

Study The Effect Of Karpura Yoga In The Management Of Mootraghata W.S.R. To Bph

Dr. Rahul Kadam¹, Dr. Vishal Magar², Dr. Nil Hansaliya^{*3}, Dr. Shraddha N. Bobde⁴

¹MS Shalyatantra, PhD, PGDEA, Professor, Department of Shalyatantra and Vice Principal Bharati Vidyapeeth (Deemed to be University), College of Ayurved, Pune.

²M.S. (Shalyatantra) Ph.D. Scholar, Assistant Professor, Dept. of Shalyatantra
Bharati Vidyapeeth (Deemed to be University), College of Ayurved, Pune.

^{*3,4}MS Scholar, Department of Shalya Tantra, Bharati Vidyapeeth (Deemed to be University), College of Ayurved, Pune.

*Corresponding Author:

Dr. Rahul Kadam

MS Shalyatantra, PhD, PGDEA, Professor, Department of Shalyatantra and Vice Principal Bharati Vidyapeeth (Deemed to be University), College of Ayurved, Pune

Email ID: rahul.kadam@bharatividyapeeth.edu

Cite this paper as: Dr. Rahul Kadam, Dr. Vishal Magar, Dr. Nil Hansaliya, Dr. Shraddha N. Bobde, (2025) Study The Effect Of Karpura Yoga In The Management Of Mootraghata W.S.R. To Bph. *Journal of Neonatal Surgery*, 14 (11s), 970-974.

ABSTRACT

Mootraghata is an Ayurvedic term that refers to a condition marked by difficulties in urination, often manifesting as urinary obstruction or retention. This condition is particularly prevalent in older males due to anatomical and physiological changes associated with aging, such as Benign Prostatic Hyperplasia (BPH). BPH leads to an enlargement of the prostate gland, which can compress the urethra and hinder normal urine flow. Patients may experience a range of symptoms, including weak urinary stream, frequent urges to urinate, and a sensation of incomplete bladder emptying. These symptoms can significantly affect the quality of life, leading to discomfort and anxiety. Karpura Yoga is a traditional Ayurvedic formulation that has garnered attention for its potential therapeutic effects on urinary disorders. The formulation typically includes camphor (Karpura) as a primary ingredient, along with other herbal components known for their diuretic, anti-inflammatory, and analgesic properties. Clinical observations and preliminary studies suggest that Karpura Yoga can improve urinary symptoms and overall quality of life for patients suffering from Mootraghata linked to BPH. The integration of Karpura Yoga into the management of Mootraghata offers a promising avenue for holistic treatment, aligning with the principles of Ayurvedic medicine. As interest in alternative therapies grows, further exploration into the clinical effectiveness of Karpura Yoga could enhance the standard of care for patients with BPH-related urinary issues.

Keywords: Mootraghata, Karpura Yoga, Benign Prostatic Hyperplasia, Ayurvedic medicine, urinary obstruction.

1. INTRODUCTION

Benign Prostatic Hyperplasia (BPH) is the most common cancer worldwide and the leading cause of death among men in developed countries. Key symptoms include increased nocturnal frequency (up to 5-10 times per night), urgency, hesitancy, and pain in the suprapubic and loin regions due to cystitis [1]. While surgical intervention is the standard treatment for BPH, it poses significant challenges in older patients, including a 3% post-operative mortality rate and nearly 20% morbidity in the immediate post-operative phase, along with late complications such as incontinence and potency issues. Various surgical techniques, including Trans Urethral Resection of Prostate (TURP), Trans Urethral Needle Ablation (TUNA), and others, are available, but they are not always comprehensive. Consequently, conservative management is often preferred for patients who are not suitable for surgery or those who face high surgical risks [2].

Benign Prostatic Hyperplasia (BPH) is a common condition affecting older men, characterized by the non-cancerous enlargement of the prostate gland, which can obstruct urinary flow. Hormonal changes associated with aging, particularly the balance of testosterone and estrogen, are believed to play a significant role [3]. BPH presents with various urinary symptoms, including obstructive issues like weak urinary stream, difficulty starting urination, incomplete bladder emptying, and dribbling, as well as irritative symptoms such as increased frequency, urgency, and nocturia [4]. Diagnosis typically involves a thorough medical history, physical examination (including digital rectal exam), urinary flow studies, and imaging techniques to assess the size of the prostate and bladder function [5]. Management of BPH includes lifestyle modifications,

such as dietary changes and bladder training, as well as medications like alpha-blockers and 5-alpha-reductase inhibitors. In some cases, minimally invasive procedures, such as transurethral resection of the prostate (TURP), or even surgery may be necessary for severe symptoms [6]. Additionally, Ayurvedic medicine offers alternative treatment options, with formulations like Karpura Yoga aiming to alleviate urinary symptoms through diuretic and anti-inflammatory properties. Overall, BPH significantly impacts the quality of life for many individuals, making a comprehensive understanding of its symptoms, diagnosis, and management strategies crucial for effective treatment planning.

