EFFECT OF AGNEYA AAHARA DRAVYAS IN THE MANAGEMENT OF RAJKSHINATA (HYPOMENORRHEA) - A CASE STUDY.

Kaustubh Mehetre,1* Mangesh Jarange.2

1. M.S. (Prasutitantra-Streerog), Assistant Professor, Dept. of Prasutitantra-Streerog, SVNHT’s Ayurved College, Rahuri Factory, Dist. Ahmednagar, MS, India.
2. M.S. (Prasutitantra-Streerog), Associate Professor, Dept. of Prasutitantra-Streerog, PMT’s Ayurved College, Shevgaon, Dist. Ahmednagar.

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ABSTRACT

Menstruation is a normal physiological periodic and cyclic process. Menstruation begins in teenager girls which starts at or after age of 11 years. Due hormonal changes different symptoms occur before menstrual cycle, during the menstrual cycle and after menstrual cycle. Rajkshinata (Hypomenorrhea) is one of the menstrual diseases. In present case study a young unmarried female of Hypomenorrhea was suggested few dietary regimens viz. Kulitha (Macrotyloma uniflorum Lam.), Tila (Sesamum indicum Linn.) and Mash (Vigna mungo L.) in daily diet along with Drakshasava. All these foodstuffs are ushna (hot) in properties. Such Agneya dravyas (ushna gun-atmak) were used due to Santapanjanya samprapti observed in patient. Irregularity was improved by 66%, Amount of bleeding was improved by 50%, Period of menstruation was improved by 100% and Pain during menses was improved by 75%. Overall, we labeled it as moderate improvement. Large scale data is needed to have a strong evidence and to minimize biases. Dietary regimens explained in Ayurvedic classical texts are effective to treat various clinical conditions.

Keywords: Rajkshinata, Hypomenorrhea, Menstrual disorders, Agneya ahara dravyas.

1. INTRODUCTION

Woman is responsible of good and healthy generation. In that perspective Yoni (vagina) should be healthy. Yoni is important organ in health of woman during and after her reproductive life as vitiation of yoni is considered as vitiation as Kshetra which hampers reproductive life of female.¹ Menstruation is a normal physiological periodic and cyclic process. Menstruation begins in teenager girls which starts at or after age of 11 years. It is hormonal control process in which loss of blood through vaginal canal occurs. Due hormonal changes different symptoms occur before menstrual cycle, during the menstrual cycle and after menstrual cycle.² Menstruation depends on general health status of the girl, nutritional condition and genetic factor. There are some pathological conditions in which female experience some difficulties such as Dysmenorrhea, Amenorrhea, Menorrhagia, Hypomenorrhea, Poly-menorrhagia, Oligomenorrhea and Premenstrual syndrome.

Normal range of menstrual cycle is stated to be 28 to 35 days with difference of 2 to 3 days. Normal range of duration of menstrual flow is 3-8 days. Expected average blood loss is 30-80 ml per day.³⁻⁶ Disorders of menstrual cycle regarding its irregularities are very common in daily clinical practice among female of reproductive age especially in adolescents before marriage. As per previous studies 27% of young females suffers from irregular menstruation. Almost 22% young females suffer from menstrual abnormalities and almost 90% suffer from dysmenorrhea.⁷ In dysmenorrhea periods
are painful along with severe spasmodic pain during menstruation. If menstrual period is infrequent and gets delayed beyond 35 days it is termed as Oligomenorrhea. Hypomenorrhea is different condition in which volume of uterine bleeding is less (blood loss below 30 ml per cycle) or duration of menstrual blood flow is less than 2 days or both.

In Ayurveda the pathological conditions related to menstruation are explained as explained as rajdusthi, rajkshinata, raktapradar and so on. Hypo menorrhea condition can be considered and correlated as Rajkshinata. Irregular menstruation, less amount of bleeding and pain are the characteristics of Rajkshinata. The Rajkshinata can be managed with the help of Sanshodhan i.e. Panchakarma (body purification) and use of Agneya dravya (drug having Ushna guna i.e. hot in properties). The variety of medicinal treatment options are available to treat Rajkshinata (hypomenorrhea). Many females don’t like or are not willing to take drugs. Few don’t afford cost of treatment. There are many side effects of the hormonal treatment. Dietary regimens can be followed at home and very easy. Ahara (Diet) is important as per Ayurveda philosophy. Diet is mentioned as regimen in various diseases of Ayurveda as proper diet balances Tridosha helps in cure. and Here in this case simple diet regimens were used which having agneyeya property as mentioned by Sushrutacharya. We observed dietary regimens effective. The study will be helpful for further research in the stream of Ayurveda chikitsa in the management of Rajkshinata.

