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A Critical Interpretation On Mutrashmari According To Sushruta Samhita

- A Brief Review Study

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ABSTRACT: -

One of the most famous Mutra vaha Srotasa (Channels of urinary system) diseases is Mutrashmari (Urinary calculi). Mutrashmari has been listed by Acharya Sushruta as one of the Ashta Mahagada, since it is not easy to treat and more attention needs to be paid to its cure. It is associated with Urolithiasis or Urinary Calculi in modern medical science. Due to different factors such as altered eating habits, modified lifestyle, stress, pressure, environmental contamination, etc., the incidences of Mutrashmari (Urinary Calculi) are rising at the present age. These variables have been classified as Nidana in Ayurvedic texts. Due to Nidana Sevana (Consumption of Etiological Factors), Doshas get aggravated, along with Dushya they induce Sroto Dushti, and then sickness manifests, Nidana (Etiological Factors), plays a major role in the incidence of disease. Both three Doshas are active in Mutrashmari's Samprapti (Pathogenesis of Urinary Calculi), Vata, Pitta and Kapha, so knowing the Samprapti (Pathogenesis) is necessary for disease management, since Chikitsa is the disintegration of Samprapti Sanghatana (Breaking the Pathogenesis). Srotasa is an effective Samprapti Ghataka (Pathogenic factor) for disease development. Pathya is a nutrient compliant with Srotasa (Body channels). Srotasa is protected by the avoidance of causative factors of the disease and the compatibility of food with Srotasa (Body channels), which inhibits Srotovaroda (Obstructions of Body channels) and thereby prevents the disease. This paper focuses primarily on the study of Mutrashmari (Urinary Calculi) in Nidana-Samprapti (Causative factor-Pathogenesis) and the role of Nidana Parivarjana (avoiding the cause) and Pathya Kalpana (Ayurvedic Dietetics) in their care.

Keywords: Mutrashmari, Mutravaha Srotasa, Urolithiasis etc.



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INTRODUCTION

Mutrashmari^[1,2,3] (Urinary Calculi) is one of the most prevalent situations under which urinary tract stones are produced. In the Ashta Mahagada (eight major diseases), Acharya Sushruta included Mutrashmari (Urinary Calculi). In terms of its extreme morbidity, *Mahagada* suggests that it is terrible. incurable, and significant disease. Mutrashmari (Urinary Calculi) is dreadful, capable of disrupting the urinary system's anatomy and physiology, and after it has developed in the body, it appears to recur, so it is not possible to treat, so the Acharyas call it Mahagada (Major diseases). The father of surgery, Acharya Sushruta, explained the creation of Ashmari in depth in the most scientific way, including *Nidana* (Causative factor), Samprapti (Pathogenesis), Purvarupa (Prodromal symptoms), Rupa (manifested symptoms), Bheda (complicated stage), Upadrava (complications) and Chikitsa (treatment). Based on their signs and symptoms, it may be associated with Urinary Calculi or Urolithiasis in western medical research. This affects both age ranges and all sexes, but with a male-female ratio of 2:1, the highest occurrence is found in the 2nd to 3rd decades of life. The best and shortest modes of disease management are Nidana Parivarjana (avoiding the cause) and Pathya Kalpana (Ayurvedic Dietetics). In the Ayurvedic Classics, it is well defined.

Mutrashmari Nidana (etiological factors of Urinary Calculi)^[4-5]

The definition of *Nidana* is "etiological factors of a disease." *Nidana* is a component that is capable of manifesting the production of illness either immediately or after a certain time. It may be due to the intake and improper behaviour of incompatible dietetics. As per *Acharya Sushruta, Ashmari* (calculi) manifests in people who do not obey

proper detox mechanisms (*Samshodhan*) such as *Vamana* (Emesis), *Virechana* (Purgation), *Basti* (Enema), *Nasya* (Errhines) and *Raktamokshana* (bloodletting) and who embrace unhealthy diets and behaviours. Under the *Mutra Krichchha, Acharya Charaka mentioned Ashmari* (calculi), so the *Nidanas* (etiological factor) of both *Mutra Krichchha* (Dysuria) and *Ashmari* (calculi) can be assumed to be the same.

