CHARAKA SAMHITA

KALPA & SIDDHISTHANA

Short notes

कल्पस्थान

1. मदन कल्प

Definition of Vamana & Virechana:

तत्र दोषहरणं ऊर्ध्वभागं वमनसंज्ञकम, अधोभागं विरेचनसंज्ञकम ।

Vamana is the therapeutic procedure by which the vitiated dosha of body expelled out through upward passage.

Virechana is the therapeutic procedure by which the vitiated dosha of body expelled out through downward passage.

Since both वमन & विरेचन expel the दोष out of body, both procedures can be termed as विरेचन.

वमन-विरेचन द्रव्याs are उष्ण-तीक्ष्ण-सूक्ष्म-व्यवायी-विकासी in nature.

Vamana dravyas: अग्नि & वायु महाभूत प्रधान Virechana dravyas: जल & पृथ्वी महाभूत प्रधान

600 kalpanas for both Vamana & Virechana has been described comprising of the following dravyas:

For Vamana: मदनफल-जीमूतक-इक्ष्वाकु-धामार्गव-वत्सक(कुटज)-कृतवेधन For Virechana: श्यामा-त्रिवृत-चतुरङ्गुल(आरग्वध)-तिल्वक(लोध्र)-सुधा(स्नृही)-सप्तला-शंखिनी-दन्ती-द्रवन्ती

त्रिविध देश:

जांगल देश - आनुप देश - साधारण देश

Drugs should be collected from Sadharana & Jangala desha.

औषध-संग्रहविधि:

One should preform मंगलाचार, he should be कल्याणवृत्त, श्चि, शुक्लवासा(wearing white clothes), and worship देवता-अश्विनीकुमार-गौ-ब्राह्मण, then collect the Aushadha dravyas, facing East or North direction.

Seasons for collection of parts of medicinal plants:

शाखा-पलाश → वर्षा & वसंत ऋतु मुल → ग्रीष्म & शिशिर ऋत् त्वक-कन्द-क्षीर → शरद ऋत सार → हेमंत ऋत फल-पुष्प → यथा ऋतु (Season during which they appear)

अनुपान - प्रयोग:

वात-प्रकोप → Medicines are given along with सुरा-सौवीरक-तुषोदक-धान्याम्ल-आम्ल दधि पित्त-प्रकोप → with मृद्धिका-आमलकी-मध्-मध्क-परुषक-फाणित-क्षीर कफ-प्रकोप → with मधु-गोमूत्र-कषायाs

मदनफल-संग्रह (Collection):

Madanaphala is considered as the best among vamana-dravyas, because compared to other drugs, it produces very few complications (अल्प उपद्रव).

मदनफल should be collected during the संधि of वसंत-ग्रीष्म ऋतु, and पुष्य, अश्विनी or मृगशिरा नक्षत्र, and मैत्र मुहूर्त.

The fruits which are पक्क, and not काण-हरित-पाण्डु, devoid of कृमि & दुर्गन्ध, should be collected.

वमन विधि:

- 1. Patient is subjected for स्नेहन-स्वेदन for 2-3 days
- 2. One day prior to वमन, patient is advised to consume ग्रामीण-आनूप-जलेचर मांस – क्षीर – दिध – माष – तिल - शाक etc. to aggravate the kapha (कफोत्क्लेश) so that vitiated kapka can be expelled out easily.
- Next day- in the morning, when the food taken in previous night has been digested, patient should perform धार्मिक अनुष्ठान बलि हवन मंगलवाचन प्रायश्चित etc. and advised to consume यवाग् with घृत.
- 4. Quantity (dose) of मदनफलबीज : Amount of madanaphala seeds that is collected within the fist (अंतर्नख मुष्टि) of the patient, or as required is administered for vamana-karma.

- This quantity of madanaphala seeds is soaked in कषाय of यष्टिमधु etc. overnight.
 - Next day it is crushed and filtered, then मधु & सैंधव is added.
- 6. Patient is made to drink this liquid facing east/north.
- 7. वमन has to be continued till पित्त gets expelled.

मध् & सैन्धव प्रयोग:

मधु-सैंधव is added for कफविलयन-छेदन – liquification and expulsion of Kapha.

Here मधु is added to warm kashaya, But **madhu should never be** heated or added to warmed liquid.

In vamana, warmed madhu enters amashaya but **expelled out without digestion**, therefore does not cause any adverse action.

मदनकल्प: Total 133 योगाs of Madanaphala has been described. मदनफलपिप्पलीक्षीर, मदनफलसिद्ध-दुग्ध, मदनफल प्रयोग with कमलपुष्प, मदनफल स्वरस प्रयोग, 20 अवलेह योगाs of मदनफल, मदनफल-वर्ति, मदनफल-मोदक etc.

मदनफल पर्याय (Synonyms):

मदन: करहाटश्च राठ: पिण्डीतक: फलम् । श्वसनश्चेति ॥

2. जीमूतक कल्प

जीमूतक पर्याय (Synonyms): गरागरी च वेणी च तथा स्याद्देवताडकः।

Indications: त्रिदोषघ्न - ज्वर - श्वास - हिक्का

Part used: फल-पुष्प

Dose: 1 शुक्ति (2 कर्ष)

पक्क फल चूर्ण (Powder of dried ripened fruits) of जीमूतक with क्षीर

जीमूतक कल्प: Total **39 योगाs** of Jeemutaka has been described. जीमूतक प्रयोग with क्षीर, with सुरामण्ड, with गुडूच्यादि कषाय, with आरग्वधादि कषाय, मात्रायोग of जीमूतक, जीमूतकसिद्ध घृत etc.

3. इक्ष्वाकु कल्प

इक्ष्वाकु पर्याय (Synonyms):

लम्बाsथ कटुकालाबू: तुम्बी पिण्डफला तथा । इक्ष्वाकु फलिनी चैव ॥

Indications: कास-श्वास-विषविकार-छर्दि-ज्वर etc.

Part used: फल-पुष्प-बीज

Dose: 1 fistful (अंतर्नख मुष्टि) of seeds, powdered and used with

कषाय of यष्टिमध् etc.

इक्ष्वाकु कल्प: Total **45 योगाड** of lkshvaaku has been described. इक्ष्वाकुसिद्ध क्षीर, क्षीरयोग, दिधयोग, मस्तुयोग, मात्रायोग, लेहयोग, मंथयोग, इक्ष्वाकुयुक्त मांसरस प्रयोग etc.

4. धामार्गव कल्प

धामार्गव पर्याय (Synonyms):

कर्कोटकी कोठफला महाजालिनिरेव च। धामार्गवस्य पर्याया राजकोशातकी तथा॥

Indications: गरविष – गुल्मरोग – उदररोग – कास - आमाशयगत वातविकार - कफविकार of कण्ठ & मुख - कफसंचयजन्य रोगाs etc.

Part used: फल-पुष्प-प्रवाल

धामार्गव कल्प : Total **60 योगाs** of Dhamargava has been described. धामार्गव क्षीरयोग, सुरायोग, अन्नयोग, नस्ययोग, मात्रायोग, अवलेहयोग etc.

5. वत्सक कल्प

वत्सक पर्याय (Synonyms): वत्सक: कुटज: शक्रोवृक्षको गिरिमल्लिका I Its seeds are called as इन्द्रयव & कलिंगक.

Types (लिंग भेद) of वत्सक:

पुरुष वत्सक- white flowers, big fruits, and unctuous leaves. स्त्री वत्सक- blackish/ reddish brown flowers, small fruit stalk. Indications: सुकुमार-रक्तपित्त-कफविकार-हृदरोग-ज्वर-वातरक्त-विसर्प

Collection: One should collect पक्क शुष्क फल of Kutaja in fruiting season.

