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A REVIEW OF STANYASHAYA

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ABSTRACT

As we have seen, the human body is composed of various systems and each of which consists of millions of cells. Due to the relative stability of the cells, organ systems keep us alive and healthy. Various *Anga-Pratyanga* is described in *Ayurveda*. Among the various *Anga-Pratyanga*, *Stanashaya* is described by *Acharyas* as a receptacle for *Stana* i.e., Breast milk. Further, Acharyas have been mentioned *as 'Stanashayas'* in both males and females but in males, it remains rudimentary throughout their life. Among the prevalence of breast diseases in 2020, 2.3 million women were diagnosed with breast cancer, and 6,85,000 deaths globally. So, for the prevention and control of high-risk diseases government of India has initiated a national programme i.e., NPCDCS in 2010-11onwards. Thus, this article paves the path for the enhancement of better knowledge related to *Stanashaya*.

Keywords: *Stanyashaya*, *sira*, *dhamani*, *srotas*, *Stana roga*, mammary gland, estrogen, progesterone, hormone, etc.

INTRODUCTION

Stanyashaya is one of the *ashaya* found in females and got activated during puberty in which milk is stored and ejected in due time. They are also known as *"Payodhara"*. Embryologically, it is formed as Matraj *Bhava*[1,2]. Anatomically, it is described as Pratyanga3[,4,] *and Bahiramukha srotas*[5,6], located in the *Urah Pradesh* (Chest region). *Acharya Sushruta* states that at the age of puberty in a female child

when *shukra* appears in the body, *Yoni* and *Stana* get enlarged along with *Rajo-darshana*. It may be secondary sex characteristics where the breast gets enlarged due to the influence of hormones. *Stana* is also mentioned as *Shukravaha Srotomula* by *Acharya Sushruta*[7].

In Ayurvedic texts, *Acharyas* have explored various diseases which occur in the breast. It is seen that a fully developed breast of a woman mainly consists of skin, connective tissue, muscle fibers, lactiferous ducts, and glandular lobes or acini with an adequate number of blood vessels and nerve cells. So, diseases affecting all these anatomic components can develop in Breast. *Stana* is the seat of all types of *shotha* (inflammation), *vranas* (ulcers), *granthi, arbuda,* etc. described along with etiopathogenesis and clinical features in *Samhita granthas*. In *Sushruta Samhita, Madhava Nidana*, and *Bhava Prakash* breast diseases are described with the name of *'Stanaroga'*. These diseases occur due to the constriction of *Dhamanis, Siras,* and *Nadis* residing in the *Stana* doesn't allows the vitiated doshas to spread and cause breast diseases in childhood[8]. However, dilated vessels in pregnant or puerperal women can cause the *Stanaroga* due to penetration of *doshas*.

Nowadays, Breast diseases especially Breast Carcinoma are going to be at high risk. According to Globocon data, it may cross about 2 million by the year 2030. So, for the prevention and control of high-risk diseases government of India has initiated a national programme i.e., NPCDCS in 2010-11onwards. Thus, this article paves the path for the enhancement of better knowledge.

Aims and Objectives: To understand the anatomical consideration of *Stanayashaya* in accordance with the light of modern science.

Stanyashaya

Stanyashaya is the receptacle of *Stanya.* It is the only source of nourishment for infants. *Stana* is described under *Pratayanga* by *Acharya Charak and Sushruta*. It is present in both sex but differs in its functions because in females after attaining puberty *stana* get fully developed while in males, they remain rudimentary throughout their whole life. In *Garbhini & Sutika* stage *stana* is filled with *stanya* i.e., milk. According to *Amarkosha, Kuchauo* is synonymous with *Stana. In Rajnighantu Urasija, Vakshoj, Payodhara, and Cucha* are mentioned as synonyms for *Stana*.

Stana is *Matraj bhava,* located in *Uraha Pradesh.* In the human body, there is a total 500 *peshi.* But in the female body, twenty extra *peshis* are present. Five in each breast, which develop during Puberty[9]. But *Acharya Ghanekar* also indicates toward the fat, lactiferous glands, and lactiferous ducts consisting of some muscle fibers into their walls. With the help of these fibers, milk is ejected out. But this ductal system develops in females only during the puberty stage.

There are a total of forty *siras* in the chest, out of which fourteen *sira* are *avedhya*, two *stanyavaha dhamanis* in *Stana*[10]. There are a total of 8 *marma*s residing in the *Uraha* (Chest region) related to *Stana* which are, *Stanamula, Stanarohita, Apalapa*, and *Apasthambha*[11].

