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Management Of Chronic Cystitis (Mutrakrichha) : A Case Report

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Abstract

Chronic cystitis, referred to as "Mutrakrichha" in Ayurveda, is a persistent inflammatory condition of the urinary bladder that often presents with symptoms such as frequent urination, pelvic pain, dysuria (painful urination), and discomfort. 1-5 This case report explores the management of a patient suffering from chronic cystitis using a comprehensive Ayurvedic treatment approach. The report emphasizes the role of herbal formulations like Gokshura (*Tribulus terrestris*), Chandraprabha Vati, Bruhatyadi Kashaya. Additionally, dietary and lifestyle modifications tailored to pacify aggravated Vata and Pitta Doshas were included. The treatment protocol not only provided symptomatic relief but also improved the patient's overall quality of life, demonstrating the efficacy of integrative Ayurvedic care for chronic cystitis .6-10
Keywords: Chronic Cystitis, Mutrakrichha, Ayurveda, Herbal Remedies, Gokshura, Chandraprabha Vati , Bruhatyadi Kashaya

Bruhatyadi Kashaya (Bruhatyadi Kwatha) (Brand name -Sitaram Ayurveda)– Contents

It is a classical Ayurvedic decoction, mainly used in Vata-Kapha disorders, especially respiratory conditions.

Ingredients (Dravyas):

Bruhati (*Solanum indicum*)

Kantakari (*Solanum xanthocarpum*)

Prishniparni (*Uraria picta*)

Shalaparni (*Desmodium gangeticum*)

Gokshura (*Tribulus terrestris*)

These five drugs together form part of the Laghu Panchamoola, which is the basis of Bruhatyadi Kashaya.

Introduction

Chronic cystitis is a recurring inflammation of the bladder, leading to persistent urinary symptoms like frequent urination, pain, and burning sensation. These symptoms can severely impact the patient's quality of life by causing significant physical discomfort and emotional distress. In Ayurveda, chronic cystitis is categorized under Mutrakrichha, a condition that broadly covers urinary disorders marked by painful or difficult urination. According to Ayurvedic principles, this condition arises due to imbalances in Vata and Pitta Doshas. Vata governs the movement of urine, and when disturbed, it causes obstruction and pain, while an aggravated Pitta leads to excess heat, inflammation, and burning sensations in the urinary tract.

Conventional treatments for chronic cystitis generally involve antibiotics and anti-inflammatory drugs that may provide temporary relief but often come with limitations, including the risk of antibiotic resistance and potential side effects like gastrointestinal problems. These treatments primarily focus on symptom relief, without addressing the underlying cause of the condition. As a result, patients often experience recurrent flare-ups, making long-term management challenging. This is where Ayurveda presents a holistic alternative, offering solutions that not only alleviate symptoms but also target the root cause by

balancing the Doshas, detoxifying the body, and strengthening the urinary system.

Ayurvedic treatment for chronic cystitis involves the use of herbal remedies like Gokshura which help reduce inflammation, improve urine flow, Bruhatyadi Kashaya has a soothing effect on the urinary system, which can help reduce burning sensations and discomfort during urination. 13-14 Additionally, classical formulations like Chandraprabha Vati are used to balance the doshas in the urinary system.. Moreover, lifestyle and dietary modifications play a crucial role in managing this condition. A Pitta-pacifying diet, adequate hydration, and stress management through yoga and meditation help prevent recurrences and support overall well-being.12 -15

UTI (Mutrakricchra) – Samprapti Bhanga (By Medicines)

Samprapti Ghataka

UTI Pathology

Gokshura (*Tribulus terrestris*)

Chandraprabhavati

Bruhatyadi Kashaya

Dosha

Mainly Vata-Pitta (sometimes Kapha association)

Vata-Pitta shamaka

Tridosha shamaka (Pitta-Kapha predominance)

Vata-Kapha shamaka

Dushya

Mutra, Rakta, Mamsa

Acts on Mutravaha srotas

Purifies Rakta & Mutra

Clears Kapha-dominant Dushti

Agni

Mandagni leading to Ama

Deepana-Pachana

Agni deepana

Ama pachana

Ama

Present (infection, inflammation)

Ama-hara

Ama-nashaka

Ama-hara

Srotas

Mutravaha srotas dushti

Srotoshodhana (Mutravaha)

