



HETU AND SAMPRAPTI OF BENIGN PROSTATIC HYPERPLASIA IN GERIATRICS ; AN OBSERVATIONAL STUDY

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ABSTRACT

BPH affects quality of ageing process in male. Current medication on BPH can improve the symptoms but fails to control prostate development This research work intends to identify food & lifestyle related causative factors of BPH in turn wants to establish a relation between causative factors & factors involved in disease progression in Ayurvedic perspective in Geriatric Patients. **METHODOLOGY : TYPE OF STUDY-** Retrospective observational study. **SOURCE OF DATA-** Diagnosed patient of BPH by USG (Abdomen pelvis/prostate) with symptoms of BPH.

METHOD OF COLLECTION OF DATA-

- A special case paper proforma was designed to study BPH in Ayurvedic perspective. Male patients above 60 years of age, diagnosed with BPH by USG showing enlargement of prostate including prostate smooth & without nodules with clearly defined median sulcus along with LUTS attributed to prostate are included in the study.
- Male patients below 60 year of age following any of the criteria for prostatic carcinoma, prostate abscess, prostatic cyst, prostatitis & subjects with any major surgical illness especially related to prostate enlargement are excluded from the study.
- LUTS attributed to prostate problem is considered as a subjective parameter and IPSS score as objective parameter are used for the study.

PLACE OF STUDY Bharati Vidyapeeth (Deemed to be University) Ayurved Hospital, Pune-411043.

OBSERVATIONS Katu rasa Atisevan, Shimbi Dhanya, more physical work are the main Aaharaj and Viharaj Hetu. Patients taking alcohol are at a higher risk of this disease. The observations have been elaborated & discussion were made on the basis of observations & results & literary review. Aahar, Vihar , Manas hetu are responsible for manifestation of BPH.

Patients taking alcohol are at a higher risk of this disease.

KEYWORDS : Shimbi Dhanya, Geriatric.

INTRODUCTION

BPH affects quality of ageing process in male. Current medication on BPH can improve the symptoms but fails to control prostate development This research work intends to identify food & lifestyle related causative factors of BPH in turn wants to establish a relation between causative factors & factors involved in disease progression in Ayurvedic perspective in Geriatric Patients.

MATERIAL AND METHODS

METHODOLOGY :

Type of Study- Retrospective observational study.

Source of Data- Diagnosed patient of BPH by USG (Abdomen pelvis/Prostate) with symptoms of BPH .

METHOD OF COLLECTION OF DATA

A special case paper proforma has been designed to study BPH in Ayurvedic perspective & all information has been collected as per the case paper format.

The BPH symptoms have been assessed by International Prostate symptom score, & categorized as mild, moderate and severe as per score. and documented. All diagnosed patients of BPH have been thoroughly analyzed in Ayurvedic perspective as per case paper proforma & 50 patients have been studied.

Inclusion Criteria

Male Patients of all socio economic group above 60 years of age presenting with lower urinary tract symptoms (LUTS) attributed to Prostate problems & diagnosed with Benign Prostatic Hyperplasia by U.S.G (abdomen pelvis/Prostate) showing enlargement of Prostate and per rectal examination indicating Prostate smooth and without nodules with clearly defined median sulcus will be taken for study.

Exclusion Criteria

Patients below 60yr age group diagnosed with carcinoma Prostate or having any of the following sonographic criteria for prostatic carcinoma- well- circumscribed hypoechoic regions, external asymmetry of the gland, increase in anteriorposterior diameter ratio, irregularity of the prostatic capsule. Diagnosed patients of Prostate abscess, prostatic cyst and prostatitis. Subjects with any major medical or surgical illness especially related to Prostate enlargement were excluded from study.

SUBJECTIVE PARAMETER

The patients presenting following LUTS (Lower Urinary tract symptoms) attributed to Prostate problem will be considered for study:

- Feeling of incomplete bladder emptying.
- Frequency of urine.
- Intermittency.
- Urgency of urine.
- Weak stream.
- Strainful micturition.
- Nocturia.

OBJECTIVE PARAMETER

International Prostate Symptom Score (IPSS) will be used for charting disease severity.

Score Severity

SCORE	SEVERITY
1-7	MILD
8-19	MODERATE
20-35	SEVERE

Place Of Study

Bharati Vidyapeeth (Deemed to be University) Ayurved Hospital , Pune-411043.

