



ISSN 2456-3110

Vol 5 · Issue 4

July-Aug 2020

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Charaka
Publications

Indexed

Role of *Basti* in management of pain in *Ashmari* (Renal Calculi)

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ABSTRACT

Ashmari described by our *Acharyas* is one of the commonest disease found among Indian Population. This is understood as Renal or Urinary Calculi as per Contemporary Science. Urolithiasis affects about 12% of the world population at some stage in their lifetime and in India, about 12% of them are expected to have urinary stones and out of which 50% may end up with loss of kidney functions. Pain is one of the prominent symptoms experienced by patient in *Ashmari*. Pain is not manifested without involvement of *Vata* and *Basti* is the main treatment described to manage *Vata*. Few references are available in the classics regarding the same which will be discussed in the article.

Key words: *Ashmari*, Pain, *Basti*, Renal Calculi.

INTRODUCTION

Ashmari is one among *Mutravaha Strotas Vyadhi*. The group of organs concerned with *Utapatti* and *Visarjana* of *Mutra* is *Mutravaha Strotas*, *Moola* being *Basti* and *Vankshana*.^[1] When the normal functioning of excretion of waste product through *Mutravaha Strotas* is impaired, it produces various ailments, *Ashmari* being one of them. Charaka considers it as *Marmagata Vyadhi* due to its *Marma Ashrayatva* and difficult to treat because of same reason, so considered one of the *Asta Maha Gada*.^[2] *Ashmari* is derived from root “*Ashm*” meaning stone. This is formed when *Prithvi Mahabhuta* increases and *Jala Mahabhuta* decreases in body. Due to similarity in

etymology and pathophysiology, it is compared to Renal or Urinary Calculi. Recent studies have reported that the prevalence of urolithiasis has been increasing in the past decades in both developed and developing countries. This growing trend is believed to be associated with changes in lifestyle modifications such as lack of physical activity and dietary habits and global warming.^[3] As there are many characteristics mentioned for pain in different types of *Ashmari* according to classics, a clear understanding is required for the successful treatment.

DISCUSSION

Acharyas have mentioned 4 types of *Ashmari* - *Vataja*, *Pittaja*, *Kaphaja*, *Sukraja*. Different types of *Ashmari* exhibit different types of pain as mentioned by our *Acharyas*. In *Vataja Ashmari*, severe pain is explained with the help of words like *Dantan Khadati*, *Nabhi Pidayati*, *Vishardhate*.^[4] In *Pittaja Ashmari*, burning type of pain is explained with the help of words like *Chushayte*, *Dahayte*, *Pachayte*. In *Kaphaja Ashmari*, *Bhidhyte*, *Tudhyate* explains the character of pain. Charaka Acharya has quoted that stone while passing through ureter gets obstructed, produces pain in *Basti*, *Sevani*, *Mehana* and *Vishirna Dhara* is produced.^[5] *Vedana Shanti* occurs when stone is removed from the *Marga*. This condition should be

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Submission Date: 17/07/2020 Accepted Date: 20/08/2020

Access this article online

Quick Response Code



Website: www.jaims.in

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differentiated from *Pakwashaya Gata Vata*, *Mutravruta Vata* and *Purishavruta Vata* due to similarity in *Lakshanas*. *Pakwashaya Gata Vata* has *Lakshana* as *Antrakoojana*, *Atopa*, *Anaha*, *Krucha* *Mutra Purisha*, *Antrashoola* and *Trikavedana*.^[6] *Mutravruta Vata* has *Lakshana* as *No Mutrapravrutti*, *Adhamana*. *Purishavruta Vata* has *Lakshana* as *Ruk* in *Shroni*, *Vankshana*, *Prusta* and *Parikatika* in *Swasthana* (*Pakwashaya*). The pain explained as *Tuni* can be taken into consideration for understanding to pain related to *Ashmari*. It is explained as pain which originates from *Mutrashaya* and radiate downwards towards till *Guda* and *Upastha*.^[7]

