

## Effect Of Shigrumultwak Kwath In The Management Of Mootrashmari W.S.R. Urolithiasis

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Guide

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### Introduction

Ayurveda is said to have its origin in Atharvaveda, through one finds its principles being derived from all the four Vedas and also Sufficient infact of post Vedic literature.

Ayurveda further divided into eight branches i.e. Shalyatantra,Shalakyas,Kayachikitsa etc. Each branch has its specific character and its is specialization of each branch.

The field of surgical science, Shalyatantra embraces all such sources of knowledge which aim at the removal of facts, responsible for producing sensation of pain or misery to the body or mind incidentally. Health appear to be a state of physical and mental well being brought about and preserved by the maintenance of even humors, good nutrition's elimination of waste products and a pleasant serenity of the body and the mind a disturbed balance of these factors leads to disease, whether medicine thinks in terms of humours, vital forces or physics and chemistry makes little differences, that health is a perfectly balanced condition in still the best explanation we have.

Even in 21<sup>st</sup> Century era so called ultra modern science is also unable to provide a single specific drug or medicine for Urolithiasis.

The conventional system of modern medicine offers numerous treatment modalities through both medicinal and surgical procedures for the management of urinary calculus.

Considering the factor like old age patients fitness, side-effects of the treatment , post operative complication, recurrence , side effects of oral medicinal treatment like vomiting postural hypotension , etc. we came out with the idea of reducing the intensity of Urolithiasis and symptomatically reducing the intensity of disease with ayurvedic medicine. Alternative Ayurvedic treatment must be searched out, therefore these

burning problem of society inspired me to carry out specific work on this subject.

“SHIGRUMULTWAK KWATH” is one of the unique treatments fulfilling all the norms of ideal treatment in Mootrashmari. Hence we have decided to work on the burning medical issue of the society. So considering the importance of this disease, results of Ayurvedic treatment and the graceful guidance of my teachers, I have selected this topic for dissertation-

“Effect of Shigrumultwakkwath in the Management Of Mootrashmari w.s.r. Urolithiasis.”

### Aims And Objectives

#### Aim -

To study -“Effect of Shigrumultwakkwath in the Management Of Mootrashmari.”

#### Objective:-

- To study the disease Mootrashmari i.e. Renalcalculi according to Ayurvedic and Modern science.
- To evaluate the therapeutic effect of shigrumulatwakinmootrashmari.
- To evaluate importance role of Bhaishajyachikitsa in mootrashmari with reference to shigrumulatwak
- To propose the mechanism of action of Shigrumulatwak in "shigrumulatwak".

### Drug review :-

क्वाथश्चशिग्रुमूलोत्थः कटुष्णोश्मरीपातनः

अष्टाङ्घुदयिकित्सास्थन ११

As astanhrudayacharya mentioned use of shgrumultwakkwath in above sloka for management of ashmarichikitsa.

So, in this reachar topic way use shgrumultwak to subside the pain and as management of mutraashmari

### **Materials & Method**

In the present clinical research work, ShigrumultwakKwath indicated for treatment of

Mootrashmari. ShigrumultwakKwath also have Antiurolithiatic and Diuretic properties that can help the expulsion of renal stone rapidly. The present study was aimed towards providing easily accessible economic treatment for the common ailments Mootrashmari. ShigrumultwakKwath is a simplest and easy formula.

**Preparation of Medicine –**

The medicine “**SHIGRUMULTVAK KWATH**” will be prepared in Department of Rasashastra Bhaishajya Kalpana of Ashwin Rural Ayurved College Manchi Hill, Sangamner under expert supervision.

**1. Clinical Trial:**

**Design:**

A prospective, Open randomized controlled clinical trial was conducted on 60 patients (30 controls + 30 trials).

**2. Selection of Patients:**

Patients registered in hospital in OPD were selected for study.

Written informed consent was taken from every patient.

Proper case history was taken and special case record form was prepared.

Clinical findings were recorded as per case proforma.

**A) Treated Group : Shigrumultwakkwath**

**B) Control Group: Varunadikwath (purchase from market )**

**Selection of patient :** Diagnosed of Mootrashmari attending our hospitals OPD.

**Grouping of Patients :** Any patient come to OPD is alternatively taken in Group-A and Group B respectively.

**Follow up :** Every 15 day.

**Inclusion Criteria:**

1. Patient of the age in between 20-50 years, either sex.
2. Calculus of size less than 6 mm single or multiple will be taken for treatment.
3. Patients who did not want to undergo surgery
4. Patients who were unfit for surgical intervention had been taken for the study.

**Exclusion Criteria:**

1. Age below 20 yrs and Above 50 yrs.
2. Calculus more than 6 mm in size.
3. Patient having Renal failure.
4. Patient having Diabetes, sepsis.

