



# INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

## An Open Labeled Single Case Study To Evaluate The Effect Of Virechanottara Uttarabasti With Murchita Tila Taila In The Management Of Vataja Mutrakruchra W S R To Urethral Stricture In Male.

1.Dr.Purushottam Dasar

2.Dr.Uday Kumar VK

3.Dr.Rajesh Sugur

1.Second year PG scholar

2.Final year PG scholar

3.Prof & HOD

1.Taranath Govt. Ayurveda medical college and hospital,Ballari,India.

### Abstract:

The male urethra is a tubular structure extending from the bladder neck to the external urinary meatus at the tip of the glans penis. Urethral strictures are a common yet often overlooked urological condition characterized by the narrowing of the urethra, which can lead to various urinary symptoms and complications. This condition can be caused by multiple etiologies and varies in severity. Urethral strictures can significantly impact patients' quality of life. The etiology of urethral strictures is classified into 4 major groups—idiopathic, iatrogenic, inflammatory, and traumatic, with idiopathic and iatrogenic being the most common, each accounting for 33%. Traumatic causes represent 19%, whereas inflammatory causes account for 15%. Based on features it can be compared to vataja mutrakruchra. **Materials and Method** A male patient of 31 yrs old complaining of painful micturition and poor stream of urine diagnosed as vataja mutrakruchra (urethral stricture) based on features like kruchra mutra and urethrography. Vatahara basti with murchita Tila taila is given in the form of uttarabasti for 3 sittings with a gap of 1 month shamanoushadhi are given for 3 months and follow up after one month. **Observation & Result**-Betterment in Subjective parameter like reduced pain, improved stream, complete evacuation are noted. **Discussion & Conclusion**-Treatment mentioned for vataja mutrakruchra like basti snehana brihmana effects are achieved by basti which reduces vata, brings mrudutwa

and gives relief, so shodhanottara uttarabasti is a better choice in place of self catheterization or complicated surgeries.

**Key words-** Mutrakruchra ,urethral stricture, virechana, uttarabasti, murchita tila taila

### Introduction:

The common causes of Urethral stricture are inflammatory or traumatic or iatrogenic or idiopathic. Clinical features includes hesitancy of micturition, straining to void, and a poor urinary stream. UTI is most commonest complication associated with urthral stricture.treatment like simple catherization or urethrotomy,urethroplasty surgery with some complications are options to manage this condition. Vataja mutrakruchra is a type of mutrakruchra manifest due to Nidana like vyayama teekshnoushadha,abhighata etc,with a features teevra arti,medra vedana,swalpa mutra and muhurmutra. It can be treated with abhyanga sneha nirooha uttarabasti etc .Medicine which are vatahara and rogashamaka are harmful to reverse the pathology and decrease the symptoms.

### Case presentation:

A 31 years male patient presented with chief complaints of painful and poor stream of urine, associated with increased frequency of micturition during night hours since 2 years.

Patient had pain which was sudden in Onset and non progressive with poor stream, took treatment and underwent urethrography and urethroplasty for urethral stricture on diagnosis. Patient felt better for three four months and later again he suffered from same complaints for which he approached Taranath Government Ayurvedic hospital for treatment.

### On examination

Prakruti - Vatapitta

Dosha- vata pradhana tridosha

Dushya- Rasa,rakta mutra

Ama- sama

Agni- dhatavagi mandya

Srotas - rasa rakta mutravaha

Srotoduahti- sanga

Rogamarga -madyama

Udbhavastha- mutramarga

Vyaktasthana- basti,medra

Sadyasadyata- kastasadya

No external genital deformity, skin lesion or scar observed

No contra indication for uttarabasti.

### Nidana panchaka:

Nidana-vatakara ahara vishara, abhighta<sup>1</sup> while excercise and surgery in the past .

Samprapti -Abhighta to guhya bhaga leading to vataprakopa and also rakta which further vitiates pitta and later kapha dosha ,then sthana samshraya or sanga of dosha in mutra vaha srotas causing narrow lumen of mutra nadi with manifestation of vataja mutrakrichra lakshana.

Poorvaroopam-mutra kruchrata,

Roopa -Kruchra mutra ,manda dhara,muhurmuhur pravritti<sup>2</sup>

Upashanupashaya- no such aggravating or relieving factors noted.

