



AN AYURVEDIC VIEW ON JATAHARINI EFFECTING MENSTRUATION- A REVIEW ARTICLE

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ABSTRACT

Menstrual disorders frequently affect the quality of life of adolescents and young adult women, especially those who suffer from dysmenorrhoea and irregular menstruation¹. The World Health Organization reports say that 18 million women aged 30–55 years perceive their menstrual bleeding to be excessive². The most common menstrual disorders were irregular frequency of menstruation (80.7%), premenstrual syndrome (54.0%), irregular duration of menstruation (43.8%), dysmenorrhoea (38.1%), Polymenorrhea (37.5%) and oligomenorrhoea (19.3%).³ **Material & Method**-Samhita, journals, articles, newspaper, survey. **Aim & Objectives** –1. To find out the *Jataharni* which effect the menstrual cycle 2. To understand them through modern science 3. To find out the Ayurvedic line of treatment. **Conclusion**-*Acharya Kashyap* minutely observes the anatomical, physiological, and psychic lakshna (characteristic) in a female child which can be correlated with the appearance of secondary sexual characters in modern science. *Acharya Kashyap* has mentioned only their characteristics not their treatment. **Discussion**- According to the critical scrutiny of the text, this category of diseases covers hormonal, infectious, genetic, social, environmental, and psychological aspects of women's life.

Keywords: *Kashyap Samhita*, Menstrual disorders, *Jataharini*

INTRODUCTION

The most common menstrual disorders were irregular frequency of menstruation (80.7%), premenstrual syndrome (54.0%), irregular duration of menstruation (43.8%), dysmenorrhoea (38.1%), polymenorrhoea (37.5%) and oligomenorrhoea (19.3%)¹. In Ayurveda, all Aacharya (A. Charaka, A. Sushruta, A. Bhavagvata dve, Shadangdhara, Bhavpraksha, Yogratanakar) mentioned 20 Yonivyapad and Ash-tartava Dusti in Stree Roga. The concept of Jataharini is only explained in Kalpasthana of Kashyap Samhita.

Classification of Jataharini :-

- On the basis of prognosis, I. *Sadhya* (curable)-11

1.1 Table of Jataharini according to Prognosis

<i>Sadhya</i>	<i>Yapya</i>	<i>Asadhya</i>
1. Shushka Revati	1. Nakini	1. Vashya -
2. Katambhara	2. Pishachi	2. Kulakshyakari
3. Pushpaghni	3. Yakshi	3. Punyajani
4. Vikuta	4. Asuri	4. Paurushadini
5. Parishruta	5. Kali	5. Sandanshi
6. Andaghi	6. Varuni	6. Karkotaki
7. Durdhara	7. Shashthi	7. Indravadava
8. Kalaratri	8. Bhiruka	8. Badavamukhi
9. Mohini	9. Yamyam	
10. Stambhani	10. Matangi	
11. Kroshana	11. Bhadrakali	
	12. Raudri	
	13. Vardhika	
	14. Chandika	
	15. Kapalmalini	
	16. Pilipicchika	

Different types of menstrual problems due to Jataharini

1. Sushka Revati-

The woman has atrophied breasts, and lean shoulders, and did not experience menarche until she became 16 years old. This is a primary amenorrhea, which is marked by the absence of menstruation by the ages of 14 if there are no secondary sex characteristics and 16 years if they are present.⁵ Low FSH and LH levels, gonadal dysgenesis, Turner's disease, androgen insensitivity syndrome, or Mullerian agenesis are a

few potential causes.

- On the basis of the mode of transmission,

I. *Daivi* (divine) 1 type,

II. *Manushi* (human) 4 types –1 *Varna* (*Brahman*, *Kshatriya*, *Vaishya*, *Kshudra*), 2. *Varnantara* (cross breed), 3. *Lingini* 4. *Karuki*

III. *Tiraschina* (animals, birds, plants) – 5 types - *Sakuni* (birds), *Chatushpada* (animals)- *Sarpa* (snakes)- *Matsi* (fishes) - *Vanaspati* (plants)³

few potential causes.

2. Katambhara-⁶

The woman is thin, feeble, and irritated throughout her life and does not menstruate. This could be a primary amenorrhea condition with a low body mass. Increases in the hormone ghrelin, which blocks the hypothalamic-pituitary-ovarian axis, can result in weight loss.⁷ Increased ghrelin levels change the amplitude of GnRH pulses, which results in less LH and FSH being released by the pituitary.⁸

3. Pushpaghni⁹: The woman remains infertile despite having periods (anovulatory cycle). Moreover, she develops black, coarse hair in an excessively masculine pattern. Anovulatory menstruation and polycystic ovarian syndrome may be responsible for this, as well as hormonal imbalances in the adrenal glands.

4. Vikruta -¹⁰

The woman experiences irregular menstruation and unrelenting exhaustion. Hypothyroidism, uterine myoma, uterine polyp, uterine infection, dysfunctional uterine haemorrhage, cervical cancer, hormonal imbalances, PCOS, and other conditions can all lead to irregular menstruation.

