

# Clinical Efficacy Of “*Varunadhya Lauha*” On *Ashmari Roga* W.S.R. Urolithiasis

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## Abstract

**Background:** Urolithiasis is a common problem in present scenario. Clinically features and treatment of *Ashmariroga* (Urolithiasis) is described even in Veda, the oldest repositories of human knowledge.

**Aims:** To find out the clinical efficacy of the standardized “*Varunadhya lauha*”

**Material and Methods:** In clinical efficacy 30 clinically diagnosed patients of “*Ashmariroga*” were selected from OPD & IPD of the associated group of hospitals of Govt. Ayurved College, Udaipur.

**Observations and Results:** On radiological ground 30% patients were cured, 30% patients were markedly improved, and 20% patients were unchanged and 20% patients were increased in size.

**Conclusion:** So, here it can be concluded that *Varunadhya lauha* possesses the properties regarding to disintegration and expulsion of stones and can produce total relief in sign and symptoms of *Ashmari roga* which proves that it is an ideal preparation for the management of *Ashmari roga*.

**Keywords-** *Ayurveda*, Urolithiasis, *Ashmari roga*, Renal Stone.

## 1. Introduction

*Ayurveda* is very ancient and complete medical science. It have many branches, among them *Rasa Shastra* is one, which deals with the mercurial, mineral and metallic processing and preparation of different *Rasaushadhis*. Clinical features of the disease are described even in Veda, the oldest repositories of human knowledge. According to *Susruta*, *Vata*, *Pitta* and *Kapha* enter the vasti and after mixing with urine form calculi due to their adhesiveness. As even clean water kept in a new pitcher gets muddy in course of time, in a similar way calculi is formed in basti. *Sushruta* had described as the wind and fire of lightning jointly condense the rain water, in the same way *Vayu* and *Pitta* jointly contribute for condensation of *Kapha* in basti (urinary bladder) to form *Ashmari* and there is the *Kapha* is considered as nucleus of every type of *Ashmari*.<sup>1</sup> *Acharya Charaka* illustrates the process of formation of

*Ashmari* with the example of *Gorocana*. He says that *Mutra* is converted into *Ashmari* when the *Doshayukta Mutra* or *Sukrayukta Mutra* enters into *Basti*, where they are dried up by the action of *Vayu* and *Pitta*.<sup>2</sup> “*Varunadhya lauha*” is one such formulation described in *Rasendra chintamani* in *mutrakracha mutragata rogadhikara*.<sup>3</sup>

It is estimated that 12% of the world population is affected by kidney stones with a recurrence rate from 70% to 80% in males and 47% to 60% in females.<sup>4,5</sup>

## 2. Aims and Objectives:

- To find out the clinical efficacy of the standardized “*Varunadhya lauha*”

## 3. Materials and methods:

In clinical efficacy 30 clinically diagnosed patients of “*Ashmariroga*” were selected from OPD & IPD of the associated group of hospitals of Govt. Ayurved College, Udaipur. Drug administration route is selected orally as per text. The trial drug will be given for 30 days and biochemical parameters will be studied. The patients attending O.P.D. & I.P.D. of three attached hospital of Ayurved College were selected for the present clinical efficacy.

### 3.1 Criteria for exclusion

1. Patients having the stone size more than 15 mm in diameter.
2. Patients with impaired renal function.
3. Patients with renal tuberculosis and malignancies of the urinary tract.
4. Severe haematuria.
5. Patients with immediate surgical requirement and complications.

### 3.2 Drug Schedule

<b>Drug</b>	<i>Varunadhya lauha</i>
<b>Form</b>	Fine powder
<b>Dose</b>	3 gm once a day
<b>Time</b>	Before meal in morning time
<b>Duration</b>	30 days

### 3.3 Criteria For Assessment

Most of the signs and symptoms of *Ashmari* described in *Ayurveda* are subjective in nature, to give the results objectively and for statistical analysis multidimensional scoring system have been adopted. The symptoms score obtained before and after treatment, statistical analysis and percentage relief was taken to know the efficacy of therapy. Score was given according to severity of symptoms.

