

**AYURVEDIC MANAGEMENT OF MUTRASHMARI - A REVIEW
ARTICLE**

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ABSTRACT

In *Ayurveda*, *Mutrashmari* is the stone formed in urinary tract (Kidney, ureter, bladder and urethra). Synonym for *Mutrashmari* is urine stone/calculi. In Modern it is known as Urolithiasis which means calculi or stone and its small powder like pieces are known as *Sharkara* or *Sikata* i.e. gravels. In *Sushruta Samhita*, *Sushrutacharya* explains the two process of stone formation. One is by the stagnation and super saturation of the urine and other by crystallization of the crystalloids in the urine. *Charakacharya* in *Charka Samhita* more specifically explains the process of gall bladder stone formation. Various herbal formulations are mentioned in classical texts and are found effective till today for stone. Specific group of drugs are mentioned on basis of type of stone on its *Dosha* combinations. Urine stones are classified on basis of *doshas* – *Vata*, *Pitta*, *Kapha* etc and treatment is mentioned accordingly. The drugs like *Varuna*,

Pashanabheda, *Troonapanchamoola*, *Gokshura*, *Punarnava*, *Apamargakshar* etc. are advised to be administered either in form of decoctions, fermented solutions, powder, cold infusions etc or in form of dietary products like cooked rice, gruel etc. This article reviews the various

concept of *Ashmari* in *Ayurveda* regarding its classification, symptomatology, etiological factors, pathology, complications and management have been dealt with both medico-surgical procedure.

KEYWORDS: *Ayurveda*, *Mutrashmari*, Review, Urinary disorder.

INTRODUCTION

Mutrashmari is a very common disease which includes a complex physiochemical process that involves a series of events in formation of *Ashmari*. *Ashmari* is considered as *Mahagada* being difficult to cure, *Marmaashrayi* and involvement of *Bahudosha*.^[1] *Basti* is *vyakthastana* of *Ashmari* and *basti* is also a *pranayathana*. Detailed description regarding *nidana*, *bheda*, *lakshana*, and *chikitsa* are found in *Sushruta Samhita*, *Charaka Samhita*, and *Ashtangahridaya*. *Ashmari* has been extensively described in texts such as *Bhela Samhita*, *Harita Samhita*, *Yogaratanakara*, *Chakradatta*, *Madhavanidana* and *Bhavaprakasha*.

Definition

The formation of stones (*Ashma*) within the urinary system is referred to as *Ashmari*.

Synonyms

Ashmari, *Ashmarih*, *Pathari*, Stone, Gravel, Calculus, Calculi.

Etiopathogenesis

Ayurveda describes the manifestation of any disease in five steps: *Nidana*, *Purvaroop*, *Roopa*, *Upashaya*, and *Samprapti*. These steps provide a framework for physicians to achieve an accurate diagnosis.

***Nidana*^[2] (Causative factors):** Classical *Ayurvedic* texts describe several causes of *Ashmari* (urinary stones), including improper body detoxification (*Asmashodhana*), unhealthy dietary practices (*Apathya Sevana*), excessive physical activity (*Ativiyama*), consuming irritating foods (*Vidahi Ahara*), sharp or potent medications (*Teekshnoushadha*), light or dry foods (*RookshaAhara*), excessive walking (*Atiadhwa*), lack of adequate sleep (*Nidra Alpata*), and excessive intake of salty foods (*Lavana Ahara*).^[2] Additionally, various modern factors contribute to the development of *Mutrashmari*, such as poor lifestyle habits, sleep deprivation, unusual dietary patterns, excessive consumption of fast or processed foods, vitamin A deficiency, prolonged use of antacid drugs, thyroid disorders, overconsumption of

specific foods, long-term catheter use, previous gastric surgeries, obesity, kidney infections, and certain geographical influences.

