

THERAPEUTIC EFFICACY OF COMMONLY USED KASHAYA, VATI, KSHARA AND BHASMA IN THE MANAGEMENT OF MUTRA ASHMARI: AN AYURVEDIC REVIEW WITH CONTEMPORARY RELEVANCE

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ABSTRACT

Mutra Ashmari (urinary stones) is a prevalent and painful condition recognized in *Ayurveda*, classified under *Mutraghata* and *Ashmari Roga*. It presents with intense pain, blood in urine, and difficulty in urination. Due to its severity, recurrence, and complications, it is listed among the *Ashtamahagada* (eight grave disorders) in *Ayurvedic* texts. *Ayurveda* offers a holistic treatment approach utilizing herbo-mineral formulations such as *Kashaya* (herbal decoctions), *Vati* (tablets), *Kshara* (alkaline powder) and *Bhasma* (calcined minerals). This review explores the *Ayurvedic* understanding of *Mutra Ashmari*, including its causative factors, pathophysiology, and the effectiveness of specific remedies in its management.

KEYWORDS: *Mutra Ashmari, Ayurveda, Ashtamahagada, Mutraghata, Kashaya, Vati, Bhasma, Urolithiasis.*

INTRODUCTION

Mutra Ashmari, classically described in *Ayurvedic* texts, is a grave and recurring urological disorder that closely parallels the modern medical condition of urolithiasis, or urinary stone disease.^[1] It is categorized under *Mutravaha Srotas Vyadhi* (disorders of the urinary channels) and

is counted among the *Ashta Mahagada* (eight major diseases) due to its severe clinical manifestations, tendency to recur, and potential complications if left untreated.^[2]

The term *Ashmari* is derived from "*Ashma*" (stone) and "*Ari*" (enemy), signifying a condition that behaves as a tormenting enemy within the body.^[3] This aptly reflects the intense pain, urinary obstruction, and systemic distress that patients often experience. *Ashmari* can form in any part of the urinary tract — kidneys, ureters, bladder, or urethra — as a result of the crystallization of minerals, typically due to doshic imbalance and impaired functioning of the *Mutravaha Srotas*.^[4]

From a modern medical perspective, urinary calculi are managed with conservative approaches like hydration and analgesia for smaller stones, and with advanced interventional techniques such as Extracorporeal Shock Wave Lithotripsy (ESWL), ureteroscopy, and surgical removal for larger or obstructive stones.^[5] However, these approaches often carry risks, may not address the root causes, and are associated with high recurrence rates.^[6]

In contrast, *Ayurveda* provides a holistic, preventive, and curative strategy that emphasizes *Nidana Parivarjana* (elimination of causative factors), lifestyle modification, and the use of herbo-mineral formulations that act at various levels—*dosha* balancing, tissue purification, symptom alleviation, and stone disintegration.^[7] The treatment focuses not only on stone expulsion but also on restoring the normal physiology of *mutravaha srotas* and preventing further recurrence.^[8]

The present review aims to provide an integrative understanding of *Mutra Ashmari*, with a focused analysis of the therapeutic role of *Kashaya*, *Vati*, *Bhasma*, and *Kshara Kalpana*, while also drawing parallels with current scientific insights into their pharmacodynamics and clinical efficacy.^[9]

NIDANA (Etiology)

In *Ayurveda*, the formation of *Ashmari* is understood to result from a combination of dietary, behavioral, and genetic factors that lead to the vitiation of Doshas and ultimately to the obstruction of the *Mutravaha Srotas* (urinary pathways).^[10,11] A predominant role is attributed to *Kapha Dosha*, which acts as a binding agent facilitating stone formation, while *Vata* contributes to dryness and retention, and *Pitta* is responsible for the inflammatory and burning symptoms seen in later stages.^[12,13]

