

**A CONCEPTUAL REVIEW OF ASRIGDARA W.S.R TO DYSFUNCTIONAL UTERINE BLEEDING****Dr. Palak Yadav\*<sup>1</sup>, Dr. Richa Jaiswal<sup>2</sup>, Dr. Prerna Pandey<sup>3</sup>**<sup>1</sup>P.G. Scholar, Department of Prasuti Tantra evam Stree Roga, Chandra Shekhar Singh Ayurvedic Sansthan, Kaushambi, Uttar Pradesh, India.<sup>2,3</sup>Assistant Professor, Department of Prasuti Tantra evam Stree Roga, Chandra Shekhar Singh Ayurvedic Sansthan, Kaushambi, Uttar Pradesh, India.**\*Corresponding Author: Dr. Palak Yadav**

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**ABSTRACT**

The State of women's health significantly influences the functioning and welfare of households and communities. any disturbance to her physical or mental condition can directly affect her menstrual health. one of the most encountered gynecological disorder affecting women from puberty through menopause is Asrigdara, which is marked by excessive or irregular menstrual bleeding. This condition can significantly disturb a woman daily life, if not treated properly, may lead to serious outcomes including the need for hysterectomy. In Ayurveda, Asrigdara is described as a disease related to the vitiation of Rakta along with the imbalance of Dosha particularly Vata and Pitta. Clinically the symptoms closely resemble what modern medicine classifies as dysfunctional uterine bleeding. Beyond physical discomfort, Asrigdara also adversely affects a woman's emotional and psychological State. The development of this condition can be attributed to several different dietary and lifestyle factors, which in Ayurveda are collectively called Nidana or causative factors. These causative factors play an important role in initiation and aggravation of this condition. Ayurveda emphasizes Nidana Parivarjana or avoidance of the causative factors as the primary and most essential approach to prevent and manage any disease or condition. A thorough understanding of these factors and how they influence the condition is important for accurate diagnosis, symptom control and holistic care of Asrigdara.

**KEYWORDS:** *Asrigdara, Dosha, Nidana, DUB.***INTRODUCTION**

*Asrigdara* is described in *Ayurveda* as *Pradirana*, meaning excessive discharge of *Raja* (menstrual blood). It is called *Pradara* because of increased menstrual flow, and since there is excessive excretion of *Asrik* (blood), it is specifically termed *Asrigdara*.<sup>[1]</sup> The term *Asrigdara* includes conditions of prolonged, cyclic or even irregular excessive menstrual bleeding, where both the quantity and quality of menstrual fluid are disturbed. In modern medical terminology, it can be correlated with Dysfunctional uterine bleeding. It is described as a state of abnormal uterine bleeding without any clinically detectable organic, systemic, and iatrogenic cause. Excessive menstrual bleeding with pain refers to bleeding that adversely affects a woman's physical, emotional, social, and maternal well-being. Abnormal

uterine bleeding includes any deviation from the typical volume, duration, regularity, or frequency of uterine bleeding. It is more commonly experienced by women between 35-45 years old.<sup>[2]</sup> The International Federation of Gynecology and Obstetrics (FIGO) introduced a classification system to help identify, assess, and manage abnormal uterine bleeding. This also helps in easy comparison of data from different studies. It is known as the PALM-COEIN classification. In which each letter represents a specific cause of uterine bleeding. These include structural causes such as Polyp, Adenomyosis, Leiomyoma, Malignancy and hyperplasia, as well as non-structural causes like Coagulopathy, Ovulatory dysfunction, Endometrial, Iatrogenic, not yet confirmed. This system is applied only after pregnancy-related causes of bleeding have been excluded.<sup>[3]</sup> Due to

changes in lifestyle and dietary patterns, the prevalence of excessive and irregular uterine bleeding is escalating progressively. In India, the reported prevalence of Abnormal Uterine Bleeding is 17.9%. It can occur any time between menarche to menopause.<sup>[4]</sup>

### **Nidana (Etiology)**

Various *Acharyas* have described different causative factors of *Asrigdara* in the classical *Ayurvedic* texts which are summarized below:

*Charaka Samhita*: Excessive intake of substances predominated by salty (*Lavana*), sour (*Amla*), pungent (*Katu*) tastes, as well as foods possessing unctuous (*Snigdha*), heavy (*Guru*) and irritant (*Vidahi*) qualities along with heavy preparations such as *Krisara*, *Payas* (milk based item), curd (*Dadhi*), consumption of *Mastu* (whey), *Sura* (alcoholic beverages) and other improper eating habits like *Adhyashana* (eating before digestion of previous meal).

*Ashtanga Sangraha*: Excessive increase in the quantity of blood (*Ativridhi of Rakta*).<sup>[5]</sup>

*Sushruta Samhita*: *Asrigdara* may occur due to the obstruction of *Apana Vayu* by aggravated *Pitta dosha*.<sup>[6]</sup>

*Ashtanga Hridaya*: *Pittavrita Apana Vayu* is an important causative factor.

