

CASE STUDY

A Successful Case Study of Kidney Stone with Ayurvedic Management

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ABSTRACT

Ashmari (urinary stones), one of the Ashta Mahagada in Ayurveda, causes intense pain and urinary complications due to obstruction (Sroto-sanga) in the Mutravaha Srotas. This case study highlights the Ayurvedic management of a 62-year-old male presenting with radiating flank pain, nausea, vomiting, and burning micturition. Ultrasonography revealed multiple renal calculi and a 12 mm bladder stone. The patient refused lithotripsy and opted for Ayurvedic treatment. He was administered Chandraprabha Vati, Gokshuradi Guggulu, Gokshur, Punarnava, Pashanabheda Churna and Shweta Parpati. Dietary changes and increased fluid intake were advised. By the second follow-up, the patient passed a triangular stone in urine. Complete symptomatic relief and resolution of pain were achieved by the third follow-up. Repeat USG confirmed absence of calculi. This case proves the potential of Ayurvedic formulations to dissolve and expel urinary stones non-surgically. Ayurvedic management, when chosen appropriately, can offer a safe, effective, and non-invasive alternative to surgery in select cases of Ashmari (urinary stones).

Keywords: Ashmari, urinary calculi, non-surgical management, herbal medicine, Ayurveda

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INTRODUCTION

The term Ashmari is composed of two Sanskrit words: "Ashma", mean stone or gravel, and "Ari", mean enemy. This name reflects the severe pain and distress caused by the condition, as if the stone were an enemy to the body.[1] Acharya Sushruta illustrated the development of Ashmari using the example of a newly made earthen pot, describing how deposits can gradually build up inside, leading to stone formation. Due to its intensity and the suffering, it brings, Ashmari is listed among the Ashta Mahagada, the eight most serious and challenging diseases.[2] The urinary system, particularly the kidneys and bladder (Basti), is the main location where Ashmari develops. The incidence of Mutrashmari (urinary stones) is steadily rising, largely due to factors such as unhealthy dietary habits, sedentary lifestyle, mental stress, physical strain, and increasing environmental pollution. Mutrashmari, or nephrolithiasis, can disrupt the normal process of urine formation and its passage, leading to complications in urination. According to Ayurveda, the Basti (urinary bladder) is the primary seat of Vata Dosha, which governs the formation and flow of urine. In cases of Mutrashmari, there is Sroto-sanga (obstruction) in the Mutravaha Srotas (urinary channels) due to the presence of stones.[3] The following case report proves the effectiveness of Ayurvedic medications in the successful treatment and management of kidney stones (Ashmari).

CASE PRESENTATION

A 62 years old male patient was suffering from radiating pain from flanks to lower abdomen and groin associated with nausea and vomiting Burning micturition for 2 months. All symptoms had unpredictable onset and relief.

History of present illness

Patient was apparently Healthy 1 year before. In the last 2 month he experienced radiating pain from flanks to lower abdomen and groin associated with nausea and vomiting, Burning micturition. He taken opinion of Modern, diagnosed as Kidney stone. Advised for lithotripsy but unwilling to do so.

Family History:

No significant family history of kidney stones.

<p>Personal History he had no history of Diabetes Mellitus, Hypertension, Asthma, Hypothyroidism or any type of comorbidities.</p>	<p>On examination Temperature- 97.0 degree Fahrenheit Pulse- 82/min BP- 130/90 mm/hg Spo2- 99 percentage RR- 18/min Pallor-Absent Icterus-Absent</p>
<p>Astavidha Pariksha Nadi-Vata-Pitta Mala-Mala Stambh Mutra-daha Jihva-Sam Shabda-Prakrut Sparsh-Ushna Druka-Prakrut Aakruti-Madhyam</p>	<p>Systemic Examination RS-AE=BS CVS-S1S2 NORMAL CNS-Conscious Oriented GIT-Liver, Spleen, kidney Not Palpable</p>

USG Report:- (12/11/2024) RIGHT KIDNEY 3mm calculus in mid pole, LEFT KIDNEY 3mm calculus in mid pole and lower pole, URINARY BLADDER: Well distended. Wall appears normal. 10x12mm calculus.

Table 1: Treatment follow-up

Sr no.	Name of Drug	Dose	Time	Frequency	Anupana
1	<i>Chandraprabha Vati</i>	2 tabs	After food	Twice a day	Lukewarm water
2	<i>Gokshuradi Guggulu</i>	2 tabs	After food	Thrice a day	Lukewarm water
3	Gokshur churna Punarnava churna Pashanabheda churna	Each 1 gm	After food	Twice a day	Honey
4	<i>Shwet parpati</i>	1 pinch	After food	Twice a day	Honey

Additionally, the patient was advised to increase water intake and avoid protein-rich foods such as eggs, meat, soybeans, and dairy products, as well as oxalate-rich items like spinach, tomatoes, ladyfinger, carbonated beverages, and calcium supplements.

Follow up & outcome:

The patient was initially asked to follow up after 10 days and then second follow-up after 15 days. Within the first follow up nausea and vomiting had subsided, and there was significant relief in burning micturition. During the second follow-up, the patient reported mild pain on the right side of the abdomen, while burning micturition showed completely improvement and patient bring the triangular stone which was expelled out with urine stream. And By the third follow-up, the abdominal pain had completely resolved and no additional complaints were noted. The patient was advised to a repeat ultrasonography of the whole abdomen after two months of treatment.

