

**EFFECT OF PATALA KSHAR IN THE MANAGEMENT OF
MUTRAGHATA WITH SPECIAL REFERENCE TO BENIGN
PROSTATE HYPERPLASIA: A CASE STUDY****Dr. Anju lata^{1*} and Dr. Neha sharma²**¹Lecturer, Shalya Dept. Shri Dhanwantry Ayurvedic College and Hospital, Chandigarh.²Lecturer Dept. of Kayachikitsa Shri Dhanwantry Ayurvedic College and Hospital,
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College and Hospital,
Chandigarh.**ABSTRACT**

A male patient of 53 years attended shalya opd with the complaints of dribbling micturition, frequent micturition at night and urgency of micturition. On anorectal digital examination it was provisional diagnosed as the case of BPH. Patla paneeya kshar given in that condition after performing required clinical examination and investigation specially PSA level and USG. Finally patient was successfully symptomatically treated with this conservative approach without any complication. So the result of paneeya kshar in BPH was found quite satisfactory in the present case. In order to establish this fact further study for longer duration and on larger sample is required.

KEYWORDS: BPH, Paneeya Kshar, Conservative.**INTRODUCTION**

Definition of swasthpusura given by sushruta that one is known to be healthy when dosha, agni, dhatu and mala are in state of equilibrium in structure and function along with happy mind.^[1]

Large number of patient suffering from enlargement of prostate. Patients suffering from Gr I, Gr II prostate enlargement does not require surgical procedures, and some patient are not willing for surgery. The agony of such patients encourages us to select this more or less surgical disease to be conserved medicinally. Benign Prostate Hyperplasia is diseases process with a well define Age incidence. It is essentially a disease after 50 years with association urinary tract infection. Ayurveda describes in detail about the diseases of urinary tract. The

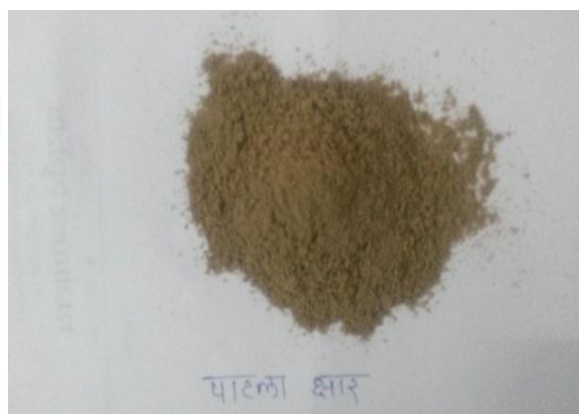
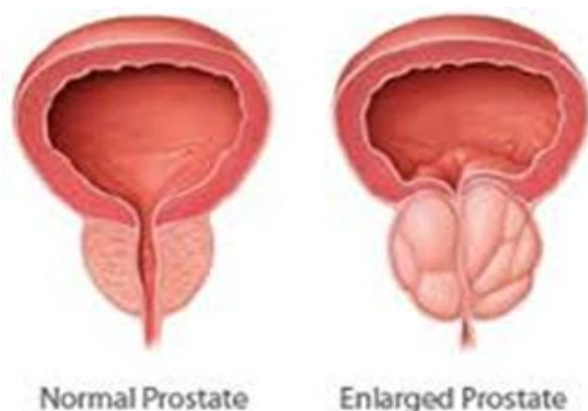
symptom complex of both the Mutrakricchra^[2] and Mutraghata seems to be overlapping each other, but, Acharya Dalhana, Chakrapani, and Vijayarakshita have demarcated the difference between them. This difference is based on the intensity of “Vibhanda” or “Avarodha” which is more predominant in Mutraghata.^[3] Hence, it may be considered that the Mutraghata is a condition in consequence with some kind of Obstructive Uropathy mechanical or functional; related either to upper or lower urinary tract resulting in to either partial or complete retention of urine.

CASE STUDY

A male patient of 53 years attended shalya opd with the complaints of dribbling micturition, frequent micturition at night and urgency of micturition since 3 month. When patient visit shalya opd his anorectal digital examination was done. On digital examination firm lump was feel at anterior wall of rectum then sonography was done and it was confirmed that patient was suffering from (grade1) BPH. It was explained to the patient and his attendents about the disease and line of treatment i.e.conservative treatment (paneeya kshar). After required investigation i.e. USG & PSA level patla paneeya kshar was given to the patient.

Drug	Patala kshar ^[4]
Duration	15 days
dose	500 mg
anupana	Tila tail & water ^[5]
Frequency	Twice a day
Treatment Periods	15 days
Follow Up	0,7 th ,15 th day

Finally after 15 days all symtoms reduced and patient get relaxed.



DISCUSSION

Patla Kshar is found quite satisfactory in the management of BPH with mild reduced in residual volume according to USG. But there was no change in PSA level and volume of prostate. It is also of low cost and easily affordable to patient.

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