

A COMPARATIVE CLINICAL STUDY OF KALAJAJI CHURNA AND SHATPUSHPA CHURNA IN ARTAVAKSHAYA

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ABSTRACT

Background and Objectives: Menstruation is an essential physiological function of women during their reproductive age. This involves shedding of endometrium, which was prepared to provide a bed for fertilized gamete, when fails, result into menstruation or *Masanumasika Raja Pravrutti*. Nowadays, menstrual abnormalities are very common in society. *Artavakshaya* is explained by *Acharya Sushruta* which is caused by the *Avarana* of *Kapha* over *Vata* and due to *Kshaya* of *Pitta*, characterised by reduced blood flow in amount as well as in duration and increased interval between two menstrual cycles. *Kalajaji Churna* explained in *Bhava Prakash Nighantu* and *Shatpushpa Churna* mentioned in *Kashyapa Samhita* were used here as trail and control group to see and compare their efficacy in the management of *Artavakshaya*.

Methodology: This research work was a randomized comparative clinical study of 40 patients suffering from the cardinal symptoms of *Artavakshaya*, were randomly selected in and categorized into 2 groups of 20 patients each. Group A was treated with *Kalajaji Churna* and group B with *Shatpushpa Churna* for a period of 3 consecutive menstrual cycles and follow up for further 2 cycle.

Result: Both the groups showed statistically significant results. Statistically there was no significant difference between the groups.

Conclusion: Both the drugs were statistically significant in *Artavakshaya* and statistically both the drugs were equally effective. *Kalajaji Churna* shows better result in duration of flow and amount of bleeding where as *Shatpushpa Churna* shows better result in interval between two cycles and pain.

Keywords: *Artavakshaya*, Oligomenorrhoea, Hypomenorrhoea, *Kalajaji Churna*, *Shatpushpa Churna*.

INTRODUCTION

God has gifted women with rare and unique phenomenon of giving rise to offspring. To effectively fulfil the above aim nature has conferred special anatomical and physiological characteristic in women which are collectively referred as *Streekara Bhavas*. One among them is the concept of *Raja Pravrutti* i.e. *Artava Pravrutti*¹. The normal menstruation is that which continues cyclically at interval of 21-35 days with a mean of 28 days, duration of menstruation is about 4-5 days and not associated with pain or burning sensation. *Artavakshaya* has been explained by *Sushruta* in *Dosha Dhatu Malakshaya Vridhi Vigyaniya Adhyaya*² as *Kshinartava Dusti* which is one among the *Ashtartava Dusti* described in *Samhita*³. *Artavakshaya* may be due to *Kshaya* of *Dhatu* or due to *Avarana* i.e. aggravate *Vata* and *Kapha* which will lead to *Margavarodha* of *Artavavaha Srotasa*. *Artavakshaya* is characterised by *Yathochita Kala Adarshanam*, *Alpartava* and *Yonivedana*⁴. It can be compared with oligomenorrhoea and hypomenorrhoea based on their signs and symptoms. Menstrual bleeding occurring more than 35 days apart and which remains constant at that frequency is called oligomenorrhoea⁵. And when the menstrual bleeding is unduly scanty and lasts for less than 2 days it is called hypomenorrhoea⁶. Whole menstruation cycle depends on HPO axis i.e. hypothalamic pituitary ovarian axis⁷. In *Ayurveda* both *Sodhana* and *Shaman* therapy are mentioned. As *Artavakshaya* is due to involvement of *Vata* and *Kapha*. So, *Vatashamak* and *Agneya Dravya* are the line of treatment⁸. In our classic Acharya have mentioned various *Eka Moolika Prayoga* which help in *Artavajanan*. For this clinical study *Kalajaji* which is mentioned in *Bhavprakash Nighantu*⁹ and *Shatpushpa Churna* mentioned in *Kashyapa Samhita*¹⁰ were used

here as trail and control group to see and compare their efficacy in *Artavakshaya*.

Objectives of study:

To evaluate and compare the efficacy of *Kalajaji Churna* and *Shatpushpa Churna* in the management of *Artavakshaya*.