5. Patient having severe hydronephrosis, uremia, pyuria, pyelonephritis.

**Withdrawl criteria:**

- Patient is not responding to the treatment and aggravation symptoms.
- Patient refuses to continue the treatment.
- Patient not co-operating for treatment.

**End point of Study :** 1 month

**Investigations :**

- Haemogram
- Urine routine
- B.S.L. random
- Serum urea and creatinine levels
- Ultrasonography Abdomen and Pelvis.
- X-Ray K.U.B. if required

According to selection criteria, 60(30 trial+30 control) patients were selected for clinical trial.

**1. Clinical Parameters for the Assessment of results:**

**A) Subjective Parameters:**

- Pain in abdomen
- Dysuria
- Burning micturation

**B) Objective Parameters:**

- Number of Stone
- Size of Stone
- Site of Stone

**C) Investigative Parameters:**

- Haematuria

**2. Analysis of Subjective Parameters:**

**1) Pain in abdomen:**

- No pain.
- Occasional pain did not require treatment.
- Occasional pain but, required treatment.
- Constant dull ache pain, required treatment.
- Severe constant pain, but did not show relief even after treatment.

**2 Burning Micturation :**

- 0 - No burning micturation.
- 1- Occasional burning micturation.
- 2- Occasional burning micturation required treatment.
- 3- Constant burning micturation required treatment.
- 4- Constant severe burning micturation but did not show relief even after treatment.

**3 Dysuria :**

- 0 -No Dysuria.
- 1 -Occasional Dysuria.
- 2-Occasional Dysuria which require treatment
- 3-Constant Dysuria which require treatment.
- 4 -Constant severe Dysuria but did not show relief after treatmt.

**Analysis of objective parameters:**

**Objective Criteria :**

| Observation     | Before Treatment | After Treatment |
|-----------------|------------------|-----------------|
| Number of Stone |                  |                 |
| Size of Stone   |                  |                 |
| Site of Stone   |                  |                 |

**Analysis investigative parameters:**

**Haematuria:**

- No R.B.C. - 0
- 1-5 R.B.C. - 1
- 6-10 R.B.C. - 2
- 10-15 R.B.C. - 3
- > 16 R.B.C. - 4

**Observations:**

**OVERALL EFFECT OF THERAPY on 60 patients of MUTRASHMARI :-**

| Result                           | Group A            |         | Group B            |         |
|----------------------------------|--------------------|---------|--------------------|---------|
|                                  | Number of patients | %       | Number of patients | %       |
| Complete remission (>75 %)       | 23                 | 76.67 % | 7                  | 23.33 % |
| Marked improvement (51 - 75 %)   | 3                  | 10 %    | 8                  | 26.67 % |
| Moderate improvement (26 - 50 %) | 3                  | 10 %    | 14                 | 46.67 % |
| Mild improvement (< 25 %)        | 1                  | 3.33 %  | 1                  | 3.33 %  |

**Observations:**

Observations were represented with the help of various tables and graphs. Statistical analysis was

done by unpaired t-test. Statistical significance was set at P < 0.05 for unpaired t-test.

**Conclusion:-**

The effect of treatment in **SHIGRUMULTWAK KWATH (Group A)** is significant than in **VARUNADI KWATHA (Group B)** for Pain, Burning Micturation, Dysuria, Pus Cells. The effect of treatment in **VARUNADI KWATHA (Group B)** is significant than **SHIGRUMULTWAK KWATH (Group A)** for Haematuria and Number of Calculus.

**Shigrumultwak Kwath** has shown significant relief in the symptoms of Mootrashmari like abdominal pain, burning micturation, dysuria etc.

**Shigrumultwak Kwath** shows bhedan, lekhan, ashmarighna (breaking) properties and also possesses Mootral property i.e. diuretic action which promotes the expulsion and reduces the size of calculi.

In this study, it was found that the proposed duration of treatment is 30 days, which was insufficient in some cases to expel the calculus. Hence for them it may require a longer time to get significant effect.

In control group the rate of expulsion, reduction in size, change in position and other symptoms was less as compared to trial group.hence it was concluded that **Shigrumultwak Kwath** show best result in comparison with Varunadikwath in Urolithiasis.

During the study, there were no adverse effects or complications and the treatment was well tolerated by all the patients.

**Result:**

In the present study, according collected data, it is observed that both the drugs i.e. **ShigrumultwakKwath** and **VarunadiKwatha** have provided significant relief in the symptoms of **Mutrashmari**. **ShigrumultwakKwath** has provided relatively better relief than **Varunadi Kwatha** in symptoms such as Pain, Burning Micturation, Dysuria, But **VarunadiKwatha** has provided better relief than **Shigrumultwak Kwath** in Haematuria, and Number of Calculus.

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