Nidanas (etiology) can be classified into following varieties below:

Aharaja Nidana (Food Related Factors)

- Apathya Ahara Sevana (Un Wholesome food)
- *Teekshna Aushadha Sevana* (intake of Strong medicine)
- *Ruksha Madyapana* (intake of dry alcohol)
- Anup Mamsa Sevana (intake of meat of marshy land animal)
- *Matsya Sevana* (intake of fish)
- Adhyashana (which means eating before digestion of previous food)

Viharaja Nidana (life style related cause)

- Asamshodhanasheelasya
- *Ativyayama* (excessive exercise)
- Ashva Yana Gamana (travelling on horse, cart)

• Mutravegavarodha (suppression of urine urge) Beeja Dushti Janya (Due to defect in genes) Beeja Dushti (defect in sperm & ovum) Pitri-Matriki Beeja Dosha (Genetic defect)

Samprapti (Pathogenesis) [6,7,8]

Samprapti (Pathogenesis) is the method of

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recognizing the production of illness through the vitiated Doshas, which are continuously circulated throughout the body. According to him, because of Nidana Sevana (Consumption of Etiological Factors), Kapha gets agitated, mixes with urine, enters the urinary bladder and stays there, creates Ashmari (calculi), Acharya Sushruta scientifically defined the Samprapti (Pathogenesis) of Ashmari (calculi). Besides this, he also explained it wonderfully by way of illustrations, which are as follows, for example A fresh earthen pot submerged in water up to its mouth is filled on its sides with water, *Basti* (urinary bladder) is also filled with Mutra (urine) in the same way. In the same way, Vata, Pitta and Kapha also join the Basti through the Upasnehana phase along with Mutra (urine) through its wall and create Ashmari (calculi).

Ashmari (calculi) is formed when Vata dries up the Mutra (urine) into the urinary bladder along with Shukra (semen), Kapha and Pitta, according to Acharya Charaka, just as bile is solidified in the cow's Pittashaya (gall bladder). It can also be inferred that the presence of three Doshas (Vata, Pitta and Kapha) in Mutrashmari's Samprapti (Pathogenesis) was taken into account by both Acharyas.

Samprapti Ghataka (Pathogenic factor)

- Dosha Vata, Pitta and Kapha
- Dushya Mutra (Urine), Shukra (Semen)
- Adhisthana (place) Basti (Bladder)
- *Srotasa* (channel)- *Mutravaha Srotasa* (Urinary channels)
- Sroto Dushti Sanga (Obstruction)

Vishista Samprapti Doshanusar^[9-10]

1. Shleshmaja Ashmari-

Kapha is increased and forms a coating at the bottom of the *Basti* (Bladder) in a person who absorbs *Kapha PrakoPāka Ahara* (food aggravating *kapha*) very much, then it obstructs the passage by being located in the *Basti Mukha* (opening of urinary bladder).

2. Pittaja Ashmari-

The Kapha gets solidified within the Basti

(Bladder) along with *Pitta* and increases in size and obstructs the passage as it is located in the *Basti Mukha* (opening of urinary bladder).

3. Vataja Ashmari-

The *Kapha* is solidified and rises in size along with *Vata* when it is found in *Basti Mukha* (opening of urinary bladder) and obstructs the passage.

4. *Shukrashmari* (Seminal calculus)

Shukrashmari (Seminal calculus) only occurs in the elderly, because of sexual intercourse disruption or because of prolonged sexual intercourse, the Shukra (semen) gets displaced but does not come out and is redirected into the wrong tract and then it is mixed with Vayu and all pledges between the penis and the two testes, after which it dries up and obstructs the passage. Samprapti (Pathogenesis) helps to administer Samprapti Chikitsa Vighatana (breaking of Pathogenesis). It also helps to schedule Doshas' morbidity-based Samshodhana (purification), Samshana (pacification) and Langhana Chikitsa (Deprivation treatment).

Purvarupa (Prodromal symptoms) ^[11]

Purvarupa are the signs and symptoms that occur before the illness presents itself. *Purvarupa* of *Ashmari* (calculi) is, according to *Acharya Sushruta*

- Mootrakruchha (Dysuria)
- *Jwara* (fever)
- Avasada (exhaustion due to pain)
- Basti Siro Vedana (pain in suprapubic region)
- Vedana Mushka (pain in scrotum)
- *Basti Pida* (pain in hypogastric region)
- Arochaka (anorexia)
- *Vedana Shepha* (pain in penis)
- *Basti Gandhatwa* (concentrated urine smells like goat's urine)
- *Avila Mutra* (turbidity of urine)
- Sandra Mutra (sedimentation of urine)

Rupa [12-14]

Fully manifested signs of the condition are called

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Rupa. There are two types:

- 1. Rupa Samanya (Generalized Symptoms)
- 2. Vishishta Rupa (Specific Symptoms)

