

EFFICACY OF ASHWAGANDHA CHURNA WITH KSHEER IN UDAVARTA
YONIVYAPADA

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ABSTRACT

Woman is originator of new life. Any physical or mental disorder affects her health and create disease related to *yonni*. Menstruation has two fold blows for women from one perception it defines the start and end of reproductive potentials, a pronouncement of womanhood on the other perception. The same menstruation can create hell situation if it is associated with unbearable pain. Pain during menstruation is called dysmenorrhea, sometimes referred to as painful periods or menstrual cramps. It usually starts around the time the menstrual cycle starts. Usually, the symptoms subside in less than three days. Usually, the lower abdomen or pelvis is where the pain is. Additional symptoms could be nausea, diarrhea or back pain. *Yonivyapada* is the term used in *Ayurveda* to denote gynecological ailments, or diseases pertaining to the female reproductive system. There are 20 such conditions listed in the classical literature. One of these is *Udavarta Yonivyapada*, in which the disease's defining characteristic is painful menstruation, which is eased upon the onset of menstruation, which may appear foamy. Hence for improving quality of women life, *Acharya Yogartnakara* mentioned use of *Ashwagandha churna* with *Ksheer* in *yonishoola* which is dominant symptom of *Udavarta Yonivyapada*.

KEYWORDS: Udavarta Yonivyapada, Primary dysmenorrhea, Ashwagandha churna, Ksheer, Apan vayu.

INTRODUCTION

यदपत्यानां मूलं नार्यः परं नृणाम् |

तद्विघातो गदेषासां क्रियते योनिमाश्रितैः ||

(च.चि.३०/५)^[1]

Ayurveda, the most ancient science, not only guides in treating the disease but also gives a great contribution towards increasing quality of life.

In *Ayurveda* a woman is defined as 'Stree' who originates new life.

It is one of the commonest gynaecological complain. It is a *Tridoshaja Vyadhi* with *Vata* predominance as the saying goes there is no *Yonivyapada* without morbid *Vata dosha*.^[2]

न हि वातादृतेयोनिनारिणांसंप्रदुष्यति ।

शमयित्वातमन्यस्यकुर्यात् दोषस्य भेषजं ॥

(च.चि. ३०/११५)^[3]

There is specially derangement of *Apana* and *Vyana Vayu*. Since, it plays a vital role in *Dharana* and

Nishkramana of *raja*, so their vitiation Leads to *Sashula Raja Pravrutti*.

The next consideration is the vitiation of *Rasa* or *Rakta Dhatu* since *Artava* or *Raja* is known to be the *Updhatu* of *Rasa* or *Rakta* as said.

“रसात् स्तन्यम् ततो रक्तम्”

(च.चि. १५/२५,२६)^[4]

The condition of dysmenorrhea is explained in *Ayurvedic* literature in terms of *Kashtartava*, *Kukshi Shoola*, *Vatala Yoni*, *Udavartini Yonivyapada*. (*Ayurvedic* names of disease under *Striroga* Gynaecology). The causative factors, pathogenesis symptoms and treatment are also described in *Ayurveda* and based on that, the increased *Vata* in the body is responsible for disease creation. The various *Ayurvedic* causative factors which manifest into dysmenorrhea are inappropriate food habits and lifestyles etc.

Primary dysmenorrhea is the most common type of dysmenorrhea, affecting more than 50% of women and quite severe in about 15%. During adolescence, primary dysmenorrhea is more likely affecting to girls.

Fortunately for many women the problem eases as they mature particularly after a pregnancy. Although it is painful and sometimes debilitating for brief periods of time, it is not harmful.

Secondary dysmenorrhea is more common in women in their adult years. The primary sign of dysmenorrhea is localized pain in the lower abdomen, the umbilical cord or the area above the pubic area. Additionally, the right or left abdomen are frequently affected. The lower back and thighs could also feel the effects. Menstrual pain is frequently accompanied by symptoms such as nausea and vomiting, constipation or diarrhea, headaches, dizziness, disorientation, hypersensitivity to light, sound, smell, and touch, fainting and exhaustion. Symptoms of dysmenorrhea often seen from ovulation and can last until the end of menstruation.^[5]

Udavarta Yonivyapada of *Sushruta*, *Yogaratanakara* and *Udavantini Yonivyapada* of *Charaka* are associated with primary dysmenorrhea.

रास्नाश्वगंधावृषकैः योनिशूलहरं पयः ।

यो.र.सं. (यो.व्या.चि. /५)^[6]

Acharya Yogaratanakara described *Ashwagandha churna* with *Ksheer* in treatment of *yonishoola* which is the main symptom of *Udavarta Yonivyapada* for the purpose of *vatanulomana*. Also due to vitiation of *vata* specially *apanvata*, constipation and *agnimandya* developed. The *Ashwagandha dravya* itself is *yonishoolhara*, *agnidipaka* and *Ksheer* has lubrication and *vatanulomana* property which on combination with *Ashwagandha* produce the required effect. As per *ayurvedic granthas vata dosh* is the main reason for *yonivyapada* and *Ksheer* is best remedy for *vata dosh*. So the study of drug may create required relief.

