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# AYURVEDIC APPROACH FOR THE TREATMENT OF ASHMARI

1\*Dr. Ajay Kumar and 2Dr. Anuradha Lalotra,

<sup>1</sup>Assistant Professor, Dept. of Rog Nidan, S.S.M.D.Ayu. College & Hospital, Moga, Punjab.

<sup>2</sup>Assistant Professor, Dept. of Dravya Guna, S.S.M.D.Ayu. College & Hospital, Moga, Punjab.

\*Corresponding Author: Dr. Ajay Kumar

Assistant Professor, Dept. of Rog Nidan, S.S.M.D.Ayu. College & Hospital, Moga, Punjab.

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#### ABSTRACT

The word Ashmari is made up of two words "Ashma and Ari". Ashma means stone or a gravel and Ari means enemy. Ashamri is a disease in which there is formation of stone, exerting great suffering to human beings like an enemy. The description of Ashmari is the specific contribution of Acharya Sushruta. He has included Ashmari in Ashta Mahagada i.e. the eight most troublesome diseases. The specific name of Ashamri is Mutrashmari which is related with Mutravaha Strotsa. Basti (Urinary bladder) is the main site (Adhisthana) of Ashmari. The incidence of Mutrashmari are increasing day by day due to various reasons like altered food habits, change lifestyle, stress, strain, environmental pollutions etc. This Mutrashmari (Urolithiasis) can leads to defects in the formation of urine and micturition. A urinary stone causing partial occlusion to the urinary tract may lead to hydronephrosis and subsequent destruction of parenchyma leading to renal failure. In Ayurveda mainly three types of drugs i.e. Mutravirechaniya (diuretic), Ashmarighna (lithotriptic) and Shophaghna (anti-inflammatory) are prescribed for the treatment of Renal stones. Actions of these drugs subsides the symptoms of Renal stones and even prevent the recurrence of stones.

**KEYWORDS:** Ashmari, Ashta Mahagada, Mutra Nirmana, Mutravaha Dhamanies, Mutravirechaniya, Ashmarighna and Shophaghna.

### INTRODUCTION

The word Ashmari is made up of two words Ashma means stone or a gravel and Ari means enemy. Ashamri is a disease in which there is formation of stone, exerting great suffering to human beings like an enemy. The description of Ashmari is the specific contribution of Acharya Sushruta. He has included Ashmari in Ashta Mahagada i.e. the eight most troublesome diseases. The specific name of Ashamri is Mutrashmari which is related with Mutravaha Strotsa. Basti (Urinary bladder) is the main site (Adhisthana) of Ashmari. Acharya Charaka mentioned Basti under Dashvidha Pranayatana i.e. ten vital organs of the body. Acharya Sushruta classified Basti as Sadhyapranahara Marma i.e. injury to these Marma can leads to immediate death of theperson.

The Adhisthana of Ashmari is undoubtly the Basti. The description regarding the formation of Ashmari available in Sushruta Samhita is highly suggestive of bladder calculi. However, it is evident that Ashmari can occur in any part of the urinary system, but its formation in other parts of the system other than Basti not separately described in any Ayurvedic texts. So, it is logical and convenient to consider the term Basti refers to the urinary system.

The incidence of *Mutrashmari* is increasing day by day due to various reasons like altered food habits, change lifestyle, stress, strain, environmental pollutions etc. This *Mutrashmari* (Urolithiasis) can leads to defects in the formation of urine and micturition. Urolithiasis has high prevalence and recurrence rates along with vast complications. A urinary stone causing partial occlusion to the urinary tract may lead to hydronephrosis and subsequent destruction of parenchyma leading to renal failure.

## DISCUSSION

The kidneys are bean shape organs that handle the body's fluid and chemical level. Healthy kidneys clean waste from the blood and remove it in the urine. Urine contains many dissolved minerals and salts. When urine has high levels of these minerals and salts, formation of stones starts. These stones can start small but can grow larger in size, even filling the inner hollow structures of the kidney. Some stones stay in kidney without creating any troublesome.

Sometimes, can travel down the ureter. If the stone reaches the bladder, it can be passed out of the body in urine. If the stone becomes lodged in the ureter, it blocks the urine flow from that kidney and causes pain.

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Kidney stones may be Calcium stones (most common 80% of all stones) – calcium oxalate and calcium phosphate, Uric acid stones (5-10 %), Struvite/infection stones (10%) and Cystine stones(<1%).

## Major causes are

- 1. Low urine volume due to dehydration from hard exercise, working or living hot place ornot drinking enough fluids.
- 2. Diet containing foods rich in oxalate, high in animal protein and excessive calciumintake.
- 3. Obesity can change the acid levels in the urine, leading to stone formation.
- Medical conditions like abnormal growth in parathyroid gland (controls calcium metabolism and cause renal tubular acidosis) and various inherited disorders leads to cystinuria, primary hyperoxaluria etc.
- 5. Medication such as calcium and Vitamin C supplements.
- 6. Family history.

