

## AYURVEDIC PERSPECTIVE OF PRIMARY DYSMENORRHOEA - REVIEW ARTICLE

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## ABSTRACT

The medical term for painful period is "dysmenorrhoea". Dysmenorrhoea among adolescents is of primary in nature that is without any pelvic pathology. Among *Vimshati yonirogas* described in Ayurveda classics *Udavarta* is mentioned as a condition with painful and difficult menstruation, so it can be correlated to primary dysmenorrhoea. In this condition the *Rajas* flow in reverse direction hence the term *Udavartini*. Women feel immediate relief following discharge of menstrual blood. Normal menstrual flow is the function of *Apana vata* therefore *Apana vata dushti* can be considered as the responsible factor for *Udavarta*. Because of the high prevalence of dysmenorrhoea in adolescents and extent of its potential daily interference it should be seriously taken into consideration. *Ayurvedic* classic textbook along with available modern literatures were referred to make a clear view regarding the concept of *Udavarta* and its possible correlation with primary dysmenorrhoea.

**Keywords:** Primary dysmenorrhoea, *Udavarta*, dysmenorrhea

## INTRODUCTION

Menstruation is a natural phenomenon that occurs throughout the reproductive years of women and is a series of hormonal process a woman's body go through each month for a possible pregnancy. Some women get through their monthly periods easily with few or no concern and just cause little more than a minor inconvenience. During the menstrual period, most women experience some degree of pain and some sort of distress. As long as the *Doshas* function in their normal state and are not overshadowed by another *Dosha*, the menstrual cycle happens optimally. Pain is the most common problem women have with their period. The word dysmenorrhoea has a Greek origin, means difficult monthly flow and is now taken to mean painful menstruation. Primary dysmenorrhoea is characteristically when adolescents attain ovulatory cycles, usually within 6-12 months of menarche. Dysmenorrhoea is the most common cause of pelvic pain it results in activity restriction and thereby cause limitations on academic and sports activities, loneliness, depression, behavioural change like social withdrawal and restriction from daily activities.

Primary dysmenorrhoea is mostly confined to adolescents. Tension and anxiety during adolescence period decreases the pain threshold. Spasmodic dysmenorrhoea has certain connections with progesterone stimulus to the uterus. The pain is usually cured following pregnancy and vaginal delivery. The pain is related to dysrhythmic uterine contractions and uterine hypoxia. Behavioural and psychological factors, family history, abnormal anatomical and functional aspect of myometrium, uterine myometrial hyperactivity has been observed in cases with spasmodic dysmenorrhoea. Imbalance in the autonomic nervous control of uterine muscle and increased amount of prostaglandin causes hyperactivity of uterine muscles resulting in uterine ischemia and pain. An increase in vasopressin levels without an accompanying increase in oxytocin levels can cause uterine hyperactivity and dysrhythmic contractions results in ischemia and hypoxia which causes pain. Local myometrial ischemia caused by endothelins and PGF $2\alpha$  aggravate uterine dysperistalsis and

hyperactivity. Platelet aggravating factor and leukotrienes contribute to the uterine hypercontractility seen in primary dysmenorrhoea. The pain starts a few hours before or just with the onset of menstruation. Severe pain lasts for few hours and may extend to 24 hours, but seldom persist beyond 48 hours. The pain is spasmodic in nature and confined to lower abdomen; may radiate to the back and medial aspect of thighs. Systemic discomforts like nausea, vomiting, fatigue, diarrhoea and headache, tachycardia may occur. Vasomotor changes cause pallor, cold sweats and occasional fainting. In severe cases syncope and collapse may be associated.<sup>1</sup>

*Udavarta* is one among the twenty *Yonirogas* described in Ayurvedic classics. Painful menstruation and relief of pain after the establishment of proper menstrual flow are the characteristic feature of *Udavarta*. It can be considered as the most appropriate correlation for primary dysmenorrhoea described in modern textbooks.