Poorvaroopa (Prodromal symptom): *Sushrut* explain prodromal features are pain in *Basti* (urinary bladder), testis (*Mushka*), penis (*Shefasm*), *Avila mutrata* (change in character of physical urine i.e. turbidity), *sandra mutrata* (Concentrated urine), *bastagandhi mutra* (Goat like smelling urine), *Basti, Muska & Asanadeshasoola* (Pain in the lower abdominal region), *Mutrakrichra* (Difficulty in urination), *Aruchi* (Loss of appetite) and *jwara* (Fever).^[3]

Rupa (Symptom): According to *Susruta* general symptomatology of *Ashmari* are intense pain in naval region, *Basti* (Urinary bladder), perineal raphe and penis (*Medhra*) during micturition, there may be obstruction of urinary flow, urine may come like spray from urethra, sometimes mixed with blood. Urine may also be clear like *Gomedagems*. At times passing sand like particles (*Sikata*), pain during running, jumping, swimming, riding on horses back or on camel and even while walking.^[4]

Upashya/Anupashaya -The factors that alleviate the signs and symptoms of a disease are referred to as *Upashaya*, while those that worsen the disease are known as *Anupashaya*. *Upashaya* serves as a guideline for combating the disease. Unlike *Ashmari*, none of the classical *Ayurvedic* texts specifically mention *Upashaya* and *Anupashaya*. However, logically, since *Ashmari* is a disease primarily characterized by an imbalance in *Kapha*, any measures aimed at controlling *Kapha* can be considered as *Upashaya*.^[5] Conversely, actions that worsen *Kapha* are seen as the *Anupashaya* for *Ashmari*.

Samparapti

Ashmari involves the development of calculus as a foreign body inside the urinary system; kidney, ureter and bladder.^[6]

Mithyaaharavihar without *Shodhana*



Vitiation of *Tridosha*, predominantly *Kapha*



Vitiation of *Kledatwa* (Liquidity), carried into circulation



Vitiated *Doshas* are carried into *Basti* (Urinary system) by *Adho Mutravaha* dhamanis
(Urinary tract)



Shoshana (absorption) of the *Kapha dosha*, *Kapha dosha* attains *Sanghatava* and become
Parivridhi by *Vata* and *Pitta*



Formation of *Ashmari*



Development of *Ashmari* according to *Dosha prakopa Margavrodh* in *Basti*



Vyadhi Lakshan (Clinical features)

Classification

As per *Ayurveda*: *Ayurveda* described four types of *Ashmari*^[6]

1. *Vataja Ashmari*
2. *Pittaja Ashmari*
3. *Kaphaja Ashmari*
4. *Shukraja Ashmari*.

As per modern science: There are mainly five basic types of stones:

1. Calcium oxalate stone
2. Calcium phosphate stone
3. Ammonium stone
4. Uric acid stone
5. Amino-acid stone.

Types of *mutrashmari*

In this ancient treatise of medical science, *Acharya Sushruta* has explained 4 types.

1. *Vataja Mutrashmari* is a condition caused by the dominant *Vata Dosha*, characterized by severe pain, difficulty in urination (*Mutrakrichrata*), and trouble in expelling both urine and feces. The pain associated with this type of stone is described as sharp, rough, irregular, and hard, with the stone's shape resembling the irregular flower of the *Kadamba* tree.^[7] It is similar to uric acid stones.

2. *Pittaja Mutrashmari* occurs when *Pitta* combines with *Kapha Dosha*, leading to a burning sensation (*Daha*), pain (*Peeda*), and blood in the urine. The stone's appearance is described as red, black, yellow, and honey-colored, with a shape resembling the *Bhallataka* seed.^[8] It is similar to calcium oxalate, uric acid, and cystine stones.
3. *Kaphaja mutrashmari*: Overindulgence in *Kapha*-aggravating factors leads to the formation of *Ashmari* (Urinary calculi). *Kaphaja Ashmari* is typically larger in size, causing pain in the bladder described as “*Suchibhairava*,” or needle-like pricks. Patients experience a dull, pulling ache. Morphologically, *kaphaja Ashmari* is characterized by colors such as white (*Shweta*), honey-like (*Madhuvarna*), pale (*Sitavarna*), honey-flower-like (*Madhukapushpavarna*), and a mix of yellow and white (*Pingala shuklavarna*). The stone resembles an egg (*Kukkutanda pratikasha*)^[9] and is similar to a calcium phosphate stone.
4. *Shukraja ashmari*: The primary cause of *Shukraja Ashmari* is the suppression of *Shukravega* (Semen urge). This condition is marked by difficulty in urination, pain, and swelling in the bladder and testicles.^[10] When squeezed, the stone tends to break into smaller fragments at the site.

