

CASE REPORT

Takra Basti and its Role in Ayurvedic Management of Prameha Disorders: A Case Insight

Yogesh Patel and Sangeeta H.T.

Department of Panchakarma, Parul Institute of Ayurveda, Parul University, Vadodara, Gujarat, 391760.

Corresponding Author: Sangeeta H.T.

Email id: sangeeta.toshikhane26791@paruluniversity.ac.in

ABSTRACT

Diabetes mellitus [DM] is a significant global health concern characterized by impaired carbohydrate metabolism leading to persistent high blood sugar levels. India faces a particularly high burden, with projections indicating a dramatic rise in cases worldwide. Ayurveda, the ancient Indian system of medicine, offers a comprehensive approach to managing DM, emphasizing personalized treatments based on dosha imbalance and body type. This case study explores the ayurvedic management of a 68-year-old male diagnosed with prediabetes [pre-DM2], presenting with numbness, and tingling in both lower limbs. The treatment protocol included panchakarma procedures and internal medications tailored to address dosha-dushya involvement and general health indicators. This article highlights takra basti as a pivotal therapy due to its efficacy in treating prameha disorders through its digestive enhancement, binding, and lightening properties. The procedure involves the preparation of buttermilk with specific medicated substances, administered via enema to optimize absorption and therapeutic effect. This treatment approach aims to regulate vata dosha, cleanse channels [srotas], and restore overall digestive health, thereby alleviating symptoms and addressing the root causes of diabetes.

KEYWORD: Panchakarma, Prameha, Prediabetes, Takra Basti

Received 20.11.2025

Revised 21.12.2025

Accepted 01.02.2026

How to cite this article:

Yogesh Patel and Sangeeta H.T. Takra Basti and its Role in Ayurvedic Management of Prameha Disorders: A Case Insight. Adv. Biores. Vol 17 [2] February 2026. 85-90

INTRODUCTION

Diabetes Mellitus is characterized by a disturbance in how the body processes carbohydrates, leading to long-term high blood sugar levels due to reduced insulin production or decreased insulin sensitivity. India holds the title of the 'Diabetes Capital' of the world, with more than 30 million affected individuals. [1] [2] The disease's severity is striking, with statistics indicating that every 6 seconds, someone dies from diabetes or its complications. Changes in how the body metabolizes fats and proteins are also involved in diabetes mellitus, contributing to impaired glucose metabolism. Insulin, crucial for both glucose and fat metabolism, becomes dysfunctional, further complicating the disease progression. Persistent elevated blood sugar levels gradually diminish insulin secretion over time. [3] In prediabetes the symptoms of numbness or tingling sensation in feet or hands, frequent urination, increased thirst, and hunger, and unintentional weight loss. In modern science, prediabetes is primarily managed through lifestyle changes like dietary adjustments and increased physical activity, as there isn't a specific treatment for it. Research on prediabetes within Ayurveda is limited, which restricts a thorough understanding and approach to treatment. According to Ayurvedic literature on *Prameha*, various acharyas have detailed the early symptoms of this condition. *Prameha* is considered a complex disease and is in its initial stages. According to Charaka, *madhumeha* is classified among the 20 types of *prameha*, among them *madhumeha*, is considered a type of *vataja prameha*. In the *prameha* pathogenesis significant role of *vyana vayu* and *apana vayu*. *Vyana vayu* facilitates the movement of particles throughout the body, while *apana vayu* is crucial for excretion. When there is an increase in watery content [*kleda*], it accumulates in the bladder, leading to increased urine frequency and quantity. [4] The treatment of *madhumeha* is *sanshodhana* is recommended for patients with excess *doshas*, and obese individuals [*sthulpramehi*], while *santarpana* [nourishing therapies] is prescribed for lean patients. *Sanshodhana*,

such as *Vamana* [therapeutic emesis], *virechana* [therapeutic purgation], and *Basti* [medicated enema] as described in Ayurvedic texts. [5] *Basti chikitsa* [medicated enema therapy] holds significant importance in *panchakarma* due to its broad application across various conditions. It possesses evacuatory, nourishing, and *Deepana* [digestive fire stimulating], etc. Qualities and is particularly favored in the treatment of *prameha* disorders. [6] In ayurvedic classics, *takraprayoga* [buttermilk therapy] is highlighted as one of the best treatments for *prameha* due to its *deepana*, *grahi* [absorbent], and *laghu* [lightening] qualities. [7] Charaka categorizes *takra* as a type of *basti dravya* [medicated enema substance] within the *amla skanda* group, which is essential in the management of *prameha* disorders. [8][9] Sushruta also mentions *takra* as an *avapadravya* [adjunct substance] in *basti* therapy. [10] In summary, ayurvedic management of *madhumeha* emphasizes *sanshodhana* therapies like *vamana* and *virechana*, along with specific treatments such as *basti chikitsa* and *takra prayoga*, tailored to the individual's *doshik* imbalance and body type.

