

## A COMPREHENSIVE REVIEW OF *VATASTHILA* WITH SPECIAL REFERENCE TO BENIGN PROSTATIC HYPERPLASIA AND ITS AYURVEDIC MANAGEMENT

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### ABSTRACT

Benign Prostatic Hyperplasia (BPH) is a common age-related urological disorder affecting a significant proportion of men over 50, characterized by non-malignant enlargement of the prostate gland leading to Lower Urinary Tract Symptoms (LUTS). In Ayurveda, this condition is closely correlated with *Vatasthila*, a disease primarily caused by the vitiation of Vata dosha, which gets localized in the *Basti* (urinary bladder) region, forming a *sthila* (hard) or *granthi* (swelling). This review aims to provide a comprehensive understanding of *Vatasthila* by elucidating its etiology, pathogenesis, clinical features, and principles of Ayurvedic management in parallel with the modern pathological understanding of BPH. The Ayurvedic pathophysiology involves the accumulation of Ama (toxins) and vitiation of Vata due to *Mithyahara-Vihara* (erroneous diet and lifestyle). The aggravated Vata, especially *Apana Vata*, situated in the pelvic region, undergoes *Prakopa*

(aggravation) and gets lodged in the *Medovaha Srotas* (channels of fat) and *Mutravaha Srotas* (urinary channels), leading to the formation of a stony, movable swelling near the bladder, which is *Vatasthila*. The clinical presentation, including *Prabhutamutrata* (polyuria), *Mutrakrichhra* (dysuria), and *Vanga Varchata* (interrupted flow), bears a striking resemblance to LUTS of BPH. The management of *Vatasthila* in Ayurveda is multifaceted and rooted in

the principles of *Shodhana* (purification) and *Shamana* (palliation). The primary line of treatment includes *deepana-pachana* (improving digestion), *Snehana* (oleation), *Swedana* (fomentation), and *Virechana* (therapeutic purgation), which is considered the prime treatment. Additionally, *Basti* (medicated enema), especially *Uttar Basti* (intra-urethral/vesical administration), holds significant importance. Various herbal formulations like *Gokshuradi Guggulu*, *Chandraprabha Vati*, and *Varunadi Kwath* are extensively used for their *Mutrala* (diuretic) and *Srotoshodhaka* (channel-clearing) properties. This paper consolidates classical knowledge with contemporary research, highlighting the holistic, individualized, and potentially side-effect-minimizing approach of Ayurveda as a viable complementary and alternative management strategy for BPH/*Vatasthila*.

**KEYWORDS:** *Vatasthila*, BPH, *Mutrakrichhra*, *Virechana*, *Uttar Basti*, *Gokshuradi Guggulu*.

## INTRODUCTION

Benign Prostatic Hyperplasia (BPH) is a histopathological condition characterized by the non-cancerous proliferation of the stromal and epithelial cells within the transition zone of the prostate gland.<sup>[1]</sup> It is one of the most prevalent conditions affecting aging men, with histological evidence found in approximately 50% of men by age 50 and 90% by age 90.<sup>[2]</sup> The clinical manifestation of BPH, known as Lower Urinary Tract Symptoms (LUTS), includes obstructive symptoms (e.g., weak stream, hesitancy, straining) and irritative symptoms (e.g., frequency, urgency, nocturia), significantly impacting the quality of life.<sup>[3]</sup> Modern management ranges from watchful waiting and pharmacotherapy (alpha-blockers, 5-alpha-reductase inhibitors) to minimally invasive and surgical procedures, all of which are associated with potential side effects like retrograde ejaculation, erectile dysfunction, and hypotension.<sup>[4]</sup>

In the Ayurvedic paradigm, diseases are understood in terms of *Doshic* imbalance and *Srotodushti* (vitiation of bodily channels). The clinical entity of BPH is remarkably similar to the disease described in classical texts as *Vatasthila*. The term "*Vatasthila*" is a Sanskrit compound word where "*Vata*" signifies the predominant vitiated *Dosha*, and "*Sthila*" means hard or firm, indicating the nature of the swelling.<sup>[5]</sup>