### **Symptoms**

Pain – Sharp cramping in back and side, often radiates to the lower abdomen or groin. Sudden onset and comes in waves. It can come and go as the body tries to get rid of thestones.

- > Feeling of intense desire to urinate.
- Burning micturition.
- > Dark or red urine due to blood.
- Nausea and vomiting.

The concept of Mutra Nirmana (urine formation) in Ayurvedic classics is same according to different Acharyas i.e. from ingested Ahara. It is waste excretory product of Ahara along with Purisha. According to Acharya Sushruta, two Adhogami Dhamanies carry the Mutra to Basti and so named as Mutravaha Dhamanies. Various Nidana mentioned in Ayurvedic texts which leads to the formation of Mutrashmari. These are Apathya Sevana- Adhayshana (indulge themselves in eating again before the digestion of previous meal), Shita (eating cold food stuffs), Guru (heavy), Snigdha (fatty) and Madhura Ahara (sweet) in excess, Divaswapana (sleeping in day time), not undergone Samshodhana (purification of body) treatment. Due to Nidana Sevana, Doshas get aggravated along with Dushya and causes Stroto Dushti. After that the disease manifests in the body.

In the formation of Ashmari, Acharya Sushruta says-

- As clean water in a new pitcher gets muddy precipitates due course of time, in similarway calculi are formed.
- As air and fire of electricity in the sky consolidate water to form hail stone, similarly
- *Pitta* located in the bladder in conjugation with *Vayu* consolidates *Kapha* to form calculi.

Acharya Charaka writes that the formation of

*Mutrashmari* is similar to the formation of *Gorochana* by the *Gopitta*.

It is a specility in *Ayurveda* to describe prodromal symptoms (*Purvarupa*) of every disease so that clinician can recognize the impending disease in its early stage and can plan out the management. These are *Jwara* (fever), *Bastipeeda* (pain in lower abdomen), *Bastishira-Mushaka-Shefasama Vedana* (radiating pain to Penis and Scrotum), *Mutrakrichham* (dysuria), *Arochaka* (decreased appetite and nausea), *Bastagandhitavam* (smell in the urine).

Rupa (Lakshanas) are the signs and symptoms presented at the actual stage of manifestation of the disease. Following Lakshanas are described by Acharya Sushruta:

- Nabhi-Basti-Sevani-Mehan Mahato Vedana (excessive pain in lower abdomen radiating toward tip of penis in male and labia majora in females)
- *Mutradharasanga* (obstruction in flow of urine)
- Sarudhira Mutrata (haematouria)
- Gomedaka Prakasam Atyaavila (clear urine like Gomeda Manni)
- Sasiktam (urine mixed with gravels)
- Dhawan-Laghan-Plavana-Prishthayana-Adhava Gamane Vedana (pain during running fasting, swimming, ridding, walking)

## Ayurvedic herbs for mutra-ashmari

In *Ayurveda* mainly three types of drugs i.e. *Mutravirechaniya* (diuretic), *Ashmarighna* (lithotriptic) and *Shophaghna* (anti-inflammatory) are prescribed for the treatment of Renal stones. Actions of these drugs subsides the symptoms of Renal stones and even prevent the recurrence of stones. These single herbs include:

- 1. Pashanbheda
- 2. Varuna
- 3. Kulattha
- 4. Gorakshganja
- 5. Punarnava
- 6. Gokhura
- 7. Virataaru

### Pashanbheda

Botanical name: *Bergenia ligulate* Wall. Engl. Family: Saxifragaceae

Habit: Perennial herb with stout rootstocks.

Habitat: Temperate Himalayas between altitude of 900-3000 m.Pharmacodynamic Properties:

Rasa- Kshaya, tikta

Guna- Laghu, tikshan, snigadVeerya- Sheeta

Vipaka- Katu

Prabhava- Ashmari- bhedana Dosha Karma: Tridosha shamakaPart Used: Rhizome

Chemical constituents: Bergenin,  $\beta$ -sitosterol, catechin-3 gallate.

Classical Therapeutic Usage:

In Ashmari and Mutrakriccha, Nala, Pashanbheda, Darbha, Ikshu, Trapusa and Ervaru beeja are boiled with milk and given with honey. (S.S.Ut.58).

#### Mechanism of Action

- Bergenia ligulata rhizome contains bergenin which inhibits calcium oxalate crystal aggregation as well as exhibits antioxidant effect against free radical and lipid peroxidation. Thus, it is used as an antiurolithiatic agent.
- Paashanolactone, a key component isolated from Bergenia ligulate rhizomes, has been shown to have anti-inflammatory properties.

