

## A CLINICAL STUDY OF LAGHU MALINI VASANTHA RASA IN ASRIGDHARA W.R.T. ABNORMAL UTERINE BLEEDING.

[Nikitha Sirigere<sup>1</sup>](#), [Vaishnavi I A<sup>2</sup>](#)

<sup>1</sup>Associate Professor, Department of Prasooti tantra and Stree roga, <sup>2</sup>Final year BAMS, Government Ayurveda Medical College and Hospital, Bengaluru, Karnataka, India.

Corresponding Author: [drnikithamahesh@gmail.com](mailto:drnikithamahesh@gmail.com)

<https://doi.org/10.46607/iamj0910072022>

(Published Online: July 2022)

### Open Access

© International Ayurvedic Medical Journal, India 2022

Article Received: 20/06/2022 - Peer Reviewed: 07/07/2022 - Accepted for Publication: 13/06/2022



## ABSTRACT

In women, menstruation is a normal physiological phenomenon, which means the periodic discharge of menstrual blood from the uterus. The estimated blood loss is around 20-80ml (average- 50ml) and the duration of menstruation is 3-7 days (5 days on average), any irregularities in the menstrual flow lead to deterioration of women's health.

*Asrigdhara* is a disease characterized as a combination of excessive and prolonged bleeding per vaginum with or without intermenstrual bleeding. *Asrigdhara* can be corresponding to Abnormal uterine bleeding (AUB) and Dysfunctional uterine bleeding (DUB) characterized by deviation from normal menstruation with no Organo-Pelvic pathology. It is considered one of the commonest leading Gynecological problems. This prolonged and excessive bleeding leads to Anemia, in certain cases which is eventually life-threatening if left untreated. Hence, being in an alarming condition requires a safe, cost-effective & positive line of cure.

Hence forth in the present study, *Laghu Malini Vasantha Rasa* is found to be an effective treatment in *Asrigdhara* which strengthens the uterine health & reproductive system, thereby systemizing the HPO axis by Hormonal symmetry and balancing the menstrual cycle.

The current study was assessed with the help of required assessment criteria which showed the following results.

- Effect on the duration of menstrual flow - 70 %
- Effect on amount of blood loss - 80%

- Effect on intermenstrual period & pain during cycles - 56.7%

**Keywords:** Abnormal Uterine Bleeding, Asrigdhara, Laghu Malini Vasantha Rasa, Pradara

## INTRODUCTION

Menstruation is an essential physiological function of women during their reproductive age. Normal menstruation is an indicator of a healthy and normal reproductive system.

'ASRIGDHARA' means 'DIRANA' which means excessive expulsion of Asrik (menstrual blood). The word 'PRADIRANA' states- excessive secretion of raja, hence it is also called RAKTHA PRADARA. It is one among the Raktha Pradoshaja Vikara. It is also seen as a symptom in Pitta Avrutha Apana vayu.

In Modern science, AUB-Abnormal Uterine Bleeding (formerly Dysfunctional Uterine Bleeding) is a broad term that describes irregularities in the menstrual cycle involving frequency, duration, volume of flow outside of pregnancy. AUB reflects a disruption in the normal cyclic pattern of ovulatory hormonal stimulation to the endometrial lining.

In developing countries like India, Abnormal Uterine Bleeding is reported to occur in 9-14% of women between menarche and menopause. The prevalence of AUB in present conditions is around 17.9%. This percentage is in gradual inclination in present circumstances. By considering the above facts, there is a necessity to develop a treatment protocol in the management of Asrigdhara.

Ayurveda describes a wide range of treatment protocols in the management of Asrigdhara which includes Shodhana, Shamana, and Rasayana & Sthanika chikithsa. Among these LAGHU MALINI VASANTHA RASA has been preferred for the further clinical study of Asrigdhara with the prime aim of benefiting the ailing community.

### Objectives of the study □

- 1) To evaluate the effect of LAGHU MALINI VASANTHA RASA in the Management of ASRIGDHARA.
- 2) The conceptual study of ASRIGDHARA.

