

# Role of Til Taila Uttarbasti in the Management of Urethral Stricture - A Case Study

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**Abstract:** Urethral stricture is a common urological problem affecting the human being. There is currently progressive increase in the incidence of this condition due to the improved living standards, the increased number of permanent catheter bearers, the surge of sexually transmitted diseases (STDs), incidence and misuse of transurethral diagnostic or therapeutic instrumentation. For such type of disorder Acharya Sushruta had already suggested Uttarbasti as an effective treatment modality. Hence to prove the efficacy of Uttarbasti in Urethral Stricture a single case study was carried out in the Dept. of Shalya Tantra, KDMGS Ayurved Medical College, Chalisgaon (Maharashtra). The patient was treated on the basis of signs and symptoms with 20 ml mixture of TilTaila with Madhu & pinch of Saindhava as Uttarbasti given for 7 days on daily basis. The significant improvement was observed in the signs and symptoms after the completion of 7 sittings of Uttarbasti.

**Keywords:** Urethral Stricture, TilTaila, Uttarbasti

## 1. Introduction

Acharya Sushruta (Father of Surgery) had recommended non invasive procedures for many surgical disorders. But to prove the efficacy of the same we must re - establish the same principle with the help of modern assessment parameters.

Urethral Stricture is one of such disorder related to the urinary system in which the modern treatment modalities failed to a greater extent as they develop complications or the disease tend to recur. Studies have shown that the peak prevalence is at 40 - 45years of age and is very rare below 9 years. In developing countries, infection is the predominant cause of stricture unlike the developed world where trauma is predominate.

Hence to get a rid of such problem we must find out the non - invasive or para - surgical treatment modality. Acharya Sushruta & Charaka had already described Uttarbasti for the management of many obstructive urinary disorders. To prove the efficacy of Uttarbasti in urethral stricture a single case study was carried out which got encouraging result.

## 2. Literature Survey

Acharya Sushruta mentioned various types of uropathies under the headings of Mutraghata and Mutrakruhchawhich we can correlate with Supression of urine and Dysuria respectively. Urethral stricture is one of the disease condition in which there is a narrowing of lumen of urethra due to various reasons such as Faulty catheterisation, post urethral surgery, urinary tract infections like Gonorrhoea, Syphilis, etc. in Sushrut Samhita, this condition is described as Mutrotsang.

### Aim and Objective

- To study the effect of *Til Tail Uttarbasti* in the management of Urethral Stricture.
- To find out alternative non - invasive treatment modality to overcome the symptomatology of Urethral Stricture.

## 3. Material and Methods

The study was conducted at Shalyatantra Department of KDMGS Ayurved Medical College, Chalisgaon as per the ethical guidelines. A 55yr old male presented with complaint of Burning during micturition and Difficulty in passing urine. In Retrograde Urethrogram there was a stricture at penile urethra. The diagnosis was confirmed as Urethral Stricture. The patient underwent the treatment with Til Tail Uttarbasti for 7 sittings daily.

### Material

- 1) Til Tail 20 ml
- 2) SaindhavLavan 1 gm
- 3) Madhu 5 ml

### Equipments

- 1) Sterile disposable 20cc syringe.
- 2) Infant Feeding Tube No.8.
- 3) Sterile cotton pad.
- 4) Emergency drugs to prevent shock.

### Assessment parameters

Gradation of symptoms present at first visit and followed up after each Uttarbasti is as follows -  
Severe Moderate Mild Complete relief  
Symptoms +++ ++ + -

### Investigations -

- 1) Routine blood and urine investigations were carried out before and after treatment.
- 2) Urethrogram was carried out before and after treatment.

### Procedure of Uttarbasti

#### 1) Purvakarma

- Informed written consent was taken before the procedure
- Investigations.
- Patient was instructed to pass the natural urges before Uttarbasti.
- Blood pressure and Pulse rate monitored.

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- Position - Supine.
- Aseptic conditions maintained by local antiseptic solution, sterile drapes, sterile syringe and autoclaved Til Tail.

## 2) Pradhankarma

Under all aseptic precaution 20ml of autoclaved medicated til tail was taken into sterile syringe. Its nozzle inserted into the luer mount of Infant feeding tube. Now slight pressure applied to the piston so the tube filled totally with til tail (so as to avoid the passage of air). Then the tube inserted into external urethral meatus upto the stricture site. Lukewarm

medicated oil inserted with slow and uniform pressure over a period of 30 - 40 seconds. Patient was kept in same position for 15 minutes.