Aaharaj (Dietary) Nidana^[14,15]**Table 1.**

Causative Factor	Ayurvedic Correlation	Guna / Dosha Involvement
Excess intake of <i>Guru</i> (heavy) foods	Slows down <i>Agni</i> , promotes <i>Kapha</i> and <i>Meda</i>	<i>Guru</i> , <i>Snigdha</i> – ↑ <i>Kapha</i> , ↑ <i>Meda</i>
<i>Snigdha</i> (unctuous) foods – ghee, oils, butter	Increases lubrication and <i>Kapha</i> deposition	<i>Snigdha</i> , <i>Sheeta</i> – ↑ <i>Kapha</i>
<i>Abhishyandi</i> foods – curd, cheese, fermented items	Blocks <i>srotas</i> and urine flow	<i>Abhishyandi</i> , <i>Guru</i> – ↑ <i>Kapha</i> , <i>srotorodha</i>
Excessive dairy – milk, curd	<i>Kapha</i> aggravation and stagnation in <i>Mutravaha Srotas</i>	<i>Sheeta</i> , <i>Snigdha</i> – ↑ <i>Kapha</i> , ↓ <i>Vata</i>
Excessive meat and fish	Heavy, unctuous; contributes to stone-forming substances	<i>Guru</i> , <i>Snigdha</i> – ↑ <i>Kapha</i> , ↑ <i>Meda</i>
High protein and low-fiber diet	Promotes <i>Ama</i> formation, obstructs <i>Apana Vata</i>	<i>Guru</i> , <i>Visham Agni</i> – ↑ <i>Ama</i> , ↓ <i>Apana Vata</i>

Viharaj (Behavioral) Nidana^[14,16,17]**Table 2.**

Causative Factor	Ayurvedic Correlation	Guna / Dosha Involvement
<i>Mutra vega dharana</i> (suppression of urine urge)	Vitiates <i>Vata</i> , stagnates urine, facilitates <i>Ashmari</i>	<i>Udavartaka</i> – ↑ <i>Vata</i> , <i>Srotorodha</i>
Sedentary lifestyle	Reduces movement of <i>Doshas</i> and fluid dynamics	<i>Sthira</i> , <i>Guru</i> – ↑ <i>Kapha</i> , ↓ <i>Vata</i>
Low water intake	Leads to concentrated urine, crystal formation	<i>Ruksha</i> , <i>Sheeta</i> – ↑ <i>Vata</i> , ↑ <i>Pitta</i>
Overeating or irregular eating habits	<i>Agni dushti</i> , increases <i>Ama</i> and stone formation	<i>Mandagni</i> – ↑ <i>Kapha</i> , ↑ <i>Ama</i>

Beeja dosha (hereditary) Nidana^[18]**Table 3.**

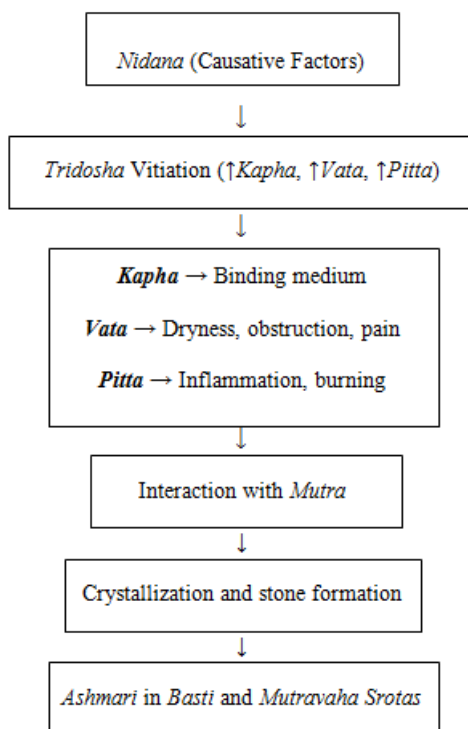
Causative Factor	Ayurvedic Correlation	Guna / Dosha Involvement
<i>Beeja dosha</i> (genetic predisposition)	Inherited tendency to form <i>Ashmari</i>	Involvement of <i>Beeja</i> and <i>Dosha prakriti</i>

SAMPRAPTI (Pathology)

In *Mutra Ashmari*, according to *Acharya Charak* vitiated *Kapha* acts as a binding agent, *Vata* promotes dryness and obstruction, and *Pitta* causes inflammation and burning. These disturbed *Tridoshas* interact with *Mutra*, forming crystals that gradually solidify into stones, primarily in the *Basti* (bladder) and *Mutravaha Srotas*.^[19]

Acharya Sushruta beautifully categorized this under six stages as Shatkriyakala. It is possible through Samprapti to assess the *Doshas*, *Dushyas*, *Srotodusti* or *Khavaigunya*, *Agni* etc^[20]

Flowchart: Pathogenesis of *Mutra Ashmari*^[21]



TYPES OF ASHMARI

Acharya Sushruta classify *ashmari* into four types based on *Tridosha* and *Sukra* involment as follow

Table 4.

