

**AYURVEDIC MANAGEMENT OF *MUTRASHMARI* (UROLITHIASIS)  
BY APAMARGA KSHARA AND SHWADAMSTRAVARUNADI KWATHA -  
A CASE STUDY**

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## ABSTRACT

*Mutrashmari* is one of the most common disorders of the *Mutravaha Srotas* (Urinary system). It is one of the *Ashtamahagada* (Eight fatal conditions) as described in Ayurveda. It is a *Kapha Pradhana Tridoshaja Vyadhi* and is compared with urolithiasis due to resemblance in its clinical features. The formation of *Mutrashmari* is a result of complex physiochemical processes. The aim of this study is to assess the effectiveness of *Shaman Chikitsa* in treatment of *Mutrashmari*. This case study presents a 38-year-old male patient with symptoms of burning micturition, dysuria and abdominal pain (radiating pain from loin to groin) since 10 Days. Treatment was provided using *Shaman Chikitsa* and treatment outcomes was evaluated based on ultrasonography (USG) findings of the abdomen and pelvis, alongside clinical improvements in symptoms. The patient showed significant improvement in both radiological and clinical assessments.

**KEYWORDS:** *Mutrashmari*, renal calculi, urolithiasis, dysuria,

Apamarga Paneeya Kshara.

## INTRODUCTION

*Mutrashmari*, classified under *Sushruta's Ashtamahagada*<sup>[1]</sup> (eight deadly ailments), is a severe disorder of the urinary system. *Ashmari* is considered as one of the deadly ailments due to involvement of *Basti*<sup>[2]</sup> (Urinary bladder). *Basti* is one of the *Tri Marma* (Vital Organs) which plays a key role in this disorder due to its *Marma Ashrayatwa* and being the *Vyakta Sthana*<sup>[3]</sup> which makes it difficult to treat. Typically, urolithiasis is one of the most prevalent urinary tract disorders, characterized by the formation of urinary stones at various locations throughout the urinary system. These stones cause excruciating agony as they travel through the ureters and the urethra. Calculi prevalence varies by age group, sex and regional distribution. The lifetime prevalence of symptomatic urolithiasis is roughly 10% and 5% for men and women respectively.<sup>[4]</sup> The male to female ratio for calculi is 3:1<sup>[5]</sup>, with the peak occurrence occurring between the ages of 30 to 50 years. *Mutrashmari* is *Kapha Pradhana Tridoshaja Vyadhi*. Clinical aspects are used to draw comparisons with urolithiasis.

*Mutravaha Srotas* often reflects an imbalance between elements in the urinary system that promote and inhibit the formation of stones. A series of events, including urine saturation, crystal nucleation and development, crystal aggregation and retention and ultimately stone formation, result in urolithiasis. This complicated Physio-Chemical process underlies the production of any urinary stone.

## AIM

The aim of the study is to evaluate the efficacy of *Shamana Chikitsa* in the management of *Mutrashmari* (Urolithiasis).

## CASE REPORT

A 38-year-old male patient visited OPD of Department of Shalya Tantra, TMAES Ayurvedic Medical College, Hosapete, Karnataka with Complaints of abdominal pain, lower back pain, pain in groin area, dysuria and burning micturition since 10 days.

## History of Present Illness

Patient was said to be apparently normal 10 days back, later he developed complaints of abdominal pain, lower back pain, pain in groin area, dysuria and burning micturition. He consulted modern medical practitioner, who diagnosed kidney stones and prescribed

Analgesics and Antispasmodic drugs for relief from the symptoms. Lithotripsy was advised, but the patient was unwilling to undergo the procedure.

**Family History:** No relevant history.

### **Personal History**

- **Marital Status:** Married
- **Addictions:** Occasional Consumption of alcohol, does not smoke or use tobacco
- **Bowel:** Regular
- **Appetite:** Good
- **Micturition:** 10-11 times/day, 2 time/night
- **Sleep:** Disturbed
- **Water intake:** 1-2 litres 24 hours

### **General Examination**

- **Built:** Moderate
- **Pallor:** Absent
- **Icterus:** Absent
- **Clubbing:** Absent
- **Cyanosis:** Absent
- **Lymphadenopathy:** Absent
- **Oedema:** Absent

### **Vitals**

- **B.P:** 130/80 mmHg
- **P.R:** 80 bpm
- **R.R:** 18 cycles /min
- **SPO2:** 97%