## 3) Paschatkarma

Patient was instructed not to micturate for next 2 hours. After procedure Blood pressure and pulse rate was taken. Patient was advised to avoid straining and unsafe intercourse. The procedure was carried out daily for 7 days.

## Clinical Observations:

**Table 1: Clinical Observations according to symptoms**

Sr. No.	Symptoms	After 1 <sup>st</sup> Sitting	After 2 <sup>nd</sup> Sitting	After 3 <sup>rd</sup> Sitting	After 4 <sup>th</sup> Sitting	After 5 <sup>th</sup> Sitting	After 6 <sup>th</sup> Sitting	After 7 <sup>th</sup> Sitting
1.	Burning Micturition	+++	++	+	+	-	-	-
2.	Frequency of Micturition	++	++	++	+	+	-	-
3.	Straining at Micturition	+++	++	+	+	+	-	-
4.	Decreased stream of Micturition	+++	+++	++	+	-	-	-
5.	Prolonged Micturition	+++	+++	++	+	-	-	-
6.	Retention of urine	++	+	+	-	-	-	-

**Table 2: Investigations**

Investigations	Before treatment	After treatment
Total Leucocyte Count	6400/cmm	6000/cmm
Hb Percentage	11.2 gm%	11.2 gm%
Blood Urea	25 mg/dl	25 mg/dl
Serum Creatinine	0.9 mg/dl	0.9 mg/dl
Urine Sugar	Nil	Nil
Urethrogram	Stricture at penile urethra and Narrowing of lumen	Lumen increased

## 4. Results

Effect of treatment in subjective parameters has been shown in Table 1. The result observed in this study after 7<sup>th</sup> sitting of Uttarbasti is 100%. Routine investigations and Urethrogram was carried out before and after treatment which showed increase in calibre of urethral lumen as in Table 2.

## 5. Discussion

Injury/damage to the urethra is the most common cause of stricture. This can result in the formation of scar tissue at the site of the injury, resulting decrease in calibre of urethral lumen. For example an injury may occur during medical procedures to look into the bladder via the urethra (i. e. Cystoscopy), radiotherapy treatment may cause damage to the urethra. A 'fall astride' onto the frame of a bike can cause urethral damage. A less common cause of urethral strictures is infection. This could include sexually transmitted infections such as gonorrhoea or chlamydia, or infection as a complication of long term use of a catheter to drain the bladder. Infection may cause inflammation in the tissues in and around the urethra which can result in scar tissue being formed at the site of the inflammation in the urethra, causing a stricture.

### Probable mode of action of Uttarbasti

Til tail which is the main ingredient possesses Ushna, Tikshna, Sukshma, vata - kaphaprashamakrimighna and vranaropak property. It increases the elasticity of tissues thus

softening and healing of scar tissue took place. Saindhavlayan has Chedana, Bhedana, Margavishodhankara and shariravayavamrudukar property. So it softens the scar tissue. Madhu has Vranashodhana, Lekhana, Ropana, Strotovishodhan, Kshatkshayaghna property. Thus the medicated oil acts in two ways as snehan of scar tissue leading to mardavata and lekhan of soft tissue leading to passage of vata and kapha.

Thus the study proved that the Til Tail Uttarbasti has a curative effect in Urethral Stricture. It shows encouraging results in decreasing the symptoms of disease as compared to the available treatment modalities.

## 6. Conclusion

From this study we can conclude that, -

- 1) Til Tail Uttarbasti is clinically effective in the management of Urethral Stricture.
- 2) This type of treatment modality is devoid of any side effects.

The overall study shows that Til Tail acts on Urethral Stricture due to its Vata - kaphaprashamak and Vranaropak property. Even though repeated and intensive follow - up would be required to establish the efficacy of above approach, the results obtained in this study are hopeful enough to believe in the fundamentals of Ayurveda and could provide some guidelines for future works, to certify the effectiveness of the heritage of Ayurveda in helping the needy individuals and to lead a more meaningful and healthy life through cost - effective and whole some solutions.

## 7. Future Scope

In this case study it has been confirmed that Uttarbasti is an effective modality in the management of urethral stricture. This study should be conducted on a large sample size to get more accuracy.

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