### **Udavarta**

"*Udavarta Ithi Urdhwam Netham*"<sup>2</sup> - *Udavarta* word refers to upward movement. "*Vikarena Rajasa Urdhagamanat Udavarta Etyuchate*" - *Urdhwa Gama*na of *Rajas* is *Udavartini*

### **Different Concepts of Udavarta**

*Acharya Charaka* mentioned that due to movement of flatus etc. natural urges in reverse direction, the aggravated *Vayu* moving in reverse direction fills the *Yoni*. Thus, *Yoni* seized with pain initially throws or pushes the *Raja* upwards, then discharges with great difficulty.<sup>3</sup> "*Artave Sa Vimukte Tu Tat Kshanam Labhate Sukham*" which means after the proper establishment of menstrual flow the pain relieves. The duration of menstrual pain in spasmodic dysmenorrhoea is limited to 24-48 hours. *Charaka* also says that in this condition the *Raja* moves upwards or in reverse direction hence, it is termed as *Udavartini*. Both *Vagbhata*s have followed *Charaka* mentioned that due to *Vegadharana* the aggravated *Apana Vata* moving in reverse direction and the *Yoni* is seized with pain. Release of *Badha Rajo Rakta* occurs and it can be correlated to discharge of clotted menstrual blood when there is reduced fibrinolytic activity. *Susruta* in *Uttara Stana* giving a very short description about the disease, says that besides

painful frothy menstruation there are other pains of *Vata* (*Anila Vedana*). Here *Anila Vedana* can be taken as low back ache, pain radiating to legs, headache, general malaise etc. *Samanthad Vritam Varthulam Yatra Vayuna* mentioned in *Madhava Nidana* represents the overall movement of *Vayu* in the uterus. It can be related to irregular myometrial contractions, is considered as the one of the contributing factors for primary dysmenorrhoea. *Yogaratanakara* points out the association of *Kapha* in the menstrual discharge in *Udavarta* is given as *Sa Tu Yoni Kaphenaivartavam Cha Vimunchati*. If it is considered as associated with mucous membrane or endometrial fragments, it is comparable to membranous type of dysmenorrhoea.

**Nidana** (aetiology)

**Vishesha nidana of Udavarta**

*Vegadharana* is the *Vishesha nidana* responsible for *Udavarta*.<sup>5</sup> *Vegadharana* includes *Adhovatadi Vegadharana*. Expulsion of *Adhovata*, *Sukra*, *Mala*, *Mutra*, *Artava* is the function of *Apana Vata*. According to *Vagbhata Samana Vata* also carries *Dosha*, *Artava*, and *Ambu*. So, any *Nidana* which vitiate these results in *Udavarta Yonivyapat*.

**Samprapti** (Pathogenesis)

By the above mentioned *Nidana Seva* aggravation of *Vata* and derangement of *Kapha* occurs. The aggravated *Vata* especially *Apana Vata* when faces *Marga avarodha* the normal *Gati* of *Vata* is affected and results in *Vimarga gamana*. In addition to this unusual

contraction of cervix and body of uterus are associated. Along with the *Vimaragamana* of *Vata* there occurs *Vimargagamana* of *Rajas*. Due to this manifestation of severe pain and difficult discharge of frothy *Rajas* took place. All these events contributing to difficulty in expulsion of *Rajas* or painful expulsion of *Rajas*.

Here there is *Srotodushti* and *Srotas* involved is *Artavavaha Srotas*. Two types of *Srotodushti* is there *Vimargagamana*, that is the *Artava* moving in the reverse direction and the *Sanga* as the menstrual blood is directed in the reverse way, it stays longer in the *Yoni* and discharged with difficulty.

**Samprapti Ghatakas**

*Dosha - Vata, Kapha as Anubhanda dosha (Vata – Vyana, Apana,*

*Pitta - Ranjaka, Pachaka*

*Doosha - Rasa, Rakta,*

*Srotas - Artavavaha Srotas*

*Srotodushti prakara - Sanga, Vimargagamana*

*Roga marga - Abhyantara*

*Prabhava sthana - Pakwasaya*

*Sthana samsraya - Garbhasaya*

*Vyakta sthana - Garbhasaya*

**Purvarupa**

Few hours or a day prior to menstruation slight low back ache or lower abdominal pain manifest as *Purvarupa*.

## Rupa

<i>Rajakrichrata</i> <sup>6</sup>	Difficult discharge of menstrual blood
<i>Artave Sa Vimukte Tu Tatksanam Labhate Sukham</i> <sup>7</sup> –	Immediate relief following discharge
<i>Phenila Artavam</i> <sup>8</sup>	Frothy menstrual blood
<i>Anila Vedana</i> <sup>9</sup>	Other pains of <i>Vata</i> like malaise, body ache
<i>Kapha Samsrishta Artava</i> <sup>10</sup>	discharge of menstrual blood with <i>Kapha</i>
<i>Badham Phenilam Phenayuktam Rajo Raktam</i> <sup>11</sup>	Discharge of clots along with menstrual blood
<i>Samanthat Vritam Varthulam Yatra Vayuna Sa Thadha</i> <sup>12</sup>	irregular uterine contractions due to all around movement of <i>Vayu</i>
<i>Kaphenaivam Artavam Cha Munjati</i>	difficult discharge of menstrual blood with <i>Kapha</i> .

