

Apamarga Yavakshara in Mutrashmari- A Critical Overview

Amruta kalaskar, Dr Bishnupriya Mohanty.

P.G. scholar , Dept .of Rasashastra and Bhaishajyakalpana, Gomantakayurvedmahavidyalaya Shiroda-Goa. India

MD, PhD Professor & Head Department of Sanskrit Samhita & Siddhant Gomantak Ayurvead Mahavidyalaya & Research Center, Shiroda, Goa. India

Submitted: 15-12-2021

Accepted: 28-12-2021

ABSTRACT

Mutrashmari is one of the most common disorders of the mutravahasrotas. It is one of the Astamahagada and considered as "Yama" because sometimes it causes acute excruciating pain¹. In contemporary medical science it is correlated with urolithiasis. Symptoms in general include radiating pain from loin to groin, hematuria, burning micturition, malaise. Prevalence of Urolithiasis varies according to geographical distribution, sex and age. The treatment modalities of urolithiasis in conventional science are conservative medications and surgical procedures which are expensive, involve invasive treatments, needs hospitalization and in most of the cases recurrence rate is high. Ayurveda explains variety of yogas for the management of mutrashmari. A combination of Apamarga and YavaKshara is indicated in mutrashmari per Rasatarangini.² So this study is taken up, to explore the combined effect of Apamarga and YavaKshara in mutrashmari keeping in view the shortcomings of different modern medical treatments.

Key Words-Mutrashmari, Srotas, Astamahagada, Yama, Urolithiasis, Apamargayavakshara

I. INTRODUCTION

Mutravahasrotas comprises of kidney, ureter, bladder and urethra. Stone formed anywhere in these organs called as mutrashmari. In contemporary science it is correlated with urolithiasis. The earliest reference regarding mutrashmari is available since vedic period i.e. in Atharvaveda (1st khanda, 3rd sukta, 6-9 shloka). Detailed description regarding aetiopathogenesis, classification, clinical features, prognosis complications and treatment modalities are available in Shusrutasamhita. Sushruta described it as one among Ashtamahagadas and called it as Antakapratima which means swarupa of yama. Madhavakara also mentioned it as Yamopama-the god of death. Ashmari can be cured by medicine

when calculi is small but in case of larger calculi it needs surgical management. Ayurveda offers many kalpas for the management of mutrashmari like ghruta, kvatha, vati, kshara. Apamargayavakshara is the combination described in Rasatarangini for the management of mutrashmari².

Nidana of Mutashmari

In person who does not undergo purification regularly and who indulges in unhealthy food and activities kapha gets aggravated combines with urine and reach in bladder to form mutashmari³.

Purvarupa

The premonitory symptoms are fever, pain in bladder, loss of taste, difficulty in micturition, pain in head of urinary bladder, scrotum and penis, malaise and goat smell in urine⁴.

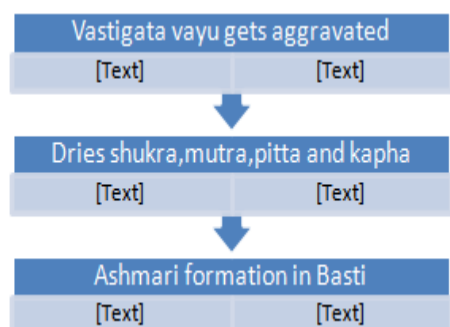
Lakshana

After manifestation of disease following symptoms appears:

- Pain in umbilical region, bladder, perineal raphae, penis and other nearby areas during micturition.
- Interrupted flow of urine
- Hematuria
- Scattered urine flow
- Urine colour resembles Gomedaka (Dolomite stone-yellow in colour), increased turbidity.
- Pain aggravates during running, jumping, swimming, riding, exposure to sunlight and long walk etc⁵.

Samprapti

When vata dries up semen, urine, pitta or kapha in urinary bladder leads to formation of Ashmari.



Chikitsa

- It can be cured by medicine when size of calculi is small but the later stage requires surgical intervention.
- In its early stage snehana etc. Karma is applicable by which the root cause of disease can be eliminated.
- Use of ghruta, kshara, decoctions, milk and urethral douche are also mentioned⁶.

Method of Kshara preparation

- Collection of panchanga of the selected plant in completely dried form.
- Cut into smaller pieces and taken in a wide mouthed big iron vessel and ignited in an open place.
- Completely burnt, cooled down plant ash is filtered through a sieve to get rid of unburnt woody part.
- Dissolved in 6 parts of water, cow's urine or the mixture of both.
- Stirred well and kept undisturbed overnight. Next morning the supernatant clear liquid is carefully decanted into separate clean vessel.
- Filtered through clean cotton cloth for 21 times.
- Final filtrate is taken in open large vessel and boiled with constant stirring⁷.

PROBABLE MODE OF ACTION OF APAMARGA-YAVAKSHARA IN MUTRASHMARI

- Apamarga-Yavakshara is the combination of drug described in Rasatarangini for the management of mutrashmari.
- Apamarga is kapha-vatashamaka, Deepaka and pachaka and the Apamargakshara prepared from panchanga reveals a good diuretic, litholytic and nephroprotective activity.
- Yava is considered as mutrala, dipakapachaka which is having kaphapitta hara properties and Yavakshara has a good diuretic property.

II. DISCUSSION AND CONCLUSION

Mutrashmari is one of the grave diseases mentioned in ayurveda because it is not easy to treat and there is need to pay more attention to treat it. The incidences of mutrashmari are increasing in present era due to various reasons like altered food habits, changed life styles, stress, strain, environmental pollutions etc.

Along with nidanaparivarjana and pathyapathyapalanasamprativighatana plays an important role in the management of disease. To initiate samprativighatana, to remove srotavarodha of mutravahasrotas and associated symptoms many line of treatments are described in samhitas. If the disease is diagnosed early we can prefer the aushadhachikitsa with more or less shodhana karma inspite of going for surgical procedure.

Apamarga and yavakshara are one among many remedies prescribed for management of mutrashmari in ayurveda. Efficacy of both the drugs have been proven by many preclinical and clinical studies. Rasatarangini advocates the management of mutrashmari. Further clinical study can help strengthen the concept of Rasatarangini and provides scientific validation.

Limitations –

- 1) The calculi more than 9 mm were excluded from the studies.
- 2) Calculi with complications like moderate to severe hydronephrosis can not be treated.
- 3) Kshara can not be prescribed in pregnant, lactating mothers and childrens.
- 4) Calculi with complications like moderate to severe hematuria can not be treated.

REFERENCES

- [1]. Sushruta ,sushruta Samhita sootrasthana 33\4 page 144 by Yadavji Trikamji Choukumbha Surabharat iprakashana reprint edition 2010.
- [2]. Kashinath Sharma, Rasatarangini reprint 8th 14th chapter 72 shloka ,page no 340.
- [3]. Sushruta, sushrutaSamhita ,nidanasthana 3rd chapter 4th shloka page no-311.
- [4]. Sushruta, sushrutaSamhita ,nidanasthana 3rd chapter 5th shloka page no-311.
- [5]. Sushruta, sushrutaSamhita ,nidanasthana 3rd chapter 7th shloka page no-312.
- [6]. Sushruta, sushrutaSamhita ,chikitsasthana 7rd chapter 27th shloka page no-53.