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MENOPAUSE -AN AYURVEDIC PERCEPTION

Dr. Heena Khan^{1*} and Dr. Surekha Dewaikar²

^{1*}PG Scholar, Dept. of Streerog-Prasutitantra, R. A. Podar Medical College (Ayu.), Worli, Mumbai.

²HOD & Professor, Dept. of Streerog-Prasutitantra, R. A. Podar Medical College (Ayu.), Worli, Mumbai.

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*Correspondence for Author

Dr. Heena Khan

PG Scholar, Dept. of Streerog-Prasutitantra, R. A. Podar Medical College (Ayu.), Worli, Mumbai.

ABSTRACT

Menopausal syndrome is gaining importance in clinical practice as a continuous exponential surge has been noted over years. Menopausal syndrome is group of symptoms varying from patient to patient and involves endocrine, psychological as well as physical fractions. Appropriate care of these postmenopausal (geriatric) women will put a tremendous strain on healthcare systems of our nation. Out of these, physical problems are nicely tackled by modern medical science, but this modality does not contribute much in psychological aspect. This failure enhances the severity of the problem. So wide variety of alternative medicines are used to improve menopausal symptoms. With a proper *aahar*, *vihar*, *aoushadhi*, *panchakarma* the effects of

menopause can be minimized to great extent.

KEYWORDS: Menopause, *Panchakarma*, *Aoushadhi*.

INTRODUCTION

According to World Health Organization by the year 2020 more than thousand million people aged more than 60 years will be living in the world. Of course 700 million will be living in developing countries and 20% of them will be living in India. With increased life expectancy, it is now established that women spend one third of their lives in the postmenopausal estrogen deficient state. This condition has not been directly mentioned in *Ayurveda* classics but on the basis of principles of *Anukta Vyadhi chikitsa*; *doshika* predominance; effective management through *Ayurveda* can be done. The details of conceptual study is discussed in the paper.

MATERIAL AND METHOD

All available authentic books viz. *Samhitas* and their respective commentaries have been referred for the specific materials. Different related websites on internet, magazines, articles etc. have been used as literary materials and a humble attempt has been made to draw conclusion.

Conceptual View

Menopause is Greek word that means 'cessation of monthly menses'. The mean age of onset is around 51–52 years. Premature menopause should be considered as a diagnosis in any women under 45 with prolonged (>6 months) amenorrhea. There are several hormonal changes that are occurring as a woman enters her later reproductive years including decreases in the production of estrogen and progesterone, decrease receptiveness of the ovaries to FSH (follicle stimulating hormone) and LH (luteinizing hormone) and a decrease in the post ovulation levels of progesterone. The menopause is a hormonal milestone that occurs in all women and provides an opportunity to identify specific risks and build for a healthy future. The central change is a dramatic fall in the amount of circulating estrogen.

Every woman faces this "change of life" as a part of hormonal derangement. Sometimes such disturbances attain the stage of disease or syndrome called as "Menopausal Syndrome" which is accompanied by various vasomotor, psychological and genital, locomotors and GIT related symptoms.^[3]

Symptoms of menopause^[4]

Hair Loss, Digestive Disturbances, Cystitis, Vaginitis, Anxiety, Nervousness and Depression Vaginal Dryness, excessive Sweating, Hot Flashes, Irregular Periods, Disturbances in menstrual pattern, Sore Breasts, Fatigue, Dizziness, Joint Pain, Headaches, Tachycardia, Decreased Libido, Bladder Incontinence, Vaginal Atrophy, Depression, Tension, Irritability, Nervousness, Feeling unhappy, Insomnia, Fatigue, Excitability, crying, Palpitations, Loss of interest in most things, Difficulty in concentrating, Attacks of panic.

Treatment

The menopause is a natural event and for many women there is no need to 'manage' it at all, although awareness of the long-term implications, such as osteoporosis and cardiovascular disease, should be part of good preventative medicine. However, for other women the menopause can be a difficult time. For most women, menopausal symptoms are relatively

short lived and will settle within a few years, but for some they will go on much longer and longer term treatment may be needed. While Hormone Replacement Therapy (HRT) is an extremely effective option, ^[5] it is only one of a number of possible approaches. The mainstay of hormone replacement in the absence of ovarian function is estrogen (ERT i.e. Estrogen Replacement Therapy), usually with the addition of a progestin. The HRT can be mainly divided into two types i.e. (i) ORAL and (ii) PARENTERAL.