3. Rupa Samanya (Generalized Symptoms)

- Pain in the area of Nabhi (umbilicus), Basti (Bladder), Sevani(Ureter) and Mehana (Penis) during urination.
- Sanga of Mutradhara (interruption of stream of • urine)
- Sarudira Mutrata (urine mixed with blood)
- Vikiran Mutra (urine passed in divided streams). •
- Gomada Prakasha (urine resembling Zircon in • colour).
- Atyavila Mutra (very turbid urine)
- Sasikatam (urine containing sand) •
- Pain during *Dhavana* (running) *Langhana* (jumping), *Plavana* (swimming), riding
- Prishthayana (riding), long walk Adhwa • Gamana (long walk) etc.

Vishista Rupa (Specific Symptoms)

- 1. Ashmari Kaphaja
- Due to disruption of the flow of urine, pressure, heaviness and cold feeling in the bladder area is caused by cutting, inciting or stinging.
- Size and shape the size of a hen's egg
- Color White and identical to Madhuka or • Madhu (honey) Varna.

2. Ashmari Pittaja

- Due to interruption of the flow of urine warmth, • sucking, burning and throbbing pain is felt inside the bladder and *Ushna Vata* occurs.
- Scale and Stone form is like the seed of Bhallataka (Semicarpus anacardium).
- Color Reddish, yellowish, blackish or honey-• like.

3. Ashmari Vataja

Owing to obstruction of urinary supply, the patient suffers intense discomfort. Due to extreme discomfort, the patient grinds his teeth, presses the umbilicus, squeezes the penis, often touches the

rectum, and screams in anguish, experiences a burning sensation, and passes flatus, urine, and stool with difficulty as micturition strains.

Size and shape: Hard, irregular, rugged and coated with spikes like *Kadamba* flowers.

4. Shukrashmari (Seminal calculus)

Micturition complexity

Bladder pressure and swelling in both of the testicles. When Ashmari is hand-squeezed, it splits into small bits and then disappears.

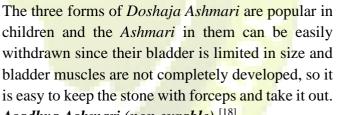
Mutrashmari's Bheda (TYPES)^[15-16]

All Acharyas have categorized the Ashmari (calculi) disease into 4 types:

- 1. Vataja Ashmari
- 2. Pittaja Ashmari
- 3. Shleshmaja Ashmari
- 4. Shukrashmari

The secondary diseases of Ashmari are Sarkara, Sikata Meha and Bhasmakhya⁻

Sadhyasadhyata (Prognosis) Sadhya Ashmari (curable)^[17]



Asadhya Ashmari (non curable)^[18]

Ashmari soon kills the patient while followed by deep umbilical and scrotal swelling, micturition obstruction, serious pain and urinary gravel removal

Upadrava (Complications)^[19]

Complications such as weakness, fatigue, if gravel becomes larger and obstructs the passage. It will develop emaciation, flank pain, loss of appetite, anaemia, Ushna Vata (cysto-urethritis), thirst, heart pain and vomiting.

MANAGEMENT^[20]

Nidana Parivarjana (avoiding the cause) -Acharya Sushruta described Chikitsa (Treatment) as "Samkshepatah kriyayogo nidana parivarjanam." Avoiding the causative factors

responsible for causing the disease is the primary step in stopping the disease from causing it.

Pathya-Apathya (Wholesome-Unwholesome) [21-29]

Pathya-Apathya (Wholesome-Unwholesome) is very important for both healthy and diseased people since it protects the health of the healthy individual and helps to treat the illness of the diseased individual.

Vaidya Jeevana says that "There is no need for any medication if a man uses Pathya and if the patient does not observe Pathya (Wholesome) and indulges in Apathya (Unwholesome), the medicine will not act. Pathya- Apathya suggests consistency with Srotasa (pathway). Pathya (Wholesome) is defined as the substances that are wholesome to the body or channels of the body and that offer delight to the mind

Pathya Ahara (Wholesome food)

Cereals-*Puraan Shali, Puraan Sathi* (old varieties of rice), *Rakta-Shali* (red variety of rice), *Syamaka* (Sanwa-barnyard millet), *Kodrava* (Kodo millet rice), *Trina-dhanya, Godhuma* (wheat), *Yava* (Barley).

Pulses- *Kulattha* (Horse gram), *Moonga* (split green gram), *Aadhaki* (split pigeon peas).

Vegetables-Old fruit and leaves of *Kushmanda* (pumpkin) plant, *Chaulai saag* (Amaranthus).