CASE REPORTS:

Table 1: Patient detail

Name: - XYZ	Diagnosis: - <i>Prameha</i> / Pre DM2
Age: - 68year	Sex: - Male

Chief Complains: -

1. Numbness in the bilateral foot [+++] [Since last 6 Months]
2. Tingling sensation in bilateral lower limb [++] [Since last 6 Months]

PRESENT ILLNESS:

A 68-year-old male patient was relatively healthy before 6 months and then gradually started complaining of numbness in both foot regions and tingling sensation in both legs. The patient has had a history of HTN for 8 years with ongoing medicine of amlodipine[5mg]. He was come to *Panchakarma* OPD and then admitted into the *Panchakarma* IPD for more Ayurvedic treatment.

PERSONAL HISTORY:

- Addiction- Tea [2 times/day]
- Diet- Vegetarian
- Appetite- Normal
- Micturition- 4-5 times/day
- Bowel- Normal [1 time/day]
- Height- 5'6" [167.64cm.]
- Weight- 70 kg
- BMI- 24.9 kg/m²
- Sleep- Normal

GENERAL EXAMINATION:

- Pulse rate- 87 b/Min.
- B.P.- 130/80 mm hg

ASHTAVIDHA PARIKSHA:

- Nadi [pulse]- 87/ minute, regular
- Mutra [urine]- Samyak
- Mala [stool]- Baddha
- Jihwa [tongue]- Ishatsama
- Shabda [sound]- Spashta
- Sparsha [touch]- Samsheetoshna
- Drika [sight]- Samyak
- Aakriti [built]- Madhyama.

SAMPRAPTI GHATAK:

- Dosha: - Kapha Pradhan tri dosha
- Dushya: - Rasa, rakta, mamsa, meda, lasika
- Srotasa: - Medovaha srotasa, Mutravaha srotasa
- Srotodushti: - Sanga, atipravriti
- Udbhava sthana: - Aamasay, pachayamanashya
- Vyakta sthana: - Basti, sarvasharira

INVESTIGATION:

Date: - 28/03/2024

- FBS- 121 mg/dl

- PP2BS- 185 mg/dl
- Hba1c- 6.1%
- Haemoglobin- 12.8 gms%
- Total RBC count- 4.11 mil. /cmm
- Total WBC count- 6300/cumm
- Platelets count- 224000/cmm

TREATMENT PLAN:

According to the involvement of *dosha dushya* and general examination of the patient, the following treatment protocol was planned-

PANCHAKARMA PROCEDURE:

Table 2: Panchakarma Procedure

KARMA	AUSHADHA	DURATION																								
<i>Udavartana</i> <i>Baspaswedana</i>	<i>Yava churna, Triphala churna</i> <i>Dasamoola kashaya</i>	2 Days [28/3/24 to 29/3/24]																								
<i>Koshtha sodhana</i>	<i>Eranda taila</i> 15ml + warm water	2 days [28/3/24 to 29/3/24]																								
<i>Shanik Abhayanga</i> <i>Sthanik nadi sweda</i>	<i>Murchhita Tila taila</i> <i>Dasamoola kashaya</i>	8 days [30/3/24 to 6/4/24]																								
<i>Mustadi takra basti</i>	<table border="1"> <tr> <td colspan="3"><i>Anuvasana Basti</i></td> </tr> <tr> <td><i>Murchhita Tila taila</i></td> <td>60ml</td> <td></td> </tr> <tr> <td colspan="3"><i>Niruha Basti</i></td> </tr> <tr> <td><i>Madhu</i></td> <td></td> <td>80ml</td> </tr> <tr> <td><i>Saidhava</i></td> <td></td> <td>20gm</td> </tr> <tr> <td><i>Sneha</i></td> <td><i>Murchhita Tila taila</i></td> <td>60ml</td> </tr> <tr> <td><i>Kalka</i></td> <td><i>Mushtadi kalka</i></td> <td>20gm</td> </tr> <tr> <td><i>Kashaya</i></td> <td><i>Mushtadi kashya+ takra</i></td> <td>320=440ml</td> </tr> </table>	<i>Anuvasana Basti</i>			<i>Murchhita Tila taila</i>	60ml		<i>Niruha Basti</i>			<i>Madhu</i>		80ml	<i>Saidhava</i>		20gm	<i>Sneha</i>	<i>Murchhita Tila taila</i>	60ml	<i>Kalka</i>	<i>Mushtadi kalka</i>	20gm	<i>Kashaya</i>	<i>Mushtadi kashya+ takra</i>	320=440ml	8 days [30/3/24 to 6/4/24]
<i>Anuvasana Basti</i>																										
<i>Murchhita Tila taila</i>	60ml																									
<i>Niruha Basti</i>																										
<i>Madhu</i>		80ml																								
<i>Saidhava</i>		20gm																								
<i>Sneha</i>	<i>Murchhita Tila taila</i>	60ml																								
<i>Kalka</i>	<i>Mushtadi kalka</i>	20gm																								
<i>Kashaya</i>	<i>Mushtadi kashya+ takra</i>	320=440ml																								
<i>Samana aushdha</i>	<i>Arogyavardhini rasa</i> 2 Tab; two time; before meal; with warm water	10 Days [28/3/24 to 6/4/24]																								
	<i>Dindayala churna</i> 2 TSF; one time; at bedtime; with warm water	10 Days [28/3/24 to 6/4/24]																								

