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Conceptual study on rajonivrutti w.s.r to menopausal syndrome

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ABSTRACT: Menstruation is unique to females. Menarche and menopause are two significant landmarks in the journey of a women's life. Age of menarche is 12 years and that of menopause is 45 years. Menarche marks the beginning of the reproductive life of a woman. Right from menarche, a woman undergoes several changes in her body and finally attains a phase of complete cessation of menses known as menopause or *rajonivrutti*. *Rajonivrutti* or menopause is a natural and physiological phenomenon. However, various changes take place starting from physiological changes like depression, sleep disturbances. somatic changes like hot flushes, constipation etc., pathological changes like cardiac disorders, endometrial carcinoma etc. are often found. By adopting a proper diet and regimen and making use of *rasayana* as per *Ayurveda*, all these changes developed in the pre-menopausal and menopausal phases can be brought to lesser extent.

I. INTRODUCTION

- II. Menopause is generally defined as the cessation of menses for period of consecutive 12 months or period equivalent to 3 previous cycles or the time of cessation of ovarian function resulting in permanent amenorrhea [1].
- III. Incidence of post-menopausal syndrome is 78% of population but only 19.5% of the symptomatic women take treatment ^[2]. Currently, the number of menopausal women is about 43 million and projected figures in 2026 have been estimated to be 103 million. So there is higher demand for menopausal health in Indian scenario ^[2].
- IV. *Raja* means menstrual blood and *Nivrutti* means to cease or to stop. *Rajonivrutti* means cessation of menstruation. In *Ayurveda*, *Acharya Sushruta* mentioned the age for *Artavadarshan* and *Rajonivrutti* as 12 and 50 years respectively [3].
- V. In *Ayurveda*, the context of Menopause is taken as *Jara pakwa awastha* and *Rajonivrutti*. *Rajonivrutti janya lakshanas* are present due to involvement of *dosha*, *dhatu*, *strotas and manas*. *Vata Dosha* dominance is seen in the later stage of life. Which leads to *doshaja* and *dhatukshya janya lakshanas*.
- VI. In Menopause diminished hormonal levels lead to various symptoms such as vasomotor changes, psychological changes, osteoporotic changes, cardiovascular changes^[4]. In contemporary science, hormonal replacement therapy is widely indicated^[4], which is having major drawbacks like, weight gain, stroke, breast and endometrial cancer^[4]. Even non hormonal therapies are less effective than HRT and even associated with adverse effects too ^[5].

AIMS AND OBJECTIVES: To study in detail about menopause and rajonivrutti

MATERIAL AND METHODS: All the information regarding menopause and *rajonivrutti* collected from *ayurvedic*, modern literature and contemporary text.

RAJONIVRUTTI AND RASAYANA

Rajonivrutti is a process where women pass from madhyamavastha to vrudhavastha. This stage of life is dominated by Vatadosha, this affects the female body. The dominant vata dosha with its laghu and ruksha guna results in reduction in drava guna of rasa dhatu, which further leads to dhatukshya, starting from rasa dhatu, further respective updhatu kshaya is noted [7]. Thus, leading to artava nasha (amenorrhea). The vitiated vata dosha also affects all strotas, specially rasa, rakta, asthi, majja and other sharirika doshas as well as manasika doshas (raja and tama dosha) leading to various psychological issues. Thus, according to Ayurveda, different Rajonivrutti lakshanas (menopausal symptoms) are seen in the body. To overcome the physiological process of the body tissue and dhatukshaya, Acharya's have described Rasayana Chikitsa, which promotes longevity and improves the quality of life [8]. Rasayana bestows excellent rasa and other dhatu. It helps in maintaining youth, enhancing lifespan and strength, and helps to keep free from diseases [9]

DISEASE REVIEW

Acharya Sushruta explained Rajonivrutti as a swabhavajanya vyadhi, that it occurs naturally as the ageing process occurs [10]. The causative factors of rajonivrutti are: kala, swabhava, vayu, karma,dhatukshaya,[11]. Acharya Sushruta divided rajonivrutti into two types: kalaja and akalaja Rajonivrutti[10]. As per Acharya Bhavaprakash there are 80 types of vata vyadhi in that he has mentioned about Rajonasha[12]. In vatavriddhi Avastha in jaraavastha, due to increased laghu, ruksha, khara, chala guna it produces some symptoms like shirashula, anidra, hastha pada and sandhi vedana.etc.[13] The Ayurvedic management for rajunivrutti lakshanas are – preventive measures, daiva vyapashraya, yukti vyapashraya, satvavajaya, management of dosha, management of dhatukshaya through Rasayana chikitsa.[14] etc

CAUSE OF MENOPAUSE

It is a physiological process caused due to loss of ovarian follicular function, decline in circulating blood oestrogen levels and change in hormonal level. artificial menopause is caused due to surgical process (hysterectomy), chemotherapy and radiation therapy.

