

“THE SUCCESSFUL MANAGEMENT OF MUTRASHMARI W.S.R. RENAL CALCULI USING PROPRIETARY AYURVEDIC MEDICINE- A CASE STUDY”

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ABSTRACT:

Mutrashmari is a common problem in primary care practice. In India, more than 1 million cases are reported every year, and another report puts the infection rate at 12% of the population. Symptoms of Mutrashmari can be compared to urolithiasis. Although many treatments are accepted in medicine, they are expensive and it is impossible to avoid the development of stone recurrence. Therefore, to treat Mutashmari, it is necessary to find cost-effective and easily available drugs. This is an isolated case. In this case, a 40-year-old patient presented to Kayachikitsa OPD with complaints of abdominal pain (pain radiating from the lower back to the groin) and burning sensation accompanied by bloating. She did not want to undergo kidney stone surgery, so she came for Ayurvedic treatment. Ultrasound report shows kidney stones. The patient was treated with Ayurvedic preparations consisting of chruna, tablets and Kashay. Treatment shows successful results. The stone passed in the urine within 15 days and was 8 mm x 6 mm in size. Depending on the size, the patient will experience more or less relief from abdominal pain and no burning pain as it grows.

KEY WORDS:- Mutrashmari, Renal calculi, Shaman chikitsa, urolithiasis..

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INTRODUCTION

Shirahshool as a common symptom and main component of shirogata vyadhis has been extensively documented in *Ayurvedic* literature. Migraine represents a subtype where unilateral head pain occurs. According to *Acharya Charaka and Sushruta*, this condition manifests as severe pain affecting half of the head, particularly impacting areas such as *Manya, Bhru, Shankha, Karna, Akshi, and Lalaat*.

Migraine represents a genetical as well as life style related complex disorder marked by episodes of moderate-to-severe headaches, typically unilateral and often accompanied by nausea, vomiting as well as sensitivity to light, temperature variation and sound. Its name originates from the Greek "hemikrania," subsequently explained into Latin as "hemigranea," and finally into French as "migraine." This condition frequently leads to disorientation and job impairment. Migraine attacks are over hours to 72 hours upto days in manner. The most common migraine types are, migraine without aura, constitutes more than 60% of cases. This disease review is an attempt the ayurveda etiology and pathophysiology of migraine disease with conventional norms.

Case study :- A 40 years old female visited our L.K. Ayurveda Rughalay, Yavatmal on 21/08/23.

The patient presented with complaints of severe pain in left flank region associated with burning micturition, difficulty in urination, pain radiating to groin region intermittently, USG abdomen was advised.

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History of present illness :- Before 1 month patient was in good state then she started to complain of severe abdomen pain and it was observe that pain was sporadic and Colicky. It was present on the right side of the abdomen in which is radiated from the loin to groin area, difficulty in urination you normally at the start, pricking type of urination open burning nutrition.

Past History :- There was no history of Hypertension, DM or Thyroid, history reveal that her insufficient water intake ruksha aahar spicy and salty food can cause renal calculi and she is not willing for operation of renal calculi and hence she came for Ayurvedic treatment .

Family History :- no significant history.

Rugnaparikshan :-

- Nadi – 78 /min
- Mal. – samyak
- Mutra – Asamyak
- Jivha – alpsam
- Shabda – Prakrut
- Sparsha – samshitoshn
- Prakruti. – vat-kaphaj
- Nidra. -Anidra
- RR. – 18 / min
- Temp – 98.3°F
- BP. – 110/70 mm of Hg
- Urine – Burning & painful micturation.
- Stool – Unsatisfactory bowel habits
- P/A – No organomegally & tenderness elicited in both side of lumbar region & side of Renal angle.

Investigation :- USG report :- Dilation of collecting system and the proximal 2/3rd of the right ureter. E/O – Calculus of size 14.2mm× 6.4mm (length × width) at distal right ureter with posterior acoustic shadowing. The calculus 1.7 cm away from right VUJ.

Her Urine and blood reports were are in normal limits.

