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A CLINICAL STUDY ON SHATPUSHPA TAILA UTTAR BASTI IN THE MANAGEMENT OF **KASHTARTAVA (DYSMENORRHEA)**

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ABSTRACT

Ayurveda describes the imbalance of the Dosha due to changes in seasons. Kashtārtava is among the few diseases which can be attributed to changed life styles. Of the three Doshās the Vayu is most important in genesis of genital tract disease specially Kashtārtava. If we go through the Prakriti wise distribution of menstruation, the Vata Prakriti women will have irregular, scanty flow and associated dysmenorrhoea as classical features. In Ayurvedic classics all gynaecological problems are described under the umbrella of Yonivyapada. The disease 'Kashtārtava' is not described in classics as well as in Vedas as an individual disease entity. Though it is a symptom of various Yonivyapadas specially Udavarta, Vatala, Sanipatika etc. It is one of the commonest gynaecological complains. It is a Tridoshaja Vyādhi with Vata predominance. In this specially there is derangement of Apana and Vyana Vayu.

The next consideration is the vitiation of Rasa Dhatu. In this present study, primary dysmenorrhoea is considered as a classical feature and a part of disease Kashtārtava. From the treatment point of view, Uttarbasti has the added benefit of increasing Ojas, replenishing the hormonal system and promoting fertility. This treatment also gives vibrant energy to the female organs and excellent in Vatashamaka. Thus, this procedure is being selected in the present study. In other groups oral drugs are selected. Now-a-days, in modern medicine NSAIDs, antispasmodic and analgesic are used regularly in every cycle for dysmenorrhoea. It also causes various side effects due to regular use. Further it is not a permanent solution to the ailment. The present study is aimed at finding out a method of treatment, which will impart a permanent cure without any side effects. Thus, a clinical study is planned.

KEYWORDS – Kashtārtava, Uttarbasti, Yonivyapadas, etc.

INTRODUCTION

With the advent of new millennium and the herald of high-tech era, women's status was expected to reach new horizons both socially and physically. But some of the physiological things trouble the lady to make her slow down the race. Such a problem is Kashtārtava (menstrual pain). Most women experience minor psychological and somatic changes for a

few days preceding menstruation and during the days. Once the menstruation is over, these menstrual molimina will disappear leaving behind an anxiety free well beingness in the lady. When she has painful menstruation in fully blown up and exaggerated manner then it becomes difficult for her. It is quite interesting to known that most of the accidental and suicidal deaths and other crimes occur among ladies during their pre-menstrual phase, which signifies the hormonal changes during that period.

The concept that life styles are responsible for the genesis of diseases is very old and is well known in Ayurvedic conceptualization. Crowded urban living causes the shortening of life spans of the people has been recorded in Charaka Samhita, for which he has devised Rasayana therapy to counteract this premature ageing and improving the life spans. Most important causes of disease according to Ayurveda are Asatmendriyartha Samyoga, Pragyaparadha and

Parinama.

Asatmendriyartha Samyoga – is hypo, hyper and perverse interactions of the objects of the environment and the organs of senses. Over stimulation of all the senses is very common in the present-day urban living style. Today mass media cause much over stimulations of sight and hearing senses and as well as the minds of large populations. Over indulgence in eating junk foods, lack of proper exercise, sedentary occupations and sex are the causes of many diseases. These abnormal interactions excite the Doshās resulting into imbalance and disease. Stress of building career is yet another important reason.

CONCEPTUAL STUDY

Problems associated with the continuing menstrual cycle and menstruation were far less prevalent in the past when women encountered pregnancy often pregnancy and menstruation was an infrequent occurrence. Moreover, the Sattwa of the people at that time were very high and were at optimum level. Thresholds like pain threshold were higher than today's generation. So, they could bear things like pain etc. to certain levels. But asthe medical facilities and aids have increased so as the sensitivity and over consciousness about all changes and events have also increased. Disorders like menopause, menorrhagia, dysmenorrhoea, clinical mastalgia, premenstrual syndrome etc. are now frequently being reported.

Although most early periods are anovulatory and are not painful, nevertheless some girls experience dysmenorrhoea apparently from very soon after the menarche. Dysmenorrhoea is the most common gynaecological complaint of young women. Some degree of dysmenorrhoea is experienced by up to 80% of adolescents within five years of menarche, so it is difficult to identify the small proportions with a pathological cause. The recognition that the PGs release is intrinsic to the process of endometrial breakdown and relates closely to pain. The condition dysmenorrhoea can occur to any girl though stress and psychological factors may influence ability to cope.

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In Āyurvedic context as far as the ailment 'Kashtārtava' is concerned, it is not coded as an individual disease. But there are many diseases, in which it is described as a symptom. Though, Chakrapāni quoted that any symptom may manifest as an individual disease.