DISCUSSION AND RESULTS

Table 2(B) Observation Tables

Table 1. Division Of Patients According To Age Distribution

AGE	NUMBER OF PATIENTS	% OF PATIENTS
60-70	24	48%
70-80	14	28%
80-and above	12	24%

Table 2 . Assessment Of Symptoms By IPSS

SEVERITY	SCORE	NUMBER OF PATIENTS	% OF PATIENTS
SEVERE	20-35	34	68%
MODERATE	8-19	14	28%
MILD	1-7	2	4%

Table 3. Assessment Of Symptoms By Prostate Volume

GRADE	VOLUME	NUMBER OF PATIENTS	% OF PATIENTS
GRADEI	21-30cc	16	32
GRADEII	31-50cc	24	48

GRADEIII	51-80cc	9	18
GRADEIV	80cc&above	1	2

Table 4. BP In Ayurvedic Perspective: Division Of Patients According To Their Prakruti

DOSHA PRAKRUTI	NUMBER OF PATIENTS	% OF PATIENTS
VATAPITTAJ	24	48%
VATAKAPHAJ	21	42%
PITTAVATAJ	5	10%

Table 5. Assessment Of Mutravaha Srotas Lakshanas

LAKSHANAS	SCORE
SAKASHTA MUTRAPRAVRUTTI	172
ALPAALPA MUTRAPRAVRUTTI	166
MUHURMUHUMUTRAPRAVRUTTI	141
ANIYANTRIT MUTRAPRAVRUTTI	139
VARAMVAR MUTRATA	138
NAKTA MUTRATA	107

Table 6. Associated Lakshanas Observed In BP

SYMPTOMS	NO.OF PATIENTS	% OF PATIENTS
DAURBALYA	40	80%
BASTITODA	39	78%
KARSHYA	34	68%
KAMPA	33	66%
MALAVASHTAMBHA	30	60%
ATYADHIK TRISHNA	26	52%
ANNABHILASHA	20	40%
ASHRADDHA	17	34%
SANDHISHOOLA	16	32%

Table 7 Assessment Of Type Of Oja-vikriti & The Oja-kshaya Lakshanas Observed In The Study.

Table 7 (A) assessment Of Type Of Oja- Vikriti

OJA-VIKRUTI TYPE	NO. OF PATIENTS	% OF PATIENTS
OJA-KSHAYA	46	92%
OJA-VYAPAT	27	54%
OJA-VISRANS	22	44%

Table 7 (B) Assessment Of The Oja-kshaya Lakshanas

OJA-KSHAYA	NUMBER OF PATIENTS	% OF PATIENTS
DAURBALYA	40	80%
VYATHIT INDRIYA	27	53.3%
LOSS OF LUSTURE	27	53.3%
RAUKSHYA	27	53.3%
BHAYA	20	40%
UNSTABLE MIND	13	26.7%

Table 8. Assessment Of Hetu : Aahar Rasa In Patients

AAHAR RASA	NUMBER OF PATIENTS	% OF PATIENTS
KATU	41	82%
TIKTA	24	48%
MADHURA	24	48%
AMLA	23	46%
KASHAYA	15	30%
LAVAN	11	22%

Table 9. Assessment Of Aahar As Per Aahar Type

AAHAR TYPE	NUMBER OF PATIENTS	% OF PATIENTS
SHIMBI DHANYA	44	88%
MIX DIET	33	66%
ABHISHYANDI	28	56%
VIRUDDHA	27	54%
PARYUSHIT	26	52%

Table 10. Assessment Of Shimbi Dhanya

SHIMBI DHANYA	NUMBER OF PATIENTS	% OF PATIENTS
MAKUSHTHA	36	72%
CHANAK	25	50%
NISHPAVA	22	44%
KALAYA	22	44%

Table 11. Assessment Of AAHAR-SEVAN (Kala & Matra)

MEAL TIMING	NUMBER OF PATIENTS	% OF PATIENTS
IRREGULAR	29	58%

ALPASHAN	29	58%
REGULAR	21	42%

Table 12. Assessment Of Viharaj Hetu (occupation)

OCCUPATION	NO. OF PATIENTS	% OF PATIENTS
FARMER	24	48%
FACTORY WORKER	7	14%
EMPLOYEE	5	10%
COBBLER	3	6%
AUTODRIVER	3	6%
LABOURER	2	4%
TAILOR	2	4%
FERIWALA	1	2%
SECURITY GUARD	1	2%

