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A Clinical case study on *Dhanyak Gokshur Ghrita Yavakshar Uttar basti* in the Management of *Mutraghata* w.s.r. to Benign Prostatic Hyperplasia

Case Report

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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 procedure may be done, out of which most commonly done now-a-days is TURP. However, both of these modalities cause various side effects. Through Ayurveda we can find solution for this burning problem of society. In *Ayurved Samhitas*, symptoms of Benign Prostate Hyperplasia described under *Mutraghata* disease. There are 12 types of *Mutraghata*; one of them is *Vatashthila*, which can be correlated with Benign Prostatic Hyperplasia disease. The general treatment of *Mutraghata* includes *Uttar basti*. Though *Uttar basti* is a traditionally used therapy, its efficacy with *Dhanyak Gokshur Ghrita Yavakshar* is not yet evaluated in the management of BPH. *Uttar basti* 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 *Dhanyak Gokshur Ghrita Yavakshar Uttar basti* in *Vatashthila* with special reference to Benign Prostatic Hyperplasia is evaluated.

Key Words: Mutraghata, Vatashthila, Dhanyak Gokshur Ghrita Yavakshar, Benign Prostate Hyperplasia.

Introduction

Benign Prostate Hyperplasia is an enlargement of prostate. Symptoms related to BPH are one of the most common problems in the older males. As the prostate enlarges, it causes the narrowing of urethra & subsequent partial emptying of bladder, results in many of the problems associated with BPH. In modern medicine the conservative treatment is very costly and has side effects. Prostatectomy is the primary approach to Benign Prostate Hyperplasia(1). Even if the surgery is performed, there may be a risk of complications. Considering complications, recurrence & cost of surgery, it is the need of society to evaluate an alternative option for this most predominant senile disease. There are 12 types of Mutraghata; one of them is Vatashthila. In Sushrut Samhita, Vatashthila is grouped under the title of Mutraghata, the general treatment for Mutraghata includes *Uttar basti*(2). For the above reason and treatment indication this topic is taken for case study.

Aims and Objectives

To study the effect of *Dhanyak Gokshur Ghrita Yavakshar* Uttarbasti in *Mutraghata* w.s.r. to Benign Prostatic Hyperplasia.

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Place of work

Clinical study done at Parul Ayurveda Hospital.

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Case Report

A 60 year old male came at OPD of *Shalya Tantra* at PAH, presenting complaint since one month:

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- Incomplete void
- Frequency
- Intermittency, Urgency
- Weak Stream
- Straining
- Nocturia

On examination

- General condition was moderate and afebrile. Pulse
 -72 / min
- Blood pressure -140/80 mm/Hg
- No pallor, no icterus
- Systemic examination RS AEBE
- CVS S1, S2 heard
- CNS Conscious oriented. P/A Lower Abdominal tenderness present, Liver, Spleen not palpable.

Ashtavidh Pariksha

- *Nadi* -72/min.
- Druka Samyak
- Mala Samyaka
- Sparsha Anushna
- Mutra Asamyak
- Akruti Madhyam
- Jivha Niram
- Shabda Samvak



Shailesh Jaiswal et.al., Study on Dhanyak Gokshur Ghrita Yavakshar Uttar basti in the management of Mutraghata

Present Illness

Before 1 month patient was apparently normal, later on patient got these following symptoms, Incomplete Emptying, increased frequency of urination, Intermittency, Urgency of urination and Weak Stream. He took treatment from nearby modern hospital but didn't get any relief, so he came for its management in OPD of Shalya Tantra of Parul Ayurved Hospital Vadodara.

Past history

Patient is known case of Hypertension and Type 2 Diabetes Mellitus since 5 years and he was on treatment for same

Local examination - External Urethral Meatus - normal. **PR Digital -** Prostatomegaly, 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. (*Mutraghata*).

Materials and Methods

• Dose: 30ml *Dhanyak Gokshur Ghrit* + 125 mg (1ratti) *Yavakshar*:

• Regime: Uttar basti daily for 7 days.

• Duration of study: 7 days.

• Follow up: after 1 month.

• Procedure of *Uttar basti*:-

Purvakarma

Informed & written consent was taken before *Uttar basti*. Patient was advised to sleep in supine position.

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Painting & draping of part done. *Dhanyak gokshur Ghrita* with *Yavakshar* and all instruments including 50 ml syringe, 10 no feeding tube and all materials were steam autoclaved in autoclave machine under all aseptic precautions.

Pradhankarma

In aseptic precautions, 50ml glass syringe filled with *Dhanyak* gokshur *Ghrita* 30 ml and with *Yavakshar* 125mg was taken into right hand.

Xylocaine jelly 2% was instilled in penis. Lukewarm *Dhanyak* gokshur *Ghrita* mixed with *Yavakshar* 30ml was inserted slowly through by syringe in feeding tube inserted in mutramarg. After that, penis was held firmly atleast for 5 minutes to avoid reverse flow of *Dhanyak* gokshur *Ghrita* with *Yavakshar*:

Paschatkarma

Patient was kept in same supine position for 15 minutes.

Patient was instructed not to void urine for next 1 hour.

Criteria for Assessment of Therapy Subjective Criteria

Table 1 - International Prostate Symptom Score (I-PSS)(4)

In the past Month	Not at all	Less than1 in 5 times	Less than half the times	About half the time	More than half the time	Almost always
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
Score: 1-7 : Mild; 8-19 : Moderate; 20-35 : Severe		-	-		-	

Objective Criteria

USG with pelvis before treatment and after treatment was observed for

- 1. Weight of prostate.
- 2. Post voidal residual volume.



