ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

RAJASWALA PARICHARYA AND MENSTRUAL HEALTH: AN AYURVEDIC FRAMEWORK WITH CONTEMPORARY RELEVANCE

Dr. Hitha M K [1], Dr. Sudheendra G Nawale[2], Dr. Venkatakrishna K V[3]

[1]*Third Year Post Graduate Scholar, Department of Swasthavritta and Yoga, Government Ayurveda Medical College, Mysuru*

[2]*Professor, Department of Swasthavritta and Yoga, Government Ayurveda Medical College, Mysuru*

[3]*Professor and HOD, Department of Swasthavritta and Yoga, Government Ayurveda Medical College, Mysuru*

ABSTRACT

Ayurveda describes Rajaswala Paricharya as a set of dietary, behavioural, and lifestyle guidelines for women during menstruation. These recommendations aim to preserve reproductive health, maintain hormonal balance, and prevent menstrual irregularities. In modern society, however, this regimen is often overlooked. As a result, women continue to face problems such as dysmenorrhea, irregular cycles, and fertility-related concerns, which are further aggravated by stress, improper diet, and lack of rest.

Aim: *To evaluates the role of Rajaswala Paricharya in promoting menstrual and reproductive wellness, and its relevance in present lifestyles.*

Methods: *References from Ayurvedic classics were reviewed and correlated with modern scientific studies on menstruation, hormonal changes, and reproductive physiology.*

Results: *The analysis showed that Rajaswala Paricharya emphasizes rest, light and easily digestible food, abstinence from strenuous activity, and avoidance of certain practices like day sleep and excessive exertion. Neglect of these guidelines may lead to menstrual irregularities, reduced fertility, and pregnancy complications. Modern evidence supports many of these practices. For example, abstinence during menstruation lowers the risk of infection, and dietary recommendations such as consumption of barley and milk-based preparations are beneficial for uterine and hormonal health.*

Conclusion: *Rajaswala Paricharya provides a preventive and holistic framework for menstrual care. By adapting its principles to contemporary lifestyles, it can support reproductive health and reduce menstrual disorders. Further clinical studies are needed for wider acceptance and application.*

KEYWORDS: *Ayurveda, Menstrual health, Rajaswala Paricharya, Reproductive wellness*

INTRODUCTION

Menstrual health is increasingly recognized as a public health priority, with implications for women's well-being, fertility, and quality of life worldwide. Despite advances in menstrual hygiene and reproductive education, many women continue to experience menstrual disorders, highlighting the need to revisit holistic approaches to care.

In Ayurveda, the menstruating woman is termed *Rajaswala*, and the regimen or code of conduct advised during this phase is known as *Rajaswala Paricharya*[1]—a set of dietary, behavioural, and lifestyle modifications intended to preserve reproductive wellness, support hormonal balance, and promote the formation of *Shuddha Beeja* (healthy ovum)[2].

Ayurveda describes a woman's life in three primary phases: *Bala* (childhood), *Rajaswala* (reproductive age), and *Vriddha* (post-reproductive age). Among these, the *Rajaswala* phase is most influential in determining fertility and progeny. *Rajaswala Paricharya* is traditionally regarded as crucial during this time, offering a framework to navigate the physiological and psychological fluctuations associated with menstruation.

Despite its significance, *Rajaswala Paricharya* is often neglected in modern society. Current public health initiatives by organizations like WHO, UNICEF, and the Government of India emphasize menstrual hygiene and reproductive education but rarely incorporate the behavioural and dietary disciplines prescribed in Ayurveda. Media portrayals, including sanitary napkin advertisements, often encourage physical exertion during menstruation without addressing the body's need for rest and regeneration[3].

This review explores the Ayurvedic guidelines of *Rajaswala Paricharya*, drawing from classical texts and modern scientific research. It highlights the potential of these practices in preventing gynecological disorders, supporting fertility, and improving overall reproductive health, aiming to reconnect traditional wisdom with contemporary healthcare.

AIM

To evaluate and validate the effect of *Rajaswala paricharya* in promoting female reproductive health and to assess its relevance in the prevention of menstrual and gynaecological disorders.

OBJECTIVES

- To critically review the classical Ayurvedic guidelines of *Rajaswala Paricharya* as described by various Acharyas.

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

- To correlate Ayurvedic principles of menstrual health with modern scientific perspectives.
- To explore and propose possible modifications of *Rajaswala Paricharya* for applicability in contemporary lifestyles.