### Ayurvedic review of Asrigdhara

Asrigdhara is a disease manifesting as Excessive bleeding per vagina. Acharyas explained it as one of the Raktha pradoshaja vikara & Rakthayoni as its symptom. And also mentioned Pradara as its synonym

### Nirukthi/Derivation :<sup>1</sup>

Pradeeryate iti pradaraha vistarito bhavati asruk deeryate yasminniti asrugdaram. (Cha.Chi.30/Chakra)

Asrk = Raktha/Raja

Dhara = Continuous/excessive flow

Continuous /Excessive flow of raja is called Asrigdhara.

### Paribhasha:<sup>2,3,4,5</sup>

1. Ati prasangena anrutau rutau va tadeva asrugdaram. (A.S. Sha.1/11)

2. Asrug deeryate chyavate yaasminnityasrugdaram. (Ma. Ni.61/2 Madhukosha)

3. Pradeeryate iti pradaraha vistarito bhavati asruk deeryate yasminniti asrugdaram. (Cha.Chi.30/Chakra)

4. Tadevatiprasangena pravrutamanrutaavapi. Asrugdaram Vijaaneeyad. (Su.Sha.2/18)

By the above definition, it is clear that Excessive or Prolonged flow of blood occurring in the menstrual or intermenstrual period is called Asrigdhara & Pradara **Chikithsa Siddhantha**

Ayurvedic texts have described a variety of treatment options in the management of Asrigdhara, including Shodhana and Shamana chikithsa. Out of them, the efficacy of Shodhana Chikithsa is having prime importance as it expels out the vitiated doshas from the body.

Eventhough, the use of Uttara Basti has been explained in the Samanya Chikithsa of Yonivyapat & Arthava Vyapat, its efficacy in Asrigdhara is given much more importance, by all the Acharyas.

### Chikithsa soothra of Asrigdhara:

❖ *Raktayonyaamasrugvarneranubandham sameekshya cha.*

*Tataha kuryadyathadosham raktasthapana aushadham. (Cha.chi.30/86)*

❖ *Yoninam vataladyanam yaduktamiha bsheshajam: chaturnam pradaranam cha tat karayed bhishak.*

*Raktatarisarinam yaccha tatha shonitapittinam. Raktarshasam cha yat proktam bsheshajam taccha karayet. (Cha.chi.30.227)*

Charaka explains the treatment to be just like *Raktha yoni* i.e *Raktha-sthapana aushadhas* should be used after giving due consideration to the association of *doshas*.<sup>6</sup>

- Should be treated on lines of *Adhogata Rakthapitta*.<sup>7</sup>
- Treatment prescribed for *Rakthatisara*, *Rakthapitta*, *Raktharsha* should be used.<sup>8</sup>

❖ *Sarveshu garbhasravoktam pradareshu prashasyate. (A.S.U.TT.39/62)*

✓ *Garbhasrava* treatment should be used.

**The general principal treatment of *Asrigdhara* as follows:<sup>9</sup>**

- *Nidana parivarjana*
- *Dosha shodhana*
- *Dosha shamana*
- *Raktha sthapana, Raktha sangrahana*
- *Use of tiktha rasa*

**1. *Navaneetha*:**

Table. 1: Description of *Navaneetha*

Author	Rasa	Guna	Virya	Vipaka	Prabhava
Kaiyyadeva Nighantu	Madhura Amla Kashaya	Snigdha Laghu	Sheeta	Madhura	Raktha prakopahara Vata-pittahara
Raja Nighantu	Madhura	Snigdha Laghu	Sheeta	Madhura	Netra hitakara
Bhavaprakasha Nighantu	Madhura	Snigdha Laghu	Sheeta	Madhura	Raktha vikara hara
Charaka	-	-	-	-	Sangrahi, dipana, hrudya

**Drug review**

The term drug is derived from the French word "drogue" which means an herb or product that causes a change in physiology or causes changes in the pathology for the benefit of the patient. Ayurvedic literature explains the importance of the drug, as it is one of the pillars of *chikista chatushpada*. The world's oldest available written literature (Vedas) glorifies the drug by giving the status of *Bramha*. Ayurvedic literature speaks about the importance of the drug as "nothing in the world exists which does not have therapeutic utility". Based on this fact our Acharyas have given many formulations for the treatment of *Asrigdhara*.

