



**EFFECT OF *RASAYAN CHURNA* IN THE MANAGEMENT OF *MUTRASHMARI*
W.S.R. TO RENAL CALCULUS – A SINGLE CASE STUDY**

KUMAR V^{1*}, PATIL PC², BANOTHE G³ AND ABHILESH VS⁴

- 1: 1st Year PG scholar, Department of Rog Nidan evum vikriti vigyan, Parul Institute of Ayurved and Research, Vadodara, Gujarat, India
- 2: Associate Professor, Department of Roga Nidana Evum Vikriti Vigyan, Parul Institute of Ayurved and Research, Vadodara, Gujarat, India
- 3: Associate Professor, Department of ShalyaTantra, Parul Institute of Ayurved and Research, Vadodara, Gujarat, India
- 4: Assistant Professor, Department of Panchkarma, Parul Institute of Ayurved and Research, Vadodara, Gujarat, India

***Corresponding Author: Dr. Vineet Kumar: E Mail: vineetk730@gmail.com**

Received 24th Nov. 2024; Revised 19th Jan. 2025; Accepted 16th March 2025; Available online 1st March 2026

<https://doi.org/10.31032/IJBPAS/2026/15.3.9974>

ABSTRACT

In classical *Ayurvedic* texts, *Ashmari* is defined as the formation of hard stone in urinary tract due to imbalance of *Doshas*. *Ashmari* is a disease related to *Mutravahasrotas* which is also described under *Ashtamahagada* in *Ayurved*. It shows symptoms like *Jwara*, *Bastipida*, *Bastishiravedana*, *Mushkavedana*, *Mutrakriccha*. Due to altered food habits, changing lifestyle, stress etc, causes the formation of *Mutrashmari*. In modern, it is correlated with renal stone. This disease is classified on the basis of signs and symptoms like pain in abdomen and burning micturition as well as stone morphology that is formed in different parts of *Mutravahasrotas*. In *Ayurveda*, managing *Ashmari* involves a combination of herbal remedies, dietary regulations, lifestyle modifications and detoxification therapy. The effect of *Rasayan Churna* in *Mutrashmari* is due to its content *Gokshurchurna* having properties to reduce pain and inflammation. In this case study, it is observed that the drug *Rasayan Churna* reduces symptoms of *Ashmari* by disintegration, dissolution and expulsion of urinary stone.

Keywords: *Ashmari*, *Mutravahasrotas*, *Rasayan Churna*, Renal calculi.

INTRODUCTION:

Ashmari is a disease that causes stone formation and causes extreme suffering for people. The particular contribution of *Acharya Sushruta* is the description of *Ashmari*. He has incorporated *Ashmari* into *Ashtamahagada* [1], which comprises the eight most problematic illnesses. *Ashmari*'s official name is *Mutrashmari*, and it shares a relation with *Mutravaha Strotas*. The primary *Adhithana* of *Ashmari* is the urinary bladder or *basti*. *Acharya Charaka* listed *Basti* under *Dashvidha Pranayatana*, which refers to the body's ten essential organs. *Basti* was categorized by *Acharya Sushruta* as *Sadhyapranahara Marma*, meaning that harm to these *Marma* can result in an individual's instantaneous demise [2].

Without a doubt, the *Basti* is the *Adhithana* of *Ashmari*. The *Sushruta Samhita* contains a description of *Ashmari* formation that strongly resembles bladder calculi. It shows symptoms like *Jwara*, *Bastipida*, *Bastishiravedana*, *Mushkavedana*, *Mutrakriccha*. Numerous drugs and surgical techniques have been contrasted with *Acharya Sushruta*.

As per contemporary science, the most effective treatment for urinary calculus involves surgical intervention, such as open surgery, percutaneous procedures, etc., as well as the use of medications to treat the underlying pathologies and diuretics [3].

Moreover, urolithiasis often results in renal failure, necessitating hospitalization and associated costs in addition to pain and lost productivity. But numerous other *Ayurvedic* formulations exist, [4] including the use of various butters, powders, decoctions, *Churnas* (fine powder), alkaline drugs, *Dravyas* along with combination of herbal remedies, dietary regulations, lifestyle modifications and detoxification therapy are effectively shows its results. Under the category of *Rasayan* or *Rasayana therapy*, one of the key ideas in *Ayurveda* is classified. *Churna* is a finely ground powder that contains one or more drugs made by combining clean, finely ground, and sieved medications [5]. *Rasayan Churna* is a traditional *Ayurvedic* formula primarily used for conditions related to the urinary tract, stress, and immunosuppression. *Rasayan Churna* is a traditional *Ayurvedic* formula primarily used for conditions related to the urinary tract, stress, and immunosuppression [6]. In this case study, an observation has been made that the drug *Rasayan Churna* reduces symptoms of *Ashmari*.