वत्सक (कुटज) कल्प: Total 18 योगाड of Vatsaka has been described. यष्टिमधु आदि कषाय योग, अर्कदुग्धभावित चूर्ण योग, कृशरा योग etc.

6. कृतवेधन कल्प

कृतवेधन पर्याय (Synonyms): क्ष्वेड: कोशातकी चोक्तं मृदंगफलमेव च I

Qualities: अत्यर्थकटु–तीक्ष्ण–उष्ण

Indications: कुष्ठ-पाण्डुरोग-प्लीहावृद्धि-शोथ-गुल्म-गरविष

Part used: फल-पुष्प

कृतवेधन कल्प : Total **355** योगा**s** of Kritavedhana has been described.

With क्षीर – सुरा - क्वाथ, पिच्छा-योग, घृत-योग, अवलेह-योग, with मांसरस, with इक्ष्रस etc.

7. श्यामात्रिवृत् कल्प

From this chapter, various विरेचन द्रव्याs have been described. Among all विरेचन द्रव्याs, the root of त्रिवृत् is considered best.

त्रिवृत् पर्याय (Synonyms):

त्रिभण्डी त्रिवृता चैव श्यामा कूटरणा तथा । सर्वानुभूतिः सुवहा शब्दैः पर्यायवाचकैः॥

Qualities: कषाय-मधुर रस, कटु विपाक, रुक्ष, कफ-पित्तशामक

Indications: सर्वरोगनाशक

Types of त्रिवृत् : the roots of Trivrit are of 2 types-

अरुण & श्याम i.e. reddish & blackish in colour.

- अरुण-वर्ण मूल is the best for virechana-prayoga, especially it is beneficial for बाल, वृद्ध & मृदु कोष्ठ.
- 2. श्याम-वर्ण मूल produces immediate and severe actions, producing मूर्च्छा, धातुक्षय, कण्ठ & हृदय दुर्बलता. But it is beneficial for क्रूरकोष्ठ & बहुदोषावस्था.

त्रिवृत्-संग्रहविधि (Collection): Straight and smooth roots are collected, heartwood is removed (i.e. only outer coverings of roots are collected), dried and stored.

त्रिवृत्-प्रयोगविधि: After स्नेहन-स्वेदन, patient is advised to consume पेया at previous night, then in the early morning of the day of virechana त्रिवृत्-चूर्ण is given.

श्यामात्रिवृत् कल्प: Total 110 योगाड of Trivrit has been described. अम्ल आदि योग, सैंधव आदि योग, गोमूत्र आदि योग, यष्टिमधु आदि योग, क्षीर, अवलेह, पानक आदि योग, मोदक योग, ऋतु अनुसार योगाड etc.

8. चतुरङ्गुल कल्प

चतुरङ्गुल पर्याय (Synonyms):

आरग्वधो राजवृक्षः शम्पाकश्च चतुरङ्गुलः । प्रग्रहः कृतमालश्च कर्णिकारोऽवघातकः॥

Qualities: मृदु-मधुर-शीतल

Indications: बाल-वृद्ध-क्षतक्षीण-सुक्मार-ज्वर-हृदरोग-वातरक्त-उदावर्त etc.

Collection: Best fruits are collected, stored under sand for 7 days. It is then removed and dried under sun. Once dried, the inner pulp part (मज्जा) is collected and stored.

चतुरङ्गुल कल्प:

Total 12 योगाs of Aragvadha has been described.

With द्राक्षारस, सुरामण्ड, कोलसिधु, दिधमण्ड, आमलकीस्वरस, त्रिवृतकषाय, अवलेह, अरिष्ट, घृत etc.

9. तिल्वक कल्प

तिल्वक पर्याय (Synonyms): तिल्वकस्तु मतो लोध्रो बृहत्पत्रस्तिरीटक: I

Collection: The outer bark of roots (मूलत्वक्) of Lodhra is collected, dried and powdered. This powder (चूर्ण) is divided into 3 parts→ 2 parts of that powder is mixed with 6 parts of लोध-कषाय (क्वाथ), and filtered for 21 times. Then the remaining 1 part of powder is given भावना with filtrate (परिस्नावित क्वाथ), and with दशमूल क्वाथ. Now it is dried, powdered, and used as per requirement.

तिल्वक कल्प: Total **16 योगाड** of Tilvaka has been described. With दिध आदि, सुरा आदि, सौवीर, अरिष्ट, कम्पिल्लक, अवलेह, घृत etc.

10. सुधा कल्प

Snuhi is a तीक्ष्ण विरेचन-द्रव्य, hence it should not be used in excessive dose, or in mild vitiation of dosha, or in mridu kostha person.

सुधा पर्याय (Synonyms): स नाम्ना स्नुक् गुडा नन्द सुधा निस्त्रिंशपत्रकः ।

Types: 2 types-

1. सुतीक्ष्ण अल्पकण्टक 2. अल्पतीक्ष्ण बहुकण्टक

Bahukantaka (having numerous thorns) snuhi is considered as best.

Indications: in बलवान रोगी suffering from पाण्डु-उदर-गुल्म-कुष्ठ-दूषीविष-शोथ-मधुमेह-उन्माद etc.

Collection: Snuhi ksheera (latex) should be collected at the end of शिशिर-ऋतु.

सुधा कल्प : Total **20 योगाs** of Snuhi has been described. With सौवीरक, घृत, मांसरस, पानक, अवलेह, यूष, सुरा etc.

11. सप्तलाशंखिनी कल्प

Synonyms- सप्तला पर्याय : सप्तला चर्मसाह्वा च बहुफेनरसा च सा । शंखिनी पर्याय : शंखिनी तिक्तला चैव यवतिक्ताऽक्षिपीडकः ॥

Indications: कफप्रकोप-गुल्म-हृदरोग-कुष्ठ-शोफ-उदर etc.

Part used: Dried roots of सप्तला, and
Dehusked, partially dried fruits of शंखिनी

सप्तलाशंखिनी कल्प : Total **39** योगा**s** of Saptala-Shankhini has been described.

With कषाय, तैल, घृत, मद्य, अवलेह, कम्पिल्लक etc.

12. दन्ती-द्रवन्ती कल्प

Synonyms- दन्ती पर्याय : दन्ती उदुम्बरपर्णी स्यात् निकुम्भोऽथ मुकूलकः द्रवन्ती पर्याय : द्रवन्ती नामतश्चित्रा न्यग्रोधी मुषिकाह्वया ॥

Qualities: both are तीक्ष्ण, उष्ण, आशुकारी, and विकासी.

Collection: The roots of danti & dravanti, thick like tusk (teeth) of elephant, श्यामवर्ण of दन्ती & ताम्रवर्ण of द्रवन्ती, should be collected. Collected roots are coated with madhu & pippali churna, wrapped with kusha, and again coated with mud, then svedana is given. After svedana, roots are dried under sun so that its vikashi guna gets lost.

दन्तीद्रवन्ती कल्प : Total 48 योगाs of Danti-Dravanti has been described.

With दिध, तक्र, सुरामण्ड, अवलेह, इक्षुरस, मांसरस, मोदक, मद्य, क्वाथ, कल्क, आसव, सौवीरक, तुषोदक, कम्पिल्लक etc.

355 yogas for vamana in first 6 chapters & 245 yogas for virechana in last 6 chapters have been described.

Total 600 yogas of 15 dravyas have been described in kalpasthana.

The number of formulations (yogas) are not fixed, but can be made innumerable based on one's intellect.