Table 13. Assessment Of Pattern Of Sleep

NIDRA	NUMBER OF PATIENTS	% OF PATIENTS
BHOJANPASCHAT DIWASWAAP	49	98%
KHANDIT NIDRA	44	88%
LATE SLEEP	26	52%

Table 14. Assessment Of Vegavrodha

VEGAVRODHA	NUMBER OF PATIENTS	% OF PATIENTS
MUTRA VEGAVRODHA	36	72%
PURISH VEGAVRODHA	32	64%

Table 15. Assessment Of Manas Hetu

MANAS HETU	NUMBER OF PATIENTS	% OF PATIENTS
CHINTA	23	46%
BHAYA	20	40%
KRODHA	20	40%
SMRUTHANI	17	34%
SHOKA	10	20%

Table 16. Assessment Of Vyasan

VYASAN	NUMBER OF PATIENTS	% OF PATIENTS
ALCOHOL	35	70%
TOBACCO	26	52%
SMOKING	11	22%
SUPARI	1	2%

Table 17. Assessment Of Dosha

DOSHA	NUMBER OF PATIENTS	% OF PATIENTS
VATAKAPHA	21	42%
VATAPITTA	20	40%
VATAPITTAKAPHA	3	6%
PITTAKAPHA	1	2%

Table 18. Assessment Of Srotodushti Hetu & Lakshanas

SROTAS	NUMBER OF PATIENTS	% OF PATIENTS
SHUKRA-VAHASROTAS	50	100%
MUTRAVAHASROTAS	50	100%
MAMSAVAHASROTAS	50	100%
MEDOVAHASROTAS	45	90%
MANOVAHA SROTAS	43	86.66%
RASAVAHASROTAS	37	73%
RAKTVAHASROTAS	36	72%
ANNAVAHASROTAS	35	70%
PURISHVAHASROTAS	33	66%
UDAKVAHASROTAS	31	62%

Table 19. Assessment Of Dhatu Dushti

DHATU	NUMBER OF PATIENTS	% OF PATIENTS
SHUKRADHATU	50	100%
MAMSADHATU	50	100%
MEDADHATU	40	80%
RASADHATU	37	73.30%
RAKTADHATU	37	73.30%

Table 20. Assessment Of Agni

AGNI	NUMBER OF PATIENTS	% OF PATIENTS
VISHAMAGNI	27	54%
MANDAGNI	19	38%

PRAKRUT AGNI	4	8%
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DISCUSSION OF OBSERVATION TABLE

Table 1. Division Of Patients According To Age Distribution

Maximum number of patients i.e. 48% were found to be in the age group between 60-70 years while the patients in the age group 70-80 were 28%, indicates occurrence of BPH in Vata dosha dominance .

Table 2. Assessment Of Symptoms By International Prostate Symptom Score Lower Urinary Tract Symptoms Attributed To Prostate

Symptoms observed in all BPH patients- INCOMPLETE EMPTYING ,FREQUENCY ,INTERMITTENCY ,URGENCY ,WEAK STREAM ,STRAINING,NOCTURIA ,QUALITY OF LIFE . All observed BPH Symptoms are graded as per severity given in scale. It has been observed that 68% patients are having severe grade , 28% were having moderate grade ,& 4% were having mild grade BPH as per IPSS.This indicates the severity of disease.

Table 3. Assessment Of Symptoms By Prostate Volume

As per USG reports of BPH patients, Prostate volume between 31-50 cc was found in maximum number of patients i.e.48% followed by Prostate volume 21-30 cc found in 32% patients.

Table 4. BPH In Ayurvedic Perspective

DIVISION OF PATIENTS ACCORDING TO THEIR PRAKRUTI 48% patients were having VataPitta prakruti while 42% patients were having VataKaphaj prakruti suggesting Vata pradhan prakruti patients are prone for BPH.

Table 5. Assessment Of Mutravaha Srotas Lakshanas BPH-Lakshanas

All patients were presenting following Lakshanas- Sakashta Mutrapravrutti, Alpala Mutrapravrutti, Muhurmuhu Mutrapravrutti,Aniyantrit Mutrapravrutti,Varamvar Mutrapravrutti & Naktmutrata. Above Lakshanas indicate Mutravaha Srotas dushti & Apan Vayu dushti. Score shows that intensity of Sakashta Mutrapravrutti was more followed by Alpala, Muhurmuhu , Aniyantrit and Varamvar Mutrapravrutti & Naktmutrata.Symptoms indicate mainly Apan Vayu dushti, as Mutanissaran function of Apan Vayu is found to be hampered in BPH patients.¹

Table 6. Assessment Of Associated Lakshanas Observed In BPH

Observation suggests Rasavaha Srotas dushti, Annavaha Srotas Dushti. Malavashambha was found in 60% patients & indicate Apan Vayu vikruti¹ which is also one of the cause for MutravahaSrotas lakshanas. As this study is concerned with geriatric age group, Vatapradhan Lakshanas are predominantly seen.

