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ROLE OF RASONA KSHEERPAK IN AARTAVAKSHAY (SECONDARY HYPOMENORRHOEA): PILOT STUDY

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Abstract:

In today's fast and competitive world, many gynecological cases are rapidly increasing because of sedentary life style,faulty food habits etc.Changes in physical and mental well being profoundly affect menstrual cycle. *Aartavakshaya* is common menstrual disorder. Ratio of Menstrual disorder is raising in gynecological practic which precursor of infertility and other problems. *Artavadusti* is very important among gynaecological problems. Menstrual Disorder affect on mental state of women. . Many Menstrual disorder i.e oligomenorrhoea, hypomenorrhoea require counseling with appropriate treatment . Hence *Rasonaksheerpak* is selected for study which is *Agneya ,Pitta –RaktaVardhaka* and *VataShamaka.*

Keywords:
Artavakshaya, hypomenorrhea,oligomenorrhoea,

Introduction

Acharya susrutha explains artavakshaya lakshana[1] u nder *Dosha-dhatu – mala kshaya-vriddhi vignanam*.. It can be compared with "Hypomenorrhoea [2"] and "Oligomenorrhoea [3"] in modern science to some extent on the basis of its signs and symptoms.

When menstrual bleeding is unduly scanty and lasts for less than 2 days , it called hypomenorrhea[4]

Generally , hypomenorrhea in two forms

a) primary hypomenorrhea –There is regular scanty manses since menarche
b)Secondary hypomenorrhea-It means the normal menstrual flow for some years if followed later by hypomennorrhea .

Need of study

In the modern world the life style , food habbits etc have increased stress, strain and restlessness

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Which have resultantly increased menstrual disorders .menstrual disorder is very important among gynaecological problems . Ratio of Aartavkshaya is rising in gynecological practice.

Aartavkshaya is common problem noticed in majority of patients in our clinical practice.As use of hormonal treatment which has been questioned for side effects after being longer use, so there is need to evaluate and establish safer, cost-effective and easily available ayurvedic remedy.

Aim & objectives

To Evaluate Efficacy of oral intervention of *Rasona Ksheerpak* in *Aartavkshay* w.s.r. to secondary Hypomenorrhea .
To study the disease of *Aartavkshaya* w.s.r to Secondary Hypomenorrhea according to Ayurveda and modern text .

Methodology

Type of study design - Open simple randomized clinical study
Study Setting -Strirog OPD patients of institute hospital

Methods of selection of study subject

INCLUSION CRITERIA

1. Patients having specific symptoms like scanty menstrual flow of less than 2 days with the minimum menstrual bleeding .
2.Patient age between 16-40 years
3.Both unmarried and married women

EXCLUSION CRITERIA

1.patients with systemic disorder like DM, HTN, TB, Asthma,
Congenital abnormalities,Infectious disease

2. Patient with malnutrition, severve anaemia (Hb<8 gm%)

3.Raktapitta prdhan vyadhi

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4.Lactating women

5.Patient on hormonal treatment

WITHDRAWL CRITERIA: -

- If symptoms aggravate.
- If patient refuses to continue treatment.
- If patient developes any side effect.
- If patient gets pregnant .

METHODS OF MEASUREMENT

Drug intervention [5]

Drug	Rasona
Latin name	Allium sativum

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Family	lilliaceae
Rasa	Katu pradhan amla varjit panchras
Virya	ushna
Vipak	Katu
Dose	40ml BD
Duration	7 DAYS

ASSESSEMENT CRITERIA

Sr no	Parameters	Grade			
		0	1	2	3
1	Duration of menstrual blood	3-4 Days	2 Days	1 Day	0 Days
2	Quantity of menstrual blood	2-3 pads/day	1-2 pads/day	Spotting with 1 pad/day	No pad needs
3	Pain during menses	No pain	Mild pain	Moderate pain	Severe pain

OBSERVATION AND RESULTS

Sr no	Parameters			
	Duration of menstrual blood	**Quantity of menstrual blood**	**Pain during menses**	**Result Assessement**

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1	0	0	0	100%
2	1	1	1	67%
3	0	0	0	100%
4	1	1	0	78%
5	1	1	1	67%
6	0	1	1	78%
7	0	0	0	100%
8	2	2	2	34%
9	0	0	0	100%
10	1	3	1	45%

Discussion:

Artavakshaya occurs due to vitiation of *Vata and Kapha doshas*. In this condition the *yathochithakale artava adarshana, alpata, yoni vedana,* irregular and scanty menstrual flow will occur due to *Srotoavarodha*.. In this condition, especially with the help of *Pittavardhaka (Agneya) Dravyas*[6], *shodhana of Artavavaha Srotas*, removes *Srotoavarodha* and brings up the normal menstrual flow.

The drug *Rasona Ksheerpak* is herbal preparation it contains ingredients like Rasona, *Godugdha*(cow milk) & water. *Rasona* [7] *is uṣhṇa virya, kapha-vata shamaka* which helps for *samprapti vighatana* of *artavakṣhaya*. Due *to ushna virya* and *agneyatwa* properties of drugs clears the *srotoavarodha* and increases the blood circulation in the *yoni* and *garbhasaya,* because of this there will be formation of healthy endometrium. Because of increased circulation the uterus gets propernutrition and becomes healthier and thus the menstrual cycles becomes regularized, there will be increase in quantity of artava as well as duration of bleeding also increases. *Godugha* [8]contains *madhura rasa, guru, snigdhaguna, andmadhuravipaka*. It also has

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snehana , vedanasthapuna, sandhaniya and *artavajanana* properties. *Madhura rasa* nourishes and gives strength to *rasa dhatu and mamsadhatu*. It increases secretions and decreases degeneration of endometrium. *Madhur rasa* contains carbohydrates in abundance and less protein, which is very important constituent of endometrium. Due *to ushna veerya* of *Rasona it* removes the *srotorodha* and increases the secretion of endometrial glands (improvement of proliferative stage).

Conclusion

Artavakshaya is not directly explained as a disease in our classics but has been described under *upadhatukshaya* very systematically and as a symptom of *artavavikaras* in many classics. In Ayurvedic classical texts, treatment is mentioned to keep the *doṣhas* in equilibrium. It can be achieved by *Samsodhana* and *Samshamana* (in form of *Agneyadravyas*). Hence for the present study shamana line of treatment was selected as the medicine is easily available, palatable and cost effec-tive. *Rasona Ksheerpak* found to be very effective. Early diagnosis and timely treatment can cure the condition and prevent complication like infertility.

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