“Review of role of Uttarbasti in management of Vatashthila w. s. r. to Benign Prostate Hyperplasia.”

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ABSTRACT:
In Ayurved Samhitas, symptoms of benign prostate hyperplasia are described under vatashthila. The majority of men over the age of 50 years are considered to have urinary symptoms attributing to vatashthila (BPH). Although it is not as much life threatening, its clinical manifestations worsen the patient’s quality of life. It is a senile disease and patient may not be fit for surgery due to cardio-respiratory problems. Uttarbasti has got definite contribution which encourages us to find solution for this burning problem of society. Uttarbasti is a prime approach for vatashthia so this topic was chosen for review.

KEYWORDS: Vatashthila, BPH, Uttarbasti

INTRODUCTION:
Benign prostate hyperplasia is an enlargement of prostate. Symptoms related to BPH is one of the most common problems in the older males. Histological evidence of BPH is found in more than 50% of men in their fifties & nearly 90% of men in their nineties age. As the prostate enlarges, it causes the narrowing of urethra & subsequent partial emptying of bladder, results in many of the problems associated with BPH In modern medicine the conservative treatment includes two classes of drugs which includes-α adrenergic blocking agent and 5 α reductase inhibitors. These drugs when taken for a year result in 20-25% shrinkage of the prostate gland. Also these drugs are expensive in comparison to their effectiveness and these drugs have also some side effects hypotention, headache, dizziness, abnormal ejaculation, decreased libido, impotency, etc. The fact about these drugs is a significant portion of men who try these drugs will subsequently undergo surgical intervention. Prostatectomy is primary approach to benign prostate hyperplasia. Even if the surgery is done, there are high chances of early complications (like hemorrhage, clot retention, bladder neck stenosis, erectile dysfunction etc.) and late complications (like secondary growth, urethral stricture, infection etc.) Considering the complications, recurrence & cost of surgery, it is the need of society to evaluate an alternative option for this most predominant senile
disease. There are 12 types of mutraghata; one of them is Vatashthila. In Sushrut Samhita, vatashthila is grouped under the title of Mutraghata. The general treatment for mutraghata is as follows as the reference Kashay, kalka, Ghruta, leha, paya, kshar, madya, asava, sweda and uttarbasti are the treatments of mutraghata.

Review Of Uttarbasti:
Basti, by the account of all of its contents, performs various functions such as restraining, cleansing, & pacification of doshas as well. It enhances the healthy life and prevents the invasion of the disease.

Classification: Acharya charka has mentioned 3 types of bastis viz.
- Anuwasan basti
- Niruha basti
- Uttar basti

VYUTPATTI:
The term ‘Uttarbasti’ is composed of two words ‘Uttara’ and ‘Basti.
Uttra:According to Shabdkalpadruma, the term Uttra is made of Ut + Tara. The prefix “Ut” & the suffix “Tara” are always used to denote the superior status of Uttarbasti.
According to various commentators, the term Uttara means there by signifying the route of administration.
Basti:
The term Basti is derived from the Verb “Vas” which has got following meaning, according to Siddhanta Kaumudi.

NIRUKTI:
The Basti which is given through Uttaramarga & also having superior qualities is termed as Uttarabastit. However the term “Uttaramarga” can be understood in two ways –
1. Mutramarga in males.

CLASSIFICATION:
Uttarbasti comes under Snehabasti and is similar to AnuvasanaBasti.

APPARATUS:
Bastinetra and Bastiputaka are the two components used in the procedure of Uttarbasti.
Acharya Sushruta has stated to prepare Bastiputaka from the soft skin of the Basti (bladder) of pig, goat or sheep. If these; are unavailable then skin of various birds can be used.

Procedure of Uttarbasti:
The method of administration is different in both males and females but mainly the whole procedure can be divided into three parts.
- Purva Karma
- Pradhana Karma
- Pashchata Karma.

Purvakarma:
Prior to Uttarabasti, Acharya Vagbhata has told to give 2-3 Asthanapana Bastis in order to purify the Malamarga. The dose should be decided according to the condition of the patient. Prior to administration of Uttarabasti, the patient should have bathed; taken food mixed with meat juice or milk and should have voided his faeces and urine. Acharya Sushruta says that Snehana, Swedana should be performed and Yavagu mixed with Ghrita with Kshira be given to the patient.

