



Role Of *Krimighna Basti* On *Purishaj Krimi*: A Case Study

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Abstract-

Krimi is a very common health issue in a Pediatric age group and is widely prevalent in areas of low environmental quality and people of low nutritional status. In India, the problem is likely to be more common because of poor hygiene, lack of awareness, illiteracy, poverty and variety of allied factors. *Krimi* is an important disease described in ayurvedic science and is described in detail with respect to its etiology, clinical features and treatment. The term *krimi* is used to denote tiny organisms which reside in human body. Concept of *krimi* and their relation in the development of disease is described in almost all ayurvedic samhita. Acharyas also describe *krimi* as an etiological factor in various diseases. 8 year old female child, having complaints of abdominal pain, loose motions, vomiting, perianal itching associated with worms in stool was treated with *krimighna basti* and changes were noted in abdomen pain, perianal itching, loose motions and genral appearance of the patient. The details of the findings are presented in this study report.

Key words: *Krimi*, *Krimighna basti*, worm infestation etc

Introduction-

Helminth infestation contributes to significant disease burden in children particularly in under privileged and in developing countries, of which *Ascaris lumbricoides* is the most common which affects 1/4th to 1/3rd of world's population. Because of habits of children directly or indirectly they consume soil/mud and are commonly more heavily affected than adults. Intestinal worm infestation results in impaired nutrition. Many people neglect this condition as most of the times it may be asymptomatic. It may be associated with malnutrition, iron deficiency anaemia, repeated gastrointestinal disturbances and upper respiratory tract infection. So proper screening is needed. This condition should be taken seriously because *Ascaris* infection contributes significantly to the burden of abdominal surgical

emergencies. *Krumi* (worms) possess ability to breed in human intestine with the help of food and blood. *Krumi* are of various types on the basis of their origin; *Kaphaj Krimi*, *Raktaj krimi* & *Pureeshaj Krimi*. *Hetu* of *Krumi Roga* mainly involve *Ahara Sambandi Hetu* and *Vihara Sambandi Hetu*. *Ahara Sambandi Hetu* includes consumption of foods that leads to *Kapha Utkleshan* like; jaggery, sesamum, meat, unctuous, sweet & cold materials etc. *Vihara Sambandi Hetu* involves; *Divaswapa*, *Asana*, *Avyayama* & disturbed life style patterns. *Jwara*, *Vivarnata*, *Shoola*, *Hridroga*, *Bhrama*, *Bhaktadwasha*, *Atisara*,

Sadana, *Chhardi* and *Shwasa* are the main *Krimi Lakshana* (symptoms manifested in worm infections). The poor socioeconomic conditions, lack of personal hygiene, agricultural factors, lack of awareness and *apathya aahara-vihara* are the main causative factors of *Purishaja Krimi* infection. Ayurveda describes use of contemporary medicine along with preventive measures as a treatment protocol for the management of *Purishaja Krimi* infection. The *shodhana* therapy (purification methods) along with extraction procedure may also help in the management of *Purishaja Krimi* infection. According to Acharya Charaka, each *krimi* have its own specific habitat. *Bahya krimi* are usually found on the external part of the body such as hair, over the scalp and body, beard, eyelashes or clothes. *Raktaja krimi* dwells in the vessels carrying blood. *Shleshmaja krimi* usually resides in *aamashaya* and they have tendency to move upward or downward along the intestinal tract. *Purishaja Krimi* are seen in *pakwashaya* which usually migrates downward towards the rectum and anus. In rare Occasions they may travel towards the stomach resulting in fecal smelled belching and breathing.

