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CONCEPT OF ASRUGDAR IN RELATION WITH ABNORMAL UTERINE BLEEDING: AYURVED LITERATURE REVIEW ARTICLE

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ABSTRACT

There are several numbers of menstrual abnormalities out of which dysfunctional uterine bleeding has more clinical importance being life threatening condition. Menorrhagia or excess menstrual bleeding is a major symptom and it may derive from multiple causes. *Aartavdushti, Aasruja yoivyapad, Aavrutta vat, Adhoga Raktapitta* etc are many similar condition to *Raktpradar* but it has its own unique identity which should be logistically analysed. Modern medicinal, hormonal and surgical options are available for its management but much more authentic preventive and conservative medical aids are described in ayurved textbooks. *Asrugdara* or *Raktprdara* is term given to dysfunctional uterine bleeding in which *pitta* and *rakta* are basic body element which contributes pathophysiology.

Key words: *Raktapradar, Asrugdar, Rakt, Pitta, Adhoga Raktapitta.*

Introduction

Menstrual disorders are the major clinical entities in the field of women's health. Heavy menstrual bleeding is one of serious issue causing life treating complications and needs definite management to improve health and to reverse pathology. In modern medicine scenario coagulating drugs and progesterone derivatives are used routinely which causes adverse actions and worsens the condition. Surgical corrections or hysterectomy are available solutions but proper authentic clinical approach with holistic view is not seen in it. Ayurved science has wide description of various menstrual disorders as well as bleeding disorders and abnormal uterine bleeding conditions. Management of such conditions need clinical collaboration with abnormal uterine bleedings described in modern medicine which will make a new platform for guidelines for gynaecology of upcoming days.

Aim and objective:

- 1.To review complete Ayurveda literature regarding patho physiology of *asrugdra* .
- 2.To review complete literature about dysfunctional uterine bleeding.
- 3.To justify the modern aspects of DUB and ancient *raktpradr*

Material: Classical texts of ayurved were reviewed.

Methodology:

Collection, review and interpretation of data is done systematically to elaborate ancients descriptions with current modern views.Review and discussion about available literature is done. Analysis of concepts and conclusion regarding therapeutic consideration of the dysfunctional uterine bleeding is drawn.

Literature Review:

Artav vaha strotas [1] is a structurally very minute channel typically designed for secretion, absorption, storage and transportation of basic and essential contents for female reproductive system. It is designed for process of menstruation and ovum formation as well as other reproductive functions of women body. It contains *garbhasaya* and *aartav vahi dhamanya* (vessals carrying *aartava*). *Artava* means menstrual blood as well as ovum. *Garbhashaya, fallopian tubes, ovaries, their blood suply and lymph drain* are basic organs of *artava*. This entire system can be called as *aartavvaha strotas*.

Physiology:

Artav formation: *Aartava* is generated from *rasa dhatu* [2]. *Rasa* and *stanya* are two *upadhatus* of *rasa dhatu* produced during conversion of *rasa* into *rakta*. *Rasa* is basic element of body which exists after metabolic process in stomach and then circulated towhole body through the heart. Its healthy appearance is expressed at skin. A well hydrated skin luster shows presence of best quality *ras dhatu* in the body. *Rasa* cannot be separated from *rakta* hence lymph, hormones, plasma can be collectively considered as *rasa dhatu*. As softness and smoothness of skin in females depends upon estrogens,[3] Existence of estrogen inside circulatory blood can be understood. Entire phenomenon of menstruation depends upon hormonal interplay amongst HPO axis .Though the description of hormones not separately found in ayurved texts its existence can be correlated with *rasa dhatu*.

Shuddha aartav lakshan (Features of normal menstruation) [4],[5]

Shuddha or normal *artava* appears between age limit of twelve years to fifty years. It is expressed every month and lasts for three to five days. It is cyclic in nature, slightly painless with flow is not scanty or not heavy. *Artava* is slightly blackish colored and having typical odour. It can be easily separated from cloth after washing it with simple water. The amount of blood loss varies in individuals, as per texts its amount is four *anjali* i.e. 160 ml. This amount is quite more as per modern texts but it seems to be entire volume of 4 to 5 days. *Charaka* explained the amount as not scanty or not too heavy.

Aartav Nishkraman (Menstruation):^[6]

This phenomenon is explained by *wagbhata* stating that every month well developed and processed *aartav* sheds out from destroyed vessels of uterus and odourless slightly blackish *artava* expelled through *yonimukha*. This is *vata prakopa* period and symptoms like *constipation*, *agnimandya* and *pindikodweshtan* i.e. leg cramp seen in some cases.

while modern texts says endometrium is innermost layer of the uterus made up of basal and functional layers. Functional layer is under direct influence of hormones specially estrogens and progesterone. The growth and regeneration occurred with increasing level of estrogens secreted from developing follicles. Growth of endometrium continued till ovulation and after the appearance of progesterone it converts into secretory phase. Maturation of endometrium is occurred by progesterone so enough to host products of conception. Failure of conception leads to fall down of progesterone and shedding occurs resulting in menstruation.

Raktpradara^[7] :It is condition in which significant heavy bleeding through female genital tract is seen. It is rather than period of normal menstrual flow and without any specific reason. **Asrugdara** is synonym of *raktapradara* and is of four types.

Causes of raktpradara: ^[8] Multiple dietary and lifestyle factors like spicy and saulty food with having heat producing properties leads to rise in pitta in body and causes vitiation of vata •

Samprapti: ^[9] blood quantity increases in vessels surrounding uterus. This vascular blood gets mixed with menstrual blood. Congestion results to raised pressure in vessels and *vatprakopa* leads to increased amount of abnormal pitta and *rakt* in *garbhashaya sira*. Forceful bleeding occurred by *vata* activity results in *raktapradara*.

