

EUROPEAN JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.ejpmr.com

Case Study
ISSN 2394-3211
EJPMR

A CASE STUDY ON "EFFICACY OF RASAYANACHURNA AND PRANAYAMA IN THE MANAGEMENT OF RAJONIVRITTILAKSHANASW. S. R. TO POSTMENOPAUSAL SYNDROME

Divya Ramugade*¹, Ashwini Shitre², Ajita Bhise³ and Archana Gharote⁴

¹HOD & Prof, Dept of P.T.S.R, D.Y.Patil School of Ayurveda Nerul, Navi Mumbai. ²HOD & Prof, Dept. of Balroga, Shri VNHT'S Ayurved Mahavidyalaya, Rahuri, Ahmednagar. ³Assistant Professor, Dept of P.T.S.R, D.Y.Patil School of Ayurveda Nerul, Navi Mumbai. ⁴HOD & Prof, Dept of R.S.B.K, D.Y.Patil School of Ayurveda Nerul, Navi Mumbai.

*Corresponding Author: Divya Ramugade

HOD & Prof, Dept of P.T.S.R, D.Y.Patil School of Ayurveda Nerul, Navi Mumbai.

Article Received on 05/05/2022

Article Revised on 25/05/2022

Article Accepted on 15/06/2022

ABSTRACT

Menopause is a gradual and natural transitional phase of adjustment between the active and inactive ovarian function and occupies several years of a women's life and involves biological and psychological changes adjustments. This period is usually associated with unavoidable manifestation of aging process in women. The menopause can be correlated to 'Rajonivrutti' in Ayurveda. Rajonivrittias a disease condition is not described separately in the classical texts of Ayurveda. According to Ayurveda Rasayana drugs are used to enhance general body resistance, promote longevity, as anti-stress and adaptogen. So, it was assumed that RasayanaChurnaalong with Pranayama would be effective in relieving Postmenopausal Symptoms. Aims &Objectives of the case study was to give better results inRajonivrutti Lakshanas with the help of Rasayanachurnam and Pranayama. Results: - There was a very good relief seen with the help of the above medicine. Conclusion: - An estimated 80% of females experience physical or psychosocial symptoms while approaching menopause, leading to change in their quality of life. For this Ayurveda has better role in management and also helps in increasing the quality of life.

KEYWORDS: Ayurveda, Rasayanachurnam, Pranayama, Rajonivritti, Postmenopausal Symptoms.

INTRODUCTION

Menopause literally means the "end of monthly cycles" from the Greek word pauses (cessation) and the root men- (month). Menopause is an event that typically (but not always) occurs in women in midlife, during their late 40s or early 50s, and it signals the end of the fertile symptoms in one Phase of a woman's life. Post menopause is menopausal transitional period after menopause (40-55 years). Menopause is a gradual and natural transitional phase of adjustment between the active and inactive ovarian function and occupies several years of a women's life and involves biological and psychological changes adjustments. This period is usually associated with unavoidable manifestation of aging process (jaraavastha)^[1] in women.^[2] The menopause can be correlated to 'Rajonivrutti' in Ayurveda. Rajonivrittias a disease condition is not described separately in the classical texts of Ayurveda. According to Ayurveda Rasayana drugs are used to enhance general body resistance, promote longevity, as anti-stress and adaptogen. So, it was assumed that RasayanaChurna along with Pranayama would be effective in relieving Postmenopausal. Rasayana Churna is a classical Ayurvedic formulation which contains dried

powders of three rejuvenating drugs viz. *Guduchi* (Tinospora cordifolia), *Amalaki* ((Emblica officinalis) and *Gokshura* (Tribulus terrestris). [3,4] As name suggested, it is used in Ayurveda as *Rasayana* to enhance general body resistance, promote longevity, as anti-stress. So, it can be assumed that *Rasayana Churna* along with *Pranayama* would be effective in relieving postmenopausal symptoms in female patients.

MATERIALS AND METHODS

Present Case study was carried out in accordance with ethical principles & Good Clinical Practices. Informed written consent was taken from the patient in 2 languages and the case was recorded at OPD Level.

Site of study

Dr. D.Y.Patil School of Ayurveda, Maharashtra.

Case report

Patient age of 50years married came with complaints of Dryness of vagina, Dementia, Insomnia, Bilateral Knee joint pain, Lower Backache, Decrease in concentration, Libido since 2years.

History Of Present Illness Patient was apparently healthy 2yrs back later she developed with the above complaints for better management she came Dr.D.Y.Patil. School of Ayurveda OPD no -08.Significant and relevant past illness was not observed.

Personal history Appetite- normal, takes food 3 times a day ,Bowel – once a day/no hard stools,no pain/ burning sensation/ itching on passingmotions, Micturition – 7-8 times / day and 2 times in night, Sleep –Insomnia, not disturbed, No sleep at day time, Habits –Nil.

Menstrual history With LMP on 20:11:2017 patients had regular menstrual periods with duration of bleeding for 3-4 days with an interval of 28days and the flow within normal limits.

Marital life is of 30 years with no h/o consanguineous marriage.

Coital history: weekly once / Pain during coitus.

General examination Built: Moderate, Tongue: Clear, Pulse Rate: 78/Min, BP: 120/80mm Hg, Respiration Rate: 18/Min, Temp: A febrile.