Ayurvedic Type	Dosha Involved	Features (Ayurveda)	Modern Correlation	Stone Composition
<i>VatajaAshmari</i> ^[22]	VATA	Small, hard,(शमीबीज सन्निभा अश्मरी),severepain(तीव्रवेदना), constipation(विबन्ध),scantyurine (कृच्छ्र मूत्रता)	Ureteric colic, oxalate stones	Calcium oxalate monohydrate (CaC2O4.H2O)
<i>PittajaAshmari</i> ^[23]	PITTA	Yellow/red stone(हरित/ रक्त वर्ण),burning(दाह),hematuria (रक्तमूत्रता), inflammation	Acidic urine, hematuria, uric acid stones	Uric acid / Calcium oxalate dihydrate
<i>KaphajaAshmari</i> ^[24]	KAPHA	Large, smooth(शुक्ल स्थूल), less painful(मन्दवेदना),turbidurine	Bladder stones, phosphate	Calcium phosphate / struvite

		(पिच्छिल मूत्र), slow onset (गुरु भाव)	stones	
<i>ShukrajAshmari</i> ^[25]	SUKRA & VATA	Related to semen, infertility(क्लैब्य), dysuria(व्यवाय कृच्छता), urethral pain	Prostatic calculi, urethral calculi	Mixed / prostatic secretions + minerals

All the above mentioned types of *ashmari* can be clinically correlated as follow:

Vataja Ashmari is more likely to cause acute colic and obstruction, requiring urgent care.

Pittaja Ashmari patients often present with burning, fever, and blood in urine.

Kaphaja Ashmari cases are often silent and detected incidentally or due to chronic bladder symptoms.

Shukraja Ashmari, although rare, can be confused with genitourinary pathologies like prostatitis or seminal vesicle stones.

MANAGEMENT OF ASHMARI

Ayurveda offers a comprehensive and multi-dimensional approach to the management of *Mutra Ashmari*, emphasizing both curative and preventive aspects. It begins with *Nidana Parivarjana* (elimination of causative factors) and extends to *Ahara-Vihara* (dietary and lifestyle) regulation, tailored to pacify vitiated *Doshas*.^[26,27] The therapeutic strategy incorporates herbo-mineral formulations that act through *Tridosha shamana* (dosha balance), *Srotoshodhana* (channel purification), *Vedanasthapana* (pain relief), and *Ashmari bhedana* (stone disintegration).^[28]

Many of the internal medications described in *Ayurvedic* therapeutics, *Kashaya* (herbal decoctions), *Vati* (tablets/pills), *Bhasma* (calcined mineral preparations), and *Kshara* (alkaline formulations) have emerged as cornerstone interventions in the management of *Mutra Ashmari*.^[29] Each of these dosage forms exerts distinct yet complementary pharmacological actions such as

- *Mutrala* (diuretic),
- *Ashmaribhedana* (litholytic),
- *Shothahara* (anti-inflammatory),
- *Vedanasthapana* (analgesic), and
- *Krimighna* (anti-microbial).^[30]

Aacharya Sushruta mentioned different formulations based on the individual's *prakriti* (constitution), *doshic* dominance, type and location of *Ashmari*, and severity of symptoms. Additionally, their multi-targeted mode of action—on *Doshas* (pathogenic factors), *Dhatus* (tissues), and *Srotas* (body channels)—makes them uniquely effective in comprehensive management. Some of the drugs mentioned by *Aacharya Sushruta* are described below.^[31]

Table 5.

Vata	Pitta	Kapha
<i>Pashanabheda</i>	<i>Varahikanda</i>	<i>Kadli, Palasaha, Yava Kshara</i>
<i>Swetha Arka</i>	<i>Vidarikanda</i>	<i>Devadaru</i>
<i>Gaja pippali</i>	<i>Shatavari</i>	<i>Haridra</i>
<i>Ashmantaka</i>	<i>Pasana Bheda</i>	<i>Maricha</i>
<i>Shatavari</i>	<i>Ikshumoola</i>	<i>Chitraka</i>
<i>Gokshura</i>	<i>Kasha</i>	<i>Guggulu</i>
<i>Brihati</i>	<i>Kusha</i>	<i>Varunadi Gana</i>
<i>Varunagana Guggulu</i>	<i>Varunadi Ghruta</i>	<i>Ela</i>

Some of the common *Kashaya Kalpanas*(Decoction) used in *Mootrashmari*

Table 6.

