



THE EFFECT OF RASHANADI GHAN VATI ON PRIMARY DYSMENORRHEA W.S.R. YONISHOOLA

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ABSTRACT

One of the frequent gynecological conditions seen in women is kashtartava, often known as painful menstruation or dysmenorrhea. In ancient Ayurvedic texts, it has been identified as a symptom of a number of illnesses, including Kukshishoola, Vatala yoni, Udavartini yonivyapada, and others. It is characterized by a condition where the menstrual fluid, or artava, is shed with a considerable deal of difficulty and discomfort. Acharya Charaka expressly said that the presence of vitiated Vata dosha is a prerequisite for the development of all gynecological illnesses (a type of body humor). Dysmenorrhea is characterized by pain that is brought on by vitiation of the Vata dosha alone or in conjunction with other doshas. This vitiation occurs as a result of Vatavriddhi, which is an elevation of the Vata level brought on by Apanavayu (type of Vata), margavarodha (obstruction of the channel), etc. Around 90% of adolescent girls and more than 50% of women who are menstrual have reportedly reported having it, with 10-20% of them rating their discomfort as severe and unpleasant. These facts led to a review of several Ayurvedic classics and a literature search using the terms "Kashtartava, Dysmenorrhea, Menstrual discomfort, Menstruation, Yoni vyapada (vaginal ailment)" in various internet databases to gather information on the subject. It has been shown that the three main factors that cause the vitiation of Vata dosha, which results in dysmenorrhea, are Dhatukshaya (depletion of bodily tissues), Kopa (aggravation of Doshas), and Margavarodha (obstruction of channel).

Keywords: Dysmenorrhea, gynecological disorder, Kashtartava, menstrual pain etc.

INTRODUCTION

Although painful menstruation, or kashtartava, is not specifically addressed as a sickness in the early Ayurvedic texts, there are numerous other conditions where menstrual pain is referenced. Dysmenorrhea has been labeled as Kashtartava, Kukshishoola (abdominal discomfort), Vatala yoni, Udavartini Yonivyapad (kind of vaginal diseases), etc. in traditional Ayurvedic literature. Two words, "Kashta" (painful) and "Artava," make up the phrase "Kashtartava" (menstrual flow) The term "Kashtartava" refers to the condition in which menstrual flow is released with great difficulty and pain. To put it another way, Kashtartava can be expressed as "Kashthena Muchyati Iti Kashtartava," where Kashthena refers to the condition of great difficulty and Muchyati means shedding or expulsion.¹

The Raja (menstrual blood), which is forced upward by this Apana Vayu, causes pain and discomfort during menstruation. Numerous prevalence studies have shown that the dysmenorrheal disease is prevalent all throughout the world. Around the world, up to 90% of adolescent girls and more than 50% of women who are menstruation reported having it, with 10-20% of them rating their pain as severe and unpleasant. According to a research done in India, 31.67% and 8.68%, respectively, of the female medical students who reported dysmenorrhea regularly missed college and lessons. In teenage females, dysmenorrhea may contribute to frequent short-term absences from school, whereas in women of childbearing age, it may contribute to absences from the workplace.²

Menstrual discomfort that is severe enough to interfere with regular daily activities at home, work, or school is thought to affect between 10 and 15 percent of women. Dysmenorrhea can be classified clinically into main and secondary kinds. It impacts female teenagers' physical, psychological, and social status. Primary dysmenorrhea is defined as menstruation discomfort absent of pelvic pathology.³ When ovulatory cycles are established, about 1-2 years after menarche, this often manifests. The condition mostly affects younger women, although it can linger into the 40s. Usually starting a few hours before or right after the start of the menstrual cycle, primary dysmenorrhea discomfort lasts between 48 and 72 hours. Suprapubic cramping and discomfort resembling labor may be present, along with lumbosacral backache, pain in the anterior thigh, nausea, vomiting, diarrhea, and in rare cases syncopal symptoms.⁴

