

INTERNATIONAL AYURVEDIC MEDICAL JOURNAL







Case Report ISSN: 2320-5091 **Impact Factor: 6.719**

TREATMENT OF VATASHTHILA (BENIGN PROSTATIC HYPERPLASIA) THROUGH AYURVEDIC MEDICINES- A CASE REPORT

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https://doi.org/10.46607/iamj4613012025

(Published Online: January 2025)

Open Access

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Article Received: 08/12/2024 - Peer Reviewed: 29/12/2024 - Accepted for Publication: 09/01/2025.



ABSTRACT

Background: A prevalent issue affecting older men is Benign Prostatic Hyperplasia. Even though prostatectomy is the most effective course of action, conservative management is always favoured. Ayurvedic medicines can help such folks live better lives and relieve their symptoms. In Ayurvedic Samhitas, urinary disorders are mentioned as Mutraghata (Suppression or obstruction of urinary flow). The words Mutra (which refers to urine) and Aghata (which denotes obstruction of the urinary passage) are combined to form the term Mutraghata. Vatashthila is one of the types of Mutraghata. The symptoms of BPH are similar to those of Vatashthila caused by an imbalance of Vata Dosha. In this case study, we demonstrate how Ayurvedic medicines reduced the size of the prostate and the International Prostatic Symptoms Score. Main Clinical Findings: A 65-year-old patient reached the hospital with a complaint of intermittent pain in the suprapubic region and frequent micturition. He disclosed further lower urinary tract symptoms (LUTS), including urgency, dysuria, and nocturia (more than four urinations in the night). Conclusion: BPH is an age-linked disease. Even though surgery is the most effective form of treatment, using Ayurvedic medicines may help to lessen the symptoms and improve overall quality of life. After taking Ayurvedic treatment, the patient was relieved from symptoms, and the prostate became normal in size.

Keywords: Benign Prostatic Hyperplasia, Vatashthila, Ayurvedic medicines, Ayurveda

INTRODUCTION

Benign prostatic hyperplasia (BPH) is the most common disorder of the endocrine gland. Although seldom life-threatening, BPH can have a significant impact on the ageing male's quality of life. Within the majority of men affected, the disease produces urinary symptoms that are slightly inconvenient. In others, however, the presence of more bothersome symptoms or the event of more serious sequelae ends up in therapeutic intervention. Although surgical removal of the obstructing prostatic tissue offers the very best probability of symptomatic improvement, less effective medical therapies are attractive to some patients because they have less risk In India, 40% of cases of BPH patients between the ages 60-69 years present with Lower Urinary Tract Symptoms (LUTS). Symptoms of urinary frequency and urgency decreased force of the urinary stream, hesitation in initiating flow, a sensation of incomplete emptying and nocturia occur to variable degrees. These clinical features may be separated into two main groups: those due to obstruction (slow stream and hesitancy) and those due to detrusor instability (urgency and urge incontinence). BPH is diagnosed through careful evaluation of LUTS, physical examination, IPSS survey (The International Prostate Symptom Score), Ultrasonography and other tests like Prostate-specific antigen estimation. In Ayurveda, BPH can be co-related with Vatashthila, one of the types of *Mutraghata* (urinary retention). In this condition, due to aggravated Vatadosha (Apanavata), it gets localised in between Basti (urinary bladder) and Guda (Rectum and Anus), producing a dense fixed firm glandular swelling called Vatashthila owing to Vinmutrasanga (obstruction of faeces and urine) with Adhmana (flatulence) and Ruja (Pain) in Basti pradesha (Suprapubic region).² This disorder closely resembles BPH because of its similarities in signs and symptoms and its anatomical considerations. In this perspective, an herbal compound's impact on obstructive BPH and prostate size was examined to assess its safety and effectiveness.

Patient Information:

A 65-year-old male patient came to the *Agada Tantra* OPD of Rajiv Gandhi Govt. Post Graduate Ayurvedic College & Hospital, Paprola (Himachal Pradesh) India on 24 October 2021. His wife accompanied him during her visit to the hospital OPD.

