



AYURVEDIC APPROACH TO DYSFUNCTIONAL UTERINE BLEEDING

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ABSTRACT

Women's health refers to her physical, social, mental and emotional well-being. They have long been disadvantaged in many aspects of life such as social and economic states which restricts their access to the necessities of life including reproductive Health. One such deteriorating condition faced by today's women is the Dysfunctional uterine bleeding. DUB is a condition which causes vaginal bleeding to take place outside of the regular menstrual cycle. In regards, certain hormonal conditions and medications may also trigger DUB. The main cause of dysfunctional uterine bleeding is an imbalance in the hormonal pathway and HPO axis. Some of the common symptoms related to DUB: heavy menstrual bleeding, bleeding that occurs less than 21 days from the last cycle, bleeding that contains many clots or large clots, bleeding that lasts more than 7 days, bleeding that occurs later than 35 days from the last cycle. The ancient system of Medicine i.e. *Ayurveda* describes in its classics, multiple treatment etiquettes for DUB. We present here a case study of 30yrs old female complaining of excessive vaginal bleeding for about more than a year diagnosed as DUB. After failing the results with modern drugs, she approached for *Ayurveda* care. *Ayurvedic* medications were given which showed significant results in her bleeding pattern.

KEYWORD: Asrigdar, Raktapachak Yoga, Menorrhagia.

INTRODUCTION

According to *Ayurvedic* aspect, *Asrigdara* is correlated to Menorrhagia.^[1] In classical text, the etiological factors, pathogenesis of *Asrigdara* has been mentioned.^[2] The case to be presented in relation to *Asrigdar* refers to *Rakta dhatu* dushti itself.

रजः प्रदिर्यते यस्मात् प्रदरस्तेन स स्मृतः ॥

-(च . चि 30/209)

असृग् दिर्यते च्यव्यते अस्मिनिती असृग्दर ॥

-(मा. नि. मधुकोष टीका 61/2)

Dosha-dushya involved in asrigdar

Dosha

- Vata** - The main event in *Asrigdara* is *Vata dushti*. The process of excretion of *Raja* is the karma of *Apan Vayu*. Because of *vata dushti*, normal karma of *Vata* is altered and there is excessive excretion of *Raja* through vagina.
- Pitta** - *Rakta* is produced by the action of *Ranjaka Pitta* on *Rasa*. In *Asrigdara* there is *Pitta dushti* which leads to excessive production of *Rakta* quantitatively which is excreted by the body as menstrual blood.

- Kapha**: Comparatively there is little *Kapha dushti* in the *Asrigdara* disease. *Avalambak Kapha* plays a minor role to deteriorate the pathogenesis.

In this way, *Apana & Vyana vayu, Ranjaka Pitta & Avalambak Kapha* all are vitiated in *Asrigdara*.

Dushya

In *Asrigdara* there is *dushti* of –

- *Rajovaha strotasa*
- *Rakta Dhatu*
- *Raja – Upadhatu*

The imbalance in the HPO axis is the prime reason to consider. Dysfunctional uterine bleeding suggest non-involvement of pelvic pathology or secondary cause as such.

REVIEW

A 30 year old married female patient, presented with chief complaint of heavy menstrual bleeding more than a year for 12-15 days of menstrual cycle. The patient was under modern medicinal treatment for above complaints. The patient was not willing to undergo surgery and requested *Ayurvedic* treatment as an alternative

treatment. On examination, *Nadi* was *Vatapradhan*, *Ksheenbala*; normal *Mala*, *Mutra* and *Jivha*. *Kshamswara* (low voice) and sleep disturbance were also seen. Impression of USG pelvis report showed no intrauterine or obvious extra uterine gestation.

In Abdominal examination, the Percussion and auscultation sounds were normal, Peristalsis sounds heard.

Menstrual History- Interval period: 26-28 days (Regular cycle), Duration: 12-15 days with mild pain and clots, Bleeding pattern-Heavy menses.

Menarche-12th year of age

Marital Status-married since 11 years

Obs History- G2 P2 L2 A0 D0 – (G1) Female child 8 yrs FTND, (G2) Female child 4 years FTND

No evidence of Family History or related surgical history.

Investigations-

Hb % - 10.00 gm/dl, BT – 4min CT – 6 min, Blood sugar fasting – 76gm/dl & PP-124 gm/dl, HIV-HbsAg(Neg).

We followed Ayurveda treatment regimen for 15 days in follicular phase. The treatment regimen followed is described in the table below. She reported with improved bleeding pattern and also increase in appetite. The similar regimen was continued in next cycle post menstrually for 15 days in follicular phase for 3 consecutive months.

Oral ayurveda treatment regimen

Sr. No.	Drugs	Dose	Cycle regimen	Duration
1	Padmakashtha Churna ^[3]	5gm BD	Follicular phase	3 months
2	Praval Pishti ^[4]	250 mg BD	Follicular phase	3 months
3	Vasaavleha	10 gm BD	Follicular phase	3 months
4	Raktapachak Yoga	2tablets BD	Follicular phase	3 months
5	Durva Swaras ^[5]	5ml BD	Follicular phase	3 months

The above treatment was followed in combination forms as in- Padmakashtha churna mixed with Praval pishti

with durva swaras as anupan, Vasaavleha and Raktapachak Yoga separately.

OBSERVATIONS

	Before treatment	1 st month	2 nd month	3 rd month	After treatment
Duration	12-15 days	12-15 days	7-8 days	5-6 days	5-6 days
Clots	Present	Reduced than before	Nil	Nil	Absent
Pain	++	++	+	-	--
Total no.of pads	6-7 pads/day	4-5 pads/day	3-4 pads/day	3-4 pads/day	3-4 pads/day

DISCUSSION

Padmakashtha churna and praval pishti both pacifies pitta dosha. As pitta and rakta are interrelated to each other, the dushti of pitta dosha also leads to rakta dushti. The dushit rakta needs its detoxification and hence Raktapachak yoga is indicated for pachan of rakta dhatu. Vasa in the ayurvedic classics is said as Raktapittaghna. Durva Swaras being sheet in virya also helps in its pacification. Ayurveda hence enables the disease to regress and leads to its samprapti bhanga.

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