

A case study of Asrgdara

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Abstract

Asrgdara (1) is associated with excessive and prolonged blood loss during menstruation or even during intermenstrual period. Ayurvedic texts have described a variety of treatment options in the management of *Asrgdara*. Despite wide range of treatment and management modalities in contemporary medicine, search for safe options, which is, non-surgical, non-hormonal, effective and without any adverse effects is needed. *Goksurakashirpak* (2) is mentioned in *charaksamhita chikitsa sthana* in treatment of *Asragdara*. It is easily available, easy to consume, cost effective and no adverse effect. This article shows the case report of a 35 years old woman who was complaining of *Asrgdara*. In this study, it is observed that *goksurakashirpak* has significant relief in all the symptoms of *Asragdara*.

Keywords: Asrgdara; Goksurakashirpak; Charaksamhita; Chikitsa; Menstruation

1. Introduction

Asrgdara means heavy vaginal bleeding during or before or after menstrual period. *Asrgdara* can be correlated to Menorrhagia. Menorrhagia ⁽³⁾ denotes cyclic regular bleeding which is excessive in amount or duration. The causative factors of *Asrgdara* mentioned in *Ayurvedic* text. The prevention and management of *Asrgdara* present in *ayurvedic Samhita*. Thus this research article will show about menorrhagia with special reference to *Asrgdara*. Menorrhagia is managed with medical therapy which has lots of side effects. And if no relief then surgical intervention done. Thus due to limitation of medical therapy as well as surgical therapy of modern science, it becomes a necessity to find out an effective harmless therapy to manage Menorrhagia. Many preparations have been mentioned in our *ayurvedic samhita* for treatment of *Asrgdara*. All these medications have certain fundamental principles.

Acharya charak says the etiology of *Asrgdara* The woman who consumes excessive salty, sour, heavy, *katu, vidahi* and unctuous substances, meat of domestic, aquatic and fatty animals, curd, *sukta, mastu* and wine, aggravated *vayu*, withholding the *rakta* vitiated due to above causes increases its amount and then reaching *raja* carrying vessels (spiral arteries) of the uterus, immediately increases the amount of *raja* is due to its mixture with increased blood. This increase in menstrual blood is due to relatively more increase of *rasa*. Excessive blood is discharged hence it is known as *Asrgdara*. *Acharya Bhela* opinion that if body blood goes to abnormal passage, the women suffers from *Asrgdara*. *Acharya Harita* says that milk carrying channels of infertile women are filled with *vata* thus she has absence of milk secretion, besides she also suffers from excessive menstrual bleeding.

In pathogenesis of *Asrgdara*, *pitta* and *vattadoshas*, *rasa* and *raktadhatu* and *agnimandya* are main responsible factors. *Gokshura* drug is *madhur, virya shita*, it has deepan property, *pittarvatashamak, raktashodhak*. *Gokshura* belongs to group (*mahakashaya*) *sothahara* (anti-inflammatory), *mutravirechniya* (promotes urine flow), *krumighna* (antimicrobial). These properties are responsible to control bleeding. ⁽¹⁰⁾

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Aims and objectives

- To study the action and efficacy of Gokshura shirpaka in Asrgdara.
- To carry out a comprehensive literary study of Asrgdara.

2. Review of Literature

2.1. Definition Asrgdara.

According to *acharya Charak* due to *Pradirana* (excessive excretion) of *Raja* (menstrual blood), it is named as *Pradar* and since, there is excessive excretion of *Asruk* (menstrual blood) hence, it is known as *Asrgdara*.⁽¹⁾ According to *acharya Sushruta* the *Asrgdara* means heavy vaginal bleeding during or before or after menstrual period. Menorrhagia denotes cyclic regular bleeding which is excessive in amount or duration. It is generally caused by conditions affecting the uterus or its vascularity, no any disturbance of function of the HPO axis (hypothalamic- pituitary-ovarian axis).

2.2. Etiology and Pathology: Asrgdara

Acharya Charak⁽⁴⁾ says that women who consumes excessive salty, sour, heavy, *Katu*, *Vidahi* (producing burning) and unctuous substances, meat of fatty domestic and aquatic animals, *Krsara*, (oil made of rice and pulses), *Mastu* (curd water) and wine, her aggravated *Vayu*, withholding the *Rakta* (blood) vitiated due to above causes increases its amount and then reaching *Raja* carrying vessels (spiral arteriols) of the uterus, increases immediately the amount of *Raja* (*Artava* or menstrual blood). Because of increase in the amount of blood the *acharyas* named it as *Asrgdara*.⁽⁷⁾ *Bhel* opinions that if blood goes to abnormal passage, the woman suffers from *Asrgdara*. *Madhava nidana*, *Bhavprakasa* and *yograt- nakar* have mentioned that use of incompatible diet and wine, eating before the previous meal is digested, indigestion, abortion, excessive coitus, riding, walking, grief, weight lifting, trauma and day sleeping are the causes of *Asrgdara*.