AIM

To study efficacy of *Ashwagandha Churna* with *Ksheer* in the management of *Udavarta Yonivyapada*.

Inclusion Criteria

1. Age group -14 to 35 years.
2. Patients complaining painful menstruations at least 3 consecutive cycles.

3. Patient having regular menstrual cycle.
4. Understanding and being willing to sign the informed consent.

Exclusion Criteria

1. Patient having immuno-compromised disease.
2. Patients having secondary dysmenorrhea with pelvic pathology, Uterine fibroid, ovarian cyst, Endometriosis, Menorrhagia.
3. Patient with IUCD.
4. Patient having allergy to drug *Ashwagandha* or *Goksheer*.
5. Patient having congenital anomalies leading to dysmenorrhea.
6. Patient having PV bleeding occasional or intermittent.
7. Patient having neoplastic diseases of genital tract.
8. Patient having any systemic disease likely to influence the menstrual cycle.
9. Patient on hormonal therapy.

Withdrawal Criteria

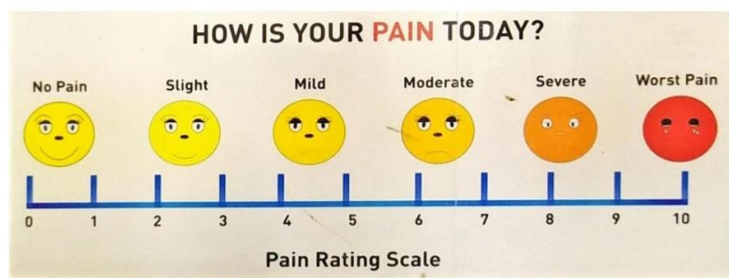
1. Patient who lost follow up.
2. Patient who is uncooperative
3. Patient who discontinue treatment.
4. Patient develop any adverse effect of drug (*Ashwagandha*)
5. Patient develop aggregation of pain from drug (*Ashwagandha*), then treatment will be stopped and immediately Standard treatment will be started.

Assessment Criteria: The effect of treatment will be assessed on the basis of following parameters:

1. *Vedana* (Intensity of pain)
2. *Vedanakalavadhi* (Duration of pain)
3. *Malpravrutti*
4. *Agnimandya*
5. *Rajpramana*
6. *Rajaswaroopa*
7. *Mukhadushika*

1) VEDANA (INTENSITY OF PAIN)

Will be assessed using VAS (Visual Analogue Scale)
Grading of VAS (Visual Analogue Scale)



0-1 = no pain
2-3 = slight pain
4-5 = mild pain

6-7 = moderate pain
8-9 = severe pain
10 = worst pain

2) VEDANA KALAVADHI (DURATION OF PAIN)

Grade 0 - no pain.

Grade 1 - pain 24 hours before menses.

Grade 2 - pain 24 hours before menses and pain for 12 hours with start of menses.

Grade 3 - pain 24 hours before menses and pain for 24 hours with start of menses.

Grade 4 - pain 24 hours before menses and pain for 48 hours with start of menses.

1 3-5 hr

2 5-8 hr

3 More than 8 hr

c) Kshudha Prachiti (Feeling of hunger)

0 less than 4 hr

1 4-6 hr

2 6-8 hr

3 More than 8 hr

3) MALAPRAVRUTTI: Bristol Stool Chart

Grade 0 =separated hard lumps.

Grade 1 =lumpy and sausage like (slightly constipated).

Grade 2 =a sausage shape with cracks in the surface(normal).

Grade 3 =like a smooth, soft, sausage or snake (normal).

Grade 4 =soft blobs with clear cut edges (lacking fibre).

Grade 5 =mushy consistency with ragged edges (inflammation).

Grade 6 =liquid consistency with no solid pieces (inflammation and diarrhoea).

5) RAJAPRAMANA

Grade 0 = 7-8 pads per cycle

Grade 1 = 5-6 pads per cycle

Grade 2 = 3-4 pads per cycle

Grade 3 = 1-2 pads per cycle

Grade 4 = spotting

4) AGNIMANDYA**I. Abhyavaharan Shakti****a) Anna Matra (Quantity of food)**

0 Proper quantity

1 25% less

2 50% less

3 more than 50% less

b) Anna Avartan (Frequency of food per day)

0 more than 2 time

1 2 time

2 1 time

3 less than 1 time

c) Kshudha Tivrata (Intensity of hunger)

0 proper

1 moderate

2 less

3 no hunger

II. Jaranshakti**a) Utsah (Activeness after meal)**

0 less than 2 hr

1 2-5 hr

2 5-6 hr

3 More than 8 hr

b) Shuddhodgar (Pure belching)

0 less than 3 hr

6) RAJASWAROOPGrade 0- Clots absent (*Agranthil*).Grade 1- Clots present (*Granthil*).**7) MUKHADUSHIKA (ACNE)**

Grade 0 - Comedones, no papules.

Grade 1 - Occasional Papules, comedones, few pustules.

Grade 2 - Predominant pustules, nodules, abscesses.

Grade 3 - Mainly cysts, abscesses, widespread scarring.