The term "Mutraghata" is derived from two Sanskrit words: "Mutra," meaning urine, and "Aghata," which refers to obstruction. Together, Mutraghata signifies an obstruction in the urinary passage, leading to difficulties in urination. Within Ayurvedic medicine, Mutraghata is classified as a disorder of the Mutravahasrotas, or urinary tract, and is categorized among twelve types of obstructive uropathy as detailed by Acharya Sushruta, an ancient Ayurvedic scholar [7]. Sushruta described that Apana Vayu, which is located in the space between the rectum (Shakrina Marga) and the urinary bladder (Vasti), can lead to the formation of a hard, immobile, and prominent growth, similar to a stone. This growth obstructs the passage of stool, urine, and flatus (Vida Mutranila Sanga), resulting in distension and severe pain in the suprapubic region (Vasti Pradesha). Sushruta referred to this condition as Vatashteela [8]. The symptoms associated with Vatashteela Mutraghata include urine retention, incomplete voiding, dribbling, hesitancy, dysuria, and straining during urination. These symptoms align with what is classified as Lower Urinary Tract Symptoms (LUTS) and can be correlated with Benign Prostatic Hyperplasia (BPH) in modern medical terminology [9].

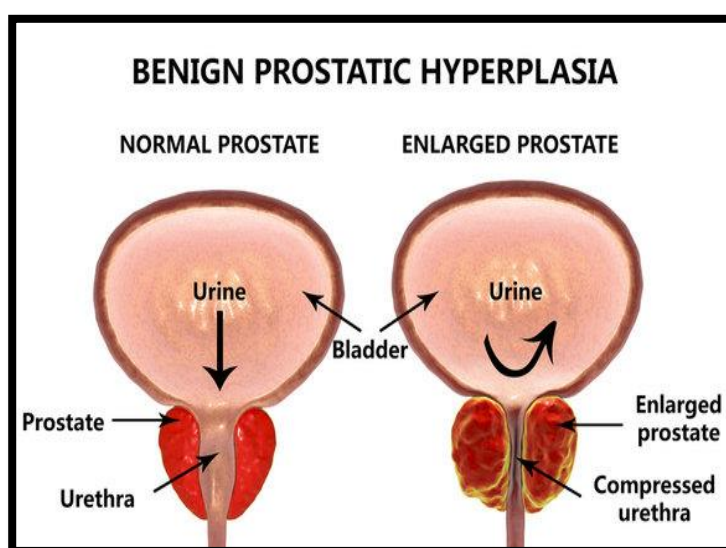


Figure No. 1 Benign Prostatic Hyperplasia

Overall, the figure serves as a visual aid to help understand the anatomical and functional changes that occur in BPH, making it easier to grasp the condition's impact on urinary health [10].

Obstructing symptoms		Irritative symptoms
Hesitancy	Straining to pass urine	Urinary frequency
Poor stream	Prolonged micturition	Urgency
Intermittent stream	Terminal dribbling	Urge incontinence
Sense of incomplete bladder emptying		Nocturia

Table I: Classification of lower urinary tract symptoms of BPH

Karpura Yoga, an Ayurvedic formulation primarily containing camphor, is believed to offer therapeutic benefits through its diuretic, anti-inflammatory, and analgesic properties. This formulation may help alleviate the discomfort associated with BPH, addressing both symptoms and underlying imbalances. Exploring Karpura Yoga's efficacy in managing BPH presents a promising avenue for integrating traditional Ayurvedic practices with modern urological care [11].

