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Case Report

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EFFECT OF AYURVEDIC DRUGS ON VRIKKASHMARI – A CASE STUDY

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ABSTRACT

Since ancient time Ashmari has been mentioned in Ayurvedic texts. Ashmari is a disease related to the urinary system (Mutravaha Srotas). Mutrashmari is one among of them which has been delineated as a Mahagada in Ayurveda. It possesses symptoms such as Jwara (Fever), Basti Pida (Discomfort and pain in bladder), Aruchi (Anorexia), Mutrakrichha (Difficulty in micturition), Bastishira Vedana (Pain in Urethra), Mushka Vedana (Pain in testicles) and Shepha Vedana (Pain in penis) have been described in Ayurvedic classical texts.

An 8-year-old male child patient visited to *Ayurvedic* hospital at Jaipur, with complaint of lumber region abdominal pain. The USG reported calculus measuring 5 mm in size seen in right kidney with normal functioning of vitals. The Mankoski pain scale was 4/10. The patient was treated with *Gokshuradi Guggulu* 2 BD (two times in a day), *Ashmarihara Kashaya* 20 ml BD, Capsule Drain out 1BD and the combination of *Shuddha Tankana* 250 mg and *Panchakola Churna* 250 mg in the powder form, for a period of one month at 7 days follow up. The patient got relief in sign and symptoms and USG report showed no evidence calculi in middle calyx of right kidney.

Keywords: Mutrashmari, Mutrakrichha, Bastishira Vedana, Gokshuradi Guggulu, Ashmarihara Kashaya, etc.

INTRODUCTION

Ayurveda is considered Mutrashmari, which is one of the common and distressing diseases. Mutrashmari are present in humans at any age. According to Ayurvedic classics the structure which resembles stone is called as *Ashmari*¹ or the one which is converted into a hard mass resembling a stone (Ashma) is called Ashmari². This disease causes many complications including renal failure, hypertension, oedema and severe infections related to the urinary tract. It is one among the Astamahagada³, formed due to vitiation of Mutravaha Srotas. Ashmari has been mentioned in all ancient texts of Ayurveda. The process of stone formation with their detailed symptoms described by Acharya Sushruta. One is by the stagnation and super saturation of the urine and other by crystallization of the crystalloids in the urine.⁴ Acharya described the various types of Ashmari viz. Vataja Ashmari, Pittaja Ashmari, Kaphaja Ashmari and Shukrasmari.⁵ Acharya Charaka mentioned Ashmari as one of Basti Marmashrita Vyadhi and classified on the basis of their consistency. In modern science *Ashmari* is compared with Urolithiasis/Nephrolithiasis which is stone like structure anywhere in the *Mutravaha Srotasa*. Among all types of stones, Calcium stones are most commonly found. Between 5 and 10 % of the human population suffer from urinary stone disease during their lifetime and of these cases 2-3 % are children's⁶. In *Ayurveda* one of the first choice of treatment is *Aushadhi Chikitsa* then surgical management.⁷

Samprapti of Ashmari-

According to *Sushruta* due to *Apathya Sevana* and other etiological factors (*Viruddha Vihara*), having the vitiation of *Kapha Dosha* of *Mutra* leads to formation of *Aam* and results in *Mandagni*, *Kapha* gets accumulated in *Vrikka* and action of *Ushma* of *Pitta*, *Shoshana* by *Vata Dosh* leads to dries up the *Mutra*, the vitiated *Kapha Dosha* in the *Vrikka Bhaga* harden components lodged in. *Mutra Ashmari* is formed in the form of gravels and have become the obstruction in *Mutravaha Srotas*.⁸

Apathya Sevan and other etiological factors (Viruddha Vihara)

Table No. 1
Samprapti Ghataka

1 1 1		
Dosha	Tridosha (Kapha Predominance)	
Dushya	Mutra	
Agni	Jathragnimandya	
Srotas	Mutravaha Srotas	
Adhishthana	Vrikka	
Srtodushthi	Sanga	
Sadhyasadhyata	Krichhasadhya	

Case History

In institutional hospital 8-year-old male child came in OPD with the complained abdominal pain since last 7 days back and radiating to lower groin region, difficulty in micturition and pain aggravation more in morning time.