MATERIALS AND METHODS

Relevant references were collected from Ayurvedic classics, peer-reviewed journals, and modern scientific publications to critically analyse the concept of *Rajaswala Paricharya* and its relevance in menstrual health.

Ayurveda divides entire monthly cycle into three *kalas* (phases)[4]:

- ***Rutu kala*** – corresponds to the proliferative and ovulatory phase (5–16 days), dominated by *Kapha dosha,* which is responsible for regeneration and growth.
- ***Rutuvyatita kala*** – corresponds to the secretory phase (17–28 days), dominated by *Pitta dosha*, which is responsible for transformation and metabolism.
- ***Rajasrava kala*** – corresponds to menstruation (3–7 days), dominated by *Vata dosha,* which is responsible for elimination and movement.

Table No. 01*: Rajaswala paricharya* according to different Samhitas

Samhita	Duration	Key Observances	Dietary Guidelines	Contraindications
Charaka Samhita[5]	3 nights	*Brahmacharini* (follow celibacy), *Adha Shayini* (sleeping on the ground)	*Panibhyam annam ajarjara pathrat bhunjana* (Eating food with hands in an unbroken vessel)	Avoid *Mrija* (use of cosmetics/adornments)
Sushruta Samhita[6]	3 days	*Brahmacharini*, sleeping on *darbha* grass mat	*Havishya* taken in palm, leaf, or clay bowl	Avoid *Divaswapna* (Day-sleep), *Anjana* (Collyrium), *Ashrupata* (Crying), *Anulepa* (Applying paste), *Abhyanga* (Oil massage), *Nakha chedana* (Nail-cutting), *Pradhavana* (Running), *Hasana* (Excessive laughing), *Kathana* (Excessive talking), *Ati shabda shravana* (Loud-sound listening), *Avalekhana* (Combing), *Anila* (Exposure to wind), *Ayasa* (Exertion)
Ashtanga Hridaya[7]	3 days	*Brahmacharini*, sleeping on *darbha* grass mat	Small quantity of milk preparations, *yavaka* (barley) in leaf, clay bowl or hand.	Avoid *Mrija* and *Alankara*
Ashtanga Sangraha[8]	3 nights	*Brahmacharini*, sleeping on *darbha* grass mat	Small quantity of *yavaka*, *payasa* in palm, leaf, or clay bowl.	Avoid *Snanadi alankara* (Bath & Adornment), *teekshna, ushna, amla, lavana* (pungent, sour, salty, hot foods)

RESULT

Analysis of classical Ayurvedic texts and modern literature revealed that *Rajaswala Paricharya* offers a comprehensive framework for menstrual care through specific guidelines related to diet, activity, and behaviour. These practices are described to stabilize hormonal fluctuations, support digestive strength, and safeguard reproductive health during menstruation. Classical sources emphasize that neglect of those observances may contribute to menstrual irregularities, infertility, or even congenital abnormalities in future progeny.

Scientific evidence supports several Ayurvedic recommendations, such as avoiding excessive physical exertion, limiting sexual activity, and following a light, warm, nourishing diet. These guidelines align with modern understanding of physiological vulnerability during menstruation. When adapted to contemporary lifestyle, *Rajaswala Paricharya* can function as a valuable integrative approach for enhancing reproductive wellness and preventing gynecological disorders.

DISCUSSION

The increasing prevalence of menstrual disorders and hormonal imbalances highlights the need to revisit time-tested practices such as *Rajaswala Paricharya*. Understanding its physiological basis through the lens of modern science can help develop integrative strategies for reproductive health.

SCIENTIFIC VALIDATION OF *RAJASWALA PARICHARYA*

a) Brahmacharini

- A study found that women with infertility who engaged in sexual intercourse during menstruation were more likely to have endometriosis than those who abstained[9].
- During menstruation, vaginal pH increases, the cervix remains slightly dilated, and the endometrium is shed. This creates a window of vulnerability to yeast

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

infections, sexually transmitted diseases, and ascending microbial infections.