Dosha – *kapha* predominant *tridosha*,

Dushya – *rasa, rakta*,

Strotas – *Mahastrotasa, purishvaha strotas, raktavaha strotas*

Adhithana – *Pakwashaya*. According to Acharya Sushrut the vitiation of *kapha* and *pitta dosha* by any of the *hetu* of *krimiroga*, which results in the production of *krimi*. Most of the factors described in the etiology of *krimiroga* leads to *agnimandya* and *aama uthpatti* which works as the principle factor in the process of *samprapti* and leads to the production of *krimi*. **Rupa of purishaja krimiroga**-*Vidbheda, udarshoola, chhardi, parushata, gudkandu, bhaktdwasha*.

Chikitsa

- *Apakarshana Chikitsa*
- *Prakruti Vighata Chikitsa*
- *Nidana Parivarjana Chikitsa*
- **Apakarshana Chikitsa (Extraction of the Krimi) by following methods:**
 1. *Hasta / Yantra* (manual extraction): *Krimi* can be extracted manually using *Yantras* like; *samdamsa* etc.
 2. *Bheshaja Apakarshana* (therapeutic extraction): This method involves the use of *Shodhana* therapies alone or along with extraction procedure to cause forceful extraction of *Krimi*. These *Shodhana* therapies may involve *Virechana, Asthapana basti & ShiroVirechana*.
- **Prakruti Vighata:** It refers to creating an unfavourable environment or a medium which is exactly opposite to the habitat of the infested region (intestinal lumen).
- **Nidana Parivarjana:** Along with the termination of worms and therapeutic administration, avoidance of causative factors has also been emphasized in Ayurveda. Potent anti-helminthic drugs are available in the market, which has the risk of producing gastrointestinal disturbances, nausea and vomiting. There are limitations in the contemporary science to provide a comprehensive management for *krimi* without any side effects. Many ayurvedic anti-helminthic formulations mentioned in the classics are easily available and easy to administrate. Hence in this present case *Apakarshan* method is used for the study.

Case discussion- An 8 year old female patient was apparently healthy before 1 year, she gradually developed *Gudkandu udarshoola, chardi, vidbheda, bhaktdwasha*.

Past history- Same complaints present since 1 year Recurrent upper respiratory tract infection, unable to gain weight

No H/O any major illness

No H/O any drug allergy or any previous surgery

On examination-

Udarshoola+ Chardi 2-3 vega/day

Drava malapravrutti 5-7 vega/day with *krumi Gudkandu++ Bhaktdvesha*

Patches on the face and hands

RS-clear

CVS-NAD

P/A-pain over umbilical region,

No signs of dehydration

Urine –Normal

Stool-*dravamal* with *krimi*

Anal examination- mild redness over anal region -*kandu++*

Diet history- Non –veg diet 2-3 times/week Diet includes Bakery products, cake, etc. **Past treatment history-** T/t taken from private hospital Albendazole, Oflomac-m,for 2-3 times in last 6 month.

Type of study: A case study

MATERIAL AND METHODS

Vidaga churna, shigru beej churna, bhunimba churnna, haridra churna Kwatha+Karanj taila+Makshik+Lavana

Criteria for assessment-

Sr.no.	Symptoms	Gradation		
		0	1	2
1	<i>Vidbheda(dravamalpravrutti)</i>	Normal stool	3-5 stool/day	5-7 Stool/day
2	<i>Udarshoola</i> (pain in abdomen)	Absent	Present	
3	<i>Gudkandu</i> (perianal itching)	Absent	<i>Kandu+</i>	<i>Kandu++</i>
4	<i>Parushata</i> (patches on skin)	Absent(normal skin)	Mild (on face)	Moderate (half of the body)
5	<i>Chhardi</i> (vomiting)	Absent	3-5 vega/day	5-7 vega/day
6	<i>Bhaktdvesha</i> (loss of appetite)	Absent	Present	

Pathya

- *Rasa – Tikta & Kashay*
- *Dugdha – Ghrita & Dugdha.*
- *Drava – Tila Taila, Kaanjika, Tushodaka,*
- *Gomootra, Suraa & Sauveeraka.,madhu*
- *Phala – Apakva Kadalee, Pakva Taalaphala & Nimbuka Rasa.*
- *Kritaanna – Taambula, Aasthaapana Basti, Dhoopa, Abhyanaga & Kaphaghna*

