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EFFICACY OF PANCHAKARMA IN THE MANAGEMENT OF ARTAVA KSHAYA: A CASE REPORT

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ABSTRACT

Introduction: *Artava Kshaya, a condition characterized by scanty or delayed menstruation, is associated with oligomenorrhea in modern medical practice. The imbalance of Vata and Pitta Doshas, along with blockage of reproductive channels (Shrotorodha), is identified as the primary cause of Artava Kshaya in Ayurveda. This case report explores the efficacy of Panchakarma, a classical Ayurvedic purification therapy, in managing Artava Kshaya, using a combination of therapeutic interventions and herbal medications.*

Materials and Methods: *A 29-year-old female patient with complaints of delayed and scanty menstruation was treated using Panchakarma. The treatment protocol included Snehana with Panchatikta Guggulu Ghrita, Swedana, Virechana with Trivrit Leha. Post-Panchakarma, oral medications such as Ashokarishta, Phala Ghrita, and Shatavari Churna were administered. Menstrual regularity, flow, and hormonal balance were measured as the primary outcomes, with symptomatic relief and improved well-being as secondary measures.*

Results: *Following Panchakarma, the patient's menstrual cycle normalized to 30 days, significantly improving the volume and duration of menstrual flow. Hormonal levels, including FSH, LH, estrogen, and progesterone, returned to normal ranges, correlating with the restored menstrual pattern. The patient also reported relief from associated symptoms like fatigue, bloating, and premenstrual mood swings. No adverse effects were observed during the treatment period.*

Discussion: *The case demonstrates the effectiveness of Panchakarma in treating Artava Kshaya by addressing Vata-Pitta imbalances and clearing reproductive channels. The integrative approach of using Panchakarma therapies such as Virechan along with medications like Phala Ghrita and Shatavari Churna, proved beneficial in regulating menstruation and improving reproductive health.*

Conclusion: *This case highlights the potential of Panchakarma in the successful management of Artava Kshaya, restoring normal menstrual function and improving overall well-being. Further studies with larger populations are recommended to validate these findings and establish the long-term benefits of Ayurvedic treatment for menstrual disorders.*

KEYWORDS: *Artava Kshaya, Panchakarma, Virechana, Basti, Uttar Basti, Ayurveda*, Oligomenorrhea, Menstrual Health.

INTRODUCTION

Background

Artava Kshaya, according to Ayurvedic texts, is a condition where the menstrual flow is reduced either in quantity or quality. This condition is caused by Vata and Pitta Dosha vitiation and Shrotorodha (blockage of channels), leading to disturbances in reproductive health. In modern gynecology, this condition is often correlated with oligomenorrhea, where menstruation occurs at intervals longer than 35 days, or the flow is unusually scanty. Factors such as stress, poor nutrition, and hormonal imbalances can contribute to the development of Artava Kshaya.

Rationale for Panchakarma in Artava Kshaya

Panchakarma, the purification and detoxification therapy in Ayurveda, is designed to eliminate toxins (Ama) and balance the three Doshas. Specifically, Panchakarma therapies like Virechana (purgation) and Basti (enema) have shown efficacy in clearing Srotorodha and balancing Apana Vata, the sub-dosha responsible for the regulation of menstruation. This report details the use of Panchakarma in managing Artava Kshaya, with a focus on the role of traditional Ayurvedic herbs and therapeutic interventions.

Objective

This case report aims to illustrate the successful application of Panchakarma in restoring normal menstrual function in a patient diagnosed with Artava Kshaya, along with highlighting the role of specific Ayurvedic medications in achieving this outcome.

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MATERIALS AND METHODS

Patient Information

- **Presenting Symptoms**

- The patient reported experiencing irregular menstrual cycles for the past 1 year, with intervals of 50-60 days between two menstrual cycles. When menstruation did occur, the flow was scanty, lasting for 2 days, and was accompanied by dull abdominal cramps.
- She also complained of general weakness, fatigue, bloating and irritability, particularly around her menstrual cycle.
- Other associated symptoms included disturbed sleep, and dryness of the skin.
- She had no prior history of significant gynecological conditions.