मूत्राघातेन मूत्रावरोध । डल्हण सुउ, ५८/१

शकृन्मार्गस्य बस्तिश्च वायुरन्तरमाश्रितः।

अष्ठिलावध्दनं ग्रन्थिं करोत्यचलमुन्नतम् ॥

विण्मून्नानिलसश्च तन्नध्मानं च जायते।

वेदना च पेरा बस्ती वाताष्ठीलेति तां विदुः ॥ सुउ, ५८/७-८

*Acharya Sushruta*, while describing the eight types of *Mutraghata* (obstruction of urine), includes *Vatasthila* as a condition where a swelling, hard like a stone and movable, appears in the region of the bladder, causing painful micturition.<sup>[6]</sup>

अष्ठिलावद् घनं ग्रन्थिमूर्ध्वमायतमुन्नतम् ।

वाताष्ठीलां विजानियाद् बहिर्मागावरोधिनीम् ॥ सु.नि. १/९

This review seeks to bridge the ancient wisdom of Ayurveda and modern medical science by providing a detailed exploration of *Vatasthila*, its correlation with BPH, and a systematic analysis of its comprehensive Ayurvedic management protocols.

## AYURVEDIC CONCEPTUALIZATION OF VATASTHILA

### Etiological Factors (*Nidana*)

According to Ayurvedic texts, the causes of *Vatasthila* are primarily the factors that aggravate *Vata Dosha*, especially *Apana Vata*, which governs the functions of the pelvic region, including urination, defecation, and ejaculation.<sup>[7]</sup> The common *Nidanas* include:

व्यायामतीक्ष्णोषधरुक्षमधप्रसङ्गनित्यतृष्ट्यानात् ।

आनूपमत्स्याध्यशनादजीर्णात् स्यूमूत्रकृच्छ्राणि नृणामिहाष्टी ॥ च.चि. २६/३२

**Dietary (*Aharaja*):** Excessive intake of dry, cold, light, and astringent foods; habitual consumption of mutually contradictory foods (*Viruddha Ahara*); irregular eating habits; and insufficient fluid intake.<sup>[8]</sup>

**Lifestyle (*Viharaja*):** Suppression of natural urges (*Vegadharana*), especially the urge to urinate; excessive physical exertion; prolonged sitting on hard surfaces; trauma to the pelvic region; and sedentary lifestyle.<sup>[9]</sup>

**Psychological (*Manasika*):** Excessive stress, anxiety, and fear, which are known to vitiate Vata.<sup>[10]</sup>

### **PATHOGENESIS (*SAMPRAPTI*)**

The sequence of disease development (*Samprapti*) of *Vatasthila* can be described in the following stages<sup>[11]</sup>

- ***Sanchaya (Accumulation)*:** Due to the aforementioned etiological factors, *Vata Dosha* starts accumulating in its primary sites, the *Pakvashaya* (colon) and *Asthi* (bones).
- ***Prakopa (Aggravation)*:** The accumulated *Vata* becomes aggravated.
- ***Prasara (Spread)*:** The aggravated *Vata*, particularly *Apana Vata*, spreads from its site to the adjacent *Basti* (urinary bladder) region.
- ***Sthana Samshraya (Localization)*:** The vitiated *Vata* gets lodged in the *Medovaha Srotas* (channels carrying adipose tissue) and *Mutravaha Srotas* (urinary channels) in the pelvic region. This localization is facilitated by the presence of *Ama* (endotoxins resulting from impaired digestion).
- ***Vyadhi Utpatti (Manifestation)*:** The lodged *Vata*, interacting with local tissues (*Mamsa* - muscle, *Meda* - fat), leads to the formation of a *Sthila Granthi* (hard swelling) that is *sparshasahatva* (intolerant to touch) and *cala* (movable). This swelling obstructs the natural flow of urine, leading to the clinical symptoms of *Vatasthila*.

