradaruvadi Basti*. For example if *Shoola* is dominant *Manjishtadi Kshara Basti* can be done, and *Grathana, Vaivarnaya* is dominant the *Bhadradaruvadi Basthi* can be done.

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