

## A REVIEW ARTICLE ON MUTRAKRUCHA

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## INTRODUCTION

Ayurveda means science of life. principles in Ayurveda can never be challenged as they are universally accepted by other sciences as well and used by them for their improvement. ayurved classic texts by charak, sushrut and vagabhatta were the main samhitas of this ancient medical sciences, which was and is still of great clinical importance in their respective fields. mootra kruchhra is extensively described in these ayurvedic classics.

Nowadays in modern lifestyle due to their busy schedules, people more often have to depend on outside or roadside foodstuffs, which lacks hygiene, nutrients and harmful for health. normal urge to micturate and defecate are avoided due to fast and busy life and suppression of these urges leads to vegavrodha. human life is progressing rapidly and new milestones are being achieved, but it has also constituted to environmental pollution, pollution adversely affects the health of an individual and these factors are mainly responsible for diseases in human beings.

Cystitis is an inflammation of urinary bladder due to any infection. A bladder infection can be painful & annoying. It can lead to serious health problem if infection spreads upto kidney.

Cystitis has a very high rate of prevalence which is increased day by day. It is the disease mostly confined to developing countries. In India more than 40 percent are cystitis patient. Up to 15% of women have cystitis each year.

Mootra Kruchhra is one of the most explained rogas in all major Ayurvedic classics. As the name suggests, it means the Kruchata or difficulty during mootra pravrutti. Mootra pravrutti is considered one among the Adharaniya Vegas. In general mootra kruchhra is classified into 8 types which includes vataj, pittaj, kafaj, tridoshaj, purishaj, ashmarij, shukraj & abhighataj according to the nidana and lakshanas, among which Pittaja mootra kruchra is most common and frequently occurring problem.

The lakshanas of Pittaja mootrakruchhra includes strong, persistent urge to urinate, burning sensation when urinating, passing frequently small amounts of urine, blood in urine (hematuria), passing cloudy or strong smelling urine, discomfort in pelvic area, feeling of pressure in lower abdomen & low grade fever which have close resemblance with the signs and symptoms of cystitis.

“ दार्वी तथैवामलकीरसेन

समाक्षिकां पित्तकृते तु कृच्छे ” ॥ च.चि.

Cystitis are one of the most commonly seen in general practice. It typically occur when bacteria outside the body enter through urinary tract and begin to multiply. Most cases of cystitis are caused by a type of Escherichia coli (E.coli) bacteria . E.coli is the cause of 80-85 % of UTIs with staphylococcus saprophyticus being the cause in 5-10 %.

Cystitis the 2<sup>nd</sup> most common type of infection in our body. The usual treatment of cystitis includes antibiotics, antispasmodics & alkalisers. Antibiotics have their own limitations like development of resistance, reinfection & relapses etc.

**Ayurvedic Review Of Mootra Kruchhra**  
**Mootra Kruchhra**

The term mootrakruchhra is composed of two words mootra and kruchhra. the word mootra means drava anna mala and the word kruchhra means difficulty in urination or painful micturition. Thus mootrakruchhra can be defined as painful passing of urine, whereas mootraghata means low urinary output Difficulty in micturition associated with pain is the Pradhan lakshana

of mootrakruhra, while obstruction is related to mootraghata. mootrakruhra can be related to cystitis in modern sciences which means difficulty in urination or painful micturition.

#### Hetu (Nidan)

The aetiological factors of mootrakruhra are described by all acharyas in ayurvedic classics based on their theoretical and clinical experience. these aetiological factors are as follows

#### Aaharajanya Hetu

- **Ruksha aahar sevana** – dushti of pitta and vata is produced from ruksha and tekshna aahar which leads to mootra kruchhra. ruksha aahar decreases the kledatva and thus increase the absorption of dravabhaga leading to difficulty in micturition.
- **Teekshna madyapana** – excessive consumption of madya causes dushti of vata and pitta. amla guna of madya changes pH of urine causing bacterial infection.
- **Anup mansa** – it is kapha prakopak dravya causing dushti of kapha.

