

AYURVEDIC TREATMENT OF RAKTAPRADARA (AUB) WITH VISHWAILADI  
CHURNA – A CASE STUDY<sup>\*1</sup>Dr. Princy Prabhu, <sup>2</sup>Dr. Sridevi Swamy <sup>MS(Ayu)</sup> and <sup>3</sup>Dr. Ishwari Patil <sup>MS(Ayu)</sup><sup>1</sup>PG Scholar, <sup>2</sup>HOD and Professor, <sup>3</sup>Associate Professor.<sup>1</sup>Dept. of Prasuti Tantra and Stree Roga,

N. K. Jabshetty Ayurvedic Medical College and P.G. Research Center, Bidar, Karnataka, India.

**\*Corresponding Author: Dr. Princy Prabhu**

PG Scholar, Dept. of Prasuti Tantra and Stree Roga, N. K. Jabshetty Ayurvedic Medical College and P.G. Research Center, Bidar, Karnataka, India.

Article Received on 25/06/2025

Article Revised on 15/07/2025

Article Accepted on 04/08/2025

**ABSTRACT**

The reproductive life of women starts with puberty and ends with menopause. In-between these two ends, there is a progenitive life having menstrual cycle i.e. Rutuchakra. In Ayurveda Menstrual bleeding is termed as Rajasrava. Due to present modern lifestyle changes, there are many menstrual disorders among which excessive/prolong and irregular uterine bleeding is increasing day by day which is included under Abnormal Uterine Bleeding(AUB). Raktapradara is due to pradirana(excessive excretion) of raja(menstrual blood) and since there is excessive excretion of asrik(menstrual blood) hence termed as asrigdara. There are wide range of treatment principles and formulations explained in ayurveda which are easily available, cost effective and safer than the usage of hormonal or anti – fibrinolytic drugs etc and in later stages surgical treatment with the risk of recurrence. In this article, a case report of 24years old woman who was complaining of excessive bleeding associated with pain in abdomen and backache is presented. Vishwailadi Churna which is mentioned in Sahasra Yoga under Churna adhikara was administered and found to be effective in the management of Raktapradara.

**KEYWORDS:** Raktapradara, Excessive Bleeding, Asrigdhara, AUB, Vishwailadi Churna, Sahasra Yoga.**INTRODUCTION**

Any uterine bleeding outside the normal volume, duration, regularity or frequency is considered abnormal uterine bleeding (AUB). Nearly 30% of all gynecological outpatient attendants are for AUB.<sup>[1]</sup> AUB with Ovular dysfunction is considered as Dysfunctional Uterine Bleeding without any clinically detectable underlying pathology.<sup>[2]</sup> This is explained under Asrigdara in Ayurveda which describes it as excessive, prolonged with or without intermenstrual bleeding associated with pain in lower abdomen and back ache. Acharya Charaka tells that due to agnimandya and with the influence of tridoshas there is increase in the amount of rasa dhatu which inturn leading to rakta vridhi. Artava being the upadhatu of rasa dhatu also gets increased in its quantity. Due the nidanas there is Apana vata dushti which also contributes in increased blood flow to the garbhashayagata siras with all these, as combined effect there is excessive and prolonged bleeding during menstruation.

Raktapradara becomes troublesome if not treated timely and may lead to complications like anemia, mental confusion, burning sensation, drowsiness, delirium, unconsciousness and infertility. Numerous treatment

protocols have been told by our acharyas like Virechana, Basti, Raktamokshana, Shamana Chikitsa etc among which a formulation having unique combination of drugs i.e. Vishwailadi Churna from Sahasrayoga Churna prakarana is taken in this case. Vishwailadi Churna has ingredients – Vishwa, Ela, Pippali, Gokshura, Musali, Vamshalochana and sita most of the drugs are having vata-pitta-kapha-asrahara, deepana, pachana, vatanulomana, raktasthambaka, vrishya, balya and rasayana.

**CASE REPORT**

A female patient of 24 years visited Prasuti Tantra and Stree Roga OPD at N. K. Jabshetty Ayurvedic Medical College, Bidar, Karnataka on 17-10-2023 with the complaints of excessive vaginal bleeding for 10-15 days and reduced interval to 20 days since 3 menstrual cycle along with general body pain and lower abdominal pain.

- Patient was unmarried and a student who belonged to middle socio-economic class.
- Patient was thoroughly interrogated and all required clinical assessments were done. Other possibilities were ruled out and intervened.

