Case Study of Tamrachuda Vasa Taila Uttar Basti on Vatashthila W.S.R to Benign Prostatic Hyperplasia

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Abstract: Mostly in older age group of persons suffering from urinary tract Diseases. Most of men after 50 year age start the complaining of Benign Prostatic Hyperplasia(BPH). BPH is benign enlargement of prostate gland resulting from excessive cellular growth of glandular portion of prostate which causes the narrowing of urethra and subsequent partial empting of bladder and responsible for significant morbidity in older age group. The role of conservative and curative medication of contemporary science is minimal, In Morden era BPH surgical treatment TURP(Transurethral resection of the prostate) is safe but some having complications and chances of rupture of urethra. Old age having laxity of local tissue and healing will impaired i.e.delayed. Hense certain major can be postulated by shalya tanta to cope with further complication. There is a intense and persistent scope to find a simple medication or procedure through relieving obstruction uropathy by reducing the size of prostate gland and enhancing the tone of urinary bladder musculature without adverse effect. Acharya sushuruta mention of various herbal and animal origin drug, different type of methods which relive urinary symptoms also we may use single drug like varuna, Gokshura, Pasanbheda, kantkari, punarnava and Procedure of swedana, Basti, Uttar Basti through cleaning of body and also relief of premonitry symptoms. Uttar Basti, a parasurgical procedure is the most effective treatment available in Ayurveda for the diseases of Mutravaha srotas.

Keywords: Vatashthila, Uttar basti, Benign Prostatic Hyperplasia

Introduction

BPH(Benign Prostatic Hyperplasia) is having the second highest incident in geriatrics practice. It is a most common cause of lower urinary tract symptoms found in aging men. BPH is benign enlargement of prostate gland resulting from excessive cellular growth of glandular part of prostate which ultimately causes the narrowing of urethra and subsequent partial empting of bladder which is responsible for significant morbidity in older age group. The narrowing of the urethra due to extra lumen compression ,manifest some of the uncomfortable problems during urination and patient may experience symptoms like sudden urge to urination ,hesitancy putting more pressure to urinate ,increase in frequency of urine specially during night ,drop by drop urine and feeling of incomplete urination etc. The Prostate often starts enlarging when a men is past 50 years. One in four men over 50 years and one in three men over 60 years have BPH. However the chances are even more as men grows older an hence 80% of men above 80 years have chances of BPH. In Ayurveda BPH is clinically simulate with "VATASTHEELA" one among the varieties of a major disease called mutraghata." Vatashthila means between the gudsthana and basti produced granthi that unnat and achala also hard like ashthi. Hence causes of pain in bastipradesh and avarodh vishtha, mutra, and vayu. It's described under one of the 12 types of Mutraghata. The role of conservative &curative medicine of contemporary science is very minimal Because of which excision /resection of prostate remains the only curative therapy.Otherhands

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Ayurveda traditional procedure of *Uttar Basti* is helpful for urinary diseases.which procedure work instant and effective management. *Tamarachuda Vasa* is the unctuous substance derived from the *shuddha Mamsa* of *tamrachuda(varity of kukkuta)*It is an *upadhatu of Mansadhatu*. According to *Indu Mamsa* is considered as *ASHYA* OF *vasa.Vasa* is considered as *vataghna Balya*,and is having *kapha –pitakar* properties. The *vasa* is prescribed for the treatment of *vidha,Bhagna,Ahata,Bhrasthta yoni,Karna,ruja,shiroruja,dagdha,sandhi*, *asthi,koshtha,marma ruja*.It help in *snehana* for those who practice physical exercise. *vasa* is also useful in *dhatukshinatva* because of *vata atapa,adhva* (long distance walking),Bhar,streesevan,vyayam,ruksha,kleshasaha, who have *tikshnagni* and *vatavrut srotas*.

Vasa is useful both avastha Swastha and atur avastha. In Swastha Avastha Hemanta rutu is kala of balopachaya and prabala agni, if proper diet is not taken ,dhatus are affected. Vasa is vatagna ,balya, guru snigdha because of these gunas it is adviced to consume in quantity and gives work for prabal agni.

The *Basti* which given through *Uttarmarga* and also having superior qualities is termed as *UttarBasti*. It is a non invasive procedure the cost of treatment modality is very less as compared to other conservative or surgical management. Use of *uttar Basti* may avoid surgery of prostate which ultimately results in increased quality of life.

Objectives

To prevent the disease progression, complication and recurrence after surgery.

To know the efficacy of selected formulation in sexually active patients, who are not ideal subject for surgery.

To revalidate the said properties of this formulation as an anti inflammatory, softening of the diseased organs, nourishment and rejuvenating (*rasayan*) as well as antioxidant.