**Matsya Sevan** – matsya are abhishyandi in nature. they causes dushti of kapha and pitta causing mootrakruhra.

**Adhayashana** – Intake of food before digestion of previous meal.

**Ajirna** – it means indigestion of food Adhyashana and Ajirna are tridosh prakopak aahar leading to dushti of all three doshas and thus causing mootrakruhra.

#### Viharajanya Hetu

- **Ativyayam** –Ativyayam means excessive exercise. Excessive exercise causes dehydration and increase in temperature which leads to urinary symptoms. Ativyayam causes dushti of vata by ruksha and laghu guna leading to mootrakruhra
- **Nitya drita prishta yanat**- it means constant riding on horse and vehicles giving constant jerks and vibrations causes vataavridhhi. Dushti of vata causes mootra kruchhra.
- **Ativyavaya** – Transfer of bacteria during sexual intercourse or excessive sexual intercourse causes mootra kruchhra.
- **Vegavrodha** – Aavrodh of mootra vega causes of vata leading to mootra kruchhra.
- **Teekshna Aushadhi** – Teekshna guna of aushadhis decreases the Aap Mahabhuta of mootra, causing obstruction of the flow of urine. teekshna guna causes dushti of vata and pitta leading to mootra kruchhra.
- **Aagantu** – Any kind of trauma or injury to mootravaha strotasa can cause mootra kruchhra.

All these aetiological factors contributes to the occurrence of mootra kruchhra vyadhi.

Acharya Charaka has described 8 types of mootrakruhra. These types are as follows:

1) Vataja 2) Pittaja 3) Kaphaja 4) Sannipatika 5) Shukraja 6) Raktaja 7) Ashmarija 8) Sharkaraja

Acharya sushruta has described 8 types of mootrakruhra. these are as follows :

1) Vataja 2) Pittaja 3) Kaphaja 4) Sannipatika 5) Abhighataja 6) Purishaja 7) Ashmarija 8) Sharkaraja

#### C) According to Vagbhata

1) Vataja 2) Pittaja 3) Kaphaja 4) Sannipataka

#### B) According to Yogratnakara and Bhavaprakasha :

1) Vataja 2) Pittaja 3) Kaphaja 4) Sannipatika 5) Ashmarija 6) Shukraja 7) Purishaja 8) Shalyaja

#### B) According to Sharangadhara

1) Vataja 2) Pittaja 3) Kaphaja 4) Sannipatika 5) Ashmarija 6) Shukraja 7) Purishaja 8) Abhighataja

**Vataja Mootrakruhra:** Pain is the main symptom associated with vataja mootrakruhra. patient has complaints of urine retention or increased frequency of urination with difficulty, constipation, abdominal distension and fullness of bladder.

#### Pittaja Mootrakruhra

In modern lifestyle due to busy schedule and fast life of people, they more often have to depend on outside food which include spicy and dry food . these foodstuffs causes dushti of pitta dosha. dusht pitta dosha gets collected in mootravaha strotasa and causes pittaja mootrakruhra.

**Kaphaja Mootrakruhra:** Urine is whitish in colour, sticky, thick with small or large quantities. patient observes heaviness in region of kidneys, bladder and penis. Sushruta described urine as Snigdha, whitish, ushna and a sense of heaviness in hypogastric region.

**Sannipatika Mootrakruhra:** Symptoms of Vataj, Pittaj and Kaphaj mootrakruhra are observed in sannipatika Mootrakruhra. pain, burning and chills all over the body are its symptoms. patients suffers from anorexia, giddiness, drowsiness, thirsty, delirium and has a feeling of unconsciousness. Urine is of various colour and frequency during micturition.

**Raktaj Mootrakruhra:** its smptoms are blood stained urine and severe pain during micturition. there is increased frequency of micturition in small amounts. Any kind of trauma or instrumental injury causes raktaja mootrakruhra. In raktaj mootrakruhra there is formation of a blood clot in the passage of urine leading to distension and heaviness of bladder which is relived after passage of blood clot.

