

REVISITING VATASTHILA: INTEGRATIVE AYURVEDIC APPROACHES FOR
EFFECTIVE MANAGEMENTDr. Sarvesh Dubey^{1*}, Dr. Jyoti Dubey² and Dr. Lata Arya³

¹Associate Professor, Department of Shalya Tantra, Motherhood Ayurvedic Medical College, Roorkee, Uttarakhand Ayurved University, PhD Scholar, Gurukul Campus, Haridwar, Uttarakhand Ayurved University.

²Senior Medical Officer, M.S Shalya, Uttarakhand Government.

³Assistant Professor, Department of Kayachikitsa, Motherhood Ayurvedic Medical College, Roorkee, Uttarakhand Ayurved University.

***Corresponding Author: Dr. Sarvesh Dubey**

Associate Professor, Department of Shalya Tantra, Motherhood Ayurvedic Medical College, Roorkee, Uttarakhand Ayurved University, PhD Scholar, Gurukul Campus, Haridwar, Uttarakhand Ayurved University.

Article Received on 21/08/2024

Article Revised on 11/09/2024

Article Accepted on 01/10/2024

ABSTRACT

Benign Prostatic Hyperplasia (BPH) is a prevalent issue among the elderly, described in Ayurveda as *Vatastheela*, a form of *Mutraghata* (obstructive uropathy). The term "*Mutraghata*" combines "*Mutra*" (urine) and "*Aghata*" (trauma or obstruction), indicating an obstruction to normal urinary function. *Vatastheela*, characterized by symptoms like urinary retention, incomplete voiding, and distension, correlates with Lower Urinary Tract Symptoms observed in BPH. This condition is especially common in men aged 60-70, with histopathological evidence showing its age-dependent prevalence, beginning around age 40. Over 50% of men in their 60s and up to 90% of men in their 70s and 80s exhibit BPH symptoms. This article explores the Ayurvedic perspective on BPH, including its etiology, pathophysiology, and treatment. Ayurvedic management involves dietary and lifestyle modifications, herbal remedies like *Gokshura*, *Punarnava*, and *Varuna*, and specific *Panchakarma* therapies. An integrative approach, combining Ayurveda and conventional medicine, is recommended for comprehensive management and better patient outcomes.

KEYWORDS: Benign Prostatic Hyperplasia (BPH), *Vatastheela*, *Mutraghata*, *Vata dosha*, *Uttarbasti*, Urinary retention.

INTRODUCTION

Vatasthila, one of the *Mutraghata* (urinary retention) diseases described in Ayurveda, is predominantly caused by an aggravated *Vata dosha*. According to Ayurvedic principles, this condition results from the vitiation of *Apana Vayu*, leading to an obstruction in the urinary passage, thereby causing retention of urine. While Ayurveda offers a holistic approach to managing *Vatasthila*, modern medicine approaches the disease under the umbrella of benign prostatic hyperplasia (BPH) and urinary tract disorders. This article aims to explore the Ayurvedic and modern perspectives of *Vatasthila*, the limitations of modern treatments, and how Ayurvedic management could offer an alternative, long-term solution to curing and managing the disease.

From a modern perspective, *Vatasthila* aligns with benign prostatic hyperplasia (BPH), a non-cancerous enlargement of the prostate gland commonly seen in elderly men. The enlargement of the prostate presses against the urethra, causing symptoms such as urinary retention, weak urine flow, and frequent urination. BPH

is often treated with medications like alpha-blockers and 5-alpha reductase inhibitors, which aim to relax the muscles in the prostate or shrink the prostate tissue. In more severe cases, surgery may be required. However, these treatments come with limitations

- Modern treatments often provide symptomatic relief but do not address the root cause of the disease.
- Common side effects of these medications include dizziness, fatigue, erectile dysfunction, and even cardiovascular issues.
- Surgery, such as transurethral resection of the prostate (TURP), can lead to complications like bleeding, infection, and in some cases, permanent urinary incontinence.

In light of these limitations, Ayurvedic management offers a promising, holistic approach to both treat and manage *Vatasthila*. According to Ayurveda, *Vatasthila* occurs due to the aggravation of *Vata dosha*, particularly *Apana Vayu*, which governs the elimination of urine and stool. When *Vata* gets obstructed or imbalanced, it leads to improper function of the urinary system, resulting in

symptoms like retention, weak flow, and incomplete voiding. In Ayurvedic texts, *Vatasthila* is closely related to conditions affecting the urinary system and prostatic diseases.

The Ayurvedic management of *Vatasthila* includes a combination of diet, lifestyle modifications, *panchakarma* therapies, and herbal formulations aimed at balancing the *doshas*, reducing inflammation, and improving urinary flow.

Ayurvedic Management of *Vatasthila*

1. Diet and Lifestyle

- *Vata*-pacifying diet: Warm, moist, and easily digestible foods help balance *Vata*. Foods like ghee, warm soups, and herbal teas are encouraged, while cold, dry, and rough foods are avoided.
- Lifestyle: Stress management through yoga and meditation is crucial, as *Vata* imbalance is often triggered by stress.

