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**CASE REPORT: MANAGEMENT OF SHAYYAMUTRATA
(NOCTURNAL ENURESIS) WITH AYURVEDIC MEDICINE****Dr. Kalpesh Dattani*¹ and Dr. Joyal Patel²**

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ABSTRACT

Shayyamutrata(Nocturnal Enuresis) is an involuntary urination while asleep. Nocturnal enuresis is a serious problem that affects children as well as their families. The prevalence of enuresis is about 15-25% of children at 5 years of age, 8% of 12 years old boys and 4% of 12 years old girls. This disease mainly involves *kapha-pittadosha* and *Mutravahasrotas*, drugs like *Bramhi*, *Shankhapushpi*, *Vangabhasma*, *Vidangachoorna* and *Agnitundivati* are used for treatment. Patient found complete relief after 5 weeks of treatment without any complications. *Shayyamutrata* is considered as one of the behavior disorders and Ayurveda suggests pharmacological as well as psychological treatment for the disease.

KEY WORDS: *Shayyamutrata*, Bed wetting, nocturnal enuresis, *BramhiChoorna*, *VangaBhasma*, *AgnitundiVati*.

INTRODUCTION

Nocturnal enuresis, commonly called bedwetting, is involuntary urination while asleep after the age at which bladder control usually occurs.^[1] Embarrassment, lack of control, and low self-esteem are only a few emotional repercussions that the child endures. However, it is not only the child who is affected; the family also faces its own psychological challenges and economic impacts that are involved in caring for the child.^{[2], [3]} The Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV), defines the criteria for enuresis to be: voiding of urine at least two occurrences per week for at least 3 months; the child must be at

least 5 years of age(chronologically or developmentally); and the child's urinary incontinence must not be due exclusively to the direct physiological effects of a substance or a medical condition. The three main causes of primary nocturnal enuresis include nocturnal polyuria, bladder over-activity at night, and disorder of arousal.^[4]

In Ayurvedic classics, the brief description regarding *Shayyamutrata* is found in *Sharangadhara Samhita* and *Vangasena Samhita*. *Srotovarodha* and vitiation of *Sadhaka*, *Tarpaka Kapha*, *Pachaka Pitta*, *Manovaha Srotas* and *Atinidra* are the factors responsible for development of *Shayyamutrata*.^[5] Ayurveda suggests importance of pharmacological as well as psychological treatment for the disease. A drug which is nerve tonic (psychotherapy) and able to increase bladder control and tone of bladder muscles with *Grahi*, *Stambhana* and *Mutrasangahniya* properties can be able to reverse the pathology of *Shayyamutrata*.^[6]

CASE REPORT

Patient History

An eight year-old male child with chronic episodes of nocturnal enuresis visited the OPD of Shree Gulabkunverba Ayurved Chikitsalaya, Jamnagar. He had complaints of nocturnal incontinence since childhood. He has consulted three different doctors for same complaints and took medicine for one and half year. He had to forcibly withdraw from social gatherings due to prolonged habit of bedwetting. He seemed to be physically and emotionally normal but had a sense of embarrassment due to bedwetting habit. The patient's mother reported that the pregnancy and child's hospital delivery was normal and not reported any gross congenital anomalies at the time of birth. The patient was breast fed for the first five months following his birth and formula fed for the remainder of his first year. In addition, the patient repeatedly suffered from respiratory allergies and took allopathic and Ayurvedic medicine for same.

History: No history of developmental delay, UTI, Constipation, abuse, stress or family history of bed wetting.

Clinical observations

- Appetite : Normal
- Digestion : Normal
- Stool : 1-2 times a day (constipation)
- Urine : Normal during the day without any wetting Bedwetting only at night
- Tongue : Slightly coated

- Pulse : 84/ min (*vata*predominance)
- P/ A : Non specific
- Psychological : Sense of embarrassment and avoiding night out with friends.
- Observation : Patient avoided drinking water in the evening due to fear of bedwetting

Physical Examination: Abdominal, spinal, neurological and genital examination was normal.

Investigations: Urine routine, USG of abdomen and pelvis, thyroid profile were normal ruling out structural anomalies, hormonal issues and infections.

