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Review Article

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THE CLINICAL STUDY ON EFFICACY OF YASHTIMADHU CHURNA WITH JAMBU BEEJ CHURNA AS MEDHYA RASAYANA ALONG WITH BEHAVIOURAL THERAPY IN MANAGEMENT OF **SHAYYAMUTRA (PRIMARY ENURESIS)**

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ABSTRACT

Shayyamutrata (Nocturnal Enuresis) refers to condition where child passes urine unknowingly during sleep at night. This is called night wetting or bed wetting. The word meaning of shayyamutra is urination (Mutra) during night, while lying in the bed (shayya means sleep or lying down). Nocturnal enuresis i.e. Shayyamutra through not physically very harmful but negatively affects child psychology and is assign of delayed neurological development. Ayurveda considers this problem as a kaphaavrit vata along with Tama involvement. The description regarding Shayyamutra is found in Sharangdhara and Vangasen Samhita and Bhaishajya Ratnawali.

KEYWORDS: Shayyamutrata, Nocturnal Enuresis, Yashtimadhu Churna, Jambubeej Churna, Behavioural Therapy.

INTRODUCTION

Children in this modern age are suffering from many psychosomatic problems, out of those is enuresis, incidences are increasing nowadays, not only affecting the physical, emotional and social development of the child, it affect scholastic performance and ultimately becomes the causes of behavioural and other psychosomatic disorders.

Nocturnal Enuresis has been defined as occurrence of involuntary voiding at night after 5 years, the age when volitional control of micturation is expected. Though no description regarding the Nidana, Samprapti etc it available but so acharyas have described the specific treatments for the same shows their awareness on the disease since then. Ancient scholars Brihadtrayee and Laghutrayee have not mentioned Shayyamutra except Sharangadhar, who mentioned the word Shayyamutra under 22 balarogas only. In vangasena and bhaishajya Ratnawali treatment is mentioned but no etiopathogenesis.

The prevalence of enuresis in India is 7.61%-16.3%. The prevalence is highest in children aged 5-8 years and lowest in children aged 11-12 years. Boys suffer more than girls.

Disease review

Nidana - Shayyamutra finds no specific as well as general attributes regarding its Nidana in any of the classical text. Thus, it depends on the physician to make out which of the factors are playing role for the evolvement of the disease.

The Nidana can be divided into 4 as under -

- Aharaja Nidana The etiologies concerned with the food and eating habits.
- Viharaj Nidana- The etiologies concerned with working habits.
- Manasika Nidana The etiologies concerned with the Psychology.
- Miscellaneous- Like Rogatikarshanata, Krimijanya, Mrittika bhakshana janya.

Samprati

The Apan vayu facilitates active secretion of urine, motion, semen etc. after attaining a level of development maturity, there develops a control over these activities initiated by Prana and vyana. But in this condition the overall control of activities of apana is not developed resulting in vitiation of which in turn loss of control of micturition. The vitiation may also be due to encircling (Avarana) of apana by kapha which accelerate the excretion of urine. Brain play important role in both physiological as well as pathological process of body. It functions constantly even during sleep. According to ayurveda, when it is mark by tama and kapha, sleep caused. This may happen in daytime also, but in night, loss of control of prana and vyana over apana and encircling of apana by kapha and tama happens together and child unknowingly urine in the bed.

Medhya

The concept of various scholars regarding the meaning of 'medhya' are as follows:

- 1. Chakrapani 'Dharanvati dhi Medha '(charak sutra 26) means a type of Dhi which has the power of retention of knowledge
- 2. Dalhana described Medha a 'unobstructed, subtle and very deep knowledge gained by all the sense '(Sushruta Chikitsa sthana 28/1-5)
- 3. Arunadatta 'Buddhi Vishesha Medha 'meaning Medha is one of the faculty of Buddhi.
- 4. Hemadri Opined on the term Medha as 'Grihitasya aviccedena dharayitum Shakti '(A.H.Su 5/37) which means unobstructed and uninterrupted perception and retention of knowledge in all the aspects of an objects.
- 5. Amarkosha 'Medhyate sangachhate sarvam iti 'means proper understanding about the knowledge of the existing objects. Knowledge cannot be understood without Medha.

Medha (Intelligence) is a unique characteristic possessed by human being. The word Medha implies higher intellectual function. It can be understood as the faculty of Buddhi which has the power to retain the experience or knowledge and to recall that retained knowledge when needed. It protects an individual from indulging in to Pradnyaparadha. The term Medha has been used mainly in 2 ways viz. Grahana Shakti (Grasping power) and Dharana Shakti (retention power). Acharya Charak has mentioned examination of Medha by inference of Grahanashakti. A person is able to obtain the knowledge of existing objects and retain it through Medha.

Rasayana

Charak Acharaya has defined Rasayana as the substance which invigorate a healthy person by producing the best quality of Rasa, Rakta and all other Dhatus.

Chakrapani says along with physical excellence, psychic excellence like sharp memory etc. are also endowed of rasayana.