In Ayurveda the context of Menopause is taken as jara pakwa awastha and Rajonivrutti. Rajonivrutti janya lakshanas are present due to involvement of dosha and dhatu. Vata Dosha dominance is seen in the later stage of life. Which leads to doshaja and dhatukshya janya lakshanas.

ENDOCRINOLOGY

1) Hypothalamo pituitary gonadal axis:

serum estradiol level decreses from 50-300pg/ml to 10-20pg/ml after menopause cause negative feedback on HPO axis, it cause increased FSH and LH levels.

- 2) ESTROGEN: predominant estrogen is estrone (30-70 pg/ml) sharp fall in estrogen indicate women is in true state of menopause.
- 3) ANDROGENS: main androgens are androstenedione and testosterone leads to increase facial hair growth and change in voice.
- 4) PROGESTERONE: levels decrease
- 5) GONADOTROPINS: FSH increase 10 to 20 folds

LH increase 3 folds

MENOPAUSAL SYMPTOMS:

1)MENSTRUAL CHANGES: Shorter cycles

Irregular bleeding

2) VASOMOTOR CHANGES: Hot flashes

Lack of sleep

Body sweating

3) PSYCHOLOGICAL CHANGES: Irritability

Mood swings

Poor memory

Depression

4) SEXUAL DYSFUNCTION: Vaginal dryness

Dyspareunia Decreased libido

Itching vagina and vulva

5) URINARY CHANGES: Incontinence

Urgency

Increased frequency

Recurrent UTI

DIAGNOSIS OF MENOPAUSE

- 1) Cessation of menses for consecutive 12 months
- 2) Appearance of menopausal symptoms
- 3) Vaginal cytology
- 4) Serum estradiol < 20 pg/ml
- 5) Serum FSH and LH > 40 IU/ml

MANAGEMENT

PREVENTION

NON HORMONAL TREATMENT

HORMONAL TREATMENT

PREVENTION: Prevention of menopause is not possible as it is physiological inevitable event of a woman's life spontaneous menopause is unavoidable, artificial menopause induced by surgery can be prevented to some extent.

NON- HORMONAL TREATMENT

- 1) Lifestyle modifications
- 2) Nutritious diet (calcium and protein rich)
- 3) Supplementary calcium: (daily 1- 1.5g)
- 4) Exercise
- 5) Vit D3 Supplementation (vit D3 1500 2000 IU/day)
- 6) Biphosphonates commonly used drugs are ibandronate, risedronate. it prevents osteoclastic bone resorption, improves bone density, to be taken empty stomach and nothing should be taken by mouth for 30 mins after taking medicine.
- 7) Denosumab reduce risk of fracture, it inhibits osteoclast development and bone resorption
- 8) Calcitonine used when estrogen therapy contraindicated, given by nasal spray (200 IU daily / inj (50 – 100 IU daily), has analgesic effect. Used when estrogen therapy is contraindicated.
- 9) Gabapentine: used to control hot flashes
- 10) Bazedoxifene: control vasomotor symptoms

HORMONAL TREATMENT

Principal hormone is estrogen (commonly used are conjugated estrogens (0.625 -1.25mg/dl micronized estradiol 1-2gm/day)

Progesterone: medroxyprogesterone acetate (1.5 to 5mg/day)

micronized progesterone (100 – 300 mg/day) dydrogesterone (5-10 mg/day)

Estrogen and cyclic progestin therapy (estrogen 25days and progestin 10 days)

Continuos estrogen and progestine therapy.

Subdermal implants (17 beta estradiol implants over ant. Abd wall) for 6 months

Percutaneous estrogen gel: 1g gel application

Transdermal patch of estradiol

Vaginal cream 1.25mg daily

BENEFITS OF HRT

Improvement of vasomotor symptoms (70-80%)

Improvement of urogenital atrophy

Prevention of osteoporosis

Increase bone mass density (2-5%)

Decrease risk of vertebral and hip fracture.