Material and Method

Selection of Patients: 40 samples were selected randomly from OPD of PTSR dept of Alva's Ayurveda Hospital, Moodbidri, Medical camps and other referrals, irrespective of their caste, religion, income & occupation.

Drug Source – Raw material was collected from local market and *Churna* was prepared at Alvas Rasa Shastra & Bhaishajya Kalpana Laboratory

Method of Collection of Data-

A separate case Proforma was prepared with- history taking, physical signs and symptoms, necessary laboratory and other investigations.

The parameters of signs, symptoms and investigations were scored on the basis of standard method and analyzed statistically.

Design of Study: A randomized comparative clinical study

Diagnostic Criteria:

Diagnosis was based upon the presence of any two of the following criteria.

Yathochitakala Adarshanam of Artava

1. Menstrual cycle > 35 days

Alpaartavam

2. Duration of bleeding < 3 days

3. Decrease in quantity of bleeding

Yoni Vedana

4. Pain during menstruation

Inclusion Criteria:

- Age group of 16-35 years.
- Patient fulfilling with diagnostic criteria.
- Both married and unmarried

Exclusion criteria:

- Pregnant & lactating women.

- Women on OCPs, IUCD.
- Haemoglobin % is < 8 gm%.
- Women having systemic diseases which interfere with the present study.
- Women with any pelvic pathology or malignancy.
- Thyroid dysfunction.

Intervention

Table 1

Group	No. of volunteers	Yoga	Dose	Time of administration	Anupana	Duration
A	20	Kalajaji Churna	6gm BD	Before food	Ghrita	3 cycle
B	20	Shatpushpa Churna	6gm BD	Before food	Ghrita	3 cycle

Observation: On the 3rd day of each menstrual cycle during treatment.

Follow up: On the 5th day for 2 menstrual cycle after completion of treatment.

Assessment Criteria

Subjective Parameters- Pain in lower abdomen and vagina

Objective Parameters: Duration of inter menstrual cycle., Duration of flow., Amount of bleeding (no. of pads/ day). These parameters were assessed based upon scoring and analyzed statistically.

Investigations were done CBC, USG and other investigations (if necessary).

Result: The obtained data was analysed statistically by using repeated measures of anova test within the group

and Mann Whitney U test was used for comparing the group. Both the drugs were statistically significant in Artavakshaya and statistically Kalajaji churna shows better result in duration of flow and amount of bleeding where as Shatpushpa churna shows better result in interval between two cycles and pain.

Overall effect of therapy- In Group A, 3 patients (15%) had complete response, 16 patients (80%) had marked response and 1 patient (5%) had moderate response. In Group B, 6 patients (30%) had complete response, 11 patients (55%) had marked response, 2 patients (10%) had moderate response and 1 patient (5%) had mild response.

Table 2: Statistic Result

Characteristics	Group A			Group B			P value
	Mean score		% of relief	Mean score		% of relief	
	BT	AF		BT	AF		
Duration of flow	1.55	0.30	81%	1.55	0.40	74%	<0.001
Interval between two cycle	1.75	0.35	80%	1.60	0.20	88%	<0.001
Amount of bleeding	2.25	0.25	89%	2.10	0.45	79%	<0.001
Pain	1.20	0.20	83%	1.05	0.10	90%	<0.001

Table 3: overall effect of therapy after treatment 3

Response	Group A		Group B	
	No. of Subjects	%	No. of Subjects	%
Un changed	0	0%	0	0%
Mild Response	0	0%	2	10%
Moderate Response	14	70%	7	35%
Marked Response	6	30%	10	50%
Complete Response	0	0%	1	5%
Total	20	100%	20	100%

Table 4: Overall effect of therapy after following up

Response	Group A		Group B	
	No. Of Subjects	%	No. Of Subjects	%
Un changed	0	0%	0	0%
Mild Response	0	0%	1	5%
Moderate Response	1	5%	2	10%
Marked Response	16	80%	11	55%
Complete Response	3	15%	6	30%
Total	20	100%	20	100%

