

MAGNETO HERBAL TREATMENT FOR CLEARING KIDNEY STONES.

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ABSTRACT

Kidney Stone Disease (KSD) has become a global problem and number of those affected is increasing day by day. A 10 year study of kidney stone patients as herbal respondents is presented. Results of a four phase survey of Herbal respondents and the application of herbal therapy in management of the disease are presented. A five year analysis between 2000 to 2004 of 2783 patients with 1711 males and 1072 females with a 68.78 % of clearance using traditional medicinal plants using *Thuja orientalis*, *Tribulus terrestris*, *Aerva lanata* plus +Acupressure had been tabulated. 1843 patients were reported to suffer from Calcium oxalate stones. The correlation Co-efficient was 0.567 (p value < .0001) In the second phase of study between 2006 to

2010 a serial *Magneto therapy*, *Acupressure*, and *Rajendra Kidney Formula treatment* for 48 days were given with a success of 93.95% patients who had both calcium oxalate and other types of stones. In the third & fourth phases two sets of 140 and 100 patients were treated with a dietopathic way of life and Rajendra Kidney formula with 100% healing and cure of calcium oxalate, cystine, struvite and uric acid stones.

KEYWORDS: Kidney Stone Disease (KSD), Herbalism, Calcium and struvite stones.

INTRODUCTION

The major filtering organs of the body are kidneys, which bring in a chemical equilibrium into the system by concentrating or diluting urine. The kidney plays the key role in homeostasis of the internal environment by virtue of its connection with the extra-cellular fluids. The chemical equilibrium is often upset by undue stress on the kidneys by the

deposition of calcium oxalate, phosphate or sulphate. This brings in an obstruction in the urinary tubules causing severe pain, giddiness and exhaustion. The urinary calculi or renal stones commonly form in the renal substance, the calyces, pelvis of the kidney, urinary tract and urinary bladder. If the calculi are small they are washed off downstream and voided.

Larger staghorn calculi fill the calyces and pelvis and enter the pelvic- ureteric junction, where the ureters enter the bladder. This causes the proximal smooth muscles to go into intermittent contraction to overcome obstruction. The nerve supply of the pelvis is from T11 to T12 segments via sympathetic fibres which carry pain afferent fibres. Pain begins in the loin, passes obliquely around the flank, Radiating downwards to the genitofemoral nerves. The loin to groin pain is caused by ureteric calculi. Cysto scopy, X-Ray or Ultra sono graphy are done to assess and locate the position of the calculi. The measurement of the kidneys, cortical echogenicity pelvo-calyceal dilatation, the size of the stone and location of the calculus are given by the sinologist with the impression and a request to co-relate with clinical findings. Additional chemical analyses of Blood sugar, urea, uric acid, urea, serum creatinine, uric acid and cholesterol are also reported.

No single theory of pathogenesis can properly account for human kidney stones and are too various and their formation is complex. Three pathways lead to stones. The first pathway is overgrowth on interstitial apatite plaque as seen in idiopathic calcium oxalate stone formers, as well as with primary hyperparathyroidism. In the second pathway, there are crystal deposits in renal tubules that were seen in all stone forming groups The third pathway is free solution crystallization. Clear examples of this pathway are those patient groups with cystinuria or hyperoxaluria associated with bypass surgery for obesity.

Kidney stone symptoms are polyuria, polydipsia and polyphagia, which are respectively frequent urination; increased thirst and consequent increased fluid intake; and increased appetite. Diabetes is the leading cause of kidney failure, accounting for 44% cases In 2002, 44,400 people with diabetes began treatment for end-stage kidney disease. It has been well established by several studies that glucose level is a key factor in Kidney Stone. Calcium oxalate is a very common stone occurring in Kidneys. Calcium phosphate forms a small portion sometimes calcium, oxalate, uric acid and citrate levels and fat decide the size of the stone. The high calcium diet makes a superposition and deposition of more and more salts. Calcium is absorbed and stored in bones. High concentration of urine is also a formative agent for stones. Hypercalcyuria and hyper thyroidism caused by a genetic disorder could

deposit Calcium in urine. Increased absorption of calcium from Gut and bones bring about hypercalciuria. Dietary hyperoxaluria is another reason for oxalate formation in such people who usually are between 20 to 30 years of age. High urine oxalates are formed by youth with liver gene defect. Men above 40 usually have enteric hyperoxaluria after surgery for obesity or Bypass surgery. Excessive consumption of Vitamin C is another cause for oxalate Crystal formation though Citrate Juice is considered a remedy for Calcium stones.

