

Ayurvedic Management Of raktapradar (Heavy Menstrual Bleeding) - A Single Case Study.

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ABSTRACT

Gynaecology is the medical science of women in which many physical and psychological changes occur in women's body through different stages and phases of life. 'Yoni' is the factor of paramount importance in life of women. "Raktapradar" is commonly seen in society as a dominant problem occurring in females as Yoni-garbhshayvikaar. It is correlated with Heavy menstrual bleeding which is defined as excessive per vaginal bleeding in amount or duration or both interfering with physical, social, emotional and or material quality of life. It is managed with hormonal therapy, antifibrinolytic drugs, etc., which have lots of side effects and if unsuccessful, is followed by surgical interventions. So, in search of effective preparations, we prepared and used Kutajashtak Churna mentioned in Yogratnakarin the management of Raktapradar. In present case study, it is observed that Kutajashtak churna has provided significant relief in all the symptoms of Raktapradar (heavy menstrual bleeding) in the patient.

KEYWORDS: Raktapradar, Kutajashtak churna, Heavy menstrual bleeding.

I. INTRODUCTION

Women are not only the beautiful but also one of the most important creations of God and so has been always placed on extreme worship due to her ability of "Janani" (to reproduce). But this blessing, sometimes makes women to suffer some of the gynaecological problems. The reproductive life starts with puberty and ends with menopause. In between these two ends, there is progenerative life having menstrual cycle i.e; Rutuchakra. Menses is phrased as "Rajasrava". Menstruation is a natural and normal physiological process leading to generative life in females.

“रजः प्रदीर्यतेयस्मात्प्रदरस्तेनसस्मृतः

।”..... चरकसंहिताचिकित्सास्थान ३०/२०९

According to Charak, due to Pradirna (excessive excretion) of Raja (menstrual blood), it is named as pradar and since, there is excess expulsion of asruk (menstrual blood) hence, it is known as "Raktapradar".

On the basis of pathogenesis, Raktapradar is nearer to heavy menstrual bleeding. Normal menstruation occurs after every 21 to 35 days and lasts for 2 to 7 days with normal blood loss of 35 to 80ml. Heavy menstrual bleeding is excessive per vaginal bleeding in amount or duration or both.

According to Ayurveda, Raktapradar is caused by vitiated pitta and vata in association with rakta and the line of treatment should be Raktasthapak along with vatapitta shamak. Due to limitations of medical therapy as well as surgical therapy of modern science, it is necessary to find out an effective harmless therapy to manage the heavy menstrual bleeding. In our Samhitas, so many preparations have been mentioned. All these medications have certain common fundamental principles like vaat-pitta shamak, garbhashaya balya and samprapti vighatan and hence effectively control or cure the Raktapradar (heavy menstrual bleeding).

Kutajashtak churna described in Yogratnakar is one such kalpa recommended in Ayurveda classic to treat Raktapradar (heavy menstrual bleeding).

II. METHODS

1. Objectives

- To study and understand the aetiopathogenesis of Raktapradar (heavy menstrual bleeding).
- To study the clinical effect of Raktasthapak chikitsa of Kutajashtak churna in Raktapradar (heavy menstrual bleeding).

2. Case report

A 41 year female patient came with complaints of heavy, prolonged, painful menstrual bleeding with clots since 2 years and fatigue with bodyache since 1 month to *Prasutitantra-Strirog* OPD. She was interrogated thoroughly and all required clinical examinations were done. She has taken treatment at different places but didn't get satisfactory relief in complaints. The patient belongs to middle socio-economic class, used to taking excessive *amla, lavan, katu, vidahi, guru* foodstuffs which leads to aggravate the disease. Her sister was also suffering from same complaints. Patient decided to take Ayurveda treatment as 2-3 of her relatives told her so.

History of past illness: No any major illness.

History of surgery: 2 LSCS.

Family history: Sister was suffering from heavy menstrual bleeding.

Clinical examination:

Temp: 98.4°F

Pulse: 78/min

RR: 20/min

BP: 130/80 mm of Hg

Agni: Tikshna

Koshtha: Madhyam

Sara: avar sara

Mala: prakrut

Mutra: prakrut

Menstrual History:

She had regular menses at the interval of 26-32 days, which last for 08-10 days. Painful menses with clots. 5-6 pads per day fully soaked.

Obstetrics history:

G3 P3 L3 A0 D0

G1 : female child 21 years, FTND with episiotomy

G2 : female child 19 years, LSCS due to cord around neck of fetus

G3 : male child 14 years, LSCS due to previous LSCS.

Per abdomen: Soft, Tenderness at left hypochondrium region. Mild Aadhmaan was present.

PS examination: Cervix mild hypertrophied, no discharge, foul smelling.

PV examination: Uterus Anteverted, mild bulky in size, tenderness in all fornices.

