

## A REVIEW OF MANAGEMENT OF MENOPAUSAL SYNDROME THROUGH AYURVEDA

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### ABSTRACT

As the age advances function of most organs and systems tends to decline, and there is a wide individual variability and need precise assessment. The climacteric is an important period in women's life where loss of ovarian follicular activity is seen which is characterized biologically by decline in fertility, endocrinologically by alteration of gonadotropins and steroid hormone levels in body and clinically by alteration in menstrual cycle frequency, duration, amount of flow etc and she is slowly entering into menopause and experiences variety of psychosomatic symptoms such as Depression, Forgetfulness Irritability, Insomnia, Loss of concentration, Anxiety, Hot flushes, Night sweats, Headache, urinary symptoms, Joint pains, skin & hair problems. Since many years, Hormonal Replacement Therapy (HRT) by using oestrogen alone or in combination with progestins has been

the therapy of choice for the relief of menopausal symptoms. Even though they provide a temporary relief in symptoms they have many limitations, risks of venous thromboembolic disease, hampered lipid profile and also risk of breast and endometrial cancer. Hence, there is need for safe alternatives. In Ayurvedic classics, menopause can be studied under the concepts of *Jaravaydhi*, *Rajonivrutti*, its *lakshanas* under *dhatukshayja* and *vatavrudhi*. Main Treatment principle will be *Rasayana chikitsa* and *vatashamana*, it can be achieved by using various ayurvedic herbal and mineral preparations, *panchkarma* and *stahnika chikitsa*. Which can be judiciously implemented to alleviate menopausal as well as associated aging problems.

**KEYWORDS:** *Rajonivrutti*, *Ayurveda*, Menopause, *Rasayana*, Hormone.

## INTRODUCTION

“Menopause is Permanent cessation of Menstruation at the end of reproductive life of a woman due to loss of Ovarian follicular activity”. Confirmed by Stoppage of menstruation for 12 consecutive months without any other pathology. It is a Natural Process associated with unavoidable manifestations of aging process. Management of menopause involves management of age-related changes, its related ill effects and symptoms occurring due to waning follicular activity. Women experiences variety of psychosomatic symptoms such as Depression, Forgetfulness Irritability, Insomnia, Loss of concentration, Anxiety, Hot flushes, Night sweats, Headache, urinary symptoms, Joint pains, vascular endothelial disorders, Cognitive impairments, Dementia, skin & hair problems. In modern science, Hormone Replacement Therapy (HRT) is the only alternative for this condition by which one can get some results in combating the disease, but it has a wider range complication like vaginal bleeding, risk of breast cancer, endometrial cancer, gall bladder diseases, venous thromboembolic disease, etc. On the other hand, this therapy is not much effective in the psychological manifestations where use of Sedative, Hypnotics and Anxiolytic drugs done, which may lead to side effects like drowsiness, impaired motor functions, loss of memory, allergic reactions, drug dependence etc. So, there is need to find effective and safe alternatives. In Ayurvedic classics, menopause can be studied under the concepts of *Jaravaydhi*, *Rajonivrutti*, its *lakshanas* under *dhatukshayja* and *vatavruddhi*. Main Treatment principle will be *Rasayana chikitsa* and *vatashamana*, it can be achieved by using various ayurvedic herbal and mineral preparations, *panchkarma* and *stahnika chikitsa*. Which can be judiciously implemented to alleviate menopausal as well as associated aging problems.

## MATERIALS AND METHODS

All available References of Menopause, menopausal Syndrome and *Rajonivrutti* have been collected from literatures, Ayurvedic Samhitas, ayurvedic textbooks and modern text books, different websites, published articles, are collected and critically examined.

## DISCUSSION

**Menopause:** “It is defined as Permanent cessation of Menstruation at the end of reproductive life due to loss of ovarian follicular activity”.<sup>[1]</sup>

Age: Ranges from 45 to 55 Years.

Cause: It is Genetically predetermined condition. Not related to number of pregnancies, race, height, weight, age of menarche etc.