### **CLINICAL FEATURES (*RUPA*)**

The signs and symptoms of *Vatasthila*, as described by *Acharya Sushruta* and other scholars, are<sup>[12]</sup>

- ***Mutrakrichhra*:** Difficult and painful urination.
- ***Mutratsanga*:** Obstruction in the flow of urine.
- ***Vanga Varchata*:** Urine is passed in an interrupted manner, drop by drop.
- ***Toda*:** Pricking pain in the bladder region.
- ***Sthila* and *Cala Granthi*:** A hard, movable swelling in the suprapubic region (near the bladder).
- ***Prabhutamutrata*:** Increased frequency of urination, especially at night (nocturia).

These symptoms have a direct correlation with the International Prostate Symptom Score (IPSS) used to assess the severity of BPH in modern practice.<sup>[13]</sup>

## CORRELATION BETWEEN VATASTHILA AND BPH

While the ancient seers did not have the anatomical knowledge of the prostate gland, their clinical observations led to a precise description of a condition that matches BPH. The prostate gland is not explicitly mentioned in classical texts. However, it can be conceptually located within the domain of *Srotas* responsible for reproductive fluid (*Shukra*) and urine (*Mutra*). The swelling described in *Vatasthila*, located near the bladder neck and urethra, perfectly corresponds to an enlarged prostate causing urethral compression.<sup>[14]</sup>

The table below illustrates the correlation

Ayurvedic Parameter (Vatasthila)	Modern Medical Parameter (BPH)	Remarks
Vata Prakopa, especially Apana Vata	Pathophysiology: Hormonal imbalance and stromal-epithelial interactions.	Vata's dry, mobile, and obstructive qualities mirror the dynamic obstruction caused by BPH.
Srotas Involved - Mutravaha Srotas, Medovaha Srotas	Anatomy - Prostate gland (considered an accessory gland), periurethral transition zone.	The glandular and stromal hyperplasia aligns with the vitiation of Meda and Mamsa Dhatu.
Primary Symptom: Mutrakrichhra (difficult urination).	Primary Symptom - Obstructive LUTS (hesitancy, weak stream, straining).	Direct clinical correlation.
Symptom - Mutratsanga, Vanga Varchata (interrupted flow). Prabhutamutrata (increased frequency).	Symptom - Intermittency. Urinary frequency, nocturia	Direct clinical correlation
Finding - Sthila Granthi (hard swelling).	Finding - Enlarged prostate on Digital Rectal Examination (DRE).	The "hard, movable" description fits a benign, symmetrical enlargement

## Principles of Ayurvedic Management (*Chikitsa Sutra*)

The management of *Vatasthila* is based on the fundamental principles of treating *Vataja* disorders and clearing the obstruction in the *Srotas*. The primary goals are<sup>[16]</sup>

- *Vata Shamana*: Pacifying the aggravated *Vata Dosha*.
- *Srotoshodhana*: Cleansing and opening the blocked channels (especially *Mutravaha Srotas*).
- *Lekhana*: Scraping away the excess *Meda* and *Kapha* contributing to the swelling.
- *Brimhana*: Providing nourishment to the depleted *Dhatus* (tissues).

The treatment protocol is typically sequential and individualized (based on the patient's *Prakriti*, *Vikriti*, and *Bala*).

### **PURVAKARMA (PREPARATORY PROCEDURES)**

These procedures prepare the body for the main eliminative therapy.