Dysmenorrheal discomfort has a colicky quality to it. Cycled menstrual discomfort, also known as secondary dysmenorrhea, is linked to pelvic disease. Secondary dysmenorrhea's discomfort frequently starts one to two weeks before menstruation and lasts for a few days after the bleeding stops. Endometriosis is the most frequent cause of secondary dysmenorrhea, followed by adenomyosis and intrauterine devices. Dysmenorrhea is more common and severe in younger age groups, low body mass index, smoking, early menarche, extended or abnormal menstrual flow, premenstrual somatic symptoms, pelvic infections, psychological disturbance, hereditary impact, and a history of sexual abuse.⁵

Ushna virya, katu, Tikta, and Kashaya rasa make up the majority of the components in Rasanadi Ghan Vati. These characteristics help to balance the Vata and Kapha doshas. It is a highly effective analgesic and anti-inflammatory composition. Consequently, this clinical study has been chosen.⁶

METHODOLOGY

Comprehensive literature searches were conducted using the keywords "Kashtartava, Dysmenorrhea, Menstrual pain, Menstruation, Yoni shoola" in PubMed, Scopus, Google Scholar, and Web of Science for published literature. As a result, the necessary data were gathered after an in-depth analysis of several classical Ayurvedic texts.

TYPES (BHEDA)

Bheda is used to describe pain that resembles the discomfort caused by tissue separation or breakdown. Although the pain is persistent and more agonizing than the Toda type of pain, it is still present. Pain of the Bheda kind is caused by Vata aggravation, which results from the depletion of body tissues and causes an increase in Rukshata and Kharata (dryness in body tissues). In this situation, discomfort will last as long as Vata is active, or for the duration of the menstrual cycle.⁷

HETU

Consumption of Vata Prakopaka Ahara—Vihara (Vata aggravating diet and lifestyle) causes Vata to become more aggravated, which causes the depletion of bodily tissues to begin with the first Dhatu, i.e. Rasa, and then go on to Rakta (Anuloma Kshaya/consecutive depletion). Menstrual blood is regarded as Upadhatu (sub-body tissues), hence there will be a drop in Upadhatu Nirmana (creation of sub-body tissues), meaning that there would be less menstrual fluid generated than usual. As a result, Vata Dosha will become even more vitiated, leading to Kshobha (perturbation or constriction) in Garbhashaya, a stage that resembles an ischemic state of the uterus and causes agony. It results in a never-ending vicious cycle since depletion of bodily tissues causes Vata to become more aggravated and vice versa.⁸

HETU

The Acharya Charaka identified three methods in which Vata might become more aggravated

DHATUKSHAYA

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KOPA/AGGRAVATION

Svadhātu Vaishamya (vitiating of tissues) and Unmargagaman are two possible causes (deviation from normal physiological pathway) When a patient consumes Vatavardhaka Ahara (a diet that raises Vata) and has a lifestyle that aggravates it, such as excessive traveling, speaking, etc., vitiating the Vata causes a variety of diseases once it enters the uterus. Rasavaha Srotasa (channels carrying nutrient fluids) are affected by the vitiating Vata because of its Ruksha (dry), Sheeta (cold), and Sukshma (minuteness/penetrating) qualities. This causes Rasavaha, Raktavaha (channels carrying blood tissues), Artavavaha (fallopian or uterine tubes), and Srotodushti (dysfunctioning of microchannels). In the uterus, dosha—Dushya Sammurchhana (etiological progression)—occurs.¹⁰

The contraction and relaxation processes of the uterus are improperly carried out in this situation due to the vitiating of Vyana and Apana Vayu. The same condition as uterine dysrhythmia, which will obstruct the normal flow of menstrual blood and cause dysmenorrhea. Menstrual diseases brought on by Vata, such as Vataja Yoni Vyapad and Vataja Artava Dushti, are instances of this form of Samprapti (pathogenesis). If there is any kind of change in the course of Apana Vayu, unmargagamana (deviation from the regular track) type pathology can also take place in the same way. The Udavarta Yonivyapad, where Apana Vayu is altered for its duties owing to Urdhvagamana (upward movement), and generates pain, is a very good example of this sort of pathophysiology.¹¹