2. CASE REPORT

2.1. Case History

A young unmarried female patient of 18 years old having with Hypomenorrhea came to OPD of Strirog and Prasutitantra. She was having symptoms viz. Aniyamita Rutu (Irregular menstrual cycle), Alparajastrava matra (Less amount of bleeding), Alparajastrava avadhi (Less bleeding period) and Kati-udar shool (Low back and abdominal Pain). Details gynecological examination revealed no other significant abnormality. She found hemodynamically stable. Family history shown than both her Mother and Grandmother were suffering from Oligomenorrhea and Dysmenorrhea. Obstetrics family history was sound.

2.2. Examination

2.2.1. Samanya Pariksha (General Examination)

- **Nadi:** Vata Pradhan, Guru
- **Mala:** Asamyaka, Kwachit malabaddhata
- **Mutra:** Avishekh
- **Jivha:** Ishat sama
- **Angi:** Manda and occasional Vishama
- **Koshta:** Madhyama
- **Prakruti:** Vata Pradhan, Pittanubandhi,
- **Pulse:** 76 per min
- **BP:** 124/78 mm of Hg.
- **Weight:** 54 kg.

2.2.2. Gynecological Examination

- **Menarche:** At the age of 14 years
- **Marital status:** Unmarried
- **Menstrual History:** Menstrual cycle ranging from 28 to 34 days, Irregular, Painful and Scanty. **Duration:** 1 to 2 days and Irregular.
- **Per vaginal examination:** Not done

2.2.3. Investigations

- **CBC:** within normal limits
- **Urine Routine and Microscopic:** within normal limits
- **USG Abdomen and Pelvis:** no significant abnormality
- **Thyroid function test:** within normal limits

2.2.4. Dietary regimen advised (**Ahara chikitsa**)

The Agneya dravya viz. Kulitha (Macrotyloma uniflorum Lam.), Tila (Sesamum indicum Linn.), Mash (Vigna mungo L.), Asava (Drakshyasav) were given in regular diet for three months. Patient was allowed to prepare recipes of above food stuffs as per her choice and advised to consume them at least once a daily.

Ushirasava was given 15 ml BD after
meal twice (Adhobhakta aushadha sevan kala13). Follow up was taken every month and progress was recorded.

2.2.5. Assessment of symptoms

*Aniyamita Rutu* (Irregular menstrual cycle), *Alparajastrava matra* (Less amount of bleeding), *Alparajastrava avadhi* (Less bleeding period) and *Kati-udar shool* (Low back and abdominal Pain) were symptoms under assessment. Symptoms were graded for ease of assessment as follows. Assessment of symptoms was done for four consecutive cycles after administration of Ahariya dravyas.

**Aniyamita Rutu** (Irregular menstrual cycle)14

- **Grade 0**: Regular menses on defined date
- **Grade 1**: Variation up to 8 days in menstrual cycle
- **Grade 2**: Variation of 8 days to 21 days in menstrual cycle
- **Grade 3**: Variation of days 21 days or more in menstrual cycle

**Alparajastrava matra** (Less amount of bleeding)

- **Grade 0**: Blood loss about 35 to 50 ml8 (5 to 7 pads during period)
- **Grade 1**: Blood loss about 20 to 35 ml (3 to 5 pads during period)
- **Grade 2**: Blood loss about 05 to 20 ml (1 to 3 pads during period)
- **Grade 3**: No or minimal blood loss up to 5 ml (No or 1 pad during period)

**Alparajastrava avadhi** (Less bleeding period)15

- **Grade 0**: Menstrual duration of 4 to 8 days
- **Grade 1**: Menstrual duration of less than 3 days
- **Grade 2**: Menstrual duration of less than 2 days
- **Grade 3**: Menstrual duration of less than 1 day

**Kati-udar shool** (Low back and abdominal Pain)16

- VAS pain assessment scale ranging from Grade 0 to Grade 10 was used.