**Selection of drugs:**

In the present clinical study, a Herbo-mineral drug called *Laghu Malini Vasantha Rasa* is selected, and the ingredients are as follows-

- *Rasaka – Rasaka (ZnO)* being *Abhava, Yashadha bhasma(Zn)* with similar properties is used as *Prathinidhi dravya*.<sup>10</sup>
- *Maricha – Piper nigrum*
- *Navaneetha(butter)*
- *Nimbu – Citrum limon*

## 2. Maricha:

Table no.2: Description of Maricha

Author	Rasa	Guna	Virya	Vipaka	Prabhava
Kaiyyadeva Nighantu	Katu	Laghu theekshna	ushna	Katu	Agnikaraka Dipana
Raja Nighantu	Katu Tiktha	Laghu theekshna	Ushna	Katu	Dipana
Bhavaprakasha Nighantu	Katu Tiktha	Laghu Theekshna	Ushna	Katu	Kapha-vatahara shoolahara
Dhanvantari Nighantu	Katu Tiktha	Laghu Theekshna	Ushna	Katu	Dipana

Maricha is included under *pippalyadi gana* in *Raja Nighantu*, under *shatapushpadi gana* in *Dhanvantari Nighantu*.

## 3. Nimbu:

Table no.3: Description of Nimbu

Author	Rasa	Guna	Virya	Vipaka	Prabhava
Kaiyyadeva Nighantu	Amla	Guru	Ushna	Amla	Kapha-vata vibhandahara
Dhanvantari Nighantu	Amla	Guru	Ushna	Amla	Vibhandahara
Bhavaprakasha Nighantu	Amla	Guru	Ushna	Amla	Dipana Pachana

Nimbu is included under *phala varga* and *amla varga* by *Brihatrayi*.

## 4. Rasaka:<sup>11</sup>

Rasaka is one among *Maharasa*.

According to *Rasa-tarangini*, Rasaka is of *sheeta virya* which pacifies the vitiated *kapha* and *pitta*, and its *karma* is *Yogavahi karma* (synergistic effect).

Rasaka is mainly indicated in *Asrigdhara*.

## 5. Yashadha:<sup>12</sup>

Yashadha and Rasaka are similar in properties, so Yashadha can be used as *prathinidhi dravya* for Rasaka as it is unavailable.

According to *Rasa-tarangini*, after *bhavana* & *marana* the obtained *bhasma* has the following properties *Rasa- Kashaya & katu*

*Virya- sheeta*

*Prabhava- netra roga hara*

*Doshagnata- kapha pitta hara*. It is very effective & subsides the vitiated *vata dosha*.

## 6. Dugdha:<sup>14</sup>

*Rasa – Madhura*

*Guna - guru* (heavy for digestion), *snigdha* (unctuous),

*Slakshna* (smoothness), *bahala* (thick)

*Virya – sheeta*

*Vipaka – madhura*

*Prabhava – jeevaniya* (promote *ojas*, *Rasayana* (rejuvenative))

*Dugdha* (milk) is given as *Anupana* (the liquid that is advised along with the medicine to enhance the

bioavailability of active principles in the body tissues) in many conditions, as it promotes easy

absorption of the main drug because of its *mrudu* (soft) and *manda*(slow) *guna* as per Acharya Charaka.

