

## Review Article

# Role of Ayurveda in the management of Vatasthila W. S. R. to benign prostatic hyperplasia: a review study

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## ABSTRACT

In Ayurvedic texts vatasthila [i.e.; benign prostatic hyperplasia (BPH)] is a one of major urinary disorder described in mutraghata (i.e.; decreased urine flow due to obstruction in urinary passage). It is a very major common problem in geriatric age group in males (usually in 60-70 years of age). Histo-pathologically the prevalence of BPH is age dependent, initiate usually after 40 years of age. More than 50% of men in their 60s and upto 90% of men in their 70s and 80s have some symptoms of BPH. In contemporary science conservative and surgical treatment are given to the patients suffering with BPH. The symptoms of vatasthila have been described in mutraghata resembles to the benign prostatic hyperplasia in modern science. The aim of the study is to focus on various studies done on vatasthila (i.e.; BPH) between 2016-2021. The various studies have been done on efficacy of Kanchnar guggulu, Trikantakadi guggulu, Veertarnadi gana kshaya, Varun bark decoction (Kwath), Ushiradi taila as Uttarbasti and Dhanyak gokshur ghrita yavkshar as Uttarbasti in the management of Vatasthila (BPH). These studies may be very beneficial to improve the tonicity of urinary bladder and to reduce the size of the prostate.

**Keywords:** Vatasthilla, Benign prostatic hyperplasia, Ayurvedic drugs, Uttarbasti

## INTRODUCTION

Sushruta the father of Indian surgery mentioned the urinary disorders in the Mutraghata (suppression or obstruction of urinary flow).<sup>1</sup> The term mutraghata is made up of two words i.e.; mutra (i.e.; urine) and aghata means obstruction of urinary passage. Vatasthila has resembles similar symptoms to benign prostatic hyperplasia (BPH).<sup>2</sup> BPH is a non-malignant enlargement of the prostate caused by cellular hyperplasia.<sup>3</sup> BPH is an ailment commonly encountered in old aged males.<sup>4</sup> Some epidemiological studies have shown that, to a large extent lifestyle factors associated with metabolism including obesity, blood glucose, exercise, and diet also contribute substantially to the development of these conditions.<sup>5</sup> The prevalence of histopathologic BPH is age-dependent, initially starts developing after 40 years of age and more than 50% of men in their 60 years and upto 90% of men in their 70-80 years of age have several symptoms of BPH.<sup>6</sup>

It diminish patient's quality of life.<sup>7</sup> It may also be associated with certain male urologic cancers such as prostate cancer and bladder cancer.<sup>8,9</sup> Some studies suggested that hormones, inflammation, metabolic syndrome are likely to play a role in BPH and prostate cancer.<sup>10</sup> It is the most common cancer worldwide and the number one cause of death for men in the developed countries.<sup>11</sup>

International surveys study have revealed that a high rate of prevalence of moderate to severe obstructive symptoms in men over the age of fifty years.<sup>12</sup> BPH is a proliferative process that involves both stromal and epithelial elements of the prostate gland. It includes obstructive and irritative urinary symptoms like urinary retention, dribbling of urine, burning micturition.<sup>13</sup> The main symptoms of BPH are increased nocturnal frequency (5-10 times during the night) followed by day and night due to ineffective emptying of the bladder, urgency (urgent desire to pass

urine), hesitancy (difficulty in initiating the urinary stream), pain due to cystitis in suprapubic and loin region. The standard line of treatment of BPH is surgical intervention. It is very difficult to treat them with surgery in old age and possibilities of complication are always present. Hence preferred line of treatment is conservative in these types of patients or those are not suitable for surgical intervention. Sushruta has mentioned various etiological factors like suppression of natural urges (i.e.; vegavarodha), excessive exercise (i.e.; ativyayam), excessive sexual intercourse (i.e.; ativyavyav), too much intake of astringent, bitter, and pungent foods (i.e.; katu and teekshna rasa ahara), excess use of wine and fleshy meat leads to vatstheela (i.e.; BPH).<sup>14</sup> Above mentioned causative factors leads to vitiation of vata dosha that are mainly involved in the pathogenesis (samprapti) of benign prostatic hyperplasia.<sup>15</sup> Presence of vitiated vata along with kapha and pittaja undergoes process of cellular proliferation. The action of vitiated Vata over fibrous part, results into hardening of tissues.

According to Ayurveda literature, mutraghata should be treated with ausadha chikitsa, vastikarma and lifestyle modification. Sushruta has described general guideline for management of all type of mutraghata (i.e.; obstructive uropathy) with use of kashaya, kalka, avaleha, kshar, madya, aasava, snehana, swedana, basti and uttarbasti.<sup>16</sup> Sushruta has mentioned the uttarbasti in urological disorders, it is the best treatment modality for vitiated vata dosha and various decoction kalka ghee, avaleha, milk, kshar, alcohol, upnah, sweda, uttarbasti.<sup>17</sup> Sneha virechana should be used in all types of urinary disorders.

