

पित्तलानां तु योनीनां:- A CASE STUDY OF ARAJASKA YONI VYAPAD**Bishnupriya Mohanty^{1*}, Lavisha Gaonkar² and Sangram Keshari Das³**¹MD (Samhita), PhD (Basic Principle) Professor & Head. Department of Sanskrit Samhita and Siddhanta.²IV B.A.M.S.³Professor & Head; Dravyaguna Vijnana. Gomantak Ayurveda Mahavidyalaya and Research Centre, Shiroda, Goa. 403103.***Corresponding Author: Dr. Bishnupriya Mohanty**

MD (Samhita), PhD (Basic Principle) Professor & Head. Department of Sanskrit Samhita and Siddhanta.

Article Received on 04/04/2023

Article Revised on 24/04/2023

Article Accepted on 14/05/2023

ABSTRACT

Pandu Roga is one of the major categories of diseases described in Ayurveda with its own specific etiopathogenesis and treatment. It is such a disease in which discoloration of skin has been given much more importance. This discoloration is mainly due to depletion of Rasa and Rakta the association of other Dhatu and Tridosha. This depletion of Dhatus mostly happened due to change in lifestyle which results in Mandagni (Depletion of Agni). Thus the women prone to various diseases like yoni Rogas, metabolic and endocrine disorders. All the classics have given the number of Yonivyapad as twenty. Arajaska is one type of Yonivyapad, where Pitta Dosha which is situated at the Yoni and Garbhashaya vitiates the Rakta and the woman becomes emaciated, discolored this condition known as Arajaska. Anaemia is one of the most common nutritional problems in the world today.

KEYWORDS: Arajaska; Pandu; Shodhana; Shamana; Yonivyapad.**INTRODUCTION**

Anaemia is a disease characterized by pallor of body which strikingly resembles with 'Anaemia' of modern science, disease to reduction in number of RBCs per cumm of Blood and quantity of Hb resulting in pallor like other symptoms. Anemia (Pandu) is defined as reduction in hemoglobin mass below the critical level. Usual symptoms of anemia are fatigue, giddiness and breathlessness on exertion, sleeplessness, palpitation, loss of appetite. In severe anaemia, the nails of the fingers and toe become brittle and spoon shaped, B₁₂ or folic acid deficiency (poor dietary intake or excessive bleeding), chronic diseases (Rheumatoid arthritis, kidney disease), bone marrow failure (Aplastic anaemia), loss of blood through heavy menstruation or persistent infections such as malaria and hookworm infestations. It also increases the maternal morbidity, fetal and neonatal mortality and morbidity significantly. Anaemia is the most common nutritional problem in the world and mainly affects women of child-bearing age (especially during pregnancy and lactation) and young children. Globally 30% of the total world population is anaemic and half of them are suffering from Iron Deficiency Anaemia. Anaemia in pregnancy is present in very high percentage of pregnant women in India. 1 Ayurveda mentioned excessive intake of alkaline, sour, salty, too hot, incompatible diet, excessive use of black gram,

Sesame oil, excessive exercise, day sleep, suppression of natural urges as the causes of Anaemia. Ayurvedic mangagment of this disease includes many oral drugs for specific treatment to reduce its Symptoms.

MATERIAL AND METHODS

It is a single case study. Informed consent was taken from the patient in her own language.

Personal history

Age: 24 years, Occupation: Student. Address: Margao Goa. Desha: Anupa. Kala: Visarga.

CASE REPORT

A 24 years female patient came to us with chief complaints of Irregular menses, Pallor skin, Loss of appetite, General weakness, Low weight gain. Patient had above complaints since 3 months.

History of personal illness

A 24 Y/F patient came at OPD with the complaint of lack of appetite and giddiness since 15 days, general weakness, low weight gain and irregular menses since 1 year. Her menses was started at the age of 14 years, she had regular menses for 1 year then gradually it becomes irregular. Her skin was pale and dry and the body was

lean with prominence of bone. There is no family history suggestive of this condition.

History of present Illness

Patient was apparently normal before 1 year. When she missed the menstrual cycle, she visited to gynecologist where she underwent haematological investigation which showed low haemoglobin. She advised multivitamins with hormonal therapy for irregular menses. She continues treatment for 2 month, her menses becomes regular, but after 2 months again she had same complaints of irregular menses. So she approached to Ayurveda consultancy for the same.

Past History: No any significant to present condition.

Examination

Vitals are within normal limit. Systemic examination was normal, Prakriti was Pitta Pradhana Vatanibandhi Weight was 38kg and 161cm height.

Ashtavidha pariksha

Nadi was Pittavataja. No complain regarding Mala (Once a day with soft consistency).

Mutra(4 times/day). Jivha was Saama. Shabda was Spashta. Sparsha was Anushna Sheeta.

Drik was pallor as her hemoglobin was low. Akriti was Heena.

Menstrual history

3-4 days in 2-3 months the bleeding was average there is no scanty or heavy bleeding, the menses sometime with dysmenorrhoea.

