AYURVEDIC TREATMENT OF UTI WITH SINGLE DRUG THERAPY

Dr. Kumari Seema*1, Dr. Rajeev Kumar2 and Dr. Sunil Gupta3

1PG Scholar, Dept. of Shalya, Gurukul Parisar, Haridwar, UAU, Uttrakhand.
2Assistant Professor, Dept. of Shalya, Gurukul Parisar, Haridwar, UAU, Uttrakhand.
3Associate Professor, Dept. of Shalya, Gurukul Parisar, Haridwar, UAU, Uttrakhand.

ABSTRACT

UTI are the most common infection suffered by the women and for it is much common in males. It occurs in about 3-5% of girls and 1% of boys. During first year of life it is much common in male child, in females it becomes much common after 1-2 year, but it is strikingly more common in females, with a male and female of 1:10. Though a lot of antibiotic therapies are available in modern medicine but we see a lot people suffering from UTI because people get resistant to antibiotics. But in Ayurveda with the use of Akal Dravya (single drug therapy) which does not show resistant, and are easily available and does not show any side effects, we can treat UTI.

KEYWORDS: UTI, women, anti-biotic, Ayurveda, Akal-Dravya.

INTRODUCTION

UTI has been a frustrating problem since a long time, it mostly occurs in people who don’t take care of their hygiene. It is 10 times more common in women than men, as women have a short length of urethra than male that’s why infection from the anal canal spreads easily to the urethra causing cystitis, pyelonephritis etc. Though a lot of antibiotic treatment is available in modern medicine but still its not enough as some people may not afford such costly antibiotics, or people who can afford them often become resistant to it in such cases. Ayurvedic management can be helpful UTI in Ayurveda is broadly termed under the heading Mutravahasrotas Roga. UTI occurs with the imbalance in Pitta Dosha so with the balancing of Pitta Dosha with the help of diet, lifestyle, yoga and use of Akal Dravya (single drug therapy) it can be efficiently treated, drugs used gokshura (tribulus terrestris), punarnava...
(boerrhavia diffusa), guduchi (tinospora cordifolia), chandan(santalum album), shilajit (mineral Pitch, asphaltum) etc.

Etiology

- Colonic bacteria are the main cause of UTI’S
- Escheria coli is responsible for 75-90% of all infections in females followed by kebsiella and proteus, while proteus is more common in males.
- Common pathogen in both sexes are staphylococcus and enterococcus.
- Cystitis is specially caused by a particular adenovirus.

Clinical Manifestations and Classification

1. Clinical Pyelonephritis
- Pyelonephritis is most common and serious bacterial infection of children in less than 24 month of age who have fever without any focus of infection.
- Fever, nausea, vomiting, malaise, abdominal pain, sometimes diarrhea.
- Newborns show non-specific symptoms such as irritability, poor feeding which lead to weight loss.
- Renal abscess is followed by pyelonephritis which may be secondary to a primary bacterimea.

2. Cystitis
- Symptoms like dysuria, urgency, frequency, supra pubic pain, incontinence indicates that bladder involvement has occurred.

3. Asymptomatic bacteriuria
- As the name asymptomatic itself explains there are no manifestations of infection but the urine culture is positive. it is most common in girls of pre-school or school age. it incidence decreases with increasing age.
- The condition do not cause any renal injury so the only symptoms are day or night incontinence or perineal discomfort.

4. Xanthogranulomatous Pyelonephritis
- It present as a renal mass, a acute or chronic infection.
- Renal calculus, obstruction and infection with proteus or contribute in developing a lesion, which requires total or partial nephrectomy.
Pathogenesis
All UTI are ascending in nature, the bacteria arise from the fecal flora, multiply in the perineum and enter the bladder via the urethra. rarely it occur by haematogenous origin.

Risk Factors
- Female gender
- Vesico-urethral reflex
- Suppresses the urge to urinate.
- Not drinking enough water
- Who refuse to use others bathroom
- Obstructive uropathy resulting in hydronephrosis and urinary stasis.
- Constipation causing voiding dysfunction
- Neuropathic bladder.

Diagnosis: A UTI can be diagnosed on the basis of symptom or urine analysis and a urine culture can be done to rule out the type of infection and start on appropriate therapy.

Investigations
- Routine blood investigating
- Urine analysis
- Urine culture
- Imaging studies like USG, voiding cystourethrography.

Management of Uti: ACUTE CYSTITIS – Is treated immediately to prevent pylonephritis. If symptoms do not subside than urine is sent for culture and empirical antibiotics are started immediately.
- Sulfamethaxazole 30/kg/day+trimethoprim 6mg/kg/day it is given in two doses
- Nitrofurantoin 5-7mg/kg/day
- If pyelonephritis is present hospitalization and antibiotic therapy for 10 to 12 days is given.
- After 1 week antibiotic therapy culture may be done to ensure that urine is sterile.
In case of recurrent UTI predisposing factor is identified.
Raflux (VUR)
Voiding dysfunction
Constipation.
DISCUSSION
UTI is a very common problem and we all know that there are lot of treatment available there are so many akal dravya(single drug therapy)in which a single drug/herb is enough to treat symptoms of uti and eradicate it from its root. Commonly drugs used for uti are shilajit(mineral –p, asphaltum), giokshura(tribulus terrestris), punarnava(boerrhavia diffusa), guduchi(tinospora cordifolia), chandan(santalum album).

CONCLUSION
As we know in females UTI is a very common problem that is why these drugs with no side effects can be a boon for the patients of UTI, these drugs are easily available and are cheap also.

REFERENCES