Physical examination Dasavidha pariksha Prakriti — Vata, Kapha, Satmya — Madhyama, Vikriti — Kapha, Aharashakti — Madhyama, Sara — Astisara, Vyayama Shakti — Avara, Samhanana — Madhyama, Vaya — madhyama, Satva — Madhyama, Pramana — 149 CM.

Systemic examination: CNS: Normal, C.V.S: S1, S2 clear; RS: Normal.

Stanika pariksha P/A: soft, No tenderness, Breast examination: soft, No tenderness, P/S: cervix healthy; P/V: Ante Verted /Atrophied /Free Fornices.

Treatment plan

- Rasayana Churna orally and daily practice of Pranayama.
- Dose of *Rasayana Churna*: 6 gm twice a day (Total dose 12 gm / 01 *Pala* per day)
- Kala: *Apana kala* (Before Food)
- Anupana: Ghrita (quantity as required)

- Anuloma Viloma Pranayama: The process of inhale and exhale the breath through right nose by closing the left nose, repeat the same for left nose by closing the right nose and these can be repeated for 10 to 15 times twice a day for 12 weeks in morning and evening before food.
- Duration of Treatment 12 weeks.

DISCUSSION

Rajonivrutti janya lakshana is a group of symptoms produced by degenerative changes, so rasayana chikitsa is described by Acharyas to combat the degenerative process of the body tissues. Rasayana Churna is a classical Ayurvedic formulation which contains dried powders of three rejuvenating drugs viz. Guduchi (Tinospora cordifolia), Amalaki ((Emblica officinalis) and Gokshura (Tribulus terrestris)^[5,6] As name suggested, it is used in Ayurveda as Rasayana to enhance general body resistance, promote longevity, as anti-stress and adaptogen. So, it can be assumed that Rasayana Churna along with Pranayama would be effective in relieving postmenopausal symptoms in female patients.

CONCLUSION

An estimated 80% of females experience physical or psychosocial symptoms while approaching menopause, leading to change in their quality of life (OOL)^[7] These physiological and psychological changes are due to estrogen deficiency. [8] Many symptoms found related to postmenopausal syndrome are hot flushes, irritability, mood swings, insomnia, dry vagina, difficulty concentrating, mental confusion, stress incontinence, urge incontinence, osteoporotic symptoms, depression, headache, vasomotor symptoms, insomnia etc. The formulation, Rasayana Churna contains three ingredients as, Guduchi (Tinospora cordifolia), Amalaki (Emblica officinalis) and Gokshura (Tribulus terrestris)[9] Pranayama was found to be effective in relieving postmenopausal symptoms in female patients in previous clinical trials.^[10] The present case study is found to be effective in treating the symptoms of Menopausal scale (Ref Table¹) psychological got reduced from 8 to 5 score, physical symptoms got reduced from baseline score 13 to 8 by 12th week. So, Rasayana churna along with Pranayama found be significant in the management of rajonivritti lakshanas w. s. r. to postmenopausal syndrome.

Table-1: Menopause-Specific Quality Of Life Questionnaire (Menqol).

SL. NO	SCALE	SCORE	
		BASELINE	WEEK 12
1	VASOMOTOR	0	0
2	PSYCHOLOGICAL	8	5
3	SEXUAL	04	3
4	PHYSICAL	13	8

ACKNOWLEDGEMENT

We are grateful to D.Y.Patil school of Ayurveda for giving the opportunity to manage the needy patients.

REFFERENCE

- 1. Dr Ambika Dutta Shastri, Sushrutha Samhita 'Ayurveda Tattva Samdipika' Vyakhya, Chaukhamba Sanskrit Samsthan, Varanasi, 2013; Sutrasthana, 14/6: 64.
- 2. Mashiloane CD, Bagratee J, Moodley J. Awareness of and attitude toward menopause and hormone replacement therapy in an African community. Int J Gynaecol Obstet, 2002: 76: 91-3.
- 3. A clinical study to evaluate the efficacy of Ayurvedic formulations and procedures in Pitta predominant Menopausal Syndrome by Dr.Shravan Kamble in, 2014.
- A clinical study on Menopausal Syndrome and its Management by Vayasthapana Gana Rasayanakalpa Vati by Dr.Krutika in, 2015.
- 5. A clinical study to evaluate the efficacy of Ayurvedic formulations and procedures in Pitta predominant Menopausal Syndrome by Dr.Shravan Kamble in, 2014.
- 6. A clinical study on Menopausal Syndrome and its Management by Vayasthapana Gana Rasayanakalpa Vati by Dr.Krutika in, 2015.
- Whelan TJ, Goss PE, Ingle JN, Pater JL, Tu D, Pritchard K, et al. Assessment of quality of life in MA.17: A randomized, placebo-controlled trial of letrozole after 5 years of tamoxifen in postmenopausal women. J Clin Oncol, 2005; 23: 6931–40. [PubMed]
- Kakkar V, Kaur D, Kaur IP. Positive Influence of Counseling in Relieving Menopausal Symptoms, Pharmacie Globale © (IJCP), 2012; 3(4).
- A clinical study to evaluate the efficacy of Ayurvedic formulations and procedures in Pitta predominant Menopausal Syndrome by Dr.Shravan Kamble in, 2014.
- 10. A Study To Assess The Outcome Of Pranayama On Menopausal Symptoms Among Menopausal Women In Selected Setting, C. Shenbagam, The Tamil Nadu Dr. M.G. R. Medical University Chennai, Master Of Science In Nursing April, 2012.