DIAGNOSIS: Meticulous history taking and minute observation during clinical examination is required for proper diagnosis. They might include:

- ✓ Physical examination (to evaluate any changes in the body, secondary sexual characters)
- ✓ Family history (to find out if delayed puberty might run in the family)
- ✓ Blood tests (to check hormones, infectious disease, Hb gm%, ESR, TLC, DLC, Peripheral blood film, and blood sugar.
- ✓ Hormone Assays-Serum FSH, Serum LH, Serum Prolactin, Serum Testosterone, Thyroid Profile.
- ✓ Urine routine & microscopic, urine sugar.
- ✓ Ultrasonography Scan (to see any anatomical changes)
- ✓ X-rays, usually of the hands and wrist (to detect bone age)
- ✓ MRIs of the brain (use in some cases, not routinely for any tumour)
- ✓ Endometrial Biopsy
- ✓ Karyotype study (to know the genotype, mutation, and Translocation)
- ✓ Laparoscopy
- ✓ Hysteroscopy
- ✓ Therapeutic test

TREATMENT: In Ayurveda, these are the conditions of *Kaphaprapakopa* with *Pittachaya*. Possible management is stipulated with *Nidanaparivarjan*, *Samshodhan*, and *Samshaman Chikitsa*.

Nidana Privarjan-

- Excessive intake of Pizza, Burge, Fried & cold

drinks.

- Use of packed and Refrigerated food items.
- Regular use of resident food.
- I awake late in the morning and Sleep during the Day.
- Excessive and frequent meals.

Sanshodhana Chikitsa-

तत्र सशोधनमाग्नेयानां च द्रव्याणां विधिवदुपयोगः॥(सु सू १५/१२)

- According to *Sushruta Samhita* for *Artavakshaya Samshodhana* and *Upayoga* of *Agneya Dravya* in various types.
- *Artavjanna Mahakshaya* explained by Acharya Charka can be used.
- According to *Dalhana*, *Vamana Karma* reduces *Saumya Guna*, resulting in a relative increase in *Agneya Pramana* of *Artava*.
- According to *Chakrapani*, *Samshodhana Karma* helps *Strotasa Shudhi*, *Vamana* and *Vrechana* helps *Urdhva* and *Adhah Sroto Dushti*.
- According to *Dalhana* from *Agneya Dravyas Tila*, *Masha*, *Sura shukta*, etc. should be used.
- According to *Vagbhata Pitta* and *Rakta Varddhikara Chikitsa* should be used.
- *Kashyap* has considered *Artavakshaya* as *Anuvashana Sadhya Vyadhi*.
- According to *Bhavprakash* desire of the stree (woman) suffering from *Artavkshaya* should be fulfilled.

Samshamana Chikitsa: Following *Aushadha Yoga* is recommended for *Shamana chikitsa* –

Ghrita

- *Phala Ghrita*
- *Shitakalyana Ghrita*
- *Phalakalyan Ghrita*

Vati

- *Rajah Pravartini vati*
- *Kanyalohadi vati*
- *Lashunadi Vati*
- *Nastapushpantaka Rasa*

Churna

- Shatpushpa
- Shatavari
- Bala

Asava/Arishtam

- Kumariasava
- Abhyaarishtam

DISCUSSION

The *Rituchakra* (Menarche) begins at the age of 12 years and ends (Menopause) at the age of 50 years, according to *Acharya Sushrta*.¹¹ *Vagbhat* has also given the same opinion.¹² *Acharya Kashyap* has given some different views. He has said that the menstrual cycle begins at the age of 16. At the same time, he has also said that this age of initiation of menses (menarche) gets influenced by specific *Ahara* (dietetics) and *Arogya* (health).¹³ All these are quite similar to the modern views where the age of menarche has been considered between 10 and 16 years, the peak time being 13 years. The onset of menses denotes an intact Hypothalamus-pituitary-ovarian axis, functioning ovaries, the presence of responsive endometrium to the endogenous ovarian steroids, and the presence of a patent utero-vaginal canal. The important controlling factors for the onset of puberty (and hence menarche) are genetics, nutrition, body weight, psychologic state, exposure to light, and others.¹⁴ A girl living in urban areas with good nutrition, and adequate body weight and whose mother and sisters have early menarche, starts puberty early.¹⁵ *Sushka Revati* and *Katambhara* both conditions can be understood as primary amenorrhoea where problems can be non-functional Hypothalamus Pituitary or absence of gonads. In *Pushpaghni* and *Vikuta* can be understood as irregular menses e.g hypomenorrhoea, oligomenorrhoea, menorrhagia, metrorrhagia, polymenorrhoea due to any pathology like PCOS, myoma, etc.

CONCLUSION

In *Ayurveda* mainly *Kapha* and *Vata* are responsible for *Satrotto Dushti* (*Granti, Vimargaman, Atipravrit-*

ti, and Sang) so *Samshodana* and *Samshana* are important to eliminate the root cause of the disease.

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