**Samprapti :-
Sanchay**

Hetusewan (Vatprakipak Ahar-vihar)

Sanjeevani Darshan
Vayu bastigat.
Prakop
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Prasarna

Shukra,mutra,pitta,or kapha dushti.

Stansanshray

Sushkata.

Ashamari.

Vyakti

Samprapti Ghatak :-

Dosha – Tridosha (vatka-phradhan)

Dushya – Mutra

Agni – Jatarangi mandya

Ama – Jataragni mandya janya

Strotas – Mutravaha strotas

Udbhava sthan – Amashaya & pakvashaya

Sanchara sthan – Siras , amapakvashayagat Mutravaha strotas

Adhasthan – Mutravaha strotas & basti

Vyakta sthan – Mutravaha strotas & basti

Dusri Prakara – sanga

Rogmarga – madhyama

Vyadhi swabhava – Mutra apravruttijanya vica

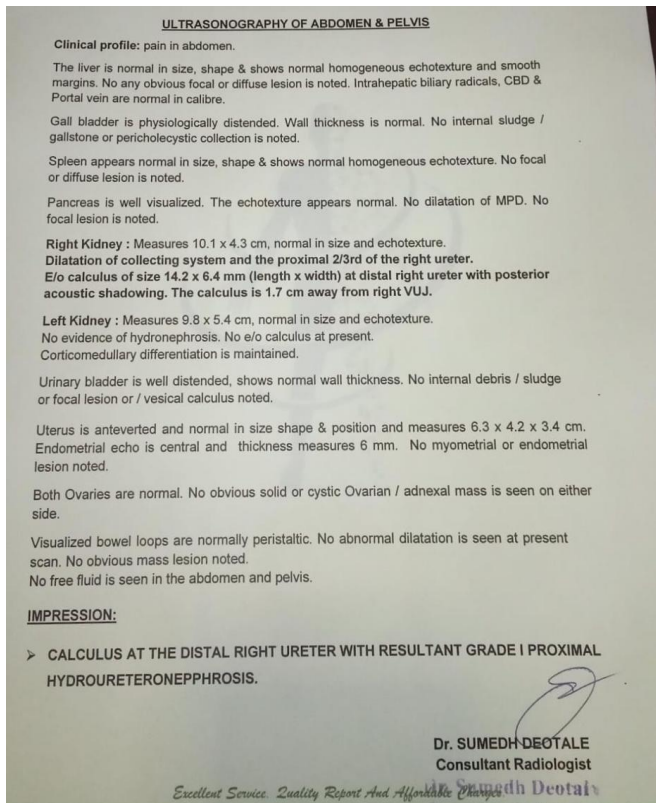
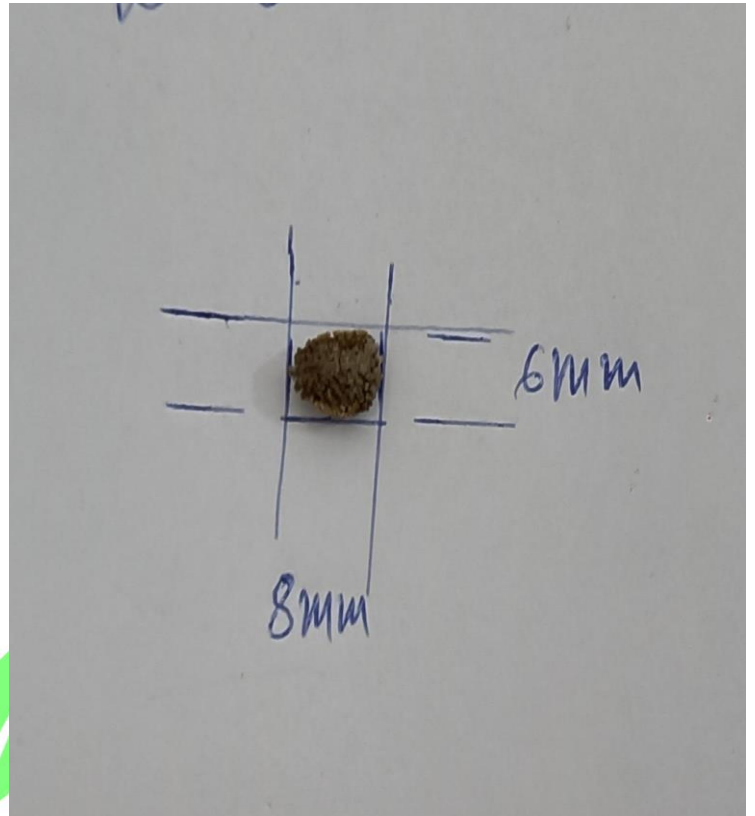
Sadhyasadhya – kruchhasadhya , shastrasadhya.