*Yoga Ratnakara*: *Asrigdara* may occur due to intake of incompatible foods (*Viruddha Bhojana*), excessive consumption of alcohol (*Madyadi*), miscarriage or abortion (*Garbhaprapata*), excessive sexual activity (*Atimaitihuna*), overexertion (*Atikarshana*), excessive travelling (*Atimargagamana*), trauma or injury (*Abhigata*), daytime sleeping (*Divashayana*), and emotional stress or grief (*Shoka*).

*Kashyapa Samhita*: The condition is explained as resulting from obstruction of *Apana Vata* by aggravated *Pitta (Pittavrita Apana Vata)* along with an abnormal increase in *Rakta (Ativridhi of Rakta)*.

### **Samprapti (Pathogenesis)**

According to *Acharya Charaka*, continuous exposure to causative factors leads to vitiation of blood. The aggravated *Vata dosha* holds and increases this vitiated blood and carries it to the uterine vessels responsible for menstrual flow, including the branches of the ovarian and uterine arteries, as a result, the quantity of *Raja* (menstrual blood) increases, the increase in amount of *Raja* due to mixing of excess blood with *Artava*, along with a relative rise in *Rasa* (plasma component). Because of the excessive increase and discharge of menstrual blood, the condition is termed *Asrigdara*, since the main feature of the disorder is profuse bleeding, hence it is also known as *Pradara*.<sup>[7]</sup>

### **Samprapti Ghataka**

- *Dosha - Vata-Pitta Pradhana*,

- *Dushya – Rakta, Artava, Rasa*
- *Agni - Jathragnimandya*
- *Adhishtana - Garbhashaya, Artavavahi Srotasa*
- *Srotasa - Artavavahi, Rasavahi*
- *Sroto Dusti Prakara - Atipravritti*
- *Roga Marga - Aabhyantara*

### **Samanya Lakshana (General Symptoms)**

The classical *Ayurvedic* texts describe the common features of *Asrigdara* as follows:

*Acharya Charaka* states that excessive vaginal bleeding during menstruation is the primary symptom of *Asrigdara*.

*Acharya Sushruta* mentions that along with heavy bleeding, body ache and pain are commonly seen in all types of *Asrigdara*.

*Acharya Dalhana* says in his commentary on *Sushruta Samhita*, that patients may experience burning sensation in the groin, pelvic region, lower back, renal area, and flanks, along with severe uterine pain.

*Acharya Vriddha Vagbhata* states excessive bleeding during menstruation or in the intermenstrual period as a key symptom.

*Bhava Prakash, Madhava Nidana, and Yoga Ratnakar* describe the same as *Sushruta samhita*, emphasizing excessive bleeding associated with body ache and pain in *Asrigdara*.

### **Types of Asrigdara**

*Acharya Charaka* has described four types of *Asrigdara* i.e. *Vataja, Pittaja, Kaphaja* and *Sannipataja Asrigdara*.

**Vataja-** Menstrual blood appears thin, frothy, rough and dark or reddish in colour. It may be expelled with or without pain. Severe pain is commonly felt in the lower back, groin, chest region, flanks, back, and pelvis.

**Pittaja-** Menstrual blood appears bluish, yellowish, blackish in colour, is hot in nature, comes in profuse amount, reoccurs frequently and is accompanied by pain. Associated features include burning sensation, generalized redness of the body, excessive thirst, mental confusion, fever, and giddiness.

**Kaphaja-** The Menstrual discharge is slimy, pale, heavy, unctuous, cold in nature, thick, mixed with mucus, and is expelled with mild pain. Additional symptoms such as vomiting, loss of appetite, nausea, dyspnoea and cough are also observed.

**Sannipataja-** The menstrual discharge is foul smelling, slimy, yellowish, and exhibits contradictory qualities, the discharge resembles *ghee, vasa, majja* is accompanied by burning sensation, thirst, weakness, anemia, and combined features of *Tridosha* involvement.

### Management

The management of *Asrigdara* is explained under the following sections:

#### Principles of Treatment/Line of Treatment

The treatment of *Asrigdara* is planned by considering the nature of the disorder and the involvement of *Doshas*. The following principles are described in classical texts:

- Therapeutic measures mentioned for *Raktayoni* are advised, including the use of haemostatic drugs selected according to the predominating *Dosha*, which is assessed based on the colour and odour of menstrual blood.<sup>[8]</sup>
- Treatments described in the *Yonivyapada* chapter are adopted according to the *Dosha* involved.
- Therapeutic approaches recommended for conditions such as *Raktaatisara*, *Raktapitta*, and *Raktarsha* are also considered useful in the management of *Asrigdara*.
- In young women with fewer complications and a suitable constitution, treatment is planned on the lines of *Adhogata Raktapitta*.
- *Basti* therapy is considered an important modality in the treatment of *Asrigdara*.
- *Virechana* (purgation therapy) is also described as beneficial in managing *Asrigdara* and other menstrual disorders.