International Journal of Ayurvedic Medicine, Vol 12 (2), 427-430

Results

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

Symptoms		Score				
		1st day	7th day	15thday	30th 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	46 gm
2	Post void urine	150ml	Nil

Discussion

Yavakshar reduces the weight of prostate due to its Ushna, Tikshna Guna and causing Lekhana karma of Mamsa Vaha Srotas, so that the pressure over the prostate urethra is reduce, which helps for emptying of bladder. As a result of that post voidal residual urine volume decreases significantly and therefore it reduces the intermittency, frequency, urgency, weak stream, straining and Nocturia .Dhnayak Gokshur Ghrita Uttar basti also reduces the weight of prostate due to act on the muscles of bladder and the sphincter, giving strength to them, so that patient can hold the urine and the urgency is markedly reduced. Dhanyak and Gokshur both have Linoleic Acid and Oleic Acid as a chemical component. They are inhibitors of both 5 Alpha reductase and Alpha blockers activity. This inhibition controls the conversion of testosterone to Dihydrotestosterone (DHT). DHT ultimately controls the further growth of prostate gland and relief in the symptoms. Dhanyaka Gokshur Ghrita (DGG) with Yavakshara for Uttra Basti. Ayurvedic pharmacodynamic properties of formulations are mentioned below based on collective pharmacodynamic properties of their ingredients.

Pharmacodynamic Properties of *Dhanyaka Gokshur Ghrita*

- Rasa : Kashaya, Madhura - Guna : Snigdha, Sheeta - Veerya : Anooshna Sheeta

- Vipaka : Katu

- Karma : Lekhana, Sophahara, Mootrala, Vataanuloma, Basti Shodhana, Shukrashodhana

 Doshaghnata: Vata-Kapha Hara
 Rogaghnata: Mutraghata, Prameha, Mootrakrichha, Ashmaree, Shukradosha

Its effect on *Mutraghata* i.e. BPH had discussed under the mode of drug action in oral use. *Dhanyak*a

Gokshur Ghrita is a Snehapaka Kalpana and was used in the form of *Uttar basti* to achieve additional effect via Urethral route with its direct effect to the Granthi. Basti Dravyas may be absorbed by one or more mechanisms of diffusion, filtration and osmosis depending upon nature of ingredients. This theory is the same as the theory propounded by Sushruta¹⁴, where he has defined that how Basti produces systematic effect in entire body. Sushruta says that the Veerya of Basti reaches to the whole body through the Srotasa (channels) as the active principles in the water when poured in the root of a tree reaches to the whole plant.

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Conclusion

From above case study it can be concluded that the Dhanyak Gokshur Ghrita with Yavakshar Uttar basti is effective in reducing International prostate symptom score, weight of prostate and post residual volume in Mutraghata (Benign Prostate Hyperplasia). In Ayurveda it is mentioned that *Uttar basti* is choice of treatment in controlling Vata Dosha in all types of So it can be said that the function of Mutraghata. detrusor muscle of bladder might be improved by controlling Apana Vayu with the help of *Uttar basti*. Dhanvaka (Coriandrum Sativum) has Choriandrol which is diuretic and Gokshur has Diosgenin which have anti proliferative activity against prostate cancer cells and relieve symptoms of BPH i.e. nocturia, increased frequency and prostate enlargement. Hence it is scientifically proven that these drugs played important role in symptomatic relief in cases of BPH. So it can be concluded that the Uttra Basti of DG Ghrita is effective in treatment of BPH definitely.

The cardinal symptoms of prostate like increased frequency, Nocturia, weak stream, incomplete voiding were relieved completely in this patient. The average Urine Flow Rate was increased. The size of Prostate and Post Voidal Residual Urine volume were decreased. So it can be said that the trial drug & procedure have some effect for treat BPH.

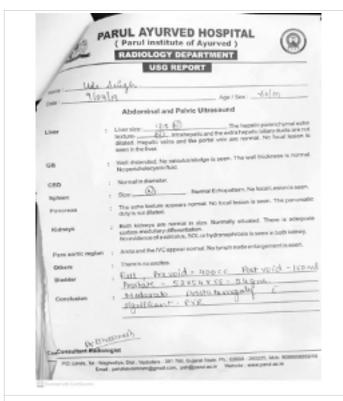
Conflict of interest: None

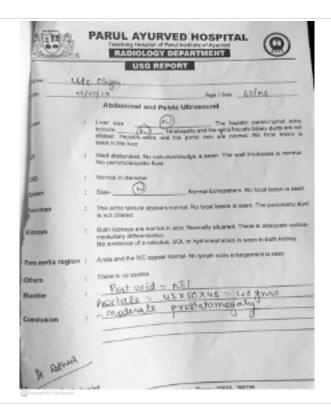
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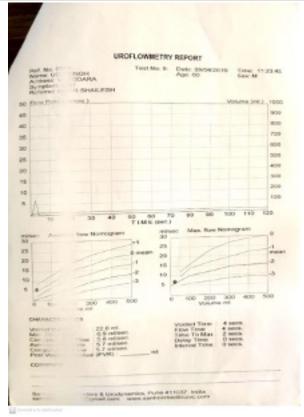


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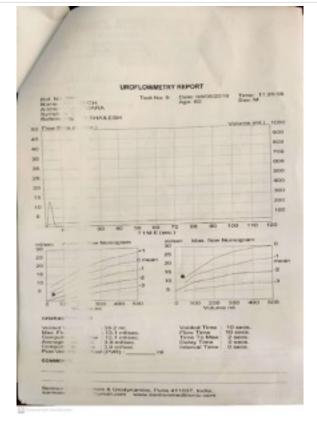


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