Types: ^[10] Four types of *raktpradara* are there i.e. *vataj*, *pittaj*, *kaphaj* and *sannipatik*. All have predominately heavy menstrual bleeding with associated symptoms of respected *doshas*. *Sanipatik* will show mixed symptoms.

Differential Diagnosis:

a) *Aartav dusthi*^[11] :there are eight types of *aartva dusthi* i.e. menstrual disorders in which various types of symptoms according to *dosha* involvement seen. These conditions are seen particularly during time of menstruation but no heavy bleeding seen in it.

b) *Rajovruddhi* ^[12]: This condition represents increased menstrual blood amount in some specific seasons or after consumption of food having properties similar to *rasa dhatu*. This condition can be resolved spontaneously or with minimal therapeutic aids.

c) *Aasruja yonivyapad* [13]: Lady who practices dietary habits responsible for increased *Pitta* and *Rakta* will have tendencies to bleed forcefully during menses, this condition may result in habitual abortions it is also called as *Apraja Yonivyapada*.

d) *Raktavrutt vaat* [14]: This condition represents involvement of *Rakta*, *pitta* and *vata* and leads to *Murcha*, *tama*, *shirashula* and petechial rashes over body, but no heavy bleeding seen in it.

e) *Adhog raktapitta* [15]: It is included in *mahagada*, and derived after *jwara* and caused due to all similar *hetu sevana* of *Raktapradar*. It shows bleeding through all *bahirmukh strotasa* including vagina, rectum and urethra. But in *raktapradara* bleeding present only through vaginal route.

Treatment: [16] treatment should be like *raktatisar*, *raktarsh* or *raktapitta* disease. Also treatment to improve appetite and haemostatic agents are used. *Tikta rasa* drugs are best for it.

Discussion

We don't find direct description of gonadotropins in ancient ayurved texts but the references below are highly indicative of action and importance of gonadotropins in female body.

- *Artava* is derived from [17] *rasa* during conversion of *rasa* into *rakta* while gonadotropins directly secreted in vascular blood and cannot be separated from it. Both *artava* and gonadotropins are not significantly active till arrival of puberty and remains active till menopause. [18] Symptoms like shiny and glowing skin, happy face and attraction of male partner is shown by *rutumati* (women in peri ovulatory period) are highly indicative of proper feedback

mechanism of estrogen and progesterone during *rutukala*.

- *Aartavkshaya* and cessation of menstruation is menopause which is state of estrogen deficiency also denotes some relation in between reproductive hormones and *aartava*.
- The exact relation between gonadotropins and *aartava* or *rasadhātu* is not established yet but we can consider their close relationship because of similar physiological actions.

Here a question arises that which *strotasa* does *raktapradara* belongs to? Descriptions in texts show *Asrugdar* is disease of *Raktvaha strotasa* [19] [20] but *aartava* is derived from *rasvaha strotasa*. Also treatment for *raktapradara* is advised as *agnisandipnarth* and *upvaas*. This concept helps us to treat *asrugdar* wisely and taking pathophysiology of both *rasa* and *raktvaha strotasa* in consideration.

Asrugdar and menorrhagia both conditions denote bleeding per vaginum in period other than menstrual phase and also [21] it is non-functional bleeding. Normal *aartava* is expelled out during initial days (4 to 5) of menstruation, but *raktapradara* is condition in which bleeding seen more than this period. Hence it is crystal clear that bleeding present in *asrugdar* is not *aartava* but *rakt dhātu*.

The term [22] Dysfunctional / abnormal uterine haemorrhage is specifically used when menorrhagia is not associated with any genital tract clinical abnormalities and general or endocrinal disorder. Hence we can consider other conditions as same. Causes of *asrugdar* as many dietary factors responsible for increased quantity of *pitta* in blood

.Some psychological causes responsible for stress also are described which may adjuvant to reasons described in modern medicine which are responsible for hormonal imbalance. Sedentary lifestyle and psycho-sociological factors lead to cause hormonal imbalance. Hence possibly the causes responsible for both conditions are same.

No heavy menstrual bleeding seen in *artav dushti*, *adhog raktapitta*, *vatrkata* etc conditions in the period other than menstrual cycle. Hence *raktpradar* is different from all. Term *asruja* (apraja) *yonivyapad* is many time used as synonymic to *asrugdara* but as per texts it seems to be bleeding tendency which leads to habitual abortions in early stage [23] of pregnancy which results into pregnancy loss. *Adhog raktapitta* and *asrugdara* are some-times considered as same but *adhog raktapitta* [11] is condition in which per urethral or bleeding per anum seen. but no any description of heavy bleeding per vaginum in *adhoga raktapitta* found in texts.

Treatment of *asrugdara* related to [24] Granthi, Arbud polyp and endometrial hyperplasia should be done surgically as these are diseases of *mansvaha strotasa*. While considering *shaman chikitsa* *Vatshamak chikitsa* is preferred considering majority disease of women are due to *vatdushti*, but in texts use of *tikta rasa* instead of *vatshamak rasas* like *Madhur amla lavana* is advised. *Tikta rasa* [25] is typical *pitta shamk*, *rasapachak*, *raktstambhak* and *agnivardhak*.

Conclusion

Raktapradar or *asrugdar* is a typical clinical condition of *raktvaha strotas* which shows excess menstrual bleeding in days other than menstrual phase. It is different from other *artav dushti*, *adhog raktpradar*, *asruja yoni* and *raktavrut vata*. Condition *menorrhagia* is clinically mostly correlates with *asrugdara* and medicinal conservative as well as surgical treatment methods described by Ayurveda for their correction.

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