## METHODS

Literary research was done regarding the geriatric healthcare in India and other countries. Emphasis has been given on importance of AYUSH system healthcare in geriatric care in India. Various researches, reports, findings, articles, etc. are studied. Collection of data was done from ayurvedic classical texts/manuscripts, reputed journals, modern medical texts related to treatment on vatashthila (i.e.; BPH). Various studies are found on veertarvadi gana kshaya, varun kwath, kanchnar guggulu and ushiradya tail uttarbasti shown beneficial effects in the management of vatashthila (i.e.; BPH).

## RESULTS

Gupta et al in their study 'A clinical study to evaluate the efficacy of Trikantaktadi guggulu in the management of Vatashthila W. S. R. to benign prostatic hyperplasia, they focused on the effective result of this herbal drug on symptoms of vatashthila like hesitancy and decrease in post residual volume.<sup>18,19</sup> The therapy is effective without any adverse effects. Meena et al in their study 'A clinical study of Veertarvadi Gana Kashaya and Basti therapy in the management of Vatashthila W. S. R. to benign prostatic hyperplasia'.<sup>20</sup> In their study they concluded that oral use

of veertarvadi gana kashaya and matra basti of mulaka taila is clinically safe and effective therapy. It may be effective in imbalanced level of sex hormone and may improve bladder muscle tone. Shaikh et al in their study 'Management of vatashthila by Varun bark decoction (kwath): a case report', in this study they concluded that Varun bark decoction is very effective to improve the symptoms of BPH. Bind A et al in their study 'A case study of Ushiradi tail Uttarbasti on Vatashtilla W. S. R. to BPH'.<sup>21</sup> This study is very effective to give the symptomatic relief and need to be further research on more number of cases for its validation.

Javed et al in their study 'A clinical study to evaluate the effect of Kanchnar guggulu and Veertarvadi gana kashaya in the management of BPH', in their study excellent action of veertarvadi kashaya and kanchnar guggulu due both on hormonal and physiological level due to their anti-androgenic and anti-inflammatory effect.<sup>22</sup> The effect of drug is also on prostatic size. Jaiswal et al in their study a clinical study on Dhanyak gokshur ghrita and Yavakshar uttarbasti in the management of mutraghata W. S. R. to BPH.<sup>23</sup> In their study scientifically they have proven the symptomatic relief in BPH. The prostate size and residual volume was decreased. The trial drug and procedure are effective for treating BPH.

## DISCUSSION

BPH is a very burning health problem in geriatric population. The symptoms which affect quality of life of patients are dribbling/scanty micturition, urgency of micturition, hesitancy, nocturnal micturition etc. which are similar to symptoms mentioned in mutraghata like vatakundalika, mutrasanga, vatashthilla, and mutrasteela.<sup>24</sup> In Ayurvedic literature the Bladder outlet obstruction (BOO) mentioned under the heading of Mutraghata (obstructive uropathy). Dosha is the main causative factor in the genesis of benign prostatic hyperplasia. To pacify the vitiated vata, vatanulomana drugs and Basti karma (uttarbasti) is the best modality. Vata pacifying Basti (i.e.; uttarbasti) is effective in reducing the symptoms of BPH with decoction of Dasmool, Gokshuradi and Varunadi gana drugs etc, vata and kapha pacifying ayurvedic medicines such as Yavakshara, moolak kshara etc.<sup>26</sup> can be prescribed in BPH. Mootra-virechaniya (i.e.; diuretics) and mutra-visodhaniya (i.e.; antiseptics) are also beneficial in BPH like Gokshuradi guggulu, Punarnavdi guggulu etc.<sup>27-30</sup>

## CONCLUSION

BPH affects the quality of life and physiology of urination. Prolonged BPH may result in bladder calculi, haematuria, retention of urine etc. may results into development of hydronephrosis and lastly renal insufficiency. Prostatectomy is a choice of treatment in modern science for the condition. The results of various research studies reviewed on mutraghata especially vatashtheela (i.e.;

BPH) and revealed that vatastheela (i.e.; BPH) can be treated very effectively with Ayurvedic drugs and uttarbasti conservatively. Ayurvedic drugs like Kanchnar gugglu, trikantakadi vati and ushiradi uttarbasti, Varun bark decoction (kwath), veertarvadi gana kashaya, dhanyak gokshur yavakshar uttarbasti shown better results in the improvement of symptoms of BPH to reduce the size of prostate and post residual volume. Other studies also have revealed beneficial effects to improve the symptoms of vatastheela like scanty micturition, hesitancy, nocturia and pain. So Ayurvedic formulations have a great effect in the treatment of BPH without any adverse effect.

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