



# THE HEALER

International Journal of Ayurveda & Integrative Medicine

www.thehealerjournal.org



## REVIEW ARTICLE

### Efficacy of Uttar Basti in Urethral Stricture – A Review

Pratigya Koju<sup>1\*</sup>, Bijendra Shah<sup>2</sup>, Raj Kishor Shah<sup>3</sup>

<sup>1</sup>BAMS Final Year Scholar, Ayurveda Campus, <sup>2</sup>Teaching Assistant and Head, Department of Shalya Tantra, <sup>3</sup>Associate Professor, Department of Shalya Tantra, Ayurveda Campus, Institute of Medicine, T.U., Kirtipur, Kathmandu, Nepal.

#### ABSTRACT:

**Introduction:** Narrowing of lumen of urethra is known as urethral stricture. 70% of urethral stricture is insidious at bulb. Trauma, infections like (TB, Gonorrhoea), TURP are the main causes of urethral stricture. Symptoms include varying amount of urethral discharge, morning dew drop, difficulty in micturition, dribbling of urine, increased frequency, incomplete voiding of urine etc. According to modern literature, urethroplasty and dilatation of urethra are the treatment procedures followed for urethral stricture. In Ayurveda urethral stricture can be correlated with mutra marga samkocha. According to Sushruta Samhita uttarbasti is one of the effective procedure for mutra marga samkocha. **Material and methods:** This paper provides a collective information regarding Mutra Marga Samkocha (Urethral Stricture), from Nighantu, Samhita and Modern Medicine. Uttarbasti is performed by the use of oils like Bala taila, Tila taila, Apamarga kshar taila etc. **Result and discussion:** Most of the concerned informations are retrieved from published international journals and classical text of Ayurveda. As per published research papers uttarbasti is highly effective in case of urethral stricture. **Conclusion:**

**Keywords:** Bala taila, Mutramarga samkocha, urethral stricture, urethroplasty, uttarbasti

#### Introduction

Urethral stricture can be correlated with mutra marga samkocha in Ayurveda. As per Ayurvedic anatomy, disease related to genitourinary system falls under mutravaha shrotas vyadhi. Acharya Shushruta has classified mutraghata into 12 types.<sup>1</sup> Mutramarga samkocha is not explained with separate title but the symptoms are similar to mutrotsanga.<sup>2</sup> Acharya Shushruta has explained uttarbasti as treatment procedure of mutrotsanga. Acharya Charaka has classified urinary disease like mutra krichha into 8 types.<sup>3</sup> In modern literature it can be correlated with urethral stricture.<sup>4</sup> Urethral stricture is narrowing of lumen of urethra.

The causes of urethral stricture are

- Congenital
- Trauma

- inflammatory (post-gonorrheal, tuberculosis, recurrent UTI)
- instrumental (following passage of large calibre endoscope)
- post operative (TURP) etc.

#### Pathologically -

Inadequately treated infections leads to infection of periglandular tissues, which become infiltrated with round cells and fibroblasts, gradually infiltrated tissues contract and scar tissues form. Due to this stricture is formed.

Treatment of urethral stricture according to modern literature include-

- internal urethrotomy
- dilatation of urethra and urethroplasty.<sup>5</sup>

#### Access the article online

Quick Response Code



www.thehealerjournal.org

DOI:

#### \*Corresponding Author:

**Pratigya Koju**

BAMS Final Year Scholar, Ayurveda Campus, Ayurveda Campus, Institute of Medicine, T.U., Kirtipur, Kathmandu, Nepal.

E-mail: pratigyakoju77@gmail.com

Submitted: 27.04.2020

Revised: 12.06.2020

Received: 29.04.2020

Accepted: 26.06.2020

- There is chance of recurrence in internal urethrotomy.

**Uttar basti** is one of the important panchakarma procedure for treatment of reproductive and urinary disorders.<sup>6</sup>In this procedure medicated oil, decoction, ghrita are passed through genito- urinary tract. In male decoctions and oils are passed per urethra to bladder and per vagina to uterus or urinary

bladder in female. Entire procedure should be performed in aseptic condition. This procedure is performed till 15-20 minutes and performed in alternate days or in interval of 3 days. 7 sittings of procedure has found to be providing satisfactory results in urethral stricture.

Nowadays evidence based male uttarbasti is practiced.

Some of the conditions are:

Condition	Clinically practiced medicine
Azoospermia <sup>7</sup>	Pipalyadi taila/Anutaila
Benign Prostatic hyperplasia(Mutraghata) <sup>8</sup>	Daruharidra kashaya/ Bhruhatyadi kasaya
Physiological urethral stricture <sup>9</sup>	Tila taila/ Sahacharadi taila/ Bala taila/ Apamarga kshara taila
Erectile dysfunction <sup>10112</sup>	Ashwagandha taila/ Sahacharadi taila/ Arjuna shalmali sidda taila

### Incidence

0.6% of total population is found to be suffered from urethral stricture. Most of the are found to be middle and old aged male.<sup>13</sup>

### Materials and Method

Literary sources like classical texts, clinical trials, published manuscripts.