Srotoshodhana

Srotoshodhana

Srotodushti

Sanga, Vimargagamana

Relieves Sanga

Breaks obstruction

Clears Sanga

Adhithana

Basti, Mutramarga

Basti shodhana

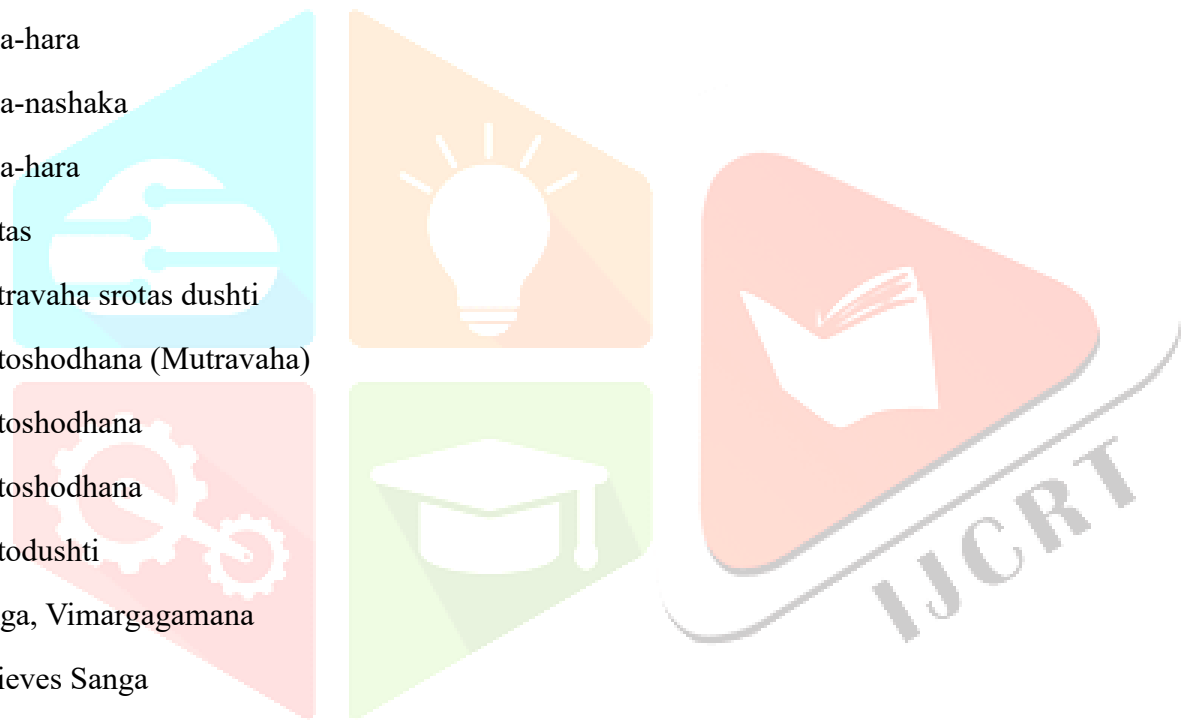
Acts on Basti & Mutravaha srotas

Basti shodhana

Vyadhi Swabhava

Daha, Peeda, Muhur-mutrata

Relieves Daha & Peeda



Relieves Daha, Shoola, Krimi

Reduces Shotha & Peeda

Roga Marga

Abhyantara

Acts internally

Acts systemically

Acts internally

Karma

—

Mutrala, Shothahara

Mutrala, Krimighna, Rasayana

Shothahara, Kapha-nashaka

Samprapti Bhanga

—

Increases urine flow, reduces inflammation

Clears infection, restores normal mutra pravritti

Removes Kapha-Avarana & obstruction

One-line Samprapti Bhanga (Exam-oriented)

Gokshura → Mutrala + Vata-Pitta shamana → Mutravaha srotas shodhana → UTI samprapti bhanga

Chandraprabhavati → Tridosha shamana + Krimighna + Mutrala → Basti shodhana → Samprapti bhanga

Bruhatyadi Kashaya → Kapha-Vata shamana + Shothahara → Srotosanga nashana → Samprapti bhanga

Case Presentation

A 45-year-old female presented with complaints of frequent urination, dysuria, and pelvic pain for over two years. Despite undergoing multiple courses of antibiotics and anti-inflammatory drugs, her symptoms recurred frequently. She had no history of diabetes, kidney stones, or other urinary tract abnormalities but experienced exacerbations of her symptoms under stress or after consuming spicy food.

