

BENIGN PROSTATE HYPERTROPHY (BPH): A AYURVEDIC REVIEW ARTICLE

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ABSTRACT

Background: old age is a difficult state in itself, in this situation they have to face very physical and mental conditions. In old age, prostate is the most common problem found in men. Mostly it occurs after 40-50 years. Although it is not a Cause of Death factor, but still causes a lot of difficulty in daily routine work. In BPH infection, cancer and other diseases which related to prostate does not included. But if left untreated it can lead to very serious problems. According to *ayurvedic samhita*, *Asthila* is described as similar to BPH. *Vata* outbreaks which are manifested by dietary disorders and remedies, so according to its theory it not only eliminates the disease and its symptoms but also plays an important role in removing its causative factors. **Conclusion:** *Ayurveda* science deals with some basic principles, along with

maintaining health, also remove the disorders of atrophy. BPH is a serious problem of old age so by the science we can control causative factor and also give patient symptomatic relief or eliminate disease permanently according to its grade. *Asthila* is very similar to BPH so treatment principal can be same. *Shodhan* and *sanshaman* are therapies which explain under *mootragraha* help to manage Benign Prostate Hypertrophy.

KEYWORDS: Prostate, *Asthila*, *Ayurveda*.

INTRODUCTION

In *ayurveda*, asymmetry of *doshas* is considered to be the main factor in the origin of any

disease. We can consider the *Asthila* Described by *Acharya Susuruta* as similar to BPH. Due to improper *Ahara-Vihara* (Poor Dietary and routine activity), Excessive excursion and some other factors, *Vata dosha* aggravates especially *Apana vayu* and finally the pathology of disease occurs. BPH is basically prostate gland enlargement. This enlargement is non malignant. Prostate enlargement occurs due to old age changes especially hormonal imbalance like androgens and oestrogens. In Modern medicine conservative treatment and surgical procedure like prostatectomy, Transurethral resection of prostate (TURP), Cryotherapy etc. There are lot of complications like Impotency, Gynecomastia, Generalized weakness etc.

Symptoms of prostate enlargement is unable to empty complete bladder, dribbling of urine, low pressure, nocturia, urgency etc. these are feature of lower urinary tract symptom they create major difficulty towards patient. *Vritta granthi* (ovale or round shape mass), *Unnata granthi* (which is palpable), *Asthilavat* (hard consistency) these symptoms found in *Vata-asthila* which can be correlated with BPH. In *ayurveda shodhan* and *saman chikitsa* like churna (powder), Kalka (paste), Kwatha (Decoction) and some Ghrita preparations are described under *mutraghata*. So management should be adopted as *Asthilavat* or symptomatic.^[1]

Epidemiology

- Accordingly as per the research Histological prevalence of 8%, 50% and 80% in the 4th, 6th and 9th decades of life respectively.^[2] As its incidence also depends of several factors like- Race, Build, Lifestyle etc.

Nidana (causes/ Causative factors)^[3]

- Vata propak ahara-vihara
- Vegaavrodha (suppression of urges)
- Katu-Teekshna ahara/aushada
- Adhyasan (overeating)
- Ajeernashana (having meal after indigestion)

Samprapti (pathology)

Due to *Nidan* (*Vegaavrodha*, *Ajeernashana*, *Tiktakaturas* etc.) vitalisation of *vata*, Particular *Apana vayu* (type of *Vata*) aggravates. This vitalised *vata* acts over lower urinary system (*Basti*) results as enlargement of prostate (*vata asthila*).

Samprapti ghataka (Factors involve in pathology)

Dosha	Apana vayu
Dooshya	Ras, Rakta, sweda, Mootra
Agni	Dhatuagni, Jatharagni
Sathana	Pakvashya (GIT)
Adhistan	Basti (Urinary bladder)
Srotas	Mootravaha Srotas
Sroto dusti type	Sanga, vimargaman, Siragranthi
Sadhyata	Krichasadhya (difficult to cure)

Risk factors^[4]

There are three primary risk factors which can be result as BPH after age of 40 years.

- **Age-** BPH risk increase with Age. 50 % risk for 50 year of age and about 80% for age of 80 years.
- **Gender-** it affects only men and more likely in metabolic syndrome- like Blood pressure, High level of blood glucose, overweight, high level of S. Cholesterol.
- **Background-** 5 years earlier than High risk of African men rather then American men.

Symptoms

- Incomplete Emptying of Bladder
- Urgency
- Frequency
- Nocturia
- Staining
- Incontinence
- Weak Stream

Diagnosis

BPH is very similar to urinary tract infection, Prostate cancer, Prostatitis, Cancer, Neurogenic bladder. A digital rectal exam will be done for evaluation of size of prostate and its abnormalities.

- General examination (Blood test, Urine Routine/ Microscopic)
- Prostate Specific antigen (PSA)
- Urine flow study
- Cystoscopic examination
- Cystometrogram

- Transrectal ultrasound

Grade of BPH^[5]

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

In modern medicine there is Hormonal therapy, surgical procedure were advice to patient.

Ayurveda deal as

- Nidan parivarajana
- Sanshaman Therapy (*Vatashamaka chikitsa*)
- Sanshodhana Therapy- Abhyanga, Niruha basti, Uttara basti, Vriechan etc.
- Mootrakricchahar chikitsa
- Symptomatic treatment

Some drug formulation like medicated *Swaras* (Fresh juice), *Kalka*, *Ghrita*, *Choorna* etc. are

- Nidigdhikadi swarasa
- Amalaka swarasa
- Mustadi kalka
- Abhyadi kalka
- Baladi ghrita
- Mahabala ghrita
- Pasanabhedadi churna
- Shwadanstra ghrita
- Vyoshadi choorna
- Tilvaka ghrita
- Chandraprabha vati
- Gokshuraddi guggulu

- Changeri ghrita

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