

**MANAGEMENT OF KSHINA ARTAVA WITH SPECIAL REFERENCE TO POLYCYSTIC OVARIAN DISEASE: A REVIEW**Abdul Alim<sup>1</sup>, Yanbeni Humtsoe<sup>2</sup>, Dhiren Deka<sup>3</sup><sup>1</sup>Post Graduate Scholar, Department of Prasuti Tantra Evum Stree Roga,<sup>2</sup>Vice Principal (I/c), Professor and Head, Department of Prasuti Tantra Evum Stree Roga,<sup>3</sup>Professor and Head,

Dept. Of Swasthavritta &amp; Yoga, Government Ayurvedic College&amp;Hospital, Guwahati-14, Assam

Corresponding Author: [aalim4941@gmail.com](mailto:aalim4941@gmail.com)<https://doi.org/10.46607/iamj13p7062023>

(Published Online: September 2023)

**Open Access**

© International Ayurvedic Medical Journal, India 2023

Article Received: 01/08/2023 - Peer Reviewed: 05/09/2023 - Accepted for Publication: 17/09/2023.



Check for updates

**ABSTRACT**

For the well-being of family, society and culture, woman's health is the prime consent to be considered. Right from birth, physiological changes and development occur but remarkably during the age of puberty. Lifestyle changes, sedentary life, diet and stress alters the physiology of "Hypothalamus-Pituitary-Ovarian-Uterine axis" resulting many gynaecological problems. In Ayurveda, *Artava Dushti* is one of the causes behind it. Among the *Asta-Artava Dusti*, one of the common menstrual problems is *Kshina Artava*. Its clinical features are *Alpartava* (oligomenorrhoea/hypomenorrhoea), *Yathochitakala Artava Adarshana* (irregular menses or amenorrhoea) etc.<sup>1,2</sup> Polycystic ovarian disease is an emerging psychosomatic and lifestyle disorder. Having wide spectrum of clinical features like oligomenorrhoea, hypomenorrhoea, amenorrhoea, hirsutism etc.<sup>2,3</sup> Therefore, Polycystic ovarian disease also may be taken as one causative factor of *Kshina Artava*. In modern medicine, available symptomatic treatment doesn't correct the root cause, but it creates adverse effects like weight gain, loss of libido, headache, mood changes, etc. and also costly. There is a strong relation between obesity, stress and Polycystic ovarian disease. The science of *Yoga* works at root cause of Polycystic ovarian disease i.e., Stress and Obesity. Overall review of the available data indicates That the holistic approach is inevitable for the management of such disease.

**Key words:** *kshina artava*, *artava dushti*, *Alpartava*, *Yathochitakala artava adarshana*, *polycystic ovarian disease*

## INTRODUCTION

Ayurveda has given great importance to the “*Stree*”<sup>4</sup> and is said to be the root cause of progeny. It is assigned the name “*JAANANI*” for a woman because of her ability to bring a new life to this universe. Therefore, for the well-being of family, society and culture, woman’s health is the prime consent to be considered. Right from birth, physiological changes and development occur but remarkably during the age of puberty. Any kind of physiological and psychological imbalance can cause hindrance in the normal process. Lifestyle changes, sedentary life, diet and stress alters the physiology of “Hypothalamus-Pituitary-Ovarian-Uterine axis” resulting many gynecological problems. In Ayurveda, *Artava Dushti* is one of the causes behind it. Among the *Asta-Artava Dusti*, one of the common menstrual problems is *Kshina Artava*. Its clinical features are *Alpartava* (oligomenorrhoea/hypomenorrhoea), *Yathochitakala Artava Adarshana* (irregular menses or amenorrhoea) etc.<sup>1,2</sup> Polycystic ovarian disease is an emerging psychosomatic and lifestyle disorder. Having wide spectrum of clinical features like oligomenorrhoea, hypomenorrhoea, amenorrhoea, hirsutism etc.<sup>2,3</sup> Therefore, Polycystic ovarian disease also may be taken as one causative factor of *Kshina Artava*.

### AIMS AND OBJECTIVES:

1. Conceptual study of *kshina artava* with special reference to polycystic ovarian disease
2. Selective *yoga* therapies in the management of *kshina artava* with special reference to polycystic ovarian disease

### MATERIALS AND METHOD:

1. Ayurvedic samhitas were used to compile literary material regarding the study.
2. Citations from current gynaecology textbooks, many publications, books, and research papers have thought about gathering the literary material.