MATERIALS AND METHODS

- Literature- Available in all ayurved samhitas and modern text books.
- Study Centre- Ashtang Ayurved Hospital, Pune 30.
- Number of Patients -30 in each group.
- Type of study -Open labelled Randomised, controlled, prospective study.

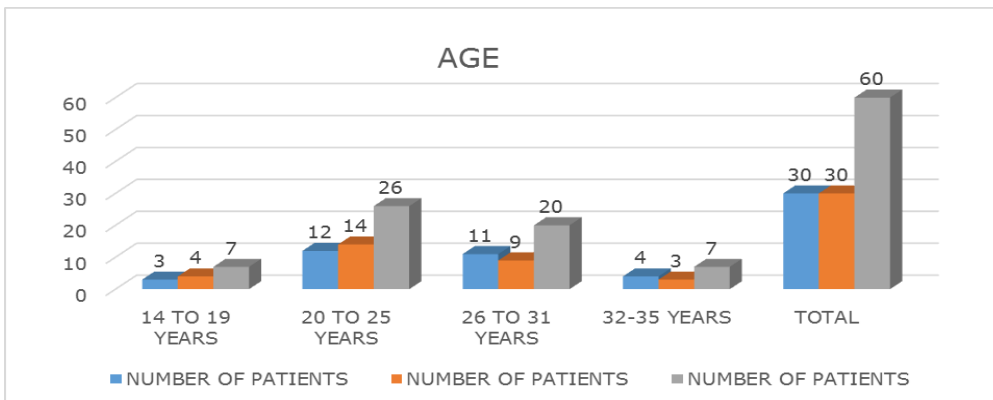
Drug Administration**Duration** – For 3 consecutive cycles for both group and assessment done on 6th cycle.**Group A: Experimental group (30 patients)**Drug – *Ashwagandha Churna* with *Anupana* – *Goksheer Kala* - *Apankala*-5 days before menses & 1st 3 days of menses.**Group B : Control group (30 patients)**

Drug –Tab. Koligesic MF

Dose – 1 Tab. for 3 days from 1st day of menses.**OBSERVATIONS AND RESULTS****A. Demographic observations****1. Age.**

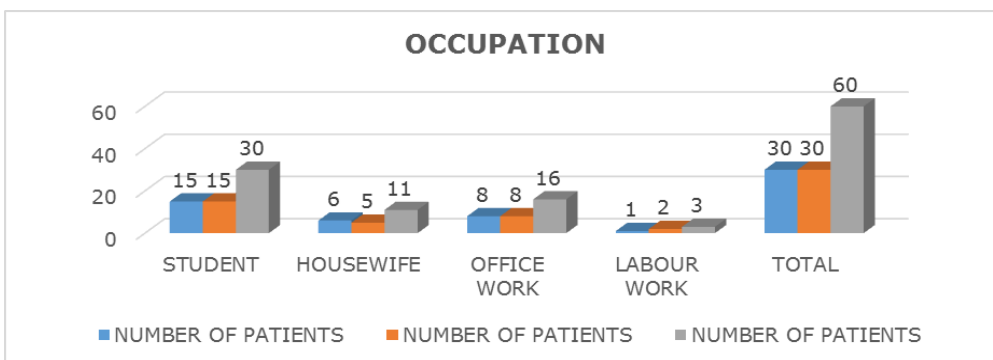
SR.NO	AGE	NUMBER OF PATIENTS		
		GROUP A	GROUP B	TOTAL
1	14 TO 19 YEARS	3	4	7
2	20 TO 25 YEARS	12	14	26
3	26 TO 31 YEARS	11	9	20

4	32 TO 35 YEARS	4	3	7
	TOTAL	30	30	60



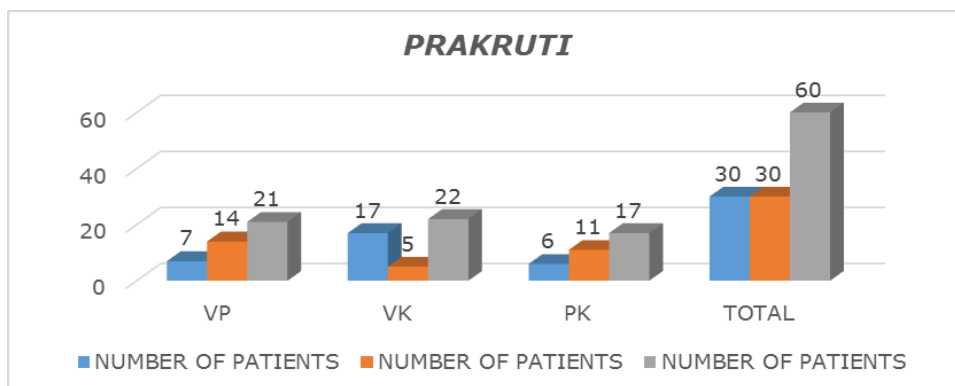
2. Occupation

SR.NO	OCCUPATION	NUMBER OF PATIENTS		
		GROUP A	GROUP B	TOTAL
1	STUDENT	15	15	30
2	HOUSEWIFE	6	5	11
3	OFFICE WORK	8	8	16
4	LABOUR WORK	1	2	3
	TOTAL	30	30	60