**Upasaya (Relieving factors)**

- *Vatanulomana Aharas*
- *Vatanulomana Viharas*
- *Bahya Ushna Prayoga* on lower abdomen

**Anupasaya (Aggravating factors)**

- *Vata Prakopa Aharas*
- *Vata Prakopa Viharas*

## Differential Diagnosis

Among *Yonirogas* mentioned by different *Acharyas*, pain associated conditions are seen in the following *Yonirogas*.

1. *Vatiki*, 2. *Vataja Artavadushti*, 3. *Vatika asrigdara*, 4. *Paripluta*, 5. *Sannipatiki yoni vyapat*, 6. *Suchimukhi*, 7. *Antarmukhi*, 8. *Vipluta*.

*Kastartava* is also found in *Vatiki*, *Vataja artavadushti*, *Sannipatiki*, *Antarmukhi*, *Suchimukhi*, *Vipluta* etc.

## Upadrava

As specific *Upadravas* of *Udavarta* are not mentioned in classics, those mentioned for *Yoni vyapath* can be considered. Thus *Pradara*, *Gulma*, *Arshas*, *Vandhyatwa* etc. can be considered as *Upadravas*.

## Sadhyasadyata

In classics *Udavarta* is described as a *Vatika yoni vyapat*, since it is *Eka Doshaja*, *Udavarta* can be considered as a *Sadhyaroga*.

## Chikitsa

As *Vata Vaigunya* is the root cause of *Udavarta* correction of vitiated *Vata* and removal of the cause are the treatment principle to be adopted in *Udavarta chikitsa*.

## Specific Treatment

*Snehana* with *Trivrita sneha* (mixture of *Grita*, *Taila*, *Vasa*), *Swedana*, use of *Gramya*, *Anupa*, *Audaka mamsa rasa*, *Vasti* and *Pana* of *Ksheera* prepared with *Dasamula*, *Anuvasana vasti* and *Uttara vasti* with *Trivrita sneha*<sup>13</sup>. In *Astanga samgraha* it is mentioned that *Vatika yonirogas* including *Udavarta* all *Vatahara upakrama* should be done. *Yoni pichu* with *Taila* made up of *Kushta*, *Tagara*, *Devadaru*, *Vartakini* and *Saindhava*.<sup>14</sup> Medicated oil prepared with decoction of *Rasna*, *Malati*, *Chinnaruha*, *Madhuka*, *Bala*, *Vyaghri*, *Devadaru*, roots of *Chitraka*, *Yuthika* each one *Karsa*, one *Prastha* of oil, cows urine and two parts of cows-milk. Diaper soaked in this oil and put into vagina relieves the pains caused by *Anila*.<sup>15</sup>

## Samanya Chikitsa

General principles of treatment

- *Snehana* with *Sukumara Ghrita*
- *Swedana*
- *Virechana* - It is the most appropriate *Shodhana* as *Apanavata Vaigunya* is the root cause.

- *Vasti* can be administered using *Saptasaram kashaya*, *Sukumara Ghrita Satapushpakalka* combination.
- *Uttara vasti*- It helps in removing the blockage of channels, *Vata Samana* and *Brahmana* to *Garbhaya*. *Sukumaram Ghritam*, *Phalasarpi* are some of the *Yogas* used for administration of *Uttara vasti*
- *Vata Samana Pralepa*, *Parisheka*, *Avagaha*, *Pichu* etc. can be administered according to the condition of *Doshas*.
- *Snigdha*, *Ushna*, *Amla*, *Lavana Dravyas* should be used for the relief of menstrual disorders from *Vata*.
- For *Avrita Apana Vayu*, treatment should be *Ag-nideepaka*, *Vatanulomana*, and *Pakvasaya Shudhikara*.