Case Report:

Personal History:

A 75 year old male patient came in *Shalya Tantra* Department OPD on 27/01/2023 with complaints of increased frequency of micturaton, poor urinary stream sometimes followed by passage of few drops of urine in his cloths also history of straining during micturation since 1 year. Patient was healthy before 1 year When he noticed gradually increased urgency of urination also he had history hypertension last 5 year on medication.

BP- 140/80 mm Hg

Pulse-82/min

Temperature-A febrile

Respiration rate-16 min

Weight-70kg

Emotional state-anxious

Addiction-Not addicted to smoking and alcohol

General examination and assessment as per ayurvedic criteria.

Mutra-Atipravruti

Tvak-Ruksha,

Mala-Badhha,

Nindra-Khandit

Gihva-Sama

Aharashakti-Madhyam

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Systemic examination CVS,CNS,Respiratory system,didn't reveal any abnormality,Per Abdomen-Bladder Distended. Meatus normal, No phimosis, No abnormal pus discharge from urethra, No swelling at scrotal region, No local temp.rise, no any tenderness, Perineal sensation –intact.

Laboratory investigation:

Blood Examination:

Hb-12 g/dL, WBC-9,500 /c.mm, Platelets-2,10,000 /cu.mm, Serum. creatinine-0.8 mg/dL, HIV-Negative, VDRL-Negative, HBsAG-Negative

Urine examination:

Colour- Pale yellow, Blood -Absent, Appearance- clear Protein- Absent, Glucose- Absent

Ketone-Absent, Specific Gravity-1.000, Pus cell-1-2, Epithelial cells- Absent, Casts-Absent, Crystals-Absent

Investigation:

Before Treatment- USG abdomen and pelvic(27/01/2023): Prostate 53cc ,Enlarged .Bladder minimal full thickness 4.7 mm Prevoid volume: 60cc, PostVoid volume:43ml

After Treatment: USG KUB(12/02/2023):Prostate size 47cc,prostetomegaly.Post void :30ml.

Management:

1. Uttar Basti with Tamarachuda vasa taila -48ml, Duration of treatment-7Day.

Material and Methods:

1.Pharmaceutical source:

Enriched *mamsa* with vasa of *tamrachuda vasa* (a specific variety of *kukkuta*) has been collected .*Til taila* has been collected from cold compressed kachhi gani unit of khadi bhandar.

2.Method:

Patient adviced to pass their natural urges.

Tamrachuda vasa taila has been made lukewarm before administration(Double boiler procedure).

Equipment: Bowl, Disposable syringe 50ml, sterile gloves, gauze piece, sponge holding forcep, sterile green reusable hole sheet and clamp, kidney tray will be kept ready.

Patient was taken supine position. All Vitals have been measured before uttar basti and have been continuously measured till the completion of this approach.

Thoroughly cleaning and washing the genitalia including surrounding area with antiseptic solution.

Then Retracted the prepuce skin completely and gently washed the glans penis and cleaned area with liquid betadin with the help of sponge holding forceps

Complete region was covered with sterile green reusable hole sheet.

Uttar basti Tamarachuda vasa taila 48ml have been administered with the time duration of 30 *matra kala*(approximately 30 second) through urethra with the help of disposable syringe.

After *Uttar basti*, Patients had been advised to lie in supine position for 10-15 minutes.

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vitals have been monitored meticulously per hourly.

Pratagamana kala of Basti have been noted.

Drug Analysis Report

ORGANOLEPTIC CHARACTERISTICS:

Color	Yellow
Odour	Tikta
Taste	Oily
Consistency	Liquid

PHYSICO-CHEMICALPARAMETERS:

Sr.No.	PARAMETER	Value
1.	Loss on Drying at 110 c(% w/w)	0% w/w
2.	Total Ash Value(%w/w)	1.79% w/w
3.	Acid Insoluble Ash(%w/w)	0.70% w/w
4.	Refractive index	1.4590
5.	Specific gravity	0.9166
6.	Rancidity test	Not Rancid
7.	P ^H Value	4.8
8.	Acid value	3.7

SOLUBILITY TEST:

Sr. No.	Solvent	RESULT
1	Chloroform	++
2	Petroleum ether	++
3	Diethyl ether	++
4	Water	-
5	Alcohol	+
6	Carbon disulphide	++

Discussion and Results:

Use of *vasa* according to *Ayurveda* in the form of *shaman* or *brihana snehana* as seen from the indication. However external application is also effective and use traditionally locally in cases of senile non healing fracture, compression fracture etc. *vasanjana* is also an unique formulation of *vasa* in *shushkakshipaka* and seems to have promising result as seen by previous researches.