The potency (वीर्य) of the drug can be modified by various combinations of drugs (संयोग), elimination of certain drugs (विश्लेष), timing of collection of drugs and time of addministrration (काल), and the method of processing (संस्कार).

Based on potency, vamana & virachana dravyas are: तीक्ष्ण-मध्य-मृदु स्नेहपाक- खरपाक → used for अभ्यंग

मध्यपाक → used for स्नेहपान बस्ति

मृदुपाक → used for नस्य

सिद्धिस्थान

1. कल्पना सिद्धि

(Signs of correct & excessive Shodhana)

आभ्यंतर स्नेहपान (Internal administration of ghrita/taila) has to be done for a minimum of 3 days and maximum of 7 days. For मृदु कोष्ठ \rightarrow 3 days; मध्यम कोष्ठ \rightarrow 5 days; क्रूर कोष्ठ \rightarrow 7 days. If the snehapana is continued for more than 7 days, it becomes सात्म्य to the body and hence it will have no therapeutic or cleansing action.

Benefits of Snehana:

स्रेहोsनिलं हन्ति मृद्करोति देहं मलानां विनिहन्ति संगम्॥ Use of sneha normalize vata, softens the body and removes any obstruction to excretion of wastes.

वमन-विरेचन पूर्व आहार : Food that aggravates the Kapha is advised before the day of Vamana, and the food that aggravates Pitta is advised before the day of Virechana for दोषोत्क्लेश.

Once the patient has been subjected to adequate snehana & svedana, he has to be considered for vamana.

After vamana, samsarjana krama is adopted. Once the patient regains his strength, again after snehana & svedana, as when required, virechana drugs can be administered.

शोधन (Vamana & Virechana) is of three types:

- 1. प्रधान शुद्धि
- 2. मध्यम शृद्धि
- 3. अवर शुद्धि

संसर्जन क्रम:

दिन	अन्नकाल	प्रधान शुद्धि	मध्यम शुद्धि	अवर शुद्धि
प्रथम दिन	प्रात:	-	-	-
	सायं	पेया	पेया	पेया
द्वितीय दिन	प्रात:	पेया	पेया	विलेपी
	सायं	पेया	विलेपी	कृताकृत यूष
तृतीय दिन	प्रात:	विलेपी	विलेपी	कृताकृत मांसरस
	सायं	विलेपी	अकृत यूष	सामान्य भोजन
चतुर्थ दिन	प्रात:	विलेपी	कृत यूष	
	सायं	अकृत यूष	अकृत मांसरस	
पंचम दिन	प्रात:	कृत यूष	कृत मांसरस	
	सायं	कृत यूष	सामान्य भोजन	
षष्ठ दिन	प्रात:	अकृत मांसरस		
	सायं	कृत मांसरस		
सप्तम दिन	प्रात:	कृत मांसरस		
	सायं	सामान्य भोजन		

Benefits of samsarjana krama: After shodhana agni of the patient gets diminished. Samsarjana karma strengthens the agni, and patient regains his strength.

Features of proper vamana & virechana:

क्र.स.	शुद्धिज्ञान	प्रधान शुद्धि	मध्यम शुद्धि	अवर शुद्धि
	वमन			
1	वैगिकी	8 वेग	6 वेग	4 वेग
2	मानिकी	2 प्रस्थ	1 ¹ / ₂ प्रस्थ	1 प्रस्थ
3	आन्तिकी	पित्तान्त	पित्तान्त	पित्तान्त
4	लैंगिकी	सम्यग्योग लक्षण	सम्यग्योग लक्षण	सम्यग्योग लक्षण
	विरेचन			
1	वैगिकी	30 वेग	20 वेग	10 वेग
2	मानिकी	4 प्रस्थ	3 प्रस्थ	2 प्रस्थ
3	आन्तिकी	कफान्त	कफान्त	कफान्त
4	लैंगिकी	सम्यग्योग लक्षण	सम्यग्योग लक्षण	सम्यग्योग लक्षण

वमन सम्यग्योग लक्षण:

क्रमात्कफः पित्तमथ अनिलश्च यस्यैति सम्यग्वमितः स इष्टः । हृत्पार्श्वं उर्धेन्द्रिय मार्गशृद्धौ तथा लघुत्वेsपि च लक्ष्यमाणे ॥

Sequential expulsion of kapha first, followed by pitta and finally vata. Dosha are cleaned from the heart, flanks, head, sense organs etc. A feeling of lightness.

वमन हीनयोग (अयोग) लक्षण:

दुश्छर्दिते स्फोटक कोठ कण्डू हृत्खाविशुद्धिर्ग्रुगात्रता च॥ Manifestations of sphota (blisters) and kotha (papules). Itching, persistence of vitiated dosha in heart etc., and a feeling of heaviness.

वमन अतियोग लक्षण :

तृण्मोहमूर्च्छा अनिलकोपनिद्राबलादिहानिर्वमनेति च स्यात्। Excessive thirst, altered consciousness, loss of consciousness, aggravation of vata, sleeplessness, loss of strength etc.

विरेचन सम्यग्योग लक्षण:

स्रोतोविशुद्धीन्द्रियसम्प्रसादौ लघूत्वं ऊर्जोsग्निरनामयत्वम्। प्राप्तिश्च विट् पित्तकफानिलानां सम्यग्विरिक्तस्य भवेतु क्रमेण ॥ Cleansing of srotas, strengthening of indrivas, feeling of lightness, increased agni, body becomes disease free. Sequential expulsion of faeces, pitta, kapha and vata one after other.

विरेचन हीनयोग (अयोग) लक्षण :

स्यात् श्लेष्मपित्तानिल सम्प्रकोपः सादस्तथाsग्नेर्ग्रुरुता प्रतिश्या। तन्द्रा तथा च्छर्दिः अरोचकश्च वातानुलोम्यं न च दुर्विरिक्ते ॥ Aggravation of kapha, pitta and vata. The agni becomes diminished, feeling of heaviness in body, pratishyaya, drowsiness, vomiting, loss of taste, vata does not pass in its normal direction.

विरेचन अतियोग लक्षण :

कफास्रपित्तक्षयजानिलोत्थाः सप्ती अंगमर्द क्लम वेपनाद्या। निद्राबलाभाव तमःप्रवेशाः स उन्माद हिक्काश्च विरेचनेsति ॥

Vata gets aggravated because of the loss of kapha, rakta, and pitta. Loss of sensation, generalized body pain, fatigue, tremors, sleeplessness, loss of strength, darkness before eyes, hiccough, insanity etc.

बस्तिकल्पना :

After Vamana-Virechana, patient is made to adopt dietetic regimen (samsarjana karma) for 7 days, 8th day he is given normal food.

From 9th day he can again be given ghrita internally or anuvasana basti. After the sneha given through anuvana basti comes out. food is given to patient next day in the morning.

If vata is aggravated a lot then on 2nd day again anuvasana is repeated, if vata is less aggravated then on 3rd day anuvasana is repeated, and if pitta & kapha are aggravated then on 5th day anuvasana is repeated.

Every 3rd day of Niruha basti, Anuvasana basti has to be administered.

In कफज विकार → 1 or 3 basti are administered

In पित्तज विकार → 5 or 7 basti

In वातज विकार → 9 or 11 basti

विरामकाल between निरुह & विरेचन:

After virechana, niruha should not be administered before 7 days and similarily after niruha basti has been administered, virechana should not be administered for a minimum period of 7 days.

