

## A REVIEW ARTICLE ON SHAYYAMUTRATA (ENURESIS) AND ITS EFFECTIVE MANAGEMENT

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### ABSTRACT

Enuresis, commonly known as bedwetting, is a prevalent condition characterized by involuntary urination during sleep, primarily affecting children but occasionally persisting into adolescence and adulthood. This article provides a comprehensive overview of enuresis, delving into its definition, prevalence, and potential causes. Additionally, the study explores the traditional Ayurvedic concept of enuresis, known as Shayamutrata, shedding light on the ancient wisdom that has guided practitioners in addressing this condition. By examining both modern perspectives and Ayurvedic principles, this abstract aims to contribute to a deeper understanding of enuresis and Shayamutrata, offering insights that may inform holistic approaches to their management and treatment.

**KEYWORDS:** Enuresis, Shayamutrata, Bedwetting, Ayurvedic concept, Holistic management.

## INTRODUCTION

Shayyamutra (Primary Nocturnal Enuresis), also referred to as bedwetting, is a prevalent pediatric issue, with a prevalence rate of 7% in males and 3% in females at the age of 5 years. At age 10, the prevalence is 3% for men and 2% for females; by age 18, it decreases to 1% for males and becomes exceedingly rare for females. Population studies conducted in India indicate that 2.5% of individuals aged 0 to 10 years experience enuresis.<sup>[1]</sup> Enuresis presents a greater challenge in Western nations than in India, characterized by widespread concealment and severe implications for family dynamics.<sup>[2]</sup> Mothers frequently endure tiredness, despair, and resentment stemming from the everyday chore of washing, intensified by the associated sense of pride. Hanging clothing in the lawn for drying implicitly signifies to neighbors a perceived inadequacy in good child-rearing. Non-bedwetting siblings may experience embarrassment and vocalize hatred towards a brother who wets the bed. This circumstance engenders emotions of inferiority and inadequacy, potentially culminating in a mental breakdown. The child's autonomy is curtailed, potentially leading to a constricted or compromised personality. A Danish study indicates that enuresis may lead to psychological issues in maturity.<sup>[3]</sup>

Furthermore, Shayyamutra, specifically Primary Nocturnal Enuresis<sup>[4]</sup>, has not yet received a defined methodology, even from current counterparts similar to AKT treatment in tuberculosis. Conventional therapy, as of the present date, have not shown substantial efficacy in halting the advancement of the illness. Moreover, the accessible pharmacotherapeutic interventions frequently have perilous side effects that surpass the advantages of disease eradication. The reemergence of the problem following the discontinuation of medication exacerbates the distress for both parents and the affected kid. Although alternatives such as Enuretic Alarms are available, their prohibitive expense limits accessibility, and their implementation might significantly disturb the child's environment. This review study addresses the topic, seeking to thoroughly comprehend the psychological condition of patients and offer suitable counsel.

## AIMS AND OBJECTIVES

- To study the disease Shayyamutra in Ayurveda parlance.

**DEFINITION**

The term "Shayyamutra" originates from the combination of the words 'Shayya' and 'Mutra'. The term "Shayyamutra" is self-evident, as bed-wetting during sleep constitutes its sole symptom, automatically conveying its meaning. The name Shayyamutra simply denotes a condition marked by the difficulty of uncontrollable bedwetting.

**NIDANA**

Shayyamutra is deficient in both specific and general characteristics pertaining to its Nidana in classical literature. Thus, it is the physician's duty to identify the variables leading to the disease's onset. This study provides a hypothesis regarding the Nidana of Shayyamutra, in accordance with Acharya Charaka's argument that no sickness derives its genesis from anything other than the Tridosha. The detected Nidana in patients can be classified into four primary factors:

**1) Aharaja Nidana**

Excessive liquid consumption (Atidrava Sevana), overindulgence in sweet foods (Madhura Rasa Atisevan), and incompatible food combinations (Virudhanna Sevana) are identified as Nidana factors primarily responsible for the vitiation of Vayu and Kapha Doshas, with only marginal vitiation of Pitta. The aforementioned Nidana elements are frequently noticed in diverse circumstances. This alignment of causal factors highlights the necessity of acknowledging and treating lifestyle and dietary patterns in those affected by Shayyamutra. The focus on Vayu and Kapha vitiation offers significant insights for developing comprehensive treatment strategies aimed at addressing these particular imbalances.