Severe potassium deficiency, high levels of protein in diet, diarrhea and fasting related - acidosis bring down calcium level causing hypocitraturia. But sudden intake of potassium citrate upsets balance and causes setting of calcium stones. Rosiglitazone enhanced NO-mediated coronary arteriolar dilations by reducing vascular NAD(P)H oxidase-derived superoxide production and enhancement of catalase activity (Bailey *et al.*, 2003). Pioglitazone treatment prevented hypertension and renal oxidative stress both by reducing free-radical production and by increasing nitric oxide production/ availability. Remedies help in decreasing calcium concentration in the diet and low absorption of calcium from the gut. Avoiding Calcium rich diet could help in regulation. Hence controlled intake of Berries, beans, Chocolates Plain Milk and Tomatoes, was recommended for early clearance of Calcium oxalate stones. Spinach and almonds in excess cause kidney stones in women at 30 plus more often than in Men. Diabetes is associated with long term complications that lead to failure or malfunction of organ like eyes, kidneys, nerves, heart and blood vessels (Nishikawa *et al.*, 2000). Urgent urination feeling is a warning signal for intake of calcium oxalate rich food. Recent studies have demonstrated that thiazolidinediones, novel antidiabetic compounds that improve the insulin sensitivity, lower BP and decrease urinary protein excretion (Penckofer *et al.*, 2002). It has been shown that troglitazone is partly mediated by an inhibition of calcium influx (Arima *et al.*, 2002). Calcium phosphate occurs as long thin colourless needles, arranged as rosettes.

Uric acid stones are mostly formed by Dehydration. cause excruciating pains. These occur when large amounts of purines are ingested. Alcohol consumption is a major cause of Uric acid stone formation. Soybeans, beans yeast, mushrooms, fried meat, chicken and Beetroots are the main problems. Hyper uricosuria is caused by diet and metabolic disorders. This also promotes Calcium oxalate crystallization. Low urinary pH is another problem Decreased Ammonia excretion is a risk factor Hence plenty of water to dissolve ammonia is a must. 83 % of the stones of Gout patients had Uric acid stone deposited intra renally. Liebman (2007).

Recent studies confirm relationship between Gout and urolithiasis. Beer and wine with guanosine promote Uric acid formation. Uric acid is insoluble in Low pH urine. diarrhoea, low renal ammoniogenesis causing a fowl smell indicate Uric acid stones.

Potassium citrate alone could help in alkalization. Sardine and shell fishes, mince meat, Turkeys red meat dried legumes and beer should be avoided. Lemon water benefits health. Lemon juice stimulates Calcium carbonate formation, thereby neutralizing uric acid. More intake of plain water is another important factor.

Methodology: A study was carried out with 6008 herbal respondents of kidney stone surveyed between yr 2000 to 2010. An integrated Magnetotherapy for relieving the pain, Acupressure and Herbal therapy for Rejuvenation were the three stages of serial treatment. Rajendra RJD Kidney Formula used for 48 days could go a long way in relieving the painful kidney stone problem. two sample case studies presented could explain the Phase 1 and phase 2 methodology of kidney stone clearance.

Case study 1: An Electrical Engineer aged 50yrs. With severe groin pain, back pain, wheezing, painful micturition and recurrent Hematuria discharged with severe pain due to urolithiasis an obstructive upper ureteric calculus was relieved of the pain and difficulty in Urination with magnetotherapy and Acupressure. Traditional Herbal decoction prepared out of *Thuja orientalis*, *Tribulus terrestris*, *Aerva lanata* was given as curative herbal dose, 2lit. daily. Every 3 days the medication was repeated. On the 56th day the patient passed a calcium oxalate stone of 6mm size. Subsequently after 24 days another calcium oxalate stone of 12 mm size was expelled with severe pain followed by total relief. The engineer had been on beer, cabbage, cauliflower & tender coconut on friendly advice. After a 3 month break of these food items and meat, the patient became normal.

Case study 2: A head master after his retirement party suffered from bilateral intra renal stones. till his age of 66 had severe attacks periodically, underwent lithotripsy but still suffered from bilateral recurrent renal calculi, periodical recurrent removal of stones after which, he was put under, magnetotherapy, acupressure and phase 1 herbal treatment. Since there was no improvement, he was given Rajendra kidney formula with a daily decoction of 2 lit. of the prepared herbal dose. He responded well and stepped into a strict diet without meat, yellow yolk, sardine fish fry, tomatoes, mysore dhal, beans, and cauliflower. Multiple stones were expelled mostly uric acid, Cystine calcium oxalate, calcium phosphate,

and crystals. Spinach, Boiled Beet root Tender coconut and Pepper salt had been his favourite dishes. Hydronephrosis was relieved and right kidney alone had few 1mm crystals. The patient took MRI, C T ultra sonogram to confirm. Both Kidneys appeared normal. CT imaging showed tiny intra renal calculi. Pus cells were found in urine with protein and urea. Uric acid was 8.7 mg/ dl well above the limit. Protein urea was suspected. Strict Diet and the Herbal Formula brought the gentle man back to normal health after he was put in Rejuvenan an Immuno booster. Nocturnal consumption of Plain milk, Plantains, and nuts were stopped, and was allowed to take tea instead of Coffee and apple regularly instead of Grapes and Pomegranates. The herbal success and Dietopathy had brought back a rejuvenated traveller.

