

A CASE STUDY ON *SHILODBHIDADI TAILA MATRABASTI* IN THE MANAGEMENT OF *VATASHTHEELA* W.S.R. TO BENIGN PROSTATIC HYPERPLASIADr. Abhilasha Kore¹ and Dr. Shailesh Jaiswal^{2*}¹PG. Scholar, Parul Institute of Ayurveda, Vadodara.²Associate Professor, Parul Institute of Ayurveda, Vadodara.

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Article Received on 28/06/2021

Article Revised on 18/07/2021

Article Accepted on 08/08/2021

ABSTRACT

Benign Prostatic Hyperplasia is a common senile disease. The present modern conservative management includes use of alpha blockers and 5 alpha reductase inhibitors. In operative management various type of operative may done, out of which most commonly done now a days is TURP. But both of these modalities cause various side effects. Here, *Ayurveda* has got definite contribution which encourages us to find solution for this burning problem of society. In *Ayurved Samhitas*, symptoms of benign prostate hyperplasia are described under *Mutraghata*. There are 12 types of *mutraghata*; one of them is *Vatashtheela*. The general treatment of *Mutraghata* includes *matrabasti*. Though, *matrabasti* is a traditionally used therapy, its efficacy with *Shilodbhidadi Taila* is not yet evaluated within management of BPH. *Matrabasti* is cost effective and it may avoid surgery which ultimately results in increased quality of life of patients. So, in present clinical study, efficacy of *Shilodbhidadi Taila matrabasti* in *Vatashtheela* with special reference to benign prostatic hyperplasia is evaluated.

KEYWORDS: *Vatashtheela*, *Shilodbhidadi taila*, benign prostatic hyperplasia.

AIMS AND OBJECTIVES

To study the efficacy of *Shilodbhidadi Taila Matrabasti* in the management of *Vatashtheela* with special reference to Benign Prostatic Hyperplasia.

Place of work: Clinical study done at Parul Ayurveda Hospital.

Case Report: A 63 yr male came at OPD of *shalyatantra* at Parul Ayurved Hospital, presenting complaint since one month.

Complaints Of

- Incomplete Emptying
- Frequency
- Intermittency
- Urgency
- Weak Stream
- Straining
- Nocturia

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On examination

General condition was moderate and afebrile.

Pulse -72 / min

Blood pressure -140/80 mmhg

No pallor, no icterus

Systemic examination – RS – AEBE

CVS – S₁S₂ normal

CNS – Conscious oriented.

P/A – Mild tenderness present, liver, spleen not palpable.

- *Astavidhparikshan*

Nadi - 72/min.*Druka* – *samyak**Mala* – *samyak**Sparsha* – *anushna**Mutra* – *Asamyak**Akruti* – *madhyam**Jivha* – *niram**Shabda* – *samyak*

- Present Illness: Incomplete Emptying
- Frequency
- Intermittency
- Urgency
- Weak Stream
- Straining
- For its management patient came in OPD of *shalyatantra*.

Past history: H/O HTN/DM on Treatment. No H/O of any surgical illness, no any drug allergy.

Local examination -external urethral meatus - normal.

PR Digital- Prostomegaly, Non tender smooth, firm, elastic enlargement.

Investigation: - HB-13.2 gm%, BSL (R) = 74 mg/dl, HIV 1 & 2 – Non reactive, HBsAg –non reactive. Serum creatine =1.03 mg/dl, blood urea = 21 mg/dl.

Diagnosis: The condition was diagnosed as a Benign Prostatic Hyperplasia.

MATERIAL AND METHODS

- Dose: 72ml *Shilodbhidadi Taila*.
- Regime: *Matrabasti* daily for 7 days.
- Duration of study: 7 days.
- Follow up: after 1 month.
- Procedure Of *Matrabasti*:-

Purvakarma: Informed & written consent was taken before *Matrabasti*.

