A CASE STUDY ON EFFECT OF AVAPIDAKA SNEHAPANA FOLLOWED BY SADYOVIRECHANA IN MUTRASHMARI

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ABSTRACT
In the present era people are suffering from different diseases because of their mode of life style. Ayurveda plays major role in terms of its cure and provide a disease free life. Since Veda Kala the human beings are suffering from Mutravaha Srotovikaras in which Mutrashmari is an important one. Ashmari Roga is considered as one of the Asta Maha Gada - considered difficult to cure because of its Marma Ashrayatwa, due to the involvement of Bahu Dosha and Basti, which is one of the Tri Marma, being the Vyakta Sthana. Thus formation of stone in Mutra Patha - Urinary system is known as Mutrashmari. Shareera is formed through Panchamahabhutas. When Aap Mahabhuta decreases and the Prithvi Mahabhuta increases, attains Kathinyata in Mutravaha Srotas produces the Ashmari. In Ayurvedic literature all sorts of methodologies including surgical techniques have been described. According to Brihatrayis, before going for surgical procedures one should try with oral medication by adopting Ghrita, Taila, Paniya Kshara, Shamanoushadhi along with other procedures like Virechana, Basti etc. Here Avapidaka Sneha is one of the ideal choices of Snehana, in Mutravaha Srotot Vikara as explained by Vagbhata in Astanga Hrudaya Sutrasthana 4th chapter “Rogaanutpaadaniya Adhyaya” followed by virechana with Trivrut Mrudvika Rasa. Trivrut simply does the sukha virechana and removes the doshas from its root.

Keywords: Ashmari, Mutravaha Srotas, Panchamahabhoota, Snehana, Avapidaka Sneha

INTRODUCTION
In the present era people are suffering from different diseases because of their mode of life style. Ayurveda plays major role in terms of its cure and provide a disease free life. Since Veda Kala the human beings are suffering from Mutravaha Srotovikaras in which Mutrashmari is an important one. Ashmari Roga is considered as one of the Asta Maha Gada - considered difficult to cure because of its Marma Ashrayatwa, due to the involvement of Bahu Dosha and Basti.
– which is one of the Tri Marma\textsuperscript{1}, being the Vyakta sthana. Thus formation of stone in Mutra Patha - Urinary system is known as Mutrashmar\textsuperscript{2}.

Generally the symptoms are like radiating pain from Loin to Groin, Burning micturation, Difficulty in urination, sometimes Haematuria, Recurrent UTI (Urinary Tract Infection) (fever, chills, rigors and frequent micturation), Guarding and Rigidity.

Renal calculi occurs in people of all parts of the world with a lower life time risk of 3 -15% in the West, 25% in Asia, 20% in India. Urolithiasis is more common in men than in women. The highest incidence of renal calculi is in 30-45 years of age but is common in all age groups and the incidence declines after 50 years of age. 50% of the patients have the recurrence of the renal calculi\textsuperscript{3}.

In Ayurvedic literature all sorts of methodologies including surgical techniques have been described. According to Brihatrayis, before going for surgical procedures one should try with oral medication by adopting Ghrita, Taila, Paniya Kshara, Shamanoushadhi along with other procedures like Virechana, Matrabasti etc. Ashmari is having properties like Rukshata, Kharatva, Kathinata thus Snehana plays an important role in Samprapti Vighatana. Due to its Snigdhata, Mandaguna, Pichchilata and Kleda Guna it helps in the easy detachment of Ashmari from its roots. Due to its Mruduguna, Saraguna makes Ashmari to easily pass out from Mutravahasrotas.

**CASE HISTORY**

A 37 years old male came to our hospital with chief c/o of pain in right loin region radiating to groin since 2months. Associated c/o of burning micturation, nausea and loss of appetite since 1month

Patient was apparently normal before 2 months back. One day suddenly he felt severe pain in abdomen associated with nausea. He consulted nearby doctors and took Analgesics, symptoms are reduced temporarily but again after few weeks same symptoms are seen, he again took analgesics and got temporarily relief and underwent USG abdomen it reveals B/L Renal Calculi and mild hepatomegaly with fatty changes. Later he observed the same symptoms on and off then he came to our hospital for the needful treatment.

According to patient statement pain was found radiating colicky in nature at right side, burning micturation felt by patient, some times during onset of pain patient felt constipation. Patient had no history of Diabetes mellitus or Hypertension. His diet history reveals that he is a non vegetarian, consuming alcohol occasionally, intake of excessive Katu, Ruksha Aahara (like Green chilly, Kadak Roti, Toste etc), he prefer mainly outside and stored food. In his home they regularly used bore well water which is the main causative factor for stone formation.

