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Review Article

CONTEMPORAY AND AYURVEDIC PERSPECTIVE OF ARTAVAKSHAYA.

Sarika Sawant¹, Umesh Agawane², T. Vishala³, Kavita C. Mule⁴P.G. Scholar¹, Associate Professor^{2,4}, H.O.D. & Professor³Department of *Prasutitantra and Strirog*, Yashwant Ayurveda College P.G.T. & R.C. Kodoli, Kolhapur.*Corresponding Author: Dr. Sarika Sawant, email: sarikasawant15269@gmail.com

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ABSTRACT:

Woman is symbol of beauty. Beauty must not be skin deep. It should be maintained internally also. There are many physiological Changes takes place in women's body which is markedly seen in the reproductive life. Menstrual cycle is such a unique phenomenon in the body which includes dramatical monthly changes in the hormones. which ends finally with the shedding of endometrium.

Though "*Artavakshaya*" is described as a symptom in classics, but in present study it appears like a disease. The people have come to know the impotence of the reproductive health. Thus the line of treatment selected for this study is *shaman chikitsa*.

KEY WORDS: Reproductive Life, Menstanal cycle, *Artava Kshaya*.

INTRODUCTION:

In the Modern world, the Life style, food habit and just for unnecessary desires have increase stress, strain and restlessness which have resultantly increased menstrual disorders. *Artava dusti* is very important among gynaecological problems. Ratio of menstrual disorder is rising in gynaecological practice which is precursor of infertility and other problems, so it requires more attention. Menstrual disorder affect on metal state of women. Many Menstrual disorder i.e. secondary amenorrhea, oligomenorrhoea, require counseling with appropriate treatment. There is an altered physiology in the H-P-O-U axis. Hence this requires attention that can answer the rising question.

In Modern Medical science Hormonal Treatment which has a good therapeutic utility is used for menstrual disorders but this is not devoid of side effect.

So, in contemporary era it is very important to provide a practicular etiopathology and treatment for "*Artavakshaya*". There are many processes and Mehods available in Ayurvedic

classics to alleviate *Artavakshya*. But it is yet, the on going research to find out a method of treatment. which is more near to procurance of permanent cure without side effects. It must be easier for administration and warmly acptable by all class of patients.

Modern aspect of *Artavakshaya*:

Oligomenorrhoea:

It can be defined arbitrarily as one in which the cycle lasts longer than 35days with only 4-9 cycles in a year.

Menstruation may be both infrequent & irregular or may be regularly infrequent.

Infrequent menstruation & amenorrhea are essentially similar symptoms with identical causes the difference is only one degree.

Aetiology

Oligomenorrhoea can be caused by a hormonal imbalance. Menarche to menopause is the length. Regularity & menstrual flow is under the hormonal control of hypothalamus -pituitary-ovariai-uterine axis. Adrenal gland also takes part

in production of steroid hormones. Thus the causes can be divided into

- A) Physiological
- B) Pathology

A) Physiological factors

It is quite common for women at the beginning & end of their reproductive lives to miss or have irregular cycles due to an ovulation or oligo ovulation. This is normal & is usually the result of imperfect co-ordination between the hypothalamus-pituitary-ovarian axis.

- Pregnancy
- Lactation

B) Pathological factors:

Uterine factors:

- Tubercular endometritis- There is destruction of the endometrium or inhibition of ovarian function by tubercular toxins
- Post radiation- There will be destruction of endometrium.
- Due to absence of FSH receptors.

Ovarian factors:

Autoimmune disease:

- PCOD - Tonically elevated -*increased androgen production from theca cell & stroma of the ovaries —a. decrease SHBG —*increased unbound estrogens & androgens-. pituitary sensitivity to GnRH is increased preferential increased production of LH, decreased production of FSH due to inhibition. Disturbed adrenal function is also implicated in androgen excess.
- Resistance ovarian syndrome (savage syndromel- defect in FSH receptors. follicles are present but are resistant to gonadotropins.

Pituitary factors:

- Tumors like Prolactinoma. Chromophobe adenoma. Cushing disease. In all the above conditions there is microadenoma associated with hyperprolactinaemia. This inhibits steroidogenesis of ovary directly & inhibits pituitary release of LH & FSH.
- In above 2 conditions there is partial or complete destruction of pituitary by ischemia caused by venous thrombosis. The principle hormones affected are growth hormone. LH. FSH. TSH. thyrotrophic hormones & prolactin.