Basti Karma [Yoga basti karma]

Figure 3: Basti Karma

Day	Basti
1 [30/3/24]	<i>Anuvasana Basti</i>
2 [31/3/24]	<i>Takra basti</i>
3 [1/4/24]	<i>Takra basti</i>
4 [2/4/24]	<i>Takra basti</i>
5 [3/4/24]	<i>Takra basti</i>
6 [4/4/24]	<i>Takra basti</i>
7 [5/4/24]	<i>Takra basti</i>
8 [6/4/24]	<i>Anuvasana Basti</i>

METHODOLOGY

Takra Basti SOP

Takra basti is a crucial treatment within *panchakarma* due to its broad effectiveness in treating various conditions. It is regarded as one of the *shodhana* therapies, possessing qualities that include evacuatory, nourishing, and digestive enhancement [*deepana*]. [6]

In classical *ayurvedic* texts, *takra* [buttermilk] is highlighted as the best medication for *prameha* due to its properties such as digestive enhancement [*deepana*], binding [*grahi*], and lightness [*laghu gunas*]. [7] Charaka categorizes *takra* as a type of *basti dravya* under *amlaskanda*, a category within the six therapeutic groups [*shadasthapanaskanda*]. [8][9] Sushruta also mentions *takra* as an adjunct substance [*avapadravya*] in *grahi basti* therapy. [10]

Purva karma [11]

Step 1: Preparation of *Takra Basti*

1. Take 300ml of fresh curd and add 150ml of water. Churn it until the fat separates, forming buttermilk [*takra*].
2. In a suitable vessel, triturate 80ml of honey with 20gm of *saindhava lavana* [rock salt].
3. Gradually add 60ml of *Mu. Tila taila* to the mixture and blend thoroughly.
4. Incorporate 20g of herbal paste [*kalka*] and mix well.
5. Add 320ml of buttermilk [*takra*] and *mushtadi Kashaya* to the mixture and stir vigorously with a churning stick until uniform.
6. Filter the prepared *basti* for administration.

Step 2: Sarvanga Abhyanga and Swedana

Begin with a full-body massage [*sarvanga abhyanga*] using heated *Mu. Tila taila* for 30 to 40 minutes. Follow this with steam therapy [*nadi Swedana*] until signs of proper sweating [*Samyak Swinna Lakshana*] appear, indicating softening of tissues and relief of cold and pain.

Pradhana karma [primary treatment] [12]: -

Ask the patient to lie down on his left side and flex his right leg over his fully extended left leg, keeping his head on his arms as a pillow.

After that, the anus and the enema nozzle are lubricated with oil. Removing the air bubble from the nozzle, and one-fourth of the enema nozzle is introduced in the anus slowly. With the single act of compression inject the contents and then gradually withdraw the nozzle of the tube from the anus.

In the study, *Takra basti* was administered as part of a *yoga basti* course:

Paschat karma [post-treatment care] [13]: -

Following *Basti* administration:

- Elevate the legs and apply padding to the buttocks.
- Perform abdominal massage in an anticlockwise direction, along with other traditional techniques.
- Rest for 10-15 minutes.
- Tack a light diet after *Basti karma*.
- Adhere to *asta maha dosha kara varjya vishayas* [eight main factors to avoid] [*ucchebhasyam, ratha kshobha, ati- chakramana, ati- asana, ajirna, ahita- bhojana, diva- swapna, maithuna*] during the 16-day *parihara kala* [post-treatment period].