Diagnosis -Diagnosis of kidney stones is possible by physical examination and other laboratory investigations.

1. Conduct a physical examination to observe the areas of pain.
2. Perform blood tests to assess levels of calcium, phosphorus, uric acid, electrolytes, blood urea nitrogen, creatinine, and kidney function.
3. Analyze urine to detect the presence of crystals, bacteria, blood cells, or pus cells.
4. Use ultrasound imaging to determine the size, shape, and location of calculi.
5. Perform an abdominal X-ray (KUB) to further evaluate.

Updrava (Complications)

According to *Bhav Prakash Nighantu*, if *Mutrashmari* (Urinary calculi) is not treated properly, it can lead to complications such as *Sliarkaramaha*, *Sikatameha* and *Bhasmameha*, characterized by the passage of sugar-like, sand-like, and ash-like particles in the urine, respectively.^[11] Other issues include anorexia, anemia, excessive thirst, vomiting, weakness, fatigue, emaciation, pain in the flanks, colon, and renal angle, as well as conditions like *Ushnavata* (Pyelitis and Cystitis).

Ayurvedic management of mutraashmari

The *Ayurvedic* approach to managing *Mutrashmari* (Urinary stones) is based on four key principles: *NidanParivarjan* (Avoiding disease-causing and aggravating factors), *Sanshodhan* (body detoxification), *Sanshamana* (Pacifying treatments), and *Shastra Karma* (Surgical procedures).^[12] Among these, *Shamana* therapy incorporates various methods such as *Ashmari Bhedan* (Stone breaking), *Patan* (Expelling), *Teekshana Ushana* (Sharp and Hot therapies), *Mutrala Dravya* (Diuretics), and *Kshara* (Alkaline treatments). *Acharya Chakradatta* dedicates an entire chapter to the treatment of urinary stones, emphasizing its serious nature. According to *Acharya Sushruta*, *Ashmari* is considered a life-threatening condition best addressed through surgical intervention.

Nidan parivarjan

Avoiding causative and aggravating factors is deemed the most effective treatment. Without exposure to such factors, the disease cannot manifest. In line with *Ayurveda's* core objective, the priority is always to maintain the health of a healthy individual.

Sanshodhan chikitsa

Sanshodhan Chikitsa focuses on eliminating unwanted metabolic substances from the body. In managing *Mutrashmari*, a detoxification approach targeting the balance of *Tridosha* is recommended. Treatments such as *Snehan* (Oleation), *Swedan* (Sudation), *Vaman* (Emesis), *Virechan* (purgation), and *Basti* (Enema), including *Uttar Basti* when necessary,^[13] are prescribed based on the patient and disease assessment (*Roga Rogi Pariksha*).

Sanshamana chikitsa

Acharya Sushruta, *Charaka*, and *Vagbhata* have described various methods for disease management, including *Teekshana Ushana*, *Ashmari Bhedana*, *Mutrala Dravyas* (Diuretic drugs), and *Kshara*. *Chakradatta* dedicates an entire chapter to the treatment of *Ashmari* (Urinary calculi).

