

ORIGINAL RESEARCH PAPER

Ayurveda

CLINICAL STUDY TO EVALUATE THE EFFICACY OF "KULATHA KWATHA" IN THE MANAGEMENT OF "MOOTRASHMARI".

KEY WORDS: Ayurveda, Ashmari, Mutravaha Srotas, Mootrashmari

Bhanje*

Dr. Dhondappa S. PG Schloar Department of Shalyatantra. Dr . D. Y. Patil College Of Ayurved And Research Centre, Pimpri Pune 411018*Corresponding Author

Dr. P.B. Jondhale

Guide-Professor And HOD Department of Shalyatantra Dr. D.Y. Patil College Of Ayurved And Research Centre, Pimpri Pune 411018

ABSTRACT

The formation of stone is one of the common problems of urinary system and as per modern science only few medicines are available for such condition along with surgery. It is second most common disease of urinary tract with high recurrence rate. The common symptoms of culculi are pain, haematuria, burning micturiton, dysurea, tenderness and sometimes fever. Ayurveda described Mootrashmari as urinary calculus disease of Mutravaha Srotas and considered as Asthamahagada. Ayurveda described various treatment approaches for the management of disease; use of herbs, ayurveda formulation and Kashaya etc. this case study presented on Mootrashmari.

INTRODUCTION:-

Mootrashmari is a disease, identified as a global problem. It is a frequent clinical problem with an incidence of 0.1% to 6% in general population. Mootrashmari means formation of a calculus in srotas i.e. Mutramarga.

Causing frequent pain in abdomen, colicky in nature and radiates from loin to groin [1]. Especially pain in abdomen mimics the situation. Ureteric stone originates in kidney. [2] Among all the pain, abdominal colic always drags not only patient's attention but also the curiosity of the surgeon. Severity and colicky nature of this pain are caused by hyper peristalsis and spasm of smooth muscles of ureter. [3] When stone becomes impacted, the attack of colic give away to more consistent dull pain, often felt in iliac fossa. [4] Stones are age old anguish of the human body & occur at several sites particularly in Kidney, Urinary bladder and ureter.

Ashmari is considered as Mahagada [5] being difficult to cure, because of Marmaashryi and involvement of Bahu dosha. Ashamari is Tridoshaja in origin with kapha dominant. According to MadhavNidan Saraktamootra pravrutti [6] is one of the major symptom seen in Mootrashmari . Basti is Vyaktasthana of Ashamari & Basti is one among the Dashapranayathana explained by Acharya Charak^[7]. It is a fatal disease as it needs prompt management and can be life threatening. On prognosis this disease is Kruchasaadya.

The cause for the formation of stone is due to many factors like concentrated urine, deficient of stone inhibitor substances like mucopolysacharides, citrate, etc. However the role of heredity and diet factor like imbalance of electrolytes, calcium phosphates oxalate, magnesium due to abnormal metabolism, deficiency of vitamin A, etc. have their key role to play for formation of calculus.

Hence, there is a need to understand the disease and to find a best solution that not only treats the condition but also prevent the disease at primary and secondary levels.

Acharya Sushruta, Father of surgery, mentioned many causes of Mootrashmari, one of them is ''Asanshodhanshilasya'' and "Apathyakar ahar vihar' '. Due to this people are likely to acquire this disease.

In Ayurveda number of drugs and formulations are mentioned to treat Mootrashmari, among these Kulatha Kwatha is selected for study.

Case Report:-

www.worldwidejournals.com

Age-23 years Sex -Female

Occupation-student

Department-Shalyatantra Diagnosis-Mootrashmari Drname-Dr.P.B.Jondhale contact no - 8856809420

Presented with complaint Udarshool (pain in abdomen), Sadah Mootra Pravrutti (Burning Micturition), Sarakta Mootra Pravrutti (hematuria) since a day . There is no history of DM, HTN and any other specific history .The family history was not suggestive of anything specific . Here the classical lakshanas of mootrashmari

PAST HISTORY:-

No H/O GDM/PIH/hypo-hyperthyroidism or any other major medical or surgical history.

FAMILY HISTORY: -

No history of same illness in any of family member

MATERIALS & METHODOLOGY:-KULATHA KWATHA:-

Patient was taken Kulatha kwatha who are suffering from Mootraashmari.

KULATHA BEEJ CHURN:-

स्वेदसंग्राहकोमेदज्वरक् मीहर:सर:।।

Kulatha Kwatha is given from BHAVPRAKASH NIGHANTU.

