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CRITICAL EVALUATION OF THE ACTION OF VARIVIDARYADI KASHAYA IN LOWER URINARY TRACT INFECTIONS

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ABSTRACT

Urinary tract infection (UTI) is a common and painful human illness that is rapidly responsive to modern antibiotic therapy. UTI is caused by both Gram-negative and Gram-positive bacteria, as well as by certain fungi. The typical symptoms of lower urinary tract infections (LUTI) are dysuria, urinary frequency, and urgency, nocturia, hesitancy, suprapubic discomfort, and gross hematuria. The features of LUTI can be found under the heading *Pittaja Mutrakrichra Lakshana*. As *Pitta* and *Vata* are the main *Doshas* involved in the *Samprapti* of this disease, drugs having *Madhura Rasa*, *Vata-Pitta Samana* properties are the ideal choice for the treatment. In *Varividaryadi Kashaya*, all the drugs are having *Sita Virya* and most of the drugs are having *Madhura Rasa*, *Guru- Snigdha Guna*, and *Madhura Vipaka*. So, there is a very need to understand the scope of the usage of *Varividaryadi Kashaya* in the management of LUTI.

Keywords: Urinary tract infection, *Pittaja Mutrakrichra*, *Varividaryadi Kashaya*

INTRODUCTION

Urinary tract infections (UTI) are some of the most common bacterial infections, affecting 150 million people each year worldwide¹. The features of UTI can be found under the heading *Pittaja Mutrakrichra Lakshanas*. As *Pitta* and *Vata* are the main Doshas involved in the *Samprapti* of the disease, drugs hav-

ing Madhura Rasa, Vata-Pitta Samana properties are the ideal choice for the treatment and in Varividar-yadi Kashaya, all the drugs are having Sita Virya and most of the drugs are having Madhura Rasa, Guru-Snigdha Guna, and Madhura Vipaka. So, there is a very need to understand the scope of the usage of

Varividaryadi Kashaya in the treatment of lower urinary tract infections.

DISEASE REVIEW

Urinary tract infection (UTI) is a common and painful human illness that, fortunately, is rapidly responsive to modern antibiotic therapy. UTI may be asymptomatic (subclinical infection) or symptomatic (disease). Thus, the term UTI encompasses a variety of clinical entities, including asymptomatic bacteriuria (ASB), cystitis, prostatitis, and pylelonephritis². UTI is caused by both Gram-negative and Grampositive bacteria, as well as by certain fungi. The most common causative agent for both uncomplicated and complicated UTI is uropathogenic Escherichia coli (UPEC) and is followed in prevalence by Klebsiella pneumonia, Enterococcus faecalis, Pseudomonas aeruginosa, Staphylococcus aureus and several species of Candida. Several risk factors are associated with cystitis/lower urinary tract infection (LUTI), including female gender, a prior UTI, sexual activity, vaginal infection, diabetes, obesity and genetic susceptibility. A LUTI typically starts with periurethral contamination by an uropathogen residing in the gut, followedby colonization at the urethra and subsequent migration of the pathogen to the bladder. In the bladder, the consequences of complex host-pathogen interactions ultimately determine whether uropathogen are successful in colonization or eliminated¹. The typical symptoms of cystitis are dysuria, urinary frequency, and urgency. Nocturia, hesitancy, suprapubic discomfort, and gross hematuria are also noted². Currently, antibiotics — such as trimethoprim sulfamethoxazole, ciprofloxacin and ampicillin — are the most commonly recommended therapeutics for UTI¹. However, UTIs are becoming increasingly difficult to treat owing to the widespread emergence of antibiotic resistance mechanisms and high recurrence rates.

In Ayurveda, UTI can be correlated with *Mutra-krichra*. The disease in which *Mutra* is passed with difficulty is called *Mutrakrichra*³. As burning micturition is the predominant symptom of LUTI which suggests the involvement of *Pitta Dushti* in the mani-

festation of this disease; also, the symptoms such as *Peeta Mutrata*, *Sarakta Mutra*, *Sadaha*, *Saruk*, *Krichra* and *Muhur Mutra* can be seen in this condition; so, it can be correlated with *Pittaja Mutrakrichra*.