Contraindications for बृंहण बस्ति :

कृष्ठ-प्रमेह-अरोचक-तन्द्रा-श्लीपद-मेदस्वी(स्थल)-विशोधनीय

Contraindications for निरूह बस्ति :

क्षतक्षीण-शोष-अतिद्र्बलता-मुर्च्छा-मल/दोषाश्रित आय्

बस्ति-प्रधानता:

Vitiated vata vitiates other dosha, carries them to every corner of body and causes many of the diseases. Basti is thre best treatment for normalizing this strong & powerful vata.

निरूहबस्ति सम्यग्योग लक्षण:

प्रसृष्टविण्मूत्रसमीरणत्वं रूचि अग्निवृद्धि आशय लाघवानि। रोगोपशान्तिः प्रकृतिस्तथा च बलं च तत स्यातु सुनिरुढलिंगम् ॥

Adequate and easy expulsion of flatus, faeces and urine. Taste for food, increased agni, lightness in various organs, cure of diseases, dosha and dhatu becoming normal, regaining body strength etc.

निरूहबस्ति हीनयोग (अयोग) लक्षण :

स्याद रुक् शिरोहृदग्दबस्ति लिंगेशोफः प्रतिश्यायविकर्तिके च। हुल्लासिका मारुतमूत्रसंगः श्वासो न सम्यक् च निरुहिते स्युः॥

Pain in head, cardiac, anal and bladder region. Swelling over bladder and genitalia, coryza, cutting pain in anal canal or anal fissure (vikartika), excessive salivation, obstruction to the passage of flatus and urine, dyspnea etc.

निरूहबस्ति अतियोग लक्षण:

लिंगं यदेवातिविरेचितस्य भवेत्तदेवातिनिरुहितस्य ॥

All signs that are mentioned under virechana atiyoga.

अनुवासनबस्ति सम्यग्योग लक्षण:

प्रत्येत्यसक्तं सशकुच्च तैलं रक्तादिबुद्धीन्द्रियसम्प्रसादः। स्वप्नानुवृत्तिर्लघुता बलं च सृष्टाश्च वेगाः स्वनुवासिते स्युः॥

The administered taila carries along with it the faecal material from the rectum and flows out without any difficulty. Strengthening of rakta etc. dhatu, buddhi, and indriya. Sound sleep, lightness, improved strength, the mala-mutra etc. pass out without creating discomfort at their right time.

अनुवासनबस्ति हीनयोग (अयोग) लक्षण :

अधःशरीरोदरबाहपृष्ठपार्श्वेष् रुक् रुक्षखरं च गात्रम् । ग्रहश्च विण्मत्रसमीरणानामसम्यगेतान्यन्वासिते स्यः॥ Pain in the region below umbilicus, abdomen, arms, flanks, and back. Body becomes unctuous, obstruction to the passage of flatus, faeces and urine.

अनुवासनबस्ति अतियोग लक्षण:

हल्लास मोह क्लम साद मुर्च्छा विकर्तिका चात्यनुवासितस्य ॥

Nausea, altered consciousness, exhaustion in spite of not doing work, bodyache, loss of consciousness, cutting pain in anal canal or anal fissure (vikartika).

When the sneha given through anuvasana, stays in the body for 3 याम and then passes out along with waste products, the body is said to be cleaned properly.

कर्म-काल-योग बस्ति:

1. कर्म बस्ति : 30 basti→ 1+12+12+5

1 anuvasana +12 anuvasana & 12 niruha altrernatively+5 anuvasana

2. काल बस्ति : 16 basti→ 1+6+6+3

1 anuvasana + 6 anuvasana & 6 niruha altrernatively + 3 anuvasana

3. योग बस्ति : 8 basti → 1+3+3+1

1 anuvasana + 3 anuvasana & 3 niruha altrernatively + 1 anuvasana

शिरोविरेचन:

Shirovirechana (Nasya-karma) is advised in a person whose body has become cleaned by vamana, virechana, niruha, and anuvasana.

शिरोविरेचन सम्यग्योग लक्षण:

उर:शिरोलाघवमिन्द्रियाच्छ्य स्रोतोविशुद्धिश्च भवेद विशुद्धे ।

Lightness in head and chest, organs function well and the body channels (srotas) get cleansed.

शिरोविरेचन अयोग लक्षण:

गलोपलेप: शिरसो गुरुत्वं निष्ठीवनं चाप्यथ दुर्विरिक्ते ।

Coating in the throat, heaviness in the head and increased salivation.

शिरोविरेचन अतियोग लक्षण:

शिरोSक्षिशंखश्रवणार्तितोदावत्यर्थशुद्धे तिमिरं च पश्येत् ।

Pricking pain in the head, eyes, temple and ears, darkness before the eyes.

परिहार काल :

After panchakarma, पथ्य has to be followed for a period twice that of the number of days required for a procedure.

2. पञ्चकर्मीया सिद्धि (Persons fit/unfit for Panchakarma)

अचिकित्स्य रोगी: (Person unfit for any form for treatment)

चण्ड → who is proud

साहसिक > does activities beyond their capability

भीरु → coward

कृतन्न → does not feel grateful

व्यग् → have unstable mind

सज्जन-वैद्य-नृपतिद्वेष्टा → aversion or aggression towards gentlemen, physicians, and kings

मरणासन्न → who is about to die

अधन्य > who do not enough money to afford medicines etc.

श्रद्धाहीन → who has no honesty or sincerity towards the physician स्शंकित → who has doubt in physician's treatment etc.

अवम्य

(Persons unfit for vamana / Contraindications):

क्षतक्षीण - अतिस्थूल - अतिकृश - बाल - वृद्ध - दुर्बल - श्रान्त - पिपासित - कर्म भार अध्व हत् - उपवास मैथुन अध्ययन व्यायाम चिन्ताप्रसक्त क्षाम - गर्भिणी -सुकुमार – संवृत्तकोष्ठ – दुश्छर्दन – ऊर्ध्वग रक्तपित्त – आस्थापित – अनुवासित – हृदरोग उदावर्त मुत्राघात प्लीहा गुल्म उदर etc.

वम्य (Persons fit for vamana / Indications):

Except those who are unfit, or the persons suffering from कफजविकार - कास - श्वास - पीनस - प्रमेह - कुष्ठ - राजयक्ष्मा - विषपीत -गरपीत - मंदाग्नि – अन्नाजीर्ण – विसुचिका - अलसक – अरोचक – अबिपाक – नवज्वर- गलगण्ड – श्लीपद - अपस्मार – उन्माद etc.

अविरेच्य (Persons unfit for virechana):

सुकुमार - क्षतगुद - मुक्तनाल - अधोग रक्तपित्त - लंघित (उपवासित) - दुर्बल इन्द्रिय – मंदाग्नि – निरूढ (आस्थापित) – कामात्र – अजीर्ण – नवज्वर – मदात्यय – आध्मान – शल्य – अर्दित – अभिहत् – अतिस्निग्ध अतिरुक्ष अतिकूर कोष्ठ – in अवस्य. from क्षतक्षीण to गर्भिणी etc.

विरेच्य (Persons fit for virechana):

Except those who are unfit, or the persons suffering from पित्तजविकार – कुष्ठ – ज्वर – प्रमेह – ऊर्ध्वग रक्तपित्त – भगंदर - उदररोग – अर्श – प्लीहा - गुल्म - अर्बुद - विसुचिका - अलसक - मृत्राघात - कृमिकोष्ठ - विसर्प -पाण्डु – कामला – नेत्रदाह – हृदरोग – व्यंग – विस्फोट – वातरक्त - अपस्मार – उन्माद etc.

