

PATHYAAHARAS IN MUTRAASHMARI-A CLASSICAL REVIEW

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ABSTRACT

The disease *Mutraashmari* is a *DarunaVyadhi* as explained by our ancient Acharyas. It is a dreadful disease similar to god of death and is considered as one among *Ashtamahagadas* which are not easy to treat and not having good prognosis. Also *Basti* being *SadyapranaharaMarma* and one among *DasavidhaPranayatana*, the disease *Mutraashmari* is a *Krichrasadyavyadhi*. Acharya Sushruta has explained management including both *Shastrakarma* and *BheshajaPrayoga* like *Ghrita*, *Taila*, and *Ksharaprayoga* etc. for *Mutraashmari*. In the management of all diseases, *Nidanaparivarjana* should be the first step to get better results from the treatment and to prevent recurrence. As the recurrence rate of *Mutraashmari* is high, *Pathyaaharavihara* have important role in its control. *Pathyapathya* for *Ashmari* are explained by various Acharyas while explaining its management. Modern science also advises to avoid particular food items that increase the chance of formation of urinary stone according to the content.

Keywords: *Mutraashmari*, *Nidana*, *Samprapthi*, *Chikitsa*, *Pathyahara*.

INTRODUCTION

In Ayurvedic classics *Mutraashmari* is a disease of *MutravahaSrotas*, having the symptoms like pain in any of the organs of urinary system like *Basti*, *Mehana*, *Sevani* during micturition, obstruction in flow of urine, haematuria and urine resembling *Gomedaka* is described, which goes in accordance with the symptoms of Urolithiasis.

Its prevalence rate is estimated as greater than 10%. The average life time risk is 5-10%. It is commonly seen between the age of 30 to 60 yrs and the male and female ratio is said to be 1.82:1.¹ Changes in dietary practices and global warming may be a key driving force for the incidence and prevalence of Urolithiasis increasing globally. Acharya Susruta describes multifocal treat-

ment modalities including *Shastrakarma* and *BheshajaPrayoga* like *Ghrita*, *Taila*, and *KsharaPrayoga* etc for *Mutraashmari*²

The treatment of urinary calculus in modern science includes conservative treatment like flush therapy, medical expulsive therapy using alpha-antagonists or calcium- channel blockers, Non-surgical management includes ESWL and Dormia basket procedure and operative treatment includes advanced techniques like PCNL, Ureteroscopy, Pyelolithotomy, Nephrolithotomyetc^{3,4}

The life time recurrence rate after the first urolithiasis episode is 60-80%,even though there is significant geographic and seasonal variations in rates of stone formation.⁵ So even after the surgical removal, there is a chance of second attack of urinary stone in a man's life time. In order to prevent the recurrence strict diet control is necessary which is well explained by various Acharyas and also in modern science.

Through this study *Pathyaaharas* mentioned by different Acharyas in contest of *Mutraashmar iare* explained which helps to reduce the recurrence rate of the disease.

NIDANA

Various causative factors that lead to the formation of the *Mutraashmari* have been discussed in various Ayurvedic texts.

- According to Susruta Samhitha causative factors of *Ashmari* are
 - *Asamshodhanasheela* (those who neglect the *Shodhana* of internal channels)
 - *Apathyasevana* (those who are engaged in unwholesome dietary habits)⁶
- Acharya Charaka substantiates that besides the causative factors for *Ashmari*,

the aetiology mentioned for *Mutrakrichra* should also be taken into consideration in the case of *Ashmari* also⁷. They are as follows.

- *Ativyayama*, *Tikshnaaushadhi*, *Rookshaahara*, *Atimadyapana*, *Ashwadhigamana*, *Anoopamamsasevana*, *Adhyashana* and *Ajeernabhojana*
 - According to Kashyapa *Nidana* is *Bharavahana* on *Kati* and *Skandha*⁸
 - Harita Samhitha has given some slightly different causes for the formation of *Ashmari*. According to this text, *Ashmari* can occur due to *Vegavarodha* (when intercourse is done along with suppressing the urge of urine), *Apathyasevana*, and *Matruja* Or *PitrujaDoshha* (hereditary).⁹
 - The predominant *Dosha* of *Ashmari* is *Kapha*. So here all the diet and daily regimen that increases *Kapha* can be considered as *Nidana* for *Ashmariformation*.
- As per modern text books also the role of diet in the formation of Urolithiasis is very much explained. Some causative factors are
- ❖ High rich protein diet
 - ❖ Deficiency of vitamin A- causes desquamation of epithelium and these cells form a nidus for stone formation
 - ❖ Excessive administration of vitamin D- It may lead to calculi formation due to calcification within the kidney substance and the condition is nephrocalcinosis
 - ❖ Inadequate water intake -Less water intake leads to urine concentration and urine stone becomes acidic, which is the good media formation of stones
 - ❖ Hard water and mineral content of water- Hard water contains calcium sulphate and absence of zinc in water pre-

