

## EFFECT OF HARITKYADI CHURNA IN THE MANAGEMENT OF BPH(BENIGN PROSTATIC HYPERPLASIA)- A CASE STUDY

<sup>1</sup>\*Dr Samruddhi Sumangal Pawar and <sup>2</sup>Dr. S. R. Giri

<sup>1</sup>P.G Scholar (Shalyatantra), Government Ayurvedic College, Osmanabad.

<sup>2</sup>H.O.D. (Shalyatantra), Government Ayurvedic College, Osmanabad.

Article Received on  
09 November 2023,

Revised on 29 Nov. 2023,  
Accepted on 19 Dec. 2023

DOI: 10.20959/wjpr20241-30774



**\*Corresponding Author**  
**Dr. Samruddhi Sumangal**  
**Pawar**

P.G Scholar (Shalyatantra),  
Government Ayurvedic  
College, Osmanabad.

### ABSTRACT

BPH is one of the commonest medical condition affecting geriatric male population. The enlargement of prostate can lead to various symptoms like difficulty in voiding, weak stream, frequency, urgency, straining nocturia etc. According to ayurveda it can be closely correlated with vatashtela. Ashtheela is one of the twelve types of mutraghata having ashthelvat Ghan Granthi leading to obstruction or retention of urine. To evaluate the efficacy of Haritaki gokshur pashanbhed yavasa with kushmand swaras bhavna to improve the quality of life of BPH patient, this study is taken up in which 1 gms of combination of Haritaki gokshur pashanbhed yavasa with kushmand swaras bhavna is given in TDS dose before meal for 30 days. Changes in the subjective criteria (by IPSS) and changes in objective criteria (by USG) were recorded. Significant change found in reduction of symptoms like urgency, hesitancy, nocturia, frequency but no change

found in reduction of weight of prostate.

**KEYWORDS:** Ashtheela, Mutraghata, BPH, Haritaki gokshur pashanbhed yavasa with kushmand swaras bhavna.

### INTRODUCTION

The word Mootraghata comprises of two different word i.e., "Mootra" and "Aghata" which stand for low output either by retention, absolute or relative anuria or oliguria.<sup>[1]</sup> There are twelve types of Mutraghata (Obstructed micturition) mentioned in the Sushruta Samhita Out of which Vatashtela showssimilar symptoms with Benign Prostatic Hyperplasia (BPH).<sup>[2]</sup>

BPH is the development of nodules within the prostate gland as a result of enlargement of the stromal and epithelial components of the gland. As the BPH progresses, the entire prostate enlarges in a process called benign prostatic enlargement, resulting in compression of the prostatic urethra and development of bladder outflow obstruction.<sup>[3]</sup> It affects mainly those individuals over the age of 40 years. The incidence of BPH is very common affecting about 1/3rd of men population over 50yrs of age, peak incidence in 60-70yrs, 90% in 8th decade.<sup>[4]</sup> Modern science advocates both medicinal and surgical treatment. For symptomatic relief medicinal treatment is used, which include alpha adrenergic blocking agent, 5 alpha reductase inhibitors, muscarinic receptors antagonist, phosphodiesterase 5 inhibitors (PDE 5 inhibitors) etc. These drugs are expensive and have some side effects like erectile dysfunction, decreased libido, hypotension, dizziness etc.<sup>[5][6]</sup> surgical approaches are open prostatectomy, transurethral resection of prostate, cryotherapy etc. Among the many approaches, prostatectomy (enucleation of prostate) is the best, but it is associated with many problems and complications, e.g. haemorrhage, stricture, sepsis, incontinence, bladder neck contracture, postoperative morbidity, impotence, retrograde ejaculation, etc. The second most acceptable procedure is TURP which is also not free from complications, with the cumulative probability of re-operation estimated to be around 15% at 5-8 years after TURP.<sup>[7]</sup>

Acharya Sushruta has mentioned successful treatment of Mootraghata with Kashaya, Kalka, Ghrita, Kshara and preparations of different drugs.<sup>[8]</sup> This research work was carried out with the ultimate aim of finding the best treatment available in Ayurveda for BPH, to improve quality of life in BPH patients.

Many Ayurvedic texts have described about various formulations & individual herbs in the management of mutraghata. Among which.

## **MATERIAL AND METHODS**

### **Criteria for selection of the subject**

#### **A. Inclusion criteria**

Patients of mild, moderate, gross BPH having Prostate size upto 60 gm. Age of the patient between 50-80 yrs.

#### **B. Exclusion criteria**

CA of prostate and other metastatic and Neoplastic conditions. Neurological disease of Urinary system BPH associated with Stricture urethra, vesical calculi, bladder neck stenosis,

bladder neck hypertrophy, diverticulum.

Acute retention, gross hematuria.

Patients with other systemic disease such as uncontrolled Hypertension, Diabetes mellitus.

### **DRUG PREPARATION<sup>[9][10]</sup>**

Dried, well ripened Haritaki gokshur pashanbhed yavasa with kushmand swaras bhavna was taken, cleaned impurities. 250 Gm of Haritaki gokshur pashanbhed yavasa with kushmand swaras bhavna was measured and powered firstly in Kharal and then in mixture. Powered material (Churna) was sieved through mesh no.85 and fine powder was obtained and kushmand swaras bhavna was given thrice.

Churna was kept in dry atmosphere.

### **CASE REPORT**

A 75 year old male patient jagganath lugade visited to GAC Osmanabad shalyatantra opd on 11/10/2023 having complaints of nocturia, straining, weak stream, since 1 year and gradually become severe. After physical and local examination following investigation were carried out to confirm the diagnosis.

