AYURVEDIC MANAGEMENT OF KSHINA- ARTAVA (HYPOMENORRHEA) ASSOCIATED WITH HYPERPROLACTINEMIA: A CASE STUDY

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ABSTRACT
Introduction: Woman’s health is the primary factor to be considered of well being of family, society and culture. Any physical, physiological disorder disturbs her life. Physiological changes and development occurs right from birth but markedly during the reproductive period. The reproductive era starts with the menarche and is terminated by the menopause, giving scope for great deal of ill-health due to disturbance of the delicately balanced cyclic activity of hormones. Most of the menstrual disorders have been described under the headings of Ashita Artava Dushhti in our classics. Kshina- Artava is not explained as a disease. Moreover it is a symptom in some diseases. Aacharya Sushruta explains Kshina- Artava in Sharir-sthan. But according to Dalhan Tika Lakshana and Chikitsa of Kshina- Artava are stated under Artava- Kshaya. Lakshana of Kshina- Artava can be seen in hyperprolactinemia. It means hyperprolactinemia leading to Kshina- Artava which can be managed by Ayurvedic management. Materials and Methods: A female patient, age 22 years was coming to the OPD with the case having symptoms of scanty menses (hypomenorrhea due to hyperprolactinemia) and discharge from both breasts and breasts pain. A total therapy was given for 3 months with 3 follow-ups, on fifth day of each menstrual cycle. Necessary investigations were done along with hormonal assay. Observation and Result: On observation after first menstrual cycle (after starting treatment) patient came with 80% relief in the above mentioned symptoms. Conclusions: The result was encouraging with complete relief in the symptoms by Ayurvedic management.

KEYWORDS: Kshina- Artava, Hyperprolactinemia, Hypomenorrhea.

INTRODUCTION
Normal menstrual cycle is a crucial physiological phenomenon for maintaining woman’s health during reproductive years. Nowadays menstrual disarrayed are the main reasons for gynecological consultations worldwide owed to faulty dietary habits and lifestyle. In this condition the patient is suffered from hypomenorrhea associated with hyperprolactinemia. When the menstrual bleeding is unduly scanty and lasts for less than 2 days it is called hypomenorrhea. The causes may be local, endocrinal or systemic. In Ayurveda hypomenorrhea correlates with the Kshina- Artava condition. Artava Alpata is the one condition described under Kshina- Artava. Prolactin hormone is exclusively synthesized and secreted from lactotrophs of the anterior pituitary gland. When the amount of serum prolactin exceeds the upper limit we call it hyperprolactinemia. The common causes of hyperprolactinemia can be physiological pathological or drug induced. Patients with hyperprolactinemia may remain asymptomatic or can present with sign and symptoms of hypogonadism and galactorrhea. Associated symptoms of hyperprolactinemia are anovulation, hypomenorrhea oligomenorrhea, infertility. Ayurvedic treatment can be given to treat the condition with an aim to normalize the vitiated Dosha and Dhatu Upadhatus.

METHOD AND MATERIAL
CHIEF COMPLAINTS: Scanty menses since last 3 years and breast pain since 1 year and milk discharge from both breasts in last 15 days (from 29/6/23).

PRESENTING ILLNESS: According to the patient she was asymptomatic upto 3 years back. Gradually she develops the complaints of scanty menses in the past 3 years and breast pain since 1 year and milky discharge from both breasts in last 15 days. The patient took...
allopatic treatment but recurrence occurred. Now patient only wants Ayurvedic treatment.


PHYSICAL EXAMINATION

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<tr>
<th>O/E</th>
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<tr>
<td>G.C.</td>
<td>Fair</td>
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<tr>
<td>B.P.</td>
<td>110/70 mm Hg</td>
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<td>P.R.</td>
<td>88/ min</td>
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<td>Height</td>
<td>5’5”</td>
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SYSTEMIC EXAMINATION

- Respiratory system –
- Inspection – B/L symmetrical chest
- Auscultation – B/L air entry – Equal on both sides
- Cardio – vascular system –
- Auscultation – Normal heart sounds

Central nervous system – Normal
Orientation – Well oriented to time place and person.

