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Ancient prospective of Mutrashmari and its management: A critical review based on various authoritative treatises

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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 and the other is BPH and urinary infection. The common symptoms of ureter calculi are abdominal pain, haematuria, burning micturiton, dysuria, frequency of micturition, tenderness and sometimes fever. Āyurveda described Mūtrāśmarī as urinary calculus disease of Mūtravahasrotasa and considered as Aṣṭamahāgada. Āyurveda described various treatment approaches for the management of disease; use of herbs, Āyurveda formulation and Kwātha and tablets, etc. This article presented critical review on Mūtrāśmarī.

Keywords: Āyurveda, aśmarī, mūtravahasrotasa, Mūtrāśmarī

Introduction

Mūtrāśmarī is a disease of urinary tract which causes problems in urinary tract infection example urinary tract infection like dysuria and bleeding including passage of urine. The waste material when it is not dissolved completely in urine and then it obstruct urinary path then it form stone in modern science [1-5], which may be present in kidney, ureter and urinary bladder. The Aśmarī (urolithiasis) mainly formed by calcium which is due to lack of citrate, oxalate, carbonate which is not dissolved in the urine. The low level of pyrophosphate and magnesium also causes Mūtrāśmarī. This article aimed to deal with Āyurveda and prospective of modern aspect, its complications and management of treatment [5-8]. The article presents symptoms, pathogenesis, symptoms and management modalities of Mūtrāśmarī along with conduct of life.

Definition

Urolithiasis is derived fom two words Uro and lithiasis, it means stony concretions in the kidney, urinary tract that is ureter and urinary bladder, low intake of water, disturbed life style contaminated food and water, salty food consumption and packed soup which is associated of salty and spicy things which may be causative factor of disease. Geographical condition, heredity and socio -economic condition also play vital role to word the disease.

Pūrvarūpa

Mūtrāśmarī mainly possese pain in flank region, dysuria, haematuria burning sensation during micturition in urinary tract. The prevalence of disease mainly occur in urinary system.

Samprāpti (Pathogenesis of Aśmarī as per Āyurveda):

Aśmarī involve development of the calculus as a foreign body inside the urinary system that is kidney, ureter and urinary bladder and kidney.

Āhāra-vihāra mithyā without śodhana karma-

Vāta and Kaphadoṣasammūrchanā

Vitiation of Ślesmā

Vitiated Śleṣmā mixes with Bastigata-mūtra-duṣti of basti turn into Aśmarī

Mūtrāśmarī in Mūtravahasrotasa

Pathogenesis as per modern science

Urinary saturation

Super saturation

Nucleation

Crystal growth

Deposition of calcium (crystal aggregation)

Formation of stone

Obstruction in urinary pathway that is in kidney, ureter and urinary bladder

(It is pathogenesis for the kidney stone formation)

It is believed that dries up of urine by Vāyu, the calculus development in the urinary system leading to formation of Aśmarī. Urinary calculus is a stone like body composed of urinary salts bound by together by a colloid matrix.

Classification aspect of Ayurveda

In Āyurveda science, there are four types of calculus as follows,

- 1. Vātaja
- 2. Pittaja
- 3. Kaphaja
- 4. Sukraja

Classification as per modern science

There are four types of urinary calculus based on morphology and chemical constituents

- 1. Calcium oxalate calculus
- 2. Uric acid calculus
- 3. Phosphate / Cysteine calculus
- 4. Mixed calculus

Various types of Mūtrāśmarī and their description

- Vātāśmarī-severe pain during urine passage and stools passage, hard dusty and rough stones.
- 2. Pittāśmarī-sucking pain, burning sensation, reddish yellow and blackish stones.
- 3. Kaphajāśmarī -dysuria, incising and prickling pain, white and unctuous and big size stones.
- 4. Śukraja-aśmarī-Mainly found in adults, frequent coitus or coitus interruption swelling and lower abdomen pain

The modern approach for treatment:

- 1. Conservative treatment:
- Increased fluid intake to dilute the urine
- Specific antibiotic to prevent and cure infection
- Adequate balanced diet eg. Vitamin A, diet quantity
- 2. Non operative mechanical methods –
- ESWL
- Ultrasonic lithotripsy
- PCNL
- 3. Surgical treatment:
- Pyelolithotomy
- Nephrolithotomy

In Ayurvedic method of treatment, Kwātha, Kṣīra, Yavāgu, Vaṭī and Kṣāra, etc. are given for the management of Aśmarī [8-12].

