

AYURVEDIC MANAGEMENT OF ANOVULATORY MENSTRUAL CYCLE – A CASE STUDY

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ABSTRACT

Today's biggest health concerns include metabolic illnesses, the prevalence of which is rising daily as a result of altered lifestyle patterns. "Santarpanjanya Vikaras" is a term from Ayurvedic literature that refers to conditions characterised by abnormal tissue metabolism. According to Ayurveda, poor eating habits and a sedentary lifestyle have an impact on Agni, which in turn causes the development of Ama and ultimately results in the metabolic syndrome. The initiation of metabolic problems can also be attributed to factors such as channel obstruction, vitiation of Dosha, and a diminishes in Dhatu. Acharya Sushruta has been described four essential factors for Garbhadhana. That factors are 1)Rutu, 2)kshetra, 3)ambu,and 4)beeja If there is trouble in any of these four fertility areas, conception may become challenging. The quality of the Beeja, is important in the formation of

the Garbha. Unhealthy diet and habits, stress, and lifestyle disorders can reduce the quality of the beeja, leading to infertility and difficulty in conception. Assisted Reproductive Technologies and Hormonal Injections are the principal treatments provided by Modern Science (ART). Conversely, Nidana Parivarjana, dietary control, Samshamana, and Samshodhana are all part of Ayurvedic treatment. One of the most significant Samshodhana techniques for treating female infertility is basti, which balances the vitiated Dosha and corrects the patient's general state by providing nutrients. The current study examines the role of ayurveda in the management of anovulatory menstrual cycles in context of the growing health burden that the metabolic syndrome has placed on society.

KEYWORDS: Anovulatory menstrual cycle, yoga-basti, infertility metabolic disorder.

INTRODUCTION

The metabolic disorders are considered as one of the major health issues now a days and prevalence of such diseases increases day by day due to the disturbed pattern of daily regimen. Sthaulya/Medoroga, Prameha and Hridroga are major metabolic disorders affecting population globally. Other consequences of these may affects females reproductive life. Irregular menses and infertility is seen in female patients. First and foremost, regular periods signify that women's body is ready to become pregnant. But beside reproduction, menstrual cycle rhythms reflect balance in other systems and functions also.

Metabolic syndrome is a clustering of at least three of the following five medical conditions: abdominal obesity, high blood pressure, high blood sugar, high serum triglycerides, and low serum high-density lipoprotein (HDL).^[1]

The key sign of metabolic syndrome is central obesity, also known as visceral, male-pattern or apple-shaped adiposity. It is characterized by adipose tissue accumulation predominantly around the waist and trunk.

The metabolic disorders can be elaborated as Santarpana Janya Vyadhi since it involves vitiation of Agni, production of Ama, vitiation of Kapha and Meda etc.^[2] The major diseases comes under category of metabolic disorders are Madhumeha (diabetes mellitus), Ati Sthoulya (obesity), Srotsam Lepa (atherosclerosis), Dhamani pralepa (arterial disorders) and dyslipidemia.^[3]

Ayurveda described various approaches for the management of such problems including; conduction of healthy daily regimen, exercise, meditation, avoidance of stress and use of herbal medicine, etc⁴. The use of internal medicine obtained from natural sources play key role in the management of metabolic disorders, considering this fact present article emphasizes role of internal medicine in metabolic disorders⁵.

AIM AND OBJECTIVES

To study the effect of Yog-basti Karma in anovulatory menstrual cycle.

MATERIALS AND METHODS

Classical text of Ayurveda, research journals and internet were taken as the source of present study.

CASE REPORT

A female patient 29 years of age, w/f child came to M. A. Podar Hospital, Worli, Mumbai for further management.

