

**AYURVEDIC MANAGEMENT OF ARTAVA KSHAYA
(OLIGOMENORRHEA): A CASE STUDY****Sweta Singh Rathore^{1*}, Saurabh Kumar²**

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ABSTRACT

This case study examines the efficacy of an Ayurvedic intervention in managing Artava Kshaya, a condition characterized by oligomenorrhea and hypomenorrhea. An 18-year-old female presenting with a two-year history of irregular cycles, scanty flow (2-3 days), and dysmenorrhea was treated with a tailored protocol of Ajmodadi Churna, Rajapravartani Vati, and Kumaryasava for a specified duration. The assessment, based on a subjective scoring system for cycle duration, interval, flow quantity, and pain, revealed significant improvement. All pre-treatment scores of 2-3 were reduced to 0 post-treatment, demonstrating the regimen's success in normalizing menstrual cycle parameters and alleviating pain. This study highlights the potential of a holistic Ayurvedic approach in addressing the root cause of menstrual irregularities.

KEYWORDS: Artava Kshaya, Oligomenorrhea, Ayurveda, Dysmenorrhea, Rajapravartani Vati.

INTRODUCTION

Any deviation from its normal pattern is classified as a menstrual irregularity, which can be a significant precursor to infertility. The text specifically focuses on Artava Kshaya, an Ayurvedic entity correlated with the modern conditions of Oligomenorrhea (infrequent periods, cycles >35 days) and Hypomenorrhea (scanty menstrual flow).^[1]

From an Ayurvedic perspective, Artava Kshaya is not a disease in itself but a symptom arising from a deeper systemic imbalance. The primary pathogenesis, as described by the Acharyas (scholars), originates from dietary and lifestyle factors (*vata-kapha kara ahara vihara*) that weaken the digestive and metabolic fires—specifically *Jatharagni* (central digestive fire) and *Dhatwagni* (tissue-specific metabolic fire).^[2] This impairment leads to the production of *ama* (toxins) and causes *avarana* (obstruction or channel blocking) in the *rasa* (nutrient plasma), *rakta* (blood), and *medovaha srotas* (channels carrying adipose tissue).^[3] The vitiation of *Kapha* and *Vata* doshas is central to this process; Kapha causes the obstruction, while Vata, with its dry and light qualities, leads to the diminution (*kshaya*) of the menstrual tissue (*Artava*). The classic symptoms, as documented in the Sushruta Samhita, include irregular cycles (*Yathochitakala Adarshana*), scanty flow (*Alpata*), and painful menstruation (*Yoni Vedana*).^[4]

In modern medicine, the conditions of oligomenorrhea and hypomenorrhea are recognized as prevalent, affecting approximately 13.5% and 12.9% of the population, respectively.^[5] They are often manifestations of underlying endocrine disorders, most commonly Polycystic Ovarian Syndrome (PCOS), but also thyroid dysfunction, hyperprolactinemia, premature ovarian insufficiency, or hypothalamic amenorrhea due to excessive stress, weight loss, or exercise.^[6] The standard allopathic treatment involves hormonal preparations, primarily combined oral contraceptive pills (OCPs) or progestin therapy.^[7] While effective in inducing a withdrawal bleed and regulating the cycle artificially, this approach is criticized for offering primarily short-term symptomatic relief without addressing the root cause. Long-term use of hormonal therapies can carry risks such as thromboembolism, weight gain, mood changes, and merely masking the underlying pathology, which may continue to progress.^[8]

The text concludes by highlighting a critical gap in modern treatment: its palliative nature and potential for side effects. This has led to a growing global need to explore alternative and holistic treatment modalities, such as Ayurveda, which aim to correct the fundamental digestive and metabolic imbalances (*Agni*) and clear the channel obstructions (*srotas avarana*) believed to be the root cause of Artava Kshaya. Ayurvedic management typically involves a personalized protocol including dietary modifications (*deepana-pachana*—appetizing and digesting herbs), lifestyle changes, Panchakarma detoxification procedures (like *Virechana* or *Basti*), and herbal formulations to pacify Vata and Kapha and promote the

healthy formation of *Rasa* and *Rakta Dhatu* (nutrient plasma and blood tissues), thereby naturally restoring regular menstruation.^[9]

CASE STUDY

This is a case of 18 years female patient. She came to department of prashuti tantra evam striroga, Major S. D. Singh Ayurvedic Medical college and hospital, Baghar, Bewar road, Farrukhabad U.P with complaints of pain in lower abdomen since 2 years back, increased time between two menstrual periods and menstrual period become short (2-3 days), patient had a history of irregular cycles, scanty flow, and painful menstruation.

MATERIALS AND METHODS

- Patient with classical sign and symptoms of Artava Kshaya attending the O.P.D. of department of prashuti tantra evam striroga at Major S. D. Singh Ayurvedic Medical college and hospital, Baghar, Bewar road, Farrukhabad U.P have been selected for the present clinical study.
- Routine haematological investigations, Biochemical investigations and microscopic examination were carried out.
- USG of lower abdominal region were taken to confirmation of the diagnosis and to know the size and site of stone.

PLAN OF WORK

- **Performa:** A special Performa was prepared to maintain the records of all findings of the patients.
- **Investigations:** For the purpose of assessing the overall condition of the patients routine hematological, biochemical, routine and microscopic examination, USG of lower abdominal region were carried out before and after the treatment, the changes in the values and in signs and symptoms were recorded for the assessment.

