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## “Ashmari chikitsa in Ayurvedic texts: summary”

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### **Abstract**

Ayurveda describes the *ashmari* on the *chikitsa* in its way. The *chikitsa* depends on the *purvaroop*, *Lakshana* (symptomatic treatment), *Doshanurup chikitsa* (treatment according to types of *shmari*) etc. There are many forms of drugs. Some are prepared freshly i.e. extracts. Some are having palatability etc. Considering all these views the subject is discussed.

Keywords- *mutrashmari* .

**Introduction:**

*Mutrashmari* is one of the eight diseases called 'Ashtamahagada' (i.e. eight big diseases). Treatment of *mutrashmari* is specialty of Ayurved science era of Hippocrates. Six main texts of Ayurved (*Bruhat-trayee & Laghu-trayee*) is the main source of study the *mutrashmari chikitsa* in Ayurved.

**Aims:**

To Review Ashmari chikitsa in Ayurvedic text.

**Objectives:**

1. To study the *chikitsa* sutra of *ashmari*, and the *chikitsa* and comprise it for practical use from all the six main texts of Ayurveda
2. There are many types of preparations described in texts.

**Material & Method:**

*Bruhat-trayee*, i. e. *Charak samhita*, *Sushrut samhita*, *Ashtang hraday* and *Laghu-trayee Bhaishajya ratnavali*, *Bhava prakash*, *yoga ratnakar* are the main texts used as material for study. The commentaries of these texts are also considered for discussion.

Method of study is to discuss the points of *chikitsa* and preparations described in texts. And to conclude the preparations which can be used in routine use for *ashmari chikitsa*.

**Observation:**

As said before; the *chikitsa sootra* in *Charaka* is an ideal one (*Chikitsa sthana:26/59*). He says that the patient of *mootrashmari*; presenting the symptoms of renal colic should be treated first symptomatically and then superlative curative treatment (*bhedana- patana chikitsa*) should be given. The older and bigger calculus should be treated surgically. Hence the line of treatment of *mootrashmari* according to Ayurvedic texts is ---

- Symptomatic treatment for patients having renal colic.
- Curative treatment for destruction (*bhedana-patana*) of calculus.
- Surgical treatment for the patients, who are not responding to medical treatment and who have older/ bigger calculus.

Here we are not concern with surgical treatment of *mootrashmari*, but concerned only with medical treatment.

The *mootrashmari* should be treated symptomatically as '*mootrakrucchra*', and then the *bhedana* and *patana chikitsa* should be given.

**Purvaroopoopa chikitsa:**

In primordial signs, treatment prescribed is *snehana* and *swedana*. *Snehapana* is also advised.

**Ashmari chikitsa****1. Ekadravya chikitsa:**

There are 20 *dravyas* are advised for *Ashmarinashana chikitsa* with different *anupanas*. Out of these, there are three *kalkas*, fourteen *choornas*, one *swaras* and two *ksharas*. Out of which *Gokshura beej* and *Shigrumool kalka* are described in 3 or more texts.

## 2. *Anekadravya chikitsa*:

There are 72 *yogas* can classified in following groups - *Avaleha*-1, *Kshir*-1, *Choornas*-16, *Kwathas*-22, *Ghrutam*-11, *Pak*-1, *Kalkas*-3, *Ksharas*-11, *Kshir*-1, *Rasas*-3, *Tailam*-5, *Yavagu*-1, *Yusha*-1. According to this classification, we can say that in the *Aneka-dravya chikitsa*, *kwatha* preparations are more and then *choornas*, *Ghrutas* and *ksharas* accordingly.

## 3- *Shalya chikitsa*:

Except *Bhaishajya Ratnavali* and *Yoga Ratnakara*, remaining four texts recommend *shalya chikitsa*. *Charaka* and *Bhava mishra* ask to refer the patient to the surgeon, if clinical treatment fails. *Sushruta* and *Wagbhata* give the details of *shalyakarma*.

## 4- *Panchakarma chikitsa*:

Except in *purvaroopo chikitsa*, *panchakarma chikitsa* is not recommended and there also, only *snehana- swedana* is advice.

## 5- *Dravyas used in chikitsa*:

There are 166 *dravyas* described for *ashmari chikitsa* in *brahat* and *laghu trayee*.

## Conclusion:

Many conclusions can be drawn after studying the table. According to our approach, we include only two here.

□ There are eight herbs prescribed for *chikitsa* in all texts.

□ There are eleven herbs prescribed for *chikitsa* in five out of six texts.

Now we can just say that these 19 herbs are most important ones in treatment of *motrashmari*. These are known and time tested herbs for *Ashmari bhedana* and *patan*.

### *Panchakarma chikitsa*:

*Panchakarmas* are advised in only premonitory signs. This means that when the *samprapti* of *ashmari* is not complete, we should give *panchakarma chikitsa*. When *samprapti* is complete, and *ashmari* is formed, then *panchakarma* could not work.

### *Shalya chikitsa*:

In *Laghutrayee*, no surgical treatment is suggested or described.

In *charak samhita*, the *shalya chikitsa* is advised for the calculus to whom,

□ Which is not responding to medical treatment and

□ Which is bigger and older one; *Sushruta* advised medicinal treatment first and described

*shalya chikitsa* for calculus which is not responding to medical treatment.

*Wagbhata* reproduced the text of *Sushruta*.

***Pathya-pathya:***

***Pathya dravyas:***

All types of *kshara*, *Peya*, *Yavagu*, *Kashaya*, Milk products, *Kulattha*, *Mudga*, Wheat, Old rice, *Yava*, Meat of *Dhanva deshiya* animals, *Tanduliya*, Old *Kushmanda fala*, *Ardrak*, *Yavakshara*, *Basti*, *Virechana*, *Vamana*, *Langhana*, *Swedana*, *Avaleha*, *Peya jala*, Alcohol, Eggs of birds in desert *pashanabheda*, *Renuka*.

***Apathya dravyas:***

*Mootra* and *shukra vega dharana*. *Amla*, *vishthambhi*, *ruksha*, *guru* food and drink. *Viruddha anna* and *peya sevana*.

***Nidana pariverjana:***

“Prevention is better than cure”. Is the rule. Though the separate preventive measures are not described in *Ayurveda*, the principle of *Ayurveda* is— *Nidana parivarjana* i.e. to avoid the causative factors, is the basic *chikitsa* of disease.

The causative factors of *ashmari* according to *Ayurveda* are—

- *Mootra* and *shukravega dharana*.
- *Amla*, *Vishthambhi*, *ruksha*, *guru*, *viruddha annapana*.

At the end of this summary and section, we are at the critical step. We will enter in the next section with the firm conclusions drawn in this section. These conclusions are based on glorious Vedic concepts and tested by hundreds of Vedic physicians since last two thousand years.

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