Table 7a. Assessment Of Oja & Assessment Of Type Of Oja-vikruti

As Prostate is a male accessory sex organ and it secretes fluid that nourishes and protects sperm , Oja Parikshan is carried out specially in all patients to assess Shukra dhatu. As Oja is essence of Saptadhatu² and Upadhatu of Shukra³, its functions in geriatric age group patients are observed.

Type Of Oja Vikruti (7b)

Ojakshaya lakshanas⁴ were found in maximum number of patients i.e. 92%. This shows involvement of Shukra and Oja in BPH geriatrics. Daurbalya, Loss Of Lusture, Increased Fear Psychology, Unstable Mind, Increased Raukshya are Ojakshaya found in BPH patients.

Table 8. Assessment Of Hetu

Assessment Of Aahar Rasa In Patients

- KATU : Katu Rasa consumption was found in 82% patients . Excess consumption of Katu Rasa⁵ causes depletion in Punsatwashakti and Vata Janya Vikar . As Prostate is male accessory sex gland; atisevan of Katu Rasa along with other aaharaj & viharaj hetu results in Shukra – Oja Dusti in this study.
- TIKTA : Tikta Rasa consumption was found in 48% patients.Excess consumption of Tikta Rasacauses vitiation of Vata producing symptoms like depletion in Sharira Bala, Dhatukshaya , Shoshan & Vata Janya Vikar⁶.
- MADHURA : Madhura Rasa consumption was found in 48% patients .Excess consumption of Madhura Rasa causes Kaphaprapakopa⁷.
- AMLA : Amla Rasa consumption was found in 46% patients .

Amla Rasa atisevan leads to Pitta prakop, Rakta dushti, Mamsa vidaha, Shotha in Kshina ,Krusha, Durbal Vyakti⁸. Vitiated Pitta , Rakta, Mamsa along with other viharaj hetu create symptoms in BPH patients.

Table 9. Assessment Of Aahar As Per Aahar Type

Shimbi Dhanya (88%) : 88% patients were consuming Shimbi Dhanya , such type of aahar results in vitiation of Vata dosha⁹. Vitiated Vata along with other Hetu results in Bastipradesh Aadhman, Alpala, Muhurmuhu, Sakashta Mutrapravrutti in Geriatric group BPH patients.

Mix Diet (66%)- Mix diet is mainly of KatuRasadhikya , it vitiates Vata dosha in Body. As it is heavy for digestion it creates Annavaha Srotas Dushti.

Abhishyandi Aahar (56 %)–Abhishyandi aahar is hetu for Mamsavaha Srotas Dushti, Kaphaprapakop, Srotorodha¹⁰.

Viruddha Aahar (54%): 54% patients were consuming Virruddha aahar, such type of aahar causes Raktadushti , Shukra dusti, Shotha, & Adhman¹¹.

Paryushit (52%) : Paryushit Anna¹ is guru, ruksha, & sheet results in vitiation of VataKapha dosha and Annavaha Srotas Dushti along with other Hetu contributes in Vyadhi Samprapti.

Table 10. Assessment Of Shimbi Dhanya

SHIMBIDHANYA–NIDANARTHAKARATWA IN BPH

Makushthak (Matki) (72%) : It is Ruksha, Madhur , Sheeta, Grahi and Vatavardhak in nature¹².

Chanak (chana)-(50%):It is Laghu , Ruksha, Sheeta, and Pusatwa nashak¹³.

Nishpav (pavata)-(44%): It is Guru, Ruksha, Amlavipaka, Ushnavirya, VattaPittavardhaka, Vidahi, Vibandha Karak, Shukraghna¹⁴.

Kalaya(matar)-(44%): Ruksha,Vatavardhak ,and Vibandha janak¹⁵. Thus observation suggest that consumption of above Shimbi Dhanya leads to Vatavruddhi, Vibandha, Shukrakshaya in BPH patients.