Clinical Findings:

The patient presented with Intermittent pain in the suprapubic region, frequent micturition, dysuria, hesitancy, nocturia (>4 times a day) and disturbed sleep. He had a history of retention of urine 6 months back. He received treatment from another hospital and was relieved for a few days. After some months, he again got complaints of intermittent pain in the suprapubic region, frequent micturition, dysuria, hesitancy, nocturia and disturbed sleep. With these complaints, he came to our hospital for Ayurvedic treatment. The patient has no significant past history of any chronic disease, trauma or surgical interventions. No family history is seen.

Personal History:

Appetite: Normal Thirst: Normal Sleep: Disturbed

Urine: Frequent micturition

Stool: Irregular
On Examination:

General Condition: Anxious, mild dehydration present, Afebrile, Pulse Rate—94/min, regular.

Vitals: Normal

Systemic examination of the CVS/ Nervous/ Respira-

tory system revealed no abnormality. P/A (per abdomen): Bladder distended

Ashtavidha Pariksha:

Nadi: Vata pittaja

Mala (Stool): Baddha (hard)

Mutra(urine): Swalpa-Baddha Vedanayukta

Jihwa (Tongue): Shushka, Ruksha Shabda (Sound): Clear and audible

Sparsha (Touch): Tender on painful areas

Drika (Eye): Normal

Akriti (Stature): Normal Laboratory Examination:

The baseline investigation data includes mild leucocytosis, anaemia, normal liver and kidney function,

normal plasma and urine electrolytes, normal urinalysis, and a normal Prostate-specific antigen (PSA).

Timeline Treatment plan

Treatment plan and follow-up: Table no. 1

Date	Patient Details	Treatment Given
28 July,2021	Intermittent pain in the suprapubic region, frequent micturition, urgency, dysuria, nocturia and disturbed sleep	 Kanchanara Guggulu (500mg) 2 tab. Three times a day with lukewarm water Tab. Himplasia 1tab three times a day Varunadi Kwatha 15ml twice a day with an equal amount of water
4 September,2021	Improvement in the signs and symptoms, decreased urgency, dysuria	 Kanchanara Guggulu (500mg) 2 tab. twice a day with lukewarm water Tab. Himplasia 1tab three times a day Varunadi Kwatha 15ml twice a day with an equal amount of water
10 October, 2021	Significant improvement in the signs and symptoms	 Kanchanara Guggulu (500mg) 2 tab. twice a day with lukewarm water Tab. Himplasia 1tab three times a day Varunadi Kwatha 15ml twice a day with an equal amount of water
27 Jan,2022	The patient came after 2 months with a USG report and found that increased prostate size became normal in size.	-

Table 2

Blood:	TLC-9000/cumm, DLC-N-40%M-0%,L-50%,E-10%,B-0%, Hb-10g%
Liver function test	Total bilirubin-0.4 mg/dl, Direct bilirubin-0.1 mg/dl, SGPT-34 IU/L, SGOT-38 IU/L, Alkaline phosphatase-215 IU/L, Serum Albumin- 3.54 g/dl
Renal function test and electrolytes	Serum Creatinine-0.8mg/dl, Blood urea-24.4mg/dl. Plasma electrolytes-Na-132mmol/l, K- 4.4mmol/l, Cl-8.7mg/dl, Phosphate-3.6 mg/dl. Urine electrolytes-Na-110 mmol/l, K-28.8 mmol/l, Cl-142 mmol/l, Cal-3.4 mg/dl, Phos-6.2 mg/dl
Urinalysis	Urobilinogen-0.4 mg/dl, bilirubin -nil, Ketone-nil, Glucose-nil, pH-8.5, Sp.gr-1.005, puscell-3-7hpf/cu mm
Prostate Specific Antigen	1.4ng/ml