### Literature review:

### Ayurvedic view:

The term “*Artava*” has been used in Ayurveda in a broad aspect. In different contexts, it is used for menstrual blood, ovum, Hormones and sometimes it is also used for vaginal secretion after intercourse. While describing *Kshinartava*, in context of *Astartava Dusti*, all the Acharyas meant for menstrual blood by the term *Artava*. *Astartava dusti* has been mentioned by Acharya Sushruta, Acharya Vagbhat I, Vagbhatt II and Acharya Sharangdhar. *Kshinartava* is one variety of *Artava dusti* which occurs due to *Vata* and *Pitta* Dosha vitiation. It is characterized by delayed and scanty menstrual bleeding associated with pain. In Ayurvedic classics, these symptoms are also mentioned for some diseases with some little differences.

### Nirukti (Definition):

क्षीणं प्रागुक्तं पित्तमारुताभ्यां.....(Su. Sha. 2/4) आर्तवक्षये यथोचितकालादर्शनमल्पता वा योनिवेदना च ॥ (Su. Su. 15/16)

Acharya Sushruta defines *Kshinartava* as untimely or delayed menstrual bleeding, which is scanty in amount, associated with pain in *yoni* due to involvement of *Vata* and *Pitta* Dosha. Here, delayed means a duration of more than one month and scanty bleeding indicates bleeding lasts for less than 3 days<sup>10</sup>. Acharya Vagbhatt I, Vagbhatt II and Sharangdhar also opine same characteristics for *Kshinartava*.<sup>11</sup>

### Nidan (Aetiology):

सर्वेषां च व्याधीनां वातपित्तश्लेष्माण एव मूलम् ॥ (Su.Su.24/8) The root cause of all the diseases is *Vata*, *Pitta* and *Kapha*. In single or combined form, when they get imbalanced, create diseases.

Some generalized cause of *Artava Dushti* is mentioned in different classics. They are -

- i. As *Apan Vayu* is responsible for the timely excretion of *Artava*, so *Apan Vayu Dushti* leads to delayed menstrual bleeding<sup>12</sup>. Suppression of *Apan Vayu* causes *Apan Vayu Dushti*.
- ii. Only in female who have a balanced condition of *Dhatu* (*Paripurna Dhatu*), *Artava* appears.

- iii. Consumption of excessive Ushna quality of food and beverages leads to vitiation of Artava.
  - iv. Excessive medication to Mrdu Kosthi patient after doing Snehana and Swedana karma leads to Artava dusti.
  - v. Application of Nasya to Rajaswala i.e., menstruating woman, leads to menstrual disorders.
- Some other disorders related to Artava are mentioned by different Acharyas, which possess almost same clinical features as Kshinartava, or sometimes can be used synonymously. So, they share same aetiologies. They are mentioned below-

- i. Marga Avarodh of Artavavaha srota causes Aartavnash.
- ii. When Rakta Marga is obstructed by Sleshma and Vata, it results Anartava.
- iii. Rajanash can be developed by Vataavridhhi. Rajanash is included under eighty Vataja Vega.
- iv. Artava vaha Srotas are two in number. Injury to these Srotas produces Vandhyatva, Maithuna asahishnuta and Artavanaasha.
- v. The woman who is suffering from Raktakshaya and sosha, her menstrual blood cannot be seen externally.
- vi. Improper application of Snehan, Swedan and Panchakarma procedure may result as Pushpopaghata.

#### **Purvarupa:**

Purvarupa for Kshinartava has not been clearly mentioned in classics. But symptoms of Rasa Dhatu Ksaya can be considered as Purvarupa of Kshinartava. They are-<sup>82-84</sup>

- Sabda asahatva (inability to withstand even normal frequency sound)
- Hriday drava (tachycardia)
- Kampa (tremors)
- Sosha (emaciation)
- Sula (pain)
- Spandana (throbbing pulsation)
- Alpayapi ca chesta ya srama (exhaustion in little physical activity)
- Hrdpida (chest pain)
- Trisna (thirst)

#### **Rupa:**

- i. Yathochitkala adarshnam: Acharya Dalhana mentioned that normal menstruation should occur at an interval of one month and lasts for a period of three days. In Kshinartava, the interval is extended beyond one month and there is delay in the cycle.
- ii. Alpata: Menstrual flow will be scanty. In healthy woman, during Ritukala, Kapha is the predominant dosha which forms Artava. But in case of Vataavridhhi condition, due to Ruksha guna of Vayu, formation of Artava is scanty.
- iii. Yoni Vedana: The term yoni includes whole of the female reproductive tract as mentioned by different Acharyas in different contexts.