On examination of patient abdomen, mild tenderness over right hypochondriac region and right iliac region was noted. As per classical reference patient had symptoms like Udarashula (Abdominal pain), Mutradaha (Burning Micturation), Hrullasa (Nausea) were observed. On the basis of Nidana and this clinical condition was diagnosed as pittaja Mutrashmari\textsuperscript{4}.

As Sushruta explained the initial line of treatment Snehana\textsuperscript{5} as a major tool, here Avapidaka Sneha is one of the ideal choices of Snehana, as explained by Vagbhata in Astanga Hrudaya Sutrasthana 4\textsuperscript{th} chapter “Rogaanutpaadaniya
Adhyaya”. The diseases in Adhonaabhigata Vata can be pacified by the administration of medicated ghee in Madhyama Matra - the quantity that digests within a period of 12 hours only. In two divided doses- One part of Ghee before food and the Second part after the proper digestion of formerly taken Ghee and Food. This mode of administration of Ghrita is known as ‘Avapidaka sneha’. It helps in reducing the Vibhanda lakshanas, Mutrasanga, Adhmana, Atopa etc in turn helps in reducing the abdominal pressure. Followed by Sadyo Virechana can help to remove all vitiated Doshas from root and it will reduce the re-occurrence of calculi.

INTERVENTION FOLLOWED
AMA PACHANA
Ama Pachana with Hingvastaka Churna
Matra: 3 to 5 gms twice a day
[According to Sharangadhara madhyamakhanda 6th chapter 1st shloka: had explained churna matra is 1karsha =12grms but here Hingvastaka churna having ushna tikshana dravyas like Hingu, Trikatu, Ajamoda, Dwe Jeeraka and Saindhava may cause gastric irritation so had given only ½ karsha]

Kaala : Samudga with Ghritha
Duration : Till the Nirama Lakshana.

Date of initiation: 23/09/2017 on date 25/09/2017 we had seen Nirama lakshana in patients by increasing appetite, completely reduced nausea and clear bowel movement.

SNEHAPRAYOGA-
Abhyantara: Avapidaka snehapana with Punarnavadi ghrita
Matra: Roga and Rogi Balanusara
Date of initiation: 26/09/2017
Morning dose : 60ml. Evening dose: 60 ml

Bahya : Abhyanga with Murchita Tila Taila followed by Nadi Swedana.

On date : 27/09/2017

Abhyanga: Abhyanga is done on whole body with simple or medicated oil (like Murchita tila taila)

Swedana: After Abhyanga usually, Nadi sweda is employed for swedana karma. With help of swedana the morbid doshas are motivated from Shakha to enter the Koshta.

VIRECHANA
Virechana : Trivrut Mrudvika Rasa
Matra : As per Koshtha of patient- 20gms
On date : 28/09/2017

Patient attended 14 Vegas, considered as Madhyaama Shuddhi.
Samsarjana Krama: From 28/09/2017 Evening
As per vegas attended by Atura we had explained patient to follow Peyadi Samsarjana Krama for 8 Annakala

Annakala means not a days to count we should count with Annakala (Annakala=kshudh upagamana) means the appetite or the hunger of food should count it may be occur 3 or 4 times per day. So in this patient Annakala had completed on date of 30/09/2017.

After completing the Virechana Karma, patient was allotted for Shumanoushadhi.

Shamanoushadhi
Shunthyadi Kwatha
Matra : 30 to 40 ml twice a day before food
[In 80 ml of water adding 2tsf of Shunthyadi Kwatha churna (coarse powder) then kept on Agni reduced up to 30 to 40 ml for Kwatha preparation]
Duration: 45 days
**OBSERVATION AND RESULT**

**Table 1 SUBJECTIVE PARAMETERS:**

<table>
<thead>
<tr>
<th>SYMPTOMS</th>
<th>During Amapachana</th>
<th>During Virechana course</th>
<th>After Samsarjana krama</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radiating pain from loin to groin region</td>
<td>Mild improvement</td>
<td>On/off</td>
<td>Totally no pain</td>
</tr>
<tr>
<td>Burning micturation.</td>
<td>Mild improvement</td>
<td>Reduced</td>
<td>Absent</td>
</tr>
<tr>
<td>Nausea.</td>
<td>Totally reduced</td>
<td>Absent</td>
<td>Absent</td>
</tr>
<tr>
<td>Tenderness in the renal angle</td>
<td>Present</td>
<td>Improved</td>
<td>Absent</td>
</tr>
</tbody>
</table>