Estimation of the success rate in the application of herbal therapy for clearance of KSD In the first phase Year wise data of Herbal Male and Female patients from 2000 to 2004 were tabulated. Treatment pattern was Magnetotherapy, Acupressure and herbal decoction prepared with *Thuja orientalis*, *Tribulus terrestris*, *Aerva lanata* for 60 days. The Stones cleared were collected Subjected to Chemical analysis and symptomatic pain records. Percentage of patients cleared of stones were calculated and subjected to correlation analysis. Second phase treatment was given for 48 days treated with Rajendra Herbal Kidney formula. Third phase treatment was given to 140 patients in 2011 with 91 males and 49 females with restriction on Diet. Calcium oxalate stones were targeted. Few Respondents had struvite stones. Phase 4 was a study on 100 patients with multiple stones of all categories calcium Oxalate. Calcium phosphate and struvite stones. Regulated Diet with supplementary Herbal diet and Rajendra Kidney formula was tested with the 50 males and 50 females. The age average and success rate was calculated in percentage. Data were subjected to ANOVA.

RESULTS AND DISCUSSION

Kidney Stone Disease (KSD) has become a global problem and number of those affected is increasing day by day. Younger generation is more affected from kidney stones due to unhealthy food. There are many systems of medicine like Ayurveda which assure long term relief for kidney stones. Timely meals, sufficient water positive food are the three point formula to avoid Kidney stone formation. Many people take calcium supplements like plenty of dairy products which help to bind oxalates. These could not be absorbed back into the blood stream and therefore is dumped into the kidneys as stones. Kidney beans, sardines,

canned bones spinach, pepper, roasted nuts and soy oxalate had been explained to have more than 50mg% oxalate content in one serving (M) (Massey, September, 2001).

The survey had been carried out in 4 phases with four different treatment programs. The success of Herbal Treatment was confirmed with 68.78% in the first phase. The nature of stone had been CAOx to an extent of 66.34 %. Out of the 2783 patient reviewed, 1803 had CAOx stones, while 980 had other variety of stones(Table 1). More number of males were affected than Females. (Fig 1) In the second phase analysis Rajendra herbal formula had offered 93.95% success. Maximum number of respondents were affected during the months of March, June, September and December (Table2). Male respondents were more (Fig1). Out of the 3225 herbal respondents, 84.37 % of patients had Calcium Oxalate stones. Patients with struvite and uric acid stones were also cleared with the formula.

Phase 3 and phase 4 reitratred the role of diet in KSD. The study also had shown that more women are affected in the age groups 30 to 40 with an average of 36.18 ± 0.89 (SEM of 11persons) ,and between 41 and 50 with an mean of 46.5 ± 1.16 (SEM of 9 persons). Phase 3 and Phase 4 showed an average age of 38.1 ± 9.11 males in 2011 and 38.1 ± 9.84 males in 2012 (Table 3) . When Diet regulation was followed with the successful herbal treatment 100 % success was noted.



Plate. Kidney stones cleared at Rajendra Herbal Research Foundation

Table 1: Kidney Stone Patients - Herbal respondents under study (2000 -2004)

Phase I		Kidney stone patients under Traditional herbal treatment (<i>Thuja orientalis</i> , <i>Tribulus terrestris</i> , <i>Aerva lanata</i> +Acupressure)						
Year	Total No.	Female	Male	ca ox	others	% CA OX	cleared	% cured
2000	600	195	405	367	233	61.11	329	54.83
2001	418	185	233	276	142	66.03	298	71.29
2002	562	209	353	320	242	64.06	357	63.52
2003	678	254	424	453	225	66.81	453	66.81
2004	525	229	296	387	138	73.71	460	87.45
TOTAL	2783	1072	1711	1803	980		1897	
Average	556	214	342	369	220	66.34	379	68.78

Table2: Phase 2: Male and Female Respondents under Study (2006 -2010)