Aushadha (Drugs) – Gokshura (Tribulus terrestris), Varuna (Crataeva nurvala), Aardraka (Zingiber officinale), Pashanabheda (Bergenia ciliate), Yava-kshara, alkali (preparation made with whole plant of barley) Renuka (Vitex agnus-castus Linn), Shalaparni (Desmodium gangeticum), Punarnava (Boerhavia Diffusa).

Pathya Vihara (Wholesome life style)

Basti-Karma (medicated enema), Virechana (purgation), Vamana (emesis), Langhana, (deprivation treatment) Swedana (Sudation therapy), Playing in water, removing of Ashmari (calculi) with the help of Yantra (instrument).

Apathya Ahara (Un Wholesome food)

Citrus, constipating, sour and heavy to digest

eatables and drinks.

Apathya Vihara (Un Wholesome life style)

Ativyayama (excessive exercise), holding the force of micturition and ejaculation.

DISCUSSION^[30]

Mutrashmari (Urinary calculi) is one of the Astamahagada (eight major diseases) since it is one of the Dasha Vidhapranayathana (ten places where *Prana* (vital life energy) reside), *Tridoshaja*, *Marmashrayee* (situated at vital area) and Vyaktasthana (area of presentation or site) of Ashmari (calculi) is Basti (bladder). It also needs medical intervention when it's lethal. Due to Apathyakara Aahara Vihara (Unwholesome diet and life regimen) such as *Samashana* (Consuming suitable and unsuitable foods mixed together), Adhyasana (eating before digestion of previous food), Vishamashana (taking food irregularly or without following a particular time), and indulging in food rich in *Madhura*, Snigdha Guna (Sweet and Unctuouness), Ashmari (calculi) disease is induced. Milk items, animal protein, are heavily fat diets that can be regarded as guru, generating acidic urine through Snigdha Ahara (unctuous food items).

Many solutes in strongly acidic urine are insoluble and thus result in salt precipitation and crystallisation. We can examine the involvement of the prevailing Dosha on the basis of Vishista Purvaroopa (Specific prodromal symptoms) and can treat it itself in the *Purvarupa stage*. The *Nidana* Sevana (Consumption of Etiological Factors) contributes to Vata's Prakopa, Pitta, Kapha, which then reaches *Basti* (bladder), works on the *Kledatwa* (moistness) of urine and gets solidified by the vitiated Vayu's behaviour of Shoshana Guna (absorption). For the formation of Ashmari Kapha forms *nidus*, which has adhesive characters and forms the base material for the formation of Ashmari (calculi).

The *Lakshanas* of *Ashmari* (Symptoms of calculi) were identified by *Acharya Sushruta* and the location of pain, essence of pain, magnitude of pain, aggravating and relieving factors were listed. Classics resemble renal colic and acute ureteric colic in this pain pattern. The disorder may be corelated with Urolithiasis depending on clinical characteristics. *Vataja Mutrashmari* has features such as *Shyavavarna* (dark brown color), *Parusha* (hard), *Khara* (*dry*) and *Vishama* (irregular) and can be co-related to Calcium oxalate stone with hard studded thorns such as *Kadambapushpa* (like flowers of *Neolamarckia cadamba*) on the basis of *Varna* (colour) and *Aakrati* (shape). The stones of calcium oxalate have an irregular appearance and are covered by sharp projections that appear to cause bleeding. Due to staining of blood, it is single and highly durable, black in colour.^[31]

CONCLUSION

For diagnosis, prognosis, recovery, differential diagnosis, etc., knowledge of Nidana Panchaka (five means of diagnosis) is crucial. When both of these causes are well established, it will become easier to prepare for disease management. *Nidana* (cause or etiology) is the key element in the production of sickness. In order to prevent the etiological causes that are the key step in the treatment of any diseases, both Acharya Charaka and Sushruta have suggested. In addition to this, Vaidya Jivana defined that the base line of care is the adoption of *Pathya* Sevana (consumption of wholesome) in tune with the *Samprapti* (Pathogenesis) disease. The only way to avoid Ashmari's (calculi) recurrence is to consistently pursue *Pathya Kalpana* (Ayurvedic Dietetics) for a long period of time. If all of these singular treatment lines are clubbed together and are implemented in different diseases as a primary line of treatment, it can produce positive outcomes. Therefore, the perfect treatment line is Nidana Parivarjana (avoiding the cause) and *Pathya Kalpana* (Ayurvedic Dietetics).

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