“वातादृते नास्ति रुजा।।” (Su.Sa. Su. 17/7) Without the involvement of Vata dosha, there will be no pain. As there is Vataavridhhi and Pittakshaya Avastha are there in Kshinartava, so the characteristic of the pain will be Toda, Bheda etc. Toda means striking pain or bruising pain which is constant and dull. The term Bheda comes from the ‘Bhid dhatu’ which means breaking or splitting. Bheda denotes pain which resembles the breaking up of tissues. The pain is more severe than Toda type of pain. Vataprakopa arising from Dhatuksaya causes pain due to Ruksha and Khara guna. The pain will be present till Vata is in function, i.e., for whole bleeding period.

#### **Samprapti:**

Normal menstruation is the result of

- ❖ Dhatuparipurnata: Replenishment of all the dhatus, in terms of both quality and quantity.
- ❖ Dosa samyata: Equilibrium state of tridosha.
- ❖ Normal functioning of Srotas: Rasavaha, Raktavaha and Artava vaha Srotas must have their normal functions for regular and adequate menstrual bleeding.
- Acharya Sushruta mentioned all the clinical features of Artavkshaya under Kshinartava. Artavkshaya is described as Upadhatu Ksaya. Artava is Upadhatu of Rasa. Any factor that causes Rasavaha Srota dushti may lead to abnormality in Artava.
- Dhatu Ksaya leads to Vataavridhhi. Shita and Ruksha guna of Vata prevents Artava formation

by contradicting its Agneya and Picchila property. Apan Vayu is essential for Artava pravartana, i.e., discharge of menstrual blood from Yoni. Abnormal function of Apan Vayu causes scanty or delayed menstrual bleeding.

- Ranjak Pitta acts upon Rasadhātu by doing Ranjana (colouring) converting it into Raktadhātu and further formation of menstrual blood. Abnormality in Rakta Dhātu formation leads to Artava dushti.
- Tarpak Kapha nourishes the entire body tissues, hence also forms Artava. Excessive aggravation of Vayu decreases Kledan and Snigdha property of Kapha.

#### Samprapti ghatak:

- Nidan: Guru, Shita, Snigdha ahar, Vegavidharana, Ratri jagaran etc.
- Dosa: Vata and Pitta
- Dushya: Rasa
- Srota: Rasavaha srota, Artava vaha srota
- Srota dushti: Sanga
- Adhithana: Yoni

#### Chikitsa:

याभिः क्रियाभिर्जायन्ते शरीरे धातवः समाः । सा चिकित्सा विकाराणां कर्म तत् भिषजां स्मृतम् ॥ (Ch.Su.16/34)  
Acharya Charaka defines Chikitsa as actions which bring all the Dhatus in Samavastha or balanced stat.

#### Chikitsa siddhant of Kshinartava:

- ❖ Nidan parivarjanam
- ❖ Agnideepan
- ❖ Vatadosha chikitsa
- ❖ Samshodhan Chikitsa with Agneya Dravya is beneficial, which can be explained by Vriddhi samanya Siddhant. Agneya Dravya increases menstrual blood both in terms of quality and quantity. Dalhana mentioned that Samshodhana Chikitsa for Kshinartava only indicates Vamana. Because Vamana expelled out Soumya dosha and increases Pitta, while Virechana will cause more Ksaya of Pitta.
- ❖ Rakta vardhak medicines should be used for Kshinartava, as Rakta is also Agneya in property.
- ❖ The treatment of Nasta rakta is similar to the treatment of Rakta dhātu Kshinata

**Sadhya Asadhyata (prognosis):**<sup>11</sup> There are conflicts of statements regarding the prognosis of Kshinartava. According to Acharya Sushruta and Vagbhatt I, it is a Asadhya vyadhi, whereas Vagbhatt II in Astanga Hridaya mentioned it under Sadhya Artava dushti.

