



A CASE REPORT ON- AYURVEDIC MANAGEMENT IN ARTAVA KSHAYA

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ABSTRACT

The prime factor for normal reproduction is appearance of cyclic bleeding at regular intervals which is of great importance for the well being of female health the same is explained in Ayurveda also. Incidence of menstrual irregularities are increasing day by day out of which artava kshaya is one. Clinical features of artava kshaya can be correlated with the clinical entity of the abnormal uterine bleeding that is oligomenorrhea and hypomenorrhea. In these cycles occurs at an interval of 35 day or menstrual bleeding can be scanty which last for less than 2 days. In the present study a case of artava kshaya with irregular cycle was treated with vamana karma followed by shaman oushadhis. Post Treatment the condition of the patient improved and the Patient also got regular menstruation.

KEYWORDS: Artava kshaya, Menstrual bleeding, Abnormal uterine bleeding, Oligomenorrhea, Prime factors, Vamana karma, Menstruation.

INTRODUCTION

Women's health is of prime concern for the well being of family, society and culture. Any physiological, and psychological disorders can disturb her life. Physiological changes as well as development takes place throughout the lifespan of a women. Change in life style, food habits, emotional stress in women alters the physiology of hypothalamus- pituitary ovarian, uterine axis. This may lead to many gynecological problems, among them menstrual disorders are common in reproductive age groups of a women. In Ayurveda, concept of artava is explained by all acharyas and is understood in terms of srava rupa artava, dhatu rupa artava, and beeja rupa artava. Artava is said to be one of the most important factor for conception.^[1] The term artava has been used for bhirpushpa that is menstrual blood and antaha pushpa that is ovum. Acharyas have also explained both the physiology and pathology of artava. One of the most common artava dushti faced by women is artava kshaya. Acharya susrutha has explained artava as upadhatu of rasa dhatu so rasa kshaya will also lead to artava kshaya. Then again Acharyas have also mentioned about ashta artava dusti where in ksheena artava, resembles artava kshaya. Acharya susrutha has explained the clinical features of artava kshaya, as follows, Yathochitha kala adarshanam that is when the artava doesn't appear at specific interval of time. Alpata

that is when the artava is alpa (reduced) in quantity. Yoni vedana that is pain in vagina or pelvic pain.^[2]

Acharya dalhana further has commented on the yathochitha kala of artava that both interval as well as duration should be considered. Acharya stated that cyclic monthly nishkramana of artava with duration of 3 days is normal kala of artava.^[3] So failure of artava to occur after one month interval with duration less than 3 days is considered as artava kshaya. As in modern concept, the same is broadly explained under two important terminologies Abnormal uterine bleeding and dysfunctional uterine bleeding. Abnormal uterine bleeding is uterine bleeding outside the normal volume, duration, regularity or frequency. Dysfunctional uterine bleeding is a state of abnormal uterine bleeding without any clinically detectable organic, systemic and iatrogenic cause (pelvic pathology- tumor, inflammation, or pregnancy is excluded). Under the preview of abnormal uterine bleeding there are other clinical entity which could be correlated to artava kshaya like Oligomenorrhea where menstruation occurs more than 35 days apart and remains constant at this frequency.^[4] Hypomenorrhea where scanty bleeding as well as duration of flow lasting for less than 2 days.^[5]

Secondary amenorrhea is absence of menstruation for three normal menstrual cycle or months in a women who

has previously menstruated or had achieved menarche.^[6] Causes of abnormal uterine bleeding could be hormonal dysfunction, emotional stress, hereditary, nutritional factors.

CASE REPORT

Patient aged 30 years, complaints of irregular menstruation since 2 years and amenorrhea since 3 months, associated with loss of appetite and weight gain. No history of thyroid dysfunction, diabetes mellitus, hypertension, asthma and epilepsy. Patient visited Sri kalabyraveswara swamy ayurvedic medical college, hospital and research center vijayanagar Bangalore to seek the treatment for above said complaints.

