

SUCCESSFUL AYURVEDIC MANAGEMENT OF LEFT RENAL MICROCALCULI WITH COMPLETE ULTRASONOGRAPHIC RESOLUTION: A CASE REPORT

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ABSTRACT

The Ayurvedic text compares Ashmari, a common condition of the Mutravaha Srotas, with renal calculi or urolithiasis as defined by modern medicine. The classical symptoms of renal calculi include flank pain, dysuria, increased frequency of urination, nocturia, and recurring episodes of pain. Modern medicine has developed a number of different treatments for renal calculi; however, the recurrence of this disease remains a challenge. Ayurvedic medicine offers a safe and effective method of managing renal stones using the approaches of Ashmaribhedana, Mutrala, Lekhana, and Shothahara. A 55-year-old man had intermittent left flank pain and complaints of burning during urination (dysuria), increasing frequency of urination during the day, and nocturia (4-5 times at night). Ultrasonography performed on 21 August 2025 showed left renal microcalculi between 2-3 mm located at the upper and lower poles of the left kidney. The patient received Ayurvedic

treatment consisting of Hajrool Yahoood Bhasma, Shweta Parpati, Sajji Kshara, Yava Kshara, Gokshura Churna, Kanchanar Guggulu. As treatment progressed, the patient continued to show improvement in symptoms. By ultrasonography on 13 May 2026, the patient had no evidence of renal calculi. Flank pain, burning during urination, increased frequency of urination, and nocturia were significantly reduced. This case demonstrates that Ayurvedic treatment is a safe, effective and non-invasive alternative to managing small renal calculi. Further controlled studies are needed to better define Ayurvedic treatment of renal calculi.

KEYWORDS: Ashmari, Renal Calculi, Urolithiasis, Ayurveda, Hajrool yahoood Bhasma, Mutravaha srotas.

INTRODUCTION

According to Ayurvedic literature, Ashmari is one of the significant ailments occurring in Mutravaha Srotas. Sushruta places Ashmari as one of the Ashta Mahagada due to its highly painful nature and ability to lead to difficulty. Stone formation in the body is attributed principally to Kapha Dosha, while Vata Dosha is responsible for pain and obstruction when urinating.^[1,2,11] Renal calculi are some of the most common forms of disease related to the urinary tract worldwide, causing a significant public health burden.^[3,4,12] Due to several combined factors including changing eating behaviours, obesity, a sedentary lifestyle and inadequate hydration levels; the prevalence of urolithiasis has increased markedly over the last several decades.^[4,12] Commonly presenting symptoms in patients with renal calculi include: flank pain, burning urination, increased frequency of urination, blood in urine, and recurrent urinary tract infections.^[4,5] Currently, modern medical treatment varies in approaches, some include hydration therapy, pain medicine to manage discomfort while waiting for the calculi to pass, as well as the use of agents to promote the passage of the calculi (also known as medical expulsive therapy), shock wave lithotripsy, ureteroscopy, and surgery based on the size and placement of the calculi.^[5,6,13] Despite the advances made in modern medicine, a significant number of people are still at risk for renal calculi; therefore, there is an increase in interest in studying the use of alternative and complementary approaches. As per Ayurveda, there are various Ayurvedic formularies that can support the breakdown and elimination of urinary stones or calculi (Ashmaribhedana, Mutrala, Lekhana, and Shothahara).^[2,7,14] The purpose of this case study was to investigate.

CASE REPORT

A 55-year-old male presented to the outpatient department of Shalya Tantra with complaints of intermittent pain in the left flank, burning sensation while urinating, increased frequency of urination, and nocturia four to five times a night. These symptoms have progressively increased in severity over the past several months, thus affecting his daily activities and sleep. There was no medical or surgical history reported concerning kidney stones. To further explore these symptoms, an ultrasound was recommended.

