



A CLINICAL STUDY TO STANDARDISE DOSE OF UTTARA BASTI WITH ASHWAGANDHADI GHRITA IN PREMATURE EJACULATION

¹Kumar Pankaj, ²Sadh Shubham and ³Lohith, B.A.

¹PG Scholar Department of Panchkarma

²PG Scholar Department of Manasa roga

³Associate professor & HOD; Department of Panchakarma, SDM College of Ayurveda & Hospital, Hassan, (Karnataka) India

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ABSTRACT

According to caraka samhita uttara basti dosage is Ardha pala matra of sneha i.e.25ml and According to sushruta samhita uttara basti dosage is prakuncha which is equal to one pala i.e.50ml of sneha. 12 Male patients suffering from symptoms of premature ejaculation (Shukragata vata) were selected from O.P.D and I.P.D. of Sri Dharmasthala Manjatheshwara College of Ayurveda and Hospital, Hassan, fulfilling inclusion and exclusion criteria. On clinical study, it was found that the Uttara basti dosage i.e. 25/50 ml with Ashwagandhadi ghrita was found to be statistically non significant in improving the subjective and objective criteria for Premature ejaculation.

*Corresponding author

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INTRODUCTION

Shukragata vata is a clinical condition explained in Ayurvedic classics. It comes under the gatatva concept of vata characterized by a group of clinical presentations, which includes ejaculatory as well as seminal impairments. Premature ejaculation is a psychosexual orgasmic disorder which dealt in Ayurveda under shukragata vata. Ayurveda believes that the management of prakupita vata which leads to sukragatavata. Premature ejaculation includes snehana chikitsa (Kashinatha Shastri, 2004), such as snehapana (Laxmipatishatri, ?) and Uttara basti, etc. with vata shamaka dravya (Kaviraja Ambikadutta Shastri, 2005). Ashwagandhadi ghrita mentioned by Bhaisajya ratnavali (Kaviraj Ambika Dutta Shastri, 2001) also in Bhavaprakasha (Bhavamishra, 2003) said to be time tested yoga contains mainly vata

Shamaka (Brahmashankar Mishra, 2003) dravya. Vata specifically apana vata is a chief component of Shukra Pravruithi either for its vitiation or normal function (Dr, Lal Krishna, 2006). In classics different acharya opines form the different dose of uttara basti, so this study is to standardize in between the two dosages of ardha pala matra i.e.25ml (Kasinath Shastri, 2002) and one pala matra i.e.50ml (Brahmashankara Mishra, 2003).

Objective of the study

- To standardize the dose of Ashwagandhadi ghrita Uttara basti in the management of premature ejaculation (Sukragata vata).

- To evaluate and compare the Ashwagandhadi ghrita Utara basti in the management of premature ejaculation (Sukragata vata) in two different dosage i.e. 25ml/50ml.

MATERIALS AND METHODS

12 Male patients suffering from symptoms of premature ejaculation (Shukragata vata) were selected from O.P.D and I.P.D. of Sri Dharmasthala Manjatheshwara College of Ayurveda and Hospital, Hassan, fulfilling inclusion and exclusion criteria.

Diagnostic Criteria

- Ejaculation prior to ten penile thrusts.
- Ejaculation before, on or within one minute of sexual act after penetration.
- Unable to satisfy partner in at least 50% of coital incidence.
- Unable to delay ejaculation till the person wishes it.
- The problem should be persistent or recurrent and cause marked distress or interpersonal difficulties.

Inclusion criteria

- Patients of age group 20 to 50 years
- Patients diagnosed as a case of premature ejaculation (Sukragatavata).
- Patient fit for utara basti.

Exclusion criteria

Patients presenting with

- Organic defects
- Post surgical procedure or post trauma on the genital organs.
- The decrease of shukra owing to long standing chronic disorders.
- Any history of sexually transmitted disorders.
- Major metabolic ailment.
- Structural deformity.

Group A

Utara basti with Ashwagandhadi ghrita was administered in dosage of 50 ml in the evening time after the lunch.

Group B

Utara basti with Ashwagandhadi ghrita was administered in dosage of 25 ml in the evening time after the lunch.

MATERIALS AND METHODS

Plan of Basti

Table 1. Showing the plan of Basti administration

Time	1 st day	2 nd day	3 rd day	4 th day
Morning	Niruha	Niruha		
Evening		Utara	Utara	Utara

Detailed description

A course of Utara basti combined with Erandamooladi kashaya niruha basti was administered in above mentioned schedule under all aseptic condition.

Utara Basti

Purva Karma: Sthanika abhyanga was done with moorchita tila taila over lower back and abdomen region followed by naadi sweda with dasamoola qwatha.

Pradhana karma: At evening time/ after lunch Utara basti were administered in quantity of 25 ml/ 50 ml with infant feeding tube no.8

Paschat karma: Patients were in the same position till they got the urge to micturate.

Niruha Basti

Purva karma: Sthanika abhyanga was done with moorchita tila taila over lower back and abdomen region followed by naadi sweda with dasamoola qwatha.

PradhanaKarma: At morning time in empty stomach Niruha were administered with the basti catheter no.12.

Paschat Karma: Patients were in the same position till they got the urge to defecate.