DRUG REVIEW

Ayurveda considers that the whole orchestra of treatment is governed by "Chikitsa Chatushpada" i.e. four basic pillars of treatment and also their required qualities lead to the fastest recovery of the disease. Among the four basic factors of treatment, **Dravva** has been designated the second place quoting that it is a major tool in treating the diseases. As per Charaka school of thought, any stuff that relieves the patient of his ailments is considered as 'Aushadhi'. Hence sufficient attention should be paid while selecting a drug. Drugs are always considered as tools of a physician. In Ayurvedic classics there are a lot of single and compound drugs available which are mentioned in several contexts. Most of them are not re-tested according to the current research methodology. Unless the drug is tested through this methodology the drug will not get proper recognition in the scientific world. Kashtartava is a Vata predominant ailment. In the present research work our trial drug formulations – ShatapushpaTaila

Shatapushpa Taila

Shatapushpa Taila having the ingredients Shatapushpa and Tila Taila (Sesamum oil).

Guna Karma (Properties and actions)

The properties and actions of any compound formulation follows the principles of Prakritisamasamavaya and Vikritivishamasamavaya (Chakrapani – Ch. Vi. 1/10). According to these principles Samyoga (combination) of many drugs in a compound formulation gives rise to some new properties and actions (Vikritivishamasamvaya) along with existence of

the inherent one (Prakritisamasamayaya). Therefore, when considering the Guna Karma of Shatapushpa Taila, we should consider the followings –

- Gunakarma of Shatapushpa drug
- Gunakarma of Tila Taila
- Gunakarma of Shatapushpa Taila

DISCUSSION

Menstruation is a normal physiological process, when accompanied with pain called Kashtārtava. In Āyurvedic text, though various conditions are described in which menstruation occurs with pain but the word Kashtārtava is not mentioned anywhere in Brihatrayi and Laghutrayi as aseparate disease entity. Here in this present study primary dysmenorrhoea is taken with Kashtārtava. Considering its increased prevalence rate now-a-days, we have selected it for the research work. Thus the present research work is planned to assess efficacy of selected drugs on Kashtārtava and the comparative efficacy of both Basti group and oral group.

In disease Kashtārtava there is mainly derangement of Vāta Dosha. So we can consider etiology and pathology of pain here. i.e. without Vāta there cannot be pain. And all disorders of Vāta causes pain. The reasons for Vāta vitiation are Mārgavarodha, Dhātukshaya and Swanidana Prakopa.

Applying these principles to the process of menstruation, it will be seen that Kashtārtava arises from the following etiology and pathology. There is no direct reference of Āvarana found in case of Kashtārtava. But as the prime cause of the disease is vitiation of Vāyu which is caused by either Dhātukshaya (wasting of Dhātus) or Margavarana (obstruction in passage) (Ch. Chi 28/59). There must be presence of Āvarana in this disease pathogenesis. Charaka has clearly mentioned that the wise physician should diagnose the other Āvaranas (covering of Vāyu), by looking to their location and increase or decrease in functions (Ch. Chi. 28/217-218). Observing the mixture symptomatology of Pitta and Kapha the learned physician should decide the mixed covering (Mishra Āvarana) of Pitta- Kapha. In such case the Āvarana Doshās suppress the normal functions of Āvrita Dosha (Apāna Vāyu) and exhibit various types of manifestation as of their own (Ch. Chi. 28/231-233). Hence,

- Reduced function of Apāna Vāyu Normal flow of menstrual blood decrease; further vitiation of Āvrita Apāna Vāyu because it tries to come over the resistance of Āvaranas increase pain due to spasm.
- Mixed Āvarana Pitta and Kapha are already in vitiated state because it happens following circulation and adhered, where there is Khavaigunya (Su. Su. 24/10). Thus, it exhibits symptoms like burning sensation (due to Pitta), stiffness,

Tandra etc. (due to Kapha) and also manifestation of other new symptoms which are not related to either Pitta or Kapha (Vikriti Vishama Samavaya).

CONCLUSION

In the present research work on the basis of facts, observations and results of conceptual, drug, pharmacological and clinical studies the following can be concluded. Here in the present study Artava is considered as menstrual blood. Kashtartava is not found in our classics as an individual disease entitybut as a symptom of various Yonivyapadas. With Kashtartava primary dysmenorrhoea is taken. Very encouraging result is found from (Uttarbasti) in the main cardinal features of Kashtartava along with the better results in associated symptoms and the other symptoms like Asthisandhishula, Nidranasha, Vandhyatva etc. We got quite good result in the patients of infertility, 40.00% of patients were conceived after the two courses of Uttarbasti of Shatapuhpa Taila. Out of which patient was having 6 years of infertility and 1 having recurrent abortion. Shatapushpa having Shothahara effect, as one patient with cervical erosion and oedematous cervix when given Uttarbasti of it shows rapid decrease in the symptom. The oedematous cervix become quite normal after three days of Uttarbasti.

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