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Ayurvedic management of *Artavadushti* – a case study

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Abstract *Ayurveda* is a healthcare system sensitive to women's special health needs. Women are far more sensitive to the rhythms and cycles of nature. Menstruation occurs every month from the age of 12–50 years. *Raja* and *Artava* are synonyms of one another. *Artava Dushti* occurs due to *mithya ahar-vihar* in *Rajkala* (*Rajaswala*), *Ritukala*, and *Rituvyatitkala*. There are many causes for *Artava Dushti*, such as *mithya ahar-vihar*, heavy work, mental stress, malnutrition, anemia, the use of contraceptive pills, *IUCD*, excess hormones, and traveling, etc. There are eight types of *Artava Dushti*; one among them is *Granthi bhuta Artava*, which is *Vatakaphaja Janya* and is characterized by a clotted appearance of *Artava* associated with pain and unctuousness.

Keywords *Artav Dushti*, *Artav*, *Granthibhuta Artava*.

Introduction Menstrual abnormalities cause severe discomfort and inconvenience to the daily life of a woman. A regular menstrual cycle without disturbing associated ailments is the aim of treatment in women's reproductive health. Due to the current

flawed lifestyle, menstrual irregularities are becoming common, especially in the young reproductive age group. *Granthibhuta Artava* is one among the eight types of *Artava dushti* and is mainly *Vata Kapha* predominant. *Vata* gets aggravated and takes *Asraya* in *Yoni*, producing pain. *Kapha* gets aggravated and produces *Grathilata* in menstrual blood.

Today's stressful modern lifestyle, food habits, and frequent interventions in the female genital tract affect the uterine environment, which leads to a higher incidence of *Granthibhuta Artava*. Improper diet regimen, stress and strain of work, excessive traveling, malnutrition, the use of contraceptive pills, *IUCD*, and excess hormones are seen as *Hetu* for *Granthibhuta Artava* during this study. In this *Vyadhi*, *Apana Vayu* moves in an upward direction and produces pain in the lower abdomen and back; likewise, vitiated *Kapha* leads to unctuousness, i.e., *Grathilata* in *Artava*.

Eight varieties of *Aartavdushti* are described in the classics. *Acharyas* have not addressed the specific causes of the eight menstruation diseases. According to *Kashyap*, *Nasya*

during menstruation, eating extremely hot consumables, and giving *Mridukostha* patients too many medications after *Snehana* and *Swedana* vitiate *Artava*, which results in menstrual disorders. Thus, it may be inferred that *Aartavadushti* is caused by certain variables that contribute to *Dosha* vitiation in conjunction with predisposing factors.

Following are the 8 *Artavadoshas*:

1. *Vataja*
2. *Pittaja*
3. *Shleshmaja*
4. *Raktaja - Kunapganthi*
5. *Vatapittaja - Kshina*
6. *Pittakaphaja - Putipuya*
7. *Vatakaphaja - Granthibhuta*
8. *Tridoshaja – Mutrapurishaganthi*.

Vataj Artavadusti: Vataj Vrana or reddish, blackish-red, and dark violet is the color of menstrual blood in *Vataja Artava Dushti*. *Artava*, or menstrual blood, becomes thin, dry, frothy, and scattered (very small clots mixed with liquid substance), excreting slowly and irregularly with pain, especially piercing or perforating pain.

ग्रन्थिभूतं श्लेष्मवाताभ्ं । (सु० सं० शा० २/४)

Granthibhuta Artavadusti (non/incomplete liquefaction): This is brought on by the vitiation of *Vata* with *Sleshma* and is associated with traits of both *Doshas*, such as pain from *Vata* and immorality from *Kapha*.

Aim

1. To study *Artava* and *Artavadusthti* in detail as per *Ayurveda*.

Objectives 2. To understand the clinical importance of *Artavadushti* as a diagnostic tool for *Streeroga*.

Methodology All information regarding *Artava* and *Artavadushti* was collected from ancient *Ayurvedic* literature (*Brihatrayee & Laghutrayee*), related journals, research and review articles, and the *Ayurvedic Pharmacopoeia of India*.

Case Study: A 36-year-old female patient with *Artav Dhushti* visited several allopathic hospitals and took treatment but did not get any relief from the symptoms, so she approached Sheth R. V. *Ayurvedic* Hospital, Sion, Mumbai, for further management. *Shaman chikitsa* and *Yogabasti chikitsa* offer a ray of hope for *garthith aarthav* and *Kashtartav (aartav dhushti)*. The present study emphasizes the role of *Ayurveda* in bringing a positive result in the management of *Aartava dhushti (Adenomyosis)*.