**2) Viharaja Nidana**

Ati Nidra, Diwaswapna, Vega Vidharana, causes vitiation of mainly Kapha & Vata Dosha.

**3) Manasika Nidana**

Fear (Bhaya), grief (Shoka), concern (Chinta), anger (Krodha), and depression (Vishada) are classified as Manasika Nidanas, which elevate Raja and Tamo Gunas and exacerbate the Tridoshas (Cha. Vi. 4/8). Sushruta specifically identifies Vishada as a causal component, asserting that Tama Dosha results in Indriya Vikalata (impairment of sensory capabilities). From this viewpoint, it may be deduced that Shayyamutra may arise as a result of abnormalities in Mutrendriya Vikalata, signifying a breakdown in the coordination of urinary control activities. This underscores the interrelation of mental moods and physiological

expressions in Ayurvedic philosophy, stressing the necessity for a comprehensive strategy to manage both the mind and body in the treatment of Shayyamutra.

#### 4) Miscellaneous

The term "Rogatikarshanata" refers to a condition of overall bodily debilitation subsequent to any systemic illness, acting as a prevalent factor for the disturbance of Vata. Conversely, parasitic infestations (Krimis) are classified as Kaphaja nidana. The consumption of clay (Mrityikabhakshanajanya) largely stimulates Vayu due to its astringent and bitter taste attributes, which also amplify the dry and heavy characteristics of Kapha. In the localized causes (Sthanika Nidanas), diseases such as Niruddhaprakasha (obstruction of urine flow) and Parivartika (alterations in urine characteristics) are often linked to Shayyamutra, where Vayu Dosha is predominant. Moreover, localized edema (Shotha) in the external genitalia and urethra may result from inadequate genital hygiene. Charaka's claim that Agantuja Nidanas initially disrupt Vayu corresponds with Vagbhatta's focus on the same concept. In the framework of Shayyamutra, it may be deduced that Sthanika Nidanas primarily affect the aggravation of Vayu Dosha.

#### POORVARUPA

The premonitory symptoms, referred to as Purva Rupa, are essential for offering early signals to physicians, facilitating prompt commencement of treatment. In the instance of Shayyamutra, classical literature offer no signs of Purva Rupa, nor are such premonitory symptoms frequently observed in clinical practice. The lack of early indicators complicates the identification and proactive management of Shayyamutra, underscoring the necessity for a thorough comprehension of the condition and the investigation of possible signals that could facilitate early diagnosis and intervention.

#### ROOPA

The name "Roopa" denotes the indications and symptoms of a disease, offering a visual depiction that facilitates its identification. In contemporary medical language, a differentiation is made between "signs" (visible by both the patient and physician, such as edema) and "symptoms" (perceived solely by the patient, such as pain intensity). In Ayurvedic literature, the term "Lakshana," equivalent to Rupa, is employed to signify the method via which a physician achieves the Lakshya, or the accurate comprehension of the condition, representing the symptoms. In the context of Shayyamutra, traditional scriptures accurately delineated a solitary cardinal symptom. The insight of our Acharyas is seen in the

inclusion of this symptom within the nomenclature of the illness. Shayyamutra, signifying bed-wetting, distinctly identifies the condition when a child involuntarily urinates in bed, including both nocturnal and diurnal incidents.

### SAMPRAPTI

Samprapti refers to the evolutionary progression of a specific disease. The classic work elucidates the different aspects from the origin to the beginning of the sickness, providing the rationale behind it; nevertheless, there is no known reference clarifying the Samprapti of Shayyamutra disease. Nonetheless, as demonstrated in the Nidana idea theory, a comparable hypothesis for Samprapti can also be established.