The patient was diagnosed with chronic cystitis following a thorough evaluation, including urine analysis, and ultrasound imaging - which revealed bladder wall thickening. Dissatisfied with the temporary relief offered by conventional treatments, so patient came to our hospital for further management .

Patient Information:

Age: 45 years

Gender: Female

Occupation: [Teacher]

Chief Complaints :

Dysuria (painful urination) for 2 years

Burning sensation during urination

Increased frequency of urination, especially at night (nocturia)

Pelvic pain and discomfort

Occasional hematuria (blood in urine)

Feeling of incomplete voiding

Fatigue and general weakness

History of Present Illness :

The patient reports having experienced persistent urinary symptoms over the past 2 years. Initially, she had occasional episodes of pain during urination, which progressively worsened. Conventional treatment with antibiotics provided only temporary relief, with symptoms returning shortly after. The frequency of urination has increased significantly in the past 6 months, and the burning sensation has become more intense. There is a consistent feeling of pelvic discomfort, which interferes with her daily activities. Hematuria was noticed on two occasions over the past year. No history of fever, nausea, or vomiting associated with urinary complaints.

Past Medical History :

Recurrent urinary tract infections (UTIs) in the past 2 years

No history of diabetes or hypertension

No major surgeries

No known allergies

Family History :

No significant family history of urinary disorders

Mother had hypertension

Menstrual History :

Menopausal, periods ceased 3 years ago

No significant history of menstrual irregularities

Personal History :

Appetite: Normal

Thirst: Increased (about 3-4 liters/day)

Bowel Movements: Regular

Sleep: Disturbed due to nocturia

Stress levels: Moderate (due to symptoms)

Bladder habits: Urinates approximately 15 times/day; nocturia (3-4 times/night)

Ashtavidha Pariksha

Nadi (Pulse):

Type: Vata-Pitta type (fast and irregular)

Rate: 76 bpm, irregular, reflecting imbalance in Vata and Pitta.

Mutra (Urine):

Color: Pale yellow

Nature: Burning sensation with pain during urination; increased frequency.

Quantity: Frequent, small amounts; nocturia noted (3-4 times/night).

Dipstick Test: Mild hematuria observed.

Mala (Stool):

Consistency: Normal, well-formed.

Frequency: Once daily.

Jihva (Tongue):

Appearance: Dry with a slight coating, reddish in color (indicating Pitta imbalance).

Shabda (Voice/Speech):

Tone: Normal, but occasionally weak or strained

Sparsha (Touch/Skin):

Skin Texture: Dry, rough skin (Vata predominant).

Temperature: Warm, reflecting Pitta dominance.

Drik (Eyes)

Vision: Normal; no significant eye issues reported.

Akruti (Body Build):madhyam

Build: Medium.

Prakriti : Vata-Pitta Prakriti

Roga Marg: Abhyantara Rogamarga

Rogi Bala – Sharirik Bala : Madhyam

Manasik Bala : Uttam

Agni : Vishamagni (irregular digestion with occasional bloating and mild indigestion)

Nidra (Sleep): Disturbed, primarily due to frequent urination at night

Mutra :

Urine Routine Examination:

Color: Pale Yellow

Appearance: Clear

Reaction (pH): Slightly Acidic

Specific Gravity: Normal (1.015)

Protein: Trace

Glucose: Negative

Ketones: Negative

Bilirubin: Negative

Blood: Trace (Hematuria present)

Microscopy:

RBCs: 2-3 per HPF (mild hematuria)

Pus cell : >10 per HPF

Epithelial Cells: Few

Casts: Absent

Crystals: Absent

Bacteria: Absent

Findings: Mild hematuria with trace protein detected, consistent with inflammation and irritation of the urinary tract, suggestive of chronic cystitis.