Duration of study: 4 days + next 8 days, patients were administered with Ashwagandhadi churna 1tsp BD orally.

Assesment Criteria

Table 2. Showing the grading of premature ejaculation

Criteria	Grade			
Ejaculation	G0 1 to 5 min.	G1 < 4 min.	G2 < 3 min.	G3 < 1 min.
No. of pelvic thrust	15 to 20	<15>10	<10>5	1 to 2

Table 3. Showing the assessment criteria for premature ejaculation & anxiety/depression

Premature ejaculation	Anxiety/Depression
0 = No premature ejaculation	0 = No
1 = With few pelvic thrust	1 = Mild
2 = Shortly after penetration	2 = Moderate
3 = Before insertion, lack of control over ejaculation	3 = Severe
4 = Rapid ,uncontrolled, against wish, no orgasm in both partner	

Table 4. Showing the assessment criteria for premature impotence & erection

Impotence	Erection
0 = No	0 = Good erection always
1 = Mild erection with minimum effort	1 = Erection with minimum effort
2 = Moderate, erection with more effort	2 = Erection with more effort
3 = Severe, no erection	3 = Erection with partner support only
	4 = No erection, even with use of vibrator

Data Analysis

- Statistical package for social science (SPSS) version 20 was used for the data analysis.
- Wilcoxon's signed rank test

RESULTS

Table 5. Showing the assessment criteria for orgasm & infertility

Orgasm	Infertility
0 = Good orgasm to both the partner always	0 = No
1 = Orgasm attained in >75% of attempts	1 = No semen dysfunction
2 = Orgasm attained in >50% of attempts	2 = Semen dysfunction but miscarriage etc.
3 = Occasionally attained in 25% of attempts	3 = No conception at all
4 = Rarely satisfied, with more counselling	
5 = No orgasm at all, and never satisfied	

Table 6. Showing Wilcoxon's signed rank test in group A (25ml)

Parameter	Negative Ranks			Positive Ranks			Ties	Total	Z value	P value	RESULTS
	N	MR	SR	N	MR	SR					
Premature ejaculation AT-BT	3	2.00	6.00	0	.00	.00	3	6	-17.32	0.083	NS

Table 7. Showing Wilcoxon's signed rank test in group B (50ml)

Parameter	Negative Ranks			Positive Ranks			Ties	Total	Z value	P value	RESULTS
	N	MR	SR	N	MR	SR					
Premature ejaculation AT-BT	4	2.50	10.00	0	.00	.00	2	6	-1841	0.066	NS

Table 7. Showing Wilcoxon's signed rank test for anxiety, impotence, erection, orgasm and infertility in group A (25ml)

Parameter	Negative Ranks			Positive Ranks			Ties	Total	Z value	P value	RESULTS
	N	MR	SR	N	MR	SR					
Anxiety grade BT-AT	0	.00	.00	0	.00	.00	6	6	.000	1.000	NS
Impotence BT-AT	1	1.00	1.00	0	.0	.00	5	6	-1.000	.317	NS
Erection BT-AT	3	2.00	6.00	0	0.00	0.00	3	6	-1.633	.180	NS
Orgasm BT-AT	2	1.50	3.00	0	.00	.00	4	6	-1.342	.180	NS
Infertility BT-AT	0	.00	.00	0	.00	.00	6	6	.000	1.000	NS

Table 8. Showing Wilcoxon's signed rank test for anxiety, impotence, erection, orgasm and infertility in group B (50ml)

Parameter	Negative Ranks			Positive Ranks			Ties	Total	Z value	P value	RESULTS
	N	MR	SR	N	MR	SR					
Anxiety grade BT-AT	3	2.00	6.00	0	.00	.00	3	6	-1.732	.083	NS
Impotence BT-AT	1	1.00	1.00	0	.0	.00	5	6	-1.000	.317	NS
Erection BT-AT	4	2.50	10.00	0	0.00	0.00	2	6	-1.890	.059	NS
Orgasm BT-AT	2	1.50	3.00	4	0.00	18.00	0	6	-1.594	.111	NS
Infertility BT-AT	0	.00	.00	0	.00	.00	6	6	.000	1.000	NS

DISCUSSION

Ashwagandhadi ghrita is indicated in ksheena shukra, ksheena indriya and also increases the ojas & tejas of the person. After consuming this ghrita, there will be no lakshana of shukra kshaya, also it gives progeny in bandhaya stri⁴. The kalka dravya of Ashwagadhadi ghrita are ashwagadha, triphala, jambeera and musta all are having the vata hara action. Other ingredients like ksheera and ghrita both pacifies the vata dosha and gives brumhana and vajikara effect, both acts over the shukra dhatu. So, on behalf of the dosha shamana properties of drugs, it can be concluded that Ashwagandhadi ghrita work in shukragata vata. As per the practical approach utara basti reaches up to urinary bladder through the urethra. And with the help of previous research work it is stated that mucosa of urogenital tract and bladder can absorb certain type of elements. They also suggest that absorption takes place from the healthy organ, but to a less extent from any other mucousal surface¹⁰.

Conclusion

By the study it was revealed that there is no any statistical significance of administering the two different dosages.

Both were showing the results which were no significance. But the relief in sign and symptoms was there in both the groups in management of premature ejaculation with Ashwagandhadi ghrita.

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