## Shamana yogas

*Saptasaram Kasayam*, *Sukumaram Kasayam*, *Dhanwantaram Kasayam*, *Maharasnadi Kasayam*, *Rasna Swadamstradi Kseerapakam*, *Pachottikoovaladi Kasayam*, *Hinguvachadi Churnam*, *Pushyanugam Churnam*, *Sukumara Ghritam*, *Phala Sarpi*, *Kumaryasvam*, *Asokarishtam*, *Rajapravartini Vati*, *Dhanwantaram Gulika*

## External medicines

*Saindhavadi Taila Pichu*, *Guduchyadi Taila Pichu*, *Dhatakyadi Taila Pichu*, *Palasha Niruha Vasti*, *Shatavaryadi Anuvasana Vasti*, *Guduchyadi Rasayanika Vasti*, *Baladi Yamaka Anuvasana Vasti*, *Shatavaryadi Rasayana Vasti*, *Mushaka Taila Pichu*

## Yogasanans

*Asanas* found to be effective in dysmenorrhoea are *Halasana*, *Sarvangasana*, *Bhujangasana*, *Ardhamatsyendrasana* and *Pranayama* like *Nadishodana* and relaxation technique like *Shavasana*. It increases the circulation of blood and flow of vital energy to reproductive organs and establishes balance among hormones regulating menstruation.<sup>16</sup>

## Pathya-Apathya

General *Pathya-Apathyas* mentioned for *Yoni rogas* can be consider for *Udavarta yonivyapat* also.

## DISCUSSION

*Samanya nidana* of *Yonirogas* like *Mithya achara Pradushtartava*, *Beeja Dosha* and *Daiva* can also be included as the cause of *Udavarta*. *Mithya aharas* like *Alpa Ruksha Sushka Ahara*, *Athyasana*, *Vvshama Asana*, *Virudha Ahara*, *Vatala Aharas* and *Akala bhajana* causes vitiation of *Vata*. There is significant relation between dysmenorrhoea and nutrition. Dysmenorrhoea is considerably higher in girls who are consistently eating fast food. Junk foods lack macronutrients and are rich in saturated fatty acids. These acids affect the metabolism of progesterone in menstrual cycle, which might be responsible for triggering dysmenorrhoea. In short, the *Ahara* consumed must be *Hita* for maintaining the *Doshas* in equilibrium and thereby the *Aroga avastha* of the reproductive system is assured.

*Viharas* include different types of lifestyle (dos and don'ts) as suggested in Ayurveda. *Mithya viharas* include *Vegadharana*, *Ativyavaya*, and coitus in improper posture or with *Apadravyas*. Abstinence from following proper *Ritumati Charya* and indulging in strenuous activities especially during the menstrual period may predispose dysmenorrhoea. Sedentary lifestyle, and suppression of natural urges especially in students and working women are commonly seen *Mithya viharas*. *Vegadharana* causes *Vata* vitiation and the vitiated *Vata* causes the vitiation of other two *Doshas* also. Among these causes sedentary lifestyle is *Abhishyandi* in nature and cause *Kapha Dushti*.

*Ratrijagarana* (night awakening) one *Mithya vihara* followed by students. It leads to *Vata prakopa* and *Agni Dushti*. Wakefulness in night causes disturbance in the activity of digestive enzymes result in indigestion. Day time sleep is *Abhishyandi* and causes *Tridosha dushti* according to *Susruta* and *Kapha dushti* and physiological reduction of *Pitta* according to *Charaka*. According to research, daytime sleep disturbs the daily activities of digestive enzymes. So, the derangement of sleeping patterns result in *Agni Dushti* and *Dosha dushti*. *Shoka*, *Bhee*, *Atichinta*, *Krodha* are the *Manasika bhavas* which causes *Vata Kopa*.

Stress and strain which are the result of present-day life is one of the risk factors of primary dysmenorrhoea. In classics these are the known causes of vitiation of *Vata*.

Due to hormonal changes adolescents tend to have more intense and wide-ranging emotions than children or adults. Increased pain sensation during the stressful condition is due to decrease in the level of testosterone, increase in cortisol level and activation of sympathetic nervous system. In conclusion, stress increases the activities of the hypothalamic- pituitary-adrenal axis and decreases hypothalamic-pituitary –gonadal axis activity and thereby increase in pain perception. Social withdrawal due to depressed mood could be yet another reason for the increased severity of the condition.

*Pradushtartava: Artava*, if taken as ovarian hormones in ovulatory cycle, they influence the release of prostaglandin and vasopressin. These hormones also modulate the sensitivity of uterus to these hormones and other factors which result in dysmenorrhoea. While considering primary dysmenorrhoea it can be taken as the hormonal imbalance especially in the levels of progesterone and prostaglandins. Prostaglandins are secreted under the influence of progesterone. So, variation in progesterone level causes increased prostaglandin synthesis and uterine contractions.

