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AYURVEDIC INTERVENTION IN ARTAVA KSHAYA- A CASE REPORT

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ABSTRACT

Artavakshaya can be compared to oligomenorrhea and hypomenorrhea, one of the clinical feature in PCOS. Polycystic ovary syndrome is a disorder of reproductive women characterized by hyperandrogenism (elevated free testosterone levels and hirsutism), ovulatory dysfunction, and polycystic ovarian morphology. Here, a case of 28-year-old female was presented with complaints of irregular menstrual cycle, for the interval of 45-60 days since 1 year associated with severe pain in the lower abdomen and back. Her USG scan report shows bilateral polycystic ovarian morphology. Ayurvedic treatment was planned on the lines of management for *Nastaartava*. *Matra basti* was administered in a dose of 75 ml of regularly for 10 days starting from 6th day of menstruation cycle. Looking into the condition, Matra basti and oral medications was planned for the patient. After treatment, patient got her next menses on regular time.

KEYWORDS: Ayurveda, Artavakshaya, Matra basti.

INTRODUCTION

Artava Kshaya is one of the common menstrual disorders which is caused due to sedentary lifestyle, faulty food habits and changes in physical and mental state. According to Acarya Sushrutha, menstruation that does not appear in appropriate time or delayed menses along with pain in yoni is termed as Artava Kshaya. [1] In contemporary science Oligohypomenorrhoea shows similar clinical presentation and its incidence rate is 22.5%, which has multiple causative factors of nutritional deficiency, hormonal factors, emotional and stress factors and psycho-sexual factors. Here is an attempt to study the case of Artavakshaya with Ayurveda treatment modalities like Matrabasti and medications.

CASE REPORT

A 28 years old married female patient came with complaints of irregular menses for 4-5 years, associated with lower abdominal pain and constipation on and off. The duration of flow was reduced since 4-5 years and she had menstrual flow for 45-60 days of duration since last 4-5 yrs which is associated with pain in low back region, pain in abdomen. Patient had regular cycles earlier but in the past 4-5 years her menstrual cycles are delayed. Patient had taken oral medicine for the same but was not relieved hence came to Sri Kalabyraweshwara

ayurvedic medical hospital and research centre for further management.

PAST HISTORY- Medical History- Taken medication for the same complaints

Surgical History- Nothing significant

MENSTRUAL HISTORY- Irregular since 4-5 years

Duration- 2-3 dyas

Interval-45-60 days

Number of pads used-D1-D2- 1/2 pad

D2-D3- 1 pad

Dysmenorrhea-++

Clots- Absent

Foul smell- Absent

White discharge-Absent

Obstretic History- Nulliparous

Family History- No History of similar complaints in the family.

General examination

General condition- fair

Built- Moderately built

Nourishment- Moderately nourished

Pallor-Absent:

Oedema-Absent:

Nails-No clubbing:

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Cyanosis-Absent:

Icterus -Absent:

Lymphadenopathy-Absent:

PR- 78/min:

BP-110/70 mmHg:

RR-18/min:

Height-158cm

Weight-58Kg

BMI-23.2 kg/m2.

Systemic examination

RS- NVBS heard. No added sound

CVS-S1S2 heard, no murmur

CNS- conscious well oriented

P/A: Soft, Non-tender, No organomegaly

Vayaktika Vruttanta

Diet- mixed

Appetite-Good

Bowel: Constipated

Micturition-Frequency- 5-6 times/day & 1time / night

Sleep- Sound

Habit- Coffee 2 times / day

Rogi Pariksha

Prakruti – VataPittaja

Vikruti- Vata, Pitta

Sara – Madhyama

Sanhanan- Madhyama

Praman -158 cm wt- 58 kg,

Satmya-Madhyama

Satva -Madhyama

Aahar shakti – Madhyama

Vyayama shakti -Madhyama

Vaya – Madhyama

Investigations

Usg Abdomen(1st day of visit)-

uterus retroverted.

Endometrial thickness-6.5mm.

Both ovaries are bulky in size and shows multiple peripherally arranged tiny follicles

With increased central echogenic stroma.

Bilateral poly cystic ovarian features.