Case Report: A 36-year-old female patient, a housewife by occupation, visited the OPD of Sheth R. V. *Ayurvedic* Hospital, Dept. of *Prasuti Tantra* and *Stree Roga* on 12th May 2023 with complaints of: dark brown clots during menses, pain in the abdomen during menses, generalized weakness, backache, and mild white discharge. The patient had visited several allopathic hospitals and took treatment but did not get any relief, so she approached Sheth R. V. *Ayurvedic* Hospital for further management. The intensity of *Grathith artava* and *kashtaartava* was to such an extent that the patient was not able to perform her regular activities.

- **Past history:** Not a K/C/O DM, HTN, Thyroid dysfunction, asthma, epilepsy.
- **Occupational history:** Housewife.
- **Family history:** No specific history found.

- **Menstrual history:**
 - Nature: Regular.
 - Number of days of bleeding: 5–6 days.
 - Interval between two cycles: 28–32 days.
 - LMP: 24/05/2024; P LMP: 22/04/2024.
 - Color: Brown-red color.
 - Amount of bleeding: Moderate.
 - Clots: Present ++ (small or 50rs coin-sized clots).
 - *Dysmenorrhoea*: Present.

Examination:

- **General examination:** Built: Moderate; Nourishment: Moderate; Pulse: 84/min; BP: 120/80 mmHg; Temperature: 98.4 F; Respiratory Rate: 18 Cycles/min; Height: 152 cm; Weight: 47.2 kgs; BMI: 20.3 Kg/m.
- **Tongue:** Uncoated; Pallor/Icterus/Cyanosis/Clubbing/Edema/Lymphadenopathy: Absent.
- **Ashtasthana pareeksha:** *Nadi*: 76/min; *Mootra*: 4–5 times/day; *Mala*: regular, 1/day; *Jihwa*: *Alipta*; *Shabdha*: *Prakrutha*; *Sparsha*: *Prakrutha*; *Drik*: *Prakrutha*; *Akruthi*: *Madyama*.
- **Dashavidha pareeksha:** *Prakruti*: *Vata Pitta*; *Vikruti*: *Kapha vata*; *Dosha*: *Kapha Pradhana Tridoshas*; *Dushya*: *Rakta, Mamsa*; *Desha*: *Sadharana*; *Bala*: *Madyama*; *Sara*: *Madyama*; *Samhanana*: *Madyama*; *Pramana*: *Madyama*; *Satmya*:

Madyama; *Satva*: *Madyama*; *Ahara shakti*: *Madyama*; *Jarana shakti*: *Madyama*; *Vyayama shakti*: *Madyama*; *Vaya*: *Madyama*.

- **Systemic examination:**

1. **Central nervous system:** Patient is conscious and well-oriented to time, place, and person.
2. **Cardiovascular system:** Inspection: No distended vessels over neck or chest; Palpation: Apex beat palpable at 5th intercostal space; Percussion: Cardiac dullness present on left side; Auscultation: S1 S2 heard, no added sounds.

3. **Respiratory system:** Inspection: Shape of chest bilaterally symmetrical, movement symmetrical, RR 18 cycles/min; Palpation: Trachea centrally placed; Percussion: Resonant over the lung field except cardiac dullness; Auscultation: Bilateral NVBS heard.

- **Gynecological examination:** Pelvic examination: *Clitoris* normal; *Labia majora*: Swelling absent, pain absent, redness absent, discharge absent; Palpation: Soft, non-tender.

- **Per Speculum and Per Vaginal Examination:** Not done.

- **Breast examination:** Tenderness absent, lump absent, color of *Areola* normal, nipple discharge absent.

Investigations:

- CBC (21-05-23): Hb 8.5 gm/dl, WBC 8800, Plt 475,000.

- USG Pelvis (12/05/2023): Uterus 7.78cm x 4.33cm x 4.18cm, retroverted, normal size and morphology; myometrium is heterogeneous (s/o *Adenomyosis*); no e/o focal lesion/fibroid; Endometrium central ET- 9.9mm; Rt ovary 2.41cm/2.28cm; Lt ovary 1.65/1.24cm.
- Thyroid: T3- 137, T4- 9.54, TSH- 3.2.
- PAP smear (27-06-25): Negative.

Intervention:

- *Patha + Kootaj + Trikatu* (0.5gm each) *kwath* BD.
- *Pushyanurg choorna* 3gm TDS after food with *Tandoolodak*.

- *Chandraprabha vati* 500mg TDS after food with water.
- *Hingwashtak choorna* 3gm BD with lukewarm water.
- *Dashmoolarishta kwath* 3 Tsf BD with water.
- *Sarwanga snehan* with *Til tail* and *nadi Sweda* followed by *yoga basti karma* for 8 days.

