



MANAGEMENT OF *MOOTRAKRICCHRA* WITH SPECIAL REFERENCE TO RENAL PARENCHYMAL DISEASE THROUGH AYURVEDA –A CASE STUDY

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ABSTRACT:

Mootrakricchra is a most common diseases, where individual suffers from difficulty in Micturition. Renal Parenchymal Disease also known as Kidney Parenchymal disease. The parenchyma is a functional part of a kidney that filters blood and makes urine. Renal parenchymal disease occurs as a complication of a wide variety of glomerular and interstitial renal diseases and may accelerate the decline in renal function. Although modern system has wide range of medication, fluid management, low metabolites, and salt intake, dialysis, and Kidney replacement in some complicated cases, there are cases where patients fail to get a desired result. In Ayurvedic System of Medicine, Mootrakricchra Disease, its treatment and formulations are well explained in Ayurvedic Samhita's, which are having a Very Good Results in Treating the Disease from its root causes. The present study of 36 years old male subject, we have noticed the signs and symptoms of Mootrakricchra disease and Rise in the serum creatinine level. To prove the ayurvedic management in Mootrakricchra. There is an utmost important to treat of Mootrakricchra disease, through Ayurvedic line of management.

Keywords – Mootrakricchra, Renal parenchymal disease, Glomerular disease, Dialysis, Serum creatinine, Virechana Karma.

INTRODUCTION

Mootrakricchra is one of the common health problems in clinical practice. The term *Mootrakricchra* derived from two words - *Mootra* and *Kricchra*. The word *Mootra* is derived from 'prasrava' means to ooze. The word '*Kricchra*' is derived from '*kashte*' means causing trouble or painful. The lakshana of *Mootrakricchra* is "*Sukasto mutropaghata*" that means discomfort during micturition^[1]. *Mootrakricchra* is a difficulty or painful micturition.

Trimarmas (Vital parts) described by Ayurveda classics i.e., *Hridaya* (Heart), *Shira* (Head), and *Basti* (Urinary bladder)^[2]. *Trimarmas* are known as the best prana ayatana (where life resides), so we should try to save them by treating the diseases. *Mootrakricchra* is also found as a lakshana in other diseases like *Ashmari*, *Mootrakricchra*, *Mootraja vridhri*, *Arsha*, and *Gulma* etc.^[3]

It is important to treat Urinary tract infections, because if left untreated the infection can spread to the kidneys, which is serious and can cause permanent damage^[4].

The renal parenchyma is a functional part of a kidney that filters blood and makes urine that includes the renal cortex and the renal medulla^[5].

The renal cortex contains approximately 1 to 1.5 million of nephrons^[6], (these have glomeruli which are the primary filterer of

blood passing through the kidney, and renal tubules which modify the fluid to produce the appropriate amount / content of urine). The renal medulla consists primarily tubules or ducts of the collecting system that allow the urine to flow onwards to being excreted.

Renal parenchymal disease occurs as a complication of a wide variety of glomerular and interstitial renal disease and may accelerate the decline in renal function^[7].

Modern system of medicine has wide range of treatment in renal parenchymal disease including medications, fluid management and salt intake, Dialysis and kidney replacement in some complicated cases, there are cases where patients fail to get a desired result.

In Ayurvedic System of Medicine, *Mootrakricchra* Disease, its treatment and formulations are well explained in Ayurvedic Samhita's, which are having a Very Good Results in Treating the Disease from its root causes^[8].

CASE REPORT

A 36 years male patient presented in Shri DGM Ayurvedic Medical College and Hospital, Kayachikitsa OPD with complaints of Giddiness since 1week. Associated with Vomiting, Headache since 1 week. Patient was apparently normal before 1week and gradually noticed above complaints, he consulted

modern hospitals not got symptomatic relief, so he approached for Ayurveda Hospital for evaluation and management.

GENERAL EXAMINATION –

Bp -130/80mmhg, PR-80 bpm, RR-20 c/min, Temperature -96°F.