4. RESULTS AND DISCUSSION

4.1. Overview of Hypomenorrhea

In hypomenorrhea less than 30 ml of blood is lost. Some causes and indicators of hypomenorrhea can be enlisted as pregnancy, weight gain or loss, stress, hypothyroidism, use of birth control measures (OC pills, IUCD etc.), certain medical conditions (cervical stenosis, PCOS), menopausal syndrome etc. According Ayurveda literature, *Atisahodhan, Atishaman, Vegdharan, Asatmya annasevan, Manastap, Ayyayam, Anashan, Atimaithun* are enlisted as *hetu* (etiological factors) of Rajkshinata.17 Abnormal variation in duration of menstrual cycle is termed as irregular menstrual cycle. Variation in menstrual cycle up to maximum 8 days between shortest and longest menstrual cycle is considered as mild variation, variation in menstrual cycle ranging from 8 to 20 days is considered as moderate variation and variation in menstrual cycle 21 days or above is considered as severe variation.14 The average blood loss with menstruation for normal women is ≤30 ml and menstrual blood loss more than 80 ml is considered abnormal.18 The Normal duration of menstruation is considered 4 to 8 days with average duration 5 to 6 days.15 Mild-bearable pain before, during and after menses is common but increased severity of pain indicates abnormality.

4.2. Assessment of symptoms

In present case Irregularity of menstrual cycle was Grade 3 at baseline which was reduced up to Grade 1 at the end of 4th cycle. Change observed in Irregular menstruation was 66%. Amount of bleeding was Grade 2 at baseline while Grade 1 at the end of 4th cycle. Change observed in Amount of bleeding was 50%. Period of bleeding was Grade 2 at baseline while Grade 0 at the end of 4th cycle. Change observed in Period of bleeding was 100%. Pain during menses was Grade 8 at baseline while Grade 2 at the end of 4th cycle. Change observed in Pain during menses was 75% (Table No. 1). Overall, we observed moderate relief in
all symptoms by administration of dietary regi-
ments.

4.3. Mode of action of Agneya dravyas

Rajakshinata (Hypomenorrhea) is Vata pra-
dhan vyadhi. It reflects Rasa dhwagnimandya and Rasa dhatukshaya as prime pathological
factors. Heto may be santarpan or apatarpan.
In present case sedentary lifestyle, weight gain,
habit of fast food and lack of exercise along
with stress were Heto which gave rise to Rasa
dhwagnimandya and Rasa dhatukshaya due to
Santarpanjanya samprapti. Hence it was decid-
ed to use Agneya dravyas as dietary regimen.

The dravya Kulitha, Tila, Mash, Asav (Drakshyasav) are having
tikshna, ushna, laghu, sukshma properties. These properties
of dravyas leads to Strotoshodhan, Agnivruddhi
and Pittavridhi. This help to improve jatharag-
ni and in turn rasa dhatwagni of patient. After
agnivruddhi and Strotoshodhan vitiated Vata
returns to its normal space giving rise to Kapha
vruddhi and balanced state of Tridosha is
achieved. Sura (Drakshyasav) is having laghu,
sukshma, sukshma strotogamitva and strostho-
dhan properties. Mode of actions is the same as
explained earlier.

4.4. Scope and Limitations

Present study was carried out in a single case of
Rajkshinata (hypomenorrhea). Though we ob-
served good result this cannot be considered as
an evidence. Study on large scale is much need-
ed. As Rajkshinata depends on various factors
result may be very with these individual fac-
tors. We have to consider Heto, Prakruti, Type
of samprapti etc. factors. Agneya dravyas may
not be useful in Rasakshaya due to pitta pra-
dhan samprapti or apatarpanja samprapti.
To reduce error, we have to work on large scale
data. Single case study never provides conclusive
proof to deal with typical patients of typi-
cal illness, but new dimensions of research are
definitely disclosed by such studies.

5. CONCLUSION

It can be concluded with the help of this single
case study that rather than medicinal manage-
ment dietary measures mentioned in Ayurveda
are effective. Proper detection of Heto and
proper diagnosis of samprapti of disease is al-
ways helpful in the management. Along with
dietary management Shodhan and Shaman
chikitsa will give more promising results.

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Table No. 1 Follow up wise observation table

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