b) ***Havishya bhojana*** (*Saghrita Shalyodana, Ksheeravikriti, Yavanna* – food preparations from rice, milk, barley)
- *Yava* (Barley) – It improves bowel health, reduces risk of metabolic syndrome, and accelerates wound healing. Beta-glucans in barley enhance immunity. [10,11]
- *Shali* (Rice) - It contains some amount of nitric oxide which improves the blood flow to the uterus.[12]
- *Ksheeravikriti* (Dairy foods)– It improves the reproductive health specially in conditions that involve hormonal imbalance. A study has found that dairy food reduces the risk of endometriosis and uterine leiomyomata.[13]

c) **Consumption of food in unbroken clay vessels**
- Clay vessels possess alkaline properties that balance dietary acids and aid digestion, which is relatively weak during menstruation.[14]
- It exhibits antibacterial effect.[15]
- Clay is free from synthetic chemicals (unlike plastics or some metal cookware), thereby reducing exposure to endocrine-disrupting compounds.[16]
- Thermal properties of clay help preserve nutrients and promote gentle digestion, indirectly supporting hormonal balance. [17]

d) Avoidance of *teekshna, ushna, amla, lavana ahara*
- A study has shown that frequent fast-food consumption correlates with increased menstrual distress symptoms.[18]

e) ***Darbha samstarashayini*** (Sleeping on *Darbha* grass mat)
- Traditionally, *Darbha* is described to conserve vital energy. Experimental studies suggest it may exhibit antibacterial, antioxidant, and hydrophobic properties, and has been reported to absorb certain radiations. [19]

f) Avoidance of *Snana*
- After ovulation, basal body temperature declines with menstruation due to estrogen withdrawal. Sudden hot or cold baths may disrupt thermoregulation.
- Cold baths can cause uterine muscle contractions and cramps, while excessively hot baths may dilate blood vessels and increase menstrual bleeding, potentially worsening anaemia.
- Prolonged hot bathing may also lower blood pressure, leading to fatigue.
- Since the cervical os is slightly open, use of unclean water sources during menstruation may increase infection risk.
- Vigorous bathing practices or oil massage may overstimulate the body, leading to further depletion during menstruation.

g) Avoidance of *Ativyayama*
- Intense physical exercise has been linked to luteal phase defects, oligomenorrhea, and amenorrhea.[20]

h) Avoidance of *Diwaswapna*
- A survey reported that women with excessive day sleep were more likely to experience premenstrual syndrome.[21]

i) **Avoidance of *Abhyanga, Udvartana* and *Lepana***
- During menstruation, excretion of metabolic by-products occurs through sweat. Oil massage or external applications may interfere with this natural elimination process.

j) Avoidance of *Anjana* and Ornaments
- *Anjana* is traditionally used for cooling; however, during menstruation, optimal *Pitta* activity is necessary for proper menstrual flow. Hence, collyrium and even cooling herbs like henna are avoided to prevent reduced blood flow.
- Avoiding cosmetics and ornaments also reduces sexual stimulation and arousal, in line with the practice of celibacy during this period.

RAJASWALA PARICHARYA IN COMPARATIVE PERSPECTIVE:[22]

Rajaswala Paricharya can be better understood when compared with other conditions described in Ayurveda. It can be explained under three perspectives:

a) A person who has undergone *Shodhana* (purificatory) procedure.
b) A person with decreased *Agni* (digestive capacity).
c) A person with a *Vrana* (wound).

a) A person who has undergone *Shodhana* procedure. Menstruation can be considered a naturally occurring *Shodhana* process which occurs every month during fertile period of women. It is explained that a person who has undergone *Shodhana* should avoid *Ashtamahadoshakara bhavas*. The restrictions advised in *Rajaswala Paricharya* are closely parallel to these.

Table No. 02: Similarities between *Ashtamahadoshakara bhavas* and *Rajaswala Paricharya*

Ashtamahadoshakara bhavas	***Rajaswala paricharya***
Uchhairbhashya (speaking loudly)	Avoid *Ati kathana* (excessive talking)
Rathakshobha (travel in vehicles)	Avoid *Pradhavana* (excessive running*) Anilaayasa sevana* (exposure to breeze and exertion)
Ati chankramana (excessive walking)	
Ati asana (prolonged sitting)	-
Ajirna bhojana (eating in indigestion)	*Sthoka anna sevena* (Take only light, easily digestible food)
Ahitha bhojana (unwholesome food)	*Hitakara ahara* (wholesome food), Intake of *Havishya*
Diwaswapna (day sleep)	Avoid *Diwaswapna*
Maithuna (sexual intercourse)	Avoid *Maithuna*

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

Thus, a menstruating woman is advised to observe similar restrictions as a person who has undergone *Shodhana* procedure.

b) A person with decreased *Agni*

During menstruation the *Agni* is physiologically diminished. *Agni* of a person is decreased during or after *Shodhana* procedures like *Vamana* and *Virechana.* Hence, diet during menstruation should be *laghu* (light) and support *Dipana* and *Pachana* (enhances digestive fire and promotes metabolism).

