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# **Case Study**

# PITTAJA ARTAVADUSHTI AND ITS TREATMENT: A CASE STUDY

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#### ABSTRACT

In order to give rise to new offspring, female body undergoes menstrual cycle. It involves the shedding of endometrium manifested as *Māsānumāsika Rajaḥ Pravṛtti* i.e., *Ārtava Pravṛtti*. Due to changes in life style of women in terms of *Āhāra*, *Vihāra*, there is more physical and emotional stress and this may result in *Ārtavaduṣți*, where the normal menstrual cycle gets disturbed or presented in altered form.

**Background:** A married Hindu female patient of 35 years came to NIA *Prasuti-stree Roga* OPD on 25<sup>th</sup> July, 2019 with complaints of painful menstruation since last 14 years, heavy bleeding during menstruation since last 10 years and mild burning micturition with increased frequency of micturition (on/off) since last 2 years.

**Methodology:** Mainly *Pitta Doşa* vitiation symptoms were observed in the patient. Her complete *Nidāna Parivarjana* and *Prakṛti Vighāta* was done and *Pitta Doṣa Śāmaka Dravyas* were used in treatment including specific *Pittaja Ārtavaduṣți* line of treatment mentioned in Ayurvedic classics. She was given combination of *Yaṣțīmadhu Cūrṇa, Miśi* (Fennel), *Munakkā* (dried *Vitis vinifera*), *Goghṛta* twice a day in the form of *Kalka* with warm water, *Kuṭakī Cūrṇa, Munakkā, Dhāgā Miśrī* in equal parts in the form of pea sized *Guțikā* twice a day with cold water, *Gokṣura Cūrṇa, Copcīnī Cūrṇa* twice a day with water, *Avipattikara Cūrṇa* before meal, twice a day with water. The treatment was continued for 2 months.

**Result:** There was relief in menstrual and urinary symptoms after 2 months of treatment.

KEYWORDS: Artava, DUB, Menorrhagia, Pittaja Artavadushti, Asrugdara.

#### INTRODUCTION

During normal menstruation, there is cyclic loss of blood every month with its normal color, for a duration of 3-5 days as mentioned in Ayurvedic classics.<sup>[1-3]</sup> But when this normal menstrual bleeding pattern is altered in duration, amount, color and regularity, the condition is called *Artavadusti*. This condition can occur due to many reasons, including physical stress, emotional stress, nutritional status, infection, usage of medications including birth control pills and sexual arousal etc. Menstrual problems are increasing day by day due to sedentary lifestyle, faulty food habits and stressful life. Prevalence of menstrual disorders has been recorded as high as 87% in the India in 2012.<sup>[4]</sup> Different *Nidānas* are mentioned by *Ācāryas*, which are responsible for *Artavadusti*, these are - excessive intake of Katu, Lavana, Usna, Tīksna Āhāra Dravvas, Divāswapna, Cintā and Vegadhāraņa etc. As a result of these Nidāna Sevana, Dosa vitiation takes place and which further leads to the vitiation of Dhatus and

*Srotasas*. So, *Nidāna Parivarjana* along with different *Yogas*, given by  $\bar{A}c\bar{a}ryas$  to treat the  $\bar{A}rtavavy\bar{a}padas$  based on *Doṣas* involved, helps to pacify these *Doṣas* and cures the disease symptoms. Thus, in this article, an attempt has been made to analyze the effect of Ayurvedic treatment in a case of Dysfunctional Uterine Bleeding.

#### Aim

To understand about the importance of *Nidāna Parivarjana, Rajaswalācaryā* and effect of different *Doşa* and disease specific *Yogas* in treating *Pittaja Ārtavadusți.* 

#### **MATERIALS AND METHODS**

**Selection of patient:** The patient was selected from *Prasuti Tantra evam Stree Roga* OPD, of NIA Jaipur, after obtaining voluntary informed consent.

#### **Case Report**

A married Hindu female patient of 35 years, who was a teacher, visited to the OPD of *Prasuti* 

Tantra & Stree Roga of National Institute of Ayurveda on 25<sup>th</sup> July, 2019 with complaints of painful menstruation since last 14 years, heavy bleeding during menstruation since last 10 years and mild burning micturition with increased frequency of micturition (on/off) since last two years. Patient was having a married life of 14 yrs. Patient was taking modern medication since a long time, but not getting

cured. So, she came to the OPD of NIA Hospital in a hope for permanent relief & better treatment.

