



AYURVEDIC MANAGEMENT OF ASHMARI VIS-A-VIS UROLITHIASIS – A CASE STUDY

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ABSTRACT

Ashmari is one among the Ashtamahagada. Ashma means stone like Ari enemy. Means it act as enemy to the body. Ashmari resembles the clinical features of Urolithiasis mentioned in the contemporary medical science. In India, 12% in total population suffer from stone diseases. It is one of the common disease conditions worldwide and it is found that Ashmari re-occurs in spite of surgical and palliative intervention which shows the importance of diet and lifestyle in the manifestation of Mutrashmari. It is a single case study a 56-year-old male patient with complaints of severe pain in left in iliac region radiating to front, associated with vomiting. Patient also had a previous history of stone 10 years back in left side for which he underwent lithotripsy. He was approached to GAMC Mysore hospital. The patient was administered Shamanaushadi with Pathya. 80% of symptoms reduced during treatment. Pain was completely reduced with relief in all associated symptoms and also expulsion of calculus at the end of treatment and Patient is apparently normal and no recurrence till the date.

KEY WORDS: Ashmari, urolithiasis, Ayurvedic management

INTRODUCTION

Ashmari is the most common disease seen worldwide. Ashmari is a stone formed in Srotas especially in Mutramarga. In Ayurveda we find reference regarding Ashmari in all Samhitas. It is one among the Mahagadha in contemporary science it is correlated to urolithiasis, In India, 12% in total population suffer from stone diseases¹. The exact cause and mechanism of their formation is still uncertain. Sequence of events take place in formation of urinary stone. Urinary saturation -----> super saturation -----> nucleation -----> crystal growth -----> crystal aggregation -----> stone formation. Many treatments modality is available in contemporary science for the management of urolithiasis. Reoccurrence rate is very high even after proper treatment due to improper diet and lifestyle. In Sushruta it is mentioned that before going to surgical one should try with oral medication like Taila, Ghrita, Paneeya Kshara etc. which poses the properties like Chedana, Bedhanya, Lekhana, Mutrala etc².

Case history

A 56 years male patient presented with complaints of severe pain in left in iliac region radiating to front, associated with vomiting since 15 days. Patient was asymptomatic one month ago. There was an acute presentation of severe pain preceding to long travelling in right iliac region radiating to front side associated with vomiting, lose of appetite. He went to nearby physician, took symptomatic treatment. Physician advised USG it showed 10mm calculi in right kidney and surgery was advised. Patient also had a previous history of stone 10 years back in left side for which he underwent

lithotripsy, now he doesn't want to go for surgery. Then he came to us started with proper medication, after few weeks of treatment stone came out and symptoms got relived.

MATERIALS AND METHODS

Stonvil 2 capsule twice daily, Gokshuradi Guggulu 2 tablets three times a day, Tab Anuloma DS 1 tablet at night for 5 months.

Pathyapathya

Pathya Ahara – Kadali Kanda Rasa daily, Kulatta soup 2 times a week, Gokghura Kashaya with fresh Leafe 3-4 times a week, Darbha + Tulasi Swarasa with Madhu 3-4 times a week, Barley water (Ganji) daily, Kulatta soup 3-4 times a week, Aparmarga juice, Cucumber juice, Nimbu Panaka, Ikshu Rasa, Coconut water, Butter milk, more use of ghee and liquids.

Apathya - Reduce the intake of spices, tomato.

Vihara- Avoid Vegadharana

RESULT:

Patient history:

Patient name – ABC

Age – 56 years

Sex – Male

Marital status – married

Weight – 65kg

Height – 5 feet

Prakruti – Pittavata

Occupation – business (continuous travelling)

Diet – vegetarian

Habits – chewing betel Leafe, tobacco, more frequent use of chikku fruit.

Personal history – not a K/C/O Dm, HTN

Lakshana : subjective criteria

Symptoms	Severity	Duration
Abdominal pain	Severe	Since 15 days
Dysuria	Mild	Since 15 days
Vomiting	Mild	Since 15 days
Obstructed urination	Moderate	Since 15 days

Objective criteria:

Investigation:

Date: 21 August 2021

USG: 10 to 11 mm calculus is seen in distal third of left ureter.

Results after treatment

Assessment criteria	Before treatment	During treatment	After treatment
Symptoms	Severity	Severity	Severity
Abdominal pain	Severe	Slightly reduced	No pain
Dysuria	Mild	Persist	Normal
Vomiting	Mild	Reduced	Reduced
Obstructed urination	Moderate	Mild	No obstruction

Objective criteria:

Stone expelled after treatment hence USG not performed.

DISCUSSION:

Each stonvil capsule contains Punarnava, Saag Beeja, Gokshuradi Guggulu, Apamarga Kshara, Pashanabheda, Shilajatu, Chandraprabhavati. Pashanabheda³ having Bhedana and Lekhana property, Gokshura⁴ contains potassium nitrate in rich quantity which act as an alkalizer, Mutrala indicated in Ashmari. Anuloma DS contains Ajamoda, Jeeraka, Balharda, Yasthimadu, Shunti, Saindhava Lavana, Swarnaksheeri which are having Deepana, Pachana, Lekhana, Bedhana, Anulomana properties hence all above drugs helps in Bedana and expulsion of Ashmari.

Pathya	Action
Durva ⁵	Mutrakrichra relives the obstruction of urine
Tulsi ⁶	Having properties of Parshvasulahara, Ashmarigna
Apmarga ⁷	Due to its Kshara Guna does the Lekhana and Bedhana of Ashmari
Cucumber ⁸	Due its Mutrala property helps in evacuation of Ashmari
Gokshura ⁹	Does the Bedhana of Ashmari
Kadali kanda ¹⁰	Having Ashmari Bedhana property
Ikshu ¹¹	By its mutra property helps in evacuation of Ashmari
Barley ¹²	Having lekhana property there by helps in Ashmari Bedhana
Kulatha ¹³	Having Ashmari Bhedhana property
Narikela ¹⁴	Basti Shodana

Hence all the Pathya advised in present study helps in Bedhana and Anulomana of Ashmari. It is clearly mentioned in Sushruta Samhita that Asamshodana Shilata is one of the prime factors in disease causation hence all the Pathya mentioned above not only breaks the stone but also clear Srotas hence it also prevents the reoccurrence of disease. During the treatment symptoms like pain and nausea reduced on 2nd day and stone was expelled on 30th day (size of the calculi was 1.5cm) and at the end of the treatment symptoms are completely reduced. In the present study medicine are used for symptomatic relief hence it is stopped on the day expulsion of calculi and Pathya continued for 10 days. Patient is apparently normal and no reoccurrence till the date.

CONCLUSION:

Ayurveda mentions that Nidhana Parivargana is the first line of treatment here along medicine diet therapy is advised it also prevents the reoccurrence of disease so it can be concluded that Pathya along with medicine act best.

As it a single case study, same study can be undertaken in large population to see the efficacy and role of Pathya in the management of Mutrashmari.

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