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"ANALYTICAL STUDY OF NASHTARTAVA IN AYURVEDA WSR TO PCOS"

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ABSTRACT:

PCOS is mainly characterised with abnormalities in the metabolism of androgens and estrogen and control of androgen production and can result from abnormal function of the hypothalamic-pituitary-ovarian axis. The incidence of PCOS in adolescent and reproductive age women is increasing alarmingly due to westernized culture, faulty dietary habits & lifestyle, rapid urbanization, excessive work load etc. In Ayurveda literature no as such direct correlation of PCOS with any disease is found, though symptomatically menstrual abnormalities amenorrhea or delayed cycle etc. can be correlated with Lakshana and Samprapti of Nashtartava, Artavakshaya. According to Acharya Sushruta in Nashtartava, artava is obstructed by vitiated Doshas and in Artavakshaya menstruation is delayed, menstrual blood is scanty and associated with pain in Vagina. Mainly Dushti of Rasadi Dhatu occurs, resulting in improper formation of Upadhatu i.e., Artava. The features of PCOS may also be correlated with Pushpaghni Jataharini that is described in Ayurvedic classics (Kashyapa Samhita) having the clinical features of futile ovulation (Vrutha Pushpa) and corpulent hairy cheek (Sthula Lomashaganda). In this Article an attempt is made to understand the specific Artava Nasha feature in relation to Nashtartava Samprapti and to find approach for the treatment from the basal level. Conclusive treatment modalities obtained are i.e., Nidanaparivarjana, Sanshodhana, Agneya Dravya uses in PCOS.

Keywords: Nashtartava, Pushpaghni Jataharini, Nidanaparivarjana, PCOS

INTRODUCTION

Polycystic ovarian syndrome is becoming very common health problem affecting adolescent and reproductive age women. PCOS symptoms involve both endocrine and gynaecologic system; as amenorrhea or oligomenorrhoea, hirsutism, obesity, acne, androgenic alopecia and reproductive disorders. Polycystic ovarian syndrome (PCOS) is a complex endocrine condition in which ovulatory dysfunction and androgen excess are cardinal features

Ayurvedic classics have used different types of words for menstruation or menstrual blood like Rajah, Artava, Shonita, Rakta, Pushpa, Lohita, Beeja etc. Acharya Susruta has described that in females it's the Rasa dhatu which flows in the form of blood every month named as Rajah. Acharya Sushruta described the term Artavanasha. When the aggravated Doshas obstruct the passage of Srotas/ channels carrying Artava, thus Artava is destroyed. Here because of the Avarana or obstruction, the Artava is not finished completely but it is not seen or discharged monthly. Acharya Bhela described that though blood circulates in whole body for seven days and nights, yet, being scanty and abnormal, does not circulate in reproductive system; and definitely desiccation of Artava as well as body occurs in women resulting into absence of

menstruation. Bhavaprakasha has included Rajonasha (amenorrhea) among eighty specific disorders of Vata.

Acharya Sushruta also mentioned about the term Artavakshaya with the topic Nashtartava. Artavakshaya is characterized by the features of Alpa Aratav, Yathochitta Kaal Adarshanam, Yoni vedana. Hence oligomenorrhea (Artava Alpata/ Kshudra Pramana) and amenorrhea (Yathochitta Kaal Adarshanam) are clinical features in PCOS, thus the disease entity Artavakshaya should also be considered with the pathogenesis of Nashtartav because of resemblance in disease course and treatment.

In Polycystic ovarian Syndrome mainly, ovaries are involved and the description of ovaries in our classics is not found separately, but Acharyas mentioned the term Beeja-Granthi which can be correlated with ovary. Acharya Sushruta described the Artavavaha Srotas as an important Srotas/ system of female body. Moola of this Srotas is Garbhashya and Artva-vaha Dhamanis. Any injury to Artava- vaha Srotas leads to infertility, dyspareunia, and Amenorrhea. Here the Nashtartava can be compared to amenorrhea the cardinal feature in PCOS. PCOS is also having the pathogenesis happening inside the ovaries in terms of formation of cysts, in Ayurveda ovary can be correlated to Beejagranthi.

In a healthy Beejagranthi or Artavavaha Srotasa, Beejotsarga is controlled by Apana Vata. Apana Vayu along with Pitta is responsible for the maturation of follicles by Pachan karma of Pitta and ovulation/Beejotsarga/Antah Pushpa & Artava/ Bahir Pushpa Pravartan karma of Vata. Thus, due to Kapha Prakopaka nidana, Avrana of both the Vayu and Pitta occurs, thus neither the ovulation takes place nor the maturation of follicles occur leading to the formation of cysts inside ovaries and infertility. Thus, ultimately the menstrual abnormalities occur; cycle gets delayed or not occurs monthly due to improper function of H-P-O axis.