FBS-100 mg |dl

PPBS-140mg|dl

TSH-2.0MIU/L

T3-90 ng|d1

T4-6.0ug|d1

NIDANA PANCHAKA

Nidana: Katu amla lavana aahara sevana (vata pittakara

ahara sevana)

Purva roopa-Nothing significant

Roopa- Decreased flow of artava, irregular menstruation,

Kati shola

Upashaya- Aushadhi

Anupashaya-Katu, amla, lavana ahara sevana

SAMPRAPTI

Nidana sevana

Vata kapha prakopa

Agni vaishamya

Rasa dushti

1

Artava dushti

Sanga in artava vaha srotas

Sthana samshraya in garbhashaya

1

Artava gets obstructed by kapha, vata

Ayatha kala artava darshana /Artava Kshaya

SAMPRAPTI GHATAKA

Dosha- Vata, Kapha

Dushya-Dhatu-Rasa, rakta

Upadhatu-Artava

Srotas- Artavavaha, Rasavaha, Raktavaha

Srotodushti- Sanga

Ama-Jatharagni, Dhatvagni janya

Udhbhavasthana-Amashaya

Sanchara sthana- Artavavaha srotas

Vyakta stana-Garbhashaya

Sadhyasadhyata- Krucchra sadhya

DIAGNOSIS-Artava Kshaya

DATE	TREATMENT
26/9/23	Matra basti with tila taila-75ml for 10 days
	Agnitundi vati-1-0-0(b/f)
	Cap.Sujath-0-1-0(A/F)
	Shatavari churna +Shatapushpa churna-each 1/4tsp -1/4tsp TID with honey
	Rajapravartini vati-1-1-1(a/f)
	Kalyanaka ghrita-1tsp-0-1tsp with milk for 30 dyas
15/10/23	Patient got menses after 12 th day of pregnancy
	Agnitundi vati-1-0-0(b/f)

	Cap.Sujath-0-1-0(A/F)
	Rajapravartini vati-1-1(a/f)
	Shatavari churna +Shatapushpa churna-each 1/4tsp -1/4tsp TID with honey
	Kalyanaka ghrita-1tsp-0-1tsp with milk continued for 30 days
12/11/23	Attained menstruation
15/12/23	Menses regularised

Mode of action of Matrabasti

Matra basti normalizes apana vayu leading to vatanulomana and physiological functioning of vata, which may help in regularisation of menstruation and ovulation. Basti dravya spreads all over the body, pacifies the aggravated dosha along with vyana vayu leads to samyaka rasa raktadi dhatu nirmana thus helps in artava utpatti and Pravritti. Basti being vatashamana and sthanika dosha in pakwashaya, in-turn helps in restoration of normal physiological function of female reproductive organs. [2]

Matra basti after absorption reaches into systemic circulation and influences the endogenous opioids in the ENS specially endorphins (β -endorphin) which in turn affect GnRH release regularizing HPO axis. Endogenous opioids are a group of peptides, which play an important role in the menstrual cycle through the inhibitory effect on GnRH secretion. β -endorphin been best known of the opioid related to the reproductive system regulating variety of pituitary hormones including gonadotrophins. β -endorphin has a role in the regulation of the normal menstrual cycle.

Probable mode of action of Tila Taila and other oral drugs

Tila Taila is of madhura rasa and vipaka, balya, and rasayana in karma; it nourishes and strengthens all the dhatus, checks dhatukshaya, and thus alleviates vata, snigdha and guru guna decreases rukshata of vata^[3] and with the help of ushna guna, and veerya it alleviates vata; the vikasi property reduces the spasms. Sukskshmata dilates the channels and vishada prevents stickiness of the channels and thus helps in normal flow of menstrual blood. Garbhashaya shodhana, artavajanana properties of Tila Taila^[4] indicates its specific action on genital tract and regulates function of Apana Vayu on particular system. [5] Especially when administered in the form of basti, tila taila^[6] directly works on apana vata, and by its yonishula nashana action it works upon kshinartava. Tab Agnitundivati is mainly indicated in jathragni vikaras and vatarogas it contains drugs which are ushna virya vata kapha hara, agni Deepana and ama Pachana and it will helps in further nourishment of upadhatus. Rajapravartini vati mainly contains ushna, teeksha drugs which helps in increasing the agneyatva in body, intern helps in increasing the menstrual flow. Satapushpa churna because of katu rasa, katu vipaka and usna virya this drug will help in rajapravartana, kapha shamak properties will help in alleviating kapha dosha, which will relieve obstruction to flow of raja. Cap Sujat and shatavari churna will help in nourishment of dhatu

specifically rasa dhatu and further the nourishment of garbhashaya, hence it will help in artava Kshaya.

DISCUSSION AND CONCLUSION

Artavakshaya is a vata pitta dominant artava vikara. Manitanance of agnideepana, Amapachana, and Vatanulomana along with nutritional supplementation through oral medications like rajapravartini vati and matra basti showed encouraging results in the artavakshaya, with improvement in the symptoms of vibandha. Thus, the results suggest that matra basti can be established as an effective treatment for most of the complaints related to artavakshaya.

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