**Ashmarija Mootrakruhra:** Severe coliky pain, chest pain, tremors and sometimes fainting are the symptoms of Ashmarija Mootrakruhra as described by Acharya Sushruta. According to Acharya charaka, Ashmari obstructs the urinary passage leading to pain in lumbar region radiating from loin to groin and tip of penis. there

is constant massage of penis by the patient in a attempt to relieve pain. obstruction causes bifurged stream of urine. urine is blood stained sometimes due to injury by stone, patient is relieved from all symptoms after overcoming obstruction.

**Shukraja Mootrakruhra:** Pain in urinary bladder, penis, inguinal region, and testies, urine mixed with semen, and swelling over Vrushana and Basti are the symptoms of Shukraja Mootrakruhra. suppression of the act of ejaculation leads to apan vayu dushtibgiving rise to dysuria. semen vitiated by doshas obstructs its passage leading to dysuria.

**Purishaja Mootrakruhra:** Severe pain during micturition, retension of urine and distension of bladder are the symptoms of purishaj mootrakruhra. suppression of the act of defecation causes irritation of apan vayu leading to Purishaja Mootrakruhra.

**Abhighataja Mootrakruhra:** Severe pain during micturition, anuria and oliguria are the symptoms of Abhighataja Mootrakruhra. Accidental or surgical injury to urinary system are the causes of Abhighataja mootrakruhra.

**Sharkaraja Mootrakruhra:** Coliky pain at Basti region, weak stream of urine, obstruction of urine and increased sense of defeacation are the symptoms of Sharkaraja Mootrakruhra. Sharkara are small and minute particles of calculi. Ashmari which is a solid hard stone when broken into small particles sha v vrkara are formed. Sharkara is formed due to pitta and vayu dosha. Patient experiences colicy pain at basti region when sharkara is thrown out while passing urine.

#### Differential Diagnosis

Mootrakruhra vyadhi can be differentiated from following vyadhis -

- 1) Mootraghatha (BPH)
- 2) Mootrasangha
- 3) Mootrajathar
- 4) Nirudha Prakash

#### Chikitsa (Management)<sup>[14-16]</sup>

**Shamana chikitsa:** It includes *Mutra-vishodhaniya*, *mutra-virechaniya*,

**Shodhana chikitsa:** It includes *Mutral dravyas & uttara vasti*. These increases frequency and quantity of *Mutra* which helps to flush out various infective agents.

**Bahirparimarjana chikitsa:** These are the medicines used locally (externally) in the form of fomentation, showers, *potalis* and ointment etc.

#### Specific Management (*Pittaja Mutrakrichra chikitsa*)

##### **Bahirparimarjana chikitsa<sup>[17]</sup>**

*Sheeta Parisheka*, *Avagahana in cold water pralepana with chandan and karpur*.

#### **Antahparimarjana chikitsa<sup>[18]</sup>**

Treatment is given as per dominance of vitiation of *doshas*.

#### **Shodhana**

*Virechana with tikta evam madhur kashaya, Uttara vasti*. If *kapha* is predominant then *vamana*, if *pitta* is predominant then *virechana* and if *vata* is predominant then *vasti karma* should be perormed.

#### **Shamana**

*Shatavaryadi kwatha (Ch.)*, *Haritakyadi kwatha*, *Trinapanchmula kwatha (Y.R.)*, *Trinapanchamula churna(Su.)*, *ervaru beeja*, *yashtimadhu*, *devdaru with tandul dhavan Pashanbhedadi yoga*, *Brihatyadi kwatha*, *Gudadugdha yoga*, *dhatryadi yoga*.

#### **Pathya**

*Purana shali*, *yava*, *kshara*, *takra*, *dugdha*, *dadhi*, *jangal mamsa*, *mudga yusha*, *trapusha*, *nadeya jala*, *sharkara*, *kushmanda*, *patola patra*, *ardraka*, *gokshura*, *puga*, *narikela*, *laghu ela*, *karpura*.

#### **Apathya**

*Tambula*, *matsaya*, *lavana*, *pinyaka*, *hingru*, *tila*, *sarshapa*, *masha*, *karira*, *tikshna*, *vidahi*, *ruksha*, *amla dravya*, *virudhashana*, *vishamashana*, *Yana gamana*, *vega dharana*.

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