Past History

Medical history- nothing significant
Surgical history- underwent two cesarean sections

Menstrual History

Age of menarche- At 13 years
Menstrual cycle- irregular (since 2years)
Lmp- 16/11/2023
Interval - 35- 40 day cycle.
Duration- 1-2 days
Amount- 1-2pads/day (scanty flow)
White discharge- absent
Foul smell- absent
Clots- minimal
Dysmenorrhea- absent

Obstetrical History

P2L2A1D0
P1L1- Female 14 years LSCS
A1 – 2 months induced.
P2L2- Male 7 years LSCS

Personal History

Diet- mixed
Appetite- reduced
Bowel- 1time per day
Micturition- 5-6 times per day
Sleep- disturbed.

Examination

Asta sthana pareeksha

Nadi- 78bpm
Mala- 1 times per day
Mutra- 5-6 times per day
Jivha- lipthata
Sparsha- prakrutha
Drik- prakrutha
Akruthi- madhyama

Dashavidha pareeksha

Prakruti- vata pitta
Vikruti- vata pradhana tridoshaja
Sara- madhyama
Samhanana- madhyama
Satva- madhyama

Satmya- madhyama
Ahara Shakti- jarana Shakti- avara
Abhyavarana Shakti- avara
Vyayama Shakti- avara
Vaya- madhyama
Pramana- madhyama.

On General Examination

Built- moderate
Pallor/ icterus/ cyanosis/ clubbing/ lymphadenopathy / oedema- absent
BP-120/80 mmhg
Pulse rate- 78bpm
Height-152cm
Weight- 66kgs
BMI- 28.6 Kg/m2

Systemic Examination

Cvs- S1, S2 heard, no murmur
Cns- conscious, well oriented about time, place and person
Rs- normal bronchovesicular sound heard
p/a- soft, non tender, no organomegaly
per speculum and pervaginal examinations were normal.

Breast examination

Bilateral breast – no abnormality detected.

Investigations

1. complete blood count test.
2. thyroid profile
3. ultrasonography of abdomen and pelvis.

Haemoglobin-12.5g%
WBC count- 7,500 cells/cumm
Platelet count: 3.25lakhs/cumm

Thyroid profile

T3- 109.80 ng/dl
T4-8.73 microg/dl
TSH- 1.07 microIU/ ml
Ultrasonography of abdomen and pelvis:
Impression: 1. Normal hepatobiliary and renal scan.
2. bulky uterus.
3. bilateral mild polycystic ovarian changes.

Intervention

Patient posted for shodhana karma – vamana karma.

Treatment Protocol

Purva Karma

Date	Treatment
06/02/2024 to 16/02/2024	1. Udwartana with kolakulattadi choorna+ triphala choorna+ yastimadhu choorna 2. Bashpa sweda Tab. Chitakadi vati.
17/02/2024	1. Tab. Agnitundi vati
18/02/2024	Snehapana with varunadi gritha 30 ml
19/02/2024	Snehapana with varunadi gritha 70
20/02/2024	Snehapana with varunadi gritha 110ml
21/02/2024	Snehapana with varunadi gritha 130 ml
21/02/2024	1. Sarvanga abhyanga with murchitha tila taila 2. Bashpa sweda
22/02/2024	Shodhana karma- Vamana karma

Patient underwent vamana karma on 22/02/204

1. Sarvanga abhyanga with murchitha tila taila.

2. Bashpa sweda.

3. Vamana karma:

Total number of vegas-05

Total number of upavegas-03

Total number of adhovegas- 00

Paschat Karma

1. Mukha pani pada prakshalana done with sukoshna jala.

2. Kavala graha with saindhava jala

3. Dhoomapana

After vamana karma advice to follow samsarjana karma for 5 days

Advice orall medications

1. Tab. Streevyadhi hara rasa 1-0-1 after food

2. Tab. Arogyavardhini vati 1-0-1 after food

3. Cap. Repromed 1-0-1 after food

4. Tab. Folivite 0-0-1 after food

Advised to follow up checkups after 5 days

RESULT

Patient got her menstruation after the vamanakarma.

Lmp- 4/03/2024

Flow- 4-5 days

Amount- 1st day- 2-3 pdas per day

2nd day- 2-3 pads per day

3rd day- 2-3 pads per day

4th day- 1-2 pads per day

5th day 1-2 pads per day.