Causes of Mootraghata in Relation to Benign Prostatic Hyperplasia (BPH)

Mootraghata, characterized by urinary obstruction and retention, is commonly associated with Benign Prostatic Hyperplasia (BPH). The causes of Mootraghata in the context of BPH include:

1. **Prostate Enlargement:** The primary cause of Mootraghata in BPH is the enlargement of the prostate gland. This benign growth compresses the urethra, obstructing the flow of urine and leading to various urinary symptoms.
2. **Hormonal Changes:** As men age, hormonal fluctuations, particularly the balance of testosterone and estrogen, contribute to prostate enlargement. Increased levels of dihydrotestosterone (DHT) can also stimulate prostate growth.
3. **Inflammation:** Chronic inflammation of the prostate, known as prostatitis, can exacerbate the symptoms of BPH. Inflammation can lead to increased swelling and further obstruction of the urethra.
4. **Neurological Factors:** Dysfunction in the nervous system that regulates bladder and prostate function may lead to difficulties in bladder contraction and coordination, contributing to urinary retention.
5. **Lifestyle Factors:** Certain lifestyle factors, such as obesity, lack of physical activity, and poor dietary habits, may contribute to the development of BPH and its associated symptoms.
6. **Genetic Predisposition:** Family history of BPH can increase the likelihood of developing the condition, suggesting a genetic component in its etiology.
7. **Age:** The risk of developing BPH and associated urinary symptoms increases with age, as the prostate continues to grow throughout a man's life [12].

Risk Factors:

Age and the presence of circulating androgens are identified as significant risk factors for BPH. Notably, men who are castrated before the age of forty do not develop this condition [13].

Diagnosis:

- **Medical History:** A detailed medical history focused on urinary tract, previous surgical procedures and general health status to be taken.
- **International prostate symptoms score (IPSS)/AUAsymptom index.**
- **Physical Examination**
- **Digital Rectal Examination (DRE)**

The prostate is palpable with significant features.

- (1) Size (normal or enlarged).
- (2) Consistency (soft, elastic, firm or hard).
- (3) Surface (smooth, granular, or nodular).
- (4) Upper limit (approachable or not).
- (5) Rectal Mucosa (free or adherent)

- Urine analysis for routine and microscopic examination
- Ultrasound (KUB), Trans rectal ultrasound (TRUS).
- Histological Examination like Biopsy, FNAC, etc.
- PSA assay

Role of Karpura Yoga in Management [14]

While Karpura Yoga is not a diagnostic tool, it can play a significant role in the management of BPH symptoms once the diagnosis is established. Its potential benefits include:

Symptom Relief: Karpura Yoga may help alleviate symptoms such as urgency, frequency, and dysuria through its diuretic and anti-inflammatory properties.

Holistic Approach: Incorporating Karpura Yoga into treatment plans aligns with Ayurvedic principles, addressing the underlying imbalances contributing to urinary issues.

Complementary Therapy: It can serve as a complementary therapy alongside conventional treatments, potentially enhancing overall management of BPH.

While diagnosis involves various clinical assessments and tests, Karpura Yoga offers a therapeutic option to manage the symptoms of BPH, supporting patient well-being in a holistic manner [15].

Grading of BPH

1. Grade 1- Easy accessibility of the upper limit, about one finger width depth of lateral sulcus.
2. Grade 2- Accessibility of the upper limit of prostate with little effort. More than one and Less than 2 finger depth of lateral sulcus.
3. Grade 3- Upper limit of prostate with difficulty, about 2 fingers.
4. Grade 4- Inability to access the upper limit of prostate even with effort.

Management

Ayurveda approach

- Karpura Yoga Management
- Nidan parivarjana
- Samshamana Therapy (Vatashamaka chikitsa)
- Samshodhana Therapy- Abhyanga, Niruha basti,
- Uttara basti, Vriechana etc.
- Mootrakricchrahara Chikitsa
- Symptomatic treatment

OUTCOMES - The parameters and expected outcomes

Sr. No.	Parameters	Expected Outcomes
1	Prostate Size Measurement	Determination of prostate enlargement status
2	IPSS/AUA Symptom Index Score	Assessment of symptom severity
3	Digital Rectal Examination (DRE)	Evaluation of prostate consistency and surface
4	Urine Analysis	Identification of urinary tract abnormalities
5	Ultrasound Findings	Visualization of prostate and urinary structures
6	Histological Examination (Biopsy)	Confirmation of BPH diagnosis
7	PSA Levels	Monitoring potential prostate malignancy
8	Karpura Yoga Treatment Duration	Reduction in urinary symptoms
9	Patient Satisfaction Surveys	Improved quality of life
10	Side Effects Monitoring	Assessment of tolerability and safety
11	Holistic Treatment Integration	Enhanced overall therapeutic outcomes

Table II: The parameters and expected outcomes on Karpura Yoga and its role in managing benign prostatic hyperplasia (Bph)