# **Menstrual History**

. . . .

Age of Menarche – 13 years Duration - 7/28-30 days LMP - 15-07-2019

Table 1: Detailed menstrual history			
Pattern	Regular		
Pain	Present, on initial 2 days (Relieves only on taking medication - Meftal)		
Clots	Small sized, Initial 2-3 days		
Color	Dark reddish		
Smell	Present (Blood like)		
Flow	Неаvy		

Table 2: Initial pad History			
Day 1 <sup>st</sup>	7 pads		
Day 2 <sup>nd</sup> , 3 <sup>rd</sup>	5 pads		
Day 4 <sup>th</sup>	3 to 4 pads		
Day 5 <sup>th</sup> , 6 <sup>th</sup> 2 pads			
Day 7 <sup>th</sup>	Spotting		

Pads were fully soaked on initial 4 days

**Obstetric History –** G<sub>2</sub> P<sub>2</sub> L<sub>2</sub> A<sub>0</sub>

G<sub>1</sub>- FTND, 14 years back, Male child delivered at hospital.

G<sub>2</sub>- FTND, 11 years back, Male child delivered at hospital.

Contraceptive History -Condom used by husband since last 10 years.

**Previous Medical History** – Taking Meftal Spas Tablet during menses since 4yrs (1-2tab./day for initial 2 days)

# Previous Surgical History and Family History -Non - significant

**Personal History** 

**Diet -** Vegetarian

Appetite - Normal

Sleep - Disturbed and late sleeping habits

**Bowel** - One time in morning/Regular/Satisfactory/Daily

Micturition - Mild burning (on/off) with increased frequency (1-2 times /hour),

During sleeping hours – 3-4 times

Allergy History - None

Addiction - No history of smoking, alcohol or tobacco intake. Daily intake of 200-250ml coffee.

**Physical Examination** 

0/E -

#### Table 3: Physical examination

G.C.	Fair	Weight	61kg	
B.P.	120/70 mm Hg	BMI	22.42	
P.R.	76/min	Body built	Moderate	
Height	5'5"	Pallor	Not present	

# **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/S -Cervix – No abnormal discharge present Healthy, No ulcerations, No erosion, No hypertrophy Vaginal walls - Healthy, Pinkish P/V -

Uterus - Anteverted, Anteflexed, Normal in size and shape, free mobile

Cervix - Downward, Firm

Cervical motion tenderness - Non - tender

All fornices - Non - tender

# Daśavidha Parīksva Bhāva

#### Table 4: Daśavidha Parīksva Bhāva

	1.	Prakṛti	Pitto-Vātaja	6.	Sātmya	Sarvarasa Sātmya
	2.	Vikŗti	Pittaja	7.	Satva	Madhyama
	3.	Sāra	Asthisāra	8.	Āhāra Śakti	Madhyama
	4.	Saṁhanana	Madhyama	9.	Vyāyāma Śakti	Madhyama
	5.	Pramāņa	Madhyama	10.	Vaya	Madhyamāvasthā

Investigations - (done on 26-07-2019)

# Table 5: Routine investigations

ruble of Routine in Congutions				
Hemoglobin	13.5g/dL	Australian antigen (HBsAg)	Negative	
ESR	12mm	HIV screening	Negative	
CBC	WNL	TSH	1.03 μ IU/ml (Normal)	
BT	4 min	RFT	WNL	
СТ	6 min	LFT	WNL	
Random Blood Sugar (RBS)	94mg%	USG	Normal Study	
VDRL	Non-reactive	Pap smear	Normal smear	

# **Urine examination**

Routine - Color - Pale yellow, Clear

pH- 6.0

Protein, Sugar - Absent

Microscopic – RBCs - Nil/hpf, Pus cells - 1-2/hpf, Epithelial cells - 0-1 /hpf

# Vividha Nidāna

Following Nidāna Sevana was present in this case almost since 15yrs.