Medical Record Details:

M.A. Podar Hospital, Worli, Mumbai
SYMPTOM-PROGRESS/OPD NO. 08
Dr. RUTUJA GAIKAWAD

CR NO.: 95612
Category: General

Name: ANURADHA TEJESH GHAYKAR
Age (years or months): 29 Years/Female
Occupation: Monthly Income

Dr. Shrutika - 776311080
Residence: 830878160
Rutuja M. 969925662

Date: 18/07/2023
Symptoms and progress: T₁ inf. H₁ (W/F child)
H/O - Scanty menses at last cycle
CID - Irregular menses - 1 year
Hair fall

Prescription:
Adv by Dr. Rutuja M. 969925662
- USG (abd & pelvis)
- All (R)
- T₁ Macfolate 100
- 14 report

Handwritten Notes:

Menarche at the age of 14yrs
Painful - 4-5 days
2-3 days
Painful - 4-5 days
40-50 days
Irregular
2-3 days
Painful
1 year
colt - Nil
drill - Nil
Grim - Nil
SIF - Nil
SIF - Gc - Good
BP - 110/70 mmHg
P - 70/min
SIF - As
CNS - N/A
CNS - N/A
P/A - Suf

Pls. PIV done by Dr. Shrutika
↓ Dr. Rutuja
Pls - No any discharge
Cx - N/A
Healthy vagina well
PIV - U + A/V bigger than Normal
Cx - firm
All fx clear

Pradhan vedana and kaal (main complaints)

Irregular menses since 1 year

Hair fall

Unable to conceive i.e. primary infertility

H/O scanty menses in last menstrual cycle

Anubandhi vedana (associated complaints)

Pain in lower Abdomen during menses

Poorva vyadhi vrittanta (H/O past illness) No history of any HTN/ DM/ ASTHAMA/ TB/ CVD/ Epilepsy /STDS Nephritis etc.

Kula vrittanta (family history) No any History of HTN / DM / ASTHAMA /TB /COLOUR Blindness / etc.

Samanya parikshan**Rajo vrittanta (Menstrual history)**

	Present (Since 4 months)	Past (since menarche)
Duration	4-5 days	4-5 days
Interval	40-50 days	28-30 days
Regularity	Irregular	Regular
Amount of bleeding	2 Pads/day	2 pads/day
Painful/painless	Painful	Painful

Poorva prasav vrittanta: (Obstetric history)

G0 P0 L0 A0 D0

Contraceptive history – Nil**Pareeksha (Examination)****Asta vidha pareeksha**

Nadi: 76/min.

Shabdha: spashta

Mala: Badhata.

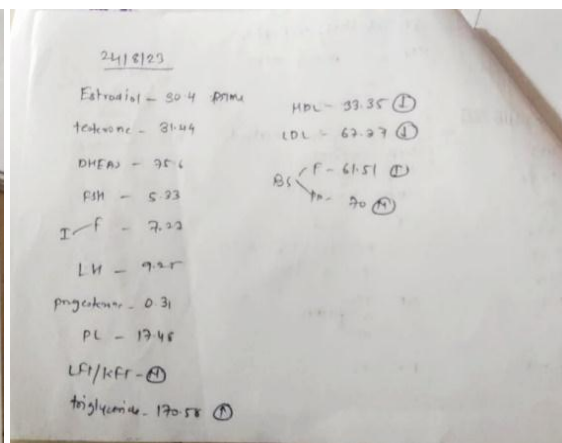
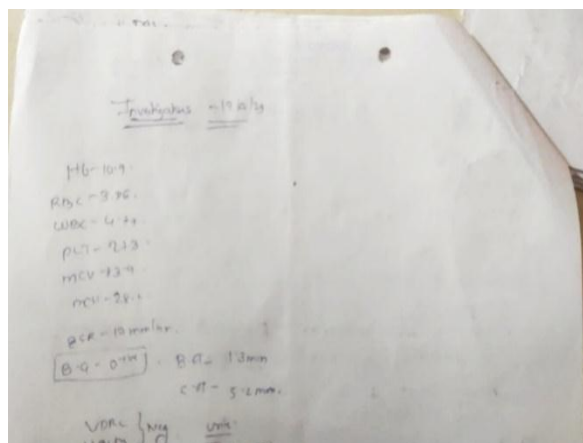
Sparsha: Anushna-shita

Mutra: Prakruta.