अनास्थाप्य (Persons unfit for niruha basti):

अजीर्ण - अतिस्निग्ध - पीतस्नेह - उत्क्लिष्ट दोष - मंदाग्नि - यानक्लान्त -अतिदुर्बल - तृष्णा - क्षुधा - श्रम - अतिकृश - भुक्तभक्त - पीतोदक - विमत -विरिक्त

- श्वास कास हिक्का बद्धोदर छिद्रोदर जलोदर विसूचिका अलसक प्रजाता कुष्ठ प्रमेह etc.

आस्थाप्य (Persons fit for niruha basti):

Except those who are unfit, or the persons suffering from सर्वांगवात – एकांगवात – कुक्षिरोग – अपानवायु पुरीष मूत्र शुक्र संग – बल वर्ण मांस शुक्र क्षय – आध्मान – अंगसुप्ती – कुमिकोष्ठ – उदावर्त – शुद्धातिसार – पर्वभेद – अभिताप – प्लीहा - गुल्म - शुल - हृदरोग - भगंदर - उन्माद - ज्वर- ब्रध्नरोग- शिर:शुल -कर्णशूल - पार्श्वग्रह – पृष्ठग्रह – कटिग्रह - कम्प – आक्षेपक – रज:क्षय - विषमाग्नि - स्फिक् जानु जंघा उरु गुल्फ पाणि प्रपद योनि बाहु अंगुली स्तनान्त दन्त नख पर्व अस्थि शुल (cutting pain in these regions) - शोष - स्तम्भ - आन्त्रकूजन - परिकर्तिका - all वातव्याधिs etc.

अननुवास्य (Persons unfit for anuvasana basti):

Those who are unfit for niruha basti, and especially अभूक्तभक्त -नवज्वर – पाण्डु – कामला – प्रमेह - अर्श – प्रतिश्याय – अरोचक – मंदाग्नि – दुर्बलता - प्लीहोदर - कफोदर - उरुस्तम्भ -विषपीत - गरपीत - कुमिकोष्ठ etc.

अनुवास्य (Persons fit for anuvasana basti):

Those who are fit for niruha basti, and especially रूक्ष - तीक्ष्णाग्नि -केवल वातरोग etc.

अशिरोविरेचनाई (Persons unfit for shirovirechana/nasya):

अजीर्ण - भक्तभक्त - पीतस्रेह - पीतमद्य - पीततोय (पीतोदक) - स्नात शिर: -शिर:स्नात् काम - क्ष्धा - तृष्णा - श्रम - मूर्च्छित - शस्त्र दण्ड हत् - व्यवाय व्यायाम पान क्लान्त - नवज्वर - शोक - विरिक्त - अनुवासित - गर्भिणी -नवप्रतिश्याय etc.

शिरोविरेचनाई (Persons fit for shirovirechana/nasya):

Except those who are unfit, or the persons suffering from शिरोरोग – दन्तरोग - दन्तशूल - दन्तहर्ष - मन्यास्तम्भ - गलग्रह -हनुग्रह - पीनस -गलश्ण्डिका – कण्ठशालुक – अक्षिरोग – शुक्लरोग – तिमिररोग – वर्त्मरोग – व्यंग - उपजिह्निवका - अर्दित - अपतंत्रक - अपतानक - गलगण्ड - स्वरभेद etc.

Time for nasya (नस्य काल):

Nasya should be administered in प्रावृट्, शरद्, and वसंत ऋतु.

During hot season (Summer- ग्रीष्म): Forenoon

During cold season (Winter- शीत): Afternoon

During rainy season (वर्षा): Day when not cloudy

3. बस्तिसूत्रीया सिद्धि

(Principles of administration of basti)

Basti has to be administered keeping in view:

दोष – औषध – देश – काल – सात्म्य- अग्नि – सत्त्व – ओक – वय – बल

बस्तियन्त्र = बस्तिनेत्र + बस्तिपुटक

बस्तिनेत्र (Nozzle used for administration of basti):

Bastinetra is made of- gold, silver, bronze, bone, iron, wood, horn etc.

Bastinetra should have 2 rings at the base for tying bastiputaka.

Measurements of Bastinetra:

Age	Length of	Tip (opening) of
(years)	bastinetra	bastinetra
1-6	6 angula	of the size of green
7	6 ¹ / ₃ angula	gram (mudga)
8	6 ² / ₃ angula	
9	7 angula	
10	7 ¹ / ₃ angula	
11	7 ² / ₃ angula	
12	8 angula	of the size of pea
13	8 ¹ / ₂ angula	
14	9 angula	
15	9 ¹ / ₂ angula	
16	10 angula	
17	10 ¹ / ₂ angula	
18	11 angula	
19	11 ¹ / ₂ angula	
20	12 angula	
Above 20	12 angula	of the size of small
		jujube (badara)

Special features of Bastinetra:

- 1. The base of the nozzle should be of the dimension of the tip of patient's thumb and the front of the nozzle should be as the tip of his little finger.
- 2. Nozzle should be straight and smooth.
- 3. The nozzle has a ring at a distance 1/4th that of total size, from the front and 2 rings at the base.



बस्तिपुटक (Bag or container for medicines):

The bag (container) of medicines to be tied to the nozzle, is generally the **bladder** (बस्ति) of various **animals** like buffalo or sheep etc. If bladder is not available thick cloth can be used.

Features of an ideal basti-putaka:

It should be tough, thin, devoid of veins, free of foul smell, have a colour of kashaya, soft and clean.

तिर्यक् प्रणिधान आदि दोष in बस्ति-प्रयोग:

(Wrong ways of administration of basti)

- 1. If the nozzle is entered obliquely (तिर्यक्), medicines do not enter in a stream.
- 2. If the nozzle is shaken during entry, causes त्रण (fissure in ano).
- 3. If the container is squeezed weakly, medicines do not enter even rectum.
- 4. If squeezed with force, medicines reach high in intestines causing nausea & vomiting.
- 5. If medicines used are cold, no therapeutic action is seen and neither the medicines flow out.
- 6. If medicines used are hot, causes burning sensation and loss of consciousness.
- 7. If medicines are very snigdha, causes lethargy (जड़ता).
- 8. If medicines are very ruksha, causes vata prakopa.
- 9. If medicines are very thin, in less quantity, with inadequate salt, then therapeutic results are not seen.
- 10. If medicines are in excess quantity, causes atiyoga of basti.
- 11. If medicines are too thick, the medicines are excreted with delay making the person weak.
- 12. If salt is excessively used, causes burning sensation and diarrhea.

Quantity of basti dravya:

Age	Qty of Niruha	Qty in Pala
(year)	(निरूहमात्रा)	(पल)
1	¹ / ₂ प्रसृत	1
2	1 प्रसृत	2
3	1 ¹/₂ प्रसृत	3
4	2 प्रसृत	4
5	2 ¹/₂ प्रसृत	5
6	3 प्रसृत	6
7	3 ¹/₂ प्रसृत	7
8	4 प्रसृत	8
9	4 ¹/₂ प्रसृत	9
10	5 प्रसृत	10
11	5 ¹/₂ प्रसृत	11
12	6 प्रसृत	12
13	7 प्रसृत	14
14	8 प्रसृत	16
15	9 प्रसृत	18
16	10 प्रसृत	20
17	11 प्रसृत	22
18	12 प्रसृत	24
18-70	12 प्रसृत	24
>70	10 प्रसृत	20

Process of mixing basti dravya:

Basti dravyas should be mixed in following sequence → मधु + सैन्धव + स्रोह + कल्क + क्वाथ

To prepare basti dravya for administration of niruha basti, first madhu is mixed with saindhava lavana and then sneha dravya like taila or ghrita is mixed homogeneously. To this mixture, kalka is added and mixed, then kwatha is added, mixed and filtered. This is filled in bastiyantra and used as basti dravya.