Investigations:

CBC: Hb- 9.7 gm%, WBC- 10900/cumm, Platelets- 2.1 lakhs/cumm

Urine: NAD

T3,T4,TSH: Normal

BSL (R): 98mg/dL

BT,CT: Normal

USG:

Uterus anteverted, mild bulky in size. ET: 12 mm

Samprapti:

Acharya Charak says that women who consumes excessive *lavan, amla, guru, Katu, Vidahi* and *snigdha* food, *jangal* and *aanup mansa, Mastuand madyapaan*, her aggravated *pitta vaat*, vitiates *Rakta*. It increases in amount and then reaching *Rajavaha srotas*, increases immediately the amount of *Raja (Artava or menstrual blood)*.

Assessment criteria:

1. Duration of menstrual blood flow:

0- less than 5 days

1- 6 to 7 days

2- 8 to 9 days

3- more than 9 days

2. Amount of menstrual blood flow:

0- 3 to 4 pads fully soaked per day

1- 5 to 6 pads fully soaked per day

2- 7 to 8 pads fully soaked per day

3- 9 or more pads fully soaked per day

3. Pain in abdomen:

0- No pain

1- Mild

2- Moderate

3- Severe

4. Passage of clots:

0- Absent

1- Present

5. Odour of menstrual blood:

0- Absent

1- Present

6. Staining of menstrual blood on linen:

0- Absent

1- Present

7. Fatigue:

0- No fatigue

1- Fatigue with extra single work

2- Fatigue by normal daily routine

3- Severe fatigue without work

Drug administration:

1. *प्रबलप्रदरंहन्तिनार्यावाकुटजाष्टकम्॥*

..... *योगरत्नाकरप्रदरोगचिकित्सा* 18

Patient was treated with Kutajashtak churna with Ghrit and Sharkaraas an Anupana.

Patient asked to take this churna 6gm twice a day before meal (Apana kaal) from 3rd day of menses for 5 days for 3 consecutive menstrual cycles. Follow up were taken at the end of each cycle.

DRUG REVIEW:-

Sr. No.	Drug name	Latin Name	Part Use	Praportion
1	KUTAJ	Holarrhenaantidysentrica	TWAK	1 part
2	ATIVISHA	Aconitum heterophyllum	MOOL	1 part
3	MUSTA	Cyperus rotundus	MOOL	1 part
4	BALAK/HRIBER	Coleus vetiveroides	MOOL	1 part
5	LODHRA	Symlocosracemosa	TWAK	1 part
6	RAKTACHANDAN	Pterocarpus santalinicus	KAANDA-SAAR	1 part
7	DHATAKI	Woodfordiafruticosa	PUSHPA	1 part
8	DADIM	Pumica granatum	PHALTWAK	1 part
9	PATHA	Cissampelospariera	MOOL	1 part

Pathya-Apathya:

Pathya- Masoor daal (lentil), moong daal, chana daal, patol (pointed gourd), tandulodak (rice water).

Apathya- amla (sour), lavan (salty), katu (spicy), dadhi (curd), mansa (meat), madya (wine).

III. RESULT AND DISCUSSION:

Patient consumed Kutajashtak churna with Ghriland Sharkara for 3 consecutive menstrual cycles and followed all pathya and apathya. It was observed that, symptoms were started to reduce gradually. At every follow up, we observed reduction in symptoms as compared to previous follow up. At the end of 3 months, all symptoms were vanished. Patient had painless menses with normal menstrual bleeding.

Raktapradar has been described by various authors in detail. After studying different samhitas, the main chikitsafor Raktapradar is raktasthapak as raktadhatu is lost per vaginally. So, it is to be preserved.

Kutajashtak is the best Raktashodhak, Raktasthapakand Raktaprasadak.

IV. CONCLUSION:

The entire work entitled “Ayurvedic management of Raktapradar (heavy menstrual bleeding)- A single case study” can be concluded as below-

- Raktapradar (heavy menstrual bleeding) is commonly seen in society as a dominant problem, occurring in female as yoni-garbhashayavikar.
- Raktapradar is caused by vitiated pitta and vata in association with rakta and the line of treatment should be raktasthapak along with vatapittashaman.
- Raktapradar can nearly be correlated with Heavy menstrual bleeding/Menorrhagia of modern.
- Raktasthapanand Vednaprashaman effect were observed after treatment.
- Kutajashtak churnais good raktasthapakyog for Raktapradar.
- Kutajashtak churna effectively reduces quantity of heavy menstrual bleeding due to pittashaman, raktasangrahan, raktasthapak properties of its content.
- It is also noted that Kutajashtak Churna was palatable to patient.
- Kutajashtak churna act by specific prabhavi.e, Raktasthapak (Haemostatic activity) etc. which

bring improvement in symptoms of Raktapradar by its action on vata.

- Opens a new chapter for further research work with larger sample size and proper duration of follow up.

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