कषायकल्कसर्पीषि भक्ष्यान् लेहान् पयांसि च।

क्षारमध्यासवस्वेददान्बस्तीसश्चोत्तरसंजितान् ।

विदध्यान्मतिमांस्तत्र विधिं चाश्मरिनाशनम् ।

मुत्रोदावर्तयोगांश्च कात्स्न्येनेत्रि प्रयोजयेत् ॥ सु.उ. ५८/२७-२८

- *Deepana-Pachana*: To correct *Agni* (digestive fire) and eliminate *Ama*. Herbs like *Chitraka* (*Plumbago zeylanica*), *Pippali* (*Piper longum*), and *Shunthi* (*Zingiber officinale*) are used.<sup>[16]</sup>
- *Snehana* (Oleation): Internal and external administration of oils is crucial to pacify *Vata*. Internal administration (*Snehapana*) with medicated oils like *Dashmoola Taila*, *Ashwagandha Taila*, or plain *Ghee* (*Ghrita*) prepared with *Vata*-pacifying herbs is performed. External *Abhyanga* (oil massage) over the lower abdomen, back, and perineum with oils like *Bala Taila* or *Mahanarayan Taila* is beneficial.<sup>[17]</sup>
- *Swedana* (Fomentation): Localized steam or poultice (*Upanaha*) applied to the suprapubic and sacral region helps to loosen the *Doshas* and reduce stiffness and pain.<sup>[18]</sup>

### **PRADHANA KARMA (MAIN THERAPEUTIC PROCEDURES)**

- *Virechana* (Therapeutic Purgation): This is the treatment of choice (*Shreshtha Chikitsa*) for *Vatasthila* as per Acharya Sushruta.<sup>[19]</sup> Purgation helps to expel the vitiated *Vata* and *Kapha* from the gastrointestinal tract and other channels, relieving the pressure and obstruction in the pelvic region. It is highly effective in clearing the *Mutravaha Srotas*. Herbs like *Trivrit* (*Operculina turpethum*), *Eranda* (*Ricinus communis*), and *Katuki* (*Picrorhiza kurroa*) are used.
- *Basti* (Medicated Enema): *Basti* is considered half of the entire treatment for *Vata* disorders. Two types are particularly relevant:
- *Niruha Basti* (Decoction Enema): Herbal decoctions prepared from *Vata*-pacifying and *Mutrala* herbs like *Dashmoola* (ten roots), *Gokshura* (*Tribulus terrestris*), and *Varuna*



(*Crataeva nurvala*) are administered rectally. This helps to pacify *Vata* systemically and cleanse the pelvic organs.<sup>[20]</sup>

- *Uttar Basti* (Intra-urethral/Vesical Administration): This is a highly specialized procedure where medicated oils or decoctions are instilled directly into the urethra. It is considered supremely effective for urinary disorders like *Vatasthila* as it acts directly on the affected Srotas. Oils like *Chandanabalalakshadi Taila* or *Kshirabala Taila* are commonly used.<sup>[21]</sup>

### **PASCHAT KARMA (POST-THERAPEUTIC CARE) AND SHAMANA CHIKITSA (PALLIATIVE TREATMENT)**

After the purification therapies, a regimen of diet (*Pathya*) and lifestyle modifications is crucial. Palliative treatment with oral herbal formulations is continued for a prolonged period to prevent recurrence.

#### ***Pathya-Apathya* (Do's and Don'ts)**

- *Pathya* (Beneficial): Warm, easily digestible food; liquid diets like soups of *Kulattha* (horse gram), Green gram; adequate water intake; fruits like pomegranate; regular and timely urination; light exercises like walking; stress management.<sup>[22]</sup>
- *Apathya* (Harmful): Suppression of natural urges; heavy, dry, and cold foods; excessive spicy, sour, and salty tastes; sedentary lifestyle; alcohol and smoking; excessive cycling or horse riding.