GYNECOLOGICAL EXAMINATION

P/V & P/S Examination not done as patient is unmarried.

INVESTIGATIONS

Serum Prolactin – 29.23ng/ml (before treatment on 1 July 2023) and 6.23ng/ml (after treatment on 27 Sep 2023)

USG of Uterus and adnexa on 1 July 2023: Impression: Normal study.

NIDAN PANCHAK

1. Nidana – Junk food spicy food Ratrijagarana lack of Rajaswalacharya
2. Purvarupa – Gradually artava alpata stanyaa dashana
3. Rupa – Kshina artava
4. Samprapti –
5. Upashaya – Artava dushti chikitsa Rajaswalacharya Yoga and Pranayama

TREATMENT: The treatment was given for 3 months along with Rajaswalacharya for 3 follow-ups of consecutive cycles.

MODE OF ACTION OF TILADI VATI

Kshina- Artava is Vata-Kapha pradhana Vyadhi. It shows Rasa Dhatwagnimandya and Rasa Dhatu-kshay as prime pathological factor. In the present case Tiladi Vati is used to treat the condition. As Maharshi Sushruta in Sharir-sthan stated that treatment of Nashta- Artava or Nashta-Rakta is applicable to Kshina- Artava. Gada-Nigraha advised Kwatha of Tila Trikatu Bharangi for Nashta- Artava. But despite of Kwatha Vati was used. The Dravya used in Tiladi Vati are having Tikshna Ushna Sukshma properties. This help to improve Jatharagni and in turn Rasa Dhatwagni. After Agnivriddi and Strotovishodhan vitiated Vata returns to its normal state giving rise to balanced state Doshas and Dhatus.

DISCUSSION

Kshina- Artava is a common menstrual disorder nowadays. If we consider the Doshha involvement in Kshina- Artava it is caused due to the vitiation of Vata and Kapha Doshas. Vitiation of Vata leads to hampering the Gati of other Dhatus which will in turn will affect the Gati of Updhatu i.e. Artava thus leading to Samprapti of Kshina- Artava. Also Vata is the main etiological factor behind all gynaecological disorder. Kapha due to
its Avarodhak properties will lead to the Strotorodha leading to Samprapti of Kshina- Artava. Hyperprolactinemia can be considered as Agni Dushti Janya Dhatu Pradoshay Vyaadi in which Rasa Dhatuwagni Dushhi causes Artava Dushhi. Hyperprolactinemia is caused due to hyperactivity of Prolactin secreting cell. Hyperactivity i.e. Gati is controlled by balancing Vata Dosha. Also Stanyavruddhi seen in hyperprolactinemia is due to vitiation of Kapha. Drugs used in Tiladi Vati are Shoonthi Bharangi Til Marich Pippali. Tila is mentioned to have Agnideepaka and Vatahara properties that will specify Agnimandya and leading to formation of proper Rasa Dhatu which will in turn be leading to formation of its Upadhata i.e. Artava. Vedanahara property of Tila leading to improvement of mastalgia. Bharangi and Trikatu are Katu – Tikta Rasatmak and Ushna Veerya Dravya and also having Artavajnan Rasayan Garbhaishay Shodhak properties. Hence they normalize the menstrual cycle. Also Shoonthi is described under Stanyashodhan Gana. Because of its Lekhan Pachan and Stanyashodhan Guna its stops the abnormal production of milk secretion from both breasts.

CONCLUSION
Nowadays defective life style and working pattern is disturbing menstrual cycle. It was an attempt to manage Kshina- Artava (Hypomenorrhea) with Tiladi Vati. Tiladi Vati found to be effective in this case. It reduced serum prolactine level and normal menstrual cycle restored. A study on large scale could be beneficial to approach hyperprolactinemia in view of Kshina- Artava.

REFERENCES