**History of Past Illness:** No history of DM/HTN/IHD/CKD/Thyroid dysfunction.

**Family History:** All are said to be healthy.

**Past Medical/ Surgical History:** NA.

**Menstrual History:** Menarche @ 13 years  
LMP: 22/09/2023.

Present Menstrual History	
<b>Duration</b>	10-15 days
<b>Interval</b>	20 days without inter menstrual bleeding or spotting
<b>Regularity</b>	Regular (short cycle)
<b>Dysmenorrhea</b>	Moderate pain for first 2-3 days
<b>Number of pads</b>	Day 1 to Day 3: 3-4 pads/day completely soaked with clots Day 4 to Day 6: 4-5 pads/day half soaked with clots Day 7 to Day 10: 1-2 pads/day partially soaked Day 11 to Day 15: spotting

GENERAL EXAMINATION	SYSTEMIC EXAMINATION
<b>BP :</b> 110/70 mm of Hg	<b>CVS :</b> S <sub>1</sub> and S <sub>2</sub> Normal
<b>Pulse :</b> 78/min	<b>CNS :</b> conscious and oriented
<b>Temp :</b> 98.4°F	<b>RS :</b> B/L chest clear, no added sounds heard
<b>RR :</b> 20/min	<b>P/A Examination:</b> soft and non-tender
<b>Weight:</b> 52kg <b>Height:</b> 5.4 ft ; <b>BMI-</b> 19.3kg/m <sup>2</sup>	<b>P/V Examination :</b> Not done
<b>ASHTAVIDHA PAREEKSHA</b>	<b>DASHAVIDHA PAREEKSHA</b>
<b>Nadi :</b> 78/min	<b>Prakruti :</b> Pitta-Kaphaja
<b>Mala :</b> Prakrita (1-2 times a day)	<b>Vikruti :</b> Rasa, Rakta
<b>Mutra :</b> Prakrita (5-6 times a day)	<b>Sara :</b> Madhyama
<b>Jivha :</b> Alipta	<b>Samhanana :</b> Madhyama
<b>Shabdha :</b> Avishesha	<b>Satmya :</b> Madhyama
<b>Sparsha :</b> Anushna Sheeta	<b>Satva :</b> Madhyama
<b>Druk :</b> Prakrita	<b>Pramana :</b> Madhyama
<b>Akriti :</b> Madhyama	<b>Aharashakti :</b> Madhyama
	<b>Vyayama Shakti :</b> Madhyama
	<b>Vaya :</b> Madhyama




#### DIAGNOSTIC FOCUS

- Hb : 9.8 gm%
- Blood Group : O +ve
- WBC : 9,700 cells/cumm
- RBC : 4.30 Millions/cumm
- Platelet count : 2.32 Lakhs/cumm
- Bleeding Time : 4 min 15 sec
- Clotting Time : 7 min 30 sec

- RBS : 98mg/dl
- T3, T4, TSH : Normal
- Urine Routine : NAD
- HIV, HBsAg : NR
- USG Abdomen and Pelvis : Normal Study

**DIAGNOSIS:** Based on presenting complaints and assessment, diagnosed as Raktapradara.

#### PABC CHART- BEFORE TREATMENT

DAY		1-3	4-6	7-10	11-15
PADS					1
		2	4-5	1-2	
		3			
CLOTS		++	+	-	-

#### THERAPEUTIC INTERVENTION

In active phase of bleeding, patient was administered with Vishwailadi churna in the dose of 6 grams, twice daily before food for 3 consecutive menstrual cycles with Ushnodaka as anupana.

Pathya-apathya: She was advised to avoid spicy, sour and fried food, green chillis, curd, toor dal, outside foods and instructed her to take moong dal, fresh buttermilk, ghee, raisens and green leafy vegetables.

Follow-up was done every month after menstruation.

#### FOLLOW-UP

	No of visits	BT	AT-1	AT-2	AT-3
1.	LMP	22/9/2023	24/10/2023	23/11/2023	24/12/2023
2.	Duration of Menstrual flow	10-15 days	8 days	7 days	6 days
3.	Interval of Menstrual Cycle	20 days	32 days	29 days	31 days
4.	Amount of Blood loss (No. of pads used/day)	Day 1 to 3: 3-4 pads Day 4-6: 4-5 pads Day 7 to 10: 1-2 pads Day 11-15: spotting	Day 1-2: 3-4 pads Day 3-5: 2-3pads Day 6-8: spotting	Day 1-2: 1-2 pads Day 3-5: 2-3pads Day 6-7: 1pad	Day 1: 2 pads Day 3-4: 2-3pads Day 5-6: 1pad
5.	Pain in abdomen and body pain	++	+	-	-

#### OUTCOME

Vishwailadi Churna thus showed significant result in the management of Raktapradara.

