

## A case study of Mutravirechaneeya Mahakashaya along with Erand Taila in the management of Mutrashmari w.s.r. to urolithiasis

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According to Susruta Samhita, Ashmari is classified under Mutravaha Srotovikara and Ashtamahagada.[1] Urinary stone disease affects 3 to 5% of the general population and is becoming more common worldwide mostly as a result of metabolic disturbances and changes in the global climate. According to Acharya Charaka, oral drugs such as Mutravirechaneeya Mahakashaya which have qualities like Chedana, Lekhana, Bhedana, and Mutrala that aid in the dissolution of urinary stones, should be tried before undertaking surgical methods. On April 02, 2024, a 50-year-old female visited the Outpatient department (OPD) at Shri Khudadad Dungaji Government Ayurved Hospital, Raipur, C.G. She complained of burning during his micturition, pain in his right flank that spread to his groin, and orange-colored urine for two days. Urolithiasis was the diagnosis, and surgery was recommended. Mutravirechaneeya Mahakashaya[2] and Erand Taila[3] was given continuously for 90 days in three regimens. Clinical assessment criteria were used to evaluate the effects of treatments on 15 days. After treatment for 90 days, excellent level also reducing the symptoms and stone size. During the follow-up period, symptoms and stone size were changed. In conclusion, this Mutrashmari patient's quality of life was improved by the treatment of Mutravirechaneeya Mahakashaya and Erand Taila.

**Keywords:** Mutravirechneeya Mahakasaya, Erand Taila

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Aklesh, Post Graduate Scholar, Department of Kayachikitsa, Shri NPA Govt Ayurveda College, Raipur, Chattisgarh, India. Email: <a href="mailto:upadhyaybyomesh@gmail.com">upadhyaybyomesh@gmail.com</a>	Aklesh, Aruna O, Rashmi D, Aradhana K, A case study of Mutravirechaneeya Mahakashaya along with Erand Taila in the management of Mutrashmari w.s.r. to urolithiasis. J Ayu Int Med Sci. 2025;10(3):435-439. Available From <a href="https://jaims.in/jaims/article/view/4186/">https://jaims.in/jaims/article/view/4186/</a>	

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## Introduction

*Mutrashmari*, or urolithiasis, is a condition where stones form in the urinary system. The word *Mutrashmari* comes from the *Sanskrit* words *mutra*, which means urine, and *Ashmari*, which means a structure resembling stone. In *Ayurveda*, *Mutrashmari* is caused by an imbalance of *Ahara* (diet) and *Vihara* (living habits), which leads to aggravated *Kapha Dosha* in the urinary system. Other factors that can contribute to *Mutrashmari* include sleeplessness, heavy consumption of fast food, and preserved foods. Symptoms of *Mutrashmari* include intermittent pain and burning micturition. The lifetime prevalence of symptomatic urolithiasis, or urinary stones, is about 10% in men and 5% in women. The prevalence of kidney stones is similar worldwide, at around 12%. In India. Urolithiasis is characterized by the formation of solid masses in the urinary system. It's a chronic and recurrent condition that has a significant impact on healthcare. Reducing discomfort while trying to improve and minimizing impairments in activities of daily living are goals of treatment. Analgesics and nonsteroidal anti-inflammatory medications (NSAIDs) are part of conventional pharmacological care of urolithiasis, yet their use does not effectively relieve pain. It is a persistent illness.

## Case Report

A 50-year-old female patient presented to the outpatient department of Shri Khudad Dungaji Government Ayurveda College & Hospital at Raipur with a history of pain in the Left Iliac region and radiating pain loin to groin region since 15 days, sometimes burning micturition since 1 week, sleep disturbed and complaint of constipation since 1 week.

OPD: 08149

Start of Medication: 02/04/2024

Name: xxxx

Age: 50

Sex: Female

Address: Gudhyari, Raipur, C.G.

