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MANAGEMENT OF ASRIGDARA WITH PICCHA BASTI – CASE SERIES

Dr. Shruthi R.1* and Dr. Anupama V.2

¹PG Scholar, Department of Prasooti Tantra evum Stree Roga, Sri Kalabyraveshwara Swamy Ayurvedic Medical College, Hospital and Research Centre, Bengaluru, Karnataka, India.

²Professor and Head of the Department, Department of Prasooti Tantra Evum Stree Roga, Sri Kalabyraveshwara Swamy Ayurvedic Medical College, Hospital and Research Centre, Bengaluru, Karnataka, India.



*Corresponding Author: Dr. Shruthi R.

PG Scholar, Department of Prasooti Tantra evum Stree Roga, Sri Kalabyraveshwara Swamy Ayurvedic Medical College, Hospital and Research Centre, Bengaluru, Karnataka, India.

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ABSTRACT

Introduction: Asrigdara^[1] is a disease in which there is excessive bleeding per vagina either in volume or duration. Any Uterine bleeding outside the normal volume, duration or regularity is considered as Abnormal uterine bleeding. It effects any women from puberty to menopause. This condition is a devasting situation to a woman both physically and physiologically. Rakta is considered as Jeevana and prana by different acharyas as it plays an important role in protecting body but when it is abnormally flowing out of body it leads to tandra, moha, bhrama even death. **Aim:** To evaluate the effect of Piccha basti in Asrigdara as atyayika chikitsa irrespective of the cause. **Materials and Methods:** The study was conducted on IPD basis and patients were recruited from Gynecology department of Sri Kalabyreshwara swamy Ayurvedic medical college, Bangalore. Total 9 patients were selected for study and piccha basti^[2] was given in Yoga basti pattern for 8days and evaluation was done on amount of bleeding, pain, clots. **Results:** Clinically, in all 10 patients bleeding stopped by the end of Basti Chikitsa. **Conclusion:** Piccha basti alone can stop the excessive uncontrolled bleeding. It can be used as an effective alternative for hormonal treatment and other measures used to control AUB or DUB.

KEYWORDS: This condition is a devasting situation to a woman both physically and physiologically.

INTRODUCTION

Asrigdara can be defined as excessive excretion of raja (menstrual blood), due to ati amla, lavana, ushna, vidahi, sukta, mastu ahara sevana and aggravated vata withholds the vitiated pitta in garbahashaya where dravatva of pitta is increased and this inturn increases the amount of menstrual blood. Symptoms include Excessive bleeding per vagina, angamarda, Vedana. This condition can be compared with AUB/DUB based on organic pathology involved.

AUB or DUB are the main reason for excessive bleeding per vaginally. In Puberty or Reproductive age, it is the prime cause to start with hormonal pills. In Perimenopausal women, it may result in surgical interventions including Hysterectomy. The PALM-COEIN classification is aetiopathogenesis based, where PALM describes the structural (organic) causes like polyp, adenomyosis, leiomyoma, malignancy and COIEN denoting the non-structural (Non organic) causes like coagulopathy, ovulatory dysfunction and other causes of AUB. [4,5] The reported prevalence of AUB in India is about 17.9%. [6] Previous studies have shown that prevalence varies between different regions and it ranges

between 10-30%.^[7] AUB and Heavy Menstrual Bleeding (HMB) are not synonymous. HMB is defined as excessive menstrual blood loss which interferes with a woman's physical, emotional and social quality of life.[4] The diagnosis of AUB depends on comprehensive assessment of the medical history and examination combined with blood tests, imaging modalities and histopathology. Different bleeding patterns also helps in the clinical diagnosis of various causes of AUB. The bleeding patterns, according to the new nomenclature is based on frequency, regularity, duration and volume of blood flow during menses. Based on this, it is categorised into frequent/infrequent cycles, regular/irregular cycles, prolonged/ shortened cycles, heavy/light flow.

Chikitsa of asrigdara includes raktapittavat, rakta atisaaravat, rakta arshavat chikitsa. [8] The primary aim is to stop bleeding when rakta is in niraama state, because rakta is considered as chaturta dosha and jeevana. [9] Sharangadara mentioned Piccha basti where pichila dravyas like shalmali etc drugs are used for guda srava, adoga raktapitta condition. Basti is considered as ardha chikitsa. It allievates apana vata dushti which is

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mainly responsible for any yoni roga. Tikta, Kashaya drugs in basti like puga, lodhra helps in sthambana of rakta. Triphala is kaphahara reduces clots. Panchavalka has sthambana and pittahara property. Ashoka gritha has direct indication in asrigdara. Mahanarayana taila allievates vata pitta and helps in regularizing the cycle. Thus, this combination of drugs in basti gave a promising result in stopping excessive menstrual bleeding without taking any shamana oushadis.