A Case Study:

A 65 years old male patient presented with complaints of burning micturition on and off since 2 years, pain in lower back region, dribbling of micturition since 2 months. The patient was suddenly pain started in the

abdomen before one day. Patient felt burning sensation in abdomen. In an emergency, patient took allopathic medicine for pain management and got temporary relief. The patient observed re-occurrence of

above symptoms. With all these complaints, patient came to Khemdas Hospital.

Past history: No H/o HTN, DM, Thyroid.

Surgical history- Herniotomy was done before 10 years.

General Examination	System Examination :
<ul style="list-style-type: none"> • BP: 120/80 mm of Hg, • Temp: Afebrile (97.5 F) • R/R: 18/min • Pulse rate: 84/min • Gait – Normal • Decubitus- Normal • Pallor: Nil • Icterus: Absent • Edema – Absent • Clubbing- absent • Cyanosis – Nil • Lymph node enlargement: Not palpable. 	<ul style="list-style-type: none"> • Respiratory System : Bilateral normal airway entry present • Central nervous system: conscious and well-oriented • Central vascular system: S1S2 Heard • P/A- tenderness on and off

Investigation: 11mm left renal calculus was seen in USG abdomen on date 21/06/2024

The patient was advised 5gm *Rasayan Churna* twice a day with warm water after food.

MATERIAL AND METHOD

Ayurvedic Management of *Ashmari* –

Table 1: Composition of *Rasayan Churna*

Sanskrit Name	Scientific Name	Part used	Quantity
<i>Guduchi</i>	<i>Tinospora cordifolia (Willd.) Miers.</i>	Dried stem	1 Part
<i>Gokshur</i>	<i>Tribulus terrestris Linn.</i>	Dried fruit	1 Part
<i>Amalaki</i>	<i>Emblia officinalis Gaertn</i>	Pericarp of dried fruit	1 Part

Gokshur [7]: It is indicated in *Ashmari* due to its lithotriptic properties. An ethonolic extract from fruits demonstrate considerable dose dependent protection against urolithiosis induced by glass bead implantation in albino rats.

Guduchi [8]: Its usage to cure skin disorders such as *Daha*, which refers to burning sensation or inflammation in the skin. *Guduchi* is appreciated for its anti-inflammatory, anti-oxidant and

immunodulating effects. It's often used to calm and heal the skin, reduce redness and relieve irritation.

Amalaki [9]: *Emblia* fruit found to have very potent anti-microbial activity.

Follow up and outcome:

Follow up was taken every 7th day and improvement in symptoms was found. Significant reduction in stone size noted after 15 days of follow up period.

OBSERVATION AND RESULTS

BT	AT
<p>USG Report 11mm size calculus in left Kidney.</p> <p>PARUL SEVASHRAM HOSPITAL (Parul Institute of Medical Sciences & Research) RADIOLOGY DEPARTMENT USG REPORT</p> <p>Ultrasound KUB</p> <p>Name: _____ Age/Sex: 66/M Date: 2/6/24</p> <p>Right Kidney : Normal Size 98 x 42 mm No. of Calculus/HN: No Calc CMD Preserved: Yes</p> <p>Left Kidney : Normal Size 123 x 57 mm No. of Calculus/HN: Cal CMD Preserved: Yes</p> <p>The kidneys are normally situated. The renal outlines are smooth.</p> <p>Bladder: Distended, Postvoid = 574 cc, Postvoid = 464 cc Prostate: 45 cc, enlarged with medial lobe hypertrophy</p> <p>Conclusion: → Lt kidney shows 55 x 42 mm sized partially exophytic simple cortical cyst at lower pole → Approx 11mm sized intrarenal calculus at base of bladder. → mild hydronephrosis possibly secondary to distended urinary bladder.</p> <p>Consultant Radiologist: Dr. Twinkle (R3) → moderate prostatic enlargement with medial lobe hypertrophy Dr. Viraj (SB)</p> <p>P.O. Limda, Ta. Waghodia, Dist. Vadodara. Mob.: 90166 68231, 90166 68136 E-mail: parulsevashram@gmail.com / Website: www.parulsevashramhospital.com</p>	<p>USG Report 9mm size calculus in left Kidney.</p> <p>PARUL SEVASHRAM HOSPITAL (Parul Institute of Medical Sciences & Research) RADIOLOGY DEPARTMENT USG REPORT</p> <p>Abdominal and Pelvic Ultrasound</p> <p>Name: _____ Age / Sex: 65 yr / M Date: 5/7/24</p> <p>Liver : Liver size: 131 mm, (N). The hepatic parenchymal echo texture - (N). Intrahepatic and the extra hepatic biliary ducts are not dilated. Hepatic veins and the portal vein are normal. No focal lesion is seen in the liver.</p> <p>GB : Well distended. No calculus/sludge is seen. The wall thickness is normal. No pericholecystic fluid.</p> <p>CBD : Normal in diameter.</p> <p>Spleen : Size - 80 mm, (N). Normal Echopattern. No focal lesion is seen.</p> <p>Pancreas : The echo texture appears normal. No focal lesion is seen. The pancreatic duct is not dilated.</p> <p>Kidneys : Both kidneys are normal in size. Normally situated. There is adequate cortico-medullary differentiation. No evidence of a calculus, SCL or hydronephrosis is seen in both kidney.</p> <p>Para aortic region : Aorta and the IVC appear normal. No lymph node enlargement is seen.</p> <p>Others : There is no ascites.</p> <p>Bladder : distended. & shows internal echoes. Prostate : 47 mm, enlarged with few Parenchymal Calcifi Conclusion : → moderate Prostatomegaly → left kidney shows mild hydronephrosis secondary to approx. 9 mm sized left V calculus → Approx. 4.6 x 5 cm sized simple cort cyst at lower pole of kidney Do meet (R3) by Dr. Viraj (SB) Consultant Radiologist kidney → changes of cystitis.</p> <p>P.O. Limda, Ta. Waghodia, Dist. Vadodara. Mob.: 90166 68231, 90166 68136 E-mail: parulsevashram@gmail.com / Website: www.parulsevashramhospital.com</p>