Religion: Hindu

Education: Middle school

Marital Status: Married

Socio-economic Status: Middle Class

Occupation: Housewife

Habitation: Semi Urban

### Chief complaints with duration

**Table 1**

Complaints	Time duration
Pain left Iliac region	15 days
Radiating pain some time loin to groin	15 Days
Sometime burning micturition	1 week
Sometime constipation	1 weak
Disturbed sleep	1 week

### History of present illness

According to patient she was asymptomatic for one month, after that on date of 10th March 2024 suddenly she had pain in left Iliac region radiating left loin to groin region. Along with sometimes burning micturition. She took some painkillers and antacids and got some temporary relief one week she also suffered from constipation. for someone's advice, she came to our hospital for treatment.

**Table 2**

Vedana (Renal pain)	Present	Since 15 days
Sadah Mutrata (Burning micturition)	Present	Since 1 weak
Mutrakricha (Dysuria)	Present	Since 1 weak

### General Examination

**Table 3**

B.P	120/70 mmhg	P/R	74/min
Height	158 cm	Weight	58 kg

### Ashtavidha Pariksha

*Nadi* (Pulse) - *Pitta-Kaphaj*

*Mutra* (Urine) - Dark yellowish

*Mala* (Stool) - *Vibandha* Some time

*Jivha* (Tounge) - *Shwetabha* Mild

*Shabda*(voice) - *Prakrit*

*Sparsh* (Skin) - *Sheet*

*Drika* (Eye) - *Samanya*

*Akriti* (General Appearance) - *Madhyam*

### Dashavidha Pariksha

*Prakriti* - *PK*,

*Vikriti* - *Dosha* - *VPK*, *Dushya* - *Rasa,Mutra*

*Sara* - *Madhyam*

*Samhanana* - *Madhyama*

*Pramana* - *Madhyama*

*Satmya* - *Madhyama*

*Satva* - *Pravara*

*Ahara Shakti* - *Madhyama*

*Vyayam Shakti* - *Avara*

*Vaya* - *Madhyam*

**Family History: No H/O - DM/HTN/Urolithiasis**

### Assessment Criteria[7]

G0 - No Symptoms.

G1 - Mild Symptoms.

G2 - Moderate Symptoms sufficient to cause Distress/Difficulty in performing routine work.

G3 - Symptoms very severe/patient unable to perform routine work.

### Pain:

Symptom	Grading Score
No. Pain	0
Occasional pain did not required treatment	1
Occasional pain but, required treatment	2
Constant dull ache pain, required treatment	3
Severe constant pain, but did not show relief even after treatment	4

### Burning micturition:

Symptom	Grading Score
No Occasional burning micturition	0
Occasional burning micturition	1
Occasional burning micturition, required treatment	2
Constant burning micturition required treatment	3
Constant severe burning micturition but did not show relief even after treatment	4

### Dysuria:

Symptom	Grading Score
No Dysuria	0
Occasional dysuria	1
Occasional dysuria which requires treatment	2
Constant dysuria which requires treatment	3
Constant severe dysuria but did not show relief even after treatment	4

### No. of RBC's Present in urine:

Symptoms	Grading
No RBC/Hpf	0
0-5 RBC/Hpf	1
6-10 RBC/Hpf	2
11-15 RBC/Hpf	3
>16 RBC/Hpf	4

### No. of Pus Cells Present in urine:

No. of Pus Cells	Grading
No pus cells/Hpf	0
0-5 pus cells/Hpf	1
6-10 pus cells/Hpf	2
11-15 pus cells/Hpf	3
>16 pus cells/Hpf	4

### Total number of calculus in both side kidney:

Total number of calculus	Grading
No calculus	0
1-2 calculus	1
3-4 calculus	2
5-6 calculus	3
>6 calculus	4

### Size of calculus:

Size	Grading
No calculus	0
0-3mm	1
4-5mm	2
6-8mm	3
10mm or <10mm	4

### Therapeutic Procedure

**1. Oral medication:** *Mutravirechaneeya Mahakashaya* was given 50 ml before meal two times a day.

**2. Erand Taila** - 10 ml

Duration of Treatment: 90 days.