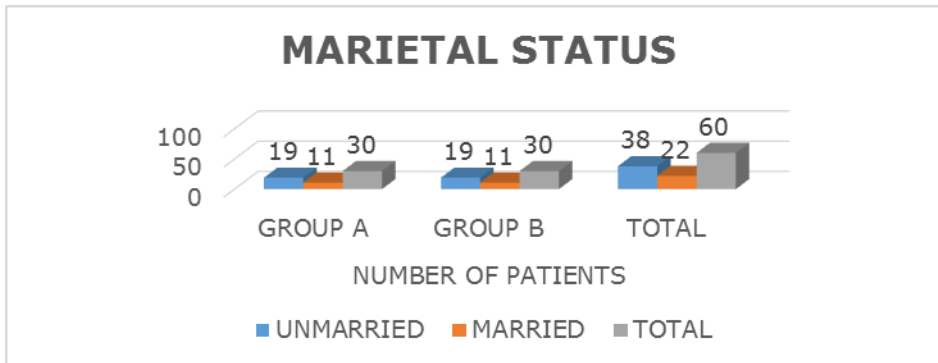
3. Prakruti

SR.NO	PRAKRUTI	NUMBER OF PATIENTS		
		GROUP A	GROUP B	TOTAL
1	VP	7	14	21
2	VK	17	5	22
3	PK	6	11	17
	TOTAL	30	30	60



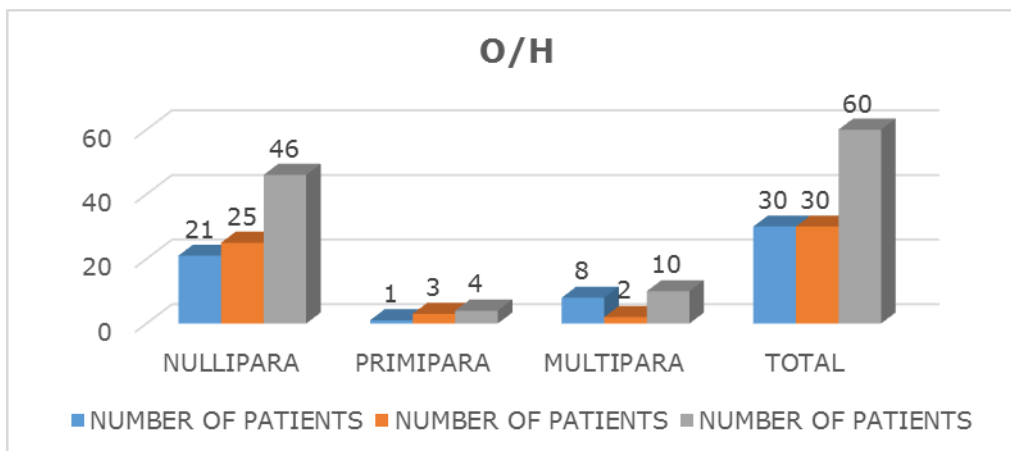
4. Marital status

SR.NO	MARIETAL STATUS	NUMBER OF PATIENTS		
		GROUP A	GROUP B	TOTAL
1	UNMARRIED	19	19	38
2	MARRIED	11	11	22
	TOTAL	30	30	60



5. Obstetrical History (O/H)

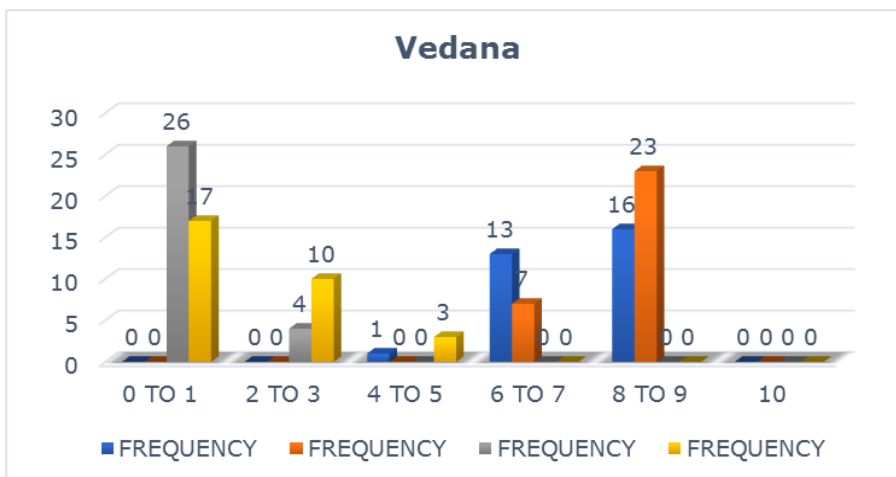
SR.NO	O/H	NUMBER OF PATIENTS		
		GROUP A	GROUP B	TOTAL
1	NULLIPARA	21	25	46
2	PRIMIPARA	1	3	4
3	MULTIPARA	8	2	10
	TOTAL	30	30	60