- Due to *Agnimāndya*, day sleep is contraindicated.
- Application of oil or pastes to the body (*Abhyanga, Lepana*) is also avoided as they may further result in *Agnimandya.*

c) **A person with a *Vrana* (wound).**

During menstruation, the shedding of the endometrium resembles the state of an internal wound in the uterus. Therefore, a menstruating woman can be considered a *Vranita vyakti* (wounded person). The *Pathya* (wholesome regimen) described for a *Rajaswala* is nearly identical to that advised for a wounded individual.

Hence, a *Rajaswala* should be taken care of with the same caution as one would take for a wounded person.

MODIFICATIONS IN *RAJASWALA PARICHARYA* FOR PRESENT ERA

Table No. 03: Suggested modifications in *Rajaswala Paricharya*

***Charya* in classics**	**Suggested Modification**
Brahmacharini	Avoid sexual intercourse.
Eat *Havishya*	Prefer light, warm, easily digestible foods and ghee-based preparations.
Eat in a *Sharava*	Use safe, non-toxic cookware like glass, stainless steel or clay. Avoid plastic and non-stick utensils to minimize exposure to endocrine disruptors.
Avoid *Teekshna, Ushna, Amla, Lavana ahara*	Limit spicy, very hot, sour, salty, and processed foods. Choose warm, mildly seasoned and easily digestible meals.
Avoid *Snana*	Maintain daily hygiene with a short (10–15 min) lukewarm bath. Avoid very cold or excessively hot showers, long bathing, or bathing during heavy flow days. Skip oil massage or vigorous scrubbing. Prefer clean, private facilities.
Avoid *Ativyayama*	Avoid running, high-impact exercises, or strenuous workouts. Gentle walks, light yoga, or stretching are better alternatives.
Avoid *Atikathana and Hasana*	Minimize emotional strain, loud talking, or excessive laughter. Practice calmness, relaxation, and light conversation.
Avoid *Diwaswapna*	Prevent excessive daytime sleep. Short, mindful naps are acceptable if fatigued.
Avoid *Anila*	Protect from cold drafts, direct AC/fan airflow, and exposure to harsh winds. Keep the body comfortably warm.
Avoid *Abhyanga*	Avoid full-body oil massage during the first 2–3 days. Gentle application of warm oil to the feet or scalp is acceptable if required for relaxation.
Avoid *Anjana*	Skip collyrium or heavy eye makeup.

CONCLUSION

Rajaswala Paricharya, as described in Ayurveda, represents a preventive and holistic regimen designed to safeguard women's health during menstruation. By prescribing specific dietary, behavioural, and lifestyle practices, it emphasizes conservation of energy, maintenance of digestive strength, and protection of reproductive health. Modern scientific evidence increasingly validates these principles, highlighting their role in supporting hormonal balance, reducing menstrual irregularities, and preventing gynaecological disorders. While experiential wisdom supports its efficacy, rigorous clinical studies are still needed to establish evidence-based frameworks for its wider application. Adapting *Rajaswala Paricharya* to suit modern lifestyles can provide women with a culturally rooted, cost-effective, and integrative approach to menstrual and reproductive care. Thus, it serves as a vital bridge between ancient wisdom and contemporary science, offering valuable insights for preventive and promotive health in women.

LIMITATIONS

- Lack of clinical data – This review is based on classical Ayurvedic texts and secondary literature; no original clinical trials or patient data were included.
- Contextual applicability: Certain traditional practices may be difficult to implement in the modern era due to lifestyle, occupational, and cultural changes.

ACKNOWLEDGEMENT

- The authors thank the Department of Swasthavritta and Yoga, Government Ayurveda Medical College, Mysuru, for academic guidance and support in the preparation of this manuscript.

CONFLICT OF INTEREST

- The authors declare that there is no conflict of interest related to this work.