Table 3
Evaluation of IPSS score and USG:

Assessment particu-	Baseline	4-09-21	10-11-21	27-01-22
lars	Day 0 (28-07-21)	(After ap-	(After ap-	(After approx. 6
		prox. 1 month)	prox. 3 months)	months)
IPSS				
Incomplete Emptying	3	2	2	1
Frequency	3	2	1	1
Intermittency	2	2	1	1
Urgency	2	1	1	0
Weak Stream	1	1	0	0
Straining	1	1	0	0
Nocturia	2	2	1	1
Quality of life due to	2	2	1	1
Urinary symptoms				
Ultrasound	The ultrasound of the whole abdomen re-			The prostate is normal
	vealed Benign Prostatic Hypertrophy grade-			in size.

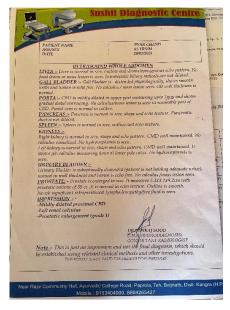


Fig.1 Before Treatment

Diagnostic Assessment:

The patient was diagnosed with Vatashthila depending on the clinical signs and symptoms based on the presenting complaints, Urine Analysis, and Ultrasound Report. The case was diagnosed as BPH (Grade 1) at the time of the first visit, followed by reassessment after 6 months of treatment. The

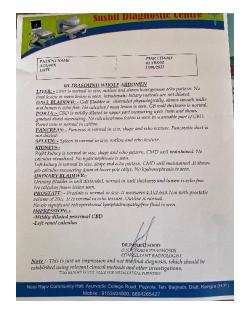


Fig.2 After Treatment

subjective parameters were chosen from the International Prostate Symptom Score (IPSS) for assessment.

Therapeutic Interventions:

The treatment protocol was selected based on the *Ayurveda* principle and *Sutras* confined to the drug's pharmacological actions. The detailed drug interven-

tion protocol is elaborated in Table No. 1. The patient administered Kanchanara Guggulu (500mg) 2 tabs three times a day with lukewarm water, Tab Himplasia 1 tabs three times a day, and Varunadi Kwatha 15 twice a day with equal amounts of water.

Follow-up and outcomes:

Within one month, the patient had a noticeable improvement in symptoms like incomplete emptying, frequency, intermittency, urgency and nocturia. He was instructed to take the medicines for the next 6 months. The last visit of the patient was on Jan 27, 2022, and all his symptoms disappeared, and the ultrasound report revealed that the prostate was normal in size. [Figure 1-2]

DISCUSSION

According to *Ayurveda*, the vitiated *Apana Vata* causes *Sthira*, *Unnata* (elevated) *Astheelavata* when it occupies the region between the rectum and the urinary bladder (stone-like growth). This growth then causes obstructions to the passage of urine, flatus, and faeces, resulting in suprapubic discomfort. This condition is linked to the symptoms of BPH disease.

Discussion on the probable mode of action of formulation (Kanchanara Guggulu)

Its specific indication is in *Gandamala*, a severe form of Apache, Arbuda, Granthi, Vrana, Gulma, Kushtha and Bhagandara³. BPH is also a type of Granthi. The overall pathological phenomenon of BPH also shows the same kind of fibrotic growth in prostatic parenchyma. Most of the drugs present in Kanchanara Guggulu have Katu Rasa, Ruksha and Laghu Guna, Ushna Veerya, Madhura Vipaka and the property of Kapha-Vata Hara⁴. A significant proportion of Madhura, Tikta and Kashaya Rasa containing drugs is also present. Due to Tikta, Kshaya Rasa, Laghu, and Ruksha Guna of Kanchanara Guggulu, it subsides aggravated Kapha dosha. Ushana virya causes Vata and Kapha dosha to diminish. Its Kashaya and Madhura rasa qualities reduce Pitta dosha. Ruksha guna promotes Agni due to Ushana Virya and Laghu guna, and due to Ushana, Tikshna, Laghu guna, and Ushana Virya, which eliminate Srotorodha and vitiate Vata and Kapha. Properties like Rasayana, Vayasthapana, Medohara, Krimighna, Lekhana, Shothaghna and Vata-Kapha Shamana are helpful in acting on various changes in BPH.5