B. Clinical Observations

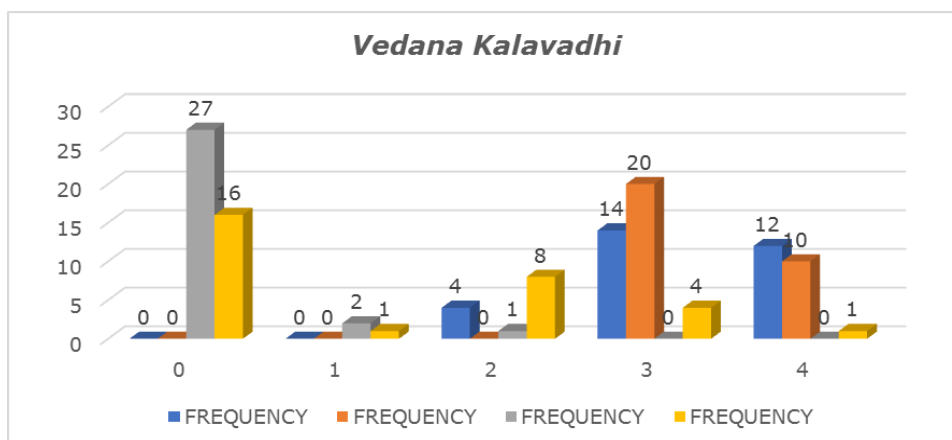
1. Vedana

GRADE	Vedana			
	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0 TO 1	0	0	26	17
2 TO 3	0	0	4	10
4 TO 5	1	0	0	3
6 TO 7	13	7	0	0
8 TO 9	16	23	0	0
10	0	0	0	0
TOTAL	30	30	30	30



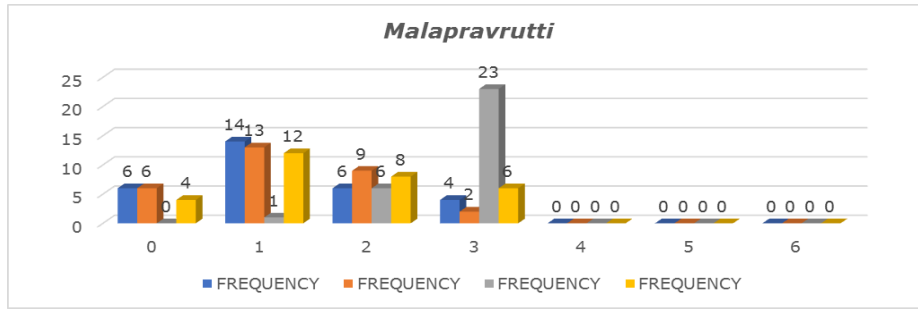
2. Vedana Kalavadhi

Vedana Kalavadhi				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	0	0	27	16
1	0	0	2	1
2	4	0	1	8
3	14	20	0	4
4	12	10	0	1
TOTAL	30	30	30	30



3. Malapravrutti

Malapravrutti				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	6	6	0	4
1	14	13	1	12
2	6	9	6	8
3	4	2	23	6
4	0	0	0	0
5	0	0	0	0
6	0	0	0	0
TOTAL	30	30	30	30

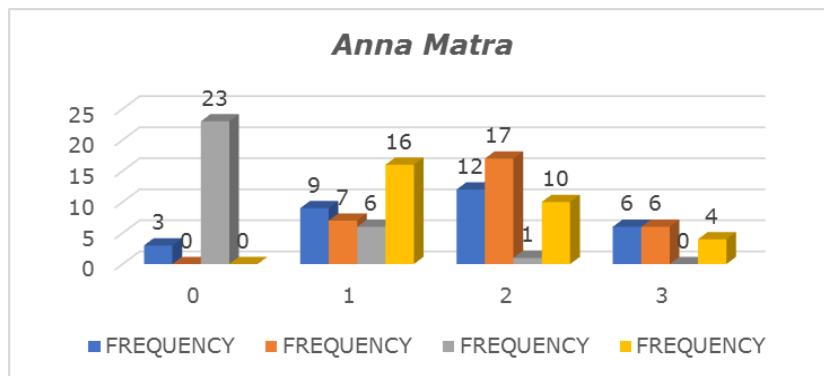


4. Agnimandya

I) Atyavaharan Shakti

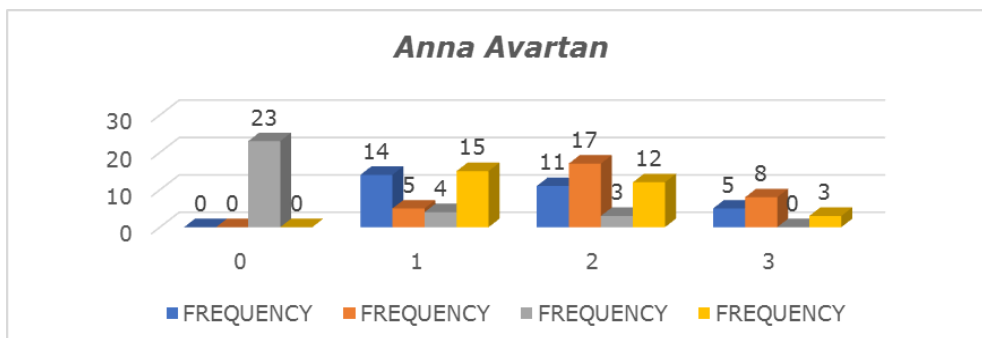
a) Anna Matra (Quantity of food)