- 1. Daily intake of curd (Dadhi- nearly 1-2 bowls/day or 150-200gm)
- 2. Daily intake of Coffee (1-2 times /day)
- 3. Intake of pickle (Mango) daily
- 4. *Pāpada* and snacks fried in oil in evening snack.
- 5. Rātrijāgarana (Sleeps after 12 am usually after phone or TV use)
- 6. Aticintana and Visāda (Stressed due to alcoholism and bad behavior of husband)

- 7. History of Vegadhāraņa during working hours esp. urine urge.
- 8. Less intake of fruits and salad
- 9. Lack of Rajaswalācarya or any other specific regime during menses

# Role of Vividha Nidāna in Formulation of Samprāpti

#### Āhārajanya Nidāna

- 1. Dadhi
- > Dadhi used was the market packaged curd, she was taking almost daily since childhood.
- > As it is formed from raw milk and not as the curd made in homes (Madhuramla Dadhi), so it acts as Mandaka Dadhi (Unfermented curd).<sup>[5]</sup>
- > As per *Bhāvaprakāśa*, use of this *Madaka Dadhi* may lead to increased frequency of micturition and burning sensation during micturition.<sup>[6]</sup>
- > Mandaka Dadhi is responsible for vitiation (Chart - 1) of all three Dosas.[7]

It is also called as *Ābhiṣyandakārī* by *Ācārya* Caraka.<sup>[8]</sup>

# 2. Coffee (Coffea arabica)

It contains Caffeine (1,3,7-trimethylxanthine), which is an adenosine antagonist. Adenosine is an endogenous neuromodulator with mostly inhibitory effects.

So, excessive use of coffee is responsible for insomnia, high blood pressure, anxiety, frequent urination and urgency.<sup>[9]</sup>

- A study was conducted to determine whether there is an association between drinking caffeinated beverages and menstruation. In the results, heavy periods were reported by 13.4% and prolonged periods by 9.7% of patients.<sup>[10]</sup>
- *Caffeine*is also responsible for vitiating the *Pitta*  $\geq$ and *Vāta Dosas*.<sup>[11]</sup> Vitiated *Pitta* is responsible for Raktadusti. Dāha etc.Vāta vitiation. specifically that of Apāna Vāyu, causing the symptoms (Dysmenorrhoea, menstrual Excessive flow) and urinarv symptoms (Frequency, Urgency).

# 3. Daily intake if mango pickle

- Different spices and oils used in pickles are Uṣṇa, Tīkṣṇa and Kaṭu. These are responsible for Pitta vitiation.
- Along with this, *Ācārya Caraka* has mentioned that unripe mango fruit causes vitiation of *Pitta Doşa*.<sup>[12]</sup>

# 4. Papada and snacks fried in oil in evening snack

- High levels of spices, chilies, oil present in these junks are the cause for vitiation of *Pitta Doşa*.
- As per Ācārya Caraka, Potato used in these food items is worst among the tubers<sup>[13]</sup> and the excessive oil used is responsible for *Rakta* and *Pitta* vitiation.<sup>[14]</sup>

# 5. Less intake of fruits and salad

- Fruits and salad are high alkaline foods and balances the intake of acid-forming foods such as meat, fish, dairy, nuts, and grains.
- They form roughage helping in regulation of normal *Apāna Vāyu* functions.
- Ācārya Caraka also indicated their use on regular basis and called the *Phalavarga* as *Prāyopayogika*h.<sup>[15]</sup>

# Vihārajanya Nidāna

# 1. Rātrijāgaraņa

➢ It leads to the vitiation of Vāta and Pitta Doṣas.<sup>[16]</sup>

# 2. Aticintana and Vișāda

- Aticintana (Chart 2) is one of the causes of Rasavaha Srotodușți<sup>[17]</sup>
- Vişāda It is one of the important factors in increasing the Rogas.<sup>[18]</sup>

*Pitta Pradhāna Tridoṣa Duṣți* (Chart-3) is resulting in disease symptoms.