Ingredients:

Drug	Properties
Kanchanara (Bauhinia variegata)	Major components- β-sitosterol, lupeol, kaempferol 3-
	glucoside.
	The extract of Kanchanara stem bark has shown anti-
	cancerous activity against
	epidermal carcinoma. It has also demonstrated an excellent
	effect on goitre and other nodular fibrotic growths. ⁶
Guggulu (Commiphora mukul)	Major component – Guggulsterone
	• It inhibits tumour cell proliferation ⁷
Varuna (Crataeva nurvala)	Major component- Lupeol
	• It is used to treat hypercrystalluria, hyperoxaluria,
	and hypercalciuria. Additionally, lupeol has antipy-
	retic, analgesic, and anti-inflammatory properties ⁸ .
Tejapatra (Cinnamomum zeylanicum)	Essential oils of <i>Tejapatra</i> are used as Carminative, Anti
	flatulent, Diuretic ⁹
Trikatu	Pippali, Maricha, and Shunthi are typical complementary

	ingredients that have the advantage of increasing bioavaila-
	bility and enhancing the absorption of the other active ingre-
	dients. They also guard against adverse digestive effects.
Amalaki (Emblica officinalis)	It exhibits anti-inflammatory, antipyretic, antioxidant, anti-carcinogenic and antioxidant, anti-carcinogenic antimutagenic effects. 10

Vibhitaki (Terminalia bellerica)	Its extract exhibited anti-proliferative effects in several cancer cell lines, including Shiongi 115, breast cancer MCF-7, prostate cancer PC-3 and DU-145 cells ¹¹
Haritaki (Terminalia chebula)	It possesses antibacterial, antifungal, antiviral, antidiabetic, antimutagenic, antioxidant, antifungal, antiulcer and woundhealing <i>properties</i> . 12
Ela (Elleteria cardamomum)	Major components- α- & β- terpeneols, camphene, nerol, saibenene etc.
	Cardamom seeds have various pharmacological effects, including anti-inflammatory, anti-hypertensive, anti-diabetic, laxative, antispasmodic, antimicrobial, antiplatelet aggregation, and anticancer properties. ¹³
Dalchini (Cinnamomum zeylanicum)	C. zeylanicum and its constituents act as anti-inflammatory, anti-microbial, anti-cancer, anti-mutagenic, anti-tyrosinase, and anti-diabetic agents. 14

Most of Kanchanara Guggulu's ingredients have antiandrogenic, anti-inflammatory, antibiotic, antimutagenic, anti-fibroblastic, and anti-anticancerous properties. Thus, they help treat benign prostatic hyperplasia.¹⁵

Probable mode of action of Varunadi Kashaya:

Varunadi Kwatha, the formulation explained by Chakradatta, 16 has all the necessary qualities, including Kaphahara, Lekhana, and Mutrala. Varuna is the primary component of Varunadi Kwatha used in kaphavikara, medo vikara, mandagni, Urusthambha, Shirashoola, Gulma, and antravidradhi. By their Ruksha Guna, Katu Vipaka, and Ushna Virya, the compound's constituents balance Kapha Dosha. Ushna Virya also exhibits "Lekhana" properties. Famous Lekhana Dravya, or Yavakshara, one of its components, enhances the Lekhana Karma once again. Ingredients with Vatanulomana, Shothahara, and Mutrala characteristics aid in alleviating pain and Sthanika Shotha. The Jwarahara activity of Pashanbheda, Varun, and Shunthi also relieves Jwara. Drugs with deepana properties help to boost Agni, which

further inhibits the growth of *Ama* at *Jatharagni* levels. Due to their "*Sheeta Virya*" and "*Madhura Rasa*," the compound's remaining medicines have a *Mutrala* (diuretic) effect.