Pradhana Karma:
The patient should then be seated on a knee high soft seat in a straight and comfortable position. Then his penis should be made erect and Shalaka (probe) smeared with Ghrita should be
inserted into the urethra. If it is passed without any obstruction, then the Bastinetra should be introduced as stated by Acharyas. If it penetrates too far, it may injure the bladder and if insufficiently inserted, the Sneha may not reach its destination. Then, the Bastiputaka is compressed without shaking it, the Aushadhi Dravya is inserted into bladder & the Bastinetra is withdrawn.

Pashchata Karma:
If the given Sneha returns, then Dugdha, Yusha & Bhojana mixed with Mansarasa should be given to the patient at the evening on the same day. If the given Sneha doesn’t return, then observation should be done for one night. If it fails to return, then Shodhanabasti should be administered or Shodhanavarti should be inserted into urethra or anus.

Duration: Two, three or four Snehabasti should be injected in the course of day and night. Such treatment should be done for three days with a gradual increase in the dosage. The procedure should be repeated after an interval or three days in the same manner.

Complication and Management: If excessive burning sensation is felt, then Guda Basti with Kwatha of Sheetavirya Aushadis should be given. All the other complications should be treated similar to the complications of Sneha Basti. The rest of the treatment should be followed like that of Anuvasana Basti.

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<tr>
<td>1.</td>
<td>1998</td>
<td>Clinical evaluation of kshara and Uttarabasti in the management of mootraghata w.s.r. to BPH- Vd. A.S. Kembhavi</td>
<td>Jamnagar</td>
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<td>2.</td>
<td>2001</td>
<td>Role of Uttarabasti in the management of BPH-Vd. Sarveshkumar</td>
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<td>3.</td>
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<td>A clinical study on the role of devadarvyadi kashay and dashamoolasiddha taila uttarabasti in the management of mootraghata w.s.r. to BPH- Vd. N. H. Kulkarni.</td>
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<td>4.</td>
<td>2016</td>
<td>Randomised controlled clinical trial of Narayan Taila Uttarabasti in vatashthila with special reference to Benign prostatic Hyperplasia.</td>
<td>MUHS</td>
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DISCUSSION:
Besides many drugs has been used for the uttarbasti purpose, but media through which these drugs are administered by uttarbasti is common and i.e. tilataila, so we are describing here probable mode of action of tilataila in uttarbasti. Tilataila possesses vata-kapha shamak, mrudukara, sara, suksam, vikasi & vranaropak qualities. It softens the tissue, can penetrate upto the deeper cells & hence increases elasticity. It heals as well as promotes regeneration of the tissue. In benign prostatic hyperplasia, volume of prostate
gland is increased. It can be due to shotha induced by kapha dosha or vyasa induced by vata dosha. As tilataila is vata-kapha shamak, it pacifies them. In the act of uttarbasti tila taila is instilled in the vicinity of urinary bladder along with the urethra. The taila which is instilled in the urinary bladder, is absorbed by mucosa & detrusor muscles of urinary bladder. The poorana of basti is done by tila taila according to Upasnehan Nyaya. The detrusor muscles which become hypertrophied or atonic in case of benign prostatic hyperplasia, are nourished & rejuvenated by tilataila. Hence frequency & urgency of micturition are minimized. Also it helps to improve force of urin stream. The mechanism of detrusor muscles is regained, resulting in lower amount of residual urine volume. The tilataila possesses ropan quality i.e. wound healing property. Due to action of tilataila, the eroded prostatic mucous membrane is healed. It arrests dilatation of prostatic venous plexuses, thereby causes arrest of haematuria. differant taila , ghruta ,having differant ayurvedic properties may be used in place of tilataila only and its action over BPH may be noted, so that better choice of drug can be use to cure BPH.

CONCLUSION:

From above review of uttarbati on vatashthila , the conclusion can be drawn as Uttarbasti is effective in reducing symptoms and post residual volume in vatashthila (benign prostate hyperplasia). But it will need further evaluation with different ayurvedic drugs, so that it may be worth in the management of Benign Prostatic Hyperplasia i.e. Vatashthila.

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