Drika: Prakruta

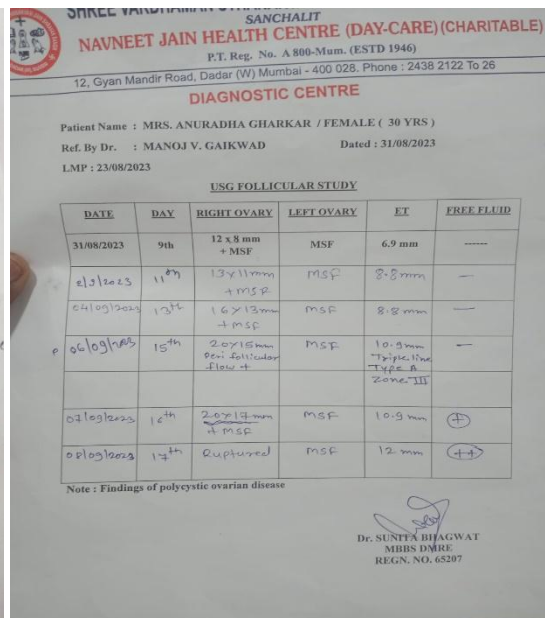
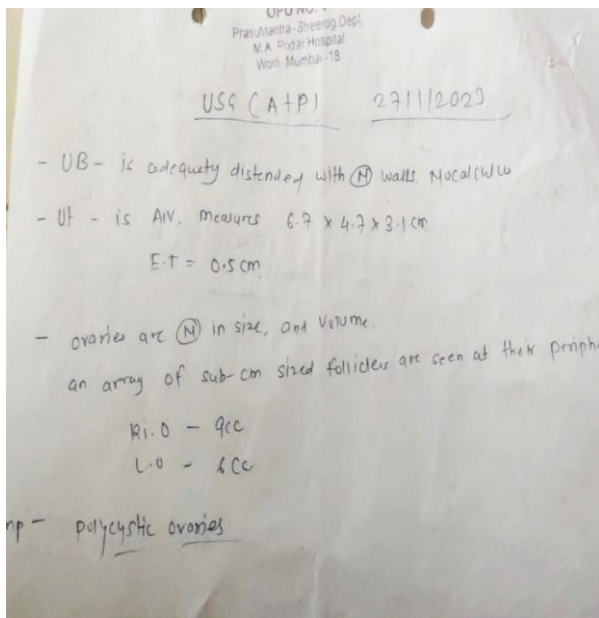
Jiwha: saam

Akruti: Madhyam

O/E – P – 86/min**S/E – RS** – AEBC clear**BP** – 110/70 mm Hg.**CVS** – S1 S2 normal**SpO2** – 99 %**CNS** – conscious and oriented**P/A** – soft**P/S, P/V Examination****P/S**- No any discharge, Cx. NAD, Healthy Vaginal wall**P/V** – Ut. A/V bulky in size, Cx. Firm, All fx. Clear

Prayogshala pareeksha (laboratory investigation)

20/07/2023	24/08/23
Hb – 10.9 gm/ dL	E2- 30.4
WBC – 4770 / cu mm	Progesteron – 0.31
PLT – 273000 / cu mm	Testesteron – 31.44
Blood group – O Rh-positive	LH – 9.25
BT – 1.30 mins	FSH – 5.33
CT – 5.20 mins	Prolactin – 17.46
BSL – F – 61 mg/dL	DHEA – 75.6
PP – 70 mg/dL	Insulin (F) – 7.27
VDRL – Non-reactive	LFT AND RFT - WNL
HBsAg – Non-reactive	Triglycerides - 170.58
HIV - Non-reactive	HDL – 33.35
Urine (R & M) – WNL	LDL – 67.37

Radiological investigation**USG (abd. & pelvis) - S/O - PCOD**

Ut. A/V Normal sized measuring 6.7*4.7*3.1 cm

ET – 5 mm

Ovaries are seen with peripherally arranged small follicles in them.