Investigations

- CBC
- SERUM CALCIUM
- SERUM PHOSPHORUS
- URINARY CALCIUM
- KFT
- LFT
- RBS
- CHEST X- RAY
- URINE R/M
- USG WHOLE ABDOMEN ESPECIALLY KUB

Āvurveda management of Mutrāśmarī

Ācārya Susruta, Caraka and Vāgbhaṭṭa and other mentioned several type of approach for the management of Aśmarī such as Śamana therapy, Śodhana therapy Kṣāra, Pittāśmarī and Śukrāśmarī therapy.

The basic line of treatment aimed various aspect mentioned.

- 1. **Aśmarī Kwātha**: Kwātha is quite beneficial for Mūtrāśmarī it help to reduced symptoms such as pain, burning micturition haematuria and dysuria
- Gokṣurādi guggulu- Gokshuradi yoga posseses diuretic and lithotriptic qualities. It also offer shooting, cooling, and diuretic properties.

This formulations help to relieve symptoms such as Nābhivednā, Bastivednā and Mūtra-dhārāṇa-sañga and Sarudhira-mūtratā.

Some important therapies in mutraAśmarī

- 1. Śamana therapy -administration of herbals drug and herbals formulation offerings analgesic, diuretic and linthnotroptic properties. Varuṇa, Gokṣura, Śilājatu, Vīrataru, Brhatī used in renal calculi.
- 2. Śodhana therapy- Pre-Pañcakarma, āntarika and Bāhya snehana, Swedana and other Pañcakarma procedures. Saindhawāditaila- niruhavasti and Bṛṣyādi-sthāpanavasti are recommended in renal calculi.
- **3. Kṣāra therapy** –Kṣāra act as diuretic, lithotriptic and alkalizer. Palāśa kṣāra ad Yava kṣāra used for this.
- 4. Vātāśmarī treatment –Intake of decoction prepared from Vasuka, Śatāvarī, Gokṣura, Brāmhi, Ārtagala, Kubjaka, Bhallūka and Varuṇa used to treat Vātāśmarī.
- Pittāśmarī- Intake of decoction prepared from Kuśa, Kāsa, Sara, Śatāvarī, Pāṣāṇabheda, Vārāhī and Pāthā used to treat Vātāśmarī.
- **6. Kaphajāśmarī** -Seminal concretion in urethra removed by the Baḍiṣa Yantra (specific instrument described in Suśruta Sahitā).

Pathyāpathya in Mūtrāśmarī (A)-Pathya in Mūtrāśmarī -

- 1. Fluid intake
- 2. Kulattha daal, soup of rice, Kūṣmāṇḍa Swarasa
- 3. Exercise
- 4. Food rich in vitamin A and Mg etc.
- 5. Disciplinary life style
- 6. Fiber rich diet.

(B)-Apathya in Mūtrāśmarī

- 1. Avoid milk and other dairy products
- 2. Limit salt intake
- 3. Spinach, cauliflower, cabbage and peas
- 4. Excess animal protein and red meat
- 5. Alcohol consumption

Recommended yoga for Mūtrāśmarī -

Yoga is also supportive for the treatment of Mūtrāśmarī. Vajrāsana, Pawanamuktāsana, Uttānapādāsana, Dhanurāsana and Kapālabhāti Prānāyāma may be useful.

Conclusion

Mūtrāśmarī is a disease of urinary system and obstruct urinary path which termed as stone in modern science. The Mūtrāśmarī (urolithiasis) mainly occurs due to calcium deposition which may be associated with lack of citrate and other etiological factors. Most of patients suffered from common symptoms like pain in abdomen, burning micturition and dysuria, while in Āyurveda the management of treatment is herbs, Āyurveda formulations, Kwātha and tablets. The good conduct of life (Āhāra-Vihāra) play important role towards the disease management.

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