ISSN (Online): 2455-3662
EPRA International Journal of Multidisciplinary Research (IJMR) - Peer Reviewed Journal
Volume: 11| Issue: 8| August 2025|| Journal DOI: 10.36713/epra2013 || SJIF Impact Factor 2025: 8.691 || ISI Value: 1.188

REFERENCES

1. *Tiwari P. Ayurvediya Prasuti Tantra Evam Stree Roga. 2nd ed. Varanasi: Chaukhambha Orientalia; 2009.*
2. *Charaka. Charaka Samhita, Sharira sthana 8/5. Translated by Shastri K, Chaturvedi G. 1st ed. Varanasi: Chaukhambha Bharati Academy; 2013.*
3. *Government of India. National Health Mission Guidelines: Media content analysis. New Delhi: Ministry of Health and Family Welfare; 2018.*
4. *Tiwari P. Ayurvediya Prasutitantra Evam Striroga, Part I. 2nd ed. Varanasi: Chaukhambha Orientalia; 1999.*
5. *Charaka. Charaka Samhita, Sharira sthana 8/5. Translated by Shastri K. Reprint. Varanasi: Chaukhambha Bharati Academy; 2013.*
6. *Sushruta. Sushruta Samhita, Sharira sthana 2/25-26. Translated by Shastri A. Reprint ed. Varanasi: Chaukhambha Bharati Academy; 2011.*
7. *Vagbhata. Ashtanga Hridaya, Sharira sthana 1/23. With commentaries Sarvanga Sundara of Arundatta and Ayurveda Rasayana of Hemadri. Edited by Murthy KRS. Reprint ed. Varanasi: Chaukhambha Krishnadas Academy; 2012.*
8. *Vagbhata. Astanga Samgraha, Sharira sthana 1/42. Translated by Murthy KRS. 2nd ed. Varanasi: Chaukhambha Orientalia; 2008.*
9. *Mollazadeh S, Mirzaii Najmabadi Kh, Mirghafourvand M, Latifnejad Roudsari R. Sexual activity during menstruation as a risk factor for endometriosis: a systematic review and meta-analysis. Int J Fertil Steril. 2023;17(1):1-6. doi:10.22074/IJFS.2022.541102.1207.*
10. *Chandrasekara A, Shahidi F. Barley: bioactive constituents and health benefits. Crit Rev Food Sci Nutr. 2011;51(9):863-74. doi:10.1080/10408391003748100.*
11. *Vetvicka V, Vetvickova J. β-Glucan and wound healing. Molecules. 2020;25(3):556. doi:10.3390/molecules25030556.*
12. *Harris HR, Chavarro JE, Malspeis S, Willett WC, Missmer SA. Dairy food, calcium, magnesium, and vitamin D intake and risk of endometriosis: a prospective cohort study. Am J Epidemiol. 2013;177(5):420-30. doi:10.1093/aje/kws247.*
13. *Wise LA, Radin RG, Palmer JR, Kumanyika SK, Boggs DA, Rosenberg L. Intake of dairy products in relation to risk of uterine leiomyomata in US Black women. Am J Epidemiol. 2010;171(5):564-74. doi:10.1093/aje/kwp433.*
14. *Gupta R. Health benefits of storing water in clay pots: natural alkalinity and improved digestion. HealthShots. 2021 May 19 [cited 2025 Aug 19]. Available from: https://www.healthshots.com*
15. *Ghosh B, Chakraborty D. Clay Minerals: Their Antimicrobial and Antitoxic Applications. Cham: Springer; 2023.*
16. *Osman AI, Abd El-Monaem EM, Elgarahy AM, et al. Natural clay adsorbents for removal of endocrine-disrupting pollutants: a review. Environ Chem Lett. 2023;21(2):359-92.*
17. *Historical Tech. The art and benefits of cooking in clay containers. Historical Tech. 2025 [cited 2025 Aug 19]. Available from: https://www.historicaltech.com*
18. *Najafi N, Khalkhali H, Moghaddam Tabrizi F, Zarrin R. Major dietary patterns in relation to menstrual pain: a nested case–control study. BMC Womens Health. 2018;18:69. doi:10.1186/s12905-018-0558-4.*
19. *Chandel E, Kumar B. Antimicrobial activity and phytochemical analysis of Cynodon dactylon: a review. World J Pharm Pharm Sci. 2015;4(11):515-30.*
20. *Beitins IZ, McArthur JW, Turnbull BA, Skrinar GS, Bullen BA. Exercise induces two types of human luteal dysfunction: confirmation by urinary free progesterone. J Clin Endocrinol Metab. 1991;72(6):1350-8. doi:10.1210/jcem-72-6-1350.*
21. *Conzatti M, Perez AV, Maciel RF, De Castro DH, Sbaraini M, Wender MCO. Sleep quality and excessive daytime sleepiness in women with premenstrual syndrome. Gynecol Endocrinol. 2021;37(10):945-9. doi:10.1080/09513590.2021.1968820.*
22. *Yadav S, Karkare M. Scientific validation of Rajaswala Paricharya. JETIR. 2018;5(9):1-5.*