



UTTARAVASTI IN MALE – FROM THEORY TO PRACTISE

Ayurveda

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ABSTRACT

Ayurveda is approaching various clinical conditions with its own unique methodologies. The methodology aims from the generalised techniques to the specific one so as to maintain the homeostasis. In the management of conditions of the genitourinary system, a methodology in the form of Uttaravasthi is explained, as a subtype of Vasthi and proved useful in both male as well as female. It is being practised by several specialists and reported to be beneficial in selected clinical conditions of the genitourinary tract. Due to the physiological differences in both the genders, certain alterations had been advised in the modality and the period of administration of this technique. Here the procedure of Uttaravasthi with its use in male have been discussed with its possible efficacy in selected clinical conditions.

KEYWORDS

Uttara vasti, vasthi, genitourinary system, Apana vatha

Introduction

Uttaravasthi is explained as a subtype of Vasthi in almost all the treatises of Ayurveda.¹ This is a method of introducing medicine into the genitourinary tract by prescribed technique, being practised in the disorders of the genitourinary system, both in male as well as female, with slightly different modus operandi. The term comes from the fact that it is done through a route anterior to the usual route of vasti and also done with Vasthi as the preparatory procedure²

The UttaraVasti is administered through the genito urinary tract in male and both genital as well as urinary tract in female.³ UttaraVasti also has the Netra (Metal syringe) and Putaka (Bladder to hold medicine) like any other vasti. The UttaraVasti Netra is called as “Pushpanetra” which refers to the “Artava” or “Rajas” of female and to the “Sukra” of the male⁴. These are replaced nowadays with rubber catheter, Foley's catheter or metallic catheter, as per the condition and availability. Among the routes of drug administration as per modern pharmacology, the Transurethral and Transuterine routes are not explored as such⁵. It is the need of the hour to elucidate the area of the Uttaravasthi because of its efficacy and stands still as a unique milestone of Ayurvedic knowledge.

Indication

All together, the Vasthi's contribute to half of the efficacy of overall all the therapies mentioned in Ayurveda i.e. Ardh chikitsa.⁶ The indications are chiefly aimed at the dysfunctions of the genitourinary system. There are also some specific conditions mentioned separately for both male and female, due to the discrepancy in genital system.

In male, it is highly useful in derangement of the seminal parameters, dysuria, spermatorrhoea, vesical calculus, cystitis, sexual dysfunctions etc. The indications in female include menstrual irregularities, secondary amenorrhoea, Gynaecological disorders, dysfunctional uterine bleed, uterine prolapse, urinary incontinence, dysuria, dyspareunia etc. on a conditional basis. Acharya Charaka is having the judgment that as this procedure is good enough to control the Vata dosha, the chief regulatory factor behind conception, a female practising Uttaravasthi is have a greater chance of begetting a progeny.⁷

There are certain conditions where the procedure has its own limitations. It is contraindicated in Prameha⁸. Uttaravasthi mentioned for garbhasaya sodhana, is not advised in virgins. Uttaravasthi is not to be performed in those with urethral stenosis, sphincter incontinence, infections of the urethra etc. In benign prostatic hypertrophy, before performing the procedure, PR examination and also the USG if necessary, is to be performed so as to get the acquaintance of the lobe involved.

Procedure – Male Uttaravasthi

Due to the variations in the genitourinary tract, the types of Uttaravasthi Netra differ for male and female⁹. The male Uttaravasthi can be administered at any time but for the female it is necessary to wait for

the “Ritukala” i.e. selected days of the menstrual cycle. The pushpa netra explained in classics are of metals such as gold, silver etc. from 12 – 14 angulas, resembling jasmine flower stalk, aperture equal to mustard seed with two protrusions (karnikas)¹⁰. In practise, sterilised rubber catheter no.5 or 6 in male and Rubin's canula is used for the female procedure. Sterilized plastic bags are used as putaka, nowadays.

Uttaravasthi can be administered in a male patient after proper preparatory procedures, if the patient is having above said diseases. In a female patient, it is to be performed usually at the rithu kala and at any time without restriction, in case of acute conditions such as dysfunctional uterine bleeding, needing immediate intervention.