Apana vayu does the process of expulsion of Shukra (ejaculation), Mutra (micturition), Shakrit (defecation), expulsion of fetus & menstrual blood. Vyana vayu is having the function Rasa rakta samvahana which may be compared with blood circulation in modern medical science. The Swarupa of Rasa dhatu is Drava which can easily circulate by Vikshepana Karma of Vyana vayu. Thus, it can be assumed that Apana Vayu is responsible for Pravartana of Artava and Vyana Vayu supplies the blood to the uterus and pelvic organs. Thus, in the pathogenesis of Artavakshaya and Nashtartava, Vyana vayu decreases the supply of blood to uterus due to Sanga or Marga Avarana and Artava Pravartan is less because of Avritta Apana Vata. As Acharya sushruta mentioned Vitiated Vata and Kapha are responsible in pathology of Nashtartava. For Kapha-Avrita Apana Vayu, the treatment should be Agneya dravya or Agnideepaka, Srotoshodhana, Vatanulomaka and Pakvashaya Shudhdhikara as Basti.

All the Nidana of Yonivyapad are the absolute causative factors in any of the yoni related disease. Artava is considered as Updhatu of Rasa dhatu. So any factor causing vitiation in Rasavaha- Srotas is also responsible for deranged formation of artava leading to Nashtartava. Ashta Artavadushti should also be included in the Nidana of Nashtartava. Rasavaha srotodushti nidana those are Guru, Sheeta, Ati Snigdh, Ati Matra Ahara and Manasika nidana Achintyanam Ati Chintanata should also be included in causative factors regarding Nashtartava. All Kapha prakopaka Nidana i.e. Atimatra-Ashan, Divaswapna, Avyayam, Alasya, Guru, Snigdha Ahara etc. are also causing Kapha-Prakopa which leads to Jathragni mandya and Avaran of Srotas.

This Agnimandya leads to formation of Ama which causes obstruction or Sanga srotodushti. Therefore, the Rasa Dhatwagni is also deranged and formation of its Updhatu i.e. Artava is less.

Overall PCOS is a Santarpana Janya Vyadhi, thus keeping in mind the Nidana of Atisthoulya can also be included. In Atisthoola Purusha the aggravated Kapha and Meda dhatu causes the obstruction in Srotas or Avarana of Srotas leading to Nashtaratava. Genetic factors those are including under the Nidana are Beeja-dushti and Garbho- Upghat Kara Bhava. In both of them the aggravated Vata is the main cause which leads to abnormality of Beeja-granthi/Garbhashay and may also considered playing a big role in hampering the normal Artava Pravartan Karma.

Psychological factors i.e., Chinta, Bhaya, Krodha, Shoka, Dainya etc. are also having a big impact over H-P-O axis causing derangement of its normal functions. As a working woman outdoor or indoor faces great mental strain, stress, depression, mood- swings etc. like psychological factors. So, these are also responsible for alteration in pulsatile secretion of GnRh leads to oligomenorrhea/ amenorrhea. Stress in PCOS woman is also due to their appearance like Hirsutism, Acne, Alopecia, obesity, infertility etc.

Nidana Parivarjana is first line of treatment. All the causative factors related to Ahara and Vihara should be avoided first to overcome the pathology. Acharya Charaka described all gynaecological disorder mainly as YoniVyapada. Vata is responsible for all type of Yonivyapadas, thus the main focus is to do Vatashaman chikitsa. Vayu is also Pravartaka of other Doshas, therefore regulation of Vatadosha may have indirect effect on pacifying other Doshas. Acharya Sushruta described that Nashtartava should be treated by the Sanshodhana and Agneya Dravya, obstructed Path due to vitiated Kapha is treated by Sanshodhana and Agneya Dravya will increase both Pitta and Artava because of same properties of Agneya Guna with the concept of Samanyam vriddhikaranam. The Agneya dravya also stimulates Agni, which helps in digestion of Ama, thus the formation of Rasa Dhatu and next Dhatu & Updhatu normalizes.

Acharya Dalhana says that for purification/ Sanshodhana, only Vaman Karma should be used. Virechana or purgation should not be used, because Virechana reduces Pitta, which in turn decreases ‘Artava’. While Vaman removes Saumya substances or Kapha, resulting into relative increase in Agneya constituents of the body subsequently Artava will also increase. In Commentary Chakrapani says that by the use of Sanshodhana Karma Srotasas get cleared. Thus, Both Vaman & Virechana clear the upward and downward Srotas as respectively, thus both should be used.

Acharya Sushruta also said about Artava Shuddi Chikitsa. Acharya Vagabhata–I & II recommend Pitta Vriddhikara and Raktavriddhikara Chikitsa. Acharya charaka has said that in Kaphavritta Vata, Tikshna Svedana, Niruha Basti, Vaman and Virechana should be used. Acharya Kashyap mentioned Basti to be the best treatment. Apana Vayu controls the reproductive system both in male and female. Basti regulates Apana Vayu and when obstruction of Apana-vayu removed the Anulomana of Artava and ovulation starts properly. Fish, Kulattha, sour substances (Kanji), Tila, Masa, wine, urine (cow urine), butter milk mixed with half water, curd, jaggery and Sukta (Chukra) should be used in diet and drinks.