Hypothalamus causes:

- GnRH deficiency
- Vigorous exercise
- Brain tumors

Release of GnRH is inhibited. There is low level of estrogen & LH but FSH level remains normal. There may be hyperprolactinaemia due to altered dopamine inhibition. Tumours of hypothalamus & pituitary need surgical excision.

Adrenal causes

- Suprarenal tumours or hyperplasia

The effect of estrogen on the endometrium is opposed by excess androgen.

Thyroid factors

- Graves disease

Raised TSH & hyperprolactinaemia by direct action of TRH on galactophore cells in the pituitary.

Drugs

- Contraceptive pills- This leads to 'post pill syndrome- due to suppression of GnRH release
- Anti depressants, Dopamine Antagonists- These agents raise the prolactin levels

Nutritional factors

- Extreme obesity
- Excessive weight loss in the athletes & ballet dancer
- Severe anemia

Hypomenorrhoea

Uterine bleeding may be slight in amount, short in duration or both. Bleeding which lasts 2 days or less is unusual & this pathology is termed as Hypomenorrhoea.

Causes:

Constitutional causes:

- Constitutional scanty menstruation is perhaps best explained by assuming the presence of an unusual arrangement, or relative insensitivity of endometrial vascular apparatus.

Uterine causes:

- Scanty loss sometimes means that the bleeding surface is smaller than the normal.
- Due to intra uterine adhesions

Hormonal causes:

- Disturbances in endocrine system do not ordinarily lead to scanty menstruation without altering the cycle at the same time.
- Use of low dose oral contraceptives results in endometrial atrophy that causes hypomenorrhoea.

AYURVEDIC ASPECT OF ARTAVAKSHAYA

Artavakshaya:

Most of the menstrual disorders have been described under the heading of astaartavadusti, asrgdhara. artavakshaya in our classics.

The word 'kshaya' is derived from dhatu whit means 'to get reduced' or 'to cease' As per Acharya Caraka 'kshaya' means 'tram' or 'nytinata'.

When artava is reduced in quantity from its normal flow it is called as kshinartava.

Shabdakalpadruma the meaning of 'Alpa' has been written as 'kshrudrapramana' which is suggestive of lesser in quantity.

Artavakshaya is not explained as a disease moreover it is a symptom in some diseases. Acharya Sushruta explains artavakshayalakshanas under dosadhatu main kshayavriddivignanam in sutrastana. He explains same lakshanas under nastartavau in sharirastana. &anaratava explained according to Vagbhatta.

Acharya Carakahas not mentioned artavakshaya separately but has mentioned as symptom of many disease.

Nidanapanchaka are required for formation of vyadhi. In artavakshaya. nidanasevana. khavaigunya, srotceodlta. doshadushyadusti & sammurchana all are seen.

All these play key role in vyadhiutpatti. Thus artavakshay can be considered as a disease.

Nidana

Every action in this universe is not without any cause. For production of diseases the nidanas play a very important role. Nidana can be divided into samanya & visheshanidana.

Samanyanidana

- Nidana of vinshantiyonivyapad can also be considered asnidana of artavadusti Acharya Caraka explained the samanyanidana of kshaya. the same nidanas play a very good role in artavakshaya.

Visheshanidana

Acharya Kashyapa while explaining about beejopaghata & pushpopaghata says that. use of nasya during menstruation. consumption of teekstinadravya for panchakarnra procedure & use of ushnaannapana by a woman with ninidukasta having received snehana & swedana causes pushpoptighata.

The margavarana is done by vats & kapha, thus hampering the physiological production of artava leading to artavakshaya.

As we know that artava is agneya in nature i:e pitta doshapradhana. Hence the visheshanidana for artavakshaya can be considered as vatakaphaprakopakanidana & pitta kshayanidana.

So for proper understanding this nidanas as divided into

- Aharaja
- Viharaja
- Manasika
- Abhighataja
- Anya

Samprapti

Acharya Sushruta white explaining about nastartava says that, the vitiation of vata & kapha does avarana to the marga of artava leading to srothorodha of artavavahasrothas causing artavakshaya. Hence the above samprapti can be understood in the following way.