Pathophysiology<sup>[2]</sup>: Depletion of ovarian follicular activity and resistant to pituitary gonadotrophins → impaired folliculogenesis → significant Fall in Sr. Estradiol → Menstrual abnormalities No more follicles left → optimum fall in Sr. Estradiol → No endometrial growth → Amenorrhoea.

### Menopausal Symptoms

1. Vasomotor Symptoms – Hot flushes, profuse sweating, palpitation, fatigue.
2. Osteoporosis & Fractures.
3. Genitourinary – Dryness, Pruritis, infections, leucorrhoea.
4. Sexual dysfunction, loss of libido.
5. CVS- Vascular endothelial injury, thrombus, Atherosclerosis.
6. CNS- Dementia and cognitive impairment.
7. Psychological Changes - Depression, Forgetfulness, Irritability, Insomnia, Loss of concentration, Anxiety.

### Management<sup>[3]</sup>

#### Preventive measures

- Intake of Healthy food rich in all type of vitamins, minerals and which provide sufficient calcium to the body, regular exercise, good sleep.
- Preventing Surgical, Radiation Menopause by avoiding or extending them during reproductive age.
- Counselling – Removing fear, anxiety of natural phenomenon and reassuring the patient.

#### - Curative measures

Non-hormonal – Lifestyle modification, physical activity, Intake of Healthy Nutritious diet rich in all type of vitamins, minerals and which provide sufficient calcium to the body, regular exercise, good sleep and avoid alcohol & smoking like habits.

Drugs like – Bisphosphonates, Fluoride, Calciton, Paroxetine, Gabapentine, Selective Estrogen Receptor Modulators (SERM) etc.

Hormonal (HRT) – Principal hormone is 'ESTROGEN'. It can be used either single (ideal in hysterectomized woman) or with Progestins (in intact uterus). In many forms like oral,

Subdermal implants, Gel, Transdermal patch, creams and intrauterine devices. These therapies even though good in preventing some of the symptoms. Depending upon the cause we are using, we should use them for short period and with minimum dose. Some patients experience reappearance of symptoms after the withdrawal of therapy, many times become drug dependent, and also develops the risks of breast cancer, endometrial cancer, hampered liver and gall bladder function, altered lipid profile, thromboembolic diseases, many cardiac risk factors, intermenstrual bleeding etc. And also, not much useful in relieving psychological symptoms where we are going to use Sedatives, Hypnotics, antidepressants and Anxiolytic drugs, which may lead to various side effects like drowsiness, impaired motor functions, loss of memory, allergic reactions, drug dependence etc. Hence there is need for an alternative medicine which helps to manage condition and also not having any side effects. Efforts are made to find out the answer in Ayurveda.

### ***Rajonivritti*<sup>[4]</sup>**

*Rajonivritti* word has not directly mentioned in *Samhita*, *Rajonivritti* occurring in *Jarapakva Shareer* (aged body) is comparable to the present-day studies showing the mean age of menopause to be 50 years. With advancing age there is gradual diminution in the qualities of *Dosha*, *Dhatu*, *Mala*, *Agni* and *Oja*.

**Nidana** – It is considered as a *swabhava bala pravritta vyadhi*, which occurs during *jarawastha*. some specific factors also can be considered as the causative factors such as \_

1. *Kala* – Different phases of life like *Bala*, *Taruna* and *Vridhdha avastha*
2. *Swabhava* – it is *Swabhava* of body to degrade every moment (*Shiryet tat Shariram*) *Raja* is also a physiological entity, ultimately manifests in *Rajonivritti*.
3. *Vayu* – *apana* and *vyana* *vayus* are responsible for *Raja utpatti* as well as its cyclic expulsion. Any vitiation in these factors leading to *rajonivrutti*.
4. *Dhatukshaya* - With the advancement of age, condition of *Dhatus* deteriorates day by day. *Upadhatu artava* also not formed in a normal way and gradually leads to *rajonivrutti*.
5. *Karma* – Woman living with *Mithya achara* and *vihara* get *Rajonivritti* earlier.
6. *Abhigata* – Any type of injury to the *artavavaha srotas* can lead to *akalaja rajonivrutti*, it can be considered as the surgical menopause.