DISCUSSION

PCOS is a lifestyle disorder associated with excessive dietary intake, sedentary lifestyle, stress and some environmental factors etc., all these affects the metabolism of body and this metabolism can correlate with the concept of Agni of Ayurveda. In Nashtartava obstruction of different Srotas i.e. Artavvaha Srotas, Rasavaha Srotas, Medovaha Srotas etc. occurs by the vitiated Kapha, Ama and Meda. Nashtartava is an Avaran Janya Vyadhi mainly where oligomenorrhea or amenorrhea occurs due to Avarana of Artava-Vaha Srotas by Vata and Kapha. Acharya Charaka quoted Mithya-Achara (faulty life style), Pradushta-Artava (menstrual disorders like PCOS), Beejdosha (genetical cause), Daiva prakopa- (Unknown or idiopathic cause) are also consider as etiological factor in the pathogenesis of PCOS.

Thus Sanshodhana, Vataanulomaka, Pittavardhaka, Deepan-Pachana drugs should be used, they elevate Agni, thus when Pachana of Ama occurs then Avarana of Srotas removed and normal menstruation starts. Artava Pravritti is the function of Apana Vayu, and Apana Vaigunaya leads to Nashtartava, so for Anulomana of Apana Vayu, Basti can also be given.

CONCLUSION

The PCOS is not described in our literature, but can be correlated with Nashtartava, Artavakshaya, Pushpaghni Jatharini. Despite of accumulated literature and remarkable advances in understanding PCOS, etiology and primary mechanism remains unclear thus there is the need of time to put forward Samprapti and its Vighatana or Chikitsa of PCOS. Avaran mukta Prakrita Vayu and normal functioning Pitta–Kapha doshas, Rasavaha and Artavavaha Srotas are key factors against Nashtartava.

REFERENCES

1. Arshad M, Moradi S, Ahmmadkhani A, Emami Z. Increased prevalence of depression in women with polycystic ovary syndrome. Iranian Journal of Endocrinology and Metabolism. 2012; Pp 582–586.
2. Aziz R, Carmina E, Dewailly D, Diamanti- Kandaraakis E, Escobar-Morreale HF, Futterweit W, The androgen excess and PCOS society criteria for polycystic ovarian syndrome: the complete task force report. Fertil Steril. 2009; 91: 456-88.
3. Maharshi Sushruta, Sushruta Samhita, with Ayurveda Tattva Sandipika Hindi Commentary by Kaviraj Ambikadutta Shastri part 1, edition 2010, Chaukhamba Sanskrit Sansthan, Varanasi; Sutra sthana, 14/6, Pp. 64.
4. Maharshi Sushruta, Sushruta Samhita, with Ayurveda Tattva Sandipika Hindi Commentary by Kaviraj Ambikadutta Shastri part 1, edition 2010, Chaukhamba Sanskrit Sansthan, Varanasi; Sushruta Sharir 2/23, Pp 16.
5. Sushruta Samhita of Sushruta, Nibandha sangraha Commentary by Sri Dalhanacharya, edited by Yadavji Trikamji Acharya & Narayan Ram Acharya, Chaukhmba Surbharati Prakashan, Varanasi, Reprint 2018, Uttar Tantra 1/25; Pp 597.
6. Agnivesha, Charaka Samhita, with introduction by Sri Satya Narayana Shastri with Elaborated Vidyotini Hindi Commentary, by Pt. Kashinath Shastri, Dr.Chaturvedi G N, Chaukhambha Bharti Academy, Varanasi, Reprint 2012, Chikitsa sthana 30/115; Pp 858.
7. Maharshi Sushruta, Sushruta Samhita, with Ayurveda Tattva Sandipika Hindi Commentary by Kaviraj Ambikadutta Shastri part 1, edition 2010, Chaukhamba Sanskrit Sansthan, Varanasi; Sutra sthana 15/16; Pp 77.

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8. Maharshi Sushruta, Sushruta Samhita, with Ayurveda Tattva Sandipika Hindi Commentary by Kaviraj Ambikadutta Shastri part 1, edition 2010, Chaukhamba Sanskrit Sansthan, Varanasi; Sutra sthana, 14/7; Pp. 64.
9. Maharshi Sushruta, Sushruta Samhita, with Ayurveda Tattva Sandipika Hindi Commentary by Kaviraj Ambikadutta Shastri part 1, edition 2010, Chaukhamba Sanskrit Sansthan, Varanasi; Sharir sthana 2/12; Pp14.