Mainly the drug mentioned for Uttaravasthi is either gritha or taila.¹¹ Kwathas are also used for uttaravasthi, peculiarly when sodhana is the purpose to be achieved. The maximum dose of the sneha is mentioned by Susruta as 1 pala or 60 ml, in male.¹² The dose has to be adjusted as per the age of the individual and also the clinical condition. If the drug is in the form of kwatha, the maximum dose mentioned is 2 palas or approximately 100 ml.¹³

Preparatory stage

The treatment procedures including snehapana, sweda, sodhana and nirooha are to be administered before planning to perform Uttaravasthi¹⁴. But without all these procedures, we are performing Uttaravasthi, as per the demand of the condition or even acute conditions. A prior counselling is usually performed so as to gain the confidence of the patient.

All the instruments necessary for the procedure are sterilised properly so as to be aseptic. A detailed examination of the genitourinary system is done, so as to rule out the structural defects like urethral stricture and marked hypertrophy of the prostate. Oil application and fomentation is done all over the body. The patient is asked to clear the natural urges and have a bath. Yavagu with milk or ghee is advised for intake. The procedure is performed with the patient on lithotomic position, in the minor theatre. The sterilized syringe is filled with the selected sterilized drug and kept aside.

Main procedure

The patient is initially instructed to evacuate the bladder. The genital area is cleaned thoroughly with an ideal antiseptic solution. The prepuce is also retracted and cleaned with sterile cotton. Warm oil is applied over the genital region and the penis is made straight and steady. The catheter smeared with ghee is slowly pushed through the urethra and slowly introduced further, into the urinary bladder. A small amount of the residual urine is passed through the catheter and it confirms that the catheter is inside the bladder. A syringe, with the medicine is attached to the base of the catheter. The medicine is pushed inside with the syringe in a gentle manner. The catheter is removed slowly with utmost care.

The patient should lie down on his back for 100 matras. Then he should flex his arms and legs thrice and the soles and palms are massaged gently. He is advised to stay on bed calmly, waiting for the expulsion of the drug. The medicine introduced may be retained inside upto 1- 2 hours and expels with the micturition, in an average of 1 hour. After the expulsion, the patient is advised to take boiled rice with milk, vegetable soup or meat soup. Diet can be modified with mamsarasa in Vata dosha, ksheera or milk in Pitta and mudga yusha in Kapha dosha. He is also advised to avoid sleep during day time and also to avoid sexual contact within the entire protocol¹⁵.

Utharavasti can be done for 3 days continuously, then 3 days rest is advised and again the process repeated for 3 more days. If there is any sort of discomfort or burning sensation for the patient, a gap of a day is given in between. The common complications seen are burning sensation, retention of the drug and possible urinary tract infection. If the Vasti dravya retains for more time associated with burning sensation, uttaravasthi is done with ksheeri vriksha kwatha / yashti madhu kwatha or varthi is placed. The urinary tract infection if necessary is to be managed with the internal medicines.

Drugs commonly in use

Dhanwantaram taila is used in Urinary incontinence, erectile dysfunction etc. Nalpamara kwatha in Cystitis, Prostatitis etc. Ksheerabala taila in oligo as well as asthenospermia, Veerataradi gana kwatha in Benign prostatic hypertrophy, vesical calculus etc. and Vastyamayantaka gritha in nocturnal enuresis.

Probable mode of action

The uttaravasthi if performed after proper preparatory procedures are having definite action on the various clinical conditions of the genitourinary system. The effect of the procedure is enhanced by the effect of the selected drug. It is having a stimulatory action on the swadishtana chakra associated with the sacral neural plexus as well¹⁶. Uttaravasti works on the site of apana Vatha and normalizes it so that, a lot of diseases in which apana is deranged, responds to the procedure¹⁷. The posterior wall of the bladder is a smooth triangular area (Trigone of the bladder) has the capacity of absorption of the drug to an extend¹⁸. The procedure is capable of flushing out any infections in the bladder.

Conclusion

Uttara vasti is one of the methodology mentioned in Ayurveda, so as to insert a medicine either intraurethrally/ intra cervically so as to get rid of the diseases affecting the genito urinary system. The ancient scholars were well versed in such procedures which is yet to be explored, as per modern physiology. This procedure is quite effective as per clinical reports, but strict aseptic conditions are to be maintained during the procedure, with less than a few complications, as observed.

Uttaravasti with selected drugs are observed as effective clinically in several conditions as mentioned above. The procedure is very much used nowadays in subfertility management in both the male and female partners. Even though we get the remarkable results out of the Uttaravasti, studies are yet to be done under tracer techniques with radioactive labels so as to provide an answer for the mode of action of the procedure. The methodology also is to be modified uptodate. Reports of clinical efficacy of uttaravasthi are expected in the near future by the whole medical world.

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