OBSERVATION:

Table 4: Observation

	BT	AT
Numbness in the bilateral foot	+++	++
Tingling sensation in the bilateral lower limb	++	+
FBS	121 mg/dl	90 mg/dl
PP2BS	185 mg/dl	130 mg/dl

DISCUSSION

UDVARTANA

Udvartana is *bahiraparimarjana chikitsa*, it is performed in *pratiloma gati* [from below upwards] by using the required pressure on the body. This is a therapeutic process aimed at reducing excess fat and excess *kapha*, invigorating the skin, and enhancing its ability to absorb excess moisture and stimulate metabolism. This study involves rubbing *Yava churna* and *Triphala Churna* on the body in an upward direction, which facilitates the breakdown and mobilization of these undesired substances, aiding in the removal of blockages and restoring balance and health, alleviates sweat, alleviates foul smell, normalizes the *Agni*, alleviates heaviness of the body in the patient. The technique provides mechanical stimulation, causing muscles to contract and then relax, which significantly enhances peripheral circulation and venous drainage. [14]

BASPA SWEDANA

Baspa Swedan is to open the pores and stimulates the sweat glands, which helps in the elimination of toxins [*ama*] accumulated in the body. In this case, *Baspa swedana* induces sweating, the treatment facilitates the flushing out of metabolic waste products and helps to improve circulation. [15]

NITYA VIRECHAN

Nitya virechana, a procedure in Ayurveda, involves the elimination of toxins [*doshas*] through the anus [*adhormarga*]. [16] The Purification process operates at two levels: firstly, by thoroughly cleansing various organs and systems like gastrointestinal. and secondly, by purifying cell membranes and molecules at a cellular level, thereby improving gut absorption and correcting metabolic functions. [17] [18] In the context of this *madhumeha* [diabetes mellitus] patient, characterized by excessive watery

content [kleda] and vitiated doshas in the abdominal region [koshthas], and toxins accumulate in the bladder leading to frequent urination. *Nitya virechana* helps reduce *dosha* levels, addresses underlying pathophysiology, and alleviates symptoms of this complex metabolic disorder. It specifically targets *doshas* lodged in *amasaya* and *pakvashaya*, aiding in their expulsion, and clearing vital channels [srotas]. [19][20]

TAKRA BASTI

Role of specific *basti* materials:

Takra [buttermilk] proves effective in treating duodenal disorders due to its appetizing [*deepana*], stool-binding [*grahi*], and lightening [*laghu*] qualities. Its sweet taste [*madhura vipaka*] does not aggravate *pitta* and is beneficial for *kapha* due to its astringent [*kashaya rasa*], warming [*ushna*], rough [*Raksha*], and minute [*vikasi*] properties. [21] pre-diabetes [*prameha/ purvaroopta of prameha*] is a *santarpanotha vyadhi*, and by this *takra guna*, it removes the *kledansha* from the body. And it enhances the *pachayamanashya agni* and *dhatva agni*

Mechanism of action of *takra Basti*:

The minute nature [*anupravarana*] of *basti* substances, including their unctuousness [*sneha*], facilitates penetration into minute channels and nourishes tissues. According to Jejjata, *basti* substances reach the duodenum [*grahani*] directly without alteration, highlighting their efficacy. [21]

Regulation of *Vata dosha*:

Enema therapies like *takra basti* primarily regulate *vata dosha*, predominantly located in the large intestine [*pakvashaya*]. They specifically target *samana vata* and *apana vata*, influencing their respective regions and thereby controlling other forms of *vata*. This *samana vata* also improves the digestion [*Pachyamanasaya Agani*]. This approach involves eliminating *dosha s* through *anulomana* [natural direction of movement], crucial for managing duodenal disorders [*pachayamanasaya*]. [21]

***Srotoshuddi* action:**

Sushruta describes *basti* therapy's ability to purify *srotas* [channels] throughout the body, akin to watering a tree at its roots, where the water naturally spreads throughout the entire tree. *Basti* therapy thus removes morbid *doshas* and toxins, promoting overall systemic purification. [21]

AROGYAVARDHINI RASA

Initial qualitative tests conducted on *arogyavardhini rasa* indicated the presence of various functional groups such as cardiac glycosides, alkaloids, tannins, steroids, flavonoids, carbohydrates, starch, and sugars. [22]