कुलिथका:कटुका:पाके:कषाय:पपत्तरक्तकृत । लघुपिदाही िीयोष्ण:श्वासकासकफापिलािः ।। पहकारमरीशुकदािाहि सपीिसाि़ |

- भािप्रकाश पिघंट

DRUG CONTENT:- KULATHA KWATHA TREATMENT **DETAILS:-**

Kulatha Kwatha: -40 Ml (b.i.d) Treatment course - 21 days Follow up - 7th, 14th, 21th Route of administration - Orally Duration-Twice a day after food

ASSESSMENT CRITERIA:-

Udarshool	0- No Pain		
	l- Mild Pain		
	2- Moderate Pain		
	3- Severe Pain		
Sadaha Mootra Pravrutti	0-No Burning Micturation		
(Burning Micturation)	1-Mild Burning Micturation		
	2-Moderate Burning		
	Micturation		
	3-Severe Burning Micturation		

Sarakta Mootra Pravrutti	0-0 to 5 RBC/hpf		
(Hematuria)	1-6 to 20 RBC/hpf		
	2- 21 to 30 RBC/hpf		
	3-More than 31 RBC/hpf		
Size of Ashmari	In mms		
Numbers of Ashmari	In numbers		
Site of Ashmari	USG(A+P)		

RESULT:-

Observation table:

Sr No	Sign-& Symptoms	Follow Up				
		Before	On 7th	On 14th	On 21th	
		treatment	day	day	day	
1	Udarshool(Site-& Intensity)	3	2	1	0	
2	SadahaMootra Pravrutti	3	2	1	0	
3	SaraktaMootra Pravrutti	3	2	1	0	
4	Size Of Ashmari	3	-	-	0	
5	NumberOf Ashmari	3	-	-	0	
6	Site of Ashmari	3	ı	-	0	

USG REPORT:-

Before Treatment:- Mild obstructive changes in left kidney & proximal ureter. Possibility of a calculus in left mid / lower ureter is likely. Right renal calculus of 4mm. (30/6/2020)

After Treatment:- Currently theri is no calculi found at upper pole of right kidney (Which is noted on 22/7/2020)

DISCUSSION:-

- From the present study it becomes evident that urological problems form an important part of medical deliberations.
- After completion of treatment statistically highly significant results were observed in pain (Vedana) and burning micturition.
- Statistically significant results were observed in haematuria (Sarudhira Mootrata). Insignificant result was observed in feature of Ati Aavila Mootrataa.
- Most of the ingredient have Tikta Kashaaya Pradhan Rasa, Laghu Ruksha Guna, Sheeta Veerya, Katu Vipaka and Vatakapha Shamaka properties & have Mootrala, Vedana sthaapana, Anulomana and Bastishodhana Karma.
- It causes relief in symptoms of Ashmari by VataKaphaShamana, Vedanaasthaapana, Shothahara, Mootrala, Rasayana and Anulomana properties.

CONCLUSION:-

- Kultha kwatha has shown significant relief in the symptoms and expulsion of Mootrashmari.
- Incidence of Mootrashmari Vyadhiis more between 25-32 yrs. Age group
- This disease is more in males.
- Mootrashmari is a disease of urinary system and obstruct urinary path which termed as stone in modern science.
- The Mootrashmari mainly occurs due to the calcium deposition which may be associated with lack of citrate and other etiological factors. Approximately 5% to 8% peoples are suffering from common symptoms of ureter culculi; pain, haematuria, burning micturiton and dysurea.
- Ayurveda described various treatment approaches for the management of disease; use of herbs, ayurveda formulation and Kashaya etc.
- The good conduct of life (Ahara-Vihara) also play vital role towards the management of disease.

REFERENCES

- Shriram Bhat, SRBs-Manual of Surgery, Jaypee brothers medical publication, Pvt.Ltd, 2013 page no. 1019
- Somen Das, Das S. Textbook of surgery, 6th edition SD publication, July 2010,page no.1087
- Somen Das, Das S. Clinical Surgery, 6th edition SD publication, Reprint Aug 2007,page no.410

- Norman S.Williams, Bailey & Short practise of surgery, 25th edition Edward Arnold (Publishers) Ltd 2008, page no. 1300
- SUSHRUTA SAMHITA: Kavi. Dr. Ambikadatta Shastri, Choukhamba Bharati Academy, 2007-page no.259
- Yadavnandan Upadhyay, Madhavnidan, Part-2,27th edition 1997, Chaukhamba Sanskrit Sansthan, Varanasi, Page no. 1017.
- Dr. Tripathi B., Charak Samhita, Edition reprint 2008, Choukhamba Bharati Prakashan, 2008.
- SUSHRUTA SAMHITA: Kavi. Dr. Ambikadatta Shastri, Choukhamba Bharati Academy, 2007, page no-470
 Bhavprakash Nighantu: C.Chunekar, Chaukhamba Bharati Academy, 2010,
- Page no.487. 10. Vaidya Shree Ambikadatta Shastri, Bhaishajya Ratnavalee, Choukhamba
- Bharati Academy, 2007, page no-498

 11. Aachrya Priyawat Sharma, Dravya Guna Vidnyan Vol.2- Chaukhamba Bharati
- Academy-page no.626-627. 12. Vaidya Shree Ambikadatta Shastri, Bhaishajya Ratnavalee, Choukhamba
- Bharati Academy ,2007,page no-348

 Aachrya Priyawat Sharma Dravya Guna Vidnyan vol.2,Chaukhamba Bharat academy -page no-376
- 14. Aachrya Priyawat Sharma Dravya Guna Vidnyan vol.2-Chaukhamba bharati
- academy-page no-324
 15. Aachrya Priyawat Sharma Dravya guna vidnyan vol.2-chaukhamba bharat academy-page no-245