MARGAVARODHA

According to a remark by Acharya Sushruta in Sharira Sthana, a menstruation canal blocked by a vitiating bodily humour might result in death. According to Dalhana, Vata and Kapha, either separately or in combination, are the vitiating bodily humors that are responsible for blockage. Particularly when the state of Kaphavrita (covered by Kapha) Vata is involved, the idea of Avarana (obstructive covering) also appears to play a part in causing pain. The vitiating Kapha will hinder the Agni (metabolic activity), resulting in Jatharagni (digestive fire), Dhatvagnimandya, and Snigdha (unctuous), Guru (heavy), Pichchhila (mucilaginous), and Abhishyandi (dense) (cessation of digestive enzymes activity). It causes a condition akin to Ama (partially digested food).¹²

RUPA

Rajakrichrata (difficulty in menstrual blood discharge), Artave Sa Vimukte Tu Tatkshanam Labhate Sukham (immediate relief from pain after discharge), Phenila Artavam (frothy menstrual blood), Anila Vedana (feeling of pains like malaise, body ache), Kapha Samsrishta Artava (discharge of menstrual blood with Kapha).¹³

SAMPRAPTI

Every element that contributes to dysmenorrhea and illustrates each one. Also aggravating the Vata are Manasika (psychological) elements like Bhaya (fear), Shoka (grief), Chinta (excessive thinking), Krodha (rage), and Tanava (stress), which lead to the similar disease of dysmenorrhea.¹⁴

DISCUSSION

According to several studies, dysmenorrhea is one of the most prevalent menstruation issues that dramatically lowers women's quality of life, job productivity, and overall health. It is a condition of the female reproductive system, or Yoni Roga, which is located in Shroni Pradesh, or the pelvic area. One of the key locations for Vata Dosha is Shroni, according to traditional wisdom. The traditional sciences are in good agreement with the anatomical location of dysmenorrhea. As a sign of many disorders, dysmenorrhea has been mentioned in a number of Ayurvedic texts. Nearly all Ayurvedic seers have referenced this term, but they do so sporadically and in relation to various illness entities.¹⁵

Additionally, it has been noted via the research of ancient literature in a number of conditions where Kashtartava is not used as a terminology but the clinical presentation of the disease clearly points to painful menstruation, or dysmenorrhea. For example, in illnesses like Vataja Yonivyapada and Udavartini Yonivyapad, the pain is not described as such but rather as Kashta (painful discomfort). It may be divided into primary and secondary illnesses based on the etiological causes and clinical characteristics of such diseases. The reason of dysmenorrhea is not fully understood in traditional medicine, but the overproduction of uterine prostaglandins, notably PGF_{2a} and PGF₂, is thought to be the main component in altering the central nervous system and increasing uterine tone.¹⁶

Acharya Charaka has stated that vitiated or worsened Vata, which is thought to govern all neurological processes and in turn regulate cerebral activity and all endocrine secretions, is a similar element and etiology that all gynecological illnesses have. According to a different research, all forms of pain cause increased sympathetic nervous system activity, which works as a stressor and alters neuromediators as well as neuroendocrine and hormonal secretions. These data confirm and further prove that vitiated Vata is the primary culprit and main contributor to pathogenesis, with other Doshas simply acting as its co-factors.¹⁷

In the current study, it was also shown that poor eating habits, mental health, and stress-related variables are also to blame for the appearance of dysmenorrhea, and that these same elements have previously been described as the causes of both dysmenorrhea and somatoform syndrome. Due to these facts, numerous Ayurvedic literatures have prescribed various Yoga postures, a model code of conduct, as well as a suggested nutrition plan. As the first line of treatment for dysmenorrhea, conventional medicine recommends non-steroidal anti-inflammatory drugs (NSAIDs), which control pain and inflammation.¹⁸

It has been observed that every form of treatment, whether dietary or medical, primarily controls the Vata Dosha (responsible for pain), followed by the Pitta Dosha (responsible for inflammation), and the Kapha Dosha by virtue of their Tridosha-pacifying properties, such as medicated. These traditional truths and principles have all been supported by a number of scientific research. Vata should be adjusted first, and then the other doshas should be addressed in turn, while formulating the treatment plan. It has been discovered that Ayurvedic literatures have specified a variety of formulations for the management of dysmenorrhea in a variety of dosage forms, including powder, tablet, decoction, medicated enemas, medicated ghee, oils, etc.