According to Bhava prakasha:

Table 4: Description of Dugdha

<b>Rasa</b>	<i>Madhura</i>
<b>Guna</b>	<i>Snigdha, sara</i>
<b>Virya</b>	<i>Sheeta</i>
<b>Vipaka</b>	<i>Madhura</i>
<b>Karma</b>	<i>Jeevanam, Brumhanam, Balyam</i>
<b>Doshagnatha</b>	<i>Vata-pitta-asruk nashaka</i>
<b>Prabhava</b>	<i>Saathmya sarva shareerinaam (habituated to every individual)</i>

*Dugdha* is mainly indicated in *yoni rogas* and *raktha pitta*.



### Preparation of drug:

*LAGHU MALINI VASANTHA RASA*<sup>13</sup> is selected for the study.

#### ➤ Ingredients

1) *Suddha Rasaka Bhasma*(Zinc oxide) – 2 parts  
*Rasaka bhasma* being *Abhava*, *Yashadha bhasma*(Zinc) with similar properties is used as *prathinidhi dravya*.

2) *Maricha choorna*(*Piper nigrum.linn*) – 1 part

#### ➤ Method of preparation

• Two parts of *suddha Yashadha bhasma* and one part of *Maricha choorna* should be macerated together with *Navaneeta*(butter) in *khalva yantra*.

• Then the mixture is triturated with *Nimbu rasa* until the unctuousity disappears.

• Later vati of 500 mg is prepared & stored in air tight container to preserve its shelf life.

The above-mentioned preparation was done in a certified pharmacy for the study's accuracy.

### Methodology (materials & methods):

The current *study* “*A CLINICAL STUDY OF LAGHU MALINI VASANTHA RASA IN ASRIGDHARA W.R.T ABNORMAL UTERINE BLEEDING*” was carried out on 30 patients attending the OPD and IPD sections of Prasoothi Tantra and Streeroga department, GAMC Bengaluru.

### SOURCE OF DATA

Patients registered from the OPD & IPD of our institution, presenting with classical features of Asrigdhara will be selected.

**SAMPLE SIZE** – 30 patients

**SAMPLING TECHNIQUE** – Simple random sampling method.

**METHOD OF COLLECTION OF DATA**

- Minimum of 30 patients suffering from AUB are selected for the study. Informed consent was taken from the patients before including them in the clinical trial.

- A special case proforma was prepared which includes detailed history taking, signs, and symptoms, etc. patients will be clinically examined, analyzed, and selected accordingly.

**INCLUSION CRITERIA**

- > Patients between 15-50 age group.
- > Patients presenting ‘prathyathma lakshana of Asrigdhara’.
- > Excessive bleeding for more than 2 consecutive cycles.

**STUDY DESIGN:**

TABLE 5

Treatment	Dose	Duration	Follow up	Study period
Laghu Malini Vasantha Rasa	1gm in divided dose.  500mg of vati, twice daily  Anupana-ksheera(milk)	30 days	Next 2 on coming cycles	90 days

- > Prolonged duration (>7days)
- > Intermenstrual bleeding.

**EXCLUSION CRITERIA**

- > Patients with systemic disorders like DM, HTN, Thyroid dysfunction, and Tuberculosis.
- > Congenital malfunctions.
- > Diagnosed cases of malignancy conditions. (uterus, cervix, endometrium)
- > Haemoglobin <6gms%
- > Patients on contraceptives.
- > Post-menopausal bleeding.

**INVESTIGATIONS**

- > Complete blood count
- > USG (if required)

**DURATION OF TREATMENT** – 30 days

Clinical findings, and symptoms before and after treatment were observed.

**ASSESSMENT CRITERIA**

Table no 6:

Duration	IMP (days)	ABL (pads/day)	Score	Grade
<5 days	25-30	1-3 pads	0	Nil
6-7 days	20-24	3-5 pads	1	Mild
8-9 days	15-19	5-8 pads	2	Moderate
>9 days	<15/irregular	>8 pads	3	Severe

IMP – Inter-menstrual Period

ABL – Amount of Blood Loss

## Observations

A total of 30 patients of *Asrigdhara* fulfilling the inclusion criteria were registered for this clinical study. The observations, results as well as statistical analysis of the present study are elaborated below:

## DISCUSSION

*Asrigdhara* is a gynaecological disorder manifesting as the combination of excessive & prolonged bleeding per vaginum with or without intermenstrual bleeding. Vitiating doshas in *Asrigdhara* manifest at the level of endometrium where the altered vascular tissue division, cell interactions, constriction & dilatation of blood vessels are due to altered functioning of *vata dosha*. Accordingly, the increased enzymatic activity & inflammatory response are due to the malfunctioning of *pitta dosha*.

