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# AN UNDERSTANDING OF GENITOURINARY SYNDROME OF MENOPAUSE (GSM) THROUGH AYURVEDA

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### **ABSTRACT**

Menopause is the start of the next fabulous phase of life as a woman. It is a time to tune in to the body and embrace this new chapter. Menopause also called as Rajonivratti is the cessation of reproductive life of a female. It, alongside, forbodes several other changes in the body and mind. The most unwanted thing about the menopause is that it is considered as an end to the youth and sexuality which makes it socially unacceptable and makes the woman psychologically disturbed. A woman experiences many changes in her body in this stage of life. She complains of many symptoms which from MENOPAUSE SYNDROME. Menopause presents as transition from madhyama avastha to vriddha avashta. Thus, can be considered as a shift from pitta dominant state to vata dominant state. This shift forms the basis of menopause syndrome. Along with this, other nidan of Rajonivratti are Jara, Kala, Swabhava, Vayu, Dhatukshaya and Karma. Genitourinay Syndrome of Menopause (GSM) is the new term for vulvovaginal atrophy (VVA). The term was first introduced in 2014. Symptoms of GSM include vaginal dryness, vaginal burning, increased frequency of micturition, nocturia, burning micturition, urinary incontinence etc. All symptoms present hypo - estrogenic state of body. The syndrome can also be considered due to Vata dominating Pitta madhyama state of body and as an outcome of Dhatukshaya in the body. Jaravastha, being vata dominant state, is the state of Dhatukshaya in the body. Also, due to mandagni, there is formation of inadequate and vitiated Rasa dhatu which leads to decline in further subsequent dhatus. GSM may occur due to kshaya of Rasa, Mamsa and Shukra dhatu mainly and management may be done accordingly.

**KEYWORDS:** Rajonivratti, Menopause Syndrome, Vulvo – vaginal atrophy, hypo – estrogenic state.

# INTRODUCTION

Ayurveda is the science of life. In its classics, the life span of a human being has been divided into 3 stages<sup>[1]</sup> – Balyavastha (childhood), Madhyamavastha (middle age), Vriddhavastha (old age). According to Acharya Charaka, Vriddhavastha starts from the age of 60 yrs<sup>[2]</sup> and according to acharya Sushrut, it starts from 70 yrs of age.<sup>[3]</sup> Acharya Bhav Prakash has given a different classification for female. A female of 50 yrs or more is vriddha according to acharya Bhav Prakash.

Rajonivratti means nivratti from rajas, i.e., cessation of menses. The term Rajonivratti has been coined for menopause (pause of menses) in Ayurveda classics. Rajonivratti involves every constituent of the body i.e., dosha, dhatu, srotas, manas. According to Acharya Bhav Mishra & Yoga Ratnakar, due to expulsion of rajas in a female's body, doshas & dhatus get purified. Hence, in absence of raja srava, doshas and dhatus becomes qualitatively low after menopause. The age for rajonivratti has been given 50 yrs by Acharyas. [4] The

time span can be considered as transition zone between madhyamavastha and vriddhavastha. Hence, there is a shift from pitta dominating state to vata dominating state. This shift in doshas is responsible for all the lakshanas of rajonivratti. Also, it is a kshayatmaka (deteriorated) state of the body where kshaya of all dhatus, updhatus, & ojas occurs & kshaya of all the body constituents with doshik involvment forms the basis of various symptoms which are considered as Rajonivrattijanya lakshana or Menopausal Syndrome.

# Menopausal Syndrome

A subtle rise in concentration of FSH is the earliest and most consistent clinically measurable hormonal change. A slow rise in FSH occurs first, followed by a rise in LH and a decline in oestradiol. So far 35 symptoms have been associated with menopause. Elevated Few most common symptoms are —

- 1. Irregular menses
- 2. Dry vagina
- 3. Urinary incontinence

- 4. Hot flushes
- 5. Irritability, mood swings etc.

### Rajonivratti

## Nidan of Rajonivratti

No nidan has been given for Rajonivratti in classics. So, factors mentioned for Raja – utpatti can also be considered as hetu of Rajonivratti –

- 1. Kala
- 2. Swabhava
- 3. Vavu
- 4. Dhatuposhana
- 5. Karma

# Rasa dhatukshaya & Rajonivratti

# A) Dhatukshaya due to age

In the reference of depletion at every decade, Acharya Sharangdhara has stated that there is depletion of Twaka in the 5<sup>th</sup> decade of life. In the concept of Sara pariksha, twaka sara has been included instead of Rasa sara.<sup>[7]</sup> Hence, Rasa dhatu and twaka can be considered as corelated. And depletion of twak in 5<sup>th</sup> decade may be

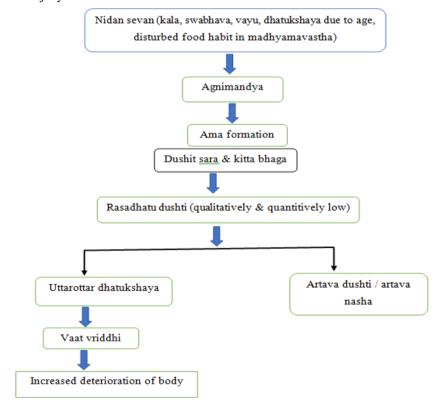
interrelated with depletion of Rasa dhatu. Also, we must not forget that 5<sup>th</sup> decade is the kala mentioned for rajonivratti.