According to contemporary science, frequent urination, urinary urgency and pain due to dilation, stretching, spasm is mentioned. Characteristic of Pain based on different location is mentioned. There will be little or no pain in Calyceal stone. Severe pain in upper right quadrant of abdomen spreads to right shoulder and back is characteristic of Uretero pelvic junction which should be distinguished from acute cholecystitis. When stone is in upper part of ureter, then pain radiates anteriorly and when it is located in lower part, it radiates to ipsilateral testicle or labium. When the stone blocks ureter and crosses over right pelvic brim, there will be dull pain over navel which becomes sharp as moves to right lower abdomen whereas when stones crosses over left pelvic brim, pain is experienced in lower part of abdomen.

As mentioned by our *Acharyas* that pain cannot occur without involvement of *Vata* and *Basti* is *Ardha Chikitsa* mentioned for *Vata Dosha*. In this case, action of *Basti* can be understood in 2 parts – *Avasthika* and *Roga Shamana*. *Sushruta Acharya* has mentioned *Basti* with *Sneha* and *Lavana*, *Hingwadi Taila*, *Hingu* (*Pragada Matra*) with *Yavakshara*^[8] is helpful in *Avasthika Avastha*. For *Roga Shamanartha*, *Sushruta Acharya* have mentioned usage of *Uttara Basti* with *Ashmarighna Dravyas*. According to *Astanga Hrudaya*, 3-4 *Basti* should be given. *Sharangadhara Acharya* have mentioned *Matra* of *Basti Dravya* to be 1 *Pala*. In *Bhaishajya Ratnavali*, *Varunadya Taila* is mentioned as *Basti Dravya* for *Ashmari*.

Acharyas have mentioned about the process of *Mutra Uttapati*. After *Sara Kitta Vibhajana*, *Kitta* converts into *Purisha* and *Mutra*. The process starts in *Pakwashaya*, where complete digestion occurs and liquid portion of *Kitta* part is sent to *Basti* and expelled out as *Mutra*. *Pakwashaya* is the *Pradhana Sthana* of *Vata Dosha* and *Basti* administered stays in *Pakwashaya* to show its action. Others *Karmas* of *Basti* includes *Srotoshodhana*, *Kledahara*, *Mutra Rechaniya*, *Kapha Hara*. *Basti* administered with *Ashmarighna* or *Vatahara Dravyas* definitely acts on pain due to *Ashmari* as *Avasthika* and does *Roga Shamana*. According to *Sushruta Acharya*, *Sneha* and *Lavana* is used as *Basti Dravya*, for have capacity to so *Vata Shamana* due to its *Snigdha Guna* and *Lavana Rasa*. *Hingu* (in *Pragada Matra*) does *Shoolaprashaman*, *Shamana* of *Vata* due to its *Karma* and *Usna Virya*. When *Hingu* is mixed with *Yava Kshara*, it increases action of both *Dravyas* and *Vata Shamana* is achieved. According to *Dalhana Acharya*, this can be administered in form of *Niruha* or *Uttara Basti* or *Anuvasana Basti*. *Sushruta Acharya* while explaining the *Karma* of *Hingvadi Choorna* explains as *Basti Shula*, *Tuni*, *Mutrakruccha*. According to *Vagbhatta*, 2-3 *Asthapana Basti* should be administered for *Mala Shodhana* and thereafter 3-4 *Uttara Basti* should be administered in *Basti Rogas*.

CONCLUSION

Ashmari is one of the commonest *Vyadhi* physician finds in his OPD/Clinic. Though this is managed with oral medication in Ayurveda, treatment with *Basti* can be helpful in relieving the symptoms as well as disease more quickly. There is abundant scope of research in this area which can be helpful for practitioner in future.

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How to cite this article: Dr. Palak Rathod, Dr. Manjunath Adiga. Role of Basti in management of pain in Ashmari (Renal Calculi). *J Ayurveda Integr Med Sci* 2020;4:289-291.

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

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