#### Samprapti Ghataka

• Dosha	Vata (Anubandhya), Kapha (Anubandha)
• Dushya	Rasa
• Agni	Vishamagni
• Srotas	Mutravaha, Manovaha, Annavaha, Rasavaha
• Sroto Dushti	Atipravrutti
• Samutthana	Pakwashaya
• Avayava	Basti

#### Shayyamutra Chikitsa

At the outset of the Charaka Samhita, Acharya Charaka underscores the fundamental principle of Ayurveda: to swiftly preserve the health of the well and to remedy the ailments of the ill. Nevertheless, discussing Shayyamutra, a feeling of disillusionment emerges due to the lack of comprehensive discussions concerning its treatment in numerous traditional works. Esteemed texts such as Chikitsa Sara Sangraha, Bhaishajya Ratnavali, and Vaidya Manorama recognize Shayyamutra, although provide scant information on therapeutic methodologies. Certain therapies and medications are suggested without clear directives or an exhaustive therapy procedure. The scarcity of comprehensive Chikitsasutra for Shayyamutra highlights the necessity for additional investigation and study to improve our comprehension and treatment of this ailment in Ayurveda.

#### Chikitsa Sutra

The Chikitsa Sutra for any ailment comprises the overarching therapeutic principles pertaining to that condition. Ayurvedic Chikitsa - treatment is not predicated on prescriptions; rather, it has been a unique tradition of Acharyas to offer general therapeutic principles for many ailments. The subsequent Chikitsa Sutra may be articulated-

- Nidana Parivarjana
- Santarpana Chikitsa
- Satvavajaya Chikitsa

### 1) Nidana Parivarjana

In Sushruta Uttara Tantra – 1/25, within the framework of Netra Roga Chikitsa, Sushruta underscores that the prevention of etiological causes is the optimal treatment and the most efficacious prophylaxis for any ailment. This reflects the timeless maxim that "prevention is preferable to remedy." Applying this knowledge to Shayyamutra, a disorder defined by numerous Nidanas (causal factors), the same concept applies. The Sutra is crucial for both the preventive and therapeutic dimensions of Shayyamutra, emphasizing the necessity of recognizing and addressing the diverse causative causes to avert the disorder's emergence and enhance treatment efficacy.

### 2) Santarpana Chikitsa

Santarpana Chikitsa, particularly those that incorporate Stambhana (arresting or regulating) and Brumhana (nourishing and stimulating growth), may prove to be more advantageous. Santarpana Chikitsa seeks to nourish and fortify the body, which is especially pertinent for a condition such as Shayyamutra, where overall health and energy are critical aspects. The focus on Stambhana indicates the significance of stabilizing and regulating specific physiological processes to properly manage the condition. It is essential to account for individual differences and seek guidance from an Ayurvedic practitioner to customize the treatment strategy according to the specific attributes and requirements of the individual with Shayyamutra.

### 3) Satvavajaya Chikitsa

As social beings, we frequently encounter limitations in satisfying our objectives, leading us to accept circumstances or outcomes that we may find undesirable. This divergence between aspirations and reality can result in frustration, psychological stress, and may contribute to mental problems. Ayurveda attributes these mental problems to the vitiation of Raja (the character of passion and activity) and Tama (the property of immobility and gloom).