Phase2 2006-10		Kidney stone patients under Rajendra herbal treatment (<i>Magneto therapy</i> +Acupressure + <i>Rajendra Kidney Formula</i> –for 48 days)						
Month	Total No.	Male	Female	Ca ox	others	% CA OX	cleared	% cured
January	233	137	096	208	025	89.27	227	97.43
February	182	109	073	145	037	79.67	175	96.15
March	303	169	134	264	039	87.13	293	96.70
April	297	190	107	231	066	77.78	259	87.21
May	205	133	072	154	051	75.12	186	90.73
June	306	189	117	240	066	78.43	278	90.85
July	181	113	068	161	020	88.95	169	93.37
August	296	174	122	257	039	86.82	279	94.26
September	364	207	157	299	065	82.14	354	97.25
October	270	155	115	238	032	88.15	258	95.56
November	235	127	108	209	026	88.94	216	91.91
December	353	218	135	318	035	90.08	339	96.03
Total	3225	1921	1304	2724	476	84.37	3033	93.95
Average	269	160	109	227	40			

Table 3: Phase 3 and Phase 4 study with Herbal Therapy and Diet Regulation

Phase	Year	Total number	Male Age Range	Female Age range	Success %
3	2011	140	91	49	
			38.91± 9.11	39.85± 7.38	100
4	2012	100	50	50	
			38.1±9.84	39.92 ±10.24	100

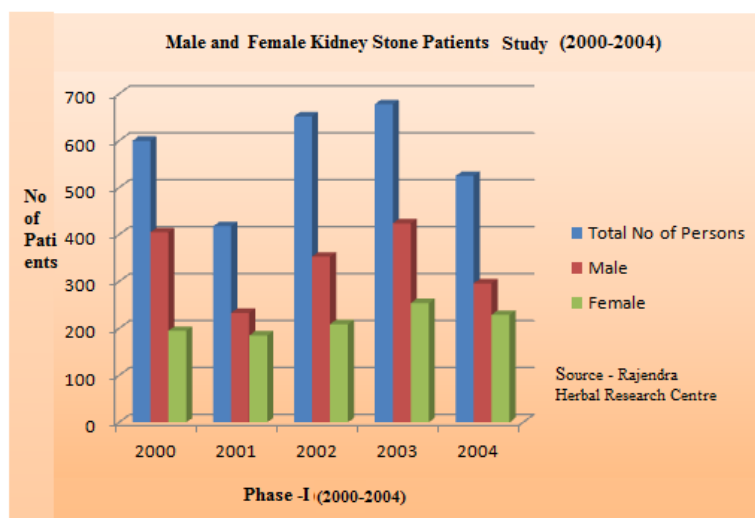


Fig 1: Phase 1: Male and Female Respondents under Study (2000 -2004)

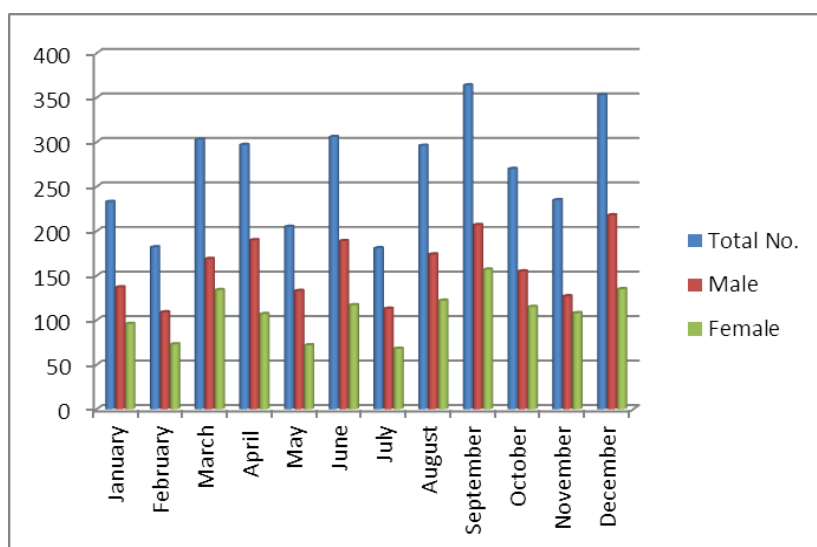


Fig 2: Phase 2: Male and Female Respondents under Study (2006 -2010)

CONCLUSION

Kidney stone disease is a common Diet based one, more predominant in men than women. 100 % success can be achieved with Rajendra herbal kidney formula and regulated diet. KSD mostly affects the age group 30 to 50 years both in men and women. Multiple stones formed due to calcium and uric acid occur commonly to an extent of 80 % whereas struvite stones and uric acid stones are less common. Occurrence of Kidney stones during special festal months mark the heavy dinner and variety of junk foods, yeast, fried items etc. A herbal panacea for the treatment of Kidney stones could relieve pain and suffering of many a poor patients since the formula is a cost effective one.

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