INDICATIONS AND CONTRAINDICATIONS OF HRT^[6]

Indications

- Natural menopause Hot flushes Vaginal atrophy Urinary tract symptoms
- High risk for cardiovascular disease like, previous myocardial infarction/angina;
 hypertension, smoking, family history.

Absolute contraindication

- Pregnancy Undiagnosed uterine bleeding.
- Estrogen dependent cancer in the body (e.g. endometrial cancer).
- Active thrombophlebitis Current gall bladder disease.
- Active or chronic liver disease.
- Surgical or radiation menopause in more younger women.
- Premature ovarian failure Turner's syndrome.
- Gonadal dysgenesis Prolonged use of corticosteroids, GnRh and heparin.

Relative contraindication

- History of breast cancer.
- History of recurrent thrombophlebitis or thromboembolic disease.
- Malignant melanoma Endometriosis Hypertriglyceridemia History of migraine.

BENEFITS OF HRT/ERT^[7]

HRT or ERT is beneficial in both symptomatic and symptom free cases of menopause unless there is any contraindication to the therapy. The possible benefits include prevention or control of vasomotor symptoms, insomnia, genital atrophy, coronary artery diseases, osteoporosis etc.

Specific benefits - Prevents osteoporosis.

Potent benefits- Prevents cardiovascular diseases and stroke.

Other benefits -Reduces Hot flushes & excessive Sweating, reduce Vaginal atrophy and restores sexual desire. It improves energy, mood & sense of well-being. It May improve concentration and sleep disturbances. It may decrease the risk of Alzheimer's disease.

POTENTIAL HEATH RISKS OF HRT/ERT^[8]

Though HRT or ERT is viewed as specific treatment for Menopausal Syndrome, there may be some potential health risks of HRT like Endometrial cancer, endometrial hyperplasia, Breast cancer, Gall bladder disease, Thrombophlebitis, Hypertension.

Side effect of HRT

- Estrogen related: Vaginal bleeding, Increased cervical mucus, Nausea, Vomiting, Fluid retention, Weight gain.
- Progesterone related: Symptoms like PMS, Anxiety, Irritability, Depression, Sleep disturbances.
- Others: Itching, Headache, Coronal changes, Loss of hair etc.

AYURVEDIC VIEW

In *Ayurveda*, this phenomenon taken in a different way and not as a serious health problem. As *Sushruta* mentioned that menopause deals with *Jarapakva avastha* of the body. [9] *Rajonivritti* is classified under *Swavabhavika vyadhi*^[10] occurring at the end of *Praudhawastha* and beginning of *Jarawastha* where *vata* starts overpowering *pitta dosha*^[11] and causes gradual decline of all *dhatus*.

Rajonivritti Kala :- (Age Of Menopause)

Though *Rajonivritti* as a diseased condition is not described separately in the classics, *Rajonivrittikala* is mentioned by *Sushruta* and various other references too. 50 years is mentioned as the age of *Rajonivritti*.^[12] *Acharya Arundatta* opines that the age mentioned above is a probable age and not a fixed one. There may be some variations in this regard.^[13] Considering the variations, factors influencing it, can be logically quoted as either environmental or the individuality of a women. As *Ayurveda* has given more importance to *Ahara* and *Vihara* in the maintenance of health^[14], these factors too, should be considered for this fluctuation.

As it is already mentioned that *Rajonivritti* is not described in the classics as a separate disease there is no information available regarding its *Nidanapanchaka* So, to understand this

condition as a disease, certain Basic principles have to be considered here. Some of these factors are mentioned by *Acharyas* in the context of "*Rajah utpatti hetus*", too. These factors can be considered as *Rajah nivritti hetus* also. Besides this, some very specific factors also can be considered as the causative factors for *Rajonivritti* which all are enlisted below.

- 1. Kala.^[15,16]
- 2. *Swabhava*. [17]
- 3. Vavu.^[18]
- 4. Karma/Environment. [19]
- 5. Dhatukshaya. [20]
- 6. Abhighata. [21] Etc.

Types of Rajonivritti

Ayurvedic science has divided all diseases into 4 major types. *Agantu, Sharira, Manas* and *Swabhavika*^[22] A group of naturally occurring diseases under the heading of *swabhavabala pravritta* includes *Kshudha* (Hunger); *Pipasa* (Thirst), *Nidra* (Sleep), *Jara* (Aging) and *Mrityu* (Death). Although these disease are naturally occurring diseases, but sometimes they are being acquired also, which is described as "*Doshaja*". So, they are further divided into two types viz. *Kalakrita* and *Akalakrita*. In the same manner, *Rajonivritti* too is a naturally occurring condition in every woman as that of *Jaravastha* etc. *Swabhavika Vyadhies*. So *Rajonivritti* also can be divided into two types.