Table 11. Assessment Of Aahar –sevan (Kala & Matra)

58% patients are doing Alpashan , 58% patients are having Irregular meal timing while 42% patients were following Regular meal timing.Irregular meal timing & Alpashan causes Agnidushti and further Annavaha Srotas Dushti¹⁶contributes in Vyadhi Samprapti.

Table 12. Assessment Of Viharaj Hetu (Occupation)

Patients doing physical work are more in number. Farmers are found to be 48% while factory workers are 14% . Atishram in Jara Awastha results in Vata Prakopa¹⁷. Along with other Hetu it contributes in causing dusti in Mutra Marga.

Table 13. Assessment Of Pattern Of Sleep

Bhojan paschat diwaswaap was found in maximum number of patients i.e. 98 % & it causes Mamsavaha Srotas Dushti¹⁸, along with it Khandit nidra & late sleep lead to Vatadhikya.

As Vyasa Lakshan is due to Vataprapakop & Mamsadushti leads to Granthi Vruddhi along with other hetu these hetu contribute in BPH.

Table 14. Assessment Of Vegavrodha

Mutravegadhara causes Vataprapakop (especially ApanVayu prakopa¹⁹), Mutravegavrodha was found in 72% while Purishvegavrodha was found in 64% patients.

Mutravegavrodha results in Vataprapakopa & Mutravahasrotas dushti which contribute in symptoms of BPH.

Table 15. Assessment Of Manas Hetu

Chinta is Hetu for Rasavahasrotodushti²⁰. Chinta hetu was found in 46% while Bhaya was seen in 40% Chinta, Shoka, Bhaya also lead to Shukravaha Srotas Dushti.

Affliction of the mind again & again by anger, fear, exertion, grief is a cause for Manovahasrotas dushti hetu.

Table 16. Assessment Of Vyasan

Alcohol consumption was found to be a major Hetu i.e. 70% in assessment of Vyasan category.

ALCOHOL-Excess consumption results in Oja Kshobha as follows-Laghu,Ushna,Tikshna guna Srotogamitwa Of Madya causes Kshobha in Oja²¹ ;Madya creates Mana Kshobha ; Madya sevan also creates Medovaha Srotas dushti²² ;Madya Sevan leads to Rakta Dushti²³ ;Madya Sevan is one of the Hetu for Mutravaha Srotas Vyadhi²⁴.

Thus Alcohol consumption is one of the important contributing factor in BPH. As per Modern science toxic effects of alcohol²⁵ on the gut & other body systems interfere with the body's ability to absorb & use dietary nutrients especially Vitamin B1 (thiamine). Severe thiamine deficiency selectively damages muscle & nerve tissue. Thus Alcohol consumption is one of the important contributing factor in BPH.

TOBACCO: Tobacco consumption was found in 52% patients .Most important & hazardous constituents of tobacco are Nicotine & Tar.Tampraparni-visha dravya,Kramuk-vikasi dravya,Khadir-nirvishi dravya.

Combination of these substances exerts toxic effect after some interval & thus it acts as a Garvish.This Garavisha produces Dhatukshaya lakshanas in the body and results in diseases manifested by Vata prakop(A.S. Utt. 40/85).Thus consumption of Tobacco contributes in the BPH Samprapti.

Table 17. Assessment Of Dosha

Patients with VataKapha dosha were 42% & patients with VataPitta dosha were 40%.

Assessment Of Dosha In BPH

Observation shows Vata pradhan Dusti. Ati katuRasa Sevan, Alpashan, Virudhak anna, Mutravegavarodh, Atishram and jara Avastha itself leads to Vata vitiation in body.Vitiated Vata creates Mutramarga Vikruti. It results in Vyasa, Adhman, Shotha near basti & Guda pradash, which further reflects in Lakshanas like Muhurmuh, Alpalba, Sakshata, varamvar Mutrapravrutti.

Table 18. Assessment Of Srotodushti Hetu & Lakshana

Mutravaha Srotas Dushti (100%)- Mutravega nigraha, dhatukshnita, madyasevan, atishram results in MutravahaSrotas Dushti. It reflects in srotodushti lakshanas like Muhurmuh, Alpalba, Varamvar, Sakashta Mutrapravrutti.

Mamsvaha Srotas Dushti (100%)- Abhishyandi bhojan, bhojan pashchat diwaswaap, guru-mixdiet were found as main hetu. Srotodushti mainly results in Granthi vruddhi in Mutramarga in BPH patients.

