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Case Study

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RAKTPRADAR A CASE STUDY WSR MENORRHAGIA

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ABSTRACT

In Day to Day life Raktapradar is Customary entity associated with grave bleeding Besides Associated with or without menstruation further classified as Artav Atipravrutti Deerghkal pravrutti, Anrut kal pravrutti that hampers women's Day to Day life physically Mentally, psychologically so there is scarcity and need of better care options which are Non surgical, Non Hormonal. Methods that effectively reduces the rate of raktapradar Cases. Various modalities are given in Ayurveda classics. This article Describes 28 yrs old women who was complaining of raktapradar. In present study, Yashtimadhu churna and Boladi vati provided Noteworthy Relief in Symptoms of Raktapradar.

KEYWORDS: Raktapradar, Boladi Vati.

INTRODUCTION

There is Marked incidence of irregular and excessive uterine bleeding due to changes in food Habits, lacking exercise, change in Day to Day life. Asrugdara is one of the Disorder occurring In puberty, menarche, menopause and post menopausal phases of life. Raktapradar means Huge excretion of menstrual blood. According to acharya charak, pradiran of Raja is termed As raktapradar means excessive bleeding per vagina like deep Rupture of Endometrial Later (Pradiran).^[1]

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Acharya sushrut Also explained it as a Raktapradoshaj vyadhi^[2] for the management of Raktapradar variety of herbal, polyherbal mineral drugs included in Ayurveda classics Hevay menstrual bleeding can managed with modern modalities which has ample side effects And if not responding to medical therapy surgical options preferred which is harmful to Uterus so there is huge need of effective harmless therapy and innervation. Many treatment Options available.

Ashtang sangrah explained it as a raktayoni and said Asrugadara as raktapradar's synonym.[3,4]

Ashtang Hriday also describes raktayoni and describes under synonym of raktapradar. [5]

For management of raktapradar, raktasthapak and raktasthambak chikitsa used as described In raktayoni chikitsa.^[6]

According to commentator Dalhan, raktapradar can be treated as same As Adhog raktapitta.^[7]

With modern point of view, menorrhagia means cyclic bleeding but huge in amount or with prolonged timespan and can be cured by hormonal treatment options and folate iron supplementation in anaemic cases. Menorrhagia on focusing present study the women who Consumes too much salty, sour, katu, vidahi ahar, Domestic meat, curd, mastu, wine increases Vata dosha, withholding rakta it increases in quantity and goes into raja carrying vessels of uterus that leads to increase in amount of raja. Increase in menstrual blood leads to increase in rasa known as raktapradar. Main leading factors in pathogenesis of raktapradar are pitta vata rasa rakta and agnimandya. The present study drug properties are responsible to control bleeding.

AIMS AND OBJECTIVES

- 1. To study the efficacy of yashtimadhu churna and boladi vati in Raktapradar.
- 2. To study the Literature aspect of raktapradar.

MATERIALS AND METHODS

A single case study was done using standard Ayurvedic treatment And supplementation of iron.

CASE REPORT

A 28 yrs married women come to prasutitantra and streerog OPD Of GACH Dharashiv on 13/02/25 with complains of prolonged vaginal Bleeding after menses with excessive amount of 7-8 pads per Day With moderate pain in abdomen, generalised weakness, Body aches Her abdominal usg reveals endometrial hyperplasia with ET 8mm H/O Present illness Pt Has H/O Taking Oral contraceptive pills for Heavy menstrual Bleeding During last one year but didn't got satisfactory relief on That medication. So for further treatment she approached to opd H/O past illness- Not significant.

Personal History

Diet-vegeterian

Bowel-1T/Day

Appetite-Good

Micturition-4-5T/Day

MENSTRUAL HISTORY

LMP on 1st January 2025 with PV bleeding for 18 days.

Has regular menstruation with heavy flow (7 to 8 pad/day) and duration of 10 to 15 days with the interval of 30 to 32 days associated with mild lower abdominal pain since last 6 months Past menstrual history: 5-7/28-30 days with normal flow.