The current study offers thorough information on the prevalence, contributing causes, and treatment options for dysmenorrhea, which is a condition described in Ayurveda and supported by a number of clinical trials.¹⁹

MANAGEMENT PROTOCOL

According to Ayurveda, the three doshas (Vata, Pitta, and Kapha) are the basic building blocks of all physiology and disease. Body humors are therefore the most important aspects to take into account while trying to develop any medicine for any ailment. Since Vata Dosha is the main contributor to the etiology of dysmenorrhea, it should be treated initially. Phala Ghrita, Jeerakadi Modaka, Maharasnadi Kwath, Shatavaryadi Anuvasna Basti, Baladi Anuvasna Basti, and other traditional Ayurvedic remedies are used to treat dysmenorrhea. The following therapeutic options are available to control dysmenorrhea.²⁰

RASNADI GHAN VATI

According to our classics, Yonishoola is caused by the Vata dosha, and Rasna is referred to in chapter 25 of the Sutra as one of the greatest Vata-hara Agreya Dravya. The Rasnadi Ghan Vati is a straightforward medication that contains inexpensive, widely accessible, and legitimate medications including Rasna, Amrita, Eranda, Devadaru, and Shunthi. Rasnadi Ghan Vati's constituents feature yoni shoolahara qualities, including Shothahara, Kushthaghna, Vedanasthapana, Krimighna, Kaphaghna, Vranaropana, Jantughana, Vranashodhana, Rasayana, and Vatahara. Because of all these qualities, it may be successful in treating the illness Yonishoola.²¹

YOGASANA

These include Halasana, Sarvangasana, Bhujangasana, Ardhamatsyendrasana, Shavasana, Pranayama like Nadishodhana. These asanas are reported to be effective in dysmenorrhea as they enhance the blood circulation to reproductive organs and regulate the hormones responsible for menstruation.²²

PATHYA AHARA

- Shaka Varga—green leafy vegetables, Dwidala Dhanya (dicots)—Kulattha,
- Anna Varga—Sattu (roasted gram flour), old rice, wheat (Phulka),
- Mansa Varga — Harina, Titar, Jangal Mansa,
- Phala Varga—Dadima, Darksha, Kushmanda, Narikela, Anjira, Amalaki, Nimbu, Kand Mula (rhizomes)—Rasona, Palandu,
- Dugdha Varga—Dugdha, Takra, Navaneeta,
- Jala Varga—Sansakarit (medicated) Jala (water),
- Madhu Varga —Honey

PATHYA VIHARA

- Swedana
- Langhana
- Vishrama

- Diva Nidra
- Avoid mental stress and anxiety and keep mind positive.

CONCLUSION

In order to avoid or reduce the occurrence of dysmenorrhea, one should adhere to the Ayurvedic idea of Ahara-Vihara. In order to encourage individuals to adopt healthy lifestyles, it is urgent to conduct a variety of awareness campaigns addressing dysmenorrhea and include the Ayurvedic Dinacharya (daily regimen) and Ritucharya (seasonal regimen) into academic curricula.