disposes to calcium crystallization that leads to stone formation

- ❖ Food that contains oxalate, calcium, purine etc that lead to stone formation

SAMPRAPTHI

According to the *SusrutaSamhitha*, in *Asamshodana Sheela & Apathyakari* persons, the vitiated *Doshas* mainly *Kapha* and *Mutra* combines and enter to *Basti* to form the *Ashmari*.¹⁰

- ❑ *Charaka* explains that due to action of *RookshaGuna* of *Vata*, *Shukra* or *Pitta* or *Kapha* along with *Mutra*, dries up in the *Basti* and lead to *Ashmari* formation
- ❑ He also adds that it is same as bile hardens in the gallbladder of the cow to form the '*gorochana*'¹¹
- ❑ *Vagbhata* accepts the view of *Charaka*.¹²

Table 1: SAMPRAPTHI GHATAKA

<i>Dosha</i>	<i>Tridosha</i>
<i>Dushya</i>	<i>Mutra</i>
<i>Agni</i>	<i>Jataragnimandya</i>
<i>Srotas</i>	<i>MutravahaSrotas</i>
<i>Dushtiprakara</i>	<i>Sanga</i>
<i>Rogamarga</i>	<i>Madhyama</i>
<i>Udbhavasthana</i>	<i>Amashaya and Pakvashaya</i>
<i>Adhishtana</i>	<i>MutravahaSrotas and Basti</i>
<i>Sadhyasadyata</i>	<i>Krchrasadya, Shasthrasadya</i>

PURVARUPA

Suggest the probable disease of the future. It is the stage where the disease is reversible with very little residual damage. According to *Susrutha Purvarupa* of *Mutraashmari* are *BastiPida*, *Aruchi*, *Jwara*, *Mutrak cchra*, *BastiSirovedana*, *MushkaVedana*, *SephaVedana*, *Avasada*, *BastaGandhitva*, *Sandra-mutra*, *Avilamutra*¹³

RUPA/LAKSHANA

According to *SusruthaSamanyaLakshanas* include *NabhiVedana*, *BastiVedana*, *SevaniVedana*, *MehanaVedana*, *Mutrardharasanga*, *SarudhiraMutra*, *MutraVikirana*, *Gomedha Prakasham*, *Atyavilam*, *Sasiktam*, *Dhavana Plavana Langhana Prsthayana AdhvagamanaVedana*¹⁴

CHIKITSA

As per *Susrutha* the recent formed stones (*Taruna*) can be managed by conservative or palliative method where in the well-developed (*Pravrudha*) *Ashmari*, which has already progressed, can be treated by surgical intervention¹⁵. So it is necessary to diagnose and treat the disease at the earliest. But after getting relief if indulging in improper *Aharavihara* again, it will leads to the recurrence of the disease. So one who is prone to disease should follow proper *Pathya* throughout their life.

PATHYAAHARA

Pathyaahara can be explained as the diet that one should follow to prevent the recurrence of the disease. *Charaka* has used the term '*Pathya*' as a synonym of *chikitsa* also. Specific *Pathyaaharas* for *Mutraashmari* are explained by *Yogaratanakara* as *Kulatha* (horsegram) *Mudga* (green gram), *Jeernashaali* (type of rice), *Yava* (barley), *Dhanvamamsa* (meat of animals or birds in desert area), *Tanduleeya* (prickly amaranth), *Jeernakushmandaphala* (ashgourd), *Ardraka* (ginger), *Yavashooka* (ash of barley)¹⁶ In addition to this *Madya* (alcohol), *Purana Kushmanda* leaves (ash gourd leaves), *Gokshura* (puncture wine), Leaves of *Varuna* (*crataeva*), *Pashanabheda* (*begonia*), *Sthira* (*viscid pseudarthria*) are also mentioned as *pathya* in *BhaishajyaRatnavali*. Over con-