Due to its triterpene content, *Varuna* can improve the tone of the detrusor or the musculature of the urinary bladder, and it has anti-infective qualities¹⁷.

Acharya Charaka in Sutra Sthana has described "Ksharapunstavaupghatinamshreshtha.¹⁸"

The testosterone appears to be the *Pumsatva Shakti*. The fact that every unborn tends to be a female until it is stopped by testosterone, as stated in the *Vishmu Purana* and confirmed in more recent times by Campbell, indicates that testosterone might be compared to *Pumsatva- Shakti*. The prostate has become larger as a result of this testosterone. By inhibiting the pathogenesis of BPH and having an antiandrogenic impact, *Ksharas* may be able to lower it. So, *Varunadi Kashaya* (formulation) is a combination of drugs which help treat *Vatashtheela* (BPH).

Probable mode of action of Himplasia (Himalaya):

Himplasia contains Tribulus terrestris, Caesalpinia bonducella, Crataeva nurvala, Areca catechu, Asparagus racemosus and *Akika pishti*.

A supplement called Himplasia supports the best possible urogenital, reproductive, and bladder health. It is a non-hormonal herbal combination that supports healthy prostate function and efficient reproduction.

- Gokshura (Tribulus terrestris) can help with BPH, genitourinary infections, painful urination, hematuria, and dysuria. Because of its Mutrala (diuretic) and Sita (chill) qualities, Gokshura provides treatment for benign prostatic hyperplasia (BPH) or an enlarged prostate gland. This aids in increasing urine production and decreasing urination-related swelling and burning.
- Caesalpinia bonducella has diuretic, antibacterial, and anti-inflammatory effects.
- Asparagus racemosus is a diuretic useful for symptoms of obstructive uropathy. It possesses immunomodulatory effects, which are beneficial in preventing the recurrence of prostatitis
- Areca catechu (*Puga*) prevents prostatic cells from converting testosterone into dihydrotestosterone, the primary sex hormone that causes BPH.
- Crataeva nurvala (*Varuna*) increases the overall bladder tone and alleviates post-prostatectomy atony of the bladder. It has a potent antiinflammatory effect that reduces pain brought on by BPH.¹⁹

CONCLUSION

Kanchanara Guggulu, Varunadi Kashaya and Tab Himplasia may have had outstanding results. Due to their synergistic effects on hormonal and physiological levels as a result of their antiandrogenic, anti-inflammatory, anti-biotic, anti-mutagenic, antispasmodic, anti-fibroblastic, and other growth factor properties, these formulations work by affecting the patients' psychological aspects as well. The phytoestrogens present in these formulations may play a role in reducing and inhibiting prostate size. So, at the end of the study, it is assumed that Kanchanara Guggulu, Varunadi Kashaya and Tab. Himplasia is quite effec-

tive in managing the symptoms of *Vatashtheela* (BPH).

Declaration of Patient Consent:

Authors certify that they have obtained the patient consent form, in which the patient has given his consent for reporting the case along with the images and other clinical information in the journal. The patient understands that his name and initials will not be published, and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