Thus, Pashanbheda is used as medication for treating renal stones primarily by its diuretic and lithotriptic action.

#### Varuna

Botanical name: Crateva nurvala Buch-Ham. Family: Capparidaceae

Habit: A deciduous, medium seized-tree which reaches height up to 50 feet.

Habitat: It usually grows in the southernmost mountains in the Himalayan range and is indigenous to Karnataka, Kerala and Tamil Nadu.

Pharmacodynamic Properties

Rasa- Tikta, Kshaya Guna- Laghu, rukshaVeerya- Ushna Vipaka- Katu

Prabhava- Ashmari- bhedana

Dosha Karma: Kapha-Vata Shamaka & Pitta Vardaka

Part Used: Root bark, stem bark

Chemical constituents: Lupeol, Rutin, Varunol, Quercetin, β-sitosterol.

### Classical Therapeutic Usage

- In chikitsa sthana, Varuna is mentioned in Vatika Ashmarihara grutha and Kaphaja Ashmari hara yoga. (S.S.Chi.7/6, 14).
- Varuna root and stem bark paste as well as decoction are administered orally in Ashmari. (Vrnda Madhav).

### **Mechanism of Action**

- Lupeol present in Varuna prevents the deposition of calcium and oxalate in the kidney by inhibiting the activity of the Liver enzyme glycolic acid oxidase.
- Therefore, Varuna is used to treat hypercrystalluria, hyperoxaluria andhypercalciuria.
- Lupeol also possesses anti-pyretic, analgesic and anti-inflammatory activity. Thus, Varuna works on renal stones primarily by lithotriptic and antiinflammatory activity.

### Kulttha

Botanical name: Dolichos biflorus Linn. Family: Fabaceae.

Habit: A slender, trailing or sub-erect, branched annual

herb. Habitat: Native to India and is found at an altitude of up to 1000 m.Pharmacodynamic Properties:

Rasa- Kshaya

Guna- Laghu, ruksha, tikshnaVeerya- Ushna

Vipaka- Amla

Prabhava- Ashmari- bhedana

Dosha Karma: Kapha-Vata Shamaka & Rakta- Pitta Prakopka

Part Used: Seeds

Chemical constituents: Genistein, Dalbergioidin, phasecollidin, Quercetin, Tannins. Classical Therapeutic

- In Bhav Prakasha, Kultthadya ghrita is indicated in Calculus.Mechanism of Action:
- The Tannins and flavonoids (Quercetin) present in Dolichos biflorus lead to relaxation of smooth muscles of the urinary tract which in turn facilitates the expulsion of stones from both the kidneys (Calixto et al., 1998)
- Quercetin present in D. biflorus shows inhibition of ACE (Angiotensin converting enzymes) activity which results in significant reduction of renal Calcium oxalate crystal deposition as well as interstitial inflammation. (Toblli et al., 2001)
- Ouercetin also effectively reduced the lipid peroxidation and restores the antioxidant enzyme activity.
- Thus, Kulttha is used as medication for treating Renal stones primarily through its antioxidant and anti-inflammatory activity.

## Gorakshganja

Botanical name: Aerva lanata Juss. Family: Amaranthaceae

Habit: A semi erect many branched under shrub which grows up to 50 cm in height.

Habitat: It grows throughout India in the plains up to 1000 meters on the hills, Ceylon, Arabia, Tropical Africa, Java, Phillippiness.

Pharmacodynamic Properties:

Rasa- Tikta, Kshaya Guna- Laghu, tikshna Veerya-Ushna Vipaka- Katu

Prabhava- Ashmari- bhedana

Dosha Karma: Kapha-Vata Shamaka

Part Used: Root

Chemical constituents: Palmitic acid, \( \beta \)-sitosterol and alpha-amyrinMechanism of Action:

- Quercetin and botulin present in Aerava lanata causes inhibition of formation of oxalate by inhibiting the activity of Oxalate oxidase enzyme which is responsible forthe stone formation.
- Both quercetin and botulin significantly increased the urinary magnesium level. Thus, magnesium inhibits the oxalate absorption and excretion and prevents its supersaturation. Thereby, reduces the risk of calcium oxalate stone formation.
- Quercetin and botulin also produce diuretic effect.

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Thus, Gorakshganja is used for treating Renal stones primarily by anti-urolithiatic and diureticactions.

#### Punarnava

Botanical name: Boerhavia diffusa Linn. Family: Nyctaginaceae

Habit: A creeping, perennial, much-branched herb with stout, fusiform roots.

Habitat: It is an indigenous herb found in the Himalayan region up to an altitude of 2000 meters in the temperate parts of the country.