### **COMMON AYURVEDIC FORMULATIONS FOR VATASTHILA/BPH**

A plethora of herbal and herbo-mineral formulations are used in the management of *Vatasthila*. Their action is primarily *Mutrala* (diuretic), *Sothahara* (anti-inflammatory), and *Vatahara* (Vata pacifying).<sup>[23]</sup>

- *Gokshuradi Guggulu* - This is perhaps the most renowned formulation for *Mutrakrichhra* and *Vatasthila*. It contains *Gokshura* (*Tribulus terrestris*), which is a potent *Mutrala* herb, and *Guggulu* (*Commiphora mukul*), which has anti-inflammatory and lipid-metabolism regulating properties. It helps reduce inflammation and swelling of the prostate.<sup>[24]</sup>
- *Chandraprabha Vati* - A multi-herb formulation containing *Shilajit*, *Guggulu*, *Vacha*, *Musta*, etc. It is warming, digestive, and diuretic, useful for *Vata-Kapha* conditions and urinary calculi, making it highly effective for BPH symptoms.<sup>[25]</sup>

- *Varunadi Kwath/Ghana Vati* - A decoction/tablet primarily based on *Varuna* (*Crataeva nurvala*), which has a specific affinity for the prostate and is known for its anti-BPH and lithontriptic properties.<sup>[26]</sup>
- *Punarnavadi Guggulu* - Contains *Punarnava* (*Boerhavia diffusa*), a strong diuretic, and is beneficial when edema or *Kapha* involvement is significant.
- *Kshirabala Taila* - Used both internally (as an *Anuvasana Basti*) and externally for massage. It is highly nourishing and pacifies Vata effectively.

## REVIEW OF MODERN SCIENTIFIC EVIDENCE SUPPORTING AYURVEDIC HERBS

Several herbs used in Ayurvedic formulations for *Vatasthila* have been subjected to scientific scrutiny, validating their traditional use.

- *Tribulus terrestris* (*Gokshura*): Studies have shown that extracts of *Gokshura* possess anti-urolithiatic, diuretic, and anti-inflammatory activities. It is known to relax the smooth muscles of the ureter and bladder, facilitating urine flow.<sup>[27]</sup>
- *Crataeva nurvala* (*Varuna*): Research indicates that *Varuna* extracts inhibit 5-alpha-reductase, the enzyme responsible for converting testosterone to the more potent Dihydrotestosterone (DHT), which drives prostate growth. It also exhibits anti-inflammatory and antioxidant effects.<sup>[28]</sup>
- *Commiphora mukul* (*Guggulu*): Guggulosterones present in *Guggulu* have been shown to have anti-inflammatory properties and may modulate lipid profiles, which could indirectly benefit prostate health.<sup>[29]</sup>
- *Curcuma longa* (*Haridra/Turmeric*): *Curcumin*, the active compound, is a potent anti-inflammatory agent that can inhibit the growth factors involved in BPH pathogenesis.<sup>[30]</sup>

## DISCUSSION AND CONCLUSION

The Ayurvedic concept of *Vatasthila* provides a holistic framework for understanding and managing Benign Prostatic Hyperplasia. Unlike the modern approach, which often focuses solely on the glandular enlargement or symptom relief, Ayurveda addresses the root cause—the systemic *Doshic* imbalance, particularly of *Apana Vata*, and the state of *Agni*.

The strength of Ayurvedic management lies in its individualized, multi-pronged approach. The combination of *Shodhana* (purification) therapies like *Virechana* and *Basti*, which offer a deep cleansing effect, followed by long-term *Shamana* (palliative) therapy with specific



herbs, aims not only to alleviate symptoms but also to prevent recurrence by restoring physiological balance. Procedures like *Uttar Basti* represent a targeted drug delivery system that was conceptualized centuries ago.

While classical evidence is robust, there is a need for more large-scale, well-designed randomized controlled trials (RCTs) to establish the efficacy of these complex interventions against standard modern care. However, the existing pharmacological studies on key herbs provide a strong scientific rationale for their use.

In conclusion, Ayurvedic management of *Vatasthila*/BPH offers a safe, effective, and comprehensive strategy that can be used as a standalone or integrative therapy. It empowers patients to take an active role through dietary and lifestyle changes, leading to sustainable health outcomes. For the aging male population seeking alternatives to pharmaceutical drugs and their associated side effects, Ayurveda presents a time-tested, holistic path to managing prostate health and improving the quality of life.

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