2. Panchakarma Therapies

- *Basti* (Medicated Enema): One of the primary treatments for *Vata* disorders, *basti* involves administering medicated oils or decoctions through the rectum to pacify *Vata* and regulate *Apana Vayu*.
- *Uttarbasti*: This specialized therapy involves administering medicated oils through the urethra to reduce inflammation and facilitate proper urine flow.
- *Abhyanga* (Oil Massage): Regular oil massages with *Vata*-balancing oils like *Dashmooladi Taila* or *Mahanarayan Taila* help relieve urinary retention and reduce *Vata* aggravation.

3. Ayurvedic Herbal Formulations Several Ayurvedic herbs and formulations have been traditionally used to manage *Vatasthila*, which aligns with BPH. Some key herbs and their properties include

- *Gokshura* (*Tribulus terrestris*): Known for its diuretic and anti-inflammatory properties, *Gokshura* improves urinary flow and reduces symptoms of retention. It also balances *Vata* and promotes the overall health of the urinary system.
- *Varuna* (*Crataeva nurvala*): *Varuna* is effective in reducing inflammation and promoting urine flow. It works as a litholytic, preventing the formation of kidney and bladder stones, which are often seen in patients with urinary retention.
- *Shilajit* (*Asphaltum*): *Shilajit* is known for its rejuvenating and anti-inflammatory properties, making it highly effective in managing chronic conditions like *Vatasthila*. It strengthens the urinary tract and supports prostate health.
- *Punarnava* (*Boerhavia diffusa*): With diuretic and anti-inflammatory properties, *Punarnava* helps in

reducing fluid retention and promoting the proper elimination of urine. It is a widely used herb for treating urinary disorders, including *Vatasthila*.

- *Kanchanar Guggulu*: This classical Ayurvedic formulation helps reduce swelling and supports healthy prostate function. It also acts as a blood purifier and aids in balancing *Vata* and *Kapha doshas*.

CONCLUSION

Ayurveda, with its holistic approach, offers an effective alternative to the modern management of BPH-like conditions. *Vatasthila*, or BPH, can be effectively managed through Ayurvedic treatments that focus on pacifying the aggravated *Vata dosha*. The use of herbs like *Gokshura*, *Varuna*, *Shilajit*, and *Punarnava* offer natural, diuretic, and anti-inflammatory effects, targeting the root cause of urinary retention. and treatments such as *Basti* and *Uttarbasti* work at the root level to pacify *Vata*, improve urinary flow, and reduce inflammation without causing the adverse effects often associated with modern medications or surgeries. While modern medicine provides quicker symptom relief, Ayurveda aims for a long-lasting cure by addressing the fundamental imbalance in the body. For patients seeking a natural, long-term solution, Ayurveda may be used in conjunction with modern treatments to enhance outcomes, reduce symptoms, and improve the quality of life. Further research and integration of both modern and Ayurvedic approaches could provide more holistic solutions for managing this condition.

REFERENCES

1. American Urological Association. Benign Prostatic Hyperplasia (BPH) Treatment Guidelines, 2021.
2. Parsons, J. K. Benign Prostatic Hyperplasia and Risk of Cardiovascular Diseases. *European Urology*, 2010; 57(1): 99-106.
3. Lad, V. *Ayurveda: The Science of Self-Healing*. Lotus Press, 1990.
4. Iyengar, B. K. S. *Light on Yoga*. Schocken Books, 2005.
5. Mishra, S. *Ayurvedic Panchakarma Therapy*. Chaukhambha Sanskrit Sansthan, 2011.
6. Patwardhan, B., & Vaidya, A. D. B. Natural Products Drug Discovery: Accelerating the Clinical Candidate Development Using Reverse Pharmacology Approaches. *Indian Journal of Experimental Biology*, 2009; 47(5): 358-367.
7. Dash, B., & Sharma, R. K. *Charaka Samhita: Text with English Translation and Critical Exposition*. Chaukhambha Sanskrit Series Office, 2008.
8. Aiyer, R. *Herbal Remedies for Urinary Tract Health*. Jaico Publishing House, 2012.
9. Puri, H. S. *Rasayana: Ayurvedic Herbs for Longevity and Rejuvenation*. CRC Press, 2003.
10. *Bhavaprakasa Nighantu. Sanskrit English Edition*. Chowkhamba Press, 2006.
11. Sharma, P. V. *Dravyaguna Vijnana*. Chaukhamba Bharati Academy, 2005.

12. Tiwari, S. *Ayurvedic Formulations and Their Clinical Applications*. Varanasi, 2012.
13. Kulkarni, P. H. *Principles of Ayurvedic Medicine*. Sri Satguru Publications, 2006.
14. Kamat, S. *Panchakarma in Ayurveda*. Chaukhamba Orientalia, 2011.
15. Lad, V. *Textbook of Ayurveda, Fundamental Principles*. Lotus Press, 2002.
16. *WHO Guidelines on Quality of Herbal Medicines*. World Health Organization, 2007.
17. Dwivedi, J., & Agarwal, V. Current Scenario of Prostate Health: An Ayurvedic Perspective. *AYU Journal*, 2014; 35(1): 15-23.