Rt. Ov. - vol- 9 cc

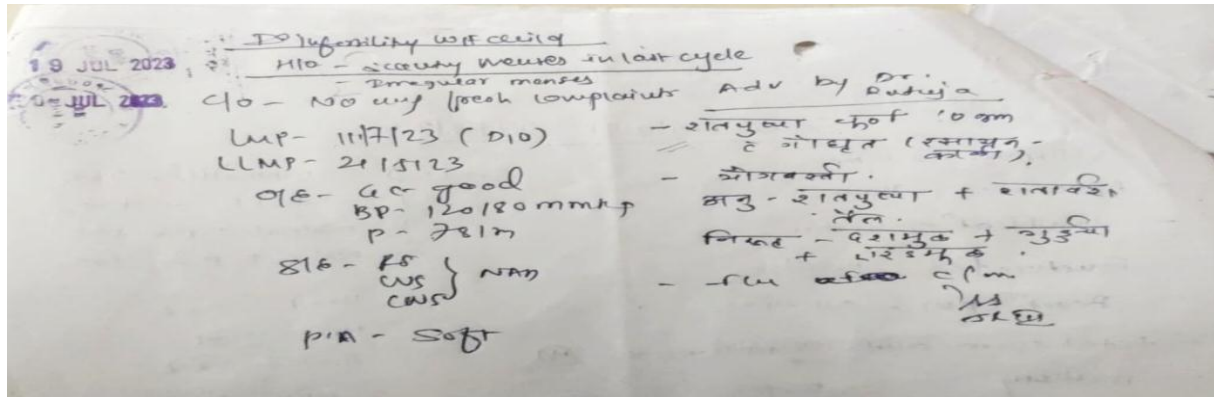
Lt ov. - vol – 6 cc

Follicular study – Follicle ruptured on day-17 with trigger

Vyadhi vinishaya (Final diagnosis)

PCOS

Chikitsa



Aushadhi chikitsa

- Tb. Macfolate 1 OD after meal
- Phalaghrita 2 tsf BD with milk
- Shatapushpa Churna 10 gm OD with ghrita (rasayankale)

Yogabasti

Anuvasana – Shatapushpa taila + Shatavari taila

Niruha – Dashamoola + Eranda + Guduchi quath

Diet

Patient was advised to include the following diet in daily practices.

- High fibre rich foods like spinach, broccoli, green peas, berries,
- Lean proteins which include fish, fruits like papaya, pears, orange, lentils.
- Food containing Omega 3 fatty acids like fish, flax seeds
- Include more of banana, cashews, avagados, and green leafy vegetables .
- Avoid fast food.
- Drink plenty of water.

Do's

Advice to take sound sleep.

Exercise daily for 45 mins.

Advice to do Pranayam, Surya-namaskar, Bhujangasan, Baddhakonasana

OBSERVATION AND RESULTS

SHREE VARDHAMAN STHANAKVASI JAIN SHRABAK SANGH, DADAR
SANCHALIT
NAVNEET JAIN HEALTH CENTRE (DAY-CARE)(CHARITABLE)
 P.T. Reg. No. A 809-Mum. (ESTD 1946)
 12, Gyan Mandir Road, Dadar (W) Mumbai - 400 028. Phone : 2438 2122 To 26

DIAGNOSTIC CENTRE

Patient Name : MRS. ANURADHA GHARKAR / FEMALE (30 YRS)
 Ref. By Dr. : MANOJ GAIKWAD Dated : 02/10/2023
 LMP : 23/09/2023

USG FOLLICULAR STUDY

DATE	DAY	RIGHT OVARY	LEFT OVARY	ET	FREE FLUID
02/10/2023	10 th	MSF	MSF	4.4 mm	-----
04/10/2023	12 th	MSF	MSF	6.8 mm	---
07/10/2023	15 th	15x14mm + MSF	MSF	9.2 mm	---
09/10/2023	17 th	Ruptured	MSF	11 mm	(+)

Dr. SUNITA BHAGWAT
 MBBS DMRE
 REGN. NO. 65207

Follicle ruptured on Day 17 of menses without any trigger.

DISCUSSION

Metabolic syndrome is a clustering of at least three of the following five medical conditions: abdominal obesity, high blood pressure, high blood sugar, high serum triglycerides, and low serum high-density lipoprotein (HDL).

In present study patient had abdominal obesity, high serum triglycerides, low serum high-density lipoprotein (HDL). Associated conditions include polycystic ovarian syndrome.