Apathya

- Rasa – Amla & Madhura
- Guna – Drava
- Mamsa – Mamsa
- Dugdha – Dugdha, Dadhi & Ghrita
- Phala – Badara

DISCUSSION- In this present case on the basis of *hetu* and *lakshana* such as *vidbheda*, *gudkandu*, *chhardi*, *bhaktdwesha*, *udarshoola* this case was diagnosed as a *purishaja krimi*. *Purishaja Krimi* are *kaphapitta* predominant and resides in *pakwashaya* which usually migrate downward towards the rectum and anus, so *apakarshan* therapy was selected for the study. *Apakarshana* as the name indicates it refers to the extraction of *krimi* by two different ways, one is *hasta/yantra* another way is *bheshaja apakarshana*. As *purishaja krimi* are *kaphapitta* predominant and are in *pakwashaya* so *basti* was selected for the study. In this present case study patients bala is sukumar, mrudu kostha and *kaphapitta* dominant hence decided to give *Krimighna basti* for 5 days. Probable mode of action of *Krimighna basti* is a technique of eliminating the *Krumi* from large intestine. The decoction of drug is introduced through anus with *BastiNetra*. In this particular process the active principles in the medicine will directly reach the *Krimi* whereas in oral administration the drug has to under go the digestive phases, and hence becomes weak in directly attacking the organisms. In *kaphapitta* dominant disease three or five number of *basti* required for removal of *dosha* from its *sthana*. The contents of *Krimighna basti* has properties of *katu*, *tikta*, *ushna veerya*, and *krimighna* hence five *basti* and according to patient bala, agni and kostha dose 250ml of *Krimighna basti* was decided.

Observations of *Krimighna basti*-

Day	<i>Bastidravya matra</i>	<i>Pratyagaman content</i>
1	250ml	<i>Kwatha</i> +stool+worms4-5with abdominal pain
2	250ml	<i>Kwatha</i> +stool+worms4-5with abdominal pain
3	250ml	<i>Kwatha</i> +stool+worms2-3with abdominal pain
4	250ml	<i>Kwatha</i> +stool+worms2-3with abdominal pain
5	250ml	<i>Kwatha</i> +stool+worms1-2with abdominal pain
+6	250ml	<i>Kwatha</i> +stool+worms1-2with abdominal pain

Probable mode of action of contents of *Krimighna basti*-

- 1) *Vidanga*- it has *tikta* and *katu* rasa and have *vipaka katu* and *virya ushna* with those properties *vidanga* helps to alleviate *kapha dosha* which is responsible for production of *krimi* in body and also according to some acharyas it is included in *Krimighna gana*, so that it has property of killing *krimis*.
- 2) *Shigru beej*- it has *tikta* and *katu* rasa and have *vipaka katu* and *virya ushna* with those properties *shigru beej* helps to alleviate *kapha dosha* which is responsible for production of *krimi* in body and also according to some acharyas it is included in *Krimighna gana*, so that it has property of killing *krimis*.
- 3) *Haridra*- it has *tikta* and *katu* rasa and have *vipaka katu* and *virya ushna* with those properties *Haridra* helps to alleviate *kapha dosha* which is responsible for production of *krimi*

in body and also according to some acharyas it is included in *Krimighna gana*, so that it has property of killing *krimis*

- 4) *Bhunimba*- it has *tikta* and *katu* rasa and have *vipaka katu* and *virya ushna* with those properties *Bhunimba* helps to alleviate *kapha dosha* which is responsible for production of *krimi* in body and also according to some acharyas it is included in *Krimighna gana*, so that it has property of killing *krimis*
- 5) *Karanja tail*- *Karanja* has properties of *katu*, *tikta*, *kashaya*, *ushna veerya* and *krimighna* in nature. it relives *kapha pitta dosha*, abdominal flatulence, and *krimi* from the *pakwashaya*