Acharya Vagbhata have advocated using vasa derived from tiger,pork,snake,vulture and chiken for Anjana purpose. For tarpan purpose advocates peacock, chicken, tittira, godha, vichhalyak vasa. Vagbhata is so confident about the potency of snake vasa that he describes as if vasa is used as Anjana then even a blind person also can get vision. Any kind of ruja is always associated with vatadosha. vasa has snigdha, guru, varnaprasadana guna hence it treats ruja and dagdha vrana. (A.H.SU.16/9-10). Bala, Bilwa processed with vasa of nakra, matsya, kurma, chuluk is used in shirogat vata. shira is sthan of sneha hence mainly vasa is used in this combination. (A.H.CHI.21/62)

Kukkata vasa mixed with yasti churna is best for Anjana karma .Vasa is mdhura ,guru,snigdha and mrudu gunatmak also yasti is chakshushya in karma hence the combination is useful in netra chikitsha.(A.H.U.13/55).

Reference of trial drug *Tamarachuda vasa taila* is available in *Uttar Basti* treatment of *Mutraghata* diseases.(Su.U.42/58)

International Prostate Symptoms Score(IPSS):

Symptoms	Before	After
Incomplete empty of Bladder	2	1
Urgency	3	1
Frequency	2	1
Intermittency	1	0
Weak stream	2	2
Straining	2	0
Nocturia	3	2
Total IPSS Score	15	7

We observed during the time of treatment *Tamarachuda vasa taila uttar Basti* has good effect to control the symptoms of moderate to mild in *vatasthila* (Benign prostatic Hyperplasia) and also subjective parameter prostate was 53 cc in transrectal ultrasonography findings, post voiding 43ml and after treatment it was 47 cc and also post void volume 3oml.

Line of treatment of *mutravikar* is use of *kasahaya,kalka,sarpi,paya,kshar,Madhya,Swedana,Basti* and *Uttar basti* as per the guidelines. (Ref *sushruta samhita uttar tantra adhyay 58*)

Tamrachuda vasa is a specific action on genital tract and regulate function of apana vayu on particular guna of rukshta and khrata ,especially if administered through urethral route. Tamarachuda Vasa is a good source of Proline, Tryptophan, Glycine, Hydroxyproline, Leucine, Lysine, Methionine, Phenylalanine, Alanine, Arginine, Aspartic acid, Glutamic acid, Linoleic acid, oleic acid, Palitic acid, Stearic acid etc.

Snigdha dravya reduces vata dusti, soften body microchannels (srotas) and remove the obstruction in the channel and increases permeability of cell membrane. Guru guna through rukshta of vata dosha decreases and softness tissue. Penetrates up to the deep tissue hence increases elasticity, heals and promotes regeneration of tissue. Nourishes and strengthness all dhatuts absorbed by mucosa and muscle according to upsnehana nyay so reducing the hypertrophy of muscle uttar basti may also stimulates certain receptors in the prostate and improving the flow of urination and eroded prostatic mucous membrane healed arrest dilatation of prostatic venous plexuses.

So that this compression has been reduced over the prostatic urethra by *vata anulomana*, which helps for complete emptying of bladder. As a result of that post voidal residual urine volume decreases significantly and therefore it reduces the intermittency, frequency, urgency, weak stream, straining and Nocturia.

Conclusion:

From above case study it can be concluded that the *Ayurvedic* medication and procedure is effective in reducing International prostate symptom score, weight of prostate and post residual volume in *Mutraghata* (Benign Prostate Hyperplasia). In *Ayurveda* it is mentioned that basti is choice of treatment in controlling *Vata dosha* in all types of *Mutraghata*. So it can be said that the function of detrusor muscle of bladder might be improved by controlling *Apana Vayu* with the help of medication. Hence it is scientifically proven that these drugs played important role in clinical features of BPH. The cardinal symptoms of BPH mainly are increased frequency, Nocturia, weak stream, incomplete voiding and these have been successfully relieved completely in this patient. The average Urine Flow Rate was increased. The size of Prostate and Post Voidal Residual Urine volume were decreased.

Tamarachuda vasa is one of the most importance constrictive icon of the body specially the role of vasa in degenerative pathology. Tamarachuda vasa taila Uttar basti through building of proper muscular of a old age person is fully depend on level of vasa. This procedure specially emaciation (wasting of muscle), lack of strength and sphinctric tone have been ultimately normalised with the reduction of the anatomical and functional deformity of prostate gland.

This approach of *ayurvedic* medicinal procedure has wide applicability and has been scientifically proved to be best route of administering the drug locally on target organs of uro-genital system to achieve best possible results. So it can be said that the trial procedure is having a best alternative to avoid the surgical procedures fir BPH symptoms and powerful effect for the reduction of clinical features of BPH.

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