



Review Article

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CONCEPTUAL STUDY WITH THE ROLE OF VARUNSHIGRU GHAN VATI AND TRIKANTAKADYA GHRITA FOR THE MANAGEMENT OF MOOTRAGHATA: A REVIEW

Sahu Purnesh^{1*}, Chandrakar Smriti¹, Singh Balendra²

¹M.S. Scholar, P.G. Department of Shalya Tantra, Govt. Ayurved college, Raipur, Chhattisgarh, India

²Reader & HOD, P.G. Department of Shalya Tantra, Govt. Ayurved college, Raipur, Chhattisgarh, India

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*Corresponding author

E-mail: dr.purneshsahu@gmail.com

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ABSTRACT

In Ayurvedic classics Mootraghata gives the symptoms of low urine out- put either by retention, absolute. Mootraghata is predominantly due to vata dosha. The vata dosha is responsible to expel the urine out timely and uniformly. Symptom of BPH is almost similar to Mootraghata. Benign prostate hyperplasia (BPH) is one of the most important age associated medical condition have a relatively high socioeconomic burden. In BPH is worsening ability to pass urine in men due to obstruction in urine pathway by the enlargement of size of prostate. Increase size of prostate because differentiation and proliferation of epithelial and stromal compartment of gland, androgen plays important role for these changes. Management of present available surgical and minimal invasive methods have their own limitation. Hence, to find out a suitable Ayurvedic approach for the management of BPH. Varunshigru Ghanvati and Trikantakadya Ghrita is non-inventive and non-surgical therapy for mootraghata. This formulation also provided non hormonal alternative therapy to the BPH patient without any adverse effect.

Keywords: Mootraghata, BPH, Ghanvati

INTRODUCTION

Acharya Sushruta, the pioneer of Shalya tantra has enumerated the urology in his legendary text book of surgery, Sushruta Samhita by describing anatomy, physiology and pathology of many diseases related to urinary system like Ashmaree (urinary stone)¹, mootrakricha (painful urination)², Mootraghata³ (suppuration of obstruction of urine flow), etc. with their management alone with diseases of other system. Mootraghata means low urine output due to obstruction in passage of urine. The twelve types of Mootraghata⁴ reflect the symptom of retention, incomplete voiding, dribbling, hesitancy, incontinence, of urine etc. These are basically presented the feature of lower urinary tract symptom and can be correlate with Benign Prostate Hyperplasia in modern parlance. BPH is fibromyoadenoma or benign enlargement of glandular part of prostate. Findings of per rectal digital examination⁵ such as Vritta Granthi (round/oval shaped mass), Sthira-Ghana-Astheela Vata Granthi (hard/firm in consistency), and Unnata Granthi (convex surface), which are found in Vatasstheela (prostate enlargement) and Mootragranthi (urinary cyst). Hence, these types of Mootraghata may be related to be more nearer to the disease of BPH. As per the etiopathogenesis of mootraghata, mootravaha srotodushti (disturbance in urinary system) and vitiation of vata (aapan vata(one type of vata dosha)) are involved⁶. So vata shamaka (reduce the vata) drug uses in the treatment of mootraghata. Varunshigru Ghan vati along with Trikantakadya Ghrita may helpful in reducing Symptom of mootraghata (BPH) and enhancing the tonicity of urinary bladder. Considering these property Varunashigru ghan vati and Trikantakadya ghrita gave best result in the management of Mootraghata.

Definition

Mootraghata comprise two words- “mootra + aaghata”

which stand for low urine output due to obstruction in passage of urine

Mootraghata is characterized by vibandha (obstruction) is dominant feature⁷.

This condition is characterized by drying up or retention of urine⁸.

Benign Prostate Hyperplasia – benign enlargement of prostate gland, with excessive growth of prostatic nodule.

Nidana (Cause)

1. Ativyayama –excessive exercise
2. Teekshna aushadha –drugs of strong potency⁹
3. Rukshamadya prasanga–excessive indulgence in dry alcohol
4. Nityadrutaprishtayaanat–riding on the back of fast moving animals regularly
5. Anupamatsya –ingestion of flesh of wet land creatures
6. Adhyashana –eating before digestion of previous meal
7. Ajeerna–indigestion

Epidemiology

The overall incidence rate of BPH is 15 per 1000 men per year. The incidence of BPH is at least 50 % for all men at the age of 50 years and above.