Colour- red colour

Pain – mild pain present during 1st day of cycle.

Patient noticed that the discomfort during her menstruation was completely cured. There was no alteration in any other factors. There after her menstrual cycle was regular and the amount of bleeding also improved from mild to moderate bleeding.

DISCUSSION**Mode of action of drugs**

Artava kshaya is vata kapha pradhana dusti vyadhi, where avarana of vata with kapha takes place. Hence in the chikithsa sutra rukshana as poorva karma was choosan and then vamana as shodhana was selected. In this case the rukshana chikithsa was done with udwartana and deepana pachana was done with chitrakadi vati and agnitundi vati. Later snehapana with varunadi gritha having the properties of agni deepana, ama pachana, rukshana, lekhana and vata kaphahara properties respectively was given.

In this case vamana karma was choosen for the shodhana karma. As per Dalhana while commenting on the chikithsa sutra suggests that only vamana karma is to be selected as shodhana karma not the virecana, because it reduces pitta which in turn decreases agneyathva in body, where as Vamana karma removes soumya guna of dhatu there by increasing agneyatva consequently increasing artava. Thus ushna, tikshna and vyavayi, vikasi guna of vamana dravya normalize kapha vitiation.^[7] and vatavaigunya, reduces excess meda, removes srotorodha/ sanga and creates normal functioning of apana vata there by regularizing the functions of artavaha srotas as prakritha vata is responsible for proper menstrual flow.

Streevyadhi hara rasa contains Sootikabharana rasa, latakaranja beeja, Shatahva beeja choorna, Karpasa moola churna, Shunthi, Maricha, Pippali Sootikabharana rasa includes Swarna Bhasma, roupya Bhasma, Tamra Bhasma, Pravala Bhasma, Shuddha gandhaka. Vatashamaka property is found in all the Bhasmas. Thus, Vata dushti, the pivotal cause for Artavavaha Srotasa dushti is acted upon by the Vatashamaka property of all the bhasmas. Thus, the Prakruta karmas of Vata like Vyuhana, Sanghatakara, Vibhajana, Rasa-rakta samvahana, Utsarjana karma are all restored resulting in proper Beejotpatti and Beejotsarga, Swarna and Roupya bhasmas with their Madhura, Snigdha properties bring about Dhatu poshana and Bala vardhana.

Phalaghrita contains Kustha, Tagara, Vacha, Haridra, Daruharidra, Madhuka, Meda, Triphala, Katurohini, Payasya, Hingu, Kakoli, Vajigandha, Shatavari, Ghrita, Ksheera which are mainly Tikta, Madhura and Katu rasa, Laghu, Snigdha guna, both Katu and Madhuravipaka and also Ushna and Sheetavirya drugs. It also has Dipana, Pachana, Lekhana, Anulomana, Shothahara, Krimighna, balya, Prajasthapana and yoni Pradoshahara actions.^[8]

Arogyavardhini vati contains shuddha parada, shuddha gandhaka, loha bhasma, abhraka bhasma, tamra bhasma, shilajatu, guggulu, chitramool, neemba, katuki, haritaki, bibhitaki and amalaka. most of the drugs having tikta, katu and Kashaya rasa, ushna veerya and laghu ruksha gunas and vipaka are madhura and amla. arogyavardhini vati has three dosha hara properties, according to rasaratna samuchchya. Arogyavardhini vati does sarvaroga hara, it improves agni, dosha nirharana from sharira, and medovinashini properties.^[9]

Tablet folivite contains Folic acid is a B vitamin which is water soluble vitamin, is needed for the formation of heme, the pigmented, iron containing portion of the hemoglobin in red blood cells (erythrocytes).

CONCLUSION

Artava kshaya can be considered as agni vaishamyajanya vikara in general and rasagni and medodhatwagni mandhya deficient in particular. It is also a bahu dosha avastha (vitiated dosha), as artava kshaya is a metabolic disorders, where in vama karma is done to normalize body metabolism, there by reducing weight and specifically acting on liver metabolism, which is the main site of hormone formation. Thus vama karma in artava kshaya patient helped in removing the margaavarodha by removing the soumya guna of dhatu and inturn increases the proper formation of the artava.

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