As per classics, the nidanas describe in *Asrigdhara* (related to diet, physiology, psychology) distort the HPO axis in the body by depleting progesterone. In *Asrigdhara*, Acharya Charaka opines that Raktha gets aggravated both qualitatively & quantitatively (pramanathah vrudhi), reaches Garbhashaya through arthavavaha srotas. This increased vascular supply in DUB is the response of unopposed estrogen which is considered *vata vikruthi*.

The principal line of treatment in *Asrigdhara* –

- *Raktha sthambana* -To cease the excessive bleeding.
- *Dosha Shamana* - To pacify the vitiating doshas & maintain equilibrium.
- *Swasthya rakshana*-To upgrade the general health of the body.
- *Upadrava rahitha* - To avoid complications.

### PROBABLE MODE OF ACTION OF DRUG

#### 1) YASHADHA BHASMA (Zn)

Tannic acid (tannins) being the active principle in *yashadha bhasma* (*Kashaya rasa pradhana*) is responsible for vaso-constriction which weakens the unopposed estrogen thereby reducing endometrial proliferation which arrests uterine bleeding & remarkably acts as Hemostatic.

Number of Patients registered for the study - 30

The number of patients completed the study - was 30

The data recorded are presented under the following headings:

- Demographic Data
- Data related to clinical observation
- Data related to Disease

In *Asrigdhara*, the heavy menstrual flow is evident mainly due to *ushna* and *drava guna* of aggravated *pitta*. In this formulation *Yashadha* being *sheeta virya* & *Kashaya rasa pradhana* counteracts this aggravated *pitta*, which subsides the inflammation of minute blood vessels in the endometrium, & checks the proliferation by declining estrogen, & helps regulate the hormonal imbalance.

#### 2) MARICHA (Piper nigrum. linn)

*Maricha* with its *katu* rasa and *ushna virya*, does *deepana*, *vatanulomana* and clears the pathway of *apana vayu* which has been obstructed by *pitta* in *arthavavaha srotas*. It has a beneficial impact on Dysmenorrhea (colicky pain during menstruation) as a result of *shoolahara* properties.

Piperine and its compounds of *maricha* block the formation of inflammatory compounds such as thromboxane, leukotrine & prostaglandins, achieving Anti-inflammatory action & pacify pelvic congestion (high vascularity) having positive stimulating action on the reproductive system.

#### 3) NAVNEETHA (Butter)

*Navaneetha* being *Sneha dravya* with its *sangrahi karma* (pachana property) does *pachana* of *saama pitta* in *Arthava dushti*. *Bhavaprakasha* also comments that *Navaneetha* is best indicated in *raktha vikara* considering its *sheeta virya* and *raktha-pitta hara* properties.

*Bhavana* with *Navaneetha* enhances the properties of main drugs (*Yashadha* & *Maricha*) as it procures *Atisnigdha*, *madhura*, *sheethala* & *agni vardaka* properties.

#### 4) NIMBU SWARASA (Lime juice)

*Ushna*, *theekshna* and *laghu guna* of *nimbu swarasa* does *Sroto-shodhana* & clear the pathway of *apana vata*. On *bhavana* (trituration) with *Nimbu swarasa*, the compound becomes free from unctuousity and makes it more potent.