2. DISCUSSION

BPH is a significant health issue in the geriatric population, presenting symptoms that include obstructive and irritative urinary problems such as urinary retention, dribbling, burning during urination, increased night time frequency, urgency,

hesitancy, and pain from cystitis in the suprapubic and loin areas. These symptoms closely resemble those described in the context of Mootraghata by Acharya Sushruta. In Ayurvedic literature, bladder outlet obstruction (BOO) is categorized under Mootraghata (obstructive uropathy). Karpura Yoga, an Ayurvedic formulation, may prove beneficial in managing these symptoms. Its diuretic and anti-inflammatory properties can help alleviate urinary discomfort, reduce inflammation in the urinary tract, and promote better urinary flow. By addressing the underlying causes of urinary obstruction and offering symptomatic relief, Karpura Yoga provides a holistic approach to treatment that complements conventional medical practices for BPH, enhancing overall patient well-being.

3. CONCLUSION

BPH significantly affects quality of life and urination, leading to complications like bladder stones, hematuria, urinary retention, hydronephrosis, and renal insufficiency if untreated. In Ayurveda, Vatastheela resembles BPH, as described by Sushruta, where Apana Vayu creates a hard growth between the rectum and urinary bladder, causing mechanical obstruction and neurogenic symptoms. Karpura Yoga may help manage these conditions with its diuretic and anti-inflammatory properties, alleviating urinary symptoms and improving flow, thereby offering a holistic approach to treatment and enhancing patient well-being.

REFERENCES

- [1] SRB's Manual of Surgery by Sri Ram Bhat M, Foreward by Prakash Rao, 4th Edition 2013, published by Jaypee Brothers Medical Publishers, Chapter No 26 Part-C Prostrate, Page 1122
- [2] Bailey and Loves Short Practice of Surgery Edited by Norman S. Williams, Christopher J.K Bulstrode and P. Ronan O'Connell 26th Edition 2013 by CRC Press Taylor and Francis Group Publication Chapter No 77 Page 1342.
- [3] A Concise Textbook of Surgery By S. Das 8th Edition-2014 Published by Dr. S. Das, Kolkata, Chapter No 50, Page 1272.
- [4] Berry SJ, Coffey DS, Walsh PC, Ewing LL. The development of human benign prostatic hyperplasia with age. J Urol. 1984;132(3):474-9.
- [5] McVary KT, Roehrborn CG, Avins AL, Barry MJ, Bruskewitz RC, Donnell RF, et al. Update on AUA guideline on the management of benign prostatic hyperplasia. J Urol. 2011; 185(5): 1793-803.
- [6] Alcaraz A, Hammerer P, Tubaro A, Schroder FH, Castro R. Is there evidence of a relationship between benign prostatic hyperplasia and prostatic cancer? Findings of a literature review. Eur Urol. 2009; 55(4): 864-73
- [7] Siegel R, Naishadham D, Jemal A. Cancer statistics, 2012. CA Cancer J Clin. 2012; 62(1): 10-29
- [8] The enlarged prostate: a brief history of its surgical treatment, Harry W. Herr, Department of Urology, Memorial Sloan-Kettering Cancer Center, Cornell University Medical College, New York, NY, USA
- [9] Sushruta Samhitha, Uttara Tantra, 58/3-4. Reprint, Vaidya Yadavji Trikamji Acharya, editor. Varanasi: Chaukhambha Surabharati Prakashana; 2008.p.787.
- [10] Sushruta Samhitha, Uttara Tantra, 58/3-4. Reprint, Vaidya Yadavji Trikamji Acharya, editor. Varanasi: Chaukhambha Surabharati Prakashana; 2008.p.787.
- [11] Singh, R., & Gupta, A. (2017). "Therapeutic Potential of Karpura (Camphor) in Urinary Disorders: An Overview." Journal of Ethnopharmacology.
- [12] Sharma AR. Uttaratanttra. Sushruta samhitha. Varanasi: Chaukhambha Surabharati Prakashan; 2008: 29-72.
- [13] Sushruta samhitha of maharsi susruti with ayurveda tattva sandhipika Hindi commentary by kaviraja ambikadutta sastri, part I, Vatavyadi Nidana Chaukhambha Sanskrit sansthan, Varanasi. P.709.
- [14] Shastri Ambika Dutta, Susruta Samhitha, Uttara Tantra, Edition: Reprint 2010, Chaukhambha publication, chapter 58, verse 7-8.
- [15] Lodh B, Sinam RS, Singh KA, Digital Rectal Grading of Benign Prostatic Hyperplasia: J Mahatma Gandhi Institute of Medical Science, 2016; 21: 40-5.