REFERENCES

- 1. Unnikrishnan R, Almassi N, Fareed K. (2017). Benign prostatic hyperplasia: Evaluation and medical management in primary care. Cleve Clin J Med., 84(1), 53-64
- Sushruta STT. (2001). Uttaratantra, Chaukhambha Sanskrita Sansthana, 787.
- Sharangdhara, Sharangdhara Samhita, Hindi Commentary, by Prof K.R.Srikantha Murthy .Madhya khanda 7/95-100, Varanasi: Chaukhambha Orientalia; 2009.
- 4. Danish Javed et al. UJAHM 2015, 03 (01): Page 67-74
- Danish Javed et al. A Clinical study to evaluate the effect of Kanchnar Guggulu and Virtarvadi Gana Kashaya in management of BPH (Benign Prostate Hyperplasia) Unique Journal of Ayurvedic and Herbal Medicines, 03 (01), Jan-Feb 2015 Page 67-74
- Danish Javed et al. A Clinical study to evaluate the effect of Kanchnar Guggulu and Virtarvadi Gana Kashaya in management of BPH (Benign Prostate Hyperplasia) Unique Journal of Ayurvedic and Herbal Medicines, 03 (01), Jan-Feb 2015 Page 67-74
- Danish Javed et al. A Clinical study to evaluate the effect of Kanchnar Guggulu and Virtarvadi Gana Kashaya in management of BPH (Benign Prostate Hyperplasia) Unique Journal of Ayurvedic and Herbal Medicines, 03 (01), Jan-Feb 2015 Page 67-74
- 8. Singh S, Bani S, Singh GB, Gupta BD, Banerjee SK, Singh B. Anti-inflammatory activity of Lupol. Fitoterapia 1997; 68: 9-16.
- 9. Showkat RM, Mohammed A, Kapoor R. Chemical composition of essential oil of Cinnamomum tamala Nees and Eberm leaves, Flavour Fragrance J 2004;19:112–4.
- Zhang YJ, Nagao T, Tanaka T, Yang CR, Okabe H, Kouno I. Antiproliferative activity of the main constituents from Phyllanthus emblica. Biol Pharm Bull 2004; 27: 251-5.
- 11. Kaur S, Michael H, Arora S, Harkonen PL, Kumar S. The invitro cytotoxic and apoptotic activity of Tripha-

- la--an Indian herbal drug. J Ethnopharmacol 2005; 97: 15-20.
- 12. Gupta et al. <u>Biological and Pharmacological Properties of Terminalia Chebula Retz.</u> (Haritaki)- An Overview Int J Pharm Pharm Sci, Vol 4, Suppl 3, 62-6
- 13. Danish Javed et al. A Clinical study to evaluate the effect of Kanchnar Guggulu and Virtarvadi Gana Kashaya in management of BPH (Benign Prostate Hyperplasia) Unique Journal of Ayurvedic and Herbal Medicines, 03 (01), Jan-Feb 2015 Page 67-74
- 14. Weerasekera Asel Chandula et al. Cinnamomum zeylanicum: Morphology, Antioxidant properties and Bioactive compounds
- 15. Danish Javed et al. A Clinical study to evaluate the effect of Kanchnar Guggulu and Virtarvadi Gana Kashaya in management of BPH (Benign Prostate Hyperplasia) Unique Journal of Ayurvedic and Herbal Medicines, 03 (01), Jan-Feb 2015 Page 67-74

- Chakradatta of ShriChakrapanidatta with Vaidyaprabha Hindi Commentry by Dr. IndradevTripahi, Chaukhambha Sanskrit Bhawan, Varanasi, Edition: Reprint 2010.
- Ankur Singhal & Komal Gupta: A Clinical Study with Varunadi Kwath and Gokshuradi Guggulu in The Management of Mutraghata w.s.r.t. BPH IAMJ: JULY 2017, 2407
- 18. PtKasinath Sastri, Charaka Samhita of Agnivesa, Sutra Sthana 25/40, Chaukhambha Sanskrit Sansthana, Varanasi, Eight edition: 2004; pp319
- 19. Sahu Manoranjan et al. Clinical evaluation of Himplasia in Benign Prostatic Hyperplasia: An Open Clinical Trial [Medicine Update (2003): (11), 1, 75-78]

Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Sukriti Sharma et al: Treatment of Vatashthila (Benign Prostatic Hyperplasia) through Ayurvedic Medicines- A Case Report. International Ayurvedic Medical Journal {online} 2025 {cited January 2025} Available from: http://www.iamj.in/posts/images/upload/280_287.pdf