

EFFICACY OF *SHODHANA* AND *SHANSHAMANA CHIKITSA* IN *ASRIGDHARA*: A
CASE STUDYDr. Neelam Verma^{1*} and Prof. (Dr.) Kalpna Sharma²¹P.G. 3rd Year Student, Department of Prasuti Tantra Evam Stree Roga, Rishikul Ayurvedic Medical Collage, Haridwar-249401, Uttarakhand.²Head of Department of Prasuti Tantra Evam Stree Roga, Rishikul Ayurvedic Medical Collage, Haridwar-249401, Uttarakhand.

*Corresponding Author: Dr. Neelam Verma

P.G. 3rd Year Student, Department of Prasuti Tantra Evam Stree Roga, Rishikul Ayurvedic Medical Collage, Haridwar-249401, Uttarakhand.

Article Received on 26/07/2019

Article Revised on 15/08/2019

Article Accepted on 06/09/2019

ABSTRACT

A married female patient of 35 years age attended the OPD with the complaint of increased duration of menstruation associated with excessive blood loss. She gave history of medication (Hormonal therapy) for four consecutive cycle, but patients was not satisfied by the treatment as no symptomatic relief was found and it was effecting her daily routine. With the aim to minimize the cyclic blood loss and the regularize the cycle. The *Shodhana Chikitsa* or detoxification that is *Virechana Karma* and *Sashamana Chikitsa* or palliative treatment with *Bola Parpati* and *Punarnava Mandoor* and *Ashokarishta* was advice the patient for three consecutive cycles. This therapy helped to cure the heavy flow during menses and regularize the cycle. But to establish this fact, further study of longer duration and on larger sample is required.

KEYWORDS: *Shodhana Chikitsa*, *Sashamana Chikitsa*, *Bola Parpati*, *Punarnava Mandoor* and *Ashokarishta*.

INTRODUCTION

Since the evolution of the life in the Universe, women have been placed on extreme worship place due to her power of 'Janani'. The God has blessed the female with the most valuable gift of motherhood. The word Artava denotes two meanings one of them is *Antaha Pushpa* and another one is *Bahira Pushpa*. Here, the present study deal with *Bahira Pushpa* that is menstrual blood. Menstruation is a natural physical specific property of a female and giving the power to be a mother. During active reproductive period, menstruation occurs at interval of 28 days, duration varies from 3 to 5 days and total loss of blood is 50 to 60ml with an average of 35ml. Many gynaecological disorders effects her motherhood of women. Dysfunctional uterine bleeding is one of the frequent complaints and its incidence is becoming higher with degree of civilization.^[1] *Acharya Sushruta* says that when menstruation comes in excess amount for prolonged period and or even without normal period of menstruation and different from the normal period of menstrual blood or denoting the features of specific *Dosha*, it is known as *Asrigdara*.^[2] The physiology of reproductive system of women is difficult from Excessive bleeding is associated with considerable health Consequences and its impact on the social, economic and psychological well being of women can be severe. Excessive bleeding is the most common cause of anemia and dysmenorrhoea, toxic shock & infection. Heavy uterine bleeding is managed with Hormonal therapy with

associated side effects, and if unsuccessful is followed by surgical intervention. Modern and other medical systems failed to offer a complete care for the same.^[3] High rate of complication of hysterectomy as well as it is not suitable for younger patients and who wish to conceive further.^[4]

CASE REPORT

A married female patients of 35 years age attended the OPD of Prasuti Tantra and Stree Roga department, Rishikul Campus, Hospital Haridwar with the complaint of increased duration of menstruation associated with heavy flow which affected her daily routine. Patient gave history of medication (Hormonal therapy) twice for three consecutive cycles. But, the patient was not satisfied by the treatment as the symptomatic relief was not found which was affecting her daily routine during menstrual cycle. On enquiry, she told that duration of menses was 10 to 12 days at interval of 18 to 20 days, amount was 5 to 6 pads (fully soaked) /day with clots for initial 6 days followed by 5-6 pads/day, pain was mild in lower abdomen which was radiating to low back and Associated with foul smell. Patient gave history of Diagnostic and Therapeutic Dilatation and Curettage three months back. There was no relevant past history of hypertension, thyroid disorder, diabetes mellitus etc. or any surgical intervention.

On Examination Per Abdomen- On palpation -soft, non-tender, no organomegaly.

Chest, CVS- NAD

Gynaecological Examination: On Inspection Vulva-normal and healthy and on straining, no genital prolapse was observed.

Per Speculam Vaginal Examination

- Vaginal walls –normal
- White discharges –mild present
- Cervix- appearance-Normal
- Mildly hypertrophied

ON PALPATION

(a) Per Vaginal Digital Examination

- No labial swelling detected
- No abnormality detected on palpation of vaginal walls
- Cervix-firm in consistency, mobile, tenderness absent.

(b) Bimanual examination

- Uterus-retroverted, freely mobile, normal in size, firm in consistency
- Bilateral Fornices –free, non tender

After thorough check- up, patient was advised admission in IPD and the following investigations was done and under mentioned treatment was given.

INVESTIGATIONS

1. Haemoglobin-9. 8gm%
2. TLC-8, 100/mm³
3. DLC-N60 L35 EO2 M01 B0
4. ESR-22mm fall
5. Platelet count-2. 30 lakhs
6. BT-2. 05 min
7. CT-5. 40 min
8. FBS-102mg/dl
9. TFT-Normal
10. Urine (Routine and Microscopic)-P. c. -1-2/hpf, E. c. -0-1/hpf
11. Ultrasonography (Pelvis) – Normal study (Uterus - 76x55x33mm, retroverted, normal size and Endometrial thickness-8mm ovary measures 23x15mm and left ovary measures 24x14mm).