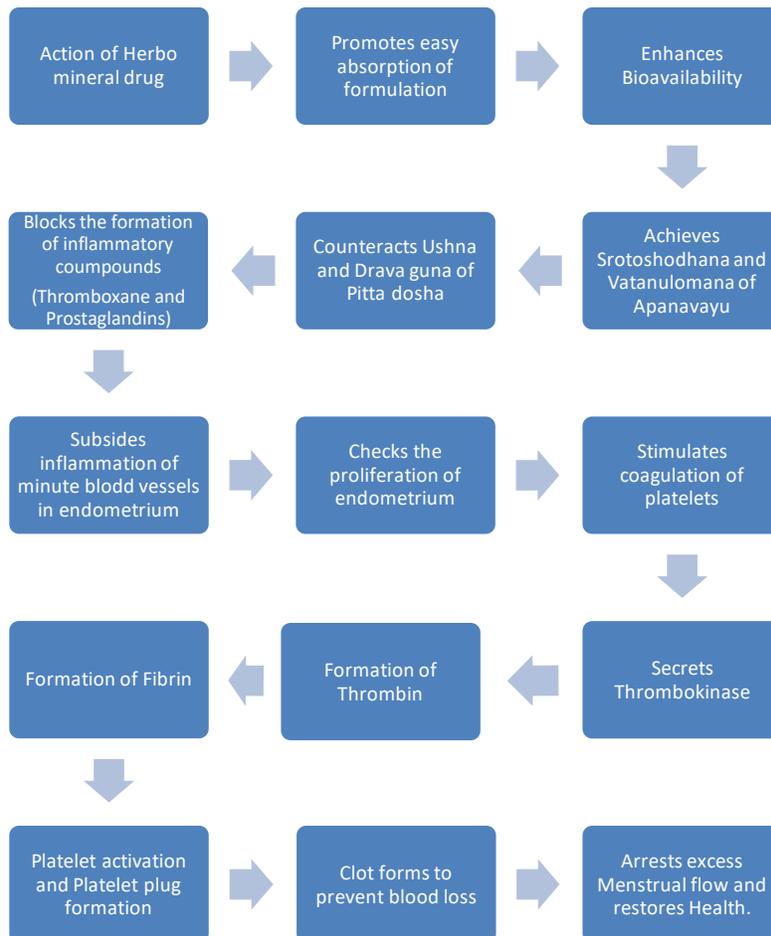
In addition *Deepana* and *pachana* properties help to enhance the metabolic progression, thereby improving the general health of the body.

**5) DUGDHA (Milk)**

*Dugdha* being *Anupana* (catalyst) for this Herbo-mineral formulation is said to be *sarva shareera saatmya*, *brumhana*, *vayasthapana* & *rasayana* with its *madhura rasa* & *sheeta virya* properties, which acts as *balya* (Boosts the Strength of the body). *Snigdha* and *sara guna* of *dugdha* promotes easy absorption of formulation which enhances the bioavailability of active principles in the body tissues.

*Bhavaprakasha* also emphasizes that *dugdha* with its immediate action possesses *Madhura, Snigdha* &

*Vata-pitta-asrik nashana* properties that are best indicated in all *Yoni Rogas* and *Raktha pitta*. In the present study, while analysing the changes before and after treatment, we could observe that 80% of patients were found betterment in the amount of blood loss. Significant recovery was ascertained in 70% of patients with the duration of menstruation. In 56.7% of patients, a marked progression was noted in the intermenstrual period & remission of pain during cycles. It has proven to have a positive regulatory effect on dysmenorrhoea. A remarkable relief has been perceived in associated symptoms like *Aruchi*, *Mala bhaddhata*, *shoola* & *Dourbalya* in all the recovered patients.



In the present study, while analysing the changes before and after treatment, we could observe that 80% of patients were found betterment in the amount of blood loss. Significant recovery was ascertained in 70% of patients with the duration of menstruation. In 56.7% of patients, a marked progression was noted in the intermenstrual period & remission of pain during cycles. It has proven to have a positive regulatory effect on dysmenorrhea.

A remarkable relief has been perceived in associated symptoms like *Aruchi*, *Mala bhaddhata*, *shoola* & *Dourbalya* in all the recovered patients.