In India BPH is a common pathological condition with an incidence of 92.97¹⁰.

Recent survey of BPH is as high as 50% at the age of 60 years and 90% at the age of 85 years. It observes that among the men above 80 years, 90% show histological evidence of BPH, out of 81% have BPH related symptoms and 10% suffer from urine retention¹¹.

Samprapti (Pathology)

Etiopathogenesis of Mootraghata is concern, there is deranged function of apana vayu (one type of vata) along with the vitiation of kapha and pitta produce ama, which is ultimately

cause of shroto-avarodha (obstruction in system). The vitiated dosha travel through sukhsma srotasa (small channels) and finally lodge in basti (bladder), where upon further vitiation of apana vayu (one type of vata) leads to mootraghata (BPH).

Samprapti Ghataka¹² (factors involve in pathology)-

Table 1: Samprapti ghataka (factors involve in pathology) in Mootraghata(BPH)

| | |
|---------------------|--|
| Dosha | Vata (Apana) predominant Tridosha |
| Dooshya | Rasa, Rakta, Sweda, Mootra |
| Agni | Jatharagnimandya and Dhatvaagnimandya(digestive fire) |
| Udbhava Sthana | Pakvashaya(GIT) |
| Adhishtana | Basti(bladder) |
| Vyakti Sthana | Bastimukha (neck of bladder) |
| Srotasa | Mootravaha (urinary system) |
| Srotodushti Prakara | Sanga(obstruction), Vimargagamana (goes in oblique direction), Siragranthi (obstruction) |
| Roga Marga | Madhyama |
| Sadhayasadyata | Krichtrasadya (difficult to treat) |

Factors¹³

Men with the following factors are more likely to develop benign prostatic hyperplasia:

- Age 40 years and older
- Family history of benign prostatic hyperplasia
- Medical conditions such as obesity, heart and circulatory disease, and type 2 diabetes
- Lack of physical exercise
- Erectile dysfunction

Symptoms

Symptoms are divided in two categories on basis of pathology-

Table 2: Symptoms of BPH

| Obstructive | Irritative |
|----------------------------------|------------------------|
| Hesitancy | Frequency |
| Dribbling | Urgency |
| Poor flow of urine | Nocturnal incontinence |
| Prolong urination | Dysuria |
| Retention of urine ¹⁴ | |

Treatment

In modern medicine the management of BPH is either by conservative treatment using drugs (e.g. hormonal therapy, chemotherapy etc.) or through a surgical approach (e.g. open Prostatectomy, transurethral resection of prostate-TURP, cryotherapy, etc.). In surgery there have many complications so Ayurvedic remedies better option to cure the diseases without complication.

Drug Profile

Varunashigru Ghana Vati¹⁵

Table 3(a): Contents of Varunshigru ghan vati

| Drug Name | Botanical Name | Action |
|----------------------|-------------------------|---|
| Varuna ¹⁶ | <i>Crateva nurvala</i> | Shothhara (reduce oedema), vednasthapana (reduce pain), lekhana (scrapping), vishghna (reduce poison) kusthghna (reduce skin disorder), Kandughna (reduce itching), krimighna (reduce worm), vranashodhan (cleaning of wound) |
| Shigru ¹⁷ | <i>Moringa oleifera</i> | Lekhana (scrapping) krimighna (reduce worm), kaphvatashamak, deepana (increase appetite), pachana (increase digestion) Shoolnashaka (analgesic), shothhara (reduce oedema) |

Mode of application - Orally

Dose – 500mg, twice a day (BD), before meal

Anupana – Koshna jala (luke warm water)

