

An Observational Study of Mutravegdharan As A Hetu In Shirshool

Vd.Dhananjay Arvind Charjan.

PG Scholar (Ayurved Samhita & Siddhant)
CSMSS Ayurved Mahavidyalay Aurangabad

Dr. Smita V Dhurde.

Prof& Hod (Ayurved Samhita & Siddhant)
CSMSS Ayurved Mahavidyalay Aurangabad

Introduction:

Ayurveda is the most ancient and traditional system of medicine in India. The Ayurvedic system of medication is based on many centuries of experience in medical practice handed down through generations. Ayurvedic medicine originated in the early civilizations of India some 3,000-5,000 years ago making Ayurvedic medicine the oldest surviving healing system in the world.

Therefore Ayurveda aims to maintain the condition of health i.e., SwasthyaRakshana. Ayurveda has two aims i.e. protection and promotion of health and secondly get rid from the disease. To attain these aims, various Ayurvedic Acharya have described Dincharya (daily regimen), Rutucharya (regimen to be followed according to season), Sadavritta (regimen of good conduct) etc. in detail. Acharya Charaka mentioned Swastha Chatuska in the Sutrasthana. In this Chatuska, some important concepts related with food quantity, RutuCharya (seasonal regimen), Dincharya, Dharneeya Adharneeya Vega(Non Suppressible Urges), described in detail.¹

As defined by World Health Organization (WHO), health is a "State of complete physical, mental, and social wellbeing, and not merely the absence of disease or infirmity." Health is a dynamic condition resulting from a body's constant adjustment and adaptation in response to stresses and changes in the environment for maintaining an inner equilibrium called homeostasis.²

The body too has some expressions sometimes they are silent languages or signals given to us conveying something which may be related to our body mechanism. They are generated by the intelligent system of our body. Our mind transmitter

should be alert and ready to catch, understand and respond to those expressions. These expressions come in the form of natural body reflexes or urges. Ayurveda calls them as Vegas.

Granthakaras describes thirteen urges which should never be suppressed. There are two types of natural urges namely Dharneeya Vegas (suppressible urges) and Adharaneeya Vegas (non-suppressible urges).³

The body produces 13 types of vegas, They are as below mentioned.⁴

1. Vata (adhovata) – urge to fart or pass the flatus
2. Vita (pureesha) – urge for defecation
3. Mutra – urge for urination
4. Kshavathu – urge to sneeze
5. Trut – urge to drink water or thirst reflex
6. Kshudha – urge to take food or hunger reflex
7. Nidra – urge to sleep
8. Kasa – urge to cough
9. Shramashwasa – urge of breathing on exertion
10. Jrumbha – urge to yawn
11. Ashru – urge to weep, tears
12. Chhardi – urge to vomit
13. Retas – urge for ejaculation of semen

1. Shirshool is distinguishing symptom to specific vegadharana:

In this study, Shirshool is considered and decided to study its etiopathogenesis with reference to Mutraveg. Shirshool happens due to suppression of Mutraveg.

1. Mutra Veg rodha (Suppression of urge of urine):^{5,6,7}

Suppressing the vega to pass mutra causes pains in the body especially BastiShool (pain in urinary bladder) MehanaShoola (pain in penis), Mutrakruchata (difficulty in micturition), **Shirshool (headache)**, Malaavrodha (constipation).

Mutraveg:

Mutraveg(Urination) is the release of urine from the urinary bladder through the urethra to outside the body. It is an excretion of urinary system. It is also known as micturition, voiding, uris.

In healthy humans, the process of urination is under voluntary control. In infants, some elderly individuals, and those with neurological injury, urination may occur as a reflex. It is normal for adult humans to urinate up to seven times during the day.⁸

Physiology of Urination:

Physiologically, urination involves coordination between the central, autonomic, and somatic nervous systems. Brain centers that regulate urination include the pontine micturition center, periaqueductal gray, and the cerebral cortex.⁹

Rationale of study:

रोगाः सर्वेऽपि जायन्ते वेगो दीरणधारणैः | - अ.ह.सु. 4/22

The word 'Vegdharan' has two components Veg + Dharan; Veg means natural urge & Dharan is suppression, thus Vegdharan means suppression of natural urges. Initiation of Vega are normal body activities through which unwanted body materials are excreted, this is a process timely carried out by body at regular intervals & controlled by nervous system, suppression of which not only stops the elimination of waste products but also brings strain and disorders of nervous system causing many diseases. This develops in those who have regular habit of suppressing urges over long period and not immediately. So it is very important to respond to these urges and not to suppress them, because its suppression may result in causing various diseases affecting the body. Ayurveda explains that there are different natural urges exerted by human body.

In many societies and in many social classes, even mentioning the need to urinate is seen as a social transgression, despite it being a universal need.

Even today, many adults avoid stating that they need to urinate. Shirshool is one of the symptom which is the result of suppression of Mutraveg.

Now a days, most of the people are not aware of untold effect of suppression of natural urges on body. Due to jobs, workload, travelling and other many more reasons like not having toilets facilities in the premises etc. women have to face this problem

mainly in the society. Acceptability of outdoor urination in a public place varies with the situation and with customs, also hampers Urination urge.

Likewise most of people who are busy in their office work, hold natural urges of Urination due to busy office hours. long distance travelling by bus which may lead to symptoms along with Shirshool.

Primary Objectives :-

- To observe the Mutravegdharan as a hetu in Shirshool.
- To observe the association of Mutravegdharan and Shirshool.
- To observe the association of Mutravegdharan and Shirshool.