## CONCLUSION

The study with all counts and proven results, it is crystalline that *Laghu Malini Vasantha Rasa* is a reliable cure for regulation of excessive & prolonged bleeding by controlling both the amount & duration of blood loss together with the intermenstrual period. Its an effective Herbo Mineral formulation to regulate the menstrual cycle, strengthen uterine health & reproductive system. Additionally, systemize the HPO axis by Hormonal symmetry & thereby balance the menstrual cycle. It gives advancement of life over Hormonal therapy and Surgical intervention which are the only treatment modalities specified in Modern medicine.

The study authenticates to pacify the deprave doshas (to cause deterioration/destruction of purity) & accordingly advance the general health of the body without much complications. Apart from other associated symptoms like Dysmenorrhea, Constipation, Anorexia & generalized weakness including mental unease were exceptionally recovered after treatment. Ultimately, the results of the study were found to be reassuring and acceptable. A wide range of research works and clinical studies with larger sample sizes are desired to be explored in future

## REFERENCES

1. Agnivesha: *Charaka Samhita*, Varanasi, Chaukambha Sanskrit Sansthana, reprint 2004, pp.738:643

2. Vagbhattacharya, *Ashtanga sangraha with Vidhyotini vyakhya*, Kaviraj Atridev gupta, Krishnadas academy – 1993 Varanasi, pp:946
3. Sri Madavakara, *Madhava Nidana*, with madhukosha commentary by Vijaya rakshitha and shrikanta dutta, hindi commentary by Bramhananda tripati, vol-2, reprint edition 2005, chaukambha Sanskrit prakashan, Varanasi, pp:619.
4. Agnivesha: *Charaka Samhita*, Varanasi, Chaukambha Sanskrit Sansthana, reprint 2004, pp.738:643
5. Sushruta's *Sushruta Samhitha*, Varanasi, Chaukambha Orientalia, edition reprint 1998, pp.824:343
6. Agnivesha: *Charaka Samhita*, Varanasi, Chaukambha Sanskrit Sansthana, reprint 2004, pp.738:638
7. Sushruta's *Sushruta Samhitha*, Varanasi, Chaukambha Orientalia, edition reprint 1998, pp.824:343
8. Agnivesha: *Charaka Samhita*, Varanasi, Chaukambha Sanskrit Sansthana, reprint 2004, pp.738:643
9. Nirmala joshi, *Ayurvedic concepts of Gynaecology*, pp:239:84
10. Anonymous, *AYURVEDIC FORMULARY OF INDIA*, Ministry of health and family welfare government of India, department of AYUSH, New Delhi part-1, Rasayoga 20/36, pp:708-709.
11. Pranaacharya Shri Sadanandasharma Vicharitha RA-SATARANGINI 21/194-196, Sri Haridutta shastri, Mothilal Banarasidasa, Delhi-2000
12. Pranaacharya Shri Sadanandasharma Vicharitha RA-SATARANGINI 19/120-123, Sri Haridutta shastri, Mothilal Banarasidasa, Delhi-2000
13. Vaidya Laskshmipathi Shastri, *YOGARATHNAKARA*, Jwaradhikara, edited by Bhisagrathnabrahmashankarsastri, Chowkambhaprakashan, Varanasi, reprinted 2013, pp:245
14. Agnivesha, *Charaka Samhita*, Varanasi, Chaukambha Sanskrit Sansthana, reprint 2004, suthrasthana 27/217,218

Source of Support: Nil

Conflict of Interest: None Declared

How to cite this URL: Nikitha Sirigere & Vaishnavi, I A: A Clinical Study of Laghu Malini Vasantha Rasa in Asrigdhara W.R.T. Abnormal Uterine Bleeding. International Ayurvedic Medical Journal {online} 2022 {cited July 2022} Available from:

[http://www.iamj.in/posts/images/upload/1679\\_1687.pdf](http://www.iamj.in/posts/images/upload/1679_1687.pdf)