- **Menstrual History**

- **Menarche:** Age 13
- **Cycle Length:** 50-60 days (regular) prior to the onset of symptoms
- **Duration of Flow:** 2 days
- **Amount of Flow:** Scanty for the past 1 year
- **Pain:** Dull, cramping pain, manageable without medication, primarily in the lower abdomen.
- **Premenstrual Symptoms:** Irritability and fatigue but no significant bloating or breast tenderness.

- **Past Medical History**

- No significant medical history of major illness or surgeries.
- No history of chronic conditions like diabetes, hypertension, or thyroid disorders.

- **Family History:**

- Mother had a history of menorrhagia in her 40s, treated with hormonal therapy.
- No family history of serious hereditary or gynecological disorders.

- **Diet and Lifestyle**

- The patient follows a vegetarian diet with irregular meal timings due to work schedules.
- Low water intake, with frequent consumption of caffeinated beverages.
- Sedentary lifestyle, with limited physical activity due to desk job responsibilities.
- High levels of work-related stress, particularly over the past year.

- **Examination Findings**
- **1. General Physical Examination**

- **General Appearance:** The patient appeared fatigued but was alert and oriented.
- **Pulse:** 80 beats per minute, regular.
- **Blood Pressure:** 110/70 mmHg.
- **Temperature:** Normal.
- **Respiratory Rate:** 18 breaths per minute, regular.
- **Skin:** Dry, with no rashes or pigmentation. Slight pallor around the eyes.
- **Hair:** Dry and brittle, with noticeable hair loss.
- **Nails:** Brittle, with ridging and slight pale discoloration.

- **2. Abdominal Examination**

- **Inspection:** Abdomen flat, no visible distention.
- **Palpation:** Mild tenderness in the lower abdomen but no palpable masses.
- **Percussion:** Normal resonance.
- **Auscultation:** Normal bowel sounds.

- **3. Gynecological Examination**

- **External Genitalia:** Normal, no abnormalities noted.
- **Speculum Examination:** Cervix was healthy in appearance with no discharge or lesions.
- **Bimanual Palpation:** Uterus was slightly anteverted and of normal size. No adnexal masses or tenderness.

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Complete Blood Count (CBC):	Thyroid Profile:	Hormonal Profile:	Serum Iron Profile:	Ultrasound Imaging (Abdomen and Pelvis):
Hemoglobin: 10.2 g/dL (low) Total Leukocyte Count: 7,600 cells/mm³ Platelet Count: 250,000 cells/mm³ Red Blood Cell Count: 4.1 million cells/µL (low) Mean Corpuscular Volume (MCV): 72 fL (low, indicative of microcytic anemia)	TSH: 2.5 µIU/mL (normal) Free T4: 1.1 ng/dL (normal) **Insulin fasting:** 18 µU/mL **Fasting Glucose:** 105 mg/dL	**FSH (Follicle-Stimulating Hormone):** 5.2 mIU/mL (slight elevated) **LH (Luteinizing Hormone):** 12.8 mIU/mL (Elevated) **Estradiol (E2):** 30 pg/mL (lower end of normal range) **Prolactin:** 18 ng/mL (elevated) **Progesterone (Day 21):** 1.0 ng/mL (low) **Testosterone:** 0.85 ng/mL	Serum Ferritin: 12 ng/mL (low) Serum Iron: 45 µg/dL (low) Total Iron Binding Capacity (TIBC): 420 µg/dL (elevated) Transferrin Saturation: 11% (low) **Liver Function Tests (LFTs):** Normal **Kidney Function Tests (KFTs):** Normal	**Uterus Size:** Normal, anteverted (8.0 cm × 4.5 cm × 3.1 cm). **Endometrial Thickness:** 5 mm during the luteal phase, suggesting insufficient proliferation. **Ovaries:** Right Ovary: 4.2 cm × 3.0 cm, Vol 12 mL (Enlarged) Multiple small follicles (12+), each measuring 2-9 mm in diameter. Left Ovary: 4.5 cm × 3.2 cm, Vol 13 mL, multiple small follicles (10+), 2-9 mm in size, with a peripheral arrangement. **Increased echogenicity in both ovaries, suggesting stromal hyperplasia, suggestive of PCOD.** **No signs of free fluid in the pelvis.**