Ingredient of: *Mutravirechaneeya Mahakashaya*[8]

The presented compilation work helps towards proving its biological activities and pharmacology of its extracts which will contribute towards further exploration of this group of great clinical potential. However, further studies should be carried out to identify the mechanism of the pharmacological actions of these drugs. Ingredients are :-

Vrikshadani	Gokshura	Punarnava	Apamarg
Pasanbhed	Darbha	Kush	Kash
Gundra	Etkatmoola		

### Clinical Study

The patient was first administrated *Sanjeevani Vati* two tablets BD with lukewarm water and *Eranda Taila* 10 ml at night during sleep time with lukewarm water.

After seven days patient feels mild improvement in constipation and sleep disturbance.

First sitting (day 1-15):

A volume of 40 ml of *Mutravirechaneeya Amahakashaya* empty stomach morning and evening for 15 days.

Day 16-90 days - again same management.

## Observations and Results

Symptoms	Before	After
Pain	G3	G0
Burning micturition	G2	G0
Dysuria	G2	G0
Pus cells	1-2 hpf	0-1 hpf
Size of calculus	6.2 mm	00mm
Number of calculus	01	00
Weight	58kg	54kg
BMI	23.23 kg/m <sup>2</sup>	21.63 kg/m <sup>2</sup>
BMR	1256.90 K/Cal	1219.91 K/Cal
USG	Left kidney	No stone
Whole abdomen and pelvis	A calculus of 6.2 mm at lower calyx	BL kidney

## Discussion

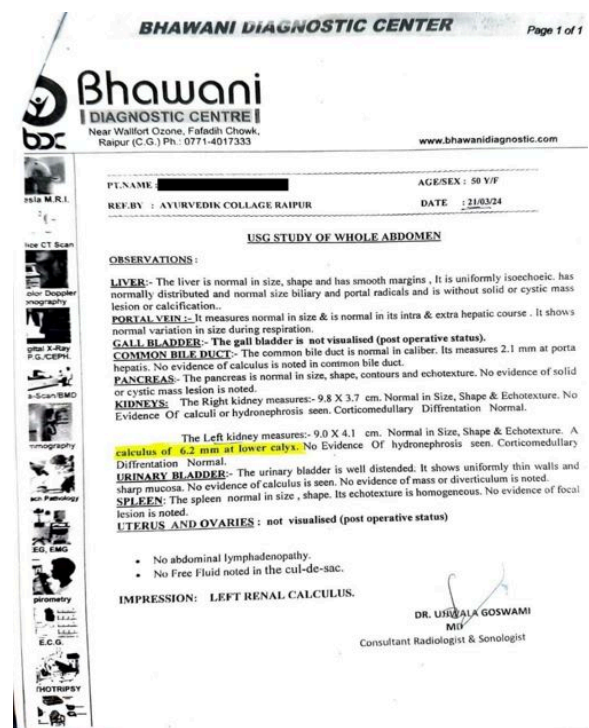
Nowadays, the prevalence of renal disorders is rising quickly worldwide, and the current medical treatment options have unfavourable effects on people's health. In the ancient *Ayurvedic* medical science, plants of *Mutravirechaniya Mahakashaya*, which are referred to as the 35th *Mahakashaya* in the 4th chapter of *Charaka Samhita*, *Purvardha* are primarily known for their ability to induce urine or increase urinary flow in addition to their ability to defend the urinary system.

In traditional Indian medicine, formulations with these plants as the primary ingredients have been frequently prescribed for cases of fluid accumulation in the lower extremities, renal calculi, abdominal fluid collection, and other cases of fluid overload. Research supports the ability to increase urine flow and the active ingredient's ability to destroy urinary calculi. However, according to the description in *Ayurvedic* text, the signs, symptoms, and signs with a scoring system were noted to evaluate the severity. This assessment was done twice (i.e., in pre and post-treatment phases). The severity of symptoms and sign was categorized as follows: Mild, moderate, and severe. A statistically significant relief was observed in cardinal symptoms of *Mutrashmari* (urolithiasis) in the patient. This proves that the medication is effective in reducing the cardinal symptoms of *Mutrashmari*. The *Mutravirechaneey Mahakashaya* have *Tridosha Shamak Guna* pacifying due to their *Ushna* (digestive and metabolism stimulating) and *Tikshna* (penetrating) properties.