Table 2: USG Abdomen Report Before and After Treatment for renal calculi:

Parameter	Before Treatment	After Treatment
USG Finding	Right kidney-3mm calculus Left kidney-3mm calculus Urinary bladder-10x12mm calculus	No Renal Calculi Detected
Size of Calculi	3 mm in both kidney and 10x12 mm in urinary bladder	No Calculi Found
Location	Both Kidney and urinary bladder	No Calculi Found
Hydronephrosis	Absent	Absent
Conclusion	Renal Calculus Present	No Evidence of Renal Calculus

DISCUSSION

Ashmari (Urinary Calculus) is a disease of the *Mutravaha Srotas*. Its detailed description is found in the classical texts of *Ayurveda*, including *Charaka*, *Sushruta*, and *Vagbhata*. According to these *acharyas*, in

individuals who neglect regular purification therapies (such as *Panchakarma*) and consume unwholesome diets or follow improper lifestyle habits, the *Kapha dosha* becomes aggravated. This vitiated *Kapha* combines with urine and enters the *Basti* region (referring to the kidneys, ureters, and urinary bladder). As a result, it causes obstruction in the urinary tract, leading to the formation of *Ashmari* (urinary stones). *Sushruta* has specifically emphasized that those who do not undergo regular *Panchakarma* and indulge in unhealthy dietary and lifestyle practices are more prone to the recurrence of kidney stones.

Composition of Prescribed Medicines

Chandraprabha vati

Mode of action: *Chandraprabha Vati* is highly effective in managing urinary calculi, urinary tract infections, and painful urination. It supports healthy kidney function by promoting the excretion of excess uric acid and helps maintain optimal uric acid levels within the kidneys. This formulation is beneficial in conditions such as chronic kidney disease, kidney stones, and cystitis. *Chandraprabha Vati* is indicated in all types of *Mutrakrichra* (dysuria). The ingredients like *Vacha*, *Guduchi*, *Haridra*, and *Pippali* exhibit diuretic, anti-inflammatory, and antibacterial properties. Additionally, as a *Rasayana*, it helps enhance bladder tone and overall urinary tract health. [4]

Gokshuradi Guggulu

Mode of action: It promotes urine production, helping to ease painful urination through its Tridosha-balancing and Mutral (diuretic) effects. Additionally, by enhancing urine flow, it supports the management of urolithiasis and helps prevent stone formation. [5]

Gokshur churna

Mode of action: The sweet taste (*Madhura Rasa*), unctuous quality (*Snigdha Guna*), and sweet post-digestive effect (*Madhura Vipaka*) help in pacifying *Vata dosha*. The cold potency (*Sheeta Veerya*) acts as a diuretic (*Mootrala*) and relieves *Pitta*. The drug as a whole is *Tridosha Shamaka*, meaning it balances all three doshas. *Gokshura* is particularly effective in preventing urinary stones due to the presence of potassium nitrate. [6]

Punarnava churna

Mode of action: The drug possesses *Laghu* (light), *Ruksha* (dry), and *Sheeta* (cold) *Guna*, which contribute to its dosha-pacifying properties. It has a combination of *Rasa*—*Madhura*, *Tikta*, *Kashaya*, and *Katu*—making it effective in balancing various doshas. Despite its *Sheeta Guna*, it has an *Ushna Virya* (hot potency), indicating strong metabolic action. The post-digestive effect (*Vipaka*) is *Katu* (pungent), enhancing its digestive and purifying capabilities. Pharmacologically, the drug exhibits multiple actions: it is *Kaphagna*, *Pittahara*, *Anulomana* (carminative), *Shothahara* (anti-inflammatory), *Mutrala* (diuretic), *Dipana* (appetizer), and *Rechana* (mild laxative), making it a versatile remedy in the management of various disorders. [7,8]

Pashanabheda churna

Mode of action: The astringent (*Kashaya*) and bitter (*Tikta*) tastes help in alleviating *Kapha dosha*. The *Laghu* (light) quality aids in scraping and disintegrating the urinary stone, while the *Snigdha* (unctuous) quality pacifies *Vata dosha*. The *Sheeta Veerya* (cold potency) functions as a diuretic (*Mootrala*) and also soothes *Pitta*. Due to its specific action (*Prabhava*), the formulation is *Ashmarighna* (effective in dissolving stones) and balances all three doshas (*Tridoshahara*). [9]

Shwet parpati

Surya kshara (kalmi sora, potassium nitrate), *sphatika* (purified potash alum), *navsadara* (purified ammonium chloride). [10]

Mode of action: *Shweta Parpati* acts primarily through its *Mutral* (diuretic) and *Tridosha-shamak* (*Tridosha-balancing*) properties. It increases urine output, which helps flush out the urinary tract and provides relief in conditions like *dysuria* (painful urination) and burning micturition. By enhancing urine flow, it helps in the elimination of urinary crystals and reduces the risk of stone (urolithiasis) formation. Its ingredients, such as potassium nitrate (*Shora*) and ammonium chloride (*Nausadar*), contribute to its action by maintaining urinary pH and promoting diuresis. *Shweta Parpati* also helps reduce local inflammation and irritation in the urinary tract, offering symptomatic relief in conditions like *mutrakrichra* (dysuria) and *mutraghata* (urinary obstruction). [10]

CONCLUSION

This study suggests that cases of *Ashmari* (urinary stones) with smaller stone size can be effectively managed through Ayurvedic treatment. Although Acharya *Sushruta* recommended surgery when shaman (conservative) therapy fails, it is advisable to attempt Ayurvedic medical management before opting for surgical intervention. In this case, a combination of *Chandraprabha Vati*, *Gokshuradi Guggulu*, *Gokshur*,

Punarnava, Pashanabheda Churna and shwet parpati helped in break down the pathogenesis of *Ashmari*, providing complete relief from symptoms like burning micturition, dysuria and promoting the expulsion of stones. While this single case highlights the potential of conservative Ayurvedic management without adverse effects, larger-scale studies are necessary to validate these findings.

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