



AYURVEDIC MANAGEMENT OF ASRIGDARA WSR TO DYSFUNCTIONAL UTERINE BLEEDING-A CASE STUDY

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ABSTRACT

A problem that may affect women at some juncture of their lives, is an abnormal uterine bleeding from the vagina which occurs outside the regular cycle of menstruation. Ayurveda has explained various menstrual abnormalities under the heading of *Artava dushtis*. Nevertheless, our Acharyas have introduced the concept of *Asrigdara* which refers to all types of irregular and abnormal uterine bleeding irrespective of the reproductive age the woman belongs to. According to the definition, the disease *Asrigdara* appears to be analogous to menorrhagia, metrorrhagia and both menometrorrhagia. Menorrhagia can be due to underlying clinically detectable organic, systemic and iatrogenic cause or without the presence of any pathology as in Dysfunctional Uterine Bleeding. DUB can occur in girls expecting puberty or women who are about to enter menopause, as they can have

an imbalance in the hormonal levels for a long time. Contemporary science offers hormonal and non hormonal medical management and surgical management includes endometrial curettage, resection or hysterectomy. But, Ayurveda, the science of life has extensively mentioned various drugs and formulations depending on the doshas involved in the pathology. Hence, a case of *Vataja asrigdara* treated successfully with oral medications through Ayurveda is discussed.

KEYWORDS: *Artava dushti*, *Asrigdara*, menometrorrhagia, Dysfunctional Uterine Bleeding.

INTRODUCTION

Ayurveda emphasizes on *Shuddha artava lakshanas*^[1] wherein the menstruation is devoid of any sorts of discomfort such as pain and that which flows for *Pancha ratri* (5nights) under the governance of *prakruta Apana vata* from the *Yonimukha*. Any deviation in the pattern of normal menstrual flow can be understood as abnormal and *asrigdara* is one such *artavavyapad* defined as a condition where there is *pradeerana* of *Raja*^[2] or excessive flow of menstrual fluid and can be correlated to Dysfunctional Uterine Bleeding, which is a state of abnormal uterine bleeding without any clinically detectable organic, systemic and iatrogenic cause (pelvic pathology like tumour, inflammation)^[3] The prevalence varies widely but an incidence of 10% amongst new patients attending the outpatient seems logical.^[4] A critical analysis of the causes enumerated by Acharya Charaka indicate the excessive usage of *Amla, Lavana, Guru, Snigdha ahara dravyas* that cause the aggravation of *Vayu* which vitiates *Rakta* implying the vitiation of *pitta* and there is excessive discharge of *Rakta* in the form of *Raja* by entering the *Garbhashaya*.^[5] Acharya Vagbhata has mentioned excessive bleeding during menstrual or inter-menstrual period as main symptom which is also associated with *Angamarda* and *Vedana*.^[6] The symptoms slightly vary with the predominant *Dosha* involved and hence it is subdivided into 4 types such as *Vataja, Pittaja, Shleshmilki* and *Sannipatiki*. In *Vataja asrigdara*, there is *Phenila, Tanu, Rooksha, Shyava* and *Aruna artava srava* and appears as *Kimshukodaka* with or without pain. There is pain in *Kati, Vankshana, Hrit, Parshwa, Prishta* and *Shroni*. The first line of treatment is *Nidana parivarjana, Rakta stambhana* followed by *Doshanusara chikitsa* to attain normalcy of *Doshas* involved and *Bala* of the woman is improved.

CASE STUDY

A 41 year old female approached the Stree roga OPD on 19th April, 2018 with the complaints of excessive vaginal bleeding since more than a week. Her LMP was 8/4/2018. She changed 6-7 pads per day associated with clots, pain in lower abdomen and back pain. In the month of march 2018, she had similar complaints for which she approached a nearby clinic and was prescribed pain killers and medicines to stop bleeding. She also complained of pain abdomen, intermittent, insidious in onset and progressive in nature associated with generalised weakness, bodyache and pelvic pain. The patient had no history of Diabetes mellitus, Hypertension or Thyroid dysfunction.

Menstrual History

Menarche attained at 13 yrs of age. Menstrual cycles were regular since menarche - 4-5 days/28-30 days, 2-3 pads on second day with no pain and clots occasionally. Obstetric History –P3A0L3, all 3 were full term normal deliveries and was uneventful, tubectomised 19 years back.

Physical examination was normal. Systemic examination such as CNS, RS, CVS were normal.

Per abdomen

Inspection- Umbilicus-centrally placed, linea albicans present.

Palpation-soft, tenderness present in hypogastrium.

Per speculum and per vaginal examination were withheld as patient was bleeding.

USG Abdomen and Pelvis advised on 19/4/18 was normal.

Course of treatment

Panchavalkala kashaya (freshly prepared) 30mL orally twice daily

(15 g of *panchavalkala kwatha choorna* added with 120 mL of water, 5 days.

boiled and reduced to 30mL, filtered and taken orally)

Tab. Styplon 2 tabs thrice daily

after food for

Ashoka ghruta^[7] - 1tsp twice daily before food with milk for 2 months.

RESULT

The patient's condition was reviewed for the following 3 consecutive menstrual cycles, her cycles were regularised. No of days of bleeding was 3-4 days, 3 pads per day and no pain. Clots absent.

Mode of action of Shamana aushadhis

Panchavalkala Kashaya: *Panchavalkala* includes *Nyagrodha*, *Udumbara*, *Ashwattha*, *Plaksha* and *Pareesha* have *kashaya rasa*, *Sheeta veerya* and *Grahi* property. It thus helps in *Rakta stambhana*. So, it becomes the first line of treatment to stop per vaginal bleeding.

Styplon tablet contains *Vasa*, *Durva*, *Nagakesara*, *Lajjalu*, *Chandana*, *Lodhra* and *Anantamoola* having *Kashaya rasa*, *Sheeta veerya* which causes *Rakta stambhana*. *Amalaki*

is a *Rasayana dravya*, which helps in proper circulation of *rasa* to all parts of body, especially to *Garbhashaya* and helps proper formation of *Artava*.

Ashoka ghrita^[7]: It contains *Ashoka moola* and *Twak, Ajaksheera, Kakoli, Meda, Mahameda, Jeevaka, Yashtimadhu, Draksha, Shatavari, Sita* and *Goghrita*. Most of the ingredients have *Kashaya* and *Madhura rasa, Sheeta veerya, Rakta stambhaka* and *Vata-pittahara dravyas*. The main ingredient is *Ashoka* which is a uterine tonic and haemostatic in nature. *Ghrita* has *Madhura rasa, Sheeta virya* having *Vata-pittahara qualities*. It is *Balya*, and is beneficial for *Rasa dhatu* and does *Preenana of Yoni*.

DISCUSSION AND CONCLUSION

Menstrual abnormalities involving excessive vaginal bleeding can be included under the heading of *Asrigdara* according to Ayurveda. It becomes necessary for a gynaecologist to find out the exact cause leading to the condition and the doshas involved in the *Samprapti* for *Samprapti vighatana* by the use of appropriate *Aushadha dravyas*. The *Aushadha yogas* used in this case were mainly *Vata-pittahara, Rakta stambhaka* and *Rasayana* and thus were helpful in this condition.

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