### Investigations

Urethrography: Shows Narrowing at bulbomembranous junction of urethra-Stricture

### Diagnosis

Based on features ,examination and investigation findings, the case is diagnosed as vataja mutrakruchra (urethral stricture<sup>3</sup>)

### Chikitsa

After taking consent, Patient is given virechanottara<sup>4</sup> uttarabasti<sup>5</sup> for 3 sittings followed by shamanoushadhi

1) Virechana:

Deepana with hingvastaka choorna and avipattikara choorna 1/4th spoon tid for 3 days

Snehapana with murchita Tila taila in increasing dose for 6 days till samyak lakshana

Sarvanga abhyanga with murchita Tila taila and bashpasweda for three days and

Virechana karma with trivrit leha 70gm given

2)After 5 days samsarjana for 12 Vegas uttarabasti is given under aseptic condition with murchita Tila taila increasing dose from 30ml for 3 days with erandamoola nirooha as poorvakarma

Repeated after one month of shamanoushadhi twice.

3)Shamanoushadhi-Arogyavardhini vati<sup>6</sup> TID, Chandraprabha vati<sup>7</sup> TID, Gokshuradi guggulu<sup>8</sup> BID for one month between uttarabasti.

## Results

After treatment changes and betterment noted symptomatically with subjectively as mutrakruhrata,mandadhara and frequency with no significant objective/ radiological changes noted as below

Features	Before treatment	After treatment
Mutrakruhrata	+	-
Mandadhara	+	-
Muhurmuhu pravritti	++	+

## Discussion

The mode of action of chikitsa for the particular case is well understood by Samprapti and its vighathana as shown in the below

Samprapti	Samprapti vighathana
Nidana sevana like ati vyayama ,abhighata,vatakara ahara vihara	Nidana parivarjana
Leading to sroto dushti by prakupita vata,pitta rakta later kapha due to sanga and vimargagamana	Sroto shodhana by virechana
Mutra marga avarodha	Apana chikitsa by uttarabasti
Manifestation of Mutrakruhradi lakshana	Shamana chikitsa
Vataja mutrakruhra	Roga shamana

In classical texts, treatment of vataja mutrakruhra mentioned are abhyanga, snehana, niroohabasti, sneha basti,upanaha,uttarabasti etc procedure along with vatahara oushadhi and ahara<sup>9</sup>.

Murchita Tila taila which is best vatahara with no kapha vardhana<sup>10</sup> in the form of snehana ,uttarabasti, nirooha helps in managing vatadosha and helps in treatment of vataja mutrakruhra.Virechanottara basti will help in managing the pittadi dosha prakopa due abhighata and srotoshodhana for drug acceptability later.

## Conclusion:

The procedure nirooha ,uttarabasti are so simple in administration with minimal invasive techniques and can be adopted with sterile or aseptic condition.

It can become a better choice than self catheterization which causes UTI, which one of cause for stricture.It can replace complicated surgeries if considered early.

## References:

1.Agnivesha charakasamhita, revised by charaka and dridhabala with the ayurveda dipika commentary of chakrapanidatta edited by vaidya jadavaji trikamji acharya,chikitsa sthana,26<sup>th</sup> chapter verse 32 pg no599,choukambha orientalia.

2Agnivesha charakasamhita, revised by charaka and dridhabala with the ayurveda dipika commentary of chakrapanidatta edited by vaidya jadavaji trikamji acharya,chikitsa sthana,26<sup>th</sup> chapter verse 34 pg no599,choukambha orientalia

3)Norman s,Williams,P.Roman o Connell Andrew w mc Caskie,Bailey and Love's short practice of surgery 27<sup>th</sup> edition volume 2 pg no1482.

4)Agnivesha charakasamhita, revised by charaka and dridhabala with the ayurveda dipika commentary of chakrapanidatta edited by vaidya jadavaji trikamji acharya,siddhisthana,1st chapter verse 17 pg no680,choukambha orientalia

5).Agnivesha charakasamhita, revised by charaka and dridhabala with the ayurveda dipika commentary of chakrapanidatta edited by vaidya jadavaji trikamji acharya,chikitsa sthana,26<sup>th</sup> chapter verse 48 pg no600,choukambha orientalia

6)Dr.Ashok D satput Rasendrasarasangraha,choukambha krishnadas academy varanasi

7)Sharangadharacharya of sharangadhara samhita,translated by Dr.P.Himasagara Chandra murthy madyamakhanda 7<sup>th</sup> chapter verse no40-49 pg no183,chowkhamba Sanskrit series office varanasi.