Due to kshaya of Rasa dhatu, upadhatu Raja (Aartava) also starts to cease and uttarottara dhatukshaya occurs which forms the basis of menopausal syndrome.

# B) Dhatukshaya due to angnimandya

In today's life, woman plays dual role in her youth. Use of packaged, processed, frozen, canned and left-over food has been increased. Along with disturbed food habits, woman face emotional and work-related stress. All these physical, emotional, psychological and environmental factors lead to angnimandya. Also, due to ageing, jatharagnimandya and dhatvagnimandya occur. Thus, derranged potential of agni in youth continues to diminish in old age also. It will lead to vitiation of Sara – kitta bhaga and resulting Rasa dhatu will be qualitatively and quantitatively low. It further leads to uttarottar dhatukshaya.

**Samprapti** – In our classics, samprapti of rajonivratti has not been given. On the basis of various concepts, a probable samprapti for rajonivrattijanya lakshana can be formed –



# Dhatukshaya lakshana<sup>[8]</sup>

aya taksitatta	
Dhatu	Kshaya lakshana
Rasa dhatu	Hritapeeda, kampa, shunyta, trishna
Rakta dhatu	Twak parushya, amlasheeta prarthna, sira shathilya
Mamsa dhatu	Sphiggandaushthoruvakshahkakshapindikodargreevashushkta, raukshya,
	toda, gatranam sadanam, dhamni shathilya
Meda dhatu	Pleeha vriddhi, sandhi shunyta, raukshya, medurmamsa prarthna
Asthi dhatu	Asthi shula, dantanakhabhanga, raukshya

Majja dhatu	Alpashukrta, parva bheda, asthi nistoda, asthi shunyta
Shukra dhatu	Medhra vrishna vedna, ashakti maithuna, chirad prasek, praseke
	alparaktashukradarshnam

# Genitourinary Syndrome of Menopause and Dhatukshaya

Genitourinary syndrome of menopause is the new term given for vulvo – vaginal atrophy (VVA), atrophic vaginitis, or urogenital atrophy in 2014. A change in terminology was proposed by North American Menopause Society and the International Society for the Study of Women's Sexual Health in 2014.

The proposal was given -

- To acknowledge the involvement of not only the vulvar and vaginal tissues but also the lower urinary tract
- 2. To identify menopause as an etiological factor.
- 3. To avoid the negative connotations associated with the term atrophy.

**Clinical manifestation of GSM** – Clinically, it can be manifested as genital symptoms or urinary symptoms or as sexual symptoms.

**Genital symptoms** – vaginal dryness, burning of vagina, vaginal / pelvic pain, vaginal vault prolapse.

**Urinary symptoms** – urgency of micturition, burning micturition, nocturia, recurrent urinary tract infection.

**Sexual symptoms** – dyspareunia, loss of libido, post coital bleeding.

GSM affects woman's day to day life more adversely than vasomotor symptoms as latter gets milder over time. Symptoms of GSM does not resolve spontaneously, deteriorate if left untreated and thus affecting the quality of life.

Due to rasakshaya, artavakshaya / artava nasha occurs, yonivedana (pain in vagina or reproductive organs) is a lakshana of artavanasha given by acharya Sushrut. Twaka parushya (roughness of twak) is a lakshana of raktakshaya which can be taken as a cause of roughness in vagina. Sphig sushkta is a lakshana of mamsa kshaya. Sphig can be considered as pelvic region, hence it can be corelated with atrophy of vagina & other reproductive organs. Also, rukshta i.e., dryness is a lakshana of mamsa as well as meda kshaya. Shukra kshaya leads to ashakti maithuna, chirad praseka, which cause dyspareynia and loss of libido.

Rajonivratti is a state of dominating vata, madhyama pitta & ksheena kapha. Aggravated vata carries pitta (which is in normal state) into different sites of body. When, it carries pitta to mutravaha srotas, it leads to urinary symptoms like burning micturition, increased urination etc. Also. Kapha kshaya causes antardaha [10]

which can be taken as a cause of burning vagina or burning during urination.

### Management

In ayurveda classics, first step for management of a disease or a disorder is nidan parivarjana i.e., avoidance of causative factors. Although, rajonivratti is neither a disease nor a disorder, it's a state of human life, it becomes troublesome for some of the females. Therefore, proper care and management is required.

