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## **ROLE OF UTTARBASTI IN URETHRAL STRICTURE - A CASE STUDY**

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## INTRODUCTION

Mutra marga sankocha is found to be common disease now these days. Urethral stricture is rare disease mainly found in male. The male urethra extends from the external urethral meatus at the tip of the glans penis to the bladder neck proximally, the inside of the urethra is lined with stratified squamus epithelium.

Sushruta has explained disease of mutravaha srotas in uttartantra. Mutramarga sankocha can be correlated with stricture of urethra, abnormal narrowing of the urethral lumen mainly due to formation of fibrous tissue damage to the urethral mucosa causing difficulty for the passage of urine is called as urethral stricture.

**KEYWORDS** – Uretheral stricture, Uttarbasti, Mutra marga sankocha

# **Etiology**

The various cause of urethral stricture are:

- 1.Congenital
- 2.Traumatic

3.Inflammatory – Gonorrhoea is the commonest in this group, followed by tuberculosis, recurrent UTI

4.Instrumental – Following passage of large calliber endoscope

5.Post Operative - TURP etc

# **Pathogenesis**

Its usually caused by infiltration of round cell & fibroblast into the periurethral tissue , follows inflammation to the urethral mucosa gradually scar information in the periurethral tissue & narrows the lumen of urethra. The commonest symptoms is difficulty micturition, stream urination pain during micturition etc. urethral stricture is based on the cause of to the urethra then finally inflammation manifested. The inflammatory changes of the urethra may also be caused by chemical irritants and mechanical irritants. After the infection narrowing of the urethral cavity occurs. Injuries due catheter, diagnostic techniques like cystoscopy also causes stricture in the urethera

Age group - 16 - 60 yrs

Investigations – CBC , USG , RUG

USG Used to access the bladder & upper urinary tract. It can show thickened urinary bladder wall. Residual post voiding urine can be seen on ultrasound as well

RUG Can visualize the entire urethra up to the bladder. It provides information about the location, number, length & severity of stricture. They are most definitive diagnostic tools.

# **Treatment**

Symptomatic & Surgical Management

Uretheral dilatation

**Urethroplasty** 

Uretheral stent

But with all these treatment recurrence is very common

Ayurvedic Management – Uttarbasti Parasurgical procedure for the diseases of mutravaha strotas. Uttarbasti is performed by the use of oil like TIL TAIL, The result are good but rare chances of recurrences & results are very fast.

# A Case Report Study

A male patient 35 yrs of age came in OPD Shalyatantra at ayurvedic rugnalaya and sterling multispeciality hospital, suffering from uretheral stricture since 6 months now he had complaints of dribbling micturition, painful micturition, increased frequency of micturition etc. He had consulted to urologist for this problem but he advised urethroplasty but patient doesn't want to do surgery. But he had taken allopathy medicine for 3 months but no significant result were found. So patient came in ayurved hospital.

Past History – No HTN & DM

Addiction History – Alcohol drinking since 15 yrs occasionally

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General Examination –

P-88/min , BP – 140/80 mmhg , RR – 20/min, Temp – Afebrile, Jinva – Saam, Drika- Prakrut, Sparsh – Anushna, Aakruti-Madhyama, Mala-Samyak, Mutra – frequency micturition

Systemic Examination –

RS,CVS,CNS - NAD

# **MATERIALS & METHOD**

Equipment-

Surgical gloves

Betadine solution

Sponge holding forcep

Sterlized gauze piece

2% lignocaine jelly

10 ml disposable syringe

Kidney tray

Autoclaved Til tail-100 ml

Rock salt-1 gm

Honey-5 MI

#### METHOD -

This procedure performed till 15-20 minute and performed in daily 3 days uttarbasti and after 15 days daily 3 days

uttarbasti as till 6-8 setting of procedure has found to be providing satisfactory result in uretheral stricture.

Patient is avoided to micturate till 2 hrs after procedure.

Patient for follow up on regular interval.

Assement of therapy by URETHROGRAM & USG-

After treatment by uttarbasti significant changes were observed. Size of stricture was reduced as well as residual urine volume of urine was reduced.

#### Contraindication-

Anatomical uretheral stricture

**Phimosis** 

**Hypospadias** 

**Epispadias** 

Rupture of urethra

**Urethritis** 

# **OBSERVATION & RESULT**

Uttarbasti is more effective for treatment of uretheral stricture ( Mutra marga sankocha). After 3 days of this procedure it was observed that patient felt 50% decrease of symptoms and after one month of treatment report in RUG significant resolution of stricture was along with 90% decrease of symptoms.

Symtoms	Before Treatment	After Treatment
1.Pain	++++	-
2.Frequency	10 – 12 times per day	4-5 times per day
3.Burning	++++	-
4.Nocturia	6-8 times	1-2 times
5.Urine Flow	4 ml/sec	6 ml/sec

#### DISCUSSION

Mutra marga sankocha is due to predominance of Vata & Kapha dosha.

Whereas dushayas are ras, rakta, mamsa, sleshmadhara kala (mucous membrane). As the act of micturition is under control

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of apan vayu. Due to vitiation of vata dosha chala, khara, ruksha guna increases in mutra marga resulting in mutra marga samkoch. Hence for the treatment of mutra marga samkoch vata & kapha should be passified which done by different medicine used in procedure called uttarbasti.

Mode of action is explained as follows:

Til Taila – Vata & Kapha shamak

Rock Salt along with tail has anulomak property which helps is easy absorption.

Vyavahi ,Sukshma & Snigdha properties in tila taila

The Shodhan & Ropana properties of honey helps in healing of scars.

# CONCLUSION

Uttarbasti is very effective in treatment of uretheral stricture. It is mainly due to direct application of drug locally on target organ which has also been proved scientifically. It is proposed that continuing the treatment for a longer period with proper follow up may avoid further complication

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