Behavioural intervention

- 1. Motivational therapy: A counselling that is intended to increase the patients commitment to a treatment goal can be called as motivational counselling. It is a form of behavioural modification promoting positive reinforcement using praise and reward.
- 2. Conditioning: parents were advised to awake children at least once in night for urination.

- 3. Fluid maintenance: Taking plenty of water at day time and restriction of fluid for 2 hours before sleep at night.
- 4. Rewards: Giving star or prize or on a trip as a reward for dry night.
- 5. Bladder Retention: Retention control training (a form of bladder training) aims to increase the bladder capacity by using exercises such as delaying urination for extended periods of time during the day or drinking extra fluids and stream interruption exercises in the wash room.
- 6. Alarm Therapy involves the use of a device to elicit a conditioned response of awakening to the sensation of full bladder. The alarm is best used after 7 years of age and is successful in about two-thirds of children; one - third of children may relapse.

Aim

To study the add on effects of yastimadhu Churna with jambu beej churna as medhya Rasayana along with behavioural therapy in Shayyamutra.

Drug review

1. Yashtimadhu- (Reference Bhavprakashnighantu)

Properties

Rasa - Madhur

Guna - Guru, Snigdha

Virya- sheeta

Vipak - Madhur

Doshghnata- Vata pitta Shamak

Pharmaco Therapeutic Action - water retention, hypertension, hypokalamia, Sodium chloride, ulcer healing property (duodenum & Peptic)

2. Jambu Beej - (Reference Bhavpakasha, charak sutra. 25,27, su.su. 46)

Properties

Rasa - Kashaya, Madhura, Amla

Guna - Laghu, Raksha

Virya - Sheeta

Vipak - Katu

Doshghata - Kapha- Pittaghana

Gana - Mutrasangraniya

MATERIAL AND METHODS

This was Randomized controlled clinical trial. Total 70 patient was taken for study, Sample was collected from OPD.

Inclusion criteria

- Subject irrespective to sex.
- Patients age group between 6 to 12 years.
- Patient will be included after deworming.
- Cardinal feature of Shayyamutra without day time incontinence.
- Repeated voiding of urine in bed or cloths at night least 2-3 times in a week.

Exclusion criteria

- Subject with worm infestation will be excluded.
- Patient having systemic disorder like TB, DM, DI.
- Patient with congenital anomalies or with anatomical defect in genitor urinary system and UTI.
- Neurodevelopment disorder like MR, CP, Spina Bifida and seizures disorder.
- Patient on another treatment for same disease.

Dose of churna

6-7 years - 3.6 gm

7-8 years - 4.2 gm

8-9 years - 4.8 gm

9-10 years - 5.4 gm

10-11 years - 6 gm

11- 12 years 6.6gm

Route of Drug administration- oral

Time - 90 Days

Anupana - Madhu

Parameters assessed

Bed Wetting Frequency	Grade
more than 3 times daily at night	8
daily if more than one time at night	7

80

Daily if done	6
If on alternate night	5
If weakly twice at night	4
Once in a week at night	3
Once in fortnight	2
Once in a month at Night	1
All Dry Night	0

Withholding time	Grade
Able to withhold the full bladder <1 minute	3
Able to withhold the full bladder 1-2 minute	2
Able to withhold the full bladder 2-3 minute	1
Able to withhold the full bladder > 3 minute	0

Awakening to use urination during night	Grade
Never awakens spontaneously	3
Self awakens due to wetness	2
Self awakens due to little passage of urine	1
Self awakens when bladder is full	0

DISCUSSION AND CONCLUSION

Shayyamutra is considered to be shameful problem to our society. It causes shame both to child and parents. Nidrathe sleep is Tamomula and Tamomayi induced by increased of Tamas - an invert universal attribute. So, it mainly exhausted state of mind and body. It is generally seen in nights. The sleep induced by excessive increase of Tamo guna occurs at terminal stage of sleep, where tama guna and increased kapha dosha are involved. When kapha dosha occludes the sensory channels then the terminal sleep manifest. It difficult for affected child in night to awake and go to toilet. In the present of study drug was selected from Medhya Rasayan from charak Samhita. As per their classical reference of the text, Acharya Charaka has mentioned examination of Medha by inference of Grahanashakti. A person is able to obtain the knowledge of existing objects and retain it through Medha.

Yashtimadhu is vata, pitta shamak, And Pharmaco Thetapeutic Action is water retention and anti inflammatory, antioxidant activity. The neuroprotective effect root of Yashtimadhu may be attributed to its antioxidant property as it posses many bio amines and active ingredient by the virtue of which susceptible brain cells get exposed to less oxidative stress resulting in reduced brain damage and improved neuronal function with improvement in memory (intelligence). Jambu beej is kashaya rasa Madhura amla anuras, katu vipak, laghu ruksha Guna and charak have mentioned it as a Mutrasangrahaniya (herb that causes urine retention).

Thus a probable mode of action of Yashtimadhu and Jambu beej may assumed on hypothetical basis as causing urine retention and it may awaken the child on having sensation of bladder fullness and thereby being effective in present study.

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