Results All medicines were advised for 4 months. After taking medications for 1 month, she was relieved only of her pain during menses. After 3 months, pain and clot passing during menses had decreased. At the end of 4 months, her main complaint—clots passing during menses—was resolved, and the USG also became normal.

Table: Result of Treatment Started on 12/05/2023

Date	LMP	Result
12/05/2023	24/05/2023	Period started on 24/05/2023. Dark brown clots ++. <i>Dysmenorrhea</i> +. Pain (VAS: 6/10). 1st <i>Yogbasti</i> cycle given.
26/06/2023	23/06/2023	Period started on 23/06/2023. Clots during menses+. <i>Dysmenorrhea</i> reduced. Slight pain (VAS: 4/10).
31/07/2023	24/07/2023	Period started on 24/07/2023. Clots passed on and off; normal bleeding. <i>Dysmenorrhea</i> reduced. Mild pain (VAS: 2/10).
28/08/2023	20/08/2023	Period started on 20/08/2023. Clots not passed; normal bleeding. Mild pain on and off.
20/09/2023	17/09/2023	Period started on 17/09/2023. With no complaints of any pain and clots.

After 4 months of treatment, the patient was advised to undergo a USG. **USG (25/09/2023):** Uterus 8.08cm x 3.9cm x 3.8cm, retroverted, normal size and morphology; ET 6.4 mm; Rt ovary 2.15cm/2.28cm Normal; Lt ovary 1.64/1.24cm Normal.

Discussion *Granthibhuta Artavadusti* (non/incomplete liquefaction) is brought on by the vitiation of *Vata* with *Sleshma* and is associated with traits of both *Doshas*, such as pain from *Vata* and immorality from *Kapha*. *Acharya Vagbhata* has mentioned *dosha avruta margawarodh*, which means *avarana*

of *kapha* by *vaat dosha*, leading to *grathith artava*. In this case, to remove the *avarana*, *shaman* of *vaat dosha* was done with *deepana pachana aushadhi*, followed by *shoodhan* and *yogbasti*.

ग्रन्थिभूत ेपिबेत ्रिाठां त्र्यूषणां वकूषकाणण च ! (सु० सां० शा० २/१४)

Table: Properties of Drugs Used

Drugs	Ras	Virya	Vipak	Karya
Patha	Tikta, Katu	Ushna	Katu	Vatakaphaghna
Kutaj	Tikta, Katu, Kashaya	Sheeta	Katu	Kaphaghna
Trikatu	Katu	Ushna	Katumadhur	Vatakaphaghna

- **Patha** helps in removing obstruction in *Artavavaha Srotas* and facilitates the proper flow of *Artava*.
- **Kutaj** (*Śīta virya*) pacifies *pitta prakopa*, preventing inflammatory changes in *artava vaha srotas*. It acts as *stambhana* and *shothahara*, reducing swelling/inflammation of uterine channels while opening blockages. It helps in balancing *Kapha*-induced stickiness that causes *Artava* to become *grathita* (clotted/blocked).
- **Trikatu** improves *Agni deepana* and *Ama-pacana*, regulating metabolism and *dhatu-paripaka*, ensuring proper formation and flow of *Artava*.

All three drugs act through their *Usna virya*, *Tiktsna* and *Ruksa guna*, and *Katu vipaka*. Collectively, they:

- Remove *Kapha*-induced stickiness and clots.
- Relieve *Vata*-induced obstruction and pain.

- Clear *srotorodha* in *Artavavaha Srotas*.
- Normalize *artava pravrutti* (flow of menstruation).

As mentioned by *Acharya Bhavprakash* and *Yogratnakaar*, *Pushyanurga choorna* is used in *yonirogas chikitsa* as well as in *Rajodhosas dhushti chikitsa* because it acts as *sthambhak* and *grahi* in *artavdhushti*. *Chandraprabha vati* works excellently in all kinds of *artav*-related diseases. In *grathith aratav dhushti chikitsa*, *Acharya Sushruta* and *Vagbhata* maintained that a decoction of *patha*, *tryusana*, and *vrushak (kutaj)* should be used. *Dashmoolarishta kwath* was used for pain management during menses; it acts on *prokupit vaat* and stabilizes the pain.

Conclusion *Artav dhushti (gratith artav)* and *Kashtartava*, despite not being severe problems, still affect the personal and professional lives of females to a great extent. The treatment choices available are either comforting or too invasive to convince patients of their acceptance. *Ayurveda* certainly deals with the problem in its entirety and can offer significant relief through oral

medications and *Panchkarma* therapies. *Ayurvedic* treatment modalities consisting of *shodhana* and *shamana aushadhis* were observed to have a prominent role in correcting the *dosha* and *dhatu Avastha*, hence correcting menstrual irregularities. *Yogabasti* proves to be an effective treatment for *kashataartav*, leading to pain-free menses.

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