A case discussion on the efficacy of Mulaka kshara in the management of mutrashmari (urolithiasis)

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ABSTRACT

Mutrashmari is one of the most common disorders of the Mutravaha Srotas. In contemporary medical science it is correlated with urolithiasis. Urolithiasis is a global problem. Urinary calculi are the third most common disorder of the urinary tract. The incidence of calculi varies as per geographical distribution, sex and age group. The highest incidence of calculi occurs between the ages of 30 to 50 years, the male and female ratio is 3:1. Kshara Chikitsa (alkaline therapy) is the herbal extracts of plants like Mulaka (Raphenus sativus Linn.), Snuhi (Euphorbia nerifolia Linn.), Aragwada (Cassia fistula Linn.), Kutaja (Holarrhena antidysenterica Linn.), Vasa (Adhatoda vasica Linn.) and Arka (Calotropis gigantea Linn.). Kshara can be a compound or mixture of many herbs or may be from single herb. Mulaka Kshara is a caustic alkaline preparation of the drug Mulaka indicated in Mutravaha srotas vikaras. This alkaline preparation has many therapeutic usages and even has replaced many surgical procedures and proved to be effective in treating many disorders. This is a case report of a 22yr old male who presented with complaints of pain abdomen associated with nausea, vomiting and burning micturition since 15 days.

Keywords: Mutrashmari, Urolithiasis, Mulaka kshara, Alkaline therapy, mutravaha srotas, Raphenus sativus Linn.

1. Introduction

Urolithiasis refers to formation of urinary calculi or condition associated with urinary calculi [1]. Urinary calculi are the third most common disorder of the urinary tract. The incidence of calculi varies as per geographical distribution, sex and age group. The highest incidence of calculi occurs between the ages of 30 to 50 yrs, the male and female ratio is 3:1 [2]. Mutrashmari is one of the most common disorders of the Mutravaha Srotas. It is one of the Ashta-Mahagada and considered as “Yama”, because sometimes it causes intolerable pain [3]. In contemporary medical science it is correlated with urolithiasis. Now a day’s many surgical procedures like cystolithotomy, nephrolithotomy, pyelolithotomy, ureterolithotomy, etc. are available which are expensive [4]. So before going for surgical procedure, one should try to manage with oral medications like medicated Ghrita, Taila, Choorna, Ksharaetc [5]. Mulaka Kshara preparation is indicated for the management of Mutrakrcchra and Ashmari [6,7]. Mulaka Kshara is powder preparation of Mulaka Bhasma and Jala. [6] Mulaka Kshara is Mutrala and Ashmari bhedana in nature [8].

2. Dosage:

500mg capsule of Mulaka Kshara administered twice a day with water as Anupana for 21days.

3. Follow up:

done on every seventh day during the first month and later once in 15 days for next one month.

4. Assessment criteria

Assessment was made on the basis of subjective and objective parameters both before and after treatment.
4.1 Subjective
1. *Mahati Vedana* (severe pain)
2. *Mutradaha* (burning micturition)
3. *Sarudira Mutrata* (haematuria)
4. Frequency of micturition

4.2. Objective: According to Radiological/Sonological findings.
1. Size of the stone
2. Site of the stone.

5. Case report
A 22 year old male, Hindu patient, student by occupation resident of Hassan district, has attended out-patient department of Shri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan, Karnataka, India, with the complaints of pain abdomen, which is moderate in nature, since 15 days. He had associated features of nausea and fever. Pain was colicky, radiating and intermittent (with prolonged intervals) in nature associated with burning micturition. On exertion pain aggravates and there was no history of hypertension, diabetes mellitus and he is vegetarian. His *Prakruthi* was analyzed as *Kapha Vataja*. He belongs to Anupa-Sadharana Desha. His pulse, blood pressure and other general features were within normal limits.

On abdominal examination, there was tenderness in right lumbar region and in renal angle. His Ultra sonography report reveals a 4-mm sized Right UV junction Calculus. Urine findings show the pH value as 5.5 and rest within normal limits. Depending on the features like *Mahati Vedana* (severe pain) and *Mutradaha* (burning micturition), it was diagnosed as *Mutrashmari*.

After administration of drug by the end of 3rd week of the treatment, patient passed the stone. The expelled stone is 4 mm in size. He had been advised to take 3 litres of water per day and instruction was given to follow prescribed diet chart for urolithiasis. After three days, pain was absent. Urine report reveals that pH value was 7 and USG report has shown no sonological abnormalities.

6. Discussions
*Kapha* is responsible for formation of *Ashmari*. By the properties of *Kshara* like *Rooksha*, *Laghu*, *Teekshana*, *Shigragami*, it will reduce the chance of nidus formation as well as it reduces the growth of the stone by inhibiting the binding property of *Kapha Dosha*. The trailed drug is having the property of *Chedana*, *Bhedana*, *Lekhana*, *Tridoshgna*, *Mutrala*, *Mutrakrucrahra*, *Anulomana*, *Krimgna* which helps significantly in *Mutrashmari* treatment.9-13 The stones passed after giving the treatment have been shown in figure 1. The USG findings before treatment is shown in figure 2. The USG findings after treatment is shown in figure 3. The prepared *Mulaka Kshara* has been shown in table 4.

Fig 1: Showing stones passed after giving the treatment

Fig 2: USG report before treatment
7. Conclusion
Kshara, due to its Ashmarigna, Chedhana, Bhedana and Mutrala property can be safely administered in patients of Ashmari. Here the drug has acted on Ashmari by changing the pH value. Thus the Mulaka Kshara proved to be an effective and safe phytotherapeutic agent and could be useful in the management of Ashmari.

8. References
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