

Basti Karma

Unit 8. Basti Karma (Therapeutic Enema)

1. Introduction

Basti Karma is the administration of medicated liquids through the anal route (and in special contexts, urethral or vaginal) for **śodhana** (evacuation/cleansing) and **śamana-brhmaṇa** (pacification-nourishment), with **Vāta** (principle of movement) as the prime target. Classics open Basti-vidhi by declaring its primacy in Vāta and Vāta-dominant disorders:

“वातोत्त्वणेऽसु दोषेण वाते वा वस्तिरिद्धते ।
उपक्रमाणां सर्वेषां सोऽप्यनीत्विधस्तु सः ।
निरुहोऽन्वासनं बस्तिरुत्तरः ॥” — *Aṣṭāṅga Hṛdaya, Sūtrasthāna 19/1-2.*

Take-home: Basti is **threefold**—**Nirūha/Āsthāpana** (decoction enema), **Anuvāsana** (unctuous enema), and **Uttara-basti** (urogenital route; beyond scope here). You will learn instruments (yantra), doses (mātrā), indications/contraindications, exact procedures, mechanisms, classical formulations, and application principles in specific diseases.

2. Basti Yantra and Mātrā

2.1 Classical apparatus (Basti yantra)

- **Basti-netra (nozzle):** Metal/horn/bone; **length & bore proportional to age and anal canal; three rings (karṇikā)**—one $\frac{1}{4}$ -**āṅgula** from the tip to limit entry; **two at the base** to tie the bag's mouth. Tip smooth, straight, and finger-breadth-matched to patient. Key verses detail measures and construction.
- **Basti-putaka (bag):** Processed animal bladder (e.g., cow/deer/boar) or robust cloth/substitute, **clean, odorless, soft, veinless, well-washed**; well tied to netra.
- **Modern equivalents:** Sterile disposable enema cans/syringes with catheters replicate flow control, sterility, and safety standards (accepted as contemporary substitutes).

2.2 Dose (mātrā)

- **Nirūha** (decoction): **Age-based prasrita schedule.** Start with $\frac{1}{2}$ -**1 prasrita** in infancy, increasing stepwise each year; by adolescence the **upper adult dose ≈ 12 prasrita** (text-standard ladder). Elderly and children receive **mrdu** dosing.
- **Anuvāsana** (oil/ghee): Usually **smaller than Nirūha**, individualized by **koṣṭha (bowel responsiveness), bala (strength), agni**, and disease context; in **Mātrā-basti** (a daily, gentle Anuvāsana variant) the dose is **small, easy to retain** and safe for **bāla-vṛddha-kṛṣa** etc.

Classical caution for success:

“समीक्ष्य दोषाधेशकालसात्याग्निसत्त्वादिवयोवलानि ।
बस्तिः प्रयुक्तो नियतं गुणाय स्यात् सर्वकर्मणि च सिद्धिमन्ति ॥६ ॥”

(Basti succeeds when planned after examining doṣa, drug, habitat, season, satmya, agni, sattva, age, strength, etc.) — *Cāra ka Samhitā, Siddhīsthāna 3/6.*

3. Anuvāsana- and Āsthāpana-opaga Dravya (Adjuncts)

- **Anuvāsana (Snaihika) dravya:** Taila/Ghṛta as the base; **Jīvaniya, Vātahara, Br̥hmaṇa** herbs for cooking/processing (e.g., *Bala, Aśvagandhā, Daśamūla, Rasnā*).
- **Anuvāsanopaga** (helpers): **Saīdhava** (improves spread/penetration), **Madhu** (vehicle, adsorbent), **calming dhūmapāna, uṣṇa-jala**.
- **Āsthāpana/Nirūha dravya:** **Pañca aṅga (mixing order)**—**Madhu** → **Saīdhava** → **Sneha** → **Kalka (paste)** → **Kaṣāya (decoction)**; sometimes **Avapa** (additives like milk, meat soup) as per disease.

4. Indications & Contraindications of Anuvāsana Basti

4.1 Indications

- **Vāta-pradhāna** states with **rukṣatā**, emaciation, post-śodhana convalescence, **udāvarta**, habitual exercise, **pradīpta-agni** (good appetite), **dry gut/krūra-koṣṭha**; sequencing **after Nirūha** in **Yoga-basti** schedules.

4.2 Contraindications / avoid or postpone

- **Āma/ajīrṇa, nava-jvara** (acute fever), **kamalā, pāṇḍu, prameha** in acute derangement, severe **kapha-āvaraṇa, diarrhoea, very full stomach**, or when **retention** is unlikely. (Classical cautions summarized from Siddhi-sthāna and clinical reviews.)