**Lakshanas<sup>[5]</sup>**

The *Jaravastha* and *Rajonivrittijanya avastha*, both are naturally occurring conditions, under the influence of *Kala* and *Swabhava*, mainly represent *kshayavastha*. Moreover, the symptoms of *Jaravastha*, observed in *Rajonivrittijanya avastha* This similarity found as\_ *Dhatu Indriya Guna, Karma Kshaya, Balakshaya, Utsaha Parakrama And Vigyana Hani, Grahana Dharana Smarana Medha hani, Slatha Sandhyasthi, Twak Purushya, Vali.*

**Chikitsa**

Two main components which need to be addressed in women having problems during menopause are advancing age, its allied changes, and menopausal symptoms. So, one should do planned usage of multiple variables as per individual needs.

**Preventive measures** – Attaining *Dhatusamyā* (homeostasis) in body by Observing *Dincharya* (daily regimen), *Ritucharya* (seasonal regimen), *Swasthavritta* (code of conduct), *Ahara Vidhi Visheshayatanam* regular utilization of *Rasayana* (rejuvenating treatment) *Vaajikarana* (aphrodisiacs), *Achara Rasayana* (ethics), all these helps to prevent *Akalaj Rajonivrutti*.

**Curative measures** – Principles of treatment are, controlling *Vata dosha*, *Rasayana chikitsa*, *Shodhan-Shamana aoushadhis* and *Ashwasana chikitsa*. As there is natural vitiation of *vata dosha* with advancing age avoid the provocative causes of *Vata dosha* such as Tolerance of un suppressible urges, intolerance of suppressible urges, excessive and single use one rasa in diet, *diva swapna*, and *ratri jagarana*, *ativyayama*, unrestrained mental and emotional fluctuations, etc. should be avoided. Use of *Snehana*, *Abhyanga*, with *vatahara balya* oils (*Mahanarayan Taila*, *Ksheerbala Tail*) internally *ghrita* (*Amalak Ghruta*, *Shatavari ghruta*, *Guduchi ghruta*) *Basti*(medicated enema)is prime among all for management of *Vata* disorders, and is *Ardhchikitsa*(half of treatment). *Yapana basti*(palliative property). *Tikta Dravya Ghruta* and *Kshira basti*. We can also use *Shirodhara*, *Shiropichu*(*Balya Tailas*), *Nasya* (*Kshirabala*, *Anu taila*, *shatavari ghruta*) can be used. **Sthanika Chikitsa**—As the female suffering from complaints like vaginitis, pruritis etc, *Pariseka*, *Yonipicu*, *Utterbasti* can be used.

**Rasayana Therapy** - *Rasayana* are the drugs, diets or regimens which provide optimum quality of the bodily tissues which provides both mental and physical health. Long life, good

memory, intelligence, disease free, luster, complexion, voice, strength of body and sense, all these are obtained by *Rasayana*. Thus, it helps to overcome *Dhatukshaya Lakshanas*.

**Shamana Dravyas<sup>[6]</sup>** - *Vayasthapak Aushadha* (*Guduchi, Haritiki, Amalki, Mandookparni, Punarnava*) *Jeevaneeya Aushadha*- (*Jeevaka, Mahameda, meda, Yasthi, Mudgaparni*) *Balya Aushadha* (*Ashwagandha, Sthira, Bala, Atibala*) *Medhya Dravyas*(*Mandukparni, Bhramhi, Shankhpushpi*). These drugs having properties of immunomodulatory, antioxidant, anti-inflammatory, antiaging, antidepressant and neuroprotective actions. We should also use **Satvavajaya chikitsa** i.e. counselling and reassuring the patient regarding the natural phenomenon of menopause and how we can overcome by using all above measures.

## CONCLUSION

Menopause is Permanent cessation of Menstruation at the end of reproductive life of a woman, it can be compared *Rajonivritti* occurring in *Jarapakva Shareera*. Eventhough Hormonal replacement therapy is having some benefits in preventing osteoporosis and other some symptoms, it can not be used for long duration and having many side effects. By using *Vatashamana, Rasayana, Vaysthapana, Panchkarama, Sthanik Chikitsa* explained in Ayurveda we can treat the menopausal symptoms effectively without any or nil side effects.

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