CHIEF COMPLAINTS

Intermittent left flank pain, Burning sensation while urinating, Increased frequency of urination, Nocturia (4–5 times nightly)

History of Present Illness

The patient was well until his symptoms began over the last few months. Initially, he experienced burning upon urination and intermittent left flank pain. Additionally, urinary frequency and nocturia has continued to worsen, becoming bothersome enough to warrant an ultrasound of the abdomen and pelvis to try to find out what could be causing the patient's discomfort.

INVESTIGATION

Ultrasound abdomen and pelvis (21/08/2025) Fig no. (1) Left renal microcalculi measuring 2-3 mm in the upper pole of the left kidney and 2-3 mm in the lower pole of the left kidney. Enlarged prostate of approximately 48 grams. No significant post-void residual volume.

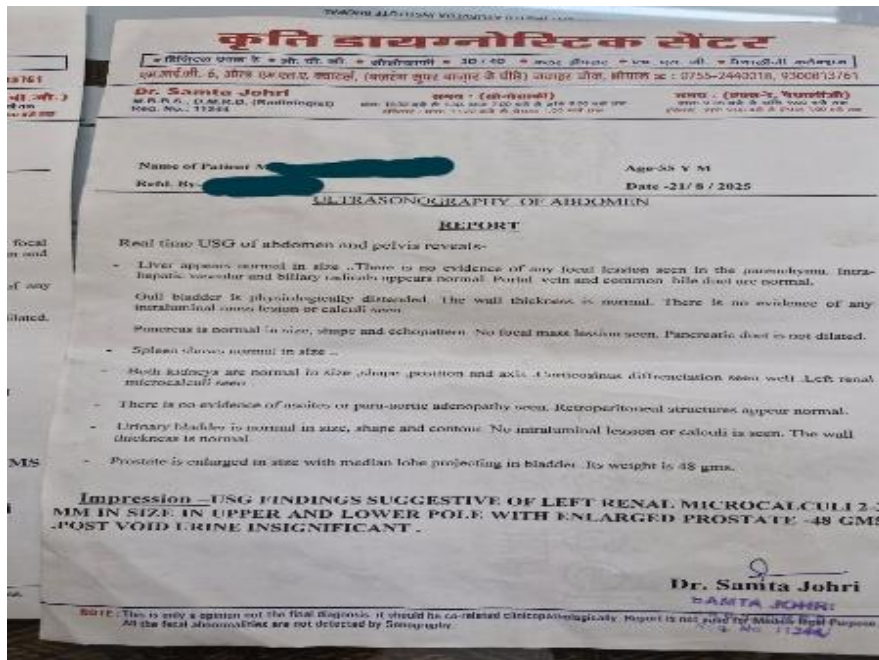


Fig. No. 1

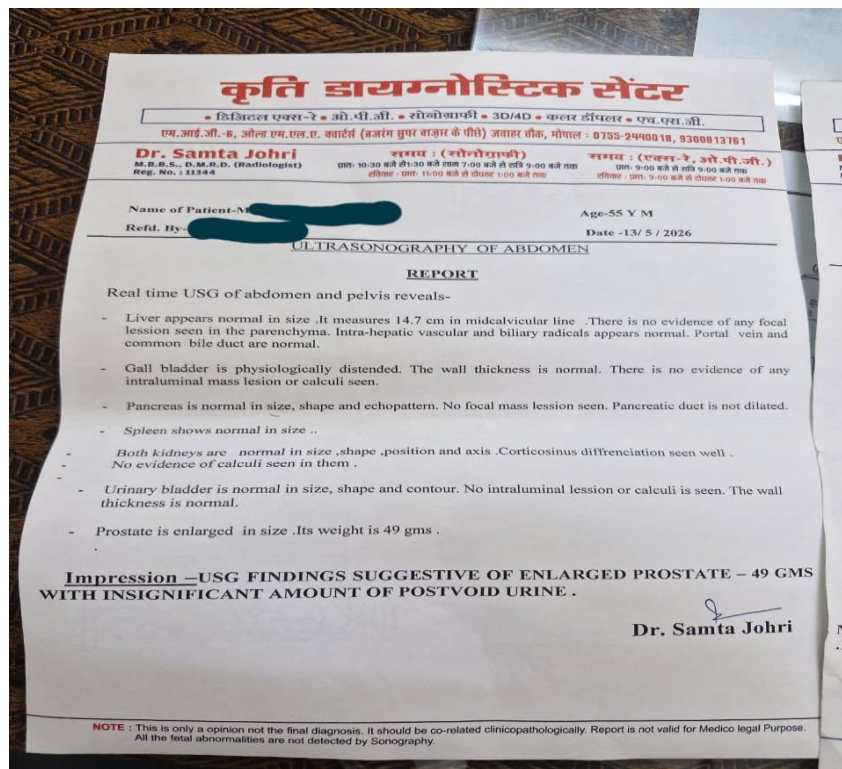


Fig. No. 2

Diagnosis According to Ayurveda
 Ashmari (mutravaha srotas vikara)

TREATMENT PROTOCOL

Treatment started on 25/08/2025.

Medication Dosing

Hajrool Yahood Bhasma 250 mg twice a day

Shweta Parpati 250 mg twice a day

Sajji Kshara 250 mg twice a day

Yava Kshara 250 mg twice a day

Gokshura Churna 3 g twice a day

Kanchanar Guggulu 2 tablets twice a day

The patient was instructed to drink fluids adequately and eat according to Ayurvedic dietary guidelines.

OBSERVATION AND RESULTS

The patient was evaluated at follow-up appointments based on their clinical response. They had showed significant improvement after they had received their treatment.

Symptoms Assessment - Compare Before Treatment to After Treatment

Symptom	Before Treatment	After Treatment
Flank Pain	Present	Absent
Burning Micturation	Present	Absent
Frequency of Micturation	More than usual	Less than usual
Nocturia	4-5 times/night	Significant Reduced

Follow-up Investigation - USG Abdomen & Pelvis (13/05/2026) Fig no. (2)

- No significant finding of renal calculus in either kidney.
- Enlarged prostate measuring 49 g.
- Insignificant post-void residual amount of urine.

Comparison of Ultrasonography Parameters

Parameter	Before Treatment	After Treatment
Left Renal Calculi	Present 2-3mm	Not Present
Kidney Status	Microcalculi	Normal
Prostate size	48gm	49gm
Post Void Residual Urine	Insignificant	Insignificant

Timeline Of Events