DISCUSSION

Discussion on Observation

Among 40 patients 40% patients (16) belongs to the age group between 16-20 years, 27.5%(11) belongs to the age group of 21-25 years, 27.5% (11) belongs to the age group of 26-30 years, 5%(2) belongs to the age group of 31-35 years. This may be because of their sedentary lifestyle. Most of the patients were staying in the hostel and nutrition was not proper hence menstrual irregularities started. Around 67.5% patients are using mixed type of diet. Mixed diet contains *Guru* and *Snigdha Guna* which act as *Nidana* for *Kapha Dusti*. Around 62.5 % among 40 patients had *Mandagni*. It may be because of improper food habits and *Akala Bhojana*, which causes *Mandagni* which in turn leads to *Artavakshaya*. Around 55 % patients were of *Vata-Kapha Prakruti*. As the disease is caused due to vitiation of *Vata* and *Kapha* obstructing the *Artavavaha Srotasa* it may affect the women with *VataKapha Prakruti* more than others.

Discussion on Result:

Based on *Rasa, Guna, Virya & Vipaka*

Kalajaji Churna contain *Katu* and *Tikta Rasa* as *Pra-dhana Rasa*. Both *Rasas* has the property of *Shroto-bhedana* and *Kaphahara*. Hence *Samprapti Vighatana* takes place by removing *Sroto Avarana* in *Artavavaha Srotas*. *Katu* and *Tikta Rasa* are *Vata-Kapha Hara* and *Pitta Vardhaka* so beneficial for *Artavajanana* due to *Ashraya Ashrayi Bhava*. *Kalajaji Churna* contain *Ruksha* and *Laghu Guna*. These qualities are *Kapha hara* and *Sroto - Shodhaka* respectively but there may be chance of *Vata Prakopa*.

Kalajaji Churna have *Ushna Virya*. Because of *Ushna Virya Artavajanana* and *Kapha Shoshana* takes place. *Katu Vipaka* helps in *Pakvashaya Shodhana* and *Kapha*

Shoshana. Thus, helping in restoration of proper function of *Apana Vayu*. *Shatpushpa Churna* has same properties as *Kalajaji Churna* except one additional *Guna* i.e. *Tikshna Guna*. This *Tikshna Guna* helps in *Vata-Kapha Shaman*. *Shatpushpa Churna* has *Bhramhna Karma* which prevent the chances of *Vata Prakopa*. *Shatpushpa Churna* shows better result on the parameter interval between two cycle and pain. This is may be because of its *Katu, Tikta Rasa* which helps in *Sroto-Bhedana* and remove the *Margaavrodha* of *Artavavaha Srotas* and *Kalajaji Churna* shows better result on the parameter amount of bleeding and duration of flow due to its *Ushna Virya* which acts as *Pitta-Vardhaka* and helps in *Artavajanana*. As per modern science Antioxidant property helps in maintaining the proper oestrogen production, ovulation and help in maintaining the luteal phase. Antioxidants also increase the anabolic activity in body hence increase the thickness of endometrium results in increasing the amount of blood loss. Antispasmodic and anti-inflammatory property helps in relieving the pain.

CONCLUSION

The main principle of management of *Artavakshaya* is *Agnivardhaka, Vata-Kapha Shamaka* and *Vatanulomaka Chikitsa*. In classics, both *Shodhana* and *Shamana Chikitsa* are described. *Shamana Chikitsa* is done by using the *Agneya Dravya* which improve the *Artavautpatti*.

Artavajanya drugs and drugs having Phytoestrogen, rich in antioxidant will give better results in treating *Artavakshaya*. Both the drugs show statistically significant effect on the management of *Artavakshaya*.

Kalajaji Churna shows better result in duration of flow and amount of bleeding where as *Shatpushpa Churna*

shows better result in interval between two cycles and pain. Thus, null hypothesis H_0 is rejected and alternate hypothesis H_3 is accepted i.e. *Kalajaji Churna* and *Shatpushpa Churna* are equally effective in *Artavakshaya*.

Shatpushpa-Satavari Kalpa Adhyaya, Sloka- 5 & 6, Page No. 185 & 18

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