### 3.31 Subjective Criteria:

Assessment of the therapy was done according to the relief observed in the signs and symptoms, with the help of scoring pattern.

### 3.32 Objective Criteria:

Based on various investigation like urine, blood, biochemical examination, x-ray (KUB), USG (KUB) (if required) done before and after treatment. The statistical analysis was done of these score before starting the treatment and after completion of 30 days course.

## 4. Observation And Results

In a clinical efficacy, the drug *Varunadhya lauha* when given in 3 gm once a day for 30 days to the patients didn't show any adverse effect was suggestive of its safety at classically mentioned dose. The efficacy suggested that the age group of 4<sup>rd</sup> and 6<sup>th</sup> decades are more prone to disease *Ashmari*. Male are more prone to *Ashmari* than females. *Basti vedna*, *Nabhi Vedana*, pain, burning micturition, tenderness in renal angle symptoms were found in maximum number of patients. *Varunadhi Lauha* has provided statistically highly significant effect on *Nabhi Vedana*, *Basti Vedana*, *Ati Avila Mutrata*, *gomeda prakashan* pain and burning micturition, dysuria, tenderness in renal angle. Hematological and biochemical investigations reveal having statistically non-significant effect on all the parameters. However, it was noticed that the variation in all the parameters were observed within normal range. (Table No. 1 & 2)

Table No.1:-Effect of therapy on clinical features (Acc. to *Ayurveda*)

Clinical Features	Mean		Def.	%	S.D.	S.E.	t value	P value	
	B.T.	A.T.							
<i>Nabhi Vedana</i>	1.20	0.23	0.67	80.56	0.67	0.12	7.92	<0.001	HS
<i>Basti Vedana</i>	1.20	0.23	0.67	80.56	0.67	0.12	7.92	<0.001	HS
<i>Gomeda Prakasam</i>	1.13	0.23	0.90	79.41	0.66	0.12	7.45	<0.001	HS
<i>Ati Avilamutrata</i>	0.93	0.30	0.63	67.86	0.72	0.13	4.83	<0.001	HS

Table No.2:-Effect of therapy on clinical features (acc. to modern science)

Clinical Features	Mean		%	S.D.	S.E.	't'	P	
	B.T.	A.T.						
Pain	1.20	0.20	83.33	0.64	0.12	8.51	0.00	HS
Dysuria	0.87	0.10	88.46	0.77	0.14	5.43	0.00	HS
Haematuria	0.07	0.17	150.0	0.48	0.09	-1.14	0.13	NS
Frequency of micturition (in 24 hrs)	1.23	1.93	56.76	0.47	0.09	-8.23	0.00	HS
Tenderness in renal angle	1.07	0.20	81.25	0.43	0.08	10.93	0.00	HS
Burning Micturition	0.87	0.10	88.46	0.77	0.14	5.43	0.00	HS
Fever	0.00	0.00	0.00					NA
Nausea & Vomiting	0.17	0.00	100.0	0.38	0.07	2.41	0.01	S

H.S. - Highly Significant; S. - Significant

On radiological ground 30% patients were cured, 30% patients were markedly improved, and 20% patients were unchanged and 20% patients were increased in size. (Table No.3)

Table No.3: - Percentage observed on radiological ground for Kidney stone

Variety/Effect	No. of. % of Patients
Cured	30
Markedly Improved	20
Improved	10
Unchanged	20
Increased in size	20

## 5. Conclusion

*Varunadhya lauha* is having better results in expulsion of *Ashmari* and decrease in size. In *Varunadhya lauha* high cure rate was observed in kidney stone. Overall effect of treatment shows (on radiological ground) that 30% of patients were cured, 30% improved, 20% unchanged and 20% increased in size. So, here it can be concluded that *Varunadhya lauha* possesses the properties regarding to disintegration and expulsion of stones and can produce total relief in sign and symptoms of *Ashmari roga* which proves that it is an ideal preparation for the management of *Ashmari roga*.

**Declaration by Authors****Ethical Approval:** Approved**Acknowledgement:** None**Source of Funding:** M.M.M. Govt. Ayurved college, Udaipur. (Rajasthan)**Conflict of Interest:** The authors declare no conflict of interest.**References**

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