Date	Observation
21/08/2025	USG found left renal microcalculi(2-3 mm)
25/08/2025	Ayurvedic treatment initiated
During follow-up	Symptom improvement noted

13/05/2026	USG no longer shows (complete disappearance) of renal calculi
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DISCUSSION

Ashmari is recognized in Ayurvedic texts as one of the most important Mutravaha Srotas (the urinary tract) disorders. Sushruta categorized Ashmari as being an Ashta Mahagada (severe disease) due to its intense pain level, being chronic in nature and having a high propensity for complications that develop from it.^[1] According to Ayurveda, Ashmari is primarily caused by an excess of Kapha Dosha contributing to the formation of the stones by helping the crystalloid material to coalesce together tightly within the urinary tract system, while Vata Dosha is responsible for causing the pain associated with the stones, the obstruction they create within the system, and the difficulty in urinating that can occur due to the obstruction.^[1,2,11] From the perspective of Western medicine, the formation of renal calculi occurs as a result of urinary salts being present in higher concentrations than what can be dissolved in urine, leading to crystal nucleation (forming), aggregation (coming together), growth (getting larger) and retention (staying placed) of the crystals within the urinary tract system.^[3,4,12] The formation of stones in the urinary tract system can be facilitated by several different factors including, but not limited to, a reduced water intake, metabolic disorders, obesity, poor diet quality, and recurrent urinary tract infections.^[4,12,15] In this case report, a 55-year-old male patient presented complaining of classic clinical symptoms of Ashmari with intermittent left sided flank pain, burning urination, increased frequency of urination during the day and night, and nocturia. A radiographic study using Ultrasound confirmed the presence of left renal microcalculi measuring 2-3mm in size located at the upper and lower poles of the left kidney. An Ayurvedic treatment plan was created based on the principles of Ashmaribhedana, Mutrala, Lekhana and Shothahara Chikitsa; with the aim of relieving the symptoms from the condition, aiding in the dissolution of the calculi, and preventing future occurrences.