Position of the patient:

Basti has to be administered with the patient in **left lateral** position.

Quantity of Anuvasana basti → ¼ th of that of Niruha basti.

4. स्नेहव्यापत् सिद्धि

(Management of complications of sneha basti)

षड् व्यापत् of मिथ्यायोग of स्नेहबस्ति (अनुवासन) :

वात पित्त कफ अत्यान्न पुरीषैरावृत्त च । अभक्ते च प्रणीतस्य स्नेहबस्तेः षडापदः॥

Anuvasana basti if not given properly can cause various complications, by withholding or preventing return of the basti dravya:

- 1. वातावृत्त : Medicines can be withheld by aggravated vata, when cold or small quantity of medicine is administerd.
- 2. पितावृत्त : When medicines administered are very hot.
- कफावृत्त : When medicines administered are mridu.
- अति अन्नावृत्त : if dravyas which are guru are administered.
- पुरीषावृत्त : Medicines which are not strong/potent or if administered in small quantity, is encroached by the excess malas and causes complications.
- 6. अभुक्तावस्था : If basti is administered when patient is on empty stomach, medicines reach higher levels causing complications.

Symptoms of complications of improper sneha basti (anuvasana):

S.L.	Complications	Symptoms
1	वातावृत्त	अंगमर्द ज्वर आध्मान शीत स्तम्भ ऊरुपीडन
		पार्श्वरूक्
2	पित्तावृत्त	दाह राग तृष्णा मूर्च्छा तमकश्वास ज्वर
3	कफावृत्त	तंद्रा शीतज्वर आलस्य प्रसेक अरुचि गौरव मूर्च्छा
		ग्लानि
4	अति अन्नावृत्त	छर्दि मूर्च्छा अरुचि ग्लानि शूल निद्रा अंगमर्द
		आमदोष
5	पुरीषावृत्त (मलावृत्त)	विण्मूत्रानिलसंग शूल गौरव आध्मान हृदग्रह
6	अभुक्तवस्था प्रदत्त	Sneha goes upwards (धावत्यूर्ध्व) & is
		expelled out from upper passage

Treatment of above complications:

निरूह बस्ति should be administered to expel the with-held sneha. The basti dravya is prepared on the basis of dosha involvement (e.g. for vatavritta- Snigdha, ushna dravyas, brihatpanchamula, gomutra etc.)

In the evening same dravya is used for anuvasana basti.

मात्रा बस्ति :

Matrabasti is a type of anuvasana, which is having least dose of sneha i.e. hrasva matra. It can be administered any time. Indications: Matrabasti is indicated in those who have become weak (दुर्बल) and emaciated (कृश) due to कर्म व्यायाम भार अध्व मद्यपान स्त्रीप्रसंग etc

5. नेत्रबस्तिव्यापत् सिद्धि (Management of complications due to faultynozzle and container)

(बस्तिनेत्र दोष) Defects in nozzle: 8

ह्रस्वं दीर्घं तन् स्थूलं जीर्णं शिथिलबन्धनम् । पार्श्वछिद्रं तथा वक्रमष्टौ नेत्राणि वर्जयेत॥ 1. ह्रस्व: smaller than ideal size

2. दीर्घ : longer than ideal size

3. तनु : thin / narrower

4. स्थूल: thicker

5. जीर्ण : very old

6. शिथिलबन्धनम् : container is tied loose to the nozzle

7. पार्श्वछिद्र : opening (hole) is on the side of nozzle

8. वक्र: crooked / bend

(बस्तिपुटक दोष) Defects in container: 8

विषममांसल छिद्रस्थूल जालिकवातलाः।

स्निग्धः क्लिन्नश्च तानष्टौ बस्तीन् कर्मसु वर्जयेत्॥

1. विषम : irregular

2. मांसल: fleshy

3. छिद्र : with holes

4. स्थूल : very thick

5. जालिक : multiple minute holes

6. वातला: presence of air inside

7. स्निग्ध : very unctuous

8. क्लिन्न : very slippery or wet

बस्तिदाता दोष (The defects due to improper administration by physician): 10

सवातातिद्वतोत्क्षिप्ततिर्यगुल्लुप्तकस्पिताः । अतिबाह्यगमन्दातिवेगदोषाः प्रणेतृतः ॥

1. सवात: administration of medicine with air

2. अतिद्रुत : fast insertion and removal of nozzle

3. उत्क्षिप्त : nozzle is raised and inserted

4. तिर्यक् : oblique insertion of nozzle

5. उल्लुप्त : medicines are squeezed in intervals

6. कम्पित : insertion of nozzle with trembling hands

7. अति : very deep insertion

8. बाह्यग: inadequate insertion of nozzle

9. मन्द : slow entry of medicine

10. अतिवेग : fast entry (with pressure) of medicines

Complications produced due to above defects:

S.L.	Defects of	Complications	
	bastinetra		
1	ह्रस्व	Medicines don not reach pakwashaya	
2	दीर्घ	Medicines reach very high	
3	तनु	Injury to anal canal	
4	स्थूल	Fissure in ano	
5	जीर्ण	Injury to anal canal	
6	शिथिलबंधन	Leakage of medicines	

7	पार्श्वछिद्र	Leakage
8	वक्र	Leakage and pain

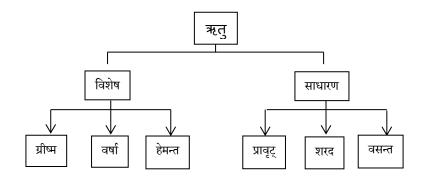
S.L.	Defects of	Complications	
	bastiputaka		
1	विषम	Non uniform administration of medicines	
2	मांसल	Foul smell in medicines	
3	छिद्र	Leakage of medicines	
4	स्थूल	Handling is difficult	
5	जालिक	Leakage of medicines	
6	वातला	Entry of air into intestines	
7	स्निग्ध	Handling is difficult	
8	क्लिन्न	Handling is difficult	

S.L.	Defects of	Complications
	bastidata	
1	सवात	Toda type of shula in udara
2	अतिद्रुत	Pain in anal canal, waist, thighs, stiffness over
3	उत्क्षिप्त	bladder and pain in inguinal region
4	तिर्यक्	Inadequate entry of medicines
5	उल्लुप्त	Pain in chest and head; tiredness in thighs
6	कम्पित	Burning sensation and edema in the anal
		canal

7	अति	Burning and pricking pain, incontinence
8	बाह्यग	Medicines don not reach pakwashaya
9	मन्द	
10	अतिवेग	Medicine reach very high and will not be
		excreted

6. वमनविरेचनव्यापत् सिद्धि (management of complications of vamana & virechana)

For the purpose of shodhana, seasons can be classified into two:



Vishesh ritu are extreme seasons and sadharana ritu are normal seasons. In Pravrit, Sharad and Vasanta ritu patient can undergo shodhana.

Shodhana has to be advised only after adequate snehana and svedana.

When patient is atisnigdha, instead of sneha virechana, ruksha virechana is advised.

When the person is having indigestion (अजीर्ण), vamana and virechana should be avoided. During this condition, vamana drugs cause virechana and virechana drugs cause vamana.

मात्रायुक्त औषध: which does its therapeutic action, gets digested easily, relieves the disease and in meantime does not produce any new disease/ discomfort in the patient.

Causes for medicines to produce complications:

- 1. Administration at wrong time.
- Administration in inadequate dose.
- Administration in excess.
- 4. Administration of old/ expired medicines.
- 5. Not triturating medicines with drugs having same action.
- 6. Medicines are not properly fortified (samskarita).