I. Types of study design : Case Control study

- I. Duration of study : 1 Month
- II. Method of selection of study subjects (eligibility criteria)

a. Inclusion Criteria:

1. Diagnosed patients of Shirshool.
2. Patients of Either gender will be taken.
3. Patients of age between 20 to 50 Years will be taken.

b. Exclusion criteria:

1. Known Patients of brain tumor, any systematic illness like
2. tuberculosis, cancer, HIV.
3. Patients suffered from epilepsy, schizophrenia or any other mental disorders.
4. Patients of cervical spondylitis, Migrain, traumatic injury to head.
5. Any acute illness like typhoid, malaria, diarrhea, hyperacidity.

C. Inclusion criteria for control group-

1. Individuals who suppress Mutraveg are taken.
2. Individuals of either gender will be taken.
3. Age group between 20 to 50 years will be taken.

Exclusion Criteria for Control Group-

1. Known Patients of brain tumor, any systematic illness like tuberculosis, cancer, HIV.
2. Patients suffered from epilepsy, schizophrenia or any other mental disorders.
3. Patients of cervical spondylitis, Migrain, traumatic injury to head.
4. Any acute illness like typhoid, malaria, diarrhea, hyperacidity.

Withdrawal criteria

Those subjects will be considered for withdrawals which are not compliance with study protocol.

III. Method of selection of comparator (control group)

Comparator will be selected from same age group either from hospital, surrounding vicinity, friend or relative of patients considering inclusion and exclusion criteria.

IV. Matching criteria:

Criteria	Group-A	Group-B
Age & Sex	20-50 years of either sex	20-50 years of either sex
Symptoms	Shirshool	Having Mutravegdharan

V. Operational definitions

1. Dincharya (daily regimen),
2. Rutucharya (regimen to be followed according to season),
3. Sadavritta (regimen of good conduct)
4. Vegdharan means suppression of natural urges.
5. Veg- The term Veg means flow, stream, current, impulse, energy etc. Vegas are defined as a tendency for function, eagerness for an activity.

VII. Research methodology

Sample size-100

Sampling technique -

50 patients of Shirshool will be taken and 50 individual who suppresses the Mutraveg but not having Shirshool will be taken then their randomization will be done.

Methods of data collection relevant to subjectives:

A special Questionnaire and Case report proforma will be prepared for basic demography as well as clinical history and other information

Study instruments/data collection tools:

Questionnaire and Case report proforma

“मूत्रवेगधारणवशिरशूलयांचासबंधअभ्यासकरण्यासाठी 20 ते

50 वयोगटातील लोकांचे निरीक्षण आत्मक अध्ययन.”

Assessment criteria will be done under subjective parameter

Subjective criteria

Gradation for Mutra - Vegadharan:

1. Mutra(urination)

No.	Description	Grade
1	No suppression of Urination, usually do urination just after sensation	0
2	5-30 minutes Suppression of urination after sensation with mild discomfort.	1
3	30-60 minutes suppression of urination after sensation with moderate discomfort	2
4	Suppression of urination after sensation with moderate discomfort	3
5	Suppression of urination after sensation with uncomfortable pain	4

2. Suppression of urination according to days

Sr. No	Description	Daily	3 to 4 Day	Weekly
1	No suppression of Urination, usually do urination just after sensation			
2	5-30 minutes Suppression of urination after sensation with mild discomfort			
3	30-60 minutes suppression of urination after sensation with moderate discomfort			
4	Suppression of urination after sensation with moderate discomfort			
5	Suppression of urination after sensation with uncomfortable pain			

3. Shirshool:

No.	Description	Grade
1	No Shirshool	0
2	Occasional Shirshool, bearable	1
3	Intermittent, not affect daily routine	2
4	Frequent, affecting daily routine work	3
5	Unbearable Shirshool affects the daily work	4

Discussion: Discussion On Observations

- 1) It was noted in the study that out of 50 individuals of Shirshool & 50 individuals who suppresses Mutravega but not having shirshool
- 2) Individuals noted to be belonging to the profession of Drivers were 30.9%, followed by Doctors 25.8%, students 18.6%, teachers 13.4% and Shopkeepers 11.3%. Such a study population was taken as they

are most likely to suppress the urge of micturation either due to nature of job, due to habit or lack of facilities.

On the basis of the observations appropriate statistical tests were applied.

On Application of statistics on the Questionnaire score i.e the tendency of suppression of mutra veg and the score of the total symptoms of mutraveg dharan seen were found to be statistically significant Hence the hypothesis that suppression of mutraveg is a Hetu Of Shirshool is accepted with the help of this study.

On the basis of statistical tests we can hence conclude that the tendency of suppression of micturation and the severity of the symptoms seen vary according to different professions.

Major cause for this can be attributed to lack of facilities and due to the face to face dealing with customers, shopkeepers tend to do more suppression of mutra veg, similar is the case of drivers and doctors.

It is comparatively less in students and least in teachers who have easier access to facilities in their respective schools and colleges and can comparatively take frequent bathroom breaks.

Conclusion:

Symptoms of Mutravegdharan 23.71% of the study population show mild symptoms, 71.13% of the study population show moderate symptoms and 5.14% of the study population show severe symptoms Shirshool due to mutraveg dharan.

These changes in degrees of severity or absence of certain lakshanas seen in some individuals may be also due to habits related to veg dharan, individual prakruti, the dietary habits of the individual along with vihar.

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