MATERIALS AND METHODS**1) A Case study**

2) Centre – PG Dept of Kaychikitsa L .K. Ayurved Hospital Yavatamal affiliated to DMM Ayurved college Yavatmal.

Material :-

Dravya	Matra	Kal	Anupan
1.Hazrul Yahud Bhasma (11)	20 gm		
+ Punarnava Mandur	10 gm		
+ Punarnava Gugulu	10gm	BD	Ushnodak
+ Pashanbhed churna	40 gm		
+ punarnava churna	40 gm		
+ Chandraprabha Vati (60 pudya)	10 gm		
2.Tab Distone		TDS	Water
3.Cap.Unclean		TDS	Water
4.Syp Unclean + Ashmarihar kadha		TDS	Water

Before treatment (USG Report)**After treatment (Stone)**

expelled out)

Result :- At first examination, the patient reported that stones were passed through urine. The size was 8mm²6mm. On day 15, I felt moderate pain and difficulty passing urine. The patient experienced some relief from abdominal pain and did not experience dysuria. The results showed that with the help of Ayurvedic shaman Chikitsa, kidney stones can be cured and other surgical procedures can be prevented.

DISCUSSION

In this case study , the stone was present on VUJ region . VUJ region is nearer to The urethra so the stone was easily expelled out through the urine. The combination of drugs Described in the treatment found to be very effective in reducing the symptoms of Mutrashmari, bastishula ,Mutra virechaniya , mutrasangrahaniya & mutrashodhaka.

- In this case, the pain is relieved thanks to the ear and tikshna gunas, a drug with the properties of Kafvataghna [8]. He acts as the antagonist of kafwataj sanghata. Uclean capsules contain Chandraprabha (50 mg), Hazral Yahud Bhasma (50 mg), Tankan Bhasma (25 mg) and Pashanbkhed (100 mg), which are used for urinary retention, urinary disorders, kidney stones and burning sensation. Urination due to acidic urine.

- **Distone capsule** of Ayurvedic preparation enriched with Pashanbkhed, Manjishta, Nagarmustha, Apamarkhar, Elaichi, Revanchini, Gojiha, Sahadevi, Hazrul Yahud Bhasma, Shudha Shilajit are a unique Ayurvedic blend of herbs and minerals for overall health of kidney, genitourinary system, reduces stone forming substances.

- **Chandraprabha Vati** is a powerful anti-inflammatory Ayurvedic treatment used to treat urinary tract, kidney, pancreas, thyroid, bone and joint diseases. syp uclean and Ashmarihar kadha help in destroying the Mutrashmari sanghat and help in dissolving and destroying the properties of the stone i.e. Ashmarigna (9).

Probable Mode OF Action :- All medicines prescribed for treatment are ushna and tikshna. Guna has the properties of cafvatagna. He acts as the antagonist of Kafwataj Sanghat. This helps in destroying the Mutrashmari sanghat and helps in dissolving and destroying the properties of the stone i.e. Ashmarigna.

CONCLUSION

After observation of this case study, it can be concluded that the Ayurveda gives Better relief to the patient of Mutrashmari . The ayurvedic formulation of churna, tablets & Kashaya can be safely & effectively carried out in pts of Mutrashmari with good results

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