TREATMENTS

1. *Shodhana Chikitsa* (Detoxification) - *Snehna* and *Swedana* followed by *Virechana Karma* by *Mahatiktaka Ghrit*^[5] 2. *Sanshamana Chikitsa* (Palliative management) – *Bola Parpati*^[6] 375 mg with *Sharkara* and *Madhu* twice in a day, *Punarnava Mandoor*-250 mg twice in a day, *Ashokarishta*-40ml BD with equal amount of water after meals twice in a day. The main aim of the treatment was to minimize the cyclic blood loss with regularization of cycle and to improve the general condition of the patient. So, the treatment was planned as *Nidana*

parivarjana, *Shodhana Chikitsa* (Detoxification) and *Sanshamana Chikitsa* (Palliative Treatment). After *Virechana Karma*, the Palliative treatment was given for consecutive three months with follow up advice every fortnightly in a month. Patient was observed for a period of six months with follow up every month. The duration of menstrual duration was reduced from days 10-12 days to 4-5 days and number of pads reduced 5-6 pad/day to 2 pad/day without clots and no pain and she remained fully asymptomatic with regular menstrual cycle (18-20 days to 28-30 days) during this period.

DISCUSSION

Ayurvedic management is a good alternative to Hormonal therapy as it has no side effects with minimal recurrence rate. Once, *Shodhana* is done there is less chance of recurrence of the disease. As, vitiation of *Pitta dosha* is there in *Asrigdara* so, *Virechana Karma* was advocated according to the general condition of the patient. Moreover, *Kashyapa* has quoted that purgation cures menstrual bleeding.^[7] *Snehna* (oleation) and *Swedana* (sudation) will help to change the cell permeability leading to expulsion of toxin material to outside the cell, which are membrane bound and toxins will come into circulation. *Virechana* drugs cause irritation of intestinal mucosa and does vasodilatation. Toxins which are present in gut lumen along with secretion of electrolyte and fluid from crypt of *lieburkuhn* in distal lumen and colon will be expelled out through route.^[8] Detoxification will leads to the better absorption of the drugs through gut. Drug present in *bola* due to its myrrhin, cadinene, resin are alpha-beta-gama, commiferin which is highly astringent reported to exert vasoconstrictive action. It has also shown anti-fibrinolytic activity. Ethanolic extract acts as analgesic, anti-inflammatory and antioxidant.^[9] *Punarnava Mandoor* acts as heamatinic and helps to restore the general condition of the patient.^[10] *Ashokarishta* tones up uterine musculature and regularizes menstrual flow. *Ashoka* bark contains phenol glycoside which has direct effect on uterine musculature. It stimulates both endometrium and ovarian tissue. Its decreases blood flow and tones up the endometrial vascularity and thus, checks excessive bleeding.^[11]

CONCLUSION

Thus conservative management through *Ayurveda* is better alternative hormonal therapy. Moreover is has no side effects and cure the disease with minimal recurrence rate. But establish this fact, further study of longer duration and on larger sample is required.

REFERENCES

1. Snowden R, Christian B. Patterns & Perceptions of menstruation a world health organization International study. London, Croom Helm, 1983- British Journal of obstetrics and Gynecology, May, 1998; 517.
2. *Sushruta Samhita* edited by *Ayurveda Tattva Sandipini Hindi* commentary scientific analysis

- notes etc by Kaviraj Ambikadutta Shastri, Chaukhamba Sanskrit Sansthan, Varanasi, part- 1, edition, 2012; *Shareer Sthana* 2/20: 15.
3. Deanna E. Telner, Difat Jakubovicz; approach to diagnosis and management of abnormal uterine bleeding, *Can Fam Physician*, January, 2007; 53: 58-64.
 4. Wood C. Alternative treatment Clin. Obstet Gynaecol-1995; 9:373-397. *Br. J. of O & G*, May, 1998; 517.
 5. *Agnivesh Charak Dridhabala Charak Samhita* edited by Sri Satya Naraya Shastri elaborated *Vidyotini Hindi* commentary part-2, *Chaukhambha Bharti Academy Varanasi*, edition, *Chikitsa Sthana*, *Kushta Chikitsa*, 2013; 7/144-50: 270.
 6. *Yogaratanakar* with *Vidyotini Hindi* commentary by *Vaidya Lakshmipati Shastri* edited by *Bhisagratna Bhahmasankar Shastri*, edition 2013, *Rakta Pitta Chikitsa*, 34,35: 397.
 7. *Vridha Jivaka, Kashyapa Samhita* or *Vridhajivakiya Tantra*, revised by Vatsya with Sanskrit introduction by Nepal Rajaguru Pandit Hemraja Sharma with *Ayurvedalankar Srisatyapala Bhisagacharya*, *Vidyotini Hindi Commentary* and Hindi translation of Sanskrit Introduction, *Chaukhambha Sanskrit sansathan*, reprint 2010, *Sidhisthan*, 2: 150.
 8. Mangal Gopesh, Sharma Om Prakash, Sharma R. S., *Pharmokinetics of Vamana and Virechna karma*, *Journal Of Ayurveda*, Jan-March, 2011; 67.
 9. Tillotson, A. *chrysalis natural medicine clinic*, *Myrrh Gum (Commiphora myrrha)*.
 10. Pandit Sharangadharacharya, *Sharangadhar Samhita*, commentary *Adhamalla's Dipika* and *Kasiram's Gudhartha Dipika*, edited by-Pandit *parsurama Shastri*, *Vidyasagar, Chaukambha Orientalia Varanasi*, 2012; 7/40-46: 200-201.
 11. Nadkarni K. M., *Indian Materia Medica*, Bombay Popular Prakashan, Vol-1, Third revised edition 1982 and reprint, 2009; 1105.