Pharmacodynamic Properties:

Rasa- Madhura, Tikta and Kshaya

Guna- Laghu, rukshaVeerya- Ushna Vipaka- Madhura

Dosha Karma: Tridoshahara

Part Used: Root

Chemical constituents: Punarnavoside, Borhaavone, Quercetin, Eupalitin, Punarnavine Classical Therapeutic Usage:

- Milk cooked with Haritakyadi (Triphala) or Punarnava should be taken in Calculus.
- (Sushruta Samhita Ch. 7.26)
- In Bhav Prakasha, for the treatment of calculus, Punarnavadya taila is indicated.(B.P.Ch. 37.95-99)
- Mechanism of Action:
- Due to presence of Punarnavine in B. diffusa it exhibits diuretic action, increased urine volume decreases the saturation of the oxalate and prevents the precipitation of the calcium oxalate crystals at physiological pH. Diuresis also flushes out the renal system and helps in mechanical expulsion of stone.
- Eupalitin present in B. diffusa is accredited with NF -кВ inactivation activity (Pandeyet. Al., 2005) which leads of inhibition of phospholipase A resulting in scavenging of Reactive oxygen species. Thus, B. diffusa via antioxidant property protects renal cell

Thus, *Punarnava* is used as medication for treating renal stones primarily through its diuretic and antioxidant activity.

### Gokshura

Botanical name: Tribulus terrestris Linn. Family: Zygophyllaceae

Habit: A prostrate shrub

Habitat: It is found throughout sub-tropical parts of India, ascending up to 1000 meter as a weed along roadsides and waste places.

Pharmacodynamic Properties:

Rasa- Madhura Guna- Guru, snighad Veerya- Sheeta Vipaka- Madhura

Dosha Karma: Vata-pitta Shamaka

### Part Used: Fruit, root

Chemical constituents: Harman, Harmine, Quercetin, Kaempherol. Classical Therapeutic Usage:

Ghrita cooked with decoction of gokshura and eight times milk should be taken. (Charak Samita. Ci.

- 26.74)
- Root of gokshura, kokilaksha, eranda and two types of brihati are pounded together with milk and dissolved in sweet curd for a week. It breaks calculus.(Charak Samita. Ci. 26.62)
- Powder of the seeds of Gokshura mixed with honey and taken with sheep milk for a week breaks calculus. (Sushruta Samhita Ci. 26.62)

#### Mechanism of Action

Quercetin and Kaempherol present in T. terrestris are found to be non-competitive and competitive inhibitors of GOX (Glycolate oxidase) which is principal enzyme involved in the oxalate synthesis pathway. Thus, exhibits anti-urolithic activity due to its GOX inhibition property.

Thus, Gokshura is used as medication for treating renal stones primarily through its diuretic and antioxidant activity.

#### Virataaru

- Botanical name: Dichrostachys cinerea W.& A. Family: Mimosaceae
- Habit: A perennial, highly variable thorny shrub or small tree.
- Habitat: It is found in a variety of habitats, and is widely distributed in the seasonally dry tropics of Africa, Asia and Australia. In India, D. cinerea occurs in dry deciduous forests.
- Pharmacodynamic Properties:
- Rasa- Tikta, Kshaya Guna- Laghu, ruksha Veerya-Ushna Vipaka- Katu
- Dosha Karma: Kapha-Vata Shamaka
- Part Used: Root
- Chemical constituents: β-amyrin, friedelin, βsitosterol, Anthocyanin and Betacyanin, Coumarins, Terpenes, Cardiotonic Heterosides.

## Mechanism of Action

Administration of Kwatha of Virataaru was studied in experimental animals and was found to increase urine output in dose-dependent manner may be due to its individual or combined bioactive components.

Thus, Virataaru is used as medication for treating renal stones primarily through its diureticactivity.

### CONCLUSION

The incidence of *Mutrashmari* is increasing day by day due to various reasons like altered food habits, change lifestyle, stress, strain, environmental pollutions etc. This Mutrashmari (Urolithiasis) can leads to defects in the formation of urine and micturition. Although there are many treatment options available for the management of Urolithiasis but the conventional treatment is quite expensive and moreover, the recurrence occurs commonly. However, in *Ayurveda*," the science of life", mainly three types of drugs i.e. Mutravirechaniya (diuretic), Ashmarighna (lithotriptic) and Shophaghna

(anti-inflammatory) are prescribed for the treatment of Renal stones. Actions of these drugs subsides the symptoms of Renal stones and even prevent the recurrence of stones. Thus, *Ayurvedic* drugs acts as antilithogenic by virtue of multiple actions such as diuretic, anti-inflammatory, analgesic activity and improve renal function and prevents the recurrence of renal stones.

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