Treatment Schedule- According to *ayurveda* following regime were given-

- Ajmodadi churna- 3 gm BD with water.
- Rajapravartani vati- 2 tab. TDS with water.
- Kumaryashav- 20 ml BD mixed with same amount of water just after meal.
- Patient would be advised for normal less oily and spicy diet along with medicines.

CRITERIA OF ASSESSMENT

Relief to the patient is assessed on the basis of signs and symptoms of *Artava Kshaya* described in Ayurveda. A subjective natured criteria was developed as scoring system as 1 to 4 according to severity of symptoms as follow.^[10]

Subjective criteria	Score	Subjective criteria	Score
1. Duration of Menstrual Cycle:		2. Interval between two cycles:	
4-7 days	0	20 to 24 days	0
3 days	1	24 to 34 days	1
2 days	2	35 to 40 days	2
1 day	3	above 45 days	3
3. Quantity of menstrual blood:		4. Pain during menses (Yonivedana)	
4 or more than 4 pad use / cycle	0	No Pain	0
3 pad use / cycle	1	Mild Pain	1
2 pad use / cycle	2	Moderate Pain	2
1 pad use / cycle	3	Severe Pain	3
Spotting bleedings without pads.	4	Acute severe Pain	4

- Before and after assessment of treatment**

S.no.	Assessment criteria	BT	AT
1.	Duration of Menstrual Cycle	3	0
2.	Interval between two cycles	2	0
3.	Quantity of menstrual blood	3	0
4.	Pain during menses (Yonivedana)	3	0

DISCUSSION

This case study demonstrates the successful application of Ayurvedic principles in managing a classic presentation of *Artava Kshaya* (Oligo-Hypomenorrhea). The 18-year-old female patient presented with the triad of symptoms explicitly described by Acharya Sushruta: *Yathochitakala Adarshana* (increased interval between cycles), *Alpata* (scanty flow and short duration), and *Yoni Vedana* (pain in the lower abdomen). The pathogenesis aligns with the classical Ayurvedic understanding, where *Vata-Kapha* aggravating diet and lifestyle likely led to *Jatharagni* and *Dhatwagni Mandya* (weakened digestive and tissue metabolic fires). This impairment results in the production of *Ama* (metabolic toxins) and causes *Avarana* (obstruction) of the *Rasa* and *Rakta Vaha Srotas* (channels carrying nutrient plasma and blood), ultimately leading to the diminished formation of *Artava* (menstrual tissue).

The chosen treatment protocol was holistic, aiming to correct the root cause rather than merely suppress symptoms. The formulation **Ajmodadi Churna**, a combination of digestive

and carminative herbs, likely targeted the core issue of *Agnimandya* (weak digestion), helping to clear *Ama* and restore metabolic function. **Rajapravartani Vati**, a classical formulation whose name translates to "that which reinstates the king (menstruation)", is specifically indicated for menstrual irregularities and is known for its *Vata*-pacifying and uterotonic properties. **Kumaryasava**, a fermented preparation primarily based of Aloe vera, is a renowned *Rasayana* (rejuvenative) for the female reproductive system. It works by purifying and nourishing the *Rakta Dhatu* (blood tissue) and pacifying *Apana Vayu*, the sub-dosha of *Vata* responsible for downward movement and menstruation.

The dramatic improvement in all assessment parameters—with scores for cycle duration, interval, flow quantity, and pain all reducing from severe (3) to normal (0)—validates this approach. The therapy effectively addressed the *Vata* vitiation causing pain and irregularity, the *Kapha* component causing obstruction, and the underlying *Dhatu Kshaya* (tissue depletion) causing scanty flow. This case underscores a key advantage of Ayurveda: its ability to provide a comprehensive solution by treating the systemic imbalance (e.g., *Agnimandya*, *Srotorodha*), which in turn resolves the specific symptoms, potentially offering a more sustainable outcome compared to conventional hormonal treatments that primarily offer symptomatic relief.

CONCLUSION

The present case study conclusively demonstrates that a tailored Ayurvedic therapeutic regimen can effectively manage *Artava Kshaya* and its modern correlates, Oligomenorrhea and Hypomenorrhea. The complete resolution of the patient's complaints—irregular cycle, scanty flow, and dysmenorrhea—highlights the efficacy of the chosen medicines (*Ajmodadi Churna*, *Rajapravartani Vati*, and *Kumaryasava*) in concert with dietary advice. This regimen successfully targeted the fundamental Ayurvedic pathophysiology of the condition by correcting *Agnimandya* (digestive impairment), eliminating *Ama* (toxins), pacifying aggravated *Vata* and *Kapha* doshas, and removing *Srotas Avarana* (channel obstruction). By doing so, it facilitated the normal formation and flow of *Artava*.

This study affirms the depth of Ayurvedic wisdom in diagnosing and treating menstrual disorders through a holistic, root-cause-level approach. It suggests that Ayurveda presents a viable, effective, and potentially safer alternative to conventional hormonal therapy for managing such conditions, especially for patients seeking long-term, natural solutions.

Further large-scale clinical studies are recommended to validate these findings and establish standardized Ayurvedic protocols for the management of *Artava Kshaya*.

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