If the disease is left untreated and the bleeding is not stopped it leads to *upadrava* like *dourbalya*, *bhrama*, *moorcha*, *panduta*, *tandra*.

MATERIALS AND METHODS

Patients attending to the outpatient department of Prasuti Tantra and Stree Roga of Sri Kalabyreshwara Swamy Ayurvedic medical college, Bangalore were selected. The cases selected were having complaints of excessive and prolonged blood loss.

Inclusion Criteria

- 1. Women with age 20-50 years
- 2. Pt having per vaginal bleeding more than 7 days
- 3. Pt having excessive bleeding more than 3 pads /day
- 4. Pt with excessive bleeding irrespective of DUB and AUB

Exclusion Criteria

- 1. Pt with per vaginal bleeding less than 5-7 days.
- 2. Pt Having any systemic illness that will interfere with the treatment.
- 3. Endometrial carcinoma.

History

The detailed history of the present complaints, with duration and associated symptoms was taken on predesigned specific proforma. Detailed interrogation regarding present symptoms, especially the amount of blood loss, duration and interval of menses and other associated symptoms were taken.

Clinical Examinations

1. General Examination

General condition of the patient, Pulse, Temperature, Blood pressure, Icterus, Clubbing, Cyanosis, Odema, Lymphadenopathy etc. noted and found normal. Pallor was present in 50% of patient.

2. Systemic Examination

Examination of central nervous system, gastrointestinal tract, respiratory system, cardiovascular system, urogenital systems were done and found to be normal.

Investigations

- 1. CBC
- 2. ESR
- 3. USG- Abdomen and pelvis

Intervention

1. Piccha Basti

DAY	1	2	3	4	5	6	7	8
BASTI	A	N	A	N	A	N	A	A

Anuvasana – Maha Narayana Taila – 40ml Ashoka Gritha – 40ml

Niruha - Honey - 80ml

Lavana – 6gm

Sneha – Ashoka Gritha – 80ml

Kalka – puga choorna – 10 gm

Lodhra choorna – 10gm

Triphala Choorna- 10gm

Kwatha - Panchavalkala + Shalmalai niryasa -250 ml

Assesment criteria

From the day of *piccha basti* following criteria is assessed:

- 1. Amount of blood loss
- 2. Presence of clots
- 3. Lowback and Abdomen pain

OBSEVARTION

Observation on Demographic Data

In this clinical study 40% pt were vegetarian and 60% pt had mixed diet pattern. 50% pt had moderate appetite and 50% had poor appetite. 30% patient had constipation and 60% patient had normal bowel habit. 70% patient had disturbed sleep and 30% patient had sound sleep.100% patient were married, Age group - 10% between 30-35, 40% between 35-40 years 50% between 40-47 yrs, 70% were multipara,

Observation on Symptoms

90% had pain abdomen, lowback pain and clots.

Menstrual history –

Duration – 40% were bleeding since 7-10 days, 40% were bleeding since 11-20 days, 20% were bleeding more than 20 days.

NO. of Pads -40% used 8-10 pads/day, 30% used 4-8 pads, 30% used 1-3 pads/day.

Observation on Treatment

1. Data on stopping of bleeding with respect to the day of treatment

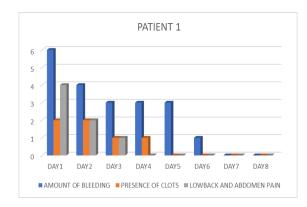
10% on day 4 of treatment, 30% on day 5 of treatment, 40% on day 6 of treatment, 20% on day 7 of treatment

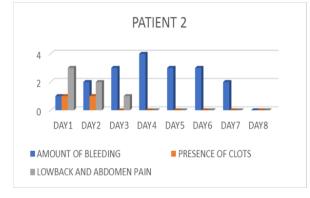
2. Data on reduction of clots with respect to day of treatment

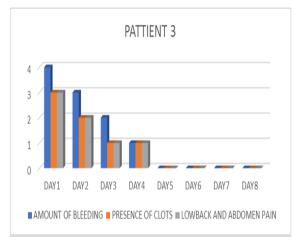
20% on day 2 of treatment, 30% on day 3 of treatment, 40% on day 4 of treatment.