Patient suffering from primary infertility due to anovulatory menstrual cycle.

Causative factors for PCOS are as follows^[6]:

obese,

sedentary and

have a degree of insulin resistance.

Stress can also be a contributing factor.

The most important risk factors are diet (particularly sugar-sweetened beverage consumption), genetics, aging, sedentary behavior or low physical activity, chronobiology/sleep, mood disorders/psychotropic medication use and excessive alcohol use.

The basic principles of treating metabolic syndrome as per Ayurveda involve use of drugs which alleviates Vata, reduces Kapha and help to regularizes circulatory and hormonal functional of body. The drug which metabolizes excessive fat and improves digestive fire also offers beneficial effects in case of metabolic disorders.^[7]

Ayurveda recommended Aptarpana, Vanaspati Kashaya, Lekhana Kashaya and Kaphahara Chikitsa for the management of metabolic disorders especially related to the excess deposition of fat.^[8]

Therefore we choose Shatapushpa churna 10 gm OD with ghrita at morning in empty stomach.^[9]

And Yogabasti.

Rasa

Shatpushpa have Katu, Tikta & Madhura Rasa.

Katu Rasa has Agneya (helps in increasing metabolism) properties & Tikta Rasa has Deepana (stimulate Agni)-Pachana (digest Ama) properties, which improve Jathragni Daurbalya and form Nirama Rasa Dhatu & helps in Artavkshaya.

Tikta Rasa also has Lekhana properties due to this it works on Avarana & improves Picchila and Kleda properties of Kapha Dosha.

Madhura Rasa has Rasadi Saptadhatu Vardhaka properties which nourish Rasadi Dhatu and cure Artavakshaya.

Guna:- Laghu, Ruksha, Tikshna Guna of Shatpushpa helps in Kapha Shamana which improve Avaranatmaka Dushti (Apana Vayu Dushti) & produce normal flow of menstrual blood.

Virya: - Ushna Virya of Shatpushpa removes Srotoavarodha and increases the blood circulation in the Yoni and Garbhashaya, due to this Garbhashaya gets proper nutrition which

helps formation of healthy endometrium and thus menstrual cycle becomes normal in amount, duration and interval.

Vipaka:-Katu Vipaka of Shatpushpa has Kapha Shamaka properties which improve vitiation of Tridosha in Rituchakra and menstrual cycle becomes normal in amount, duration and interval.

Yogabasti^[10] acts as tri-dosha shamak. Allevates vata dosha predominantly. Niruha basti contents Madhu, Saindhava, oil/ghee, Kalka, Kwath

Honey is rich source of sugar. It also contains proteins, fats, vitamins, minerals, enzymes and amino acids. Because of it honey becomes natural product with high nutritional and medicinal value.

Saindhav is useful in regulating acid-alkaline balance, maintaining osmosis, activation of ATP phase. It removes excess acidity; generate hydroelectric energies in cell for nerve cell communication.

Makshikam and Saindhav in Basti represents source of glucose and electrolyte and thus prevent dehydration.

Salt has property of stimulating ionic action potential which may be the causative factor for the mode of action of basti.

The sneha added in basti will lubricate the colon, Soften the malas and help to eliminate it without strain.

Among the four snehas taila is used for vata kapha condition and ghruta is used in vata pitta condition. Kalka helps in disintegrate the malas by increasing osmotic permeability of the solution.

The mode of action of basti like vatahara or pittahara or kaphahara depends on the gunas of kwath dravya. It also helps in maintaining volume and helps in spreading and cleaning.

Reduced body weight with the help of diet and exercise is associated with a decrease in metabolically active visceral fat, which in turn leads to decreased insulin resistance and an

optimised lipid profile, and may have psychological benefits such as reduced anxiety and depression.

CONCLUSION

Various dietary, lifestyle, and psychologic factors are involved in the etiology of Prameha, particularly in relation to disturbances in fat and carbohydrate metabolism. The ancient Ayurvedic knowledge regarding Prameha, Stholya can be utilized to expand the current understanding of obesity, metabolic syndrome, and diabetes.

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