#### 3. Vegadhāraņa

- Mūtravega Dhāraņa may lead to Mūtrakrchra asmentioned by Ācārya Caraka in Navegāndhārņiya Chapter.
- Doşas vitiated by their Nidāna intake, results in burning sensation in urinary tract and difficulty in micturition.<sup>[19]</sup>
- Vitiation of *Pitta* is responsible for frequent and burning micturition.<sup>[20]</sup>

# 4. Not following the Rajaswalācarya

- Havişya Annam is prescribed by Ācārya Suśruta, which is intake of Śāli Odanam (Śāli rice) along with Ghrta and milk or Yava Annam (Barley) as explained by Ācārya Dalhaņa.
- Ghṛta is helpful in raising the level of good cholesterol which is a plasma antioxidant.<sup>[21]</sup> Śāli rice are Tridoşa Śāmaka and Bṛṁhaṇa. Milk is having Bṛṁhaṇa and Rasāyana properties.
- Yava –It has Guru, Madhura, Śīta, Sara properties, and low Glycemic Index. It is used Karşaņārtha, Koṣṭhaśodhanārtha and Agnivardhanārtha. It is Purīṣajanana and Kapha-Pitta-Rakta Vikārahara. It is also mild Vātakara which is pacified by adding milk.
- As the patient was not following the Rajaswalācaryā so she was unable to get benefits of Rajaswalācarya.

That is how the pathological condition is arising from different *Nidāna Sevana*.

# Nidāna Pancaka

- 1. *Nidāna* Previously mentioned causes are the *Nidānas.*
- 2. Pūrvarūpa Kaṣṭārtava, Mūtrakṛchra
- 3. Rūpa Pittaja Ārtavadusti
- 4. *Samprāpti* Mentioned along with *Hetus* previously
- 5. Upśaya Pittaśāmaka Āhāra Vihāra,
- Rajaswalācarya
- Yoga and Prāṇāyāma.
- Stress releasing activities, meditation etc.

# Samprāpti Ghațaka

- Doșa Pācaka Pitta, Apāna Vāyu
- Dūṣya Rasadhātu, Raktadhātu
- Srotas Rasavaha, Ārtavavaha, Mūtravaha Srotas
- Srotodusți Atipravrtti, Sanga
- Sthāna Garbhāśaya, Mūtravaha Saṁsthān

# Sāpekṣa Nidāna

**1.** *Pittaja Āsṛgdara:* In this condition, there is excessive menstrual bleeding along with pain (*Arti*) and feeling of warmth (*Uṣṇtā*). Different colours like *Nīla*, *Pīta*, *Asita* etc.are also given as a

symptom of *Pittaja Āsṛgdara* by *Ācārya Caraka*.<sup>[22]</sup> *Ācārya Suśruta* mentioned *Atiprasanga* (excess in amount and with prolonged duration during menstrual bleeding phase) and *Anṛtau* (less in amount when occurring in intermenstrual period) as its features, explained by *Ācārya Dalhaṇa*.<sup>[23]</sup> But this case could be differentiated from *Pittaja Āsṛgdara* on the basis of intermenstrual bleeding and fever etc. which was not present here in this case.

- 2. Pittala Yonivyāpada: Excessive intake of Katu, Amla, Lavana, Ksara Dravvas may give rise to Dāha (burning sensation), Pāka (suppuration), Jwara (fever), Usntā (feeling of hotness) and different colours of *Ārtava* including *Nīla*, *Pīta*, *Asita etc.* similar to the *Pittaja Āsrgdara*.<sup>[24]</sup> Varnas can be clinically correlated with the presence of the pieces of mucous membrane may give appearance of yellowish, bluish or blackish colour. Also, there is excessive purulent discharge from the Yonimārga due to vitiation of Pitta. In addition to this, *Acarva Cakrapani* has told intermenstrual bleeding as a feature of Paittika Yonivyāpada. All these conditions could be correlated with acute inflammatory conditions caused by pyogenic infection resulting in burning sensation. suppuration, foul smelling discharges, fever etc. Here, Hyperemia occurs due to inflammation which may give rise to menstrual irregularities and menometrorrhagia. So, the Nidānas and Dosas involved in causing Pittala Yonivyāpada are similar to the current case but it could be differentiated on the basis of the clinical features like intermenstrual bleeding and excessive purulent discharge par vaginum, which were absent in the case taken.
- **3.** *Lohitakṣarā:* As per *Ācarya Suśruta*,in this condition, there is *Prakṣaraṇa* (trickling or oozing) of *Asra* (blood) per vaginum along with burning **Treatment Given**

sensation.<sup>[25]</sup> Such a condition can be seen in case of Cervical erosion or Cervical polyp and is different from normal menstrual bleeding.