#### General Treatment

General Treatment includes both external and internal methods. Some therapies are applied locally to help control excessive bleeding, while others are administered orally to treat the underlying cause. The methods are described below.

#### Drugs for External/local Use

- Inhalation and local massage using *Shatapushpa* oil are considered beneficial in *Asrigdara*.<sup>[9]</sup>
- The root of *Vyaghranakhi*, collected from a clean and sacred place in the northern direction during *Uttaraphalguni Nakshatra* and tied around the waist of the patient, is described as helpful in controlling excessive menstrual bleeding.<sup>[10]</sup>
- *Uttarbasti* therapy is also indicated. Various types of *Basti* such as *Chandanadi Niruhabasti*, *Rasnadi Niruhabasti*, *Madhukadi Anuvasanabasti*, *Kushadi Asthanabasti*, *Rasnadi Asthanabasti*, and *Mustadi Yapanabasti* are used in the management of *Asrigdara*.

#### Drugs for Internal/Oral Use

- *Kalka* and *Churna* preparation: *Pushyanuga churna*, *Rasanjana* grinded along with the roots of *Tanduliyaka*, mixed with honey and taken in along with rice wash.<sup>[11]</sup>
- *Ghrita*, and *Taila* preparation: *Shatavari Ghrita*, *Shatavari Taila*, *Shatapushpa Taila*, *Sheetakalyanaka Ghrita*, and *Shalmali Ghrita*.
- *Asava* and *Arishta* preparation: *Patrangasava*, *Lodhrasava*, and *Ashokarishta*.

- *Kwatha*:  
*Darvyadi Kwatha* and *Nyagrodhadi Kashaya*.
- *Avaleha* preparation: *Khandakushmandavaleha*, *Brihatkushmandavaleha* and *Khandaamalaka*.
- *Ksheerapaka* preparation: *Ksheerapaka* prepared from the stem bark of *Ashoka*.
- *Rasaushadhi* preparation: *Pradararipu Rasa* and *Bolaparpati*.
- *Vati* preparation: *Chandraprabha Vati* and *Gokshuradi Guggulu*.<sup>[12]</sup>

#### DISCUSSION

In Ayurvedic classical texts, gynecological disorders are explained under *Yonivyapada*. Excessive menstrual bleeding is mentioned as a key feature in several types of *Yonivyapada*. Acharya Vagbhata has described *Raktayoni*, Acharya Charaka has explained *Asrija* and Acharya Sushruta has mentioned *Lohitkshara*, all of which include excessive menstrual bleeding as a major symptom. Among these, *Asrigdara* closely corresponds to Dysfunctional uterine bleeding described in modern medicine. *Asrigdara* is a serious condition, if not treated properly in time, may lead to significant health complications. Excessive menstrual bleeding can result in weakness, dizziness, breathlessness, thirst, burning sensation, drowsiness, anemia and other symptoms related to disturbance of *Vata* due to continuous blood loss. Prevention of *Asrigdara* mainly depends on avoiding the causative factors responsible for excessive menstrual bleeding. The drugs and formulations used in its management are largely dominated by *Kashaya* and *Tikta* properties, which help in controlling bleeding through their astringent action. Along with controlling bleeding, an important goal of treatment is to restore the blood levels in the body, therefore drugs that support blood formation and stabilization are also indicated. Acharya Kashyapa has emphasized the use of purgation therapy (*Virechana*) in the management of *Asrigdara*, as it is considered the most effective therapy for conditions involving *Pitta*. Since blood share similar qualities with *Pitta*, *Virechana* is considered beneficial in disorders arising from blood vitiation. Classical texts such as *Charak Samhita*, *Sushruta Samhita*, *Bhavaprakasha*, *Yoga Ratnakara* also describe formulations from the *Prameha* treatment context as useful in *Pradara*, as both conditions involve excessive flow due to functional disturbance of body channels.

#### CONCLUSION

*Asrigdara* is characterized by excessive or prolonged menstrual bleeding, sometimes associated with pain and general discomfort. According to Ayurveda vitiation of blood due to causative factors, along with aggravated *Vata*, leads to increased menstrual flow by affecting the uterine vessels. The management of *Asrigdara* focuses on the removal of causative factors, correction of *Dosha* imbalance, control of bleeding, and restoration of blood vessels. Therapeutic measures with astringent and bitter properties support a healthy menstrual cycle and strengthens reproductive system. In balancing *Rakta* and

Pitta related disturbances, purification therapy specially purgation plays an important role, while Basti therapy is crucial for managing Vata involvement. In essence, the Ayurvedic approach to Asrigdara focuses on treating both the cause and the symptoms. The therapeutic measures discussed in this article are considered safe, reliable, and effective in the management of Asrigdara.

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