- The nidanas mentioned in artavakshaya vitiates the vats mainly apana vats & the kapha. The kapha does the avarana of apanavata & this kapha vrittaapanavata does margavarodha in artavavahasrothas resulting in reduction in flow of artava leading to artavakshaya
- Vitiated apanavata causes khavaigunya in artavavaha strotas that fills the uterus for
- The whole month. This leads to partial filling of menstrual blood in the uterus causing reduced flow resulting in artavakshaya.
- The nidanas of vata & kapha prakopa kaahara vihara leads to jataragnimandya not only produces aura but also vitiates samara vata. pachaka pitta. kledakakapha. which have good role in digestion. Thus the production of ahara rasa is hampered which ultimately affects the formation of rasa dhatu by causing dhatavagnimandya. Artava being the upadhatu of rasa dhatu its utpau is also affected. Finally leading to artavakshaya.

Acharya Kashyapa while explaining the causes for beejopaghata & pushpopaghata explains that in the inrudukosta woman after proper snehana & swedana. intake of excessive & teekshanadravyas. Ushnaannapana. there is jeevaraktaskalana causing puspopaghata finally causes artavadusti.

Sapeksha Nidana - Differential Diagnosis

Artavakshaya can be noted in the following

Vatala Yonitypad

As there is alpaartavadarshana, it can be considered as artavakshaya. But presence of ayama, suptata in vatalayonivyapad which is absent in artavakshaya.

Lohitakshaya Yonivyapad

It is different from artavakshaya because of its other features like daha. karshya. vaivarnya.

Arajaska Yonivyapad

In this yonivyapad the pitta is the vitiated do.sha. But Acharyn Caraka has not explained any symptom of anartava. Commentator Chakrapani explains anartava as symptom. But it cannot be considered as artavakshaya because it includes other symptoms like karshya. vaivarnya which are not seen in artavakshaya".

Vandhva Yonivyapad

Nastarva is a symptom in vandhya yoni vypad i:e absence of menstruation. But it is also associated with other symptoms.

Shandhi Yonivyapad

Here anartava & astana features are seen which is congenitally absent. But artavakshaya as explained in classics is not a congenital disease.

Sthoulya :-

When sheshmaja prakruti stree (obese) consumes kapha prakopak ahara then it vitiates the dashas mainly kapha which causes the meda vriddhi leading to abnormality in ritu chakra.

further vitiation of tridosha mainly vata causes artavavaha srota dusthi i.e. Kseena artava sthoulya.

Charaka defined that excessive accumulation of meda and mamsadhuta causal sphig, udara and sthana to shake while walking and there is ayathopachaya and loss of utsaha or enthusiasm is defined obese.

CHIKTSA

The main objective of chikitsa is samprapti vighatana . This mainly can be achieved in 2 ways.

- Samshodhana
- Sameshamana

Samashodhana includes Panchakarma which can be defined as therapeutic measures applicable to cleanse excessively accumulated dosha from the body. This is for bahu dosha avastha .

Samshamana includes oral medication which pacifies the disease . This is advised for madhyam dosha avastha.

In apla dosha avastha ,langhana chikitsa can be done.

Hence different mode of chikitsa works on vitiated dosha & dhatu at different avastha .

Acharya sushruta while explaining about the chikitsa of artava kshaya says that . the chikitsa can be adopted according to vitiation of the dosha .

Here both shodhana & shaman chikitsa which is in form of agneya dravyas can be given But the selection of the chikitsa should be done wisely .

Acharya Dalhana commenting on the same says only vamana karma must be done not the virechana. Due to virechana the pitta dosha is reduced which in turn decreases artava as we know that . I while vamana removes the soumya .

dhatu. resulting into relative increase in agneya constituents of the body & finally causes increase in artava. So he advised vatnana.

Charakapani explains that both vamana & virechane are used to clear urdhva & adho srothas respectively. Hence both the measures must be adopted considering the dosage of drugs used for staxhatut & the bala of the woman undergoing the procedure.

Acharya Sushruta explains few of the agneya dravyas⁷⁴ which increases artava.

CONCLUSION:

Significant results were seen in all the criteria i.e duration of flow, intermenstrual period, amount of flow, changes in pain & weight.

Further studies should be carried out with large sample size with all hematological investigation including hormonal assay.

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