**4.** *Ārtava - Ativṛdhi:* The causes and features match the case taken but here, the *Ativṛdhi* of *Ārtava*<sup>[26]</sup> is taking place mainly due to *Dhātu Vṛdhi*, which could be correlated with increased estrogen level and abnormally thickened endometrium. But in the case taken, the vitiated *Doṣas* are causing *Dhātuduṣți* and USG is absolutely normal. Thus, on this basis it could be differentiated from *Ārtava - Ativṛdhi*.

#### **Final Diagnosis**

#### Pittaja Ārtavadusti

- It includes all the causes which are responsible for *Pitta* vitiation and all the features which may result due to vitiated *Pitta Doṣa* including excessive menstrual bleeding along with painful menstruation.<sup>[27]</sup>
- Ācārya Hārīta mentioned difficulty in urine along with burning sensation and dark reddish colour of menstrual blood under its features.<sup>[28]</sup>
- Aruņadatta mentioned blood like smell from menstrual blood as a feature of Pittaja Ārtavadusţi.<sup>[29]</sup>
- Aşţānga Samgrahakāra mentioned about severe pain and burning sensation due to vitiated Pitta.<sup>[30]</sup>

So, on the basis of above points, this case could be correlated with *Pittaja Ārtavaduṣți* condition.

#### **Modern Correlation**

This case could be correlated with the condition of Dysfunctional Uterine Bleeding which isa state of abnormal uterine bleeding without any clinically detectable organic, systemic, and iatrogenic cause (Pelvic pathology, e.g. tumor, inflammation or pregnancy excluded).<sup>[31]</sup>

1.	Yaṣṭīmadhu Cū	<i>rņa</i> – 3gm	3.	Gokșura Cūrņa – 2gm
	<i>Miśi</i> (Fennel) – 2gm			Copcīnī Cūrņa – 2gm
	<i>Munakkā</i> – 3 in No. (without seeds)			Twice a day with water
	<i>Goghṛta</i> – 5 ml			
	Twice a day in the form of <i>Kalka</i> with warm water			
2.	Kuțakī Cūrņa	Equal parts	4.	Avipattikara Cūrņa – 4gm
	Munakkā	(Pea sized <i>Guțikā</i> )		Before meal, twice a day with water
	Dhāgā Miśrī			
	Twice a day with cold water			

#### Table 6: Treatment given to the patient

\* The treatment was administered for 2 cycles

# Pathva

Patient was advised to follow

- $\checkmark$ Raiaswalācarvā for first 3 davs of menstrual cycle only including *Havisya*, that also in limited quantity.
- Barley Rotī with Goghrta or Barley Porridge  $\checkmark$
- ✓ Yoga and Prānāvāma
- ✓ Vegetables like *Tindā*, *Torī*, Spinach, *Bathuā*, Parvala etc.
- ✓ Seasonal fruits like Papaya, Banana, Pomegranate, Gooseberry, Watermelon etc.
- Include *Goghrta* in daily diet ✓
- $\checkmark$ Use of Dhāgā Miśrī at place of sugar

# Apathva

- Rātrijāgarana
- Divāśavana
- Oily, spicy and junk foods
- Dadhi Sevana
- Pickles
- **Excess intake Coffee**
- Stress