General examination

Temperature- Afebrile

Blood Pressure: 120/80 mmHg

Pulse: 76 bpm, regular

Spo2 – 98 % ON Ra

Systemic Examination-

Rs – AEBE Clear

CVS- S1S2 Normal

CNS –Concious and oriented

NIDAN- Vyadhi (Disease): (Chronic Cystitis) Mutrakrichha

Dosha

Vata Prakopa: Obstruction and pain in urinary passage

Pitta Prakopa: Burning sensation, inflammation

Dushya Mutravaha Srotas (urinary channels)

Srotas

Mutravaha Srotas (urinary system) affected due to Vata and Pitta imbalance

Samprapti (Pathogenesis):

Aggravation of Vata in the urinary system, leading to obstruction and pain.

Aggravation of Pitta causing heat, burning sensation, and inflammation in the urinary passage.

Nidana (Etiology):

Excessive intake of hot, spicy, and pungent foods

Poor hydration habits in the past

Stress and improper lifestyle leading to Vata and Pitta aggravation

Chikitsa - Vata-Pitta Shamana

Treatment Plan :

Shamana Chikitsa 18 -20

Chandraprabha Vati 250 MG : 2 tablets twice a day with lukewarm water Apankal (before food), to relieve burning sensation and regulate urinary flow..

Gokshuradi Guggulu 250 MG : 2 tablets twice a day Vyanodan kal to promote healthy urine flow and reduce inflammation.

Bruhtyadi kashaya : 15 ml twice a day vyanodan kal with warm water, to cleanse the urinary system.

Recommendations: 20

Pitta-pacifying diet: Include cooling, hydrating, and easily digestible foods such as rice, moong dal, coconut water, cucumber, and ghee.

Avoid spicy, sour, and pungent foods that aggravate Pitta.

Increase intake of water (lukewarm or at room temperature) and cooling herbal teas (coriander seed or fennel tea).

Lifestyle Modifications: 21-22

Yoga & Pranayama: Daily practice of stress-relieving poses such as Shavasana and Baddha Konasana to help balance Vata and reduce pelvic discomfort.

Stress Management: Incorporate meditation to reduce anxiety related to symptoms.

Follow-up :

Next Appointment: After 15 days

Monitor relief in pain, frequency of urination, burning sensation, and general well-being .

Discussion

In Ayurveda, chronic cystitis (Mutrakrichha) is viewed as a condition primarily affecting the Mutravaha Srotas (urinary channels) with imbalances in both Vata and Pitta Doshas. Vata, responsible for the movement and regulation of bodily functions, governs the flow of urine. When Vata is aggravated, it leads to obstruction in the urinary passage, causing discomfort and pain. Pitta, which controls heat and metabolism, contributes to the inflammation and burning sensations typical of cystitis. This dual doshic involvement manifests as difficulty in urination (dysuria), frequent urination, and associated pain. The chronic nature of this condition suggests that both doshas have been in an aggravated state for a prolonged period, causing persistent irritation and inflammation in the bladder. The Ayurvedic management of chronic cystitis focuses on pacifying both Vata and Pitta to restore balance and facilitate normal urinary function. Herbal remedies such as Gokshura (*Tribulus terrestris*) and Bruhtyadi Kashya play a crucial role due to their anti-inflammatory and

diuretic properties. Gokshura helps reduce inflammation and enhances urine flow, flushing out toxins and excess fluids, thereby reducing swelling in the urinary tract. Chandraprabha Vati, a widely used classical Ayurvedic formulation, combines several herbs that cool the urinary system, reduce burning sensations, and regulate urine flow. It is particularly effective in conditions where both Vata and Pitta imbalances are

present. By addressing the root cause, these therapies not only provide symptomatic relief but also help in the long-term prevention of recurrence. 23-24

Outcome - After 15 days of Ayurvedic treatment,

the patient reported significant improvement in symptoms. Urination frequency decreased, nocturia reduced, and the burning sensation subsided. Pelvic pain diminished, and overall energy levels improved. This positive outcome highlights the effectiveness of Ayurveda in providing both symptomatic relief and long-term management of chronic cystitis.

Conclusion :

Ayurvedic management of chronic cystitis (Mutrakrichha) offers a holistic and sustainable alternative to conventional treatments. By addressing the root cause through Dosha balancing, detoxification, and rejuvenation of the urinary system, Ayurveda not only provides symptomatic relief but also improves the patient's quality of life. The case report underscores the potential of integrative Ayurvedic care for chronic bladder conditions, demonstrating its efficacy and safety for long-term use .

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