It would have acted on vitiated *Vata* and helped to relieve in pain. Burning sensation and calculus are produced due to presence of *Dushita Pitta* and *Kapha Dosha*. Drugs have *Deepana* (enhance digestive power) and *Srotoshodhaka* (remove obstruction of microchannels) properties, which reduces *Kupita Pitta* and *Kapha*.

## Conclusion

*Mutravirechaneeya Mahakashaya* is an unexplored drug in management of *Ashmari* having *Ashmarighna*, *Anulomana* and *Mutrala* and *Dahashamak* property. Even though it is difficult to treat disease *Ashmari*, *Mutravirechaneeya Mahakashaya* along with *Eranda Taila* shown significant results in Ureteric stone and be simple to use and cost-effective management. Present article has tried to give an account of updated information on various pharmacological properties of classical diuretic group as much as possible. However, some drugs in *Mutravirechaniya Mahakashaya* are controversial like *Pashanbheda* as their scientific names are lacking in original texts. While some plants like *Gundra* and *Itkatmula* are rarely seen. They searched for available scientific studies with their Sanskrit names as well as botanical names derived from various concerned books. Classical books. mentioned in reference section are followed for such purposes.



**Before Treatment**

**SRS DIAGNOSTICS**  
(A Unit of Shri Ram Sewa Diagnostics)  
Address : Usha Kiran Pansar, Beside RBI, Mahadev Ghat Road, Sunder Nagar, Harpur (G.G.)  
Ph. : 0771 - 4912700, 9098480956, 8518883175

NAME: MRS. [REDACTED]	AGE/SEX: 50 YRS / F
REF BY: AHMS HOSPITAL	DATE: 07-08-2024

**ULTRA SOUND SCAN - WHOLE ABDOMEN**

**Liver:** Normal in size 13.0 cm, shape and normal echotexture. No focal / diffuse lesions. IHBR/ CBD - not dilated. Main portal vein - Normal. Hepatic and portal veins branching appear normal.

**Gall bladder:** Post cholecystectomy status.

**Pancreas:** Appears normal in size and shape with normal parenchymal echotexture. Pancreatic duct is not dilated.

**Spleen:** Normal in size, shape and position with normal echotexture.

**Aorta & Para Aortic region:** Normal.

**Right Kidney:** Normal in size, shape and parenchymal echotexture. Corticomedullary differentiation is normal. No pelvicalyceal system dilatation. **No Calculi**

**Left Kidney:** Normal in size, shape and parenchymal echotexture. Corticomedullary differentiation is normal. No pelvicalyceal system dilatation. **No Calculi**

**Urinary bladder:** Normal in distension, caliber and outline. No evidence of calculi or mass lesion.

**Uterus:** Post hysterectomy status.

Visualized bowel loops appear normal. No definite evidence of wall thickening or mass lesions.

**IMPRESSION:**  
❖ No demonstrable abnormality is detected.

Please correlate clinically.

**DR. RUCHI AGRAWAL**  
CONSULTANT RADIOLOGIST

Prepared by: Prakash Choudhary.

Disclaimer: Sonography is a professional service and a diagnosis. The accuracy of radiological diagnosis is based on the interpretation of various shades and is neither complete nor absolute. All medical machines/instruments have their limitations. Further pathological and radiological investigations with clinical correlation are required to enable the clinician to reach the final diagnosis. In case of any discrepancy/alteration, please consult the doctor for further review. Not for medico-legal purposes. Patient identity cannot be verified.

### After Treatment

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