The likely method in which medications work to relieve pain.

Hajrool Yahood Bhasma -Hajrool Yahood Bhasma is a Herbal Mineral Compound that is popular for use with an Ayurvedic medicine to treat and manage Urinary Stones (Ashmari). It is claimed that it has properties that break up the Stones, and are reported to increase the rate of fragmentation of the stones, making them easier to pass through the Urinary Tract.^[7,14] Shweta Parpati -The primary action of Shweta Parpati is to promote the Smooth Passage of Urinary Flow. It is indicated to help with Mutrakricchra, Ashmari, and many other Urinary

Congestions.^[2] Yava Kshara and Sajji Kshara -Kshara Preparations are Lazily put into the class of Ksharana, and Lekhana. They are thought to Help Break Down Stone Forming Material in the Urinary System, and Promote the Elimination of Urinary Stones. Kshara is also thought to Alkalinize the Urine, therefore; Decreasing Irritation in the Urinary Tract.,^[2] Gokshura Churna- Gokshura is well known as a Mutrala and Shothahara, hence; assists with Proper Urination, Inflammation of the Urinary Tract, and the Urinary System. If the individual increases their output of Urination, they can also increase their chance of Excreting Crystals and Micro-Crystals from the Urinary System.^[7] Kanchar Guggulu -The Properties of Kanchar Guggulu are Lekhana, Shothahara, and Anti-Inflammatory, therefore; can assist with Decreasing Irritation in the Tissues of the Urinary Tract, as well as, Support and Maintain the Regular Physiology of the Urinary Tract.^[7]

CLINICAL OUTCOME

A clinical follow-up of the case revealed progressive symptom improvement over the follow-up period. The burning sensation during expiration ceased, urinary frequency decreased and nocturia improved significantly and flank pain was dramatically reduced. The follow-up ultrasound performed on 13/05/2026, revealed that the previously seen left renal micro-calcifications (2 to 3mm) had completely disappeared. The strongest evidence of this case is the objective ultrasound results obtained for the diagnosis of a urolithiasis patient. Other studies investigating the Ayurvedic approach to urolithiasis have reported similar findings. Kumari et al. reported that patients with mutrashmari receiving Palasha Kshara and Ashmarihara Kwatha.^[8] showed significant clinical improvement. Rathore et al. reported positive results in the management of renal calculi following Kadalipaneeya Kshara.^[9] Sharma et al. also reported experiences with the use of Ayurvedic therapies in the management of Ashmari and achievement of positive outcomes.^[10]

The resolution of renal stones in conjunction with the observable reduction of symptoms in this case support the therapeutic efficacy of an Ayurvedic approach to the management of small renal stones in selected patients.

CONCLUSION

In conclusion, the case showed that Ayurveda can effectively treat and manage the (2-3 mm) microcalculi of the left kidney of a 55-year-old male patient. Pain was relieved permanently, the burning sensation while urinating was eliminated. Both the increase in urination (i.e., urinary frequency) and nocturia disappeared. An ultrasound confirmed that all of the renal

calculi had completely disappeared following treatment, indicating the treatment had positive results. This case supports the hypothesis that Ayurvedic formulations with certain qualities (Ashmaribhedana; Mutrala; Lekhana; and Shothahara) are effective for treating small renal calculi. Additional controlled clinical studies with larger sample sizes will be needed to provide scientific evidence regarding the effectiveness of treatment for renal calculi using an Ayurvedic approach to treatment.

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