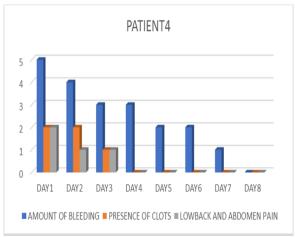
3. Data on reduction of low back and abdominal pain with the respect to day of treatment

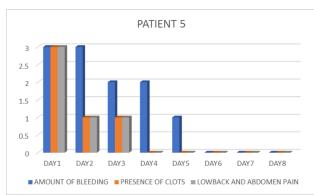
10% on day 1, 20% on day 2, 70% on day 3 of treatment.

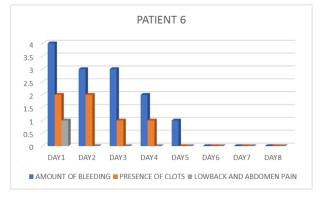


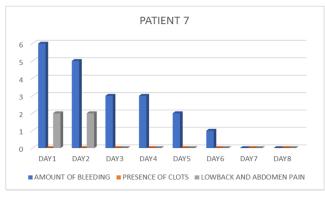


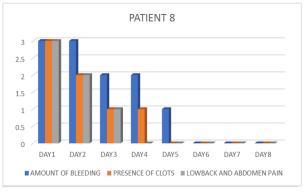




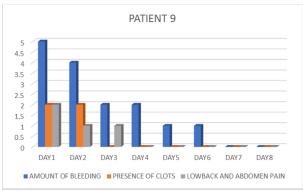


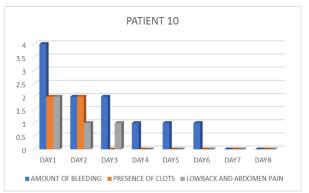






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Graph 1: Showing improvement in Amount of blood loss, Presence of clots, Low back and Abdomen pain in all 10 patients.

DISCUSSION

Mode of Action of Basti

Samprapti of Asrigdara mainly involves vitiated vata, pitta and rakta. Basti chikitsa — the route of administration of drug is to pakwashaya, the main site of vata. For any substance in body to undergo atichalatva vata is responsible, in the same manner aggravated vata combined with dooshita pitta and rakta expels the raja in excess quantity. In this case series most of the patients were associated with kapha symptom like clots vata symptom like Vedana in udara, parshwa and kukshi. Hence to balance all three doshas basti chikitsa was adopted. Selection of drugs in basti is likely to eliminate or pacify all three doshas. This treatment is convenient to the patient also in terms of palatability since drug is administered to guda marga.

Disease and Treatment Influence on MANAS

Acharya Charaka mentioned "Mind, Soul and the Body—these three constitute a tripod, upon the meaningful combination of which the world is sustained. They constitute the substratum for everything, which is endowed with life. The body and the mind are the abodes of diseases as well as health. Proper body-mind interaction is the cause for happiness *Raja and Tama* are mind doshas. They, when out of balance cause many disorders and when existing for long duration and get chronic, get associated with each other i.e. mind disorders get associated with physical disorders or physical disorders get associated with mind disorders. This means to tell that, physical disorders may cause mental disorders and vice versa over a period of time. This happens due to affliction of rajas and tamas by vata, pitta and kapha or the other way around.

Asrigdara is one such condition for a woman where her manasika status also gets hampered due to constant bleeding and pain and also not able to indulge herself in social activities. Hence Basti not only helps in stopping the bleeding, but also acts on manasika dosha through Enteric nervous system and aids in better results.

Mode of Action of Drugs

Panchavalkala kwatha – It includes 5 drugs like vata, udumbara, nyagrodha, plaksha, parisha has sheeta,

Kashaya rasa pradhana, ropana, sthambana, shotahara property which helps in reducing *Pramana* of *pitta* and stops bleeding.

Shalmali – It comes under vedanasthapana, shonitasthapana gana. It has sheeta virya, Kashaya rasa, picchila, snigdha and grahi property, karma – pitta asranut and dahanut.