Anna Matra				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	3	0	23	0
1	9	7	6	16
2	12	17	1	10
3	6	6	0	4
TOTAL	30	30	30	30



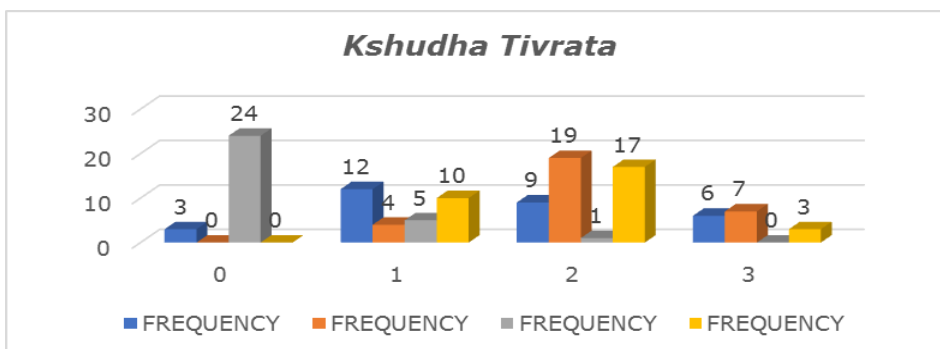
b) Anna Avartan (Frequency of food per day)

Anna Avartan				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	0	0	23	0
1	14	5	4	15
2	11	17	3	12
3	5	8	0	3
TOTAL	30	30	30	30



c) *Kshudha Tivrata* (Intensity of hunger)

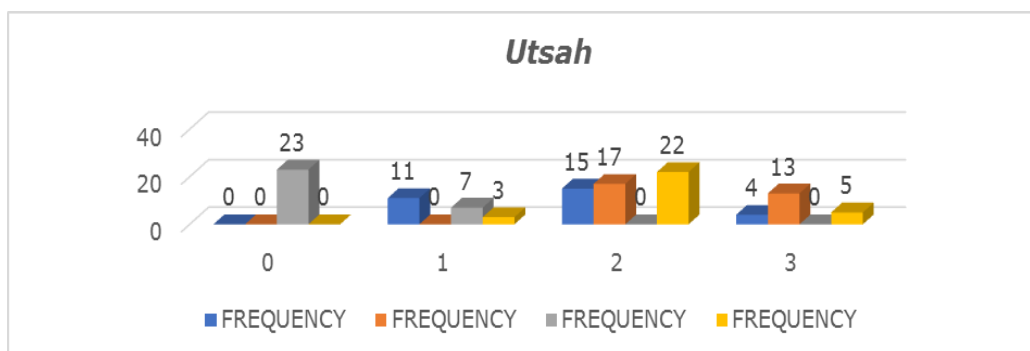
<i>Kshudha Tivrata</i>				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	3	0	24	0
1	12	4	5	10
2	9	19	1	17
3	6	7	0	3
TOTAL	30	30	30	30



II) *Jaran Shakti*

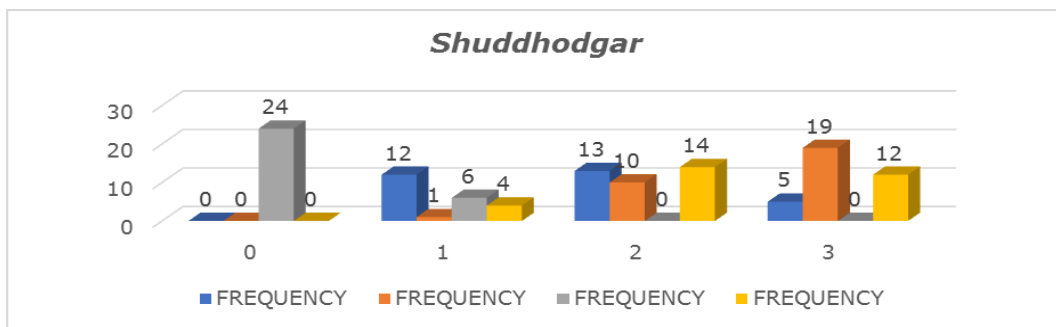
a) *Utsah* (Activeness after meal)

<i>Utsah</i>				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	0	0	23	0
1	11	0	7	3
2	15	17	0	22
3	4	13	0	5
TOTAL	30	30	30	30



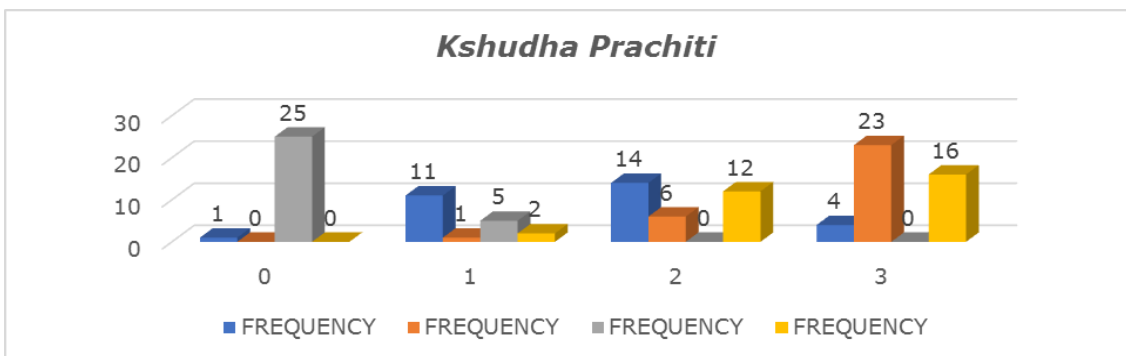
b) *Shuddhodgar* (Pure belching)