Observation of parameters during therapy

Sr.no	Parameters	Before treatment	Review after Basti	Follow up after 10 days
1	<i>Vidbheda</i>	5-7 stools/day	Normal stool	Normal stool
2	<i>Udarshoola</i>	Present	Present	Absent
3	<i>Gudakandu</i>	<i>Kandu+</i>	<i>Kandu+</i>	Absent
6	<i>Parushata</i>	moderate	Moderate	Mild
5	<i>Chhardi</i>	3-5 <i>vega</i> /day	Absent	Absent
6	<i>Bhaktadwasha</i>	Present	Absent	Absent

CONCLUSION –

This study suggested that, *Krimighna basti* showed significant result after treatment in *vidbheda*, *udarshoola*, *chardi*, *gudkandu*, *bhaktadwasha*, and *parushata* and efficacy of the treatment was highly significant even during follow up. In this case study patient completed the full course of treatment without any adverse reaction to drug and therapy. Hence, it can be suggested that *Krimighna basti* can be used in patients suffering from *purishaja krimi*.

BIBLIOGRAPHY

1. P. Ghai, Essential Paediatrics, Editors O. P. Ghai, Vinod K Paul, Aravind Bagga, CBS Publishers and distributors, New Delhi, 7th edition-2009, 9th: 246.
2. <http://emedicine.medscape.com/article/788398-overview> updated, may 2005.
3. Vaidya YT, editor. Charaka Samhita by Agnivesha, Sutra Sthana; Arthedashamahamuliyam Adhyayam: Chapter 30/28. Varanasi: Chaukhambha Prakashan, Reprint, 2009; 189.
4. Vaidya YT, editor. Sushruta Samhita of Sushruta; Uttara Tantram; Krimirogaprathishedham Adhyayam: Chapter 54, Verse 7. Varanasi: Chaukhambha Surbharati Prakashan, Reprint, 2003; 773.
5. Vaidya YT, editor. Charaka Samhita by Agnivesha, Vimana Sthana; Vyadhitarupiyam Adhyayam Chapter 7, Verse 10. Varanasi: Chaukhambha Prakashan, Reprint, 2009; 258(11): 257.
6. Vaidya YT, editor. Sushruta Samhita of Sushruta, O.Uttara Tantram; Krimirogaprathishedham Adhyayam: Chapter 54, Verse 18. Varanasi: Chaukhambha Surbharati Prakashan, Reprint, 2003; 773.
7. Vaidya YT, editor. Charaka Samhita by Agnivesha, Sutra Sthana Shadvirechanashatashritani Adhyayam: Chapter 4/11. Varanasi: Chaukhambha Prakashan, Reprint, 2009; 33.
8. Kliegman RM (edi), Nelson textbook of paediatrics, Ed. New Delhi: Elsevier, a division of 18th Elsevier india private Limited; Reprint, 2008; 1155-1160, 896-907: 1064-10.

9. ShastriSatyanarayana, Charakasamhita, reprint, ChaukhambhaBharati Academy, Varanasi, Viman Sthana, 2009; 7/31: 735.
10. Vaidya YT, editor. Sushruta Samhita of Sushruta, Uttara Tantram; Krimirogapratishedham Adhyayam: Chapter 54, Verse 18. Varanasi: Chaukhambha Surbharati Prakashan, Reprint, 2003; 773.
11. K. D Tripathi, Essentials of medical pharmacology, Jaypee brothers Medical Publishers, New Delhi, 6th edition, Reprinted in 2010, 61st chapter Antihelminthic drugs, 810.
12. Bhavprakash of bhavmishra volume 1 comentry by dr.bulsu sitaram chaukhmbha prakashan Varanasi, edition and reprint 2012.
13. <http://www.ozonebitech.com> karanja oil.