5. Pūrva Karma of Anuvāsana

1. **Assessment:** doṣa-duṣya, āma-nirāma, agni, koṣṭha, bala, vitals.
2. **Diet/day of procedure:** light, warm, non-abhīṣyandī; bladder-bowel emptied.
3. **Local prep:** **Abhyanga** to abdomen-lumbosacral area + mild **svedana** to promote relax-anulomana.
4. **Set-up:** left lateral (Sims') position; sterile instruments, warmed sneha.

6. Pradhāna Karma of Anuvāsana (How to administer)

- Warm **sneha** measured to **mṛdu** dose; lubricate **netra** & anus.
- Insert **1/4 of netra length** under steady guidance; deliver sneha slowly with gentle constant pressure; **ask to retain**.
- Instruct **no strain, no cough**; offer lukewarm water sips if needed.
- Observe for **samyak-anuvāsana**: lightness, soft evacuation later, vāta-anulomana, comfort.

7. Paścāt Karma of Anuvāsana

- **Rest** in a warm, draft-free room; encourage **retention** as long as comfortable.
- **Diet:** light, warm gruels/odana; avoid heavy, fermented, very cold items on the day.
- **Next steps:** In **Yoga-basti** sequences, plan next **Nirūha** the following morning; monitor sleep, appetite, bowel pattern.

8. Indications & Contraindications of Nirūha (Āsthāpana) Basti

8.1 Indications

- **Vāta** and **Vāta-Kapha/Pitta** disorders with **āma/śleṣma/mala accumulation**; abdominal distension, low back-limb pains, constipation with mucus, many **rheumatic/neurologic** conditions when **nirāma**. Classical texts extol Nirūha as superior to simple purgation in Vāta disorders.

8.2 Contraindications

- **Bāla-vṛddha** if debilitated, **pregnancy**, **āma**, **after full meals**, **severe dehydration**, **active bleeding**, **acute fever**, **severe diarrhoea**, immediately after **Vamana/Virechana** without recovery. (Compiled from Siddhi-sthāna guidance.)

9. Pūrva Karma of Nirūha

- **Eligibility:** ensure **nirāma**, assess agni, koṣṭha, bala.
- **Dīpana-Pācana** 1-3 days if needed; **abhyanga + svedana** same morning.
- **Bowel-bladder empty:** counsel, consent, baseline vitals.
- **Prepare Basti-yoga** fresh and warm.

10. Preparation of Basti Dravya (Nirūha)

Mixing order (very important): Madhu → Saindhava → Sneha → Kalka → Kaṣāya; churn well, ensure a **homogeneous, bubble-free** mixture; tie bag firmly; remove air; check flow. **Representative verse-set:**
“...गुडात् पलं द्विविप्रसुतां तु मात्रां स्नेहस्य युक्त्या मधु सैन्धवं च ॥
...प्रक्षिप्य बस्तौ मधितं... निर्वलीकम्...” — C.S. Siddhi 3 (Bastisūtriyam).

Proportions by doṣa (for the composite): Kaṣāya 5 parts; Sneha 1/6 (Pitta); Sneha 1/4 (Vāta ↑); Mātrā less (1/8) in Kapha formats.

11. Pradhāna Karma of Nirūha (Stepwise procedure)

1. **Position:** Left lateral; flex right thigh; support head/shoulder.
2. **Lubricate** anus and **1/4 length** of netra; insert gently along sacral curve; avoid jerks.
3. **Instill** steadily (not too fast/slow).
4. **Withdraw** netra smoothly; **massage abdomen** clockwise to aid distribution.
5. **Urge & evacuation:** Patient sits when urge develops; note **vega (bouts)**, contents, relief.
6. **Complication management:** If **pain, tenesmus, giddiness** → rest, warm fomentation, adjust hydration; if **premature expulsion**—review mixing order/temperature; **no flow**—check kinks/position (classical cautions also describe flow/heat errors).

12. Paścāt Karma of Nirūha

- **After-return** of basti: give suitable **pathya**—e.g., **meat soup (Vāta)**, **milk (Pitta)**, **alkaline/thin gruels (Kapha)** in small quantities, then **odana**.
- **Restraints:** day sleep, cold exposure, sex, heavy exertion, fermented/heavy foods for 1-2 days.
- **Sequencing:** In **Kālā/Yoga-basti**, **Nirūha** in mornings on planned days; **Anuvāsana** on alternate days or

evenings per classical schedules.