sumption of *guru* (heavy), *vistambi* (constipating) and *rooksha* (dry) *annapana* should

be avoided

Table 2:PATHYAAHARA

Drug	Rasa	Guna	Veerya	Vipaka	Karma
<i>Kulatha</i>	<i>Kashaya</i>	<i>Laghu, teekshna Rooksha</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kaphavatahara, Ashmarighna</i>
<i>Mudga</i>	<i>Madhura</i>	<i>Laghu, ruksha</i>	<i>Sita</i>	<i>Madhura</i>	<i>Tridosahara</i>
<i>Shaali</i>	<i>Madhura, kashaya</i>	<i>Laghu, snigdha</i>	<i>Sita</i>	<i>Madhura</i>	<i>Tridoshaghna, Mutrala</i>
<i>Yava</i>	<i>KashayaMadhura</i>	<i>Snigdha</i>	<i>Sita</i>	<i>Katu</i>	<i>Kaphapittahara Mutrala</i>
<i>Thanduliya</i>	<i>MadhuraKashaya</i>	<i>Laghu, sara</i>	<i>Sita</i>	<i>Madhura</i>	<i>Kaphapittahara</i>
<i>Kushmanda</i>	<i>Madhura</i>	<i>Laghu, Snigdha</i>	<i>Sita</i>	<i>Madhura</i>	<i>Vatapittahara, Asmarighna</i>
<i>Yavasooka</i>	<i>Katu, Madhura</i>	<i>Laghu, Snigdha, Tikshna</i>	<i>Ushna</i>	<i>Katu</i>	<i>Chedana, Bhedana, Lekhana</i>
<i>Gokshura</i>	<i>Madhura</i>	<i>Guru, Snigdha</i>	<i>Sita</i>	<i>Madhura</i>	<i>Vatapittahara, Mutrala, Asmarighna</i>
<i>Pashanabheda</i>	<i>Kashaya, Tikta</i>	<i>Laghu, Snigdha</i>	<i>Sita</i>	<i>Katu</i>	<i>Tridosahara, Mutravirechaniya</i>
<i>Ardraka</i>	<i>Katu</i>	<i>Guru, Tikshna Ruksha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Vatakaphahara Bhedana</i>
<i>Varuna</i>	<i>Tikta, Kashaya</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kaphavatahara Ashmarighna</i>
<i>Sthira</i>	<i>Madhura, Tikta</i>	<i>Guru, Snigdha</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Tridosahara</i>

AS PER MODERN SCIENCE¹⁸–

Limit consumption of these foods generally to avoid recurrence

Milsk derivatives, meat (fried),milk (not more than 500 ml per day), cottage cheese, eggs radish, legumes, onion, garlic, coffee, cocoa, strong tea brewed, chocolate, fish eggs and canned fish, vanaspati ghee, green vegetables, non-veg having bones, crabs, etc. Do not take more than the recommended dose of vitamins C and D

In Calcium stones

Eat less salt and salty foods, avoid canned or commercially processed food, fast foods, pickles, milk. Milk and dietary proteins cause increased absorption of calcium from the gut.

In Oxalate stones

Avoid peanuts, spinach, beets, chocolates, sweet potato, dark green vegetables, beer, coffee, tea, grapes, cabbage, tomato, strawberry, orange juice, soy products

Uric acid stone

Diet rich in purine lead to formation of uric acid. So avoid red meat, shell fish, egg and alcohol.

Cystine stones

Restriction of methionine containing foods like peanuts, popcorns, broccoli, mushroom, cauliflower, avocado, potatoes, spinach, green peas, kidney beans and black beans.

CONCLUSION

The altered food habits, busy life schedules and less intake of water or consumption of salty and packed foods are the true reasons for the kidney stones as well as worsening of the disease. In Ayurvedic classics *BastiShodhaka* (cleanses the bladder) property of warm water is explained and hence it is worth to take luke warm water in case of Urinary calculi. Patients should consume plenty of fluids (2,5-3 liters/day), have a balanced nutrition with vegetable fibres, avoid consuming large amounts of salt, animal albumen and fat and consume a moderate amount of dairy products.

Drink lemonade made from real lemons as citrate in it helps to prevent kidney stones. In the case of obese patients, reduce body weight

Thus, *Nidanaparivarjana*, Proper hydration and healthy food habits should be adopted to prevent the recurrence of the disease. It is usually said that prevention is better than cure.

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