Examination and Diagnosis

- **Prakriti :** Vata-Pitta
- **Agni:** Vishamagni
- **Dosha Involvement:** Predominantly Vata and Pitta
- **Dushya:** Rasa and Rakta Dhatu
- **Clinical Diagnosis:**
- Based on the patient's clinical history, examination findings, and investigative reports, the diagnosis of **Artava Kshaya (PCOD)** was made. The patient presented with menstrual irregularity, scanty flow, and signs of hormonal imbalance particularly FSH and LH, including low estradiol and progesterone levels, and USG suggestive of PCOD, which correspond to the depletion of Rasa Dhatu and Vata vitiation as per Ayurvedic concepts. The microcytic anemia further contributed to the diagnosis, as it indicated nutritional deficiency affecting tissue health and reproductive function.

Panchakarma Treatment Protocol

1. Snehanapana

Internal Oleation: The patient was administered *Panchatikta Guggulu Ghrita* for five days, starting with a dose of 30 mL daily in the morning on an empty stomach. This medicated ghee was chosen for its ability to pacify aggravated Vata and Pitta and cleanse the body's channels.

2. Abhyanga

Sarvanga Abhyanga with *Dhanvantaram Taila* was performed daily for three days to lubricate the body and prepare it for the next phase of Panchakarma.

3. Swedana

After Abhyanga, the patient underwent *Bashpa Sweda* for 5-10 minutes. This treatment liquifies Doshas and Ama and facilitates their movement into the digestive tract.

4. Virechana

On the 9th day, Virechana was induced using *Trivrit Leha* to eliminate excess Pitta and clear the reproductive channels. The patient was administered 50 grams of the formulation, resulting in 18 bouts of controlled purgation.

After the Virechana therapy, a light diet was recommended for five days, starting with *Peya* and gradually transitioning to normal diet.

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	THERAPY	MEDICINE	DAYS	DOSE
7 DAYS AT HOME	Internal medication	Chitrakadi Vati	7 days	2 tabs twice a day With hot water
Day 1-5	Snehana	Panchatikta Ghrita Guggulu	7 days	Day 1 : 30 mL Day 2: 60 mL Day 3 : 90 mL Day 4: 120 mL Day 5 : 150 mL
Day 6-9	Sweadana	Bashpa Swedana	3 days	
Day 9	Virechana	Trivrutta Leha		50 grams

Oral Medications Post-Panchakarma

- Ashokarishta: 15 mL twice daily after meals to regularize the menstrual cycle.
- Phala Ghrita: 5 grams twice daily on an empty stomach for hormonal balance.
- Shatavari Churna: 5 grams twice daily with warm milk to improve reproductive health and regulate hormones.

FOLLOW-UP PROTOCOL

The patient was followed for a duration of three months post-treatment, with monthly assessments of her menstrual cycle and overall health.

RESULTS

- **MENSTRUAL OUTCOMES**

The patient's menstrual cycle normalized to 30 days post-Panchakarma. The first menstrual period after treatment lasted 4 days with significantly increased flow volume. Subsequent cycles maintained regularity, and the duration of menstruation was consistent, with no further complaints of scanty flow.

Symptomatic Improvement

Fatigue, bloating, and mood swings significantly reduced following Panchakarma therapy. The patient reported feeling more energetic, with less abdominal discomfort during her cycle.

- **HORMONAL PROFILE**

Post-treatment hormonal assessments showed significant improvement. The patient's FSH and LH levels, which were previously elevated, returned to normal. Estrogen and progesterone levels also normalized, correlating with the improved menstrual pattern. USG showed mild decrease in size of the ovarian volume and size.

- **ADVERSE EFFECTS**

No adverse effects were reported during or after the Panchakarma therapy. The patient tolerated all treatments well.

DISCUSSION

Panchakarma's Role in Treating Artava Kshaya:

Panchakarma therapies were pivotal in addressing the root cause of Artava Kshaya, primarily through balancing the vitiated Vata and Pitta Doshas and clearing the reproductive channels (Artavavaha Srotas). The synergistic action of the Panchakarma therapies and herbal medications employed in this case contributed to the overall improvement in the patient's menstrual health. Below, the individual action of the drugs and therapies used in the treatment is explained in detail.