Name of Kashaya	Ayurvedic Actions	Mode of Action	Absorption / Site of Action
<i>Pashanabhedadi Kashaya</i> ^[32]	<i>Ashmarighna, Mutrala, Shothahara</i>	Breaks urinary calculi, promotes diuresis, reduces inflammation	Absorbed via GI tract; acts on <i>Mutravaha Srotas</i>
<i>Varunadi Kashaya</i> ^[33]	<i>Mutrala, Ashmaribhedana, Vedanasthapana</i>	Disintegrates stones, soothes mucosa, relieves pain	GI absorption; systemic circulation to urinary system
<i>Gokshuradi Kashaya</i> ^[34]	<i>Mutravirechana, Shothahara, Vatahara</i>	Improves urinary flow, reduces oedema and inflammation	Kidneys and bladder via systemic circulation
<i>Triphala Kashaya</i> ^[35]	<i>Shodhana, Tridosha Shamaka, Ama Pachana</i>	Detoxifies urinary tract, balances all three <i>Doshas</i> , removes toxins	Systemic effect; acts on <i>Basti</i> and GI tract
<i>Punarnavadi Kashaya</i> ^[36]	<i>Mutrala, Shothahara, Lekhana</i>	Promotes urination, reduces swelling, scrapes accumulated toxins	Renal and systemic absorption
<i>Dashamoola Kashaya</i> ^[37]	<i>Vatahara, Shoolahara, Deepana</i>	Relieves pain and inflammation, especially <i>Vata</i> -related discomfort	Acts systemically; targets urinary tract and <i>Vata Dosha</i>
<i>Erandamooladi Kashaya</i> ^[38]	<i>Vatahara, Mutrala, Shothahara</i>	Useful in obstructive uropathy, relieves pain and clears channels	Absorption via GI; acts on <i>Apana Vata</i> and <i>Mutravaha Srotas</i>

Some of the common *Vati Kalpanas*(Tablet/Pills) used in *Mootrashmari*

Table 7.

Name of Vati	Ayurvedic Actions	Mode of Action	Absorption / Site of Action
Chandraprabha Vati ^[39]	<i>Tridosha Shamaka, Shothahara, Vedanasthapana, Mutrala</i>	Reduces burning, pain, and inflammation; balances <i>doshas</i> ; promotes diuresis	GI tract; systemic action on urinary and reproductive systems
Gokshuradi Guggulu ^[40]	<i>Mutrala, Vatahara, Ashmarighna</i>	Anti-inflammatory, dissolves stones, relieves urinary obstruction	Absorbed via GI tract; acts on <i>Mutravaha Srotas</i>
Punarnavadi Vati ^[41]	<i>Shothahara, Mutrala, Deepana</i>	Relieves edema, supports renal function, promotes urine flow	Systemic absorption; acts on renal tissues
Basant Kusumakar Ras Vati ^[42]	<i>Rasayana, Tridosha Shamaka, Shukravardhaka</i>	Supports rejuvenation of urinary and reproductive tract; beneficial in <i>Shukraja Ashmari</i>	Systemic; targeted action on <i>Shukravaha and Mutravaha Srotas</i>
Trikantakadi Vati ^[43]	<i>Ashmarighna, Shothahara, Bhedana</i>	Disintegrates stones, reduces swelling and pain	GI absorption; litholytic action in urinary tract
Kshar Vati ^[44]	<i>Kaphavatahara, Lekhana, Bhedana</i>	Alkalinizes urine, dissolves phosphate-based stones, and relieves obstruction	GI tract; renal targeting via circulation

Some of the common *Bhasma Kalpanas*(Mineral based Powders) used in *Mootrashmari*

Table 8.