<i>Shuddhodgar</i>				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	0	0	24	0
1	12	1	6	4
2	13	10	0	14
3	5	19	0	12
TOTAL	30	30	30	30



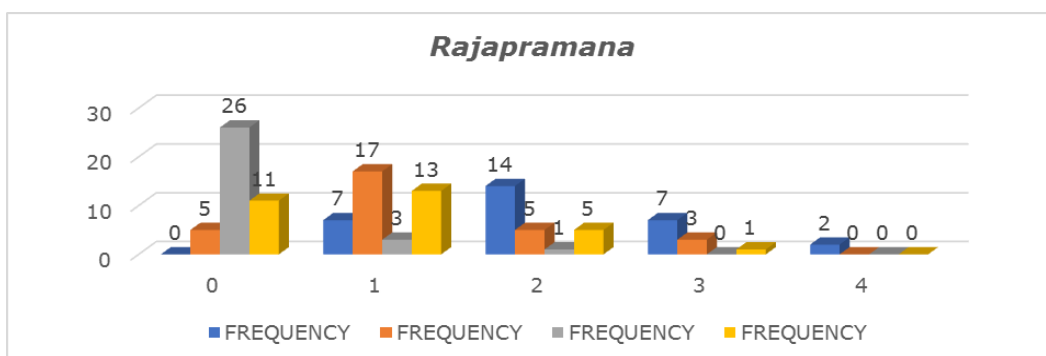
c) *Kshudha Prachiti* (Feeling of hunger)

<i>Kshudha Prachiti</i>				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	1	0	25	0
1	11	1	5	2
2	14	6	0	12
3	4	23	0	16
TOTAL	30	30	30	30



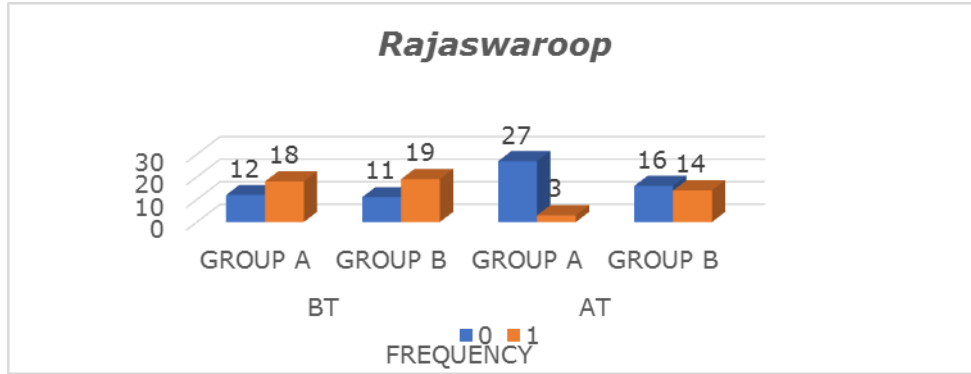
5. *Rajapramana*

<i>Rajapramana</i>				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	0	5	26	11
1	7	17	3	13
2	14	5	1	5
3	7	3	0	1
4	2	0	0	0
TOTAL	30	30	30	30



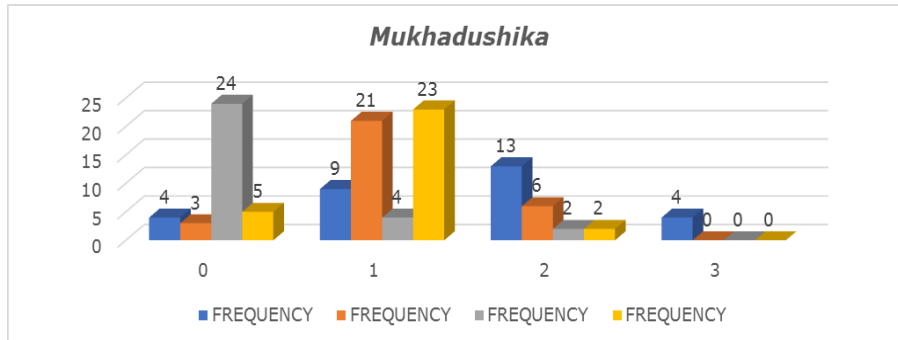
6. *Rajaswaroop*

<i>Rajaswaroop</i>				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	12	11	27	16
1	18	19	3	14
TOTAL	30	30	30	30