Shukravaha Sroto Dushti (100%)- Ati AmlaRasa sevan, Jara Avastha, Chinta , Shoka, Bhaya, Madya Sevan are the main hetus found for Shukravaha Srotas Dushti.

Oja is Upadhatu of Shukra Dhatu. Dhatu Kshinata, Shoka are the Hetus found to cause Ojodushti .

Medovahasrotasdushti (90%)- Divaswaap, Madyasevan was found as a main hetu for Medodhatu which contributes in Granthi in BPH along with other Hetus.

Manovaha Srotas dushti (86%) - As BPH affects quality of life of suffering individuals, Chinta, Bhaya , krodha ; these Manas Bhavas are found to be affected mainly.

Rasadhatudushti (73%) - Ati Chinta, Atishram leads to Rasavaha Srotodushti results in Lakshanas Like Ashradha, Krushata.

Raktavahasrotas dushti (72%)- Viruddha anna sevan, Madya sevan are major hetu causing Raktadhatu dushti which contributes along with other hetu in manifestation of Granthi in BPH patients.

Annava Srotodushti (70%) - Akalbhojan, Mix diet leads to Annava Srotodushti which results in Annabhilasha, Arochak.

Table 19. Assessment Of Dhatu Dushti

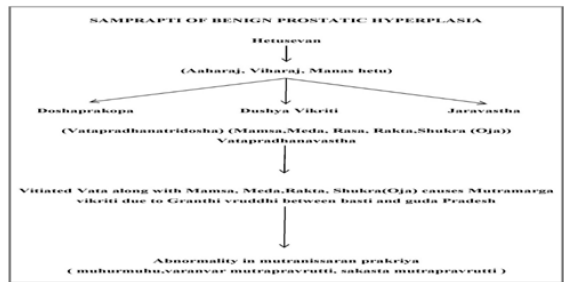
Observation Shows Mamsadhatudushti in 100%, Shukradhatudushti in 100%, Medadhatudushti 80%, Rasadhatudushti in 73.3% patients , & Raktadhatudushti in 73.3% patients .

Table 20. Assessment Of Agni

Vishamagni is found in 54% patients & Mandagni agni is found in 38%

patients. This shows Vata pradhan Dusti. Jara Avastha itself leads to Vata vitiation in body & thereby promotes the manifestation of Vatajanya Vikaras.

SAMPRAPTI



SAMPRATIGHATAK

- **Dosha**- Vatapradhan Tridosh
- **Dushya**
- **Srotas**- Mutravaha, Mamsavaha, Medovaha, Shukravaha, Raktavaha, RasavahaSrotas
- **Dhatu**-Mamsa, Meda, Shukra, Rasa, Rakta
- **Manas**- Chinta, Shoka
- **Agni**- Visham
- Mala**-Mutra, Purisha .

CONCLUSION

1. Majority of BPH patients are found in age group of 60 to 70 yrs.
2. Maximum number of patients are in the severe Grade as per IPSS scoring confirms disease severity in patients.
3. Katu Rasa Atisevan , Shimbi Dhanya , Viruddha aahar , mix diet , Paryushit aahar , Aniyamit Ahar sevan kal are the main Aaharaj hetu.
4. Patients in physical work are more prone to BPH.
5. Patients with affliction to Chinta & Bhaya are more prone to BPH.
6. Patients taking alcohol & chewing tobacco are at a higher risk of this disease.
7. The lakshanas like Sakashta , Alpalba , Muhurmuh , Aniyantrit Mutrapravrutti & Varamvar Mutrapravrutti are the major Lakshanas observed in Ayurvedic perspective.
8. Daurbalya, Bastitoda, Karshya, Kampa, Malavashtambha, Atyadhik Trishna & Annabhilasha are the associated symptoms found.
9. Ojakshaya lakshanas like Daurbalya , Vyathit Indriya , Loss Of Lusture , Raukshya , Bhaya & Unstable Mind clarifies significant role of Oja Dushti in manifestation of BPH.
10. Vata dosha is main Dosh in formation of Samprapti.
11. Shukravaha Srotas , Mutravaha Srotas , Mamsavaha Srotas , Medovaha Srotas, Manovaha Srotas, Rasavaha Srotas & Raktvaha Srotas are Dushyas involved in manifestation of BPH.
12. Shukra Dhatu, Mamsadhatu, Medadhatu, Rasadhatu & Raktadhatu are the main Dhatu contributing in the Vyadhi Samprapti.

Thus this work will provide basic guideline to understand BPH in Ayurvedic perspective.

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