### Equipment required:

- Surgical gloves
- 10-60 ml autoclaved (tila taila/bala taila/apamarga taila)
- 10 ml disposable syringe, kidney tray
- infant feeding tube no.6
- betadine solution
- sponge holder
- honey 4ml
- rock salt 1gm
- sterilized gauze pieces
- 2%lidocaine jelly

### Dose

- 10-60 ml on surgeons choice<sup>14</sup>, Angulimulsamit prasrut<sup>15</sup>( i.e. palm of hand stretched out and hollowed as if to hold liquid up to the bases of fingers)

### Procedure

Uttar basti is performed in following 3 phases as follow.

- Purvakarma(pre-operative)
  - All the needed investigations are done and necessary vitals are taken at first.
  - Patient is asked to void urine, and be free from natural

urges. Then asked to lie in supine position with cloth undone.

- Then Antiseptic care is given.
  - Then luke warm autoclaved oil is mixed with rock salt.
- Pradhan karma(operative)
    - Thus obtained mixture is loaded in 10 ml disposable syringe.
    - The penile region is painted by betadin with help of betadin soaked gauzes and sponge holder. Then penis is retracted and cleaned by betadin solution.
    - Then fetal feeding tube is inserted and when it reaches bulbomembranous urethra patient is asked to take deep breathe. Further fetal feeding tube is inserted till it reaches bladder .
    - Then the medicated oil mixture is passed through fetal feeding tube by the help of syringe in one shot. Patient is asked to remain in same position till 15 minutes.
    - Then the fetal feeding tube is removed and prepuce is repositioned to avoid phimosis. This process is done in alternative days or in interval of 3 days for 7 sittings.
  - Paschat karma(post operative)
    - Patient is avoided to micturate till 2 hrs after procedure.
    - Post procedure vitals are taken and noted.
    - Patient is called for followup on regular interval.

### Contraindications..

- Hypersensitivity
- Anatomical urethral stricture
- Phimosis
- Hypo/Epispadias

- Carcinoma of penis
- Diabetes Mellitus

### Observation and Results

As per different case study report, different published manuscript and clinical trials the procedure called uttarbasti is more effective for treatment of urethral stricture. After 7

days of this procedure it was observed that patient felt 70% decrease of symptoms and after 1 month of treatment report in RUG significant resolution of stricture was seen along with 90 % decrease of symptoms.<sup>16</sup> The report of urethrogram of patient who underwent through this procedure shows that there is marked increase in calibre of lumen and increase inflow rate by about 3 times.<sup>17</sup>

Observations according to symptoms <sup>18</sup>							
symptoms	total patient	severe	moderate	mild	After 5th sitting		No any response
					complete relief	Slight relief	
Burning micturation	30	19	10	1	25	5	—
Straining at micturation	30	25	5	—	27	3	—
Decreased stream of urine	30	29	1	—	23	7	—
Prolonged micturation	30	3	23	4	28	2	—
Hematuria	6	—	2	4	6	—	—
Incontinence of urine	9	2	6	1	9	—	—
strangury	24	6	18	—	23	1	—
Retention of urine	1	1	—	—	1	—	—
frequency of micturation	29	8	14	1	25	4	—

### Discussion

Mutra marga samkocha is due to predominance of vata and kapha dosha. Where as dushyas are rasa, rakta, mamsa, sleshmadhara kala (mucous membrane). As the act of micturation is under the control of apana vayu, when it gets vitiated urinary defects arise. Due to vitiation of vata dosha *chala, ruksha, khara guna increases* in mutramarga resulting in mutramarga samkocha. Hence for the treatment of mutramarga samkocha vata and kapha should be passified, which is done by different medicine used in procedure called uttarbasti. Mode of action is explained as follows.

#### ● Pharmacological action of ingredients used in procedure

Tailas like bala taila, apamarga taila, tila taila are the oils especially used in procedure. All the used oils are vata and kapha samak. The rock salt used along with taila has anulomak property which helps in easy absorption of oil through mucosal linings. Vyavahi, sukshma and snigda properties of tila taila<sup>19</sup>, apamarga and bala taila helps in lubrication and dilataion of lumen. The sodhana and ropana properties<sup>20</sup> of honey helps in healing of scars.

#### ● Pathophysiological action

Due to recurrent infection especially like gonorrhea, tuberculosis, UTI the mucosal linings are replaced by scars which leads to hypertrophy and finally causing narrowing

of urethral lumen. The Oils used in procedure are absorbed by mucosa of urethra and urinary bladder which helps in healing of scars due to recurrent infections. It softens tissue, increase elasticity, penetrates up to deep tissues, heals and promotes regeneration. In modern aspect drugs and oils used reduces fibrosed part.

#### ● Mechanical action

Mechanically stricture are decreased by the mechanical dilatation of urethra due to use of fetal feeding tube and catheters.