Past treatment history:

Earlier he has went to Haribux Kanwatia hospital 5 days back with the complaint of abdominal pain but did not get relieved and satisfied with treatment and consultant advised his parents for Surgery operative procedure, but parents did not want to undergo surgery. For better treatment he rushes to *the Ayurvedic* management system. According to *Ayurvedic* perspective the patients were diagnosed as *Vrikkashmari*. Ultrasonography reveals right nephrolithiasis with 5 mm stone in middle calyx for 7 days back. Diet history revealed that his food intake was irregular in terms of quality of quantity. Pulse rate 84 beats minute, temperature afebrile, respiration rate 16 times

minute, and no oedema and swelling in body part. There was no organomegaly on examination of abdomen, but tenderness elicited in right abdominal flanks. The Mankoski pain grading was 4/10. He was advised for internal medicine- Gokshuradi Guggulu 2 BD, Ashmarihara Kashaya 20 ml BD, Cap. Drain out 1BD and a combination of Shuddha Tankana 250 mg, Panchakola Churna 250 mg BD in powder form. All medicine was given before meals in both times for 7 days. During his first follow up, it was noticed that his Mankoski pain scale subsided 2/10 in abdomen and advised to continue the internal drug therapy and following the Pathya-Apathya regimen. And during the second follow up again noticed that his pain Mankoski scale subsided 0/10 and there were not any new complaints. He was advised to repeat the Ultrasonography KUB. USG was done on 20/02/2020. The report reveals that, there was not any calculi in right kidney, and was efficiently doing his regular activity, patient did not feel any discomfort/pain.

Contents of Drugs-

Table No. 2

Gokshuradi Guggulu

S. No.	Name of Drug (Botanical Name)	Dose
1.	Gokshura (Tribulus terrestris)	28 Bhaga
2.	Guggulu (Comiphora mukul)	7 Bhaga
3.	Triphala	3 Bhaga
4.	Trikatu	3 Bhaga
5.	Mustaka (Cyprus rotundus)	1 Bhaga

Table No. 3

Ashmarihara Kashaya

Each 10 ml Kashaya (liquid) contains extract derived from-

S. No.	Name of Drug (Botanical Name)	Dose
1.	Pashanabheda (Bergenia ligulata)	5.90 ml
2.	Shobhanjana (Moringa pterosperma)	5.90 ml
3.	Papita- Erandakarkati (Carica papaya)	5.90 ml
4.	Shatavari (Asparagus racemosus)	5.90 ml
5.	Gokshura (Tribulus terrestris)	5.90 ml
6.	Varuna (Crataeva nurvala)	5.90 ml
7.	Darbha (Kusha) (Desmostachya bipinnata)	5.90 ml
8.	Kasa (Sachcharum spontaneum)	5.90 ml
9.	Dhana (Oryza sativa)	5.90 ml
10.	Punarnava (Boerhavia diffusa)	5.90 ml

11.	Guduchi (Tinospora cordifolia)	5.90 ml
12.	Apamarga (Achyranthus aspera)	5.90 ml
13.	Khira (Trapusha) (Cucumis sativus)	5.90 ml
14.	Jatamanshi (Nordostachys Jatamanshi)	11.80 ml
15.	Khurasani Yavani (Hyoscymus niger)	11.80 ml
16.	Jala (Water)	Q.S.

Table No. 4

Capsule Drain Out (500 mg)

S.No.	Name of Drug (Botanical Name)	Dose
1.	Anantamoola (Hemidesmus indicus)	40 mg
2.	Gokhru (Tribulus terrestris)	40 mg
3.	Kulthi (Dolichos biflorus)	40 mg
4.	Pashanabheda (Bergenia lingulata)	100 mg
5.	Varuna (Crataeva nurvala)	40 mg
6.	Sheetal Mirchi (Capsicum annum)	40 mg
7.	Kakdi Beeja (Cucumis sativus)	40 mg
8.	Daru Haridra (Berberis aristata)	40 mg
9.	Mooli Kshara (Raphanus sativus)	40 mg
10.	Shubhra Parpati	20 mg
11.	Yava Kshara	20 mg
12.	Punarnava (Boerhavia diffusa)	20 mg
13.	Shunthi (Zingiber officinale)	20 g

Table No. 5

Panchakola Churna

S. No.	Name of Drug (Botanical Name)	Dose
1.	Pippali (Piper longum)	1 Bhaga
2.	Pippalimula	1 Bhaga
3.	Chavya (Piper retrofractum)	1 Bhaga
4.	Chitraka (Plumbago zylanicum)	1 Bhaga
5.	Shunthi (Zingiber officinale)	1 Bhaga

Table No. 6

Pathya and Apathya

Pathya	Apathya
Yava, Mudga, Jeerna Shali and Cucumber, Kulattha, Adraka.	Shushkanna, Kharjura and Jambu, Meat, Egg etc.
Langhana, Avgaha Sweda, Vamana, Basti and Virechana	Ativyayama, Vegoudirana, Mutravegavarodha and Krodha
	etc.