RISKS OF HRT

- 1) Endometrial cancer
- 2) Breast cancer
- 3) Venous thromboembolic disease
- 4) Coronary heart disease

ABNORMAL MENOPAUSE

- 1)Premature menopause (below 40yrs)
- 2)Delayed menopause (beyond 55yrs)
- 3) Artificial menopause (surgery)
- 4) Radiation menopause

DISCUSSION:

Menopause is a natural biological process and experienced individually by every women. Menopausal syndrome is the result of gradual decrease in the function of ovaries to produce estrogen and progesterone. The physical symptoms and psychological symptoms vary considerably and depend largely on the makeup of the individual and on womens previous outlook towards menopause. HRT is the hallmark treatment for menopausal syndrome but still it comes with various health risks and side effects, this is the main drawback of HRT. Thus, according to *Ayurveda*, different *Rajonivrutti lakshanas* (menopausal symptoms) are seen in the body. To overcome the physiological process of the body tissue and *dhatukshaya*, *Acharya's* have described *Rasayana Chikitsa*, which promotes longevity and improves the quality of life. *Rasayana* bestows excellent *rasa* and other *dhatu*. It helps in maintaining youth, enhancing lifespan and strength, and helps to keep free from diseases

CONCLUSION:

Only few scattered references about *rajonivrutti* are available in the classics, but *rajonivrutti* as a *vyadhi* is not described in the classics at all. It results due to *jarapakva avastha* of body but when it causes discomfort to the body in the form of various symptoms it attains *vyadhiswarupa*. Factors like *kala*, *swabhava*, *vayu*, *dhatukshaya*, *abhighata* are said to be the causative factors of *rajonivrutti*. Menopause marks the closure of menstrual life as well as reproductive period of a women's life. Prolonged amenorrhea at climacteric is the

most obvious symptom of menopause cause due to hormonal derangement. *Rasayana chikitsa* is very much helpful to minimize the *Rajonivrutti Lakshanas*.

REFERENCES:

- 1. Menopause. Hawkins and Bourne Shaw's A Textbook of Gynecology Reprinted ed: Elsevier, 2005; 56-67.
- 2. Wikipedia contributors. (n.d.). *Menopause*. Wikipedia, The Free Encyclopedia. http://en.m.wikipedia.org/wiki/Menopause
- 3. Sushruta Samhita, Sharirsthan, Chapter-3, by Kaviraj Ambikadutta Shastri, Chaukhamba Sanskrit Sansthan, Varanasi.
- 4. D. C. Dutta, textbook of gynaecology, "Menopause", edited by Hiralal Konar, eighth edition, New central book agency(P) LTD Kolkata publication, 2020: pg- 51,48,50
- 5. R. J. Santen, D. C. Allred, S. P. Ardoin et al., "Postmenopausal hormone therapy: an endocrine society scientific statement," The Journal of Clinical Endocrinology and Metabolism, vol. 95, no. 7, supplement 1, pp. sl-s 66, 2010.
- 6. A TEXT BOOK OF GYNAECOLOGY, STREEROGA VIJNAN, By Dr. V.N.K Usha, Chaukhamba Sanskrit Pratishthan Varanasi, 2021, pg no.53
- 7. Tapaswi R. Kale, Sameer S. Gholap, Rajonivrutti Evum Rasayana. J Ayu Int Med Sci. 2022;7(5):108-114 https://jaims.in/jaims/article/view/1816
- 8. Charaka Samhita, Chikisthana, 1/8, Commentary by Ravi Dutt Tripathi, Reprinted. Chaukhamba Sanskrit Pratishthan Varanasi 2012.
- 9. Sushruta samhita ,chikitsa sthana vol-ii, by Dr. Anantram sharma , Chaukambha surabharati prakashana , Varanasi 2023, chap-27,pg. 384
- 10. Sushruta Samhita Ayurveda dipika Tatva Samdipika Vyakhya, Sutrasthana, 7-24/8 by Dr. Ambika Dutta Shastri Chaukambha Sanskrit Samsthan, Varanasi, 2013, pg -27.
- 11. Dr.Mamta Rani Post graduate dept of Prasutitantra&Streeroga Thesis "Aclinical study on the role of Memsolcompund in the management of Menopausal Syndrome "NIA, Jaipur.
- 12. Bhavamishra bhava prakasha commentary by dr.bulusu sitaram vol 2 madhyamakhnada sec-ii-partii-ch.24/15 pg 263.
- 13. Varinder Kaur, Janu Manohar, Sakshi. A Critical Analysis of Rajonivriti Lakshanas And Their Pathogenesis. AYUSHDHARA, 2021;8(4):3466-3472. https://doi.org/10.47070/ayushdhara.v8i4.792
- 14. "Management Of Rajonivritti Lakshanas w.s.r to Postmenopausal Syndrome in Ayurveda" Ramugade Divya D. Shitre Ashwini A. Ayurlog: National Journal of Research in Ayurved Science-2020; (8) (2): 01-10

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