# **Rationality of Drug**

- 1. *Ācārya Vrdha Vāgbhata* prescribed the *Madhuka* (Yastīmadhu - Glycyrrhiza glabra), Madhurasā (Fennel- Foeniculum vulgare), Mrdvikā (Munakkā - dried *Vitis vinifera*) along with *Ghrta* in the form of Kalka in Pittaja Ārtavadusti.<sup>[32]</sup> Yastīmadhu is Hima (Śīta), Swādvī (Madhura), Susnigdhā and having Pitta, Anila (Vāta) and Asra (Rakta) pacifying properties.<sup>[33]</sup> Madhurasā (Fennel) is Tikta, Swādu, Himā and corrects vitiated Vāta, Pitta and Rakta.<sup>[34]</sup> It is also considered as Dāhaśāmaka in Rājanighantu, so also helpful in reducing burning micturition. *Mrdvikā (Munakkā)* is Atimadhurā, Śītā, pacifies Pitta, Arti (pain) and Dāha (burning sensation). It is Mūtradosaharā and Vrsyā.<sup>[35]</sup> Ghrta is Agnidīpaka, Yogavāhī, Yoniśodhaka. Yoniśūlahara. Due to Yoaavāhī property, it increases the qualities of other drugs used with it. It Facilitates absorption and digestion of drug and facilitates the drug delivery to the target organ due to its lipophilic action.
- 2. *Ācārva Suśruta* mentioned *Drāksā* (Munakkā), Sitā (Miśri), Tiktarohinī (Picrorhiza kurroa) along with cold water in *Raktapitta* pratisedha. <sup>[36]</sup> Tiktarohinī/Kutakī is Tiktā, Himā, Pitta-Rakta-Dāha Śāmaka.<sup>[37]</sup> Sitā is Himā and Vāta-Pitta Śāmaka.<sup>[38]</sup>
- 3. Goksura (Tribulus terrestris) is Śītala, Swādu, Vastiśodhana, possessing Mūtrakrchra relieving properties.<sup>[39]</sup> Copcīnī (Smilax glabra) have Śūlaghnī and Mūtraviśodhinī properties.<sup>[40]</sup>

4. Avipattikara is strong Cūrna carminative, Antioxidant having Śodhana and Antiinflammatory properties that aid in curing imbalances related to Pitta Dosa, properties. It is Mala-Mūtra Vibandha Nāśaka.<sup>[41]</sup>

#### RESULT

Patient came to the OPD on 20-09-2019, after regular follow ups and taking medication for 2 cycles.

- $\checkmark$  There was complete relief in the previous complaints of heavy and painful menses.
- ✓ Relief in frequent burning micturition.

Menstrual history\_- LMP-13-09-2019

Duration - 6 days

Interval - 30 days

#### **Table 7: Menstrual history after treatment**

Pattern	Regular	
Pain	Mild, bearable (analgesics not required)	
Clots	Small, only on 1 <sup>st</sup> day	
Smell	Not present	
Flow	WNL	

	Table of Fau fils	tory after treatment		
	Day 1 <sup>st</sup>	3-4 pads		
	Day 2 <sup>nd</sup> , 3 <sup>rd</sup>	2-3 pads		
	Day 4 <sup>th</sup>	1-2 pads		
Č,	Day 5 <sup>th</sup>	1 pad		
	Day 6 <sup>th</sup>	Spotting only		

# Table Q. Dad History after treatment

# DISCUSSION

The treatment given in this case was Dosa specific, mainly acting on vitiated *Pitta*, which was indicated in Pittaja Ārtavadusti by Ācārya Vrdha *Vāgbhata* is helpful in reducing the symptoms like heavy menstruation and severe pain during menstruation. Kuțakī, Munakkā and Dhāgā Miśrīis helpful in controlling excessive menstrual flow, thus told in Raktapitta Cikitsā by Ācārva Suśruta.Goksura and Copcīnī helps in regulating the Apāna Vāta, by Mala - Mūtra Viśodhana property. Thus, relieving symptoms like pain and burning micturition. Avipattikara Cūrņa is Pittaśāmaka and Śodhanakārī. So, these drugs are having an overall Pittaśāmaka effect along with regulation of Apāna Vāta.

# **CONCLUSION**

From the above case study, it could be concluded that along with the medication, one should also pay attention to the *Nidāna*, its *Parivarjana* and then finally on the Cikitsā part according to the Prakrti of the patient and Dosa Pradhānyatā in the particular disease. So, Pitta Śāmaka Āhāra – Vihāra, following the Rajaswalācaryā along with improvement in life style and *Pitta Śāmaka Cikitsā* are effective in treating *Pittaja Ārtavaduṣți*.

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Chart - 1: Role of Mandaka Dadhi in Doşa vitiation



Chart - 2: Rasa Dusti due to Aticintana



Chart - 3: Role of Tridoşa in formulation of disease