### Conclusion and Recommendation

As it is precisely mentioned in different classics uttarbasti should be performed by handful of practitioners. Uttarbasti is very effective in treatment of urethral stricture. It is mainly due to direct application of drug locally on target organs which has also been proved scientifically. Hence it is recommended to clinicians for treatment of uttarbasti as per different evidence based clinical trials.

**Abbreviations:** Not Applicable

**Acknowledgements:** Not Applicable

**Conflict of interest:** Author declares that there is no conflict of interest.

**Source of support:** None

## References

- 1 Shastri A. D. in Sushruta Samhita: Ayurveda Tatva Sandipika, Chaukhambha Sanskrit Sansthan, nidansthanam, Uttar Tantra chapter 58/3-4; 423.
- 2 Shastri A. D. in Sushruta Samhita: Ayurveda Tatva Sandipika, Chaukhambha Sanskrit Sansthan, nidansthanam, Uttar Tantra chapter 58/15-16; 425.
- 3 Pt. Sastri Kashinath in Caraka Samhita of agnivesh with vidyotani hindi commentary, chaukhambha Sanskrit sansthan, Sutra sthan, chapter, 26; 722.
- 4 Norman S.Williams, P Ronan, Andrew W.Mc Caskie in Bailey and loves short practice of surgery, 27<sup>th</sup> edition, CRC press, 2018 chapter 79 pg-1482
- 5 Norman S.Williams, P Ronan, Andrew W.Mc Caskie in Bailey and loves short practice of surgery, 27<sup>th</sup> edition, CRC press, 2018 chapter 79 pg-1483
- 6 Sushruta Samhita- Ambikadatta Shastri, Hindi Commentary, Chaukhamba Sanskrit Sansthan, Varanashi, Sharirsthana 2/33, 2006
- 7 Sharma MH and Singh G, Standardization of Uttara-basti and its role in the Management of shukra- dusti with reference to Obstructive azoospermia. DPC Dissertation, Gujarat Ayurveda University, Jamnagar, 1997
- 8 Banothe G et al. Efficacy of Ayurveda Formulations and Basti Chikitsa on Mutraghata w.s.r. to Benign Prostatic Hyperplasia, Int. J. Ayur. Pharma Research, 2014; 2(7): 5-11
- 9 Dr. Kumar Alok Management of Urethral Stricture by Uttarbasti: A Case Study European Journal of Biomedical And Pharmetical studies ejbps, 2017, Volume 4, Issue 12 917-919
- 10 Pareek, Tribhuvan. "ROLE OF PANCHAKARMA CHIKITSA IN THE MANAGEMENT OF KLAIBYA: A CASE STUDY." (2017).
- 11 Nandigoudar SN, A Comparative Clinical Study To Evaluate The Effect Of Uttara Basti And Matra Basti In Klaibya With Special Reference To Erectile Dysfunction, RGUHS 20, pg 84-86
- 12 Narendra SB, Patel A. Basti in klaibya. Int J Health Sci Res. 2019; 9(1):275-279.
- 18 Rajendra H Amilkanthwar, Role of uttarbasti in mutra marga samkocha (urethral stricture) International Journal of Traditional Knowledge vol 3(2), April 2004, pp 177-181.
- 13 Amjad Alwaal, Sarah D. Blaschko, Jack W. McAninch, Benjamin N. Breyer  
Transl Androl Urol. 2014 Jun; 3(2): 209–213. doi: 10.3978/j.issn.2223-4683.2014.04.07  
PMCID: PMC4708169
- 14 Dr. Kumar Alok, Management of recurrent urethral stricture by uttar basti A case study, 2017, European Journal of Biomedical and pharmaceuticals
- 15 Sushruta Samhita- Ambikadatta Shastri, Hindi Commentary, Chaukhamba Sanskrit Sansthan, Varanashi, Chikitsasthana 37/125, 126, 2006
- 16 Dr. Joya Patel Clinical Efficacy of Bala taila Uttarbasti in Management of Urethral stricture : Case Report International Journal of Current Research Vol. 10, Issue, 08, pp.73068-73071, August, 2018
- 17 Rajendra H Amilkanthwar, Role of uttarbasti in mutra marga samkocha (urethral stricture) International Journal of Traditional Knowledge vol 3(2), April 2004, pp 177-181.
- 19 Prof. Ravi Dutta Tripathi in Ashtanga Sangraha, chaukhamba Sanskrit pratisthana 2015, Sutrasthanam, chapter 6-99, p no. 107.
- 20 Prof. Ravi Dutta Tripathi in Ashtanga Sangraha, chaukhamba Sanskrit pratisthana 2015, Sutrasthanam, chapter 6-92, p no. 105

### How to cite this article:

Koju P, Shah B, Bhatta P, Shah RK, Efficacy of Uttarbasti in Urethral Stricture – A Review, The Healer Journal, 2020; 1(1): 1-9.