Left lateral position was given to patient

Shilodbhidadi taila 72ml was made lukewarm and all instruments including 100ml syringe, red rubber catheter and all materials were kept ready.

- *Pradhankarma*
 - 100ml syringe filled with *Shilodbhidadi taila 72ml*.
 - Lukewarm *Shilodbhidadi taila 72ml* was inserted slowly through by syringe in red rubber catheter inserted in *gudamarg*.
- *Paschatkarma*:-
 - Patient was kept in supine position for 15 minutes

Criteria for Assessment of Therapy

Table 1: Subjective criteria: International Prostate Symptom Score (I-PSS).^[4]

In the past Month	Not at all	Less than 1 in 5 times	Less than half the times	About half the time	More than half the time	Almost always	Score
Incomplete emptying: How often have you had the sensation of not emptying your bladder?	0	1	2	3	4	5	
Frequency : How often have you had to urinate less than every two hours?	0	1	2	3	4	5	
Intermittency: How often have you found you stopped and started again several times when you urinated?	0	1	2	3	4	5	
Urgency: How often have you found it difficult to postpone urination?	0	1	2	3	4	5	
Weak stream: How often have you had a weak urinary stream?	0	1	2	3	4	5	
Straining : How often have you had to strain to start urination?	0	1	2	3	4	5	

Nocturia

How often have you have to 0 1 2 3 4 5

Urinate in night?

Score: 1-7: Mild 8-19: Moderate 20-35: Severe

Objective Criteria USG Abdomen with pelvis before treatment and after	1) Weight of prostate. 2) Post voidal retention volume.
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Treatment was observed for

RESULTS

Table 2: International Prostate Symptom Score (I-PSS).

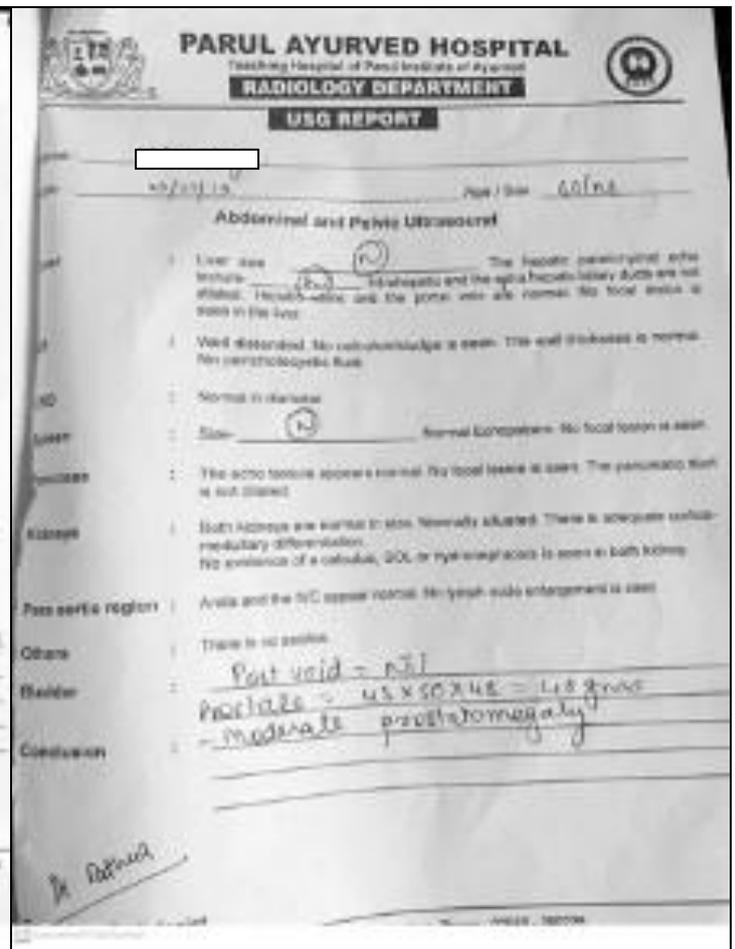
Symptoms	Score			
	1 st day	7 th day	15 th day	30 th day
1 Incomplete Emptying	5	5	2	1
2 Frequency	5	2	1	1
3 Intermittency	5	4	2	0
4 Urgency	5	3	3	0
5 Weak Stream	5	4	0	0
6 Straining	5	2	0	0
7 Nocturia	5	2	2	1
Total IPSS Score	35	22	11	3

Table 3: Objective criteria.