Past History: No history of HTN, DM, Koch's, surgical illness, and drug allergy.

**Personal History** Appetite- Good Diet- Mixed type

Sleep- Disturbed due to nocturia

Micturition- 10-12 times/day

5-6 times/day Bowel- Normal

Addiction- Chronic alcoholic Family History

Maternal – HTN Paternal– not specific

Self- Married; 1 son 2 daughter

### **General Examination**

G.C.- Good Pulse- 66/min

B.P.-110/84 mm of hg Icterus- Not found Pallor- Not found

Lymphadenopathy- Not found Systemic Examination

RS: AE=BE, Clear

CVS: S1S2 normal, no abnormal sound added CNS- Conscious

P/A-soft nontender

P/R-Enlarged non-tender prostate palpable with deep sulcus free rectal mucosa

Local

Examination: Hb 13.8 gm% WBC- 7600/cu mm

RBC- 4500 millions/mm<sup>3</sup>

Blood sugar level (random)-105 mg/dl Urine routine- Nil

Urine

Microscopic- nil; Sr.

Creatinine 1.1 mg%

### A. Subjective criteria

IPSS Score (International prostate scoring system)

	Before Treatment	After Treatment
Incomplete emptying	3	1
Frequency	3	3
Intermittency	3	2
Urgency	3	2
Weak stream	4	2
Straining	5	2
Nocturia	3	2
Total score	24/35	14/35

### B. Objective criteria

USG (Abdomen & Pelvis)

USG Reports	Before treatment	After treatment
Wt of prostate gland	60 gms	60 gms
Prevoid volume	450 cc	560
Postvoid volume	80 cc	60 cc

Diagnosis- Benign Prostatic Hyperplasia

Management 1. A combination Haritakyadi (Haritaki gokshur pashanbhed yavasa with kushmand swaras bhavna) churna of 1 gms before meal TDS for 30 days is given with warm water.

## DISCUSSION

According to modern science, main hormone acting on the prostate is testosterone (TS). This testosterone is converted into 1,5 dihydroxytestosterone (DHT) by 5 alpha reductase enzyme, which is more potent. Testosterone is found in prostatic and perigenital skin. Haridra, Marich, Haritaki churna are known to have 5 alpha reductase inhibitor like activity.

Haritaki (*Terminalia chebula*)

Haritaki is Pancharasatmaka having Kashaya, Tikta, Madhura, Katu, Amla Rasa. By Prabhava it is Tridoshashamaka especially Vatashamaka because it has Madhura Vipaka, Kaphashamaka because it has Laghu, Ruksha Guna and Ushna Veerya. Rogagnata in Vatavyadhi, Shotha, Mootraghata, Yakritpleehavridhi, Prameha, Mutrakruchra, Ashmari etc. It has mutral properties which will be helpful in reducing the sign and symptoms of bph.

Gokshur(*Tribulus-terrestris*) has Madhur-ras, shita virya, Madhur vipak and guru, snigdha-guna acts as mutravirechaniya and pashnbhed, yavasa has kashay, tikta rasand shita virya so acts as vata kaphaghna, madhurvipak it is pittashmak.

Kushmand (*benincasa hispida*) -swaras contains properties like tridoshaghna, lekha, mutraghatahara, mutrakricchaghna, ashmaricchedanaand by virtue of this it help to reduce the symptoms due to BPH.

## CONCLUSION

Haritaki gokshur pashanbhed yavasa with kushmand swaras bhavna churna by virtue of its properties helped in symptomatic relief by reduction in hesitancy, frequency of micturition, straining, nocturia. It did not helped in reduction in size of prostate. Further study should be done to confirm its action.

## REFERENCES

1. Sushruta, Sushruta Samhita with Nibhandha Sangraha commentary of Sri Dalhanacharya.
2. Edited by Vaidya Yadavaji Trikamji Acharya, Chaukambha Surabharati Prakashana, Varansi and Reprint, 2003; 824.
3. Anantaram Sharma, Sushrut Samhita; Uttartantra, Adhyaya 85, Shloka 3-4, Varanasi 221001, Chukhamba Subharti Prakashan, 2015; 473.
4. Sabiston, Textbook of Surgery, edited by Courtney M. Townsend, R. Daniel Beauchamp, B. Mark Evers and Kenneth L. Mattox, First South Asia edition, Elsevier; Reprint, 2016; 2077-2078.
5. Sriram Bhat M (ed), SRB's, Manual of Surgery, Fourth Edition, Jaypee Brothers Medical Publishers (P) Ltd, 2013; 1336.
6. Yunuo wu et al, Guidelines for the treatment of Benign Prostatic Hyperplasia, U.S. Pharmacist, 2016; 41(8): 36-40.
7. S.Das, A Concise Textbook of Surgery, 9th edition, Kolkata-700 005, 13, Old Mayors

Court, 2016; 1277-78.

8. London and Oxford University. 23rd ed. New York: Hodder Headline group; Short Practise of Surgery. Bailey's and Love's, 2000; 1247.
9. Sushruta Samhita. Shashtri AD editor. 17th ed, Ayurveda Tatvasandipika Hindi Commentary; Uttarantra, Chaukhambha Sanskrita Sansthan; Varanasi, 2003; 427.
10. Ambika Datta Shastri, Bhaishajyaratnavali, Adhyay 34, Shloka 27, Chaukhamba Prakashan, 2018.
11. Ravidatta Tripathi, Charaksamhita, Sutrasthan, Adhyay 27 Shlok 113, Chaukhamba Sanskrit Prakashan, Varanasi, 2013.