**Contemporary point of view**<sup>3,5</sup> Polycystic Ovarian Disease otherwise known as Stein-Leventhal Syndrome. The exact aetiology remains unknown. Some of the well-known factors like lifestyle changes, sedentary life, diet, stress, obesity and insulin resistance is related to it. It is a heterogeneous, multisystem endocrinopathy in women of reproductive age with the ovarian expression of various metabolic disturbances and a wide spectrum of clinical features. Diagnosis of which is confirmed by The Rotterdam Criteria. It states that at least two of three criteria should be present. The criteria are-

- a. Oligo/amenorrhoea, anovulation, Infertility
- b. Hirsutism/acne
- c. Ultrasound findings.

#### PREVALENCE OF POLYCYSTIC OVARIAN DISEASE

It is becoming a common problem amongst adolescents, developing soon after puberty. Current incidence (5-15) % is increasing fast due to change in lifestyle and stress. Amongst infertile women, about (15-20) % of infertility cases are due to anovulation caused by polycystic ovarian disease.<sup>3,5</sup>

#### MANAGEMENT OF POLYCYSTIC OVARIAN DISEASE<sup>8,9</sup>

It needs individualization of the patient. It depends on her presenting symptoms like menstrual disorder, infertility, obesity, hirsutism or combined symptoms. Counseling of patient is important. Treatment is primarily targeted to correct the biochemical abnormality. Weight reduction in obese patient is the first line of treatment. BMI less than 25 improves menstrual abnormalities, hirsutism and Infertility.

- a. In case of Androgen excess oral contraceptive pills are effective.
- b. GnRH agonists--Leuprolide acetate can be used to suppress ovarian steroid production.

- c. Cyproterone acetate, Spironolactone, Ketoconazole etc are the antiandrogens can be used for management of Hirsutism.
- d. Ovulation induction is usually achieved by Clomiphene citrate.
- e. Anovulatory women with PCOS and obesity, ovulate satisfactorily when Clomiphene and Metformin are used in combination.
- f. Surgery is the alternative treatment procedure for PCOD who are resistant to medical therapy.
- g. Endoscopic cauterization or CO<sub>2</sub> Laser vaporization of multiple cysts is the better substitute of conventional wedge resection of the ovaries.

#### YOGA REVIEW:

*Yoga* is the science of life and art of living. It is India's oldest scientific, perfect spiritual discipline. *yoga* is a method of training the mind and body. It offers us simple easy remedies, techniques and methods of health and hygiene to assure physical and mental fitness with minimum time effort expense. One can live with peace and harmony. *Yoga* is the surest way of complete health. The concept of Asanas was proposed by Maharshi Patanjali in his Patanjali *Yoga Sutras* under *Astanga Yoga*. *Asana* is a posture that is steady and comfortable. It exerts special effect on different body joints, muscle, heart, digestive system, endocrine glands nervous system etc. *Pranayama* is a highly sophisticated procedure of *yoga*, where one achieves a total control over the vital force which governs the proper functioning of body and mind.

#### Role of Yoga in Polycystic ovarian disease:<sup>6,7</sup>

There is a strong relation between obesity, stress and Polycystic ovarian disease. Approximately 50-60 % of women with Polycystic ovarian disease are obese. Obesity and stress disturb normal hypothalamus-pituitary-ovarian axis leading to somatic and psychic symptoms. The science of *Yoga* works at root cause of Polycystic ovarian disease i.e., Stress and Obesity. *Yoga* is a great stress buster. It lowers the production of the stress hormone cortisol. *Yoga* strengthens the muscles, balances hormonal level and combats insulin resistance. *Yoga* along with a healthy diet helps to lose weight. The *Yoga* will be considered here are-

- a. *Bhujangasana* (Cobra Pose)-best for stress management, reduces abdominal fat and alleviate constipation.
- b. *Baddhakonasana* (Butterfly pose)-it stretches groin and inner thighs, best prenatal exercise and relieves menstrual issues, very beneficial in infertility.
- c. *Suptabaddhakonasana* (Reclined bound angle)-it stimulates general circulation and stimulates organs like ovaries etc., stretches inner thighs and groins, relieve from stress, depression and relieves the symptoms of menstruation.
- d. *Anuloma Viloma Pranayama*- it nourishes the whole body, induces tranquility, helps to improve concentration, lower the stress and anxiety.