Trikantakadya Ghruta¹⁸

Table 3(b): Content of Trikantakadya ghruta

| Drug | Botanical Name | Action |
|------------------------|--------------------------------|---|
| Gokshura ¹⁹ | <i>Tribulus terrestris</i> | Mutral (diuretic), mutrakricchha nashak(subside difficulty of urination), basti shotha nashaka(subside inflammation in bladder), reduce inflammation and improve urination, analgesic |
| Kush ²⁰ | <i>Desmostiachya bipinnata</i> | Mutral (diuretic) |
| Kash ²¹ | <i>Sacharum spontaneum</i> | mutrakricchha nashaka (subside difficulty of urination), ashmari nashaka (destroy stone) |
| Shara ²² | <i>Sacharum munja</i> | Mutrala (diuretic), daha shamaka (reduce burning sensation) |

| | | |
|---------------------------------|-----------------------------|---|
| Darbha ²³ | <i>Imperata cylindrical</i> | Mutral(diuretic), ashmarinashan(destroy stone), tridoshshaman, dahshaman(reduce burning sensation) |
| Eckchu ²⁴ | <i>Sacharum officinarum</i> | mutrakrichcha nashaka(subside difficulty of urination), vrikka roga nashaka(destroy kidney disorder), balya(give energy), vrihana |
| Aranda ²⁵ | <i>Ricinus communis</i> | Mutra vishodhaka(subside urine difficulty), vatahara(decrease vata), balya (give energy), aampachaka(destroy undigested food), |
| Shatavari ²⁶ | <i>Asparagus racemosus</i> | mutrakrichcha nashaka(subside difficulty of urination), rasayna (immunomodulator), balya (give energy). Relieve inflammation and improves urination – including urine retention ²⁷ . |
| Petha ²⁸ (kushmanda) | <i>Benincasa hispida</i> | Bastishodhaka (clearing of bladder), mutral (diuretic) |
| Ghrita ²⁹ | ---- | Dahaprasamana (reduce burning sensation), vatanashaka (reduce vata), deepana (increase appetite), rashayana (immunomodulator), vishaghna (destroy poison) |
| Guda ³⁰ | ---- | Madhura, vata shamaka, mutra shodhaka (clearing of urine), balya (increase energy), vrishya (aphrodisiac) Kshara in nature, mutral(diuretic) ³¹ |

Mode of application – Orally

Dose - 12 gm with milk

DISCUSSION

In Ayurveda, Acharya's have explained in detail about the management of Mootraghata (BPH) with various treatment modalities. "Varunshigru ghan vati with Trikantakadya ghrita" significant over the symptom with worthwhile results. Under Varunshigru ghan vati Acharya Sarangdhara mentioned two drugs. Varun and shigru having lekhana (scrapping), vata kapha shamaka (equilibrium in vata & kapha), shoshana(absorption), vilayana etc. Property which help to treat the benign prostate hyperplasia. And also, Acharya Chakradutta described Trikantakadya ghrita, having mutral (diuretic), vatakapha nashaka, basti shodhaka (clearing of bladder) properties. As per combined drug formulation therapy is concerned, it is concluded that the Varunshigru ghan vati and Trikantakadya ghrita taken orally and work as-

- Diuretic
 - Improve urine flow
 - Relax smooth muscle of prostate and internal urethral sphincter
 - Anti inflammatory, Anti proliferative
 - Anti estrogenic, anti androgenic
- Hence, "Varunshigru ghan vati with Trikantakadya ghrita" will give better result in Mootraghata (BPH).

CONCLUSION

Mootraghata means obstruction of urine flow. Symptom of Mootraghata, and per rectal digital examination finding are nearer to symptom of BPH. BPH is fibromyoadenoma or benign enlargement of glandular part of prostate³². In modern medicine, BPH treated either by conservative treatment like hormonal therapy, or prostatic stents, laser ablation, surgical approach. In case of hormonal therapy, laser therapy there are many complications like loss of libido, impotence, gynaecomastia and also very costly. In senile age during and after surgery, arise many complications like postoperative morbidity, decoy prostate, recurrent infection, bladder change, impotence, retrograde ejaculation. So Ayurvedic approach i.e. Varun shigru ghan vati and Trikantakadya ghrita are clinically safe, effective & it's better option to treat Mootraghata (BPH) & beneficial for old age.

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