1) Kalaja Rajonivritti

2) Akalaja Rajonivritti

1) Kalaja Rajonivritti

If *Rojonivritti* occurs at its probable age (i.e. around 50 years of age) it is called as *Kalaja Rajonivriti*. the timely *Rajonivritti* (i.e. natural diseases like aging) occurs only when the protective measurements of healthcare being practiced. This condition is *Yapya* by *Rasayana* etc.

2) Akalaja Rajonivritti

If *Rajonivritti* occurs before or after its probable age (i.e. around 50 years) it is termed as *Akalaja Rajonivritti*. *Akalaja Rajonivritti* take place due to absence of the protective measurements of health care. According to *Acharya Dalhana*, they should be treated on the basis of nature of illness (Roga) surfaced due to pathology of *Rajonivritti* and on the basis of *dosha* involved in it.^[26] This Akalaja Rajonivritti is more likely treatable than Kalaja

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Rajonivritti.

LAKSHANAS OF RAJONIVRITTI

As there is no direct reference available regarding *lakshanas* of *rajonivritti* in the Ayurvedic classics, the clinical symptoms manifested by the patients of *rajonivritti* have to be considered and can be grouped under following Ayurvedic parameters.

- (A) Doshaja lakshanas.
- (B) Dhatukshayaja lakshanas.
- (C) Manasika lakshanas.

(A) Doshaja lakshanas

According to available symptoms, differentiation can be done as *Vataja lakshanas*, *Pittaja lakshanas* and *Kaphaja lakshanas*. As this condition is characterized by generalized *vata vriddhi*, the *Vataja lakshanas* are more dominantly observed than other two (*Pittaja* and *Kaphaja*) *lakshanas*.

Vataja Lakshanas

| 1. Shirah Shula | 2. Hrid Spandanadhikya | 3. Hasta-Pada Supti |
|---|------------------------|------------------------|
| 4. Shabda Asahisnuta | 5. Bala Kshaya | 6. Adhmana |
| 7. Atopa | 8. Vibandh | 9. Anidra/Alpanidra |
| 10. Bhrama, Katishula | 11. Sandhi Vedana | |
| Pittaj Lakshanas- | | |
| 1. Ushnanubhuti | 2. Daha | 3. Swedadhikyata |
| 4. Ratrisweda | 5. Trisha | 6. Mutradaha, Yonidaha |
| Kaphaja Lakshana 1. Hrid dravatva | 2. Bhrama, Raukshaya | 3. Angamarda |

(B) Dhatukshayaja lakshanas

As this condition is a sequel of generalized *dhatukshayajanya avastha*, the symptoms of *dhatukshaya* are also observed in the patients of *rajonivrittri*, which can be grouped according to the individual *dhatukshayaja lakshanas* as follows.

Dhatukshayaja Lakshanas

1) Rasakshaya

Shabdasahatva • Hriddravatva • Shula • Shrama • Shosha • Trisha.

2) Rakta Kshaya

• Twaka rukshata • Sira shaithilya.

3) Mamsa Kshaya

- Sphik-Gandadi Shushkata Toda Rukshata Glani.
- Sandhisphutana Sandhi Vedana Dhamani Shaithilya.

4) Meda Kshaya

• Anga Rukshata (i.e. vaginal dryness) • Shrama • Shosha • Krushata.

5) Asthikshaya

Asthitoda • Danta-Nakha-Kesha-Roma (Rukshata /Shatana) • Sandhishaithilya.

6) Majja Kshaya

• Asthi Saushirya • Asthi toda • Daurbalya • Bhrama • Tamodarshana• Sandhi Shunyata.

7) Shukrakshaya

• Yoni vedana • Shrama • Daurbalya • Panduta.

(C) Manasika lakshanas

In *Rajonivritti*, Psychological symptoms also commonly observed due to vitiation of *Manovaha srotas*. So these symptoms can be grouped under the heading of *manasika lakshanas* as follows.