Nidana

Mutrakrichra Nidana has been very well explained by Acharya Charaka. But Acharya Susrutha and Acharya Vagbhata has not mentioned any special Nidana for Mutrakrichra. They have considered Asmari and Shalya as the etiological factors. The Nidana can be divided into Samanya Nidana and Vishishta Nidana. Etiological factors that cause the vitiation of Mutravaha Srotas can be taken as the Samanya Nidana. According to Acharya Charaka, Mutravaha Srotas gets vitiated because of the intake of drinks or foods, or sexual intercourse while having the urge for micturition; and suppression of the urge for micturition especially by those suffering from wasting and injury⁴. Vishishta Nidana -Aharaja Nidana like Rooksha Ahara, Madhyasevana, Anoopa Mamsa Sevana, Matsyasevana, Adhyasana, Ajeerna Bhojana, Katu, Amla, Lavana Rasa Ati Sevana, Viharaja Nidana like Ativyayama, Nityadrutaprushta Yana, Sthreesevana, gadharana and Oushadhajanya Nidana like intake of Teekshna Oushada etc⁵.

Samprapti

Due to the Aharaja, Viharaja and Oushadhajanya Nidana Sevana, Pitta and Vata Dosha Prakopa occurs in the body. This Prakupita Pitta and Vata result in Agni Dushti and ends in the formation of Ama. From this Ama, Ama Yukta Rasa Dhatu is formed. From this, Dushita Rakta gets formed and in turn produces Mala Roopa Pitta in excess. Because of the Tikshna and Ushna Guna of the Mala Roopa Pitta, Kleda Soshana occurs. Thus formed Mutra, from the Kledamsha of Rakta will also possess similar qualities and reaches Basti through the Mutravaha Srotos. As Basti provides the seat for Apana Vayu; because of its Yogavahi Guna, Lakshanas like Peeta Mutrata, Daha, Ushna Mootrata, Krichra Mutrata etc. are exhibited.

Table 1: Samprapti Ghataka

DOSHA	Pitta, Vata		
DUSHYA	Mutra, Rasa, Rakta		
AGNI	Jatharagnimandya, Dhatvagnimandhya		
SROTAS	Mutravaha, Rasavaha		
SROTODUSHTI	Sanga		
UDBHAVA STHANA	Amashaya, Pakwashaya		
ADHISHTHANA	Basti		
SANCHARA STHANA	Mutravaha Srotas		
VYAKTHA STHANA	Mutra Marga		
ROGAMARGA	Madhyama		
SWABHAVA	Ashukari, Cirakari		

VARIVIDARYADI KASHAYA

Varividaryadi Kashaya is mentioned in Sahasrayogam Mutrakrichra Prakaranam⁶.

Table 2: Botanical identity and part used of the drugs⁷⁻¹¹

DRUG	BOTANICAL NAME	FAMILY	PART USED
Satavari	Asparagus racemosus Willd.	Liliaceae	Tuber
Vidari	Ipomea panniculata Linn.	Papilonaceae	Tuber
Gokshura	Tribulus terrestris Linn.	Zygophyllaceae	Fruit
Musta	Cyperus rotundus Linn.	Cypereceae	Tuber
Sariva	Hemidesmus indicus Linn.	Asclepiadaceae	Tuber

Table 3: Properties of the drugs⁷⁻¹⁰

Drug	Rasa	Guna	Virya	Vipaka
Satavari	Madhura Tikta	Guru, Snigdha	Sita	Madhura
Vidari	Madhura	Guru, Snigdha	Sita	Madhura
Gokshura	Madhura	Guru, Snigdha	Sita	Madhura
Musta	Tikta, Kashaya, Katu	Laghu, Ruksha	Sita	Katu
Sariva	Madhura	Guru, Snigdha	Sita	Madhura

Table 4: Karma of the drugs⁷⁻¹⁰

DRUG	KARMA		
Satavari	Vrsya, Sukraja, Balya, Medhya, Rasayana, Kaphavataghna, Pittahara,		
	Vatahara, Stanyakara, Hrdya, Netrya, Sukrala, Agnipushtikara		
Vidari	Vatahara, Pittahara, Stanyada, Sukrala, Mutrala, Jivaniya, Rasayana,		
	Brimhana, Svarya, Varnya, Balya, Vrsya		
Gokshura	Vatanut, Vrsya, Brimhana, Asmarihara, Vastisodhana		
Musta	Pittakaphahara, Sthoulyahara, Sothahara, Dipana, Pacana, Grahi,		
	Trsnanigrahana, Krimighna, Tvakdoshahara, Jwaraghna, Visaghna		
Sariva	Tridoshaghna, Dipana, Raktasodhana, Ama Nasana, Visaghna, Jwarahara		