Complications produced due to inadequate/ excess shodhana aushadha: 10

आध्मानं परिकर्तिकश्च स्नावो हृदगात्रयोग्रीहः। जीवादानं सविभंशः स्तम्भः सोपदवः क्लमः॥ अयोगादतियोगाच्च दशैता व्यापदो मता। प्रेष्यभैष्यज्यवैद्यानां वैगुण्यादातुरस्य च॥

अयोगजन्य :

- 1. आध्मानं : distension of abdomen
- 2. स्राव : discharge
- 3. हृदग्रह : tightness or pain in cardiac region
- 4. गात्रयोग्रीह (अंगग्रह) : pain in the body
- स्तम्भ : stiffness in the body
- 6. उपद्रव : complications
- 7. क्लम : lassitude

अतियोगजन्य :

- 8 परिकर्तिका : fissure in ano
- 9. जीवादान : loss of vital blood (hemorrhage)
- 10. विभ्रंश : rectal prolapse (गुदभ्रंश) / loss of consciousness (संज्ञाभ्रंश)

परिकर्तिका: when strong medicines are administered to a person of guru kostha or mridu kostha, who is weak or in case of amadosha, the medicine expels the excessive dosha with ama and causes cutting type of pain in anal region (fissure in ano) with frothy and bloody stool.

परिकर्तिका चिकित्सा : in case of आमदोष → लंघन-पाचन-रूक्षण in case of कृशशरीर → मधुररसयुक्त पदार्थ सेवन-बृंहण-अम्लमिश्रित लघु आहार

जीवादान: when strong medicines are administered to a person of mridu kostha, with minimally vitiated dosha, then medicine not only excretes mala and dosha, but later on exlpels rakta as well (hemorrhage).

जीवादान चिकित्सा : जीवाभिसन्धान → fresh blood of मृग, गौ, महिष, and अजा should be given to drink.

बस्ति -> दर्भमूल चूर्ण mixed in above blood / क्षीरपाक of प्रियंगु, गम्भारी, बदर, दर्भा, and उशीर / शीत पिच्छाबस्ति

Complications produced when shodhana drugs are administered without subjecting the person to snehana & svedana:

1. विभ्रंश : rectal prolapse/ loss of consciousness

2. शोथ : edema

3. हिक्का : hiccough

4. तम: darkness before the eyes

5. पिण्डिकोद्वेष्टन : cramps in muscles

6. कण्डू : itching

7. ऊरु साद: tiredness of thighs

8. विवर्ण : discolouration

7. बस्ति व्यापत् सिद्धि

(Management of complications of basti)

The complications produced by improper administration of niruha basti: 12

नातियोगो क्लमाध्माने हिक्क हृत्प्राप्तिरुध्वता । प्रवाहिका शिरोंगार्तिः परिकर्तः परिस्रवः॥

1. अयोग : signs of inadequate niruha

2. अतियोग : signs of excess niruha

3. क्लम : exhaustion/ lassitude

4. आध्मान : distension

5. हिक्का : hiccough

6. हत्प्राप्ति : pressure over cardiac region

7. ऊर्ध्वगमन : upward movement

8. प्रवाहिका: dysentery

9. शिर:शूल : headache

10. अंगवेदना : bodyache

11. परिकर्तिका: fissure in ano

12. परिस्राव : discharge of pitta/ rakta

तीक्ष्ण बस्ति : Basti becomes strong when गोमूत्र, पीलु, चित्रक, सैंधव,

यवक्षार etc. are added to other basti dravya.

मृदु बस्ति : Basti becomes strong when क्षीर, मधुर and शीत द्रव्याs are added to other basti dravya.

Basti administered to pakwashaya, removes vitiated dosha from whole body.

8. प्रासृतयोगीया सिद्धि

(Management of conditions with basti of 1 prasrita quantity)

To overcome various basti vyapat, the medicaments are used in prasrita quantity.

1 प्रासृत = 2 पल

Various basti in prasrita pramana, have been described for those who are delicate and exhausted due to work:

- 1. चतुर्प्रासृतिक बस्ति : strengthens shukra
- पंचप्रासृतिक बस्ति : pacifies vata, increases strength and lustre
- पंचितक्त प्रासृतिक बस्ति : diabetes, skin disease etc.
- षडप्रासृतिक बस्ति : krimiroga (worm infestations)
- 5. सप्तप्रासृतिक बस्ति : strengthens libido
- 6. अष्टप्रासृतिक बस्ति : pacifies vata

9. त्रिमर्मीया सिद्धि (Management of diseases affecting

Three vital structures)

त्रिमर्म: हृदय-शिर-बस्ति

प्राण or life resides in all these vital sites. Hence every effort should be made to protect these marmas from external trauma or from being diseased by vitiated dosh.

अपतंत्रक / अपतानक :

The aggravated vata localized in hridaya, causing pain in the chest, head and temple region; convulsive movement of limbs etc.; loss of consciousness, dyspnea and makes the body bent like a bow. The person produces feeble, unclear sound like that of a pigeon. There is remission and exacerbation based on vitiation of vata.

अपतंत्रक चिकित्सा : तीक्ष्ण प्रधमन नस्य

तन्द्रा :

Due to various etiological factors, the aggravated vata, in turn displaces kapha, carries it to hridaya, and obstructing the chetanavaha srotas causes tandra.

Diseases which affect basti (urinary bladder): 13

1. मूत्रौकसाद : reddish yellowish thick urination

2. मूत्रजठर : retention of urine- pain in lower abdomen

मुत्रकुच्छु : difficult & painful urination (i.e. dysuria)

4. मुत्रोत्संग : retention of urine- dribbling urination

5. मृत्रक्षय : less urination (or anuria)

मुत्रातीत : dribbling urination

7. वाताष्ठीला : distension

8. वातबस्ति : severe pain in bladder

9. उष्णवात : burning urination & reddish yellowish urine

10. वातकुण्डलिका : retention of urine- pain, stiffness, heaviness etc.

11. रक्तग्रंथि : tumor in urinary tract

12. विडविघात: urine having foul smell like faeces

13. बस्तिकुण्डल : displacement of bladder- distension

उत्तरबस्ति :

Medicaments given per urethra / per vagina.

It is effective in diseases of bladder, prolapse of uterus, severe pain in yoni, menstrual disturbance etc.

In females, uttarabastinetra (nozzle) should be 10 angula long. It should be inserted 4 angula within vagina, 2 angula within urethra, only 1 angula in young girls.

शंखक रोग :

Vitiated rakta, pitta and vata produce a swelling in the temple region associated with severe pain, burning sensation and redness. It causes death within three days.

शंखक चिकित्सा : शिरोविरेचन-परिसेचन-विसर्पनाशक चिकित्सा

अर्धावभेदक :

Aggravated vata independently or along with kapha causes severe pain in one half of head region especially over neck, eyebrow, temple, ears, eyes, and forehead. The pain is so sever ethat the patient feels as though head is being cut into two by sharp instrument.

अर्धावभेदक चिकित्सा : चतुर्स्नेह प्रयोग-शिरोविरेचन-कायविरेचन-नाडीस्वेद-प्रपराणघत पान-अनुवासन&निरूहबस्ति-शिरोबस्ति

सुर्यावर्त रोग:

Vitiated rakta and vata vitiate the mastishka, causing pain in the head. This pain is related to the sun i.e. as the day begins, the pain begins, gradually increases as the day passes, reaches maximum severity at noon and then gradually decrease in the afternoon.

सूर्यावर्त चिकित्सा: उत्तरभक्त घृतपान- शिरोविरेचन-कायविरेचन-उपनाह-सेचन

अनंतवात: The vitiated tridosha localized in the posterior aspect of neck and cause severe pain in the neck, over eyes, brows and temple regions. It is associated with tremors in the neck region,

disease of eye and locked jaw.