Formulations described in Urinary calculi in various *ayurvedic* texts^[14]

<i>Churna</i>	<i>Kasaya</i>	<i>Yoga</i>	<i>Gana</i>
<i>Pasanbhedadi Churna, Trutyadi Churna, Trikantak beeja Churna, Trikantaka churna</i>	<i>Goksuradi Yoga, Punarnavadi Yoga, Karpasmutryadi Yoga, Pichukadi Yoga, Kronchaadi Yoga</i>	<i>Varunadi Kwath, Sunthadi Kwath, Nagradya Kasaya, Sringyadi Kasaya, Ashmararyadiavlehelaadi Kwath</i>	<i>Mutravirechaniya mahakasay, Varunadi Ganafor, Kaphamedaonivarano, Veertaradi gana, Taranpanchmoola gana</i>

Some *ayurvedic* herbs for kidney stone

- A. *Gokshura*
- B. *Punarnava*
- C. *Pashanbheda*
- D. *Kulattha*
- E. *Varuna*
- F. *Gorakshganja*
- G. *Virataaru*
- H. *Yava kshara*

Shastra karma

Shastra Karma Acharya *Sushruta* stated that *Ashmari* (Urinary calculi) is a life-threatening condition that requires surgical intervention. Acharya Charaka described the *Bhedan-Patan* procedure for treating *Ashmari*. The *Basti* region, being one of the three vital areas (*Marm Pradesh*), is considered critical, which is why Acharya *Sushruta* categorized the surgery as an emergency procedure. *Sushruta* provided detailed instructions on the indications for surgery and the methods to be followed for urinary stones. After performing the initial procedures, the stone should be removed through an incision made in the lateral perineum, matching the size of the stone. The stone is then extracted using curved forceps. Proper antiseptic care should be followed for wound management, and post-operative care must be adhered to.

Pathyapathya*^[15]**Pathya***

The *Charaka Samhita*, *Harita Samhita*, and *Bhaishajya Ratnavali* discuss the treatment of *Ashmari* (Urinary stone disease), with specific *Pathyapathya* (Beneficial and harmful practices) mentioned. However, Acharya *Sushruta* does not explicitly list them. *Pathya* for *Ashmari* includes practices like *Langhana* (Light diet), *Vamana* (Emesis), *Virechana* (purgation), *Basti* (Enema), and *Avagaha Sweda* (Sitz bath). Recommended foods include *Yava*, *Kulattha*, *PuranaShali*, *Mudga*, *Krauncha* bird meat, *Yavakshara*, and other foods that balance *Vata* and act as diuretics. *Gokshura*, *Yavakshara*, *Varuna*, *Punarnava*, and *Pashanabheda* are also listed as medicines.

Apathya

According to Acharya *Sushruta*, includes excessive physical work (*Ativyayama*), overeating (*Adhyashana*), improper food combinations (*Samashana*), cold, oily, heavy, and sweet foods,

as well as suppressing urination and defecation. *Acharya Charaka's* guidelines for *Ashmari* suggest avoiding heavy foods like *Vyayam* (Exercise), *Sandharana* (Retention), *Sushka* (Dry), *Ruksha* (Rough), *Pishtanna* (Fine-ground food), *Vaartaka*, *Kharjur* (Dates), *Shalook*, *Kapittha*, *Jambav*, *Bisma* (Kamal root), and consuming foods with astringent taste.

DISCUSSION AND CONCLUSION

Mutrashmari is closely related to urolithiasis, a common and painful disorder of the urinary system. *Acharya Sushruta* classified *Mutrashmari* under the category of *Ashtamahagada*. *Ashmari* can form in any part of the *Mutravaha Srotas*. The pain associated with it varies depending on the stone's location, indicating that the pain's nature is influenced by where the stone is lodged. *Ayurvedic* treatments have the potential to prevent stone formation through various mechanisms, including acting as diuretics, altering physiological pH, correcting crystalloid imbalances, and offering antimicrobial, anti-inflammatory, and analgesic effects while also improving renal function. However, stone formation may continue even after surgical intervention. Thus for there is no drug or therapy known that would dissolve or fragment the stone in the system by changing the lithogenic potential of a particular person. Hence in this aspect *Ayurvedic* drugs like *Varuna*, *punarnava* etc are useful.

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