**Height:** 167 cm.

**Weight:** 64 Kg.

**Asthavidha Pariksha**

<i>Nadi</i>	<i>Vata-Pitta</i>
<i>Mala</i>	<i>Mala Stambha</i>
<i>Mutra</i>	<i>Daha</i>
<i>Jihva</i>	<i>Anavrit</i>
<i>Shabda</i>	<i>Prakruta</i>
<i>Sparsha</i>	<i>Ushna</i>
<i>Drik</i>	<i>Prakruta</i>
<i>Akriti</i>	<i>Madhyama</i>

**Systemic Examination****RS:** Air Entry Bilaterally Equal (AEBE)**CVS:** S1, S2 Normal, No added sounds**CNS:** Conscious oriented, No apparent disease (NAD)**Specific Examination**

- **Inspection:** No scars observed
- **Palpation:** Renal angle tenderness present
- **Tenderness:** Present in the left hypochondriac region

**Investigation**

<b>CBC:</b> Hb- 14.3gm/dl RBC- 5.8 million/cu TC-9620 cells/cumm Monocytes -03% Lymphocytes - 21% Eosinophil -07%	<b>Urine Report:</b> Colour- Pale Yellow Appearance- Clear pH/Reaction- 6.2 Specific Gravity -1.015 Epithelial Cells - 1-2 Ep Cells/HPF Pus Cells- 1-2 cells Albumin – Nil Sugar - Nil	<b>Bio- Chemical Test</b> Blood Urea - 33.2 mg% S.Creatinine - 0.9 mg% S. Calcium – 10.8mg% S. Uric Acid- 5.5mg%
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**Ultrasonography of abdomen and pelvis revealed**

- Left renal calculi measuring 8.2 mm in the lower calyx and 5mm in the mid calyx.
- Left ureteric calculus measuring 5 mm.
- Mild left hydronephrosis

**Clinical Diagnosis:** *Mutrashmari* (Urolithiasis)

**Samprapti Ghataka**

<b>Samprapti Ghataka</b>	<b>Mutrashmari</b>
<i>Dosha</i>	<i>Tridosha</i>
<i>Dushya</i>	<i>Mutra</i>
<i>Agni</i>	<i>Jataragni mandya</i>
<i>Ama</i>	<i>Jatharagni mandya</i>
<i>Srotas</i>	<i>Mutravaha srotas</i>
<i>Udbhava sthana</i>	<i>Amashaya and pakwasaya</i>
<i>Sanchara sthana</i>	<i>Siras, Amapakvashaya mutravaha srotas</i>
<i>Adhithana</i>	<i>Mutravaha srotas</i>
<i>Vyakta sthana</i>	<i>Mutravaha srotas</i>
<i>Dusti kara</i>	<i>Sanga</i>
<i>Rogamarga</i>	<i>Madhyama</i>
<i>Vyaadhi sambhava</i>	<i>Mutra Apravritti janya vikar</i>
<i>Sadhyasadyata</i>	<i>Kruchchha, Shastra sadhya</i>

**Drug Review****Apamarga Kshara<sup>[6]</sup> and Shwadamstravarunadi kwatha<sup>[7]</sup>**

<b>S.no</b>	<b>Drugs Name</b>	<b>Latin Name</b>	<b>Rasa</b>	<b>Guna</b>	<b>Vee Rya</b>	<b>Vipaka</b>	<b>Karma</b>
1	Apamarga	<i>Achyranthes aspera</i>	<i>Katu, Tikta</i>	<i>Laghu, Ruksha, Tikshna</i>	<i>Ushna</i>	<i>Katu</i>	<i>Kapha Vata Shamaka, Vedana Stapaka, Lekhana, Krimighna Mutrala, Ashmari Nashaka Deepana, Pachana</i>
1	Shwadamstra	<i>Tribulus terrestris</i>	<i>Madhura</i>	<i>Guru, Snigdha</i>	<i>Shita</i>	<i>Madhura</i>	<i>Vrushya, Mutrala, Rasayana, Vatapittahara</i>
2	Varuna	<i>Crataeva religiosa</i>	<i>Tikta, Kashaya</i>	<i>Laghu, Ruksha</i>	<i>Ushna</i>	<i>Katu</i>	<i>Dipana, Krimighna, Kaphavatahara</i>
3	Shunthi	<i>Zingiber officinale</i>	<i>Katu</i>	<i>Guru, Ruksha, Tikshna</i>	<i>Ushna</i>	<i>Madhura</i>	<i>Vatakaphahara, Deepana, Bhedana, Shula-Shophahara</i>