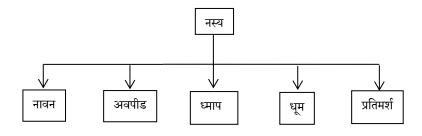
अनंतवात चिकित्सा : सिरामोक्ष (सिराव्यध रक्तमोक्षण)-सूर्यावर्तनाशक चिकित्सा

शिरःकम्प चिकित्सा : वातघ्न औषध सिद्ध स्नेह-स्वेद & कट्फलत्वक चूर्ण नस्य

नस्य कर्म :

Medicine administered through nostrils is known as nasya-karma. A wise physician should use nasya karma to treat all types shirogata rogas.

Types:



नावन नस्य: medicated oil is instilled in nostrils.

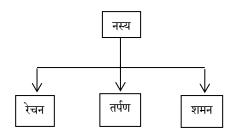
अवपीडन नस्य : medicament is squeezed from kalka of dravya

ध्मापन नस्य: medicated powder is inhaled through nostrils

धूम नस्य: medicated smoke is inhaled through nostrils

प्रतिमर्श नस्य: medicated oil of dose of 2 bindu

On the basis of mode of action (कार्मुकता):



10. बस्ति सिद्धि (Therapeutic applications of basti)

Basti is considered as a very important therapy as:

- 1. It causes early cleansing of intestines, without complications.
- 2. It causes early depletion, when apatarpana drugs are used.
- 3. It causes early nourishment, when tarpana drugs are used.
- 4. It does not produce any life threatening complications.

There are 3 varieties of basti:

1. अनुवासन, 2. निरूह, and 3. उत्तरबस्ति

Basti can be used for the purpose of शोधन, बृंहण, वाजीकरण etc.

11. फलमात्रा सिद्धि

(Dose of Fruits used for shodhana preparations)

According to Punarvasu Atreya:

- Jeemutaka is best for skin diseases
- Ikshvaku is best for urinary diseases (prameha)
- Kutaja is best for diseases of heart
- Dhamargava is best for anemia (pandu)
- Kritavedhana is best for ascites (jalodara)
- Madanaphala is best for all the diseases.

सदा**ऽ**त्र : Persons who remain diseased throughout life are called as सदा-आतुर.

- वेदाध्ययनशील कर्मकाण्डी : People who are continuously pursuing vedic knowledge.
- राजसेवक: People who are responsible for taking care of kings.
- वैश्या: Prostitutes.
- पण्यजीवी: Businessmen /Shopkeepers. iv.

12. उत्तरबस्ति सिद्धि

(Management of complications after basti)

अष्ट महादोषकर भाव :

In order to stay healthy throughout life, a person should avoid the following 8, after shodhana and samsarjana:

उच्चैर्भाष्यं रथक्षोभं अतिचंक्रमण आसने। अजीर्णाहितभोज्ये च दिवास्वप्नं समैथुनम्॥ 1. उच्चैर्भाष्य : Speaking loudly

2. रथक्षोभ : Riding vehicles

3. अतिचंक्रमण : Walking for long distance

4. आसन : Sitting for long hours in one position

5. अजीर्ण : Having food during indigestion

अहितभोजन : Having unwholesome food

7. दिवास्वप्न : Sleeping during day time

8. मैथुन : Having sexual intercourse during or just after panchakarma therapy

अष्ट महादोषकरभावजन्य रोग & चिकित्सा:

भाव	रोग	चिकित्सा
उच्च भाषण	शिरस्ताप-शंखकर्णनिस्तोद-श्रोतोपरोध-	वातहर चिकित्सा → अभ्यंग
	मुखतालुकण्ठशोष-तृष्णा-ज्वर-श्वास	स्वेद नस्य घृतपान मांसरस
रथक्षोभ	सन्धिशैथिल्य-हनुनासाकर्णशिरःशूल-	वातहर चिकित्सा → अभ्यंग
	कुक्षिक्षोभ-आन्त्रकूजन-आध्मान-पादशोफ	स्वेद नस्य घृतपान मांसरस
अति चंक्रमण	पादजंघोरु जानु वंक्षण श्रोणी पृष्ठशूल-	निदान परिवर्जन
	सक्थिसदन-अंगमर्द-अंसाभिताप-श्वास	
अति आसन	रथक्षोभज-स्फिक्पार्श्ववंक्षणकटिपृष्ठवेदना	निदान परिवर्जन
अजीर्ण भोजन	मुखशोष-आध्मान-शूल-तृष्णा-आमविष	वमन रूक्षस्वेद दीपनपाचन
or अध्यशन		
अहित भोजन	अरुचि-दुर्बलता-ग्रहणी-अर्श-वैवर्ण्य-कण्डू	दोषानुसार चिकित्सा
or विषमाशन		
दिवास्वप्न	अरुचि-अविपाक-अग्निमांद्य-तन्द्रा-निद्रा-	कफहर क्रिया → धूमपान
	जाड्य-कण्डू-पामा-अंगमर्द-दौर्बल्य	लंघन वमन व्यायाम रूक्षण
मैथुन	शीघ्र बलनाश-शिरोबस्तिगुदमेढूवंक्षणोरु	जीवनीयगण द्रव्यसिद्ध दुग्ध-
	जानुजंघापादशूल-कास-श्वास-शुक्रविसर्ग	वातहर क्रिया-यापनबस्ति

यापन बस्ति :

यापनाश्च बस्तयः सर्वकालं देयाः → can be given during any time. Examples: मुस्तादि यापनबस्ति, एरण्डमूलादि यापनबस्ति, सहचरादि यापनबस्ति, बलादि यापनबस्ति, द्विपंचमूलादि यापनबस्ति, ह्रस्वपंचमूलादि यापनबस्ति, हरवपंचमूलादि यापनबस्ति, हरवपंचमूलादि यापनबस्ति

तन्त्र युक्ति :

Tantrayuktis help in expanding those details which have been described briefly (does प्रबोधन) and thus helps throw light on the deeper or broader meaning of the context (प्रकाशन).

- 1. अधिकरण → scope of topic
- 2. योग → rational thinking
- 3. हेत्वार्थ → extension of argument
- 4. पदार्थ → import of words
- 5. प्रदेश → extension of past to present
- 6. उद्देश → concise statement
- 7. निर्देश → detailed statement
- 8. वाक्यशेष → filling of ellipsis
- 9. प्रयोजन → purpose
- 10. उपदेश → instruction
- 11. अपदेश → adducing a reason
- 12. अतिदेश → extension of present to future
- 13. अर्थापत्ति → implication

- 14. निर्णय → conclusion
- 15. प्रसंग → contextual restatement
- 16. एकांत → definitive statement
- 17. अनेकांत → non-definitive statement
- 18. अपवर्ग → exceptional statement
- 19. विपर्यय → contrary statement
- 20. पूरवपक्ष → statement of objection
- 21. विधान → systematic interpretation
- 22. अनुमत → concession
- 23. व्याख्यान → explanation
- 24. संशय → doubt
- 25. अतीतवेक्ष → retrospective reference
- 26. अनागतावेक्ष → prospective reference
- 27. स्वसंज्ञा → technical terms
- 28. ऊह्य → deduction
- 29. समुच्चया → collection
- 30. निदर्शन → illustration
- 31. निर्वचन → derivative definition
- 32. सन्नियोग → injunction
- 33. विकल्प → alternative statement
- 34. प्रत्युत्सार →rational refutation
- 35. उद्धार → reaffirmation
- 36. संभव → source of origin