#### DISCUSSION

The term 'Kshinartava' includes different forms of menstrual abnormalities, namely oligomenorrhoea, hypomenorrhoea etc. From the detailed review of both modern and Ayurvedic aspect of Kshinartava, it may be compared with polycystic ovarian disease based on their clinical symptoms. the pathogenesis involved in Kshinartava is Dhatu Kshyaya which effect the Artava formation functionally i.e., neuroendocrinal level as well as structurally i.e., to provide an optimal formation of secretory endometrium. This article discusses PCOS within the framework of Ayurveda. Diseases are treated more successfully when doctors understand them better. Acharya discusses therapy even though the Samhita doesn't mention PCOS. Unnamed illnesses should be categorised based on their Dosha and Dushya, and treatments should be scheduled accordingly.

#### CONCLUSION

Overall review of the available data indicates That the holistic approach is inevitable for the management of such disease.

#### REFERENCES

1. Kaviraj Ambikadutta Shastri, Sushruta Samhita, part 1, Hindi, Chaukhambha Publication, reprint-2016, Su-



- tra sthan, chapter no- 15, sloka – 12&16, pageno-76&77
2. Ayurvediya prasuti Tantra evam streeroga by Prof. Premvati Tiwari, part 2, Choukhambha Publication, chapter no-2, Page no-140.
  3. Howkins & Bourn SHAW'S Textbook of Gynaecology Edited by Sunesh Kumar Emeritus Editors VG Padubidri Shirish N Daftary, 17<sup>th</sup> edition, page no. 314.
  4. Pandit Kashinath Sastri, Dr. Gourakhnath Chaturvedi, Charaka Samhita, reprint-2020, Hindi, Choukhambha Publication, Chikitsa Sthan, chapter no-30, sloka-5 Page no-766.
  5. D. C. Dutta's Textbook of Gynaecology edited by Hiralalkonar, 7<sup>th</sup> Edition, page no. 378.
  6. "YOGA FOR POLYCYSTIC OVARIAN SYNDROME" By Hemant Bhargav, MBBS, MD (Y&R) Corresponding author Swami Vivekananda Yoga Anusandhana Samsthana (S-VYASA) University K.G. Nagar, Bengaluru, India, 2013
  7. "MANAGEMENT OF PCOS: A PSYCHOSOMATIC DISORDER BY YOGA PRACTICE" By Anjali Verma Lecturer, Department of Stree Roga and Prasooti Tantra, Himalayiya Ayurvedic College, Dehradun, Uttarakhand, India, 2015
  8. D C. Dutta's Textbook of Gynaecology volume 1, chapter 1, 5th edition 2010.
  9. Shaw's Textbook of Gynaecology, editor VG Padubidri and SN Daftary, chapter 1, 16<sup>th</sup> edition 2014
  10. SUSRUTASAMHITA OF MAHARṢI – SUŚRUTA Edited with AYURVEDA-TATTVA-SANDĪPIKĀ Hindi Commentary, Scientific Analysis, Notes etc. By KAVIRĀJA AMBIKĀDUTTA SHASTRI, A.M.S. Foreword by Dr. PRĀNAJIVANA MANEKCHANDA MEHTA M.D., M.S., F.C.P.S., F.I.C.S., Part I, publisher CHAUKHAMBHA SANSKRIT SANSTHAN, VARANAS, edition: reprint, 2016, sutrasthana, chapter 15, sloka-16, page 77
  11. Ayurvediya prasuti Tantra evam streeroga by Prof. Premvati Tiwari, part 2, Choukhambha Publication, chapter no-2, Page no-147, 148, 149
  12. SUSRUTASAMHITA OF MAHARṢI – SUŚRUTA Edited with AYURVEDA-TATTVA-SANDĪPIKĀ Hindi Commentary, Scientific Analysis, Notes etc. By KAVIRĀJA AMBIKĀDUTTA SHASTRI, A.M.S. Foreword by Dr. PRĀNAJIVANA MANEKCHANDA MEHTA M.D., M.S., F.C.P.S., F.I.C.S., Part I, publisher CHAUKHAMBHA SANSKRIT SANSTHAN, VARANAS, edition: reprint, 2016, nidana sthana, chapter 1, sloka-19, page 298.

**Source of Support: Nil**

**Conflict of Interest: None Declared**

How to cite this URL: Abdul Alim et al: Management of kṣhina artava with special reference to polycystic ovarian disease: a review. International Ayurvedic Medical Journal {online} 2023 {cited September 2023} Available from: [http://www.iamj.in/posts/images/upload/588\\_593.pdf](http://www.iamj.in/posts/images/upload/588_593.pdf)