13. Nirūha Basti Karmukata (Mode of Action)

- **Classical:** The mixture's **madhu-saindhava-sneha-kalka-kaṣāya** synergy **dislodges (utkleśa)** and **liquefies** morbid **doṣas** in the colon, **anulomana** of **Vāta**, **śodhana** via timely evacuation; **srotas-śodhana** and **agni-dīpana** restore function.
- **Modern correlation:** Rectally administered solutions **influence motility, bile flow, mucosal secretions**, and **systemic absorption** via portal/systemic routes; appropriate composition and technique strongly determine clinical response.

14. Anuvāsana Basti Karmukata

- **Classical:** **Snigdhatā** (unctuousness) **lubricates srotas**, pacifies **Vāta**, softens stool, relieves **udāvarta/colic**, nourishes **dhātu** (bṛhmaṇa), and improves **vyāna-apāna** coordination.
- **Modern correlation:** Retained lipophilic medicaments confer **local anti-spasmodic, anti-inflammatory** action and **systemic trophic** effects via absorption; **dose-retention** governs efficacy. Clinical research also supports **Anuvāsana up-titration** as an alternative to internal snehapāna in selected candidates.

15. Basti Formulations (exam-relevant snapshots)

Formulation (classical cue)	Core composition (memory-pegs)	Key use-notes
Dvīpañcamūlādi Nirūha	Decoction of two Pañcamūla groups ± goat meat soup , with tri-sneha; madhu-saindhava ; appropriate kalka	Pravara Nirūha —broad Vātavyādhī spectrum; strength-promoting; visualise “deep-acting with mamsa-rasa”.
Eraṇḍa-mūla Nirūha	Eraṇḍa-mūla , Rasnā, Ásvagandhā, Guḍūcī, etc., with madhu-saindhava-sneha	Lower-limb-low back pain , flatulence, ānāha, grahanī, mūtra/viṇ-graha —“painful, gassy, stiff” phenotypes.
Kaliṅga-Pāṭhādi Nirūha	Kaṣāya with Triphala + Bilva, gomūtra, kṣāra , taila; kalka of Kaliṅga, Pāṭhā, Mustā	Kapha-pradhāna disorders (coating, heaviness, ālasya), Pāṇḍu, āmadoṣa ; strong lekhana-śodhana.
Mātrā-basti (Anuvāsana)	Small, retainable sneha (taila/ghṛta) often jīvaniya-vātaśāmaka	Daily/gentle Vāta pacification in bāla-vṛddha-kṛśa , athletes, and dry gut ; safe & nourishing when nirāma .

16. Principles of Practice (Clinical mini-protocols)

a) Nirūha in Gridhrasī (Sciatica) & Āmavāta (RA-spectrum)

Gridhrasī (Vāta-Kapha; often rukṣa-stabdha-śūla radiating):

- **Pūrva:** Dīpana-Pācana (Trikaṇu class), **abhyanga + sveda** (rukṣa-uṣṇa).
- **Yogas:** **Eraṇḍa-mūlādi**, **Daśamūla-Rasnā-Guḍūcī**-based Nirūha; add **saindhava-kṣāra** if kapha-āvaraṇa prominent.
- **Course:** **Kālā-basti** or **Yoga-basti** sequences (e.g., 8 or 5-day), alternating **Nirūha** (mornings) with **Anuvāsana** (evenings/alternate days).
- **Targets:** Pain relief, nerve-muscle relaxation, stool/mucus clearance, improved SLR; follow by **Bṛhmaṇa-snehana** and **physiotherapy** drills.

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Āmavāta (Vāta-Āma-Kapha; migratory pain, stiffness, coated tongue):

- **Start only in *nirāma*** (clear tongue, hunger present).
- **Nirūha:** *Kaliṅga-Pāṭhādi*/lekhana-oriented yogas; careful **mātrā** (kapha-laghutā—smaller).
- **Diet:** *Laghu, uṣṇa, āma-nāśaka*; avoid day sleep/cold.
- **Outcomes:** decongestion of colon-kapha, improved ROM, appetite rekindling; then **rasāyana**/śamana support.

b) Anuvāsana in Kaṭī-graha (Lumbago/low back stiffness)

- **Phenotype:** *Vāta-rukṣa-śūla-stabdha*; aggravated by cold, strain, constipation.
- **Anuvasana choice:** *Mātrā-basti* with *Sahacarādi taila* / *Mūlasnehā* (jīvanīya-vātaśāmaka); warm, small-medium dose to retain comfortably.
- **Rhythm:** Daily or alternate-day for 5-7 sittings; on non-basti days add **udvartana-sveda** and **core-hip mobility drills**.
- **Expectations:** early ease of spasm, improved forward bend, softer bowel; maintain with *āhāra-vihāra* (uṣṇa-snigdha diet, avoid jerks, gentle stretches).