Name of Bhasma	Ayurvedic Actions	Mode of Action	Absorption / Site of Action
Hazrul Yahud Bhasma ^[45]	<i>Ashmarighna, Mutral, Shoolahara</i>	Chemically dissolves stones, reduces pain, alkalinizes urine	GI absorption → systemic → acts on kidneys & bladder
Varatika Bhasma ^[46]	<i>Pittahara, Ashmarighna, Shothahara</i>	Neutralizes urinary acidity, prevents oxalate crystallization	Absorbed in GI → acts on <i>Mutravaha & Pittavaha Srotas</i>
Shankha Bhasma ^[47]	<i>Deepana, Pittashamak, Mutravirechaka</i>	Improves digestion, corrects acidity, indirectly reduces stone formation	GI tract; systemic pitta balance and urinary modulation
Kapardika Bhasma ^[48]	<i>Pittahara, Mutral, Lekhana</i>	Scrapes accumulations, corrects pH of urine, acts on <i>Pitta-Kapha</i> -related <i>Ashmari</i>	Absorbed via GI; targets lower urinary tract
Tamra Bhasma ^[49]	<i>Shothahara, Lekhana, Mutravirechaka</i>	Useful in <i>Kapha</i> -associated calculi and metabolic regulation	Systemic action post-absorption in GI tract

<i>Shwetaparpati</i> ^[50]	<i>Ashmarighna, Lekhana, Bhedana</i>	Helps dissolve stones chemically; useful in <i>Kapha</i> -type <i>Ashmari</i>	GI and urinary tract; localized action
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Some of the common *Kshara Kalpanas* (Alkalizer Powders) used in *Mootrashmari*

Table 9.

Name of <i>Kshara</i>	Ayurvedic Actions	Mode of Action	Absorption / Site of Action
<i>Apamarga Kshara</i> ^[51]	<i>Ashmaribhedana, Lekhana, Mutrala, Deepana-Pachana</i>	Chemically breaks down stones, scrapes obstructive <i>Kapha-Meda</i> , promotes diuresis	Absorbed via GI tract; acts on urinary and metabolic channels
<i>Yavakshara</i> ^[52]	<i>Mutral, Kaphavatahara, Ashmari bhedana</i>	Alkalinizes urine, helps disintegrate uric acid/phosphate stones, improves flow	Systemic action post GI absorption, especially on bladder and ureters
<i>Tankana Kshara</i> ^[53]	<i>Lekhana, Mutravirechaka, Ashmaribhedi</i>	Dissolves soft stones and relieves <i>Kapha</i> -mediated obstruction	Acts through urine; especially effective in <i>Kapha</i> -related <i>Ashmari</i>
<i>Kadali Kshara</i> ^[54]	<i>Mutral, Ashmaribhedana, Deepana, Mriduvirechaka</i>	Softens and disintegrates calculi, promotes urine flow, mildly cleanses intestines	GI absorption; action on urinary tract and <i>Apana Vata</i> region
<i>Tila Kshara</i> ^[55]	<i>Lekhana, Ashmarighna, Medohara, Mutrala</i>	Scrapes accumulated <i>Meda</i> and <i>Kapha</i> , aids in litholysis, enhances urine output	Systemic effect after GI absorption; acts on <i>Medovaha</i> & <i>Mutravaha Srotas</i>

DISCUSSION

Mutra *Ashmari* (urolithiasis) continues to be a major health concern due to its high recurrence, intense pain, and potential complications such as obstruction and infection. From an Ayurvedic perspective, it is considered a manifestation of vitiated *Vata* and *Kapha* doshas, leading to the formation of concretions in the *Mutravaha Srotas* (urinary tract). The condition is included in *Ashtamahagada*, highlighting its complexity and need for comprehensive management.

This review analyzed several classical Ayurvedic formulations like *Kashaya Kalpana* (decoctions) work through *Mutrala* and *Ashmaribhedana* properties, while *Vati Kalpana* (tablets) offer convenience and systemic support. *Bhasma Kalpana*, with its high potency and bioavailability, targets deeper tissue imbalances, and *Kshara Kalpana* acts as a chemical litholytic agent, helping dissolve stones and alkalinize urine. Modern pharmacological insights support the anti-inflammatory, lithotriptic, and antimicrobial activities of these herbs

and minerals. The synergistic action of these formulations not only helps in expelling the stones but also in preventing recurrence by correcting underlying metabolic disturbances. Therefore, integration of classical knowledge with modern understanding provides a promising approach to managing urolithiasis holistically and effectively.

CONCLUSION

Mutra Ashmari (urinary calculi) is a chronic, recurrent, and often distressing urological condition that requires a comprehensive and sustained approach to management. *Ayurveda* provides a time-tested, holistic alternative rooted in *Tridosha* theory and *Shodhana-Shamana* principles. Together, these formulations not only alleviate symptoms and disintegrate stones but also restore urinary tract function and prevent recurrence, thus offering a promising integrative strategy alongside or independent of modern interventions.

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