8)Sharangadharacharya of sharangadhara samhita,translated by Dr.P.Himasagara Chandra murthy madyamakhanda 7<sup>th</sup> chapter verse no84-87 pg no188,chowkhamba Sanskrit series office varanasi.

9) Agnivesha charakasamhita, revised by charaka and dridhabala with the ayurveda dipika commentary of chakrapanidatta edited by vaidya jadavaji trikamji acharya,chikitsa sthana,26<sup>th</sup> chapter verse 48 pg no600,choukambha orientalia

10 Agnivesha charakasamhita, revised by charaka and dridhabala with the ayurveda dipika commentary of chakrapanidatta edited by vaidya jadavaji trikamji acharya,sutra sthana,13<sup>th</sup> chapter verse 15 pg no82,choukambha orientalia.

Cell : 7799557807, 9885914070

**L.V. DIAGNOSTIC CENTRE**  
# Shop No.11 & 12, Park Square Complex, Opp. Income Tax Office,  
N.R. Peta, KURNOOL - 518004, (A.P.)  
Phone - 08518 - 255 880

NAME :  AGE : 30 Years

PLACE: KNL REPORT DATE: 03-02-2

Ref Dr : SRI VENKATESWARA LAB.

**RETROGRADE URETHROGRAM**

RGU performed with water soluble contrast.

Short segment stricture noted in bulbous part of urethra.

No evidence of urethral diverticula.

**IMPRESSION:**

➤ **SHORT SEGMENT STRICTURE NOTED IN BULBOUS PART OF URETHRA.**


**ADVISED :** FURTHER EVALUATION, FOLLOW -UP, CLINICAL CORRELATION AND  
KINDLY DISCUSS IF NECESSARY NOT FOR MEDICO LEGAL PURPOSE. .

**DR.M.VIJAYAKUMAR**  
MD.(NIMS)DNB.,  
CONSULTANT RADIOLOGIST

“Sex Determination Test is a Crime as per PC & PNDT Act. - లింగ నిర్ధారణ పరీక్షలు చట్ట ప్రకారం”

**CT SCAN, ULTRA SOUND, TIFFA, DOPPLER,**





**PRANAV SCANS  
& DIAGNOSTIC CENTRE**  
Plot No. 5 & 6, H.No. 50-761-9, Beside Raga Mayuri Builders,  
Gayathri Estate, KURNOOL - 518 002.  
☎ : 08518 - 233666 Cell : 8142880888

TENKATESHWARLU

AGE/SEX: 28YRS/M

REFERRING DOCTOR: R. SATHISH KUMAR., DNB (UROLOGY)

DATE: 19-06-2023

MRN: 9032

**RGU (RETROGRADE URETHROGRAPHY)**

- RGU was performed using ionic contrast medium under strict aseptic conditions.
- **Narrowing noted at bulbo membranous junction of urethra.**
- Rest of the anterior urethra is normal in course and caliber with smooth outline.
- No evidence of false passage of contrast seen.

**IMPRESSION:**

➤ **NARROWING AT BULBO MEMBRANOUS JUNCTION OF URETHRA - PARTIAL STRICTURE.**

**Dr. B. Suresh**  
MD, RD.  
Consultant Radiologist.

**Dr. S. Jagadeeswara Reddy**  
DMRD, DNB.  
Consultant Radiologist.

**Dr. B. Ranadheer**  
DMRD,  
Consultant Radiologist.

**Dr. A. Sarvottam**  
MD, RD.  
Consultant Radiologist.

**Dr. Manjeera Venkatesh**  
MD, RD.  
Consultant Radiologist.

✦ 16 Slices CT Scan ✦ Digital X-Ray ✦ Ultra Sound ✦ 3D & 4D Scan ✦ TIFFA ✦ FETAL ECHO ✦ NT SCAN

✦ Colour Doppler ✦ Bio Chemistry ✦ Pathology ✦ Micro Biology ✦ Computerised ECG