**MATERIALS AND METHODS****Patient Treatment Plan as**

<b>Sr.no</b>	<b>Name of the Drug</b>	<b>DOSE</b>	<b>Kala</b>	<b>ANUPANA</b>	<b>DURATION</b>
1.	Apamarga Kshara	500mg BD	After Food	Jala	30 Days
2.	Shwadamstravarunadi Kwatha	32ml TDS	After Food	Kshoudra 2ml	30 Days

**ORAL ADMINISTRATION**

Apamarga Kshara: 500mg Capsule BD with Water Shwadamstravarunadi Kwatha: 2 Pala<sup>[8]</sup>  
(32ml)- TDS ANUPANA: Kshoudra (Honey) (2ml)<sup>[9]</sup>

**ASSESSMENT CRITERIA****SUBJECTIVE CRITERIA****1. PAIN**

Sr.No.	SYMPTOM	Grade
1.	No pain	0
2.	Mild pain	1
3.	Moderate pain	2
4.	Severe pain	3

**2. DYSURIA**

Sr.No.	SYMPTOM	Grade
1.	No Dysuria	0
2.	Mild Dysuria (Slight discomfort)	1
3.	Moderate Dysuria (Moderate Pain or discomfort during urination)	2
4.	Severe Dysuria (Intense pain or continuous discomfort during urination)	3

**3. BURNING MICTURITION**

Sr.No.	SYMPTOM	Grade
1.	No Burning micturition	0
2.	Burning micturition Present	1

**OBJECTIVE CRITERIA**

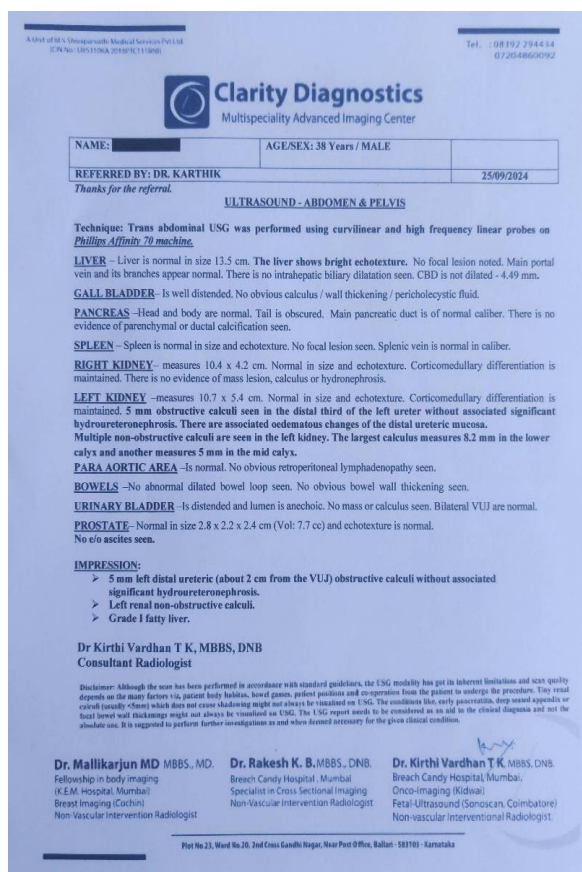
The assessment is based on USG findings of abdomen and pelvis.