It not only reduced the symptoms of Raktapradara but also regulated the menstrual cycle, clots during menstruation got resolved and reduced symptoms of dysmenorrhea, hence patient got regular normal menstrual cycle.

#### DISCUSSION

Normally, the menstrual phase lasts for usually 3 to 5 days and amount of blood loss is estimated to be 20-80 ml with an average of 35ml. Any uterine bleeding outside the normal volume, duration, regularity or frequency is considered abnormal uterine bleeding (AUB). The condition with cyclic bleeding and where cycle is reduced to an arbitrary limit of less than 24 days and associated with excessive and prolong bleeding said to be epimenorrhagia. In Ayurveda it is considered as Raktapradara where there is increase in amount of raja (menstrual blood) which is due to agnimandya inturn increase in the quantity of rasa dhatu in rajavaha siras due to nidanas like having excessive salty, sour, pungent (Katu rasa), heavy, vidahi and oily foods, meat, krushara, mastu (supernatant water of curd) and wine. due to other viharaja nidanas there is apana vayu dushti leading to Raktapradara.<sup>[3]</sup> Its mainly characterized by Artava Ati Pravrutti, Deerga Kala Pravrutti, Anruta Kala Pravrutti, Daha in Adho Vankshana Pradesha, Sroni, Prushta and Kukshi, Shoola in Garbhashaya Angamardha etc. As a result, the main treatment principle of Asigdharas could be Agni deepana, Ama pachana, vata anulomana, raktasthambana, balya, brmhana chikitsa.

In this case study, Vishwailadi churna was selected which has ingredients Vishwa, Ela, Pippali, Gokshura, Musali, Vamshalochana and Sita.<sup>[4]</sup>

Vishwa and Pippali have Katu rasa and ushna veerya may help in improving the Agni i.e., digestive and metabolic activity thereby enhancing the nourishment of the body. These are also deepana and pachana in action which helps in maintaining the gut health which in turn

normalizes estrogen metabolism. The anti-inflammatory action which may reduce the synthesis of prostaglandins, thromboxane, leukotrienes helps in reducing the pelvic congestion and its analgesic action reduces the menstrual blood loss and dysmenorrhea respectively.

The remaining drugs like ela, gokshura, Musali, Vamshalochana and Sita having Madhura Rasa, guru-snidha-laghu-pichilla guna may act on sara, drava, ushna guna of pitta dosha and as vaso constrictors in garbhashayagata siras and the level of hormones decreases production of unopposed oestrogens from cholesterols, this may reduce the abnormal proliferation of endometrium.

Vamshalochana is a dried resin from vamsha (Bamboo) its mainly madhura-kashaya rasa, laghu-ruksha guna and it has chedana guna aids in reducing bleeding. Chemically its more of silica which helps in coagulating.

Bhavaprakasha considers the Sita/ sharkara as best pitta-asrahara and along with its sheeta veerya and madhura rasa it majorly contributes in reducing the bleeding and also rejuvenates.

Hence overall action of this churna can be considered as vata-pitta-kapha-asrahara, sheeta veerya, laghu-ruksha-tiksha guna, madhura vipaka, agnideepana, amapachana, raktasthambaka and rasayana.

#### CONCLUSION

Excessive bleeding in every menstrual cycle can become a nightmare to many young girls and women it needs to be corrected at the earliest if not it may lead to complications like anemia, dizziness, etc and also gives atmost discomfort. Among the various formulations mentioned by different acharya under the treatment of Raktapradara - Vishwailadi churna taken from Sahasrayoga was found to be effective in this case. This positive result gives an encouragement for further study on large sample for its scientific validation.

**REFERENCES**

1. Dutta D C Konar Hiralal, Editor D C Dutta's Textbook of Gynecology, Jaypee Brothers Medical Publishers, New Delhi, 9<sup>th</sup> Ed, 2024; 173pp.
2. Dutta D C Konar Hiralal, Editor D C Dutta's Textbook of Gynecology, Jaypee Brothers Medical Publishers, New Delhi, 9<sup>th</sup> Ed, 2024; 174pp.
3. Mishra Pandit Sri Brahma Sankara, Bhavaprakasha of Sri Bhava Misra, Vidyotini Hindi Commentary, Chikitsa Sthana 68 Ch, Vol 2, Varanasi, Chaukhambha Sanskrit Bhawan, Reprint, 2022; 754pp.
4. G Prabhakara Rao- Sahasrayogam, New Delhi, Chaukhambha Publications, Ed, 2016; 301-302pp.