Sr. No.	USG Findings	0 th day (Before Treatment)	30 th day (After Treatment)
1	Weight of Prostate	54 gm	48 gm
2	Post void urine	160ml	10ml



USG Reports Before Treatment



USG Reports After Treatment

DISCUSSION

This formulation of *Shilodbhidadi* was selected in BPH; because it is the wonderful combination designed by *Sushruta* for urinary channels. The component of *Shilodbhidadi* are so wonderfully collated by *Acharya Sushruta*, that it can be said complete regimen for

urinary tract disorders. Total 06 contents in this preparation namely *Tila Tila, Punarnava, Pashanabheda, Erandamoola, Shalparni and Shatavari*.

The maximum ingredients in this formulation have *Kashaya Rasa, Madhura Rasa & Tikta Rasa; Madhura Rasa* carried the *Vata-Pitta Shamaka* and *Anulomana*

property, *Tikta Rasa* having *Kapha-Hara* and *Deepana Pachana* property and *Kashaya Rasa* exhibit *Kapha-Pitta Shamaka*. *Laghu* and *Ruksha Guna*; *Kapha Shamaka* in nature, *Laghu Guna* carried the *Agni Deepana* and *Shrotoshodhana* properties.

Snigdha Guna is capable to relieving *Vata* and *Pitta*. *Katu Vipaka*; *katu vipaka* is said to be normalising vitiated *Kapha*. These properties, exerted pharmacological actions like *agni deepana*, *ama pachana*, *mootrala*, *lekhana*, *shothahara*, *vilayana* and *srotoshodhana* etc. Further, due to these actions, *sanga* is removed in *mootravaha srotasa* particularly at *basti shira* led to reduction in size of the enlarged prostate and simultaneously correction of *agni dushti* took place. As *mootravaha srotasa* becomes free from *avarodha* (in the form of *aghata*) or *avarana* caused by vitiated *kapha*, the vitiated *vata* comes to normal state. Thus, it normalized the physiology of *apana vayu*, results into proper evacuation of *mootra* in the form of increased urine flow rate. Because of improvement in *jatharagni* due to *deepana & pachana* effect of drugs, *dhatvagnies* also had come down in normal state. The function of *basti snayu* might have been improved due to correction of *mamsa dhatvagni*. Finally, *mamsa* and *medo vridhhi* had been returned to normal state due to normalization of *dhatvagni*; and ultimately leads to reduction in enlarged prostate gland size because of *ama pachan*, *lekhana* and *sophahara* action of ingredients. Maximum drugs in this formulation have anti-inflammatory, antioxidant and antimicrobial properties to eliminate the urinary infection and maintain the urinary pH. The anti-lithogenic and diuretic drugs are available here in formulation to minimize the chances of stone formation. The high proportion of diuretic drugs not only improves the kidney function but also promotes to enhance the normal metabolism.

CONCLUSION

From above case study it can be concluded that the *Shiodbhidadi Taila* is effective in reducing International prostate symptom score, weight of prostate and post residual volume in *vatashthila* (benign prostate hyperplasia).

Accordingg to *Acharya Sushruta matrabasti* is recommended in all types of *Mutraghata*.

Matrabasti helps in controlling *Apana Vata* and the ingredients in the formulation helped to relieve symptoms of BPH i.e. nocturia, increased frequency and prostatic enlargement.

So it can be concluded that the *Shilodbhidadi Taila Matrabasti* is effective in the management of *Vatashtheela*(BPH).

CONFLICT OF INTEREST- none.

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