*Beeja dosha*: Congenital structural anomalies of genital tract and familial tendency of dysmenorrhoea can be taken under the heading *Beeja Dosha*. Functional abnormalities like cervical stenosis, uterine hypoplasia, uterine myometrial hyperactivity and hyperstimulation of nerve endings supplying uterine muscles can be considered due to *Beeja Dushti*.

*Daiva* means unknown or idiopathic causes: The exact cause of the disorder is not completely understood. However, there are many known factors that play a significant role in the pathogenesis of primary dysmenorrhoea. It is caused by myometrial activity resulting in uterine ischemia causing pain and this myometrial activity is modulated by prostaglandin synthesis. It is postulated that certain unknown factors may play a role in alteration in blood circulation and myometrial contraction.

### **Role of *Vata dosha* in *Udavarta yoni vyapat***

To understand the pathogenesis of this disorder understanding the role of *Vata Dosha* is inevitable. Menstrual bleeding is a function of *Apana Vata*. *Apana Vata* assists in all excretory activities such as passing of stool,



and urine, ejaculation of semen, natural delivery of fetus. *Artava* (menstrual blood) gets excreted each month cyclically in women, comes under *Apana Vata* activity. Classics have mentioned location of *Apana Vata* as lower back, urinary bladder, genital tract and thighs. Obstruction to the outflow of blood by stenosis of internal os causes retention of menstrual blood and sets up irregular, spasmodic and painful menstruation. As per Ayurveda this obstruction is caused due to *Vata*. While considering the etiopathogenesis of primary dysmenorrhoea pain is related to dysrhythmic uterine contractions. Dysperistalsis and hyperactivity of the uterine junctional zone is another factor involved. Over activity of sympathetic nerve and hypertonicity of circular fibres of isthmus also contributing primary dysmenorrhoea. These factors also pointing to the involvement of *Vata dosha*.

#### Role of *Samprapti ghatakas* in manifestation of disease

*Vegadharana* can be considered as the *Vishesh Ni-dana* for *Udavarta*. Along with this intake of *Vata Kopa Ahara Vihara* leads to *Vata Kopa* especially *Apana Vata*. The derangement of *Kapha* occurs as *Anubandha Dosha Dushti*. Deranged *Apana Vata* causes *Sanga* and *Vimargagamana* in *Artavavaha srotases* and *Sthana Samsraya* in *Yoni Garbhasaya*. Due to vitiation of *Apana Vata*, *Aakunjana* and *Prasarana* does not takes place properly. This can be taken as the *dysrhythmia* of uterine muscles which will hinder the proper flow of menstrual blood leading to *Rajakrichrata*. Besides this the main clinical feature of *Udavarta* is pain caused by the *Viloma Gati* of *Vata* and *Artava*. Here *Vata vaigunya* occurring either by *Margavarodha* i.e. anatomical or physiological obstruction or *Doshavrita Margatwam* which results in *Sanga* and *Vimargagamana* in the *Artavavaha Srotas* which in turn leads to painful menstruation or *Udavarta*.

Few hours prior to menstruation slight low backache and lower abdominal pain manifest as *Purvarupa*. *Viloma Gati* of *Vata* and *Rajas* results in the manifestation of *Rupa* of *Udavarta Yoni Vyapat* such as severe *Ruja* during menstruation, *Rajakrichrata*, *Phenila Artavam*, *Kapha Samsrishta Artava*, *Badha Rajas*, *Any*

*Vata Vedana*. Associated gastrointestinal and neurological symptoms may be due to deranged or decreased activity of *Pitta* and *Vata Kopa*. These *Lakshanas* starts along with the initiation of menstruation and sustains for 1-3 days depends on the type and degree of *Dosha Dushti*, with individual variations. A feeling of immediate relief following the proper flow of menstrual blood.

#### CONCLUSION

- *Udavarta* mainly affecting the females of adolescence period and late twenties, especially unmarried and nulliparous females.
- *Udavarta* has a positive familial background.
- Decreased *Satwabala* and anxious or stressed-out mental status are the factors contributing to worsen the agony caused by *Udavarta*.
- *Vegadharana* and *Mithya Ahara Vihara* causes *Udavarta*.
- Vitiated *Apana Vayu* is the causative factor for *Udavarta*, the *Viloma Gati* of *Apana Vata* associated with *Artava* causes pain.
- *Vatanulomana*, *Shoola Hara*, *Vata Kaphahara*, *Sophahara*, *Srotovishodana* are the properties of the drug doing *Samprapti Vighatana* and thereby curing *Udavarta*.

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