In childhood, the *dhamanis* residing in the breast are very constricted due to which vitiated *doshas* cannot penetrate to cause imbalance. In childbearing age (pregnancy or lactation period) these *dhamanis* enlarge and thus can be vitiated and cause ***stana roga*** (breast disease)[12,13].

According to *Acharya Harita, Kshirvahi nadis* are constricted into *Kanya* and *Vandhya Stri*. In *kanya,* due to *Alpa dhatu-bala kshir* formation doesn't occurs. While *Vandhya and Kshirvahi nadis* are filled with *vata*.

DISCUSSION

Anatomically, *Stanyashaya* as the *ashaya* is the reservoir of milk *(stanya)* which resembles the mammary gland or breast in females and lies in the pectoral region (*Urasa Pradesh)* over the thoracic cavity *(Uroguha).* The developed breast of women consists of the main skin, connective tissue, muscle fibres, lactiferous ducts, and glandular lobes or acini with an adequate number of blood vessels, lymph vessels, and nerves. These anatomical components have been described by various *ashayas* as *Twacha, peshi, snayu, granthi, dhamanis, nadi*, and *bahirmukh srotas.*

Although five muscles of each breast are described in ayurveda anatomically, it is observed that the breast has no muscles and lies on the pectoralis major and pectoralis minor muscles which separate them from the ribs. No specific muscles are found in female breasts than the chest muscles in males. So, there is no difference between the female and male chest muscles. Pectoralis major, Pectoralis minor, Pectoral fascia, Serratus anterior, and Subclavius are the muscles that connect the front walls of the chest with the bones of the upper arm and shoulder. The cardiovascular system provides arterial support to each breast from two main arteries; the internal mammary artery (originates the medial mammary branches) and the lateral thoracic arteries (originates lateral mammary branches) which reflects the fact of *Stanya-ashrita* two *Dhamanis* by *Acharya Sushruta*. The secretory lactiferous ducts which converge and open into the nipple resemble *Bahirmukh Srotas* present in the female breast. It is a great observation of Acharyas because it is the *Srotas* responsible for the ejaculation of milk.

Acharya Sushruta has highlighted "*Stana"* as the marker of secondary sexual characteristics. At puberty, during the cyclic changes connective tissues start producing fat deposition along with the development of the ductal system in the mammary gland, but in males, it remains rudimentary throughout life. During pregnancy, under influence of placental hormones along with Estrogen and progesterone, branching of the ductal system occurs with the development of milk alveoli in the breast i.e., responsible for milk production. But after menopause, due to the deficiency of estrogen in females, the breast starts to shrink as a result of the shrinking of ducts and mammary glands. Because estrogen keeps connective tissues of the breast hydrated and elastic leading to sagging of the breast.

The factors afflicting all the anatomical components of the breast can lead to breast diseases. According to Ayurveda, Pregnant or Puerperal women are prone to breast diseases due to the natural dilatation of orifices of *dhamanis* in the breast. It is due to hyperaemia associated with the activation of acini and ducts. Thus, the chances of inflammation or suppuration increase resulting in the highest incidence of breast diseases. The next fact emphasized by the *Acharyas* is that girls who have never conceived don't suffer from breast diseases because of the constricted or narrowed *Dhamanis,* where vitiated doshas may not spread. But usually, girls mostly suffered from traumatic inflammation followed by suppuration. Breast diseases like '*Stana-shotha'* and '*Stana-vidradhi'* described in Ayurvedic texts are the inflammation and suppuration of the breast known as Mastitis and Breast abscess. Mastitis may be cyclic due to the influence of hormones, whereas '*Stanakilaka'* is due to obstruction of vessels and ducts and the breast persists like a hard wedge troubling the body parts. *'Stanagranthi'* may resemble a cyst filled with fluid, fibroadenoma, and Neurofibroma, whereas, '*Stana Arbuda'* may be benign and malignant tumours. It is observed in modern science that Benign breast changes are more common in women of child-bearing age, peaking between the ages of 30 and 50, whereas the incidence of breast malignancy conditions peaks during post-menopause.

CONCLUSION

Stanayashaya is described as scattered by *Acharyas* but it is a highly evolved and specialized organ that makes up several pathological conditions. So, it has been taken up as a matter of exploration in terms of anatomical, physiological, and histological changes in *Stana* (mammary gland). Nowadays, Breast diseases specially Breast Carcinoma are going to be at high risk. Epidemiological studies have shown that the Globocon burden of breast carcinoma is expected to cross 2 million by the year 2030. According to Globocon data 2020 in India, Breast Carcinoma accounted for 13.5% of all carcinoma cases and 10.6% of all deaths.

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