- Vagbhata posits that the management of Raja and Tama necessitates the use of intelligence, willpower, and self-focus. By utilizing cognitive abilities, developing inner resilience, and embracing a self-focused perspective, individuals might strive to restore

equilibrium and harmony inside the mind. This corresponds with the comprehensive principles of Ayurveda, highlighting the significance of physical, mental, and spiritual aspects of health and well-being. (07)

- In Charaka Sutra 11/56, Tisreshaneeya Adhyaya, Charaka delineates the Trividha Chikitsa Upakrama, which incorporates Satvavajaya as a therapeutic method intended to enhance the Satva Guna (quality of purity and equilibrium in the mind). Satvavajaya Chikitsa entails the diagnosis and progressive enhancement of Avara Satva (lower state of mind) into Pravara Satva (higher state of mind) by designated techniques.
- Charaka promotes the notion of addressing mental conditions by fostering opposing mental states (e.g., alleviating fear with courage, countering desire with happiness), which is integral to Satvavajaya Chikitsa. This comprehensive approach corresponds with Ayurvedic principles, highlighting the interrelation of the mind and body in the quest for full wellness.
- Acharya Kashyap's counsel regarding the treatment of psychological and physical ailments exemplifies the comprehensive philosophy of Ayurveda. His teaching suggests that psychological illnesses can be surmounted by fostering specific skills and attributes.. (08)
- Dhriti (Retention Power): Developing mental stability and the ability to withstand challenges.
- Virya (Prowess): Cultivating strength, vigor, and resilience.
- Smriti (Memory): Enhancing cognitive functions and memory.
- Jnana (Knowledge): Acquiring wisdom and understanding.
- Vijnana (Scientific Knowledge): Applying specialized knowledge and skills.

### **SADHYASADHYATA**

- "Sadhyasadhyata" denotes the prognosis of an illness and is crucial in informing the physician about the treatability and anticipated results of the ailment. In the context of Shyayamutra, the prognosis can be assessed based on certain disease criteria.
- Another perspective is to consider Shyayamutra as a Vata-predominant disorder. In Ayurveda, Vata Dosha is regarded as "Krichha Sadhya," indicating that it is challenging to heal. The characteristics of Vata, particularly when exacerbated, can provide difficulties in management.

- The prognosis of Shayyamutra may be affected by compliance with Nidana Parivarjana (avoidance of causative elements). Failure to adhere to this preventive step may result in the disease advancing to an incurable stage (Asadhyatva) and continuing into adulthood.

## DISCUSSION

The description emphasizes the dynamic character of Shayyamutra (enuresis) as a condition, illuminating its societal view. Once seen as a predominantly Western issue, it is now increasingly impacting persons in India, perhaps associated with lifestyle alterations and stressors in the urban Indian milieu.

The illness is frequently underdiagnosed, mainly due to its self-limiting characteristics and cultural shame. Although it affects adults, children are more frequently impacted, and it is acknowledged to influence self-esteem and potentially result in enduring difficulties such as hyperactivity, underachievement, insecurity, and awkwardness. These problems may hinder social and emotional development.

The description highlights the absence of a conclusive remedy in contemporary medicine and advocates for the collaboration of Ayurvedic and other medical professionals to resolve this matter, enabling children to mature unimpeded and contribute to society.

The reference to the Ayurvedic viewpoint, based on Addhamalla's definition, presents the notions of "Kshinapurvakam" and "Doshaprabhavat." The association seeks to associate Ayurvedic principles with contemporary medical interpretations, relating "Kshina" to probable variables such as nocturnal polyuria or diminished ADH secretion. The comprehensive method identifies thin urine, exhaustion resulting in deep sleep, and weaker detrusor muscle as significant elements to the etiopathogenesis of Shayyamutra.

This investigation emphasizes the intricacy of comprehending and tackling Shayyamutra and shows the necessity of amalgamating traditional and contemporary medical viewpoints for a more holistic approach to treatment and care.

## CONCLUSION

This study on Shayyamutra offers a detailed examination of enuresis, highlighting its changing influence on Indian society. The investigation reveals potential correlations between Ayurvedic principles and modern medical interpretations. This study highlights the

synergy between ancient wisdom and contemporary science, providing students with a pertinent example of multidisciplinary education. It underscores the significance of amalgamating varied medical systems for a thorough comprehension of health issues, promoting a holistic perspective among students as they address intricate healthcare challenges.

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