Table No. 7

Mankoski pain scale9

0	Pain free
1	Very minor Annoyance- occasional minor twinges. No medication needed
2	Minor Annoyance- occasional strong twinges. No medication needed
3	Annoying enough to be distracting, mild painkillers take care of it (Aspirin, Ibuprofen)
4	Can be ignored if you are really involved in your work, but still distracting mild painkiller remove pain for 3-4

	days.	
5	Can't be ignored for more than 30 minutes. Mild pain killer ameliorate pain for 3-4 hours.	
6	Can't be ignored for any length of time, but you can still go to work and participate in social activities. Stronger	
	pain killers (Codeine, narcotics) reduce pain for 3-4 hours.	
7	Makes it difficult to concentrate, interfering with sleep. You can still function with effort. Stronger painkillers are	
	only effective.	
8	Physical activity is severely limited. You can read and converse with effort. Nausea and dizziness set in as factors	
	of pain.	
9	Unable to speak. Crying out or moaning uncontrollably- near delirium.	
10	Unconscious. Pain makes you pass out.	

Result

Table No. 8

Reports-

Scanning Date	Clinical features	Impression with USG report
29/01/2020	Pain in lumber region	Calculus measuring 5 mm in Right kidney.
		(Right renal calculi)
03/02/2020	Pain in Abdomen and radiating to downward	Calculus measuring 5 mm in Right kidney.
	Grading score 4/10	(Right renal calculi)
10/02/2020	Pain subsided grading 2/10	Relief in symptoms.
17/02/2020	Pain subsided with no new complaints. Grad-	Relief in symptom.
	ing score 0/10	
20/02/2020	Pain subsided with no new complaint	No calculus (normal sonography study)

DISCUSSION

Ashmari is considered as Mahagada (major disease) among eight critical and life-threatening diseases. Ayurveda presume the basic fundamental treatment application on the basis of dosh, Dhatu and Mala along with contribution of its attributes presented by its character in the body. Patients of eight years old has dominance of Kapha Dosha and formation of Ashmari is also Kapha Pradhanya, so according to principle of Ayurveda needs Ruksha, Laghu, Kshara and Tikshna Guna dominance character of Aushadhi. Panchkola (five cumulative drugs) is Ushna, Tikshna¹⁰. Due to Rejuvenating, stimulant, expectorant, emollient, aphrodisiac, decongestant properties of Pippali, Anti-catarrhal property of Chavya, appetizer promoting property of Chitraka, expectorant, stimulating property of Shunthi, Panchkola Churna is used for Ama Pachana which is responsible for the Prakopa of Kapha and Vata due to Jathragnimandya¹¹. In Capsule Drain out major content is Pasha*nabheda* and other drugs have the property of *Ruksha*, *Laghu*, *Tikshna* and *Kshara Guna*¹².

Pashanabheda (Bergenia lingulata) is potent antiurolithiatic and diuretic activity due to presence of active component coumarins, flavonoids, benzenoids, lactone, carbohydrate, tannins, phenols and sterols. Agrawal et.al. Proved that T. terrestris has inhibitory action on oxalate crystal formation in artificial induced albino rat and also inhibits the nucleation of calcium oxalate crystal formation¹³. Kshar has Ksharana (diminishing) property, so it destroys the stone with the action of Shuddha Tankana. Ashmarihara Kashaya, Gokshura Churna and Shuddha Tankana (Lekhana) have the property of Tridoshahara, Mutrala and Mutravirechaniya, Ashmaribhedaka and Vranaropana. So, it breaks up the Kapha-Vata Yukta Ashmari (stone), which is the main Dosha and Dushya in the formation of Samprapti of Vrikkashmari/Nephrolitiasis. Also, some drugs have Guru and Snigdha Property, which helps faster healing the wounds.

CONCLUSION

Mutrala and *Ashmaribhedaka* drugs relief all the symptoms of *Ashmari*. Ayurveda drugs breaks the stone and facilitates the elimination of *Ashmari* with following instruction of *Pathya-Apathya* dietary regimen.

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