Cyanosis-absent, Pallor –absent, clubbing-absent.

CVS – S1 S2 Heard, NAD,

RS – B/L NVBS Heard, NAD,

CNS – Conscious and Oriented

Investigations

Serum Creatinine – 4.3mg/dl

Blood Urea – 66mg/dl

Triglycerides – 238mg/dl

SGOT – 45U/L

SGPT – 26U/L

Materials and Methods

Assessment Criteria

Bio chemistry Investigations

1. Serum Creatinine
2. Blood Urea.

TREATMENT GIVEN

The treatment was started with administration of both *Shodhana* and *Shamana* line of Treatment.

Table number – 01 (Shodhana Chikitsa)

Sl. No	Treatment	Duration
01	<i>Snehapana</i> with <i>Mahathikta Gritham</i> 30ml,60ml,90ml	1 st Day, 2 nd Day, 3 rd Day
02	<i>Sarvanga Abhyanga</i> with <i>Dhanavantari Taila</i>	4 th day, 5 th day, 6 th day
03	<i>Sarvanga Nadi Sweda</i>	4 th day, 5 th day, 6 th day
04	<i>Virechana Karma</i> with <i>Trivruth Lehya</i> 40gm	7 th day.

Table number – 02 Shamana Chikitsa (First 1 months).

Sl. No.	Drug	Dosage	Adjuvant	Duration
01	Tab Neeri	1 Tab thrice in a Day (after food)	Water	1month
02	Varunadi Kashaya	3tsp twice a day (before food)	Equal quantity of water	1 month

Table number – 03 (Next 1month Follow up)

Sl.No.	Drug	Dosage	Adjuvant	Duration
01	Tab Neeri	1 tab twice a day (after food)	Water	1 month
02	Punarnava Ghana Vati	1 tab twice a day (after food)	Water	1 month
03	Punarnavadhi Kashaya	3tsp twice a day (before food)	Equal quantity of water	1 month

Table number – 04 (Next 1month Follow up)

Sl.No.	Drug	Dosage	Adjuvant	Duration
01	Tab K-4	1 tab twice a day (after food)	Water	1 month
02	Punarnava Ghana Vati	1 tab twice a day (after food)	Water	1 month
03	Punarnavadhi Kashaya	3tsp twice a day (before food)	Equal quantity of water	1 month

ASSESSMENT CRITERIA

Table number – 05 (Abdominal Ultrasound)

	Findings
Before treatment	Slightly increased bilateral renal echotexture noted – Renal parenchymal disease.
After treatment	No intraperitoneal free fluid noted. Solid intra-abdominal organs appear normal.

Table number – 06 (Biochemistry Investigations)

	Serum Creatinine	Blood Urea
Before Treatment	4.3 mg/dl	66 mg/dl
After Treatment	2.2 mg/dl	63.5 mg/dl

After 1 st follow up	1.9 mg/dl	41.5 mg/dl
After 2 nd follow up	1.18 mg/dl	25.72 mg/dl

DISCUSSION

Mootrakricchra is one of the common most disease affecting the human being, so it is utmost important to treat the diseases. Ayurvedic formulation are explained in the treatment of *mootrakricchra* are applied in this case and patient got recovered from the symptoms.

Varunadi Kashaya ingredients contains properties like Diuretics, Uricostatic, Anti-lithogenic, Antibacterial, Antimicrobial, hence this formulation are taken for the study^[9].

Punarnava acts as a Nephroprotective and Uricosuric (increase the excretion of uric acid in the urine), hence it plays a prominent role in the reduction of clinical symptoms of Renal parenchymal disease^[10].

CONCLUSION

Ayurvedic formulations are useful in treating the disease from its root causes, in the similar way here in this case we have treated the *Mootrakricchra* diseases. Virechana Kamra followed by the Shamana Aushadhis Tab Neeri, Punarnavadi Kashaya, varunadi Kashaya and Punarnavadi Ghana reduced the symptoms and the disease *Mootrakricchra* both subjectively and

objectively.

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