Lodhra choorna -It is mainly used in bleeding disorders. It comes under Kashaya skanda and shonita sthapana gana. It has Kashaya tikta rasa, laghu rooksha guna, sheeta virya, katu vipaka.

Triphala choorna – It contains amalaki, hareetaki, vibitaki. It pacifies kapha and pitta, karma-Deepana. It has anti-inflammatory, anti- bacterial property.

Puga choorna- It balances kapha and pitta dosha. Deepana property. It acts as stambhana and grahi.

Ashoka gritha^[10]- It has ingredients like Ashoka, panchavalaka, kapitha, jeeraka, tandula, aja kshira, yastimadhu, shatavari, mridwaki. All these drugs have pitta kaphara property, deepana in nature thus does ama pachana. It is indicated in kati, kukshi, yoni shoola, pradara, pandu. This formulation alleviates all symptoms of asrigdara.

Madhu – It is Madhura, Kashaya rasa, laghu rooksha guna, balances kapha and pitta dosha. It has yogavahi, sandhana proprety. Indicated in asrapitta (bleeding disorders), krimi, vrana sandhana and shodhana.

Hence one can say that the effect of drug as well as basti as procedure has Combined therapeutic effect used in this study has *trisodhara*, *shoolahara*, *sthambana*, *Deepana*, *Shonitasthapana*, *Sangraha*, *Srotoshodhana* property alleviating the attipravrutti and pacifying tridosha.

CONCLUSION

Piccha basti in yoga basti pattern as procedure alone has the potency to stop excessive menstrual bleeding which is safe and effective form of treatment. Basti chikitsa

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helps in samprapthi vighatana, hence regularizing the cycle in most of the patients.

REFERENCES

- Charaka Samhita by Agnivesha revised by charaka and dridabala with ayurveda Dipikawho commentary of Chakrapanidatta edited by Vaidya Jadavji Trikamji Acharya, New Delhi: Chaukhamba Publications, edition 2022: chikitsa sthana, chapter 30, verse no 209, pg- 642.
- Sharangadara Samhita by Sharangadara, edited by K.R.Srikantha Murthy. Chaukamba Orientalia. Varanasi. Reprint edition 2012, Uttara Khanda, 6th chapter, verse-23-24, pg. no.198.
- 3. Charaka Samhita by Agnivesha revised by charaka and dridabala with ayurveda Dipikawho commentary of Chakrapanidatta edited by Vaidya Jadavji Trikamji Acharya, New Delhi: Chaukhamba Publications, edition 2022: chikitsa sthana, chapter 30, verse no 207, 2088, pg- 642.
- 4. Munro MG, Critchley HOD, Fraser IS, FIGO Menstrual Disorders Committee. The two FIGO systems for normal and abnormal uterine bleeding symptoms and classification of causes of abnormal uterine bleeding in the reproductive years: 2018 revisions. Int J Obs Gynecol., 2018; 143(3): 393-08.
- Munro MG, Critchley HO, Broder MS, Fraser IS, FIGO Working Group on Menstrual Disorders. FIGO classification system (PALM-COEIN) for causes of abnormal uterine bleeding in nongravid women of reproductive age. Int J Gynecol Obstet., 2011; 113(1): 03-13.
- 6. Sharma A, Dogra Y. Trends of AUB in tertiary centre of Shimla hills. J Midlife Health, 2013; 4(1): 67-68.
- 7. Kotagasti T. Prevalence of different menstrual irregularities in women with abnormal uterine bleeding (AUB)-an observational study. Int J Curr Res., 2015; 7(10): 66-70.
- Charaka Samhita by Agnivesha revised by charaka and dridabala with ayurveda Dipikawho commentary of Chakrapanidatta edited by Vaidya Jadavji Trikamji Acharya, New Delhi: Chaukhamba Publications, edition 2022: chikitsa sthana, chapter 30, verse no 227, pg- 642.
- 9. Dr. Ambikadatta Shastri, Sushruta Samhita, Part I, Sutra sthana, 21/3,16,5,6, 8, ed 2012, Chaukhambha Sanskrit Samsthan, Varanasi, 112, 117, 113, 114.
- 10. Bhaisajya Ratnavali, Kaviraj Shri Govind Das Sen, English translation Shri Ramana Prabhakar, Commentary by Dr G Prabhakar Rao vol-1, Chaukambha Orientalia Varanasi First edition 2014, Streerogaadhikara 67th chapter verse 18-20.pg.no.