1. Panchatikta Guggulu Ghrita

- **Action:** *Panchatikta Guggulu Ghrita* is a polyherbal medicated ghee prepared with bitter herbs. It has a specific action on pacifying Vata and Pitta Doshas, aids in Dhatu Shodhana, and promoting the removal of Ama. Tikta Dravyas like **Guduchi** (Tinospora cordifolia) and **Neem** (Azadirachta indica) are Sheeta Viryas that alleviate Pitta, while **Guggulu** enhances the ghrita's ability to enter deep tissues, ensuring effective detoxification of the reproductive system.
- **Role in Artava Kshaya:** Its properties of clearing toxins and pacifying aggravated Doshas helped cleanse the channels and nourish the reproductive tissues, thereby facilitating proper menstruation.

2. Trivritta Leha

- **Action:** Trivritta (Operculina turpethum) is a potent purgative that directly eliminates Pitta and Kapha-related Doshas from the body. The Leha form allows for efficient absorption and rapid action on the digestive and excretory systems.

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- **Role in Artava Kshaya:** As Virechana was aimed at removing excess Pitta, which is often responsible for irregular menstrual flow and congestion, Trivrit Leha helped open the Rodhas in reproductive channels and support proper functioning of the Artavavaha Srotas.

3. Ashokarishta

- **Action:** Ashokarishta is an herbal fermented liquid preparation made from Ashoka bark, which has been traditionally used in Ayurveda to treat gynecological disorders. It acts as a uterine tonic, promoting regular menstrual flow, alleviating pain, and balancing hormones.
- **Role in Artava Kshaya:** Regular administration of Ashokarishta after Panchakarma helped maintain the normal menstrual cycle and regulate the volume of menstrual flow.

4. Phala Ghrita

- **Action:** Phala ghrita contains Shatavari, Ashwagandha, Bala, Yastimadhu and Nagakeshara which helps in nourishing the Rasa Dhatu, aids in hormonal balance, and stimulates Artava flow
- **Role in Artva Kshaya:** Shatavari nourishes Rasa Dhatu, balances Vata and Pitta, regulates hormones. Ashwagandha pacifies Vata, reduces stress, balances reproductive hormones. Bala strengthens Dhatus, rejuvenates reproductive tissues, pacifies Vata. Yashtimadhu works as anti-inflammatory, nourishes Rasa, pacifies Vata and Pitta. Nagakeshara regulates Artava flow, balances Pitta, pacifies Vata obstruction.

5. Shatavari Churna

- **Action:** Shatavari is a well-known rejuvenating Dravya for the female reproductive system. It is rich in phytoestrogens, which help balance estrogen levels, improve fertility, and nourish the reproductive organs.
- **Role in Artava Kshaya:** Post-Panchakarma, Shatavari Churna helped in further restoring hormonal balance and nourishing the reproductive system, ensuring continued regular menstruation.
- **Comparison to Modern Treatment Approaches**

In modern medicine, oligomenorrhea is often treated with hormonal therapy, which temporarily regulates the menstrual cycle but may come with side effects like weight gain, mood swings, or long-term dependency on hormones. Panchakarma therapy such as Virechana was essential in clearing the channels and regulating Apana Vata, which governs menstrual flow, as well as addressing the underlying doshic imbalances, cleansing the body, and promoting the natural function of the reproductive system. Moreover, medications like Phala Ghrita and Shatavari not only help with the immediate symptoms but also support long-term reproductive health without causing adverse effects.

- **Long-Term Benefits of Panchakarma**

The case highlights that Panchakarma not only restored menstrual regularity and flow but also improved the patient's overall well-being, energy levels, and digestive health. This holistic approach, which included lifestyle advice and diet modifications, helped the patient achieve sustained relief even after the therapy. Panchakarma, being a comprehensive detoxifying therapy, rejuvenates the entire system, thereby preventing future recurrences of menstrual disorders like Artava Kshaya.

CONCLUSION

This case report demonstrates the potential of Panchakarma therapy in the effective management of Artava Kshaya. The combination of detoxifying and nourishing treatments, along with the use of specific herbal medications, restored the patient's normal menstrual cycle, improved hormonal balance, and provided symptomatic relief. Panchakarma offers a holistic, side-effect-free alternative to conventional treatments for menstrual disorders, with the added benefit of improving overall health and well-being. Further studies are recommended to validate these findings and establish Panchakarma as a standardized approach in treating reproductive health issues.

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