- **1. Nidan parivarjana** As Acharya Sushrut has said, *sarvesham hi roganam nidanparivaranam uchyate.*<sup>[11]</sup> Avoidance of causative factors is the first and foremost step for the proper care & management of rajonivrattijanya lakshana. Here, influence of kala, swabhava, vayu and karma can't be avoided but the effect of dhatukshaya can be managed by following few measures like –
- 1. by proper following of rajaswalacharya in reproductive age group,
- by proper adaptation of sutika paricharya during puperium,
- 3. by avoidance of packaged, processed, frozen and left over food in madhyamavastha,
- 4. by proper following of dincharya, ritucharya, raticharya as explained,
- 5. by avoidance of holding of natural urges.
- 2. Diet and lifestyle modification Aahar has been considered as prana by Acharya Kashyapa. So, a balanced diet is required to spend whole life with ease. Here, the state being vata dominant, vata pacifying substances must be included in diet. Madhur, Amla & Lavana rasa are vata pacifying. Among these three, Madhur (sweet) rasa must be in good amount as it acts as balya (tonic) and it helps in building dhatus and ojus also. Hence, it is beneficial in balancing dhatukshayatmka lakshana.

A proper lifestyle is also very important to avoid the troublesome features of GSM. Following of dincharya, ritucharya, avoidance of holding of urges, regular exercise, meditation help in coping up with the unwanted shift of life from youth to oldies.

**3. Use of phytoestrogens** – According to Nancy Lansdorf, phytoestrogens are a class of compound found in plants. They are similar in structure to human estrogen and affect hormonal balance in a woman's body when consumed. The highest content of phytoestrogen is found in soybeans followed by legumes. Other food sources containing phytoestrogen are –

Linseed

Sesame seed

Fenugreek

Oats Barley Licorice root Chaukhmbha Sanskrit Sansthan, Varanasi, Sushrut Uttar Sthana.

### CONCLUSION

Rajonivratti i.e., menopause is a transition phase of life from reproductive to non – reproductive era of life. Usually, it doesn't bother the female much but, in some cases, it becomes troublesome for the lady. Genitourinary syndrome of menopause comes with the symptoms which affects woman in many ways and prevents her in concentrating her daily routine life. Mainly, symptoms occur due to sift of doshas form vata dominating state to pitta dominating state. With this the state of dhatukshaya also forms a great cause of most of the features of GSM. Understanding of GSM through the principles of Ayurveda and following basic principles of Ayurveda help in dealing with the troublesome features of Genitourinasry Syndrome of Menopause.

### REFERENCES

- Charak Samhita Vidyotini Teeka by Pandit Kashinath Shastri & Dr. GOrakhnath Chaturvedi, Pubkished by Chaukhmabha Academy Revised edition 2013, Charak Viman Sthan 8/122.
- Charak Samhita Vidyotini Teeka by Pandit Kashinath Shastri & Dr. GOrakhnath Chaturvedi, Pubkished by Chaukhmabha Academy Revised edition 2013, Charak Viman Sthan 8/122.
- 3. Sushrut Samhita Ayurveda Tattva Sandeepika Teeka by Dr Ambika Dutta Shastri, published by Chaukhmbha Sanskrit Sansthan, Varanasi, Sushrut Sutra Sthan 35/35.
- 4. Sushrut Samhita Ayurveda Tattva Sandeepika Teeka by Dr Ambika Dutta Shastri, published by Chaukhmbha Sanskrit Sansthan, Varanasi, Sushrut Sutra Sthan 14/6.
- 5. Jeffcoate's Principles of Gynaecology, 9<sup>th</sup> edition, The Health Sciences Publisher 2019.
- 6. Jeffcoate's Principles of Gynaecology, 9<sup>th</sup> edition, The Health Sciences Publisher 2019.
- Charak Samhita Vidyotini Teeka by Pandit Kashinath Shastri & Dr. Gorakhnath Chaturvedi, Pubkished by Chaukhmabha Academy Revised edition 2013, Charak Viman Sthan 8/102.
- 8. Sushrut Samhita Ayurveda Tattva Sandeepika Teeka by Dr Ambika Dutta Shastri, published by Chaukhmbha Sanskrit Sansthan, Varanasi, Sushrut Sutra Sthan 15/13.
- Charak Samhita Vidyotini Teeka by Pandit Kashinath Shastri & Dr. Gorakhnath Chaturvedi, Pubkished by Chaukhmabha Academy Revised edition 2013, Charak Sutra Sthana 17/45.
- 10. Sushrut Samhita Ayurveda Tattva Sandeepika Teeka by Dr Ambika Dutta Shastri, published by Chaukhmbha Sanskrit Sansthan, Varanasi, Sushrut Sutra Sthan 15/11.
- 11. Sushrut Samhita Ayurveda Tattva Sandeepika Teeka by Dr Ambika Dutta Shastri, published by