Conflict of Interest –Nil

Source of Support- Nil

REFERENCES

1. Tiwari P. Ayurvediya Prasuti tantra Evam Striroga. 2nd ed. Artavavyapada, 2. Varanasi: Chaukhamba Orientalia; 2000. p. 139.
2. Monier William M. Sanskrit-English Dictionary. New Delhi: Nita Prakashana; 2007. p. 266.
3. Vamana Shivaram Apte. Hindi Kosha. Jaipur: Rachana Prakashana; 2008.
4. Newman Dorland WA. Dorland's Pocket Medical Dictionary. 25th ed. New Delhi: Oxford & IBH Publishing Co. Pvt. Ltd; 1995. p. 263.
5. Newman Dorland WA. Dorland's Illustrated Medical Dictionary. 33rd ed. New Delhi: Elsevier; 2019. p. 345.
6. Agnivesha. Charaka Samhita. In: Acharya YT, editor. Ayurveda Deepika Commentary by Datt C. 2nd ed. Chikitsa Sthana, 30/115, Varanasi: Chaukhamba Surabharati Prakashan; 2000. p. 356.
7. Agnivesha. Charaka Samhita. In: Shastri K, Chaturvedi G, Upadhyay Y, Sastri RD, Pandey G, editors. Chikitsa Sthana, 30, Varanasi: Chaukhamba Sanskrit Series; 1998. p.843.
8. Ozerdogan N, Sayiner D, Ayranci U, Unsal A, Giray S. Prevalence and predictors of dysmenorrhea among students at a university in Turkey. Int J Gynaecol Obstet 2009;107:39-43.
9. Gebeyehu MB, Mekuria AB, Tefera YG, Andarge DA, Debay YB, Bejiga GS, et al. Prevalence, impact, and management practice of dysmenorrhea among university of Gondar students, Northwestern Ethiopia: A cross-sectional study. Int J Reprod Med 2017;2017:3208276.
10. Bereks JS. Text Book of Baraks Novaks of Gynaecology. 15th ed. Philadelphia, PA: Lippincott Williams & Wilkins; 2011.
11. Ibidem 9.
12. Agnivesha. Charaka Samhita. In: Shastri S, editor. Vidyotini Hindi Commentary by Shastri K. Chikitsa Sthana, 30/115. Varanasi: Chaukhamba Bharti Academy; 2004.
13. Agnivesha. Charaka Samhita. In: Shastri S, editor. Vidyotini Hindi Commentary by Shastri K. Chikitsa Sthana, 28/59. Varanasi: Chaukhamba Bharti Academy; 2004.
14. Agnivesha. Charaka Samhita. In: Shastri S, editor. Vidyotini Hindi Commentary by Shastri K. Chikitsa Sthana, 30/10-11. Varanasi: Chaukhamba Sanskrit Sansthan; 2009. p. 452.

15. Agnivesha. Charaka Samhita. Charak Chandrika Hindi Commentary by Tripathi B. Chikitsa Sthana, 30/14-15. Varanasi: Chaukhamba Surbharati Prakashan; 2009. p. 1011.
16. Agnivesha. Charaka Samhita. In: Shastri S, editor. Vidyotini Hindi Commentary by Shastri K. Chikitsa Sthana, 30/23-24. Varanasi: Chaukhamba Sanskrit Sansthan; 2009. p. 754-6.
17. Agnivesha. Charak Samhita. Charak Chandrika Hindi Commentary by Tripathi B. Chikitsa Sthana, 30/25-26. Varanasi: Chaukhamba Surbharati Prakashan; 2010. p. 1014.
18. Agnivesha. Charak Samhita. In: Shastri S, editor. Vidyotini Hindi Commentary by Shastri K. Chikitsa Sthana, 30/211-213. Varanasi: Chaukhamba Sanskrit Sansthan; 2009. p. 778.
19. Agnivesha. Charak Chandrika. Hindi Commentary by Tripathi
20. B. Chikitsa Sthana, 30/219. Varanasi: Chaukhamba Surbharati Prakashan; 2010. p. 1045.
21. Satyavati, Dayashankar Singh, Preeti Pahwa, Devesh Jaiman. A Clinico- Comparative Study to Evaluate the Effect of Gugguluadi Dravyas Karndhoopan with and without Rasnadi Guggulu in Karnsrava. International Journal of Ayurveda and Pharma Research. 2020;8(6): 31-43.
22. Goel M, Singh R, Bidhoodi U. Therapeutic aspects of Kashtartava (dysmenorrhea) in Ayurveda: a review. J Indian Sys Medicine 2022;10:111-9