DISCUSSION

Lower urinary tract infections begin when the uropathogen residing in the gut contaminate the periurethral area and can colonize at the urethra. Then they migrate to the bladder and resulting in colonization. Host inflammatory responses, including neutrophil infiltration, begin to clear extracellular bacteria. Either through host cell invasion or morphological changes, some bacteria evade the immune system and result in resistance to neutrophils. These bacteria undergo multiplication and biofilm formation. These bacteria produce toxins and proteases that induce host cell damage and releases essential nutrients that promote bacterial survival. If left untreated, it results in kidney colonization or even progress to bacteraemia¹. In Varividaryadi Kashaya, all the drugs are having Sita Virya and most of the drugs are having Madhura Rasa, Guru- Snigdha Guna, and Madhura Vipaka. This may alleviate the vitiated Pitta in the Pittaja Mutrakrichra. The vitiated Dosha results in the reduced function of Agni; thus, the formation of Ama occurs. The Dipana and Ama Pachana properties of the Kashaya help in the Ama Pachana, Agni Dipana and thereby arrest the further formation of Ama Yukta Rasa Dhatu. In Ayurveda classics, Gokshura has been mentioned as Vatahara and Mutrakrichrahara¹². This property will alleviate the vitiated Vata Dosha in the Basti. Madhura Rasa - Vipaka and Snigdha Guna of the Kashaya increases the Kleda in the body. Kleda increases the production of urine and thereby reducing the urine pH. The Vasti Sodhana and Mutravirechaneeya property of Gokshura helps in eliminating the excess Kleda produced, thereby the bacteria is pushed out from the bladder and reduce the inflammation.

The various activities and effects of the drugs can be explained on modern parameters as well by recent studies of their pharmacological actions. *Vidarikanda* contains sugar and due to their osmotic activity, these substances oppose the reabsorption of water from the glomerular filtrate. These substances produce more elimination of water than sodium and hence produce diuresis. Shatavarin 1, found in *Shatavari* and potassium nitrate in the *Gokshura* also causes diuresis¹³. By diuresis, there will be increased production of urine and that reduces the altered pH of the urine and the environment favourable for bacterial growth. From the antimicrobial studies, it was concluded that the essential oil of *Cyperus rotundus* rhizomes was active against gram-positive micro-

organisms and they also possess anti-inflammatory activity. The extracts of C. rotundus show antiinflammatory activity¹⁴. The diuretic properties of Tribulus terrestris are due to the large quantities of nitrates and essential oil present in its fruits and seeds. The diuretic activity can also be attributed to the presence of potassium salts in high concentrations. Analgesic activities of Tribulus terrestris were studied and the study indicated that the methanolic extract of Tribulus terrestris at a dose of 100 mg/kg produced an analgesic effect. The methanolic extract of fruits of Tribulus terrestris is found to be most active against gram-positive and gram-negative bacteria¹⁵. Essential oil of Hemidesmus indicus also exhibited marked antibacterial activity against both grams positive and gram-negative bacteria but failed to show appreciable antifungal activity. Chloroform and ethanol (95%) extracts of H. indicus showed antifungal activity. The methanolic extracts of Hemidesmus indicus roots possess potential dosedependent anti-inflammatory and anti-pyretic activity¹⁶. Methanolic extract of Asparagus racemosus shows antibacterial activity. Aqueous extract of the roots of Asparagus racemosus shows diuretic activity. The in vitro anti-candidal activity of Asparagus racemosus roots and tubers extract showed a high degree of activity against all the Candida strains¹⁷. By considering all these pharmacological properties of different ingredients of Varividaryadi Kashaya, we can understand the counteracting effect of the Kashaya on the pathophysiology of LUTI when it is administered.

CONCLUSION

Lower urinary tract infections can be correlated with *Mutrakrichra* especially *Pittaja Mutrakrichra*. *Varividaryadi Kashaya*, in which all the drugs are having *Sita Virya* and most of the drugs are having *Madhura Rasa*, *Guru- Snigdha Guna*, *Madhura Vipaka* and *Vata-Pitta Samana* property, helps in the *Samprapti Vighatana* of the disease. The *Vasti Sodhana* and *Mutravirechaneeya* effect of the *Gokshura* plays a very important role in the elimination of bacteria through urine.

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