2.3. Clinical Features: Asrgdara

Acharya Charak ⁽⁵⁾ has described the only symptom i.e. presence of excessive bleeding during menstruation. *Acharya Sushruta*⁽⁶⁾ says, that when same menstruation comes in excess amount, for prolonged period and or even without normal period of menstruation (during menstruation in excessive amount and for prolonged period, but in inter menstrual period even scanty and for a short duration), and different from the features of normal menstrual blood is known as *Asrgdara*. All types of *Asrgdara* have association of body ache and pain.

2.4. Etiology, pathology ⁽⁸⁾ and clinical features: menorrhagia

Thyroid dysfunction, Coagulopathy, Blood dyscrasia, Anovulatory-Resting endometrium, Adenomyosis, Endometriosis, Uterine fibroid, Pelvic congestion, PID.

Endometrium normally produces prostaglandins from arachidonic acid which is a fatty acid. Of these, PGE2 and PGI2 are vasodilators and antiplatelet aggregates PGF2 and thromboxane A2 causes vasoconstriction and platelet aggregates. Progesterone is responsible for secretion of PGF2a. In anovulatory cycles, the absence of progesterone and thereby of absence of PGF2a causes menorrhagia. In some cases tissue plasminogen activator (TPA) which is fibrinolytic enzyme is increased.

A normal menstrual blood loss is 50ml to 80ml, and does not exceed 100ml. In menorrhagia, the menstrual cycle is unaltered but the duration and quantity of the menstrual loss are increased

2.5. Drug review

Latin Name: TRIBULUS TERRESTRIS

Family: zygophyllales

Regional name

English: caltrops, puncture vine.

Hindi: Gokru

Tamil: Nerunjil

Kannada: Neggilu

Sanskrit: Trikata, Svadamstra, gokshura⁽⁹⁾

Marathi: Chikna, Bala, Sarate.

2.6. Chemical composition

Gokshura fruits constituents: chorogenin, diosgenin, rutin, rhamnose.

2.7. Therapeutic uses of *Gokshura* herb

Gokshura is herbs having immeasurable beneficial quality in different aspect used by our ancestor one of the uses of the *Gokshura* herb is in the treatment of menstrual disorders menorrhagia, and pain. Use of the benefits of the *Gokshura* herb when there is dysmenorrhoea, abdominal pain, and uterine spasms. The *Gokshura* herb benefits the endometrium and uterine muscles and this makes it effective as a uterine tonic for irregular menstrual cycles and miscarriage. It is also effectively used in *Ayurveda* infertility, urinary tract infection, in male it increase testosterone level. It act as natural diuretic helps in management of diabetic mellitus, gout, arthritis, obesity.

3. Material and method

A 28 year of old female patient of *Asrgdara* was selected.

3.1. *Gokshura* kshirpaka

The trail drug was selected from charakchikitsa sthan *GOKSHURA KSHIRPAKA* was given 50 ml twice a day, from 5th day of menses for 3 consecutive cycle, prepared by classical method.

4. Case study

A 35-year-old female patient approach to S.S.V.P ayurvedic college, Hatta, Tq. Vasmat, Dist. Hingoli on 27th september 2022 with complaints of heavy bleeding since last 9 days and weakness. Her marital status was 15 yrs. tubal ligation done before 7 year. Previous menstrual cycle was regular. Before she consulted Allopathy and took as per advice with no relief. The patient belongs to middle economic class, used to taking junk food (*virudhha aahar*) and sedentary habits, which helps to aggravate the disease.

In general examination Wt- 57kg, Ht- 5'5"

Menses are regular. Painful menses. LMP – 18th September 2022

Last to last menstrual period was 15 august 2022

P- 78/min, BP- 120/70 mm of Hg.

Blood investigation- Hb- 11.6 gm% T3, T4, TSH- Normal

Patient was advice to avoid salty, sour, fermented and heavy food items in diet and simultaneously to maintain stress free lifestyle, daily exercise, pranayama. Patient had regular menses with normal bleeding next cycle and follow up done for next 3 cycles.

5. Observation and result

The patient had bleeding from 9 days before treatment. After treatment, patient got relief after first cycle bleeding occurs for 5 days and also her abdominal pain reduced but weakness was present, In next cycle she got relief in all her sign and symptoms in next cycles.

6. Discussion

Etiopathology of *Asrgdara* takes place due to impure blood in coordination with vitiated *vata pitta dosha*, dislodges from its original site through vaginal route in the form of heavy bleeding, *Tribulus terrestris* has *madhura rasa, sita virya* so balance vitiated *vata pitta*. its *deepan* property help in purification of *raktadhatu*. Its *vrushya* property makes reduces uterine irregular spasm thus reduces abdominal pain. From this case study, we found *gokshurashirpak* gave *Asrgdara* effect and symptoms of lower abdominal pain were reduced.

7. Conclusion

Gokshurashirpaka is very effective in management of *asrgdara*.

Gokshurashirpak is palatable for patient.

Similar study can be conducted on large sample size and multicentric.

Good response of trial drug in the management of *Asrgdara*, opens a new chapter for further research work with larger sample and long duration of follow up.

Compliance with ethical standards

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Disclosure of conflict of interest

The author of this article does not have any conflict of interest.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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