ASHTAVIDHA PAREEKSHA

Nadi - 70 bpm

Mala - once a day

Mootra - 4-5 times/day & occasionally at night

Jiwha – alpasama

Shabda – spashta

Sparsha – anushna

Drika – shwetabh

Akriti - madhyama

DASHAVIDHA PAREEKSHA

Prakriti – Kapha Pradhan pitta

Vikriti – pitta

Sara – madhyama

Samhanana – madhyama

Pramana – madhyama

Satmya – madhyama

Satva – madhyama

Ahara Shakti – madhyama

Vyayama Shakti – alpa

GENERAL EXAMINATION

Built - moderate

Nourishment – moderate

Temperature - 98. 6 F

Respiratory rate -20 / min

Pulse rate - 84 / min

BP - 110/80 mm of hg

Weight - 65 kg

Tongue – coated

SYSTEMIC EXAMINATION

CVS - S1, S2 heard

RS - normal breathing

CNS - conscious, well oriented

P/A - soft

P/V – not done as she is unmarried

INVESTIGATIONS

18/1/2025

Hb - 6gm

TLC - 3800/cu mm

RBC - 8500/cu mm

USG (pelvis) – Hyperplastic endometrium with thickness 8mm

TREATMENT PLAN

Deepan-pachan, Raktavardhak and Raktasthambhak Chikitsa planned for the patient.

Risk of Anaemia explained to her mother and father. Treated for medications and Oral medications as follows.

- 1. Tab. Bolbaddha Ras^[9] 250mg, 1tid with normal water for 5 days
- 2. Yashtimadhu churna 5 gm BD with Normal water
- 3. Syp. Ashokarishta^[11] 15ml bd with normal water
- 4. Navayas loha vati 2 BD for one month continued oral medication.

FOLLOW UP AND OUTCOME

1sT follow up- Patient relieved to some extent with moderate p/v bleeding for 7 days with 4 to 5 pad per day.

Further she was treated with.

- 1. Bolbaddha rasa 250mg, 1 tab BD for 5 days
- 2. Pradaradi lauha[12] 250mg 1tab TID for 10 days
- 3. Shankha vati 250mg 2tab BD for 5 days
- 4. Syp. Ashokarishta 15ml bd with water for one month.

2ND follow up- Patient relieved completely with normal p/v bleeding for 5 days with 2 to 3 pad per day. Same treatment was repeated for next one month, such a way patient was treated for 3 months with excellent outcome.

DISCUSSION

Disease Discussion: Related to this patient the possible causes are, eating spicy food, fast food, junk food, exertion, Ratri Jagaran and stress. Due to above causes Vata along with Pitta are vitiated which leads to Apan Vayu Dushti and Rasavaha and Raktavaha Strotodushti affecting the Artavavaha Strotasa. So, the symptoms like Atyartava, pain in abdomen, lowbackache and general weakness occurred.

DRUG DISCUSSION: All above drug used are standard preparations given in classic text. Shankh Vati has Agni Deepan and Aampachan action. Also it acts as a pain relieving medicine.

- Bolbaddha Rasa has hemostatic and astringent property so useful in menorrhagia.
- Pradaradi Lauh acts as detoxifying agent and helps to correct anemia. It also cures the
 excessive blood loss by its astringent properties.

- Ashokarishta- It acts as an uterine tonic, corrects menstrual irregularities, controls heavy and prolong bleeding during menses also reduces cramps and burning sensation.
- Nidan parivarjan also plays an important role in Smpraptivighatan of disease which was explained in our classics.

CONCLUSION

Management of Raktapradar approach Aimed to be and proved successful. Above used standard drug preparation not only helps to stop the Huge bleeding per vaginum but also corrected anemia and regulate and modifies the normal menstrual cycle. Pradaradi Lauh, Bolbaddha rasa and Ashokarishta also helped to detoxification and impure the body and improved overall health of a patient. Likewise, Pathya-Apathya also plays crucial role as explained in samhitas.

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696

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