CONCLUSION

In conclusion, the ayurvedic management of prediabetes [pre dm 2] through *takra basti* therapy showcases its efficacy in addressing underlying *dosha* imbalances and symptoms like numbness and tingling in the lower limbs. Here in this case show the *takra basti* as the *vyadhipratyanika chikitsa* in *prameha roga*. By leveraging its unique properties of digestive enhancement, binding, and lightness, *takra basti* not only aims to regulate *vata dosha* and cleanse channels but also promotes overall digestive health. This holistic approach, supplemented by *panchakarma* procedures and internal medications tailored to the patient's condition, exemplifies Ayurveda's personalized treatment paradigm in managing metabolic disorders like prediabetes, emphasizing both symptomatic relief and root cause resolution. This ayurvedic management of prediabetes [pre dm 2] through *takra basti* therapy shows a good result in this case in 10 days of treatment, but we can further treatment can be planned.

REFERENCE

1. International diabetes federation (2015): IDF Diabetes Atlas, 7th ed. Belgium IDF.
2. API textbook of medicine chapter 18. Shah SN editor, 7th ed. India, an association of physicians.
3. Davidson's principle and practice of medicine, 19th ed. pp6643. Seema Gulati, Anoop Misra. Nutrients. ISSN 2072-6643. Nutrients. 2014; 6:5955- 5974. DOI: 10.3390/nu6125955.
4. Vaidya Jadavji Trikamji Acharya, Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Reprint 2022, Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Sharira Sthana 8/21, Page No. 343]
5. Vaidya Jadavji Trikamji Acharya, Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Reprint 2022, Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Chikitsa Sthana 6/15, Page No. 446
6. Vaidya Jadavji Trikamji Acharya, Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Reprint 2022, Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Shidhhi Sthana 1/27, Page No. 682

7. Vaidya Jadavji Trikamji Acharya, Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Reprint 2022, Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Chikitsa Sthana 14/84, Page No. 505
8. Vaidya Jadavji Trikamji Acharya, Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Reprint 2022, Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Shidhhi Sthana 10/44-45, Page No. 726
9. Vaidya Jadavji Trikamji Acharya, Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Reprint 2022, Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Viman Sthana 8/140, Page No. 284
10. Vaidya Jadavji Trikamji Acharya, (2021). Susruta Samhita of Susruta with the Nibandhasangraha commentary of Sri Dalhanacharya. Chaukhambha Sanskrit Sansthan, Varanasi Chaukhambha Publication, 2021, Chikitsa Sthana 38/77, Page No. 545
11. Vaidya Jadavji Trikamji Acharya, (2022). Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Shidhhi Sthana 3/23, Page No. 693
12. Parul Sharma, Ved Bhushan Sharma, (2015). A clinical study to evaluate the effect of Lekhan Basti, Udvartana and Navak Guggulu in the management of Sthaulya, IAMJ, Vol 3, Issue 2: 30-35.
13. Vaidya Jadavji Trikamji Acharya, (2021). Susruta Samhita of Susruta with the Nibandhasangraha commentary of Sri Dalhanacharya, Reprint. Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2021, Chikitsa Sthana 32/02
14. Vaidya Jadavji Trikamji Acharya, (2022). Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Chikitsa Sthana 6/4, Page No. 445
15. Brahmanad Tripathi, (2013). Sarngadhara Samhita of Pandita sarngadharacarya, edition 2013, Chaukhambha surbharati prakashan, Varanasi. Madhyama Khanda, Kwatha Kalpana 2/ 161 Page No. 105
16. Vaidya Jadavji Trikamji Acharya, (2022): Agnivesha, Charaka Samhita with Cakrapanidatta Ayurvedadipika Commentary of Cakrapanidatta. Reprint 2022, Chaukhambha Sanskrita Sansthan, Varanasi Chaukhambha Publication, 2022, Sutra Sthana 13/41-43, Page No. 84
17. Parwe S, Nisargandha M, Bhagwat P. (2020). Study the effect of Rodhradi Gana Basti and Udvartana in Sthaulya [Obesity]: A Study Protocol. International Journal of Botany Studies. 5(5): 519-522
18. Prakashrao PJ, Parwe S. (2020): A Comparative Clinical Study on The Effect of Anupana Bheda Trivrutta Churna Nitya Virechana in Yakruta Vikara [Liver Disorders] With Abnormal Liver Function Test. International Journal of Modern Agriculture. Sep 30;9[3]:90-5
19. Sapkota YR, Bedarkar P, Shukla VJ, Prajapati PK. (2016): Quality Control Parameters of Arogyavardhini Rasa prepared by classical method. J Ayu Herb Med ;2(4):104-111

Copyright: © 2026 Author. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.