7. *Mukhadushika*

<i>Mukhadushika</i>				
GRADE	FREQUENCY			
	BT		AT	
	GROUP A	GROUP B	GROUP A	GROUP B
0	4	3	24	5
1	9	21	4	23
2	13	6	2	2
3	4	0	0	0
TOTAL	30	30	30	30



DISCUSSION

- A. Age- Maximum patients 26 were found in age group 20 to 25 years followed by 20 patients in age group 26 to 31 years. There are each 7 patients in age group 14 to 19 years and 32 to 35 years.
- B. Occupation- Maximum 30 patients are Students followed by 16 patients are Office worker followed by 11 patients are House wife and 3 patients are Labour workers.
- C. Prakruti-Maximum 22 patients are of *Vata- kaphaj prakruti* followed by 21 patients are of *Vata-pittaj prakruti* and 3 patients are of *Pitta-kaphaj prakruti*.
- D. Marital Status- Maximum 38 patients are Unmarried followed by 22 patients are Married.

- E. Obstetrical history (O/H)- Maximum 46 patients are Nullipara followed by 4 patients are Primipara and 10 patients are Multipara.

Assessment of symptoms was done by standard methods and result obtained as follows

- 1. *Vedana*- After Treatment, it is observed that 26(87%) and 17(57%) patients got complete relief from pain of Grade 0-1 with no pain in trial and control group respectively. The result might because of *Ashwagandha Churna* with *Goksheer* due to its *Vatanulomana* and *Vatashaman* property.

2. **Vedana Kalavadhi-** After treatment, it is observed that 27(90%) and 16(53%) patients have no pain after 6 months i.e. Grade 0 with no pain in trial and control group respectively. This result shows that, trial group shows good result on *Vedana Kalavadhi* as compared to control group.
3. **Malpravrutti-** After treatment, it is observed that 23(77%) and 6(20%) patients having normal stool i.e. Grade 3 with like a smooth, soft, sausage or snake(normal) in trial and control group respectively. Due to *Snehan* properties of *Ashwagandha churna* with *Goksheer Vatanulomana* occurs which affects on *Malpravrutti*.
4. **Agnimandya**
- I) **Abhyavaharan Shakti**
- i. **Anna Matra-** After treatment, it is observed that 23(77%) and 0 patients were having proper *anna matra* i.e. Grade 0 with proper quantity food in trial and control group respectively.
- ii. **Anna Avartan-** After treatment, it is observed that 23(77%) and 0 patients were having adequate *Anna Avatan* i.e. Grade 0 with more than 2 time food per day in trial and control group respectively.
- iii. **Kshudha Tivrata-** After treatment, it is observed that 24(80%) and 0 patients having proper *Kshudha* i.e. Grade 0 with proper hunger in trial and control group respectively.
- II) **Jaran Shakti**
- i. **Utsah-** After treatment, it is observed that 23(77%) and 0 patients having activeness i.e. Grade 0 with activeness less than 2 hour after meal in trial and control group respectively.
- ii. **Shuddhodgar-** After treatment, it is observed that 24(80%) and 0 patients having *Shuddhodgar* i.e. Grade 0 with pure belching less than 3 hour after food in trial and control group respectively.
- iii. **Kshudha Prachiti-** After treatment, it is observed that 25(83%) and 0 patients having *kshudha prachiti* i.e. Grade 0 with feeling of hunger less than 4 hour after food in trial and control group respectively.

In *Agnimandya* both *Abhyavaharan* and *Jaran Shakti* shows good result this might because of *Laghu, Ushna, Snigdha gunas* and *Agnidipan property* of *Ashwagandha*.

5. **Rajapramana-** After treatment, it is observed that 26(87%) and 11(37%) patients having increase in *rajapramana* i.e. Grade 0 with 7-8 pads per cycle in trial and control group respectively. Due to *vatanuloman* and *vatashaman* properties of *Ashwagandha*. Redirection of *Artava* in normal course occurs which leads to proper menstrual flow i.e. *Artava praman* increases from scanty to normal as compared to before treatment in trial group.
6. **Rajaswaroop-** After treatment, it is observed that 27(90%) and 16(53%) patients having *rajaswaroop* i.e. Grade 0 with clots absent (*Agranthil*) in trial and control group respectively. *Ashwagandha churna*

has *Vata-kapha shodhan* property due to which tendency of formation of clot is reduced and due to *vatanuloman* property passage of *raja* becomes easy.

7. **Mukhadushika-** After treatment, it is observed that 24(80%) and 5(17%) patients having relief from *mukhadushika* i.e. Grade 0 with comedones, no papules in trial and control group respectively. *Mukhadushika* has *vatakapha doshadhikya*, due to *Ashwagandha Vata-kapha shodhan* occurs and tendency of formation of *Mukhadushika* is markedly reduced.

CONCLUSION

In treatment of *Udavarta Yonivyapada*, it is necessary to do *sampraptibhanga* so *vatashamana* and *vatanulomana* action is required which is achieved by *Ashwagandha churna* with *Ksheer*. Further from the present study we can conclude that incidence is higher in-

- Age group= 20-25 years
- Unmarried women
- Students
- Vata-kaphaj prakriti*
- Nulliparous women

Ashwagandha Churna acts mainly on basic pathogenesis, it shows better result than control group.

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