**OBSERVATIONS AND RESULTS**

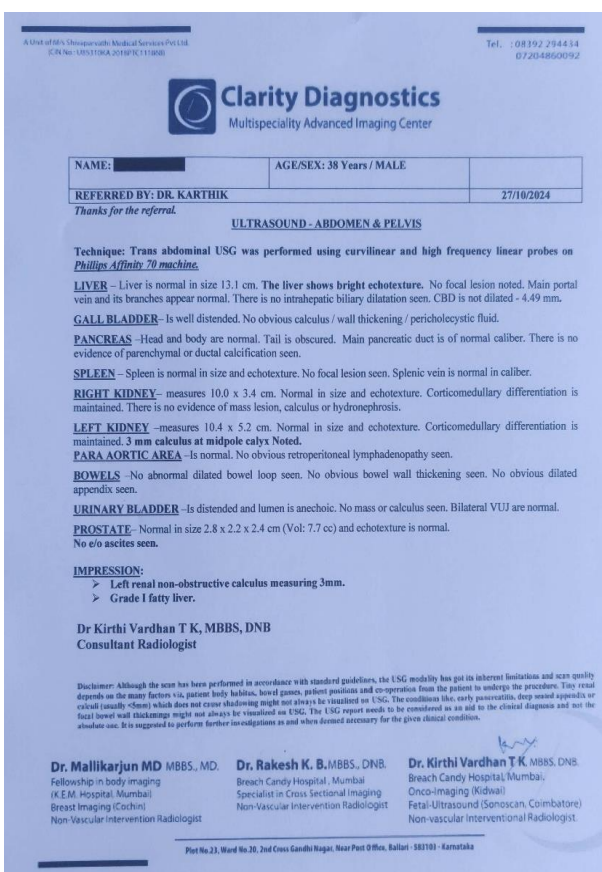
The patient was reviewed 30 days later. After taking medication, a follow-up USG of the abdomen and pelvis revealed a reduction in the size of calculus, However, the calculus in the left mid calyx and left ureter had passed and there was no evidence of hydronephrosis.

Sr. no	Assessment Criteria	Before Treatment	15 <sup>th</sup> Day	After Treatment
1	Pain	3	2	0
2	Dysuria	2	1	0
3	Burning micturition	1	0	0





Before Treatment



After Treatment

## DISCUSSION

Urinary calculus is a stone-like body composed of urinary salts bound together by a colloid matrix of organic materials. It consists of a nucleus around which concentric layers of urinary salts are deposited. Ureteric stones usually originate in the kidney. Gravity and peristalsis both contribute the spontaneous passage into and down the ureter. The probable pathological changes are obstruction (partial/complete), impaction, infection and ulceration.

## Probable mode of action of *Apamarga Kshara* and *Shwadamstravarunadi Kwatha*

- *Apamarga Kshara* is effective in treating kidney stones due to its *Bhedana* (stone breaking), *Pachana* (digestive), *Shodhana* (purification), and *Mutrala* (diuretic) properties. It has *Kapha-Vata Shamaka* and *Kapha-Pitta Samshodhaka* effects on the body. The presence of phytochemicals like alkaloids, saponins and potassium salts helps to dissolve and fragment the stones. It also alkalizes the urine, thus reducing its acidity and preventing further formation of stone and also prevent the growth of micro-organisms. Its *Mutrala* (diuretic) activity increases urine output, aiding in the expulsion of stones, while *Shodhana* (purification) property of *Apamarga Kshara* eliminates the

Pathogenic Micro-organisms from the Urinary tract and its anti- inflammatory properties helps to reduce the swelling and pain in the urinary tract, providing overall relief from the symptoms.

- *Gokshura* is *Sheeta* (cold) in potency and *Madhura* (sweet) in taste. It has the *Balya* (strength provider) property beneficial in providing strength to the body. *Gokshura* is known to balance *Tridosha* (*Vata-Pitta-Kapha*). It is also used to manage urinary disorders due to its *Mutrala* (diuretic) property.<sup>[10]</sup>
- *Varuna* is best litholytic herb and it has been used throughout ages to treat crystalluria and urolithiasis. It has ability to cure kidney stones, kidney disorders and other underlying symptoms associated with renal system. It helps to deactivate glycolate oxidase enzyme which decreases the extra production of oxalate. Oxalate is responsible for the formation of calculi; thus, it helps to hinder the production of calcium salts.<sup>[11]</sup>
- *Varuna* is best herb to reduce painful urination caused by enlarged prostate. It helps in the strengthening of bladder muscles. It helps to remove extra body toxins especially urea and creatinine that are harmful for body functioning.
- *Shunti* with its anti-inflammatory properties helps to reduce the inflammation in the urinary tract, alleviating pain associated with stones.
- *Kshoudra* as *Anupana* enhances the potency, absorption and palatability of the drug.

## CONCLUSION

*Shwadamstravarunadi Kwatha* is an unexplored drug and *Apamarga Kshara* is a well-known preparation are both effective in the management of *Ashmari* having *Ashmarighna*, *Anulomana* and *Mutrala* properties. Even though it is difficult to treat *Ashmari*, this drug combination has shown significant results in reducing the size of stone, promoting stone expulsion and alleviating associated symptoms. It is simple to use and cost- effective. There is a need of a large-scale study to determine the exact efficacy of this Treatment.

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