Diagnosis: *Shayyamutrata* (Primary non-mono symptomatic nocturnal enuresis).

TREATMENT

❖ Medicine Given on 1st Consultation

1. *Bramhichoorna* - 1.5 gm

Shankhapushpichoorna- 1.5 gm

VangaBhasma - 125 mg

(Combination of choorna × 2 times before food with honey)

2. *VidangaChoorna* - 2 gm × 2 times with *Guda* (Jaggery)

3. *AgnitundiVati* - 1-0-1 (after food with water) for 7 days

❖ Advice

- Remove blame/shame from child
- Recommend collaborative approach between child, parents, teachers, doctor
- Void at least 5–6 times per day instead of holding on.
- Encourage voiding prior to bed

❖ On 1st & 2nd follow up - Same medicine for 14 days

❖ After 21 days Patient had increased functional bladder capacity, resolved constipation, resolved urinary urgency, but continues to wet the bed on most nights.

❖ On 3rd follow up - Patient is ask to stop *VidangaChoorna* and continue rest two medicine for 14 days

- ❖ A complete improvement is seen after 5 weeks of treatment with good appetite, sound sleep and regular bowel movement.

DISCUSSION

Nocturnal enuresis affects approximately 10% of all children at 7 years of age, with decreases in population of children affected at older ages. As millions of children have the condition, little is truly understood about its cause and medical interventions often lack effectiveness.^[7] Nocturnal enuresis is a serious problem that affects children as well as their families. The prevalence of enuresis is about 15-25% of children at 5 years of age, 8% of 12 years old boys and 4% of 12 years old girls.

Ayurvedic medicine like *Vangabhasma* and *Agnitundivati* showed urine holding properties (*Mutrasan-grahaniya* action) as well as weak musculature of bladder especially sphinctric tone and provides better flow of urine during maturation hence ultimately lesser amount of residual volume of urine and play an important role in the *Samprapti Vighatana* of the disease. *Bramhi Choorna* and *Shankhpushpi Choorna* helps in improving the mental status of a child whereas *Vidanga choorna* acts as deworming. These all herbs are highly effective for managing this disorder since their combination works by dual action; control bladder urination and reduces mental and physical stress as well.

CONCLUSION

Shayyamutrata is common problem amongst children and great care along with treatment need to be taken to control disease consequences in early age. Counseling along with drug therapy proved to be more effective treatment. We described the resolution of nocturnal enuresis in an 8 year old child receiving Ayurvedic medicine for 5 weeks. We support more research to evaluate the cause and effect of this medicine and restoration of healthy physiology in children, including amelioration of nocturnal enuresis.

REFERENCES

1. Koff SA. Enuresis. In: Walsh, Patric C. eds., Campbell's Urology, 7th ed. Philadelphia: W. B. Saunders 1998; 2065.
2. Hjalmas K, Arnold T, Bower W, et al. Nocturnal enuresis: an international evidence based management strategy. J Urol. 2004; 171(6pt2): 2545-2561.

3. Rodnick A, Rodnick P. Resolution of childhood nocturnal enuresis following subluxation-based chiropractic care: A retrospective case report. *J PediatrMatern&Fam Health – Chiropr.* 2010 Oct 19: 159-162.)
4. Ramakrishnan K. Evaluation and treatment of enuresis. *Am Fam Physician.* 2008 Aug 15; 78(4): 489-96.
5. Sachin R Bhagwat and V. U. Gawai: Ayurvedic management of shayyamutrata (Enuresis): A literature review, *Int J Ayu Pharm Chem (IJAPC)*, 2015; 3(2): 240-244).
6. Dr. BrahmDutt Sharma, Dr. DurgeshNandini Sharma, Dr. Puneet Kumar Garg, Dr. Nitesh Vyas and Deepika; A review article on enuresis and it's herbal management, *wjpmr*, 2017; 3(6): 85-87.
7. VandeWalle J, Rittig S, Bauer S, Eggert P, Marschall-Kehrel D, Tekgul S. Practical consensus guidelines for the management of enuresis. *Eur J Pediatr.* 2012; 171(6): 971-83.