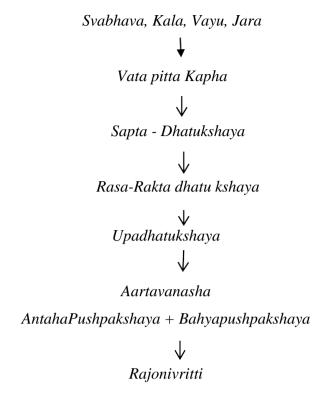
Manasika Lakshanas

Krodha, Shoka, Bhaya, Dwesha, Smriti hras, Utsaha hani, Dairya Hani, Shirah Shula Vishada, Chinta, Medhahras, Alpa Harsha and Priti Parakramahani.

These symptoms are very troublesome to the patients as well as for physician. Some times that disturbed the whole family happiness of the patients. So, it is very necessary to treat these symptoms with proper medical help as well as counseling and family support too.

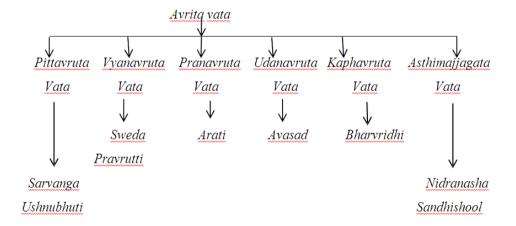
Probable Samprapti of Rajonivritti

As the pathogenesis of *rajonivritti* is not elaborately described in Ayurvedic text. First of all classics have quoted the age around 50 years as the probable age for *rajonivritti*. This age limit is dominated by "*Vata dosha*" and obviously it easily is get vitiating during this time. ^[27] This dominant *vatadosha* will have effect all over the female body including all anatomical as well as physiological factors by virtue of its i.e. "*laghuta*" and "*rukshata*". At the age about 50 years, the decline process starts in female body due to *jaravastha* as a natural process.



☐ Samprapti ghataka

- Dosha Vata, Pitta.
- Dushya Sapta dhatu including updhatu Aartava.
- Agni Jatharagni and Dhatvagni vishamata.
- Strotas Rasavaha, Raktavaha, Aartavavaha.



CHIKITSA

Hormonal imbalance produced in condition of Menopause, is the base for various Physical as well as Psychological manifestations.

Aahar (Diet). [28] – Soya, Wheat, eggs, milk, basil, fenugreek.

Vihar^[29] – Ashtangyoga, Aasan like Makarasan, Vajrasan, Bhujangasan, Sihasan, Mandurasan, Bandh, Change of lifestyle.

Herbs^[30] -Shatavari, Ashwagandha, Ashoka, Guduchi, Jatamansi, Brahmi, Haritaki, Shankhapushpi, Bala, Yashtimadhu, Chandrashura.

Aushadhi^[31] (Medicines) -Mansyadi Kwath, Amalki Rasayan, Medhya Rasayan, Praval Pishti, Kamadudha Rasa.

Panchakarma^[32]- Shirodhara, Basti, Nasya, Shirobasti.

DISCUSSION

Being an alarming problem, it needs an effective and safe treatment. In modern science, Hormone Replacement Therapy (HRT) is one and only alternative for this health hazard by which one can get spectacular achievement in combating the disease, but it has a wider range of secondary health complications like vaginal bleeding, breast cancer, endometrial cancer, gallbladder diseases etc. On the other hand, this therapy is not much effective in the psychological manifestations of this stage. They manage them by the long term use of Sedative, Hypnotics and Anxiolytic drugs, which may lead to various side effects like drowsiness, impaired motor functions, loss of memory, allergic reactions, nonsocial behaviors, drug dependence etc.

Therefore, there is a wide scope of research to find out safe, potent, cost effective remedy from Ayurveda for the management of afore said lacuna. It is well proved that this health hazard can be well managed with certain Ayurvedic therapeutics having *Medhya* and *Rasayana* properties.^[33] Hence, in this study, certain *Medhya Rasayanas*, which are very well proved for their psychotropic effects, are taken as a special treatment methodology of Ayurveda known as *ashtang yoga*, *Nasya*, *shirodhara*.

Despite this, the use of such treatments is widespread and increasing. The *aahar* like soya, wheat, eggs, milk, basil, fenugreek; herbs like *Shatavari*, *Ashwagandha*, *Ashoka*, *Guduchi*, *Jatamansi*, *Brahmi*, *Haritaki*, *Shankhapushpi*, *Bala*, *Yashtimadhu*, *Chandrashura* are rich in Phytoestrogens. Which are plant substances with similar activity to estrogen, do appear to have some beneficial effects on both menopausal symptoms.

CONCLUSION

A wide variety of alternative medicines are used to improve menopausal symptoms, although there is little evidence for the efficacy and safety of most of them and there are a variety of treatment options available.

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