**Table No.2 OBJECTIVE PARAMETERS:**

<table>
<thead>
<tr>
<th>USG Abdomen</th>
<th>Before treatment 17/09/2017</th>
<th>After treatment 23/11/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impression</td>
<td>1- Right kidney having 4.8mm calculi in upper pole and in left kidney 5mm calculi in lower pole 2- Mild hepatomegaly with fatty changes.</td>
<td>No significant abnormality noted Subjective</td>
</tr>
</tbody>
</table>

During first follow up, it was noticed that all the clinical features were absent except pain in renal angle which was less intensity and no any other complaints were present then advised to take *Shunthyadi kwath churna* for 15 days and *Ruksha Sweda* if pain persists.

Then on 22/10/2017 second follow up, patient may not have any single complaints but while interrogating, there is no any feeling of stone passage by urine root so advised patient to continue the same treatment for again 15 days.

Patient came to hospital after 1 month with USG report that there was no any abnormality seen on report and while interrogating about feeling of stone passing out patient said “yes I had felt more pain one day and I did applied hot water bag over abdomen after that with difficulty I passed stone along with urine”. Then all medicines are stopped and advised *Pathya* to continue.

**DISCUSSION**

The medicines which had administered was *Punarnavadi Ghrita* contain *Punarnava, Gokshura*, which is highly diuretic effect, contains potassium nitrate in rich quantity, which
act as an alkalizer and *Ghita* which is *Snigdhata, Mandaguna, Pichchilata* and *Kleda Guna* it helps in the easy detachment of *Ashmari* from its roots. *Trivrutti (Shama Trivrutta)* and *Mrudvika* for *sadhya Virechana* due to its *Lekhana, Virechaniya, Tikshna Guna* that helps remove the *Dosha* from its roots and does the *Kaya Shodhana* to prevent the reoccurrence of stone formation. And *Shunthyadi Kwath Churna* which was mainly having the dravyas like *Shunthi, Pashanabhedi, Varuna Twak, Amlavetas, Apamarga*, *Gokshura, Punarnava, Shigru Twak, Gambhari, Hingu, Saindhava, Yava Kshara* having the properties like *Rochana, Deepana, Pachana, Anulomana, Bhedana, Uttejana, Mutrala*.

That mainly Hepatoprotective activity, diuretic, Nephro-protective activity and having major Chemical Constituents like alkaloid, behenic acid, ecldysterone, flavonoid, amino acids lignans etc that makes easily passed stone out of urinary tract. In this case patient had stone at lower pole of kidney, usually stone at lower pole of kidney is very difficult to pass out; therefore we have seen the easy detachment of stone from kidney. Along with medicine *Pathya* maintenance is major role to get free from any kind of disease from its root as explained in classics.

**PATHYA:**

*Ahara:* *Purana Shali, Yava, Godhuma, Kulatha, Adaki, Purana Kushminda phala and lata, Gokshura and Varuna shaka, Pashanabheda, Yavakshra, Shalaparni, Renuka, Madya, Dhanvanda rasa sevana, Ardrak seven, Varsi sevana* i.e. drinking more quantity of water.

*Vihara:* *Langhan, Swedan, Avagahan, Vamana, Virechana* and *Basti karma*. Timely sleeping, proper excretory practices of *Mutra* and *Pureesha*.

**APATHYA:**


*Vihara:* Diva swapna, Ati vyayama, Ati maithuna and Vega dharana.

**CONCLUSION**

Formation of *Ashmari* due to involvement of *Kapha Pradhana Tridosha*, but *Vataja Ashmari* kills the patient like enemy (*Arivatt Pida*) because of its horn like structured stones, that’s why disease may diagnosed initially. But in *Pitta-Kaphaja Ashmari* there may symptomless initially but in day today activities like riding, jumping, running, during journey due to that jerk stone makes the friction in urinary tract that produce the pain, haematuria, inflammation. So in all kinds of *Ashmari Sushruta* initially stated that *Snehana* is first and best line of treatment. So over all study states that before going to kill the healthy organs with incision and excision, one should try suitable *Shamana* or *Shodana* treatment of Ayurveda which really protect the person body, gives relief from disease and protect the person’s *Ayu*.

**REFERENCES**

2. Susrutashamhita with Hindi commentary By Dr.Kaviraja Ambhikadatta Shastri. Foreword by Dr.Pranajivana Manekchanda Mehta Chaukhamba Sanskrit Sansthana, Nidan Sthana, 3rd chapter, page no.240-241

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