DISCUSSION:

Mutrashmari, or urine stones, is a common urological disorder marked by the production of calculi in the urinary system. *Ayurvedic* treatment of renal calculus frequently comprises a variety of herbs and formulations targeted at lowering symptoms, preventing recurrence, and promoting overall renal health. *Rasayan Churna* appears to provide numerous advantages in the treatment of *Mutrashmari*. Its anti-inflammatory, diuretic, detoxifying,

and rejuvenating effects help to alleviate symptoms, reduce stone formation, and improve overall renal function. However, *Rasayan Churna* must be used under the supervision of an *Ayurvedic* practitioner as part of a comprehensive treatment plan suited to each individual's specific needs. More research and clinical trials are needed to definitively confirm its efficacy and to discover the best formulations and dosages for treating renal calculi. This article presents a complete description of how

Rasayan Churna may effect the management of renal calculi, emphasising both its traditional and possible benefits.

CONCLUSION:

The patient in this case study has experienced encouraging outcomes from the treatment of urolithiasis (*Mutrashmari*). According to the USG - Abdomen, the patient's 11mm urinary stone was reduced to 9mm in 15 days by using an *Ayurvedic* treatment.

Therefore, it can be concluded that *Ayurved* has the potential to treat urolithiasis effectively based on the observations and findings of this case study.

REFERENCES:

- [1] Sushruta, Sushruta Samhita, Ayurveda- Tattva- Sandipika commentary Edited by Ambikadutta Shastri; Chaukhamba Sanskrit Sansthan Varanasi 2007; Sutra Sthana 33/4, p.163.
- [2] Patil VC. Rajeshwar NM. SushrutSamhita of Susruta Chikitsasthana Ashmari Chikitsa-adhyaya: Chapter 7 Verse 3. 1st ed Chaukhamba Publications, New Delhi. 2018, p-348.
- [3] Sharma AK. Role of imaging techniques in the diagnosis of Vrikkashmari (urolithiasis) and Shikhadi compound its management, World Journal of Pharmaceutical and Medical Research. 2001; 9(5):215
- [4] Shastri AD. SushrutaSamhita-Ayurveda Tattava-Sandipika Hindi commentary Vol. 2 Kashi Sanskrit Series No. 156, Chaukhamba Publications Veda Nidhi Varanasi 1939, p-600
- [5] Ajay K Meena, M MRao, P Panda, Kiran, Ajay Yadav, Uttam Singh and B Singh. Standardisation of AyurvedicPolyherbal Formulation – Pancasama Churna; International Journal of Pharmacognosy and Phyto chemical Research 2010, 2(1); 11-14.
- [6] H. Sharma, Ayurvedic Bhaishajya Kalpana, churnakalpana, University granthnirman board, 1997, 211.
- [7] Sharma PV. Dravyaguna Vijnana. Vol. 2. 3rd ed. Varanasi: Chaukhamba Bharati Academy; 2020. p. 167-170.
- [8] Sharma PV. Dravyaguna Vijnana. Vol. 2. 3rd ed. Varanasi: Chaukhamba Bharati Academy; 2020. p. 78-82.
- [9] Sharma PV. Dravyaguna Vijnana. Vol. 2. 3rd ed. Varanasi: Chaukhamba Bharati Academy; 2020. p. 110-115.