Two anchor ślokas to quote in viva

Assessment

Long Essay (Answer any 1, 10 marks)

1. Define **Basti Karma**. Explain **Basti yantra, mātrā**, and the **mixing order** of Nirūha along with **indications/contraindications**. Add the method of **Pūrva-Pradhāna-Paścāt** for both Anuvāsana and Nirūha with two classical ślokas and references.
2. Discuss **Karmukata** of **Nirūha** and **Anuvāsana**, correlating classical concepts with modern physiology. Illustrate with **Gridhrasī** and **Āmavātā** protocols.
3. Write short notes on **Basti formulations** (Dvipañcamūlādi, Eranṭa-mūlādi, Kaliṅga-Pāṭhādi), their **ingredients, indications**, and **rationale**.

Short Answers (Any 5, 5x5 = 25 marks)

1. Enumerate the **five-part mixing order** in Nirūha and state why the order matters.
2. Describe **Basti-netra** features and safety mechanisms (karnikā placement).
3. Write **three indications** and **three contraindications** of **Anuvāsana**.
4. Define **Mātrā-basti** and list **four patient groups** where it is preferred.
5. Outline **Pūrva-Pradhāna-Paścāt** steps of **Nirūha** in sequence.
6. Briefly explain the **dose ladder** of **Nirūha** by age and the principle behind reducing dose in **Kapha** dominance.
7. Write the **dietary plan** immediately after **Nirūha** return and the **don'ts** for the next 24–48 hours.
8. Distinguish **Yoga-basti** and **Kälā-basti** (structure and clinical purpose).

MCOs (10 × 1 = 10 marks)

1. Basti is primarily indicated in: a) **Vāta** b) Pitta c) Kapha d) Rakta-basti
2. The three classical types include: a) Vamana/Virechana/Basti b) **Nirūha/Anuvāsana/Uttara** c) Anulomana/Samśamana/Shodhana d) Mṛdu/Madhyama/Tikṣṇa
3. The **mixing order** in Nirūha starts with: a) Sneha b) Kalka c) **Madhu** d) Kaṣāya
4. **Karṇikā** placement at $\frac{1}{4}$ -aṅgula from tip is to: a) Decorate b) Improve taste c) **Limit entry for safety** d) Increase suction
5. **Mātrā-basti** is: a) Strong purgative b) **Small-dose Anuvāsana for daily use** c) Uttara-basti d) Vamana adjunct



6. A strong **Kapha** patient receives Nirūha with: a) More sneha b) **Less mātrā / more lekhana** c) No saindhava d) Cold dravya
7. **Immediate contraindication** for Anuvāsana: a) Dry constipation b) Vāta insomnia c) **Navā-jvara/ajīrṇa** d) Post-nirūha day
8. **Best posture** during Basti administration: a) Prone b) **Left lateral** c) Right lateral d) Supine
9. A lekhana-type Nirūha useful in Āmavāta is: a) Dvipañcamūlādi b) **Kaliṅga-Pāṭhādi** c) Jīvanīya-siddha ghṛta d) Mātrā-basti
10. After Nirūha, pathya **first** includes: a) Cold curd b) **Light gruels/meat soup/milk as per doṣa** c) Raw salad d) Fried snacks

Answer key: 1-a, 2-b, 3-c, 4-c, 5-b, 6-b, 7-c, 8-b, 9-b, 10-b.

60-Second Revision

- **Basti** = prime Vāta therapy; types **Nirūha/Anuvāsana/Uttara**. **Quote:** “वातोल्वणेऽु... वस्तिरिष्यते...” (A.H. Sū. 19/1-2).
- **Yantra:** netra + putaka; **karṇikā** safety rings; **left lateral**; warm, bubble-free dravya.
- **Nirūha mixing order:** Madhu → Saindhava → Sneha → Kalka → Kaṣāya; adapt **sneha fraction** to doṣa.
- **Doses:** Age-graded prasrita ladder for Nirūha; **Mātrā-basti** for daily gentle Vāta-pacification.
- **Applications:** Gridhrasī/Āmavāta → **Nirūha** (Eraṇḍa-mūla or lekhana yogas). **Kaṭī-graha** → Anuvāsana/Mātrā-basti with vātaśāmaka taila.
- **Success mantra:** Plan after **doṣa-deśa-kāla-satmya-agni-bala** review. **Quote:** “समीक्ष्य दोष... वस्ति: प्रयुक्तो...” (C.S. Siddhi 3/6).