Journal of Ayurveda and Integrated Medical Sciences

www.jaims.in

An International Journal for Researches in Ayurveda and Allied Sciences
Role of Kshara Tail Uttarbasti in the management of Urethral Stricture - A Case Study

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ABSTRACT

Stricture urethra, though a rare condition, still is a rational and troublesome problem in the international society. The symptoms like obstructed urine flow, straining, dribbling and prolongation of micturition. Major complications caused by this disease are obstructed urine flow, urine stasis leading to urinary tract infection, calculi formation, etc. This condition can be correlated with Mutramarga Sankocha in Ayurveda. Modern medical science suggests urethral dilatation, which may cause bleeding, false passage and fistula formation in few cases. Surgical procedures have their own complications and limitations. Uttarabasti, a para-surgical procedure is the most effective available treatment in Ayurveda for the diseases of Mutravaha Strotas.

Key words: Mutramarga Sankocha, stricture urethra, urethral dilatation, Uttarabasti.

INTRODUCTION

Urological issues are clearly a significant component of medical sciences even in those ancient times, as indicated by the study of the Sushruta Samhita¹, an ancient surgical treatise. That could be the reason why all of the classic texts provide a clear and stunning image of their classification, symptomatology, complications, and management. From the Atharva Veda, the oldest descriptions of urinary tract disorders may be traced. An in-depth explanation of Mutraghata and how it is treated with Loha Shalaka provides evidence that our ancestors were knowledgeable with the anatomical, physiological, pathological, and therapeutic aspects of the human body.

Mutravaha Srotas include Vrukka (kidney), Gavini (ureter), Mutrashaya (urinary bladder), and Mutramarga (urethra), according to Ayurvedic Sharira Rachana.² Ashtanga Hridaya defines that urination is the function of Vata, and its vitiation settles in disturbed urinary functions.³,⁴

In Ayurveda, urethral stricture is correlated with Mutra Marga Samkocha. Diseases of the genitourinary system are classified as Mutravaha Shrotas Vyadhi in Ayurveda. Acharya Shushruta categorized Mutraghata into twelve types. While Mutramarga Samkocha does not have an individual title, its symptoms are comparable to those of Mutrotsanga.⁵ Acharya Shushruta has explained Uttarabasti as treatment procedure of Mutrotsanga. Acharya Charaka has classified urinary disease like Mutra Krichha into 8 types.⁶

Mutramarga Sankocha can be correlated with stricture urethra. Pathologically it becomes narrowed by a fibrotic tissue, which hampers excretion of urine. In modern science, the suggested treatment is urethral dilatation besides surgical treatment. It may cause bleeding, false passage and fistula formation. The
surgical intervention like urethroplasty\(^n\) also carries high grade risk of recurrences. Though the science has developed in many directions, it is unable to provide satisfactory treatment to patients without any complications and recurrences.

Seers highlighted the use of \textit{Uttarabasti} in the management of \textit{Mutramarga Sankocha}. Prior studies showed that \textit{Uttarabasti} is a safe and effective symptomatic treatment for urethral stricture. The current study demonstrates the effect of \textit{Uttarabasti} of medicated \textit{Ksharataila} in the management of urethral stricture.

**MATERIALS AND METHODS**

**Equipment required:**

- Surgical Gloves
- 50 ml Autoclaved (\textit{Kshara Tail})
- 50 ml Disposable Syringe
- Kidney Tray
- Infant Feeding Tube no.6
- Betadine Solution
- Sponge Holder
- Honey 10 ml
- Sterilized Gauze Pieces
- 2\% Lidocaine gel

**Procedure**

\textit{Uttar Basti} is performed in following 3 phases as follow.

1. **Purvakarma (pre-operative)**
   - All the needed investigations are done and necessary vitals are taken at first.
   - Patient is asked to void urine, and be free from natural urges. Then asked to lie in supine position with cloth undone.
   - Then Antiseptic care is given.
   - Then luke warm autoclaved oil is mixed with rock salt.

2. **Pradhan Karma (operative)**
   - Thus, obtained mixture is loaded in 10 ml disposable syringe.
   - The penile region is painted by betadine with help of betadine soaked gauzes and sponge holder. Then penis is retracted and cleaned by betadine solution.
   - Then fetal feeding tube is inserted and when it reaches bulbomembranous urethra patient is asked to take deep breathe. Further fetal feeding tube is inserted till it reaches bladder.
   - Then the medicated oil mixture is passed through fetal feeding tube by the help of syringe in one shot. Patient is asked to remain in same position till 15 minutes.
   - Then the fetal feeding tube is removed and prepuce is repositioned to avoid phimosis. This process is done in continue for 7 days.

3. **Paschat Karma (post operative)**
   - Patient is avoided to micturate till 45-60 minutes after procedure.
   - Post procedure vitals are taken and noted.
   - Patient is called for follow-up on regular interval

**Contraindication**

- Anatomical urethral stricture
- Phimosis
- Hypospadias
- Epispadias
- Rupture of urethra
- Urethritis

**OBSERVATIONS AND RESULTS**

\textit{Uttarbasti} is more effective for treatment of urethral stricture (\textit{Mutra Marga Sankocha}). After 7 days of this procedure, it was observed that patient felt 50\% decrease of symptoms and after 21 days of treatment report in RUG significant resolution of stricture was along with 90\% decrease of symptoms.
**DISCUSSION**

*Mutramarga Sankocha* is a clinical entity where in vitiation of *Vata Dosha* specifically of *Apana Vayu*, sheltered in the *Basti* and *Medhra* occurs. Hetu-Sevana results in Vikruti of *Apana Vayu* in consequence to this, *Chala, Ruksha, Khara Guna* increases resulting into Sansaktata of *Mutramarga* and hence the *Mutramarga Sankocha*. There is a synergistic action of *Kshara Taila* and action of the *Uttarabasti*. *Kshara Tail* in the Taila form has the properties of the *Lekhana* and *Ksharana*. Therefore, it might be resulting into the *Ksharana* and *Lekhana* of *Mutramarga Gata Sansaktata*. The *Ushna* and *Snigdha Guna* of *Tila Taila* pacifies the increased *Rukshitwa*, *Khatratwa* and *Chalatwa* of *Apana Vayu*, restoring its normal function and thus brings about *Stroto Shodhana* and local *Snehana* actions.

The study drug is directly instilled into the urethra, a known *Sthana* of *Vayu*, which gives direct access to the seat of *Srotovaigunya* and *Dosha Dushya Sammurchhana*. This directly acts on the Vikruta Vayu and breaks the *Samprapti*.

**REFERENCES**


Source of Support: Nil, Conflict of Interest: None declared.