OBSERVATION AND RESULT

Routine hematological investigation

Investigations	BT	AT
Hb%	8.0g/dl	9.4g/dl
TLC (/mm ³)	7400mm ³	8600mm ³
DLC (%)	P (45%), L (40%) E (02%), M (03), B (00%)	P (59%), L (36%), E (03%), M (02%), B (00%).
ESR (mm fall in 1st hour)	52	26
PCV	32%	38%
TRBC	3.28 million/mm ³	4.24million/mm ³
MCV	68fl	74fl
MCH	20.2pg	24.5pg
MCHC	30.5g/dl	34.5g/dl

Diagnosis: Pandu with Arajaska

Total duration: 3 months Treatment Given– Agnideepana, Anulomana and Shodhana.

Treatment given: In First Shamana Chikitsa was given for 15 days followed by Shodhan Chikitsa (Virechana).

Then after 15 days after all examination and investigations, patient underwent for Shodhan Chikitsa in Martrabasti was given followed by Virechana procedure was done in sequence of Purva Karma, Pradhana Karma and Paschat Karma.

Nidana panchaka^[1]

Aharaja: Taking mixed diet and having habit of eating outside food like panipuri, noodles, burger etc.

Viharaja: Patient gets more excretion for the study classes. She has habit of studying at night.

Purva roopa: Irregular menses and weight loss

Roopa: Irregular menses, Pallor skin, Loss of appetite, General weakness, Low weight gain

Samprapti: The discoloration is mainly due to depletion of Rasa and Rakta the association of other Dhatu and Tridosha. This depletion of Dhatus mostly happened due to change in lifestyle which results in Mandagni (depletion of Agni). Thus the women prone to various diseases like yoni Rogas, metabolic and endocrine disorders. All the classics have given the number of Yonivyapad as twenty. Arajaska is one of the type of Yonivyapad, where Pitta Dosha which is situated at the Yoni and Garbhashaya vitiates the Rakta and the woman becomes emaciated, discolored this condition known as Arajaska.^[2-4]

Upashaya/Anupashaya: Not known.

Samprapti ghatak

Dosha: Vatapitta Pradhan Tridoshas. **Dushya:** Rasa, Rakta. **Srotas:** Rasavaha, Raktavaha. **Stroto Dushti:** Sangha and Vimargagamana. **Roga Marga:** Madhyama **Angi Dusthi:** Ama, Jatharagani and Dhatvagni. **Adhithana:** Twak, Netra, Garbhashaya. **Vyakta Sthana:** Twak, Netra, Garbhashaya.

In Purvakarma Deepana, Pachana along with Snehapana was given for 6 days followed by Abhyanga and Swedana.

Then in Pradhana Karma Virechana was done, After, obtaining SamyakVirechana Lakshana patient was advised to follow the Samsarjana Karma for five days which was followed by Shaman Chikitsa.

RESULT

After 3 months of treatment the patient gained weight by 3.4 kg, has started menses regularly and appetite also increased.

DISCUSSION^[5-8]

In Ayurveda Pitta Dosha is Ashrayeashraya Bhava of Rakta Dhatu and Vata Dosha is responsible for the excretion of Rakta from uterus. Hence, in such condition where there is sign and symptoms are like discoloration of skin along with emaciation there is vitiation of Vata, Pitta Dosha along with Rasa, Rakta Dhatu. The disease of Yoni never takes place without vitiation of Vata Dosha. Hence first Vata Dosha should be regularized by given Basti Chikitsa in the form of Matra Basti by KsheerabalaTaila contains Balya Dravyas which is directly indicated in Vata Dusti. Also, by its Deepana Pachana and Bhrimhana it influenced the action of Dhatvagni and Pachakagni which modified digestion and increase absorption of nutrients along with increased Dhatu Parinama which helps to correct the Dhatu Poshana results in pacification of Lakshana of Pandu. After Vata which were assessed by increased in appetite, the management of other Dosha should be regularized. The other Dosha like Pitta was regularized by given Virechana followed by Samsarjan Karma. According to Acharya Shodhan Karma like Virechana is the best Chikitsa for vitiated Pitta. In this case study Virechana was given in the sequence of Purvakarma, Pradhana Karma and Paschat Karma.

Krimikuthar Rasa and **Amapachakvati** was given which helps in Agni Vardhana and Ama Pachana.

Then in Purvakarma of **Virechana Trikatu** was given for 3 days which is the best Deepana Pachana drug.

After Deepana Pachana, **Pancha Tikta Ghrita** was given in increasing dose for 6 days. Abhyantara Snehana which helps in Pitta Shamana. All contents of Panchatikta Ghrita are having properties like Tikta Rasa, Ruksha and Laghu Guna. It mainly acts on Kleda, Lasika, Rakta, Pitta and Shleshma which help in balancing and correcting vitiated Doshas and Dhatus. It has Dipana, Pachana, Stroto Shodhaka, Rakta Prasadana, Rakta Shodhaka, Kushthaghna and Varnya properties. The properties like Dipana, Pachana helps in Stroto Shodhana. Rakta Prasadana and Rakta Shodhaka as well as correcting Rakta Dhatu and Rakta Vaha Strotodushti.

Dashmooltaila was used for Abhyanga that is for Bahya Snehana before Virechana. It helps in increases blood circulation Abhyanga was followed by Sarvanganadi Sweda which helps in causes Doshavilayana (liquefaction) and brings Doshas from Shakha to Koshtha that is Amashaya, for their elimination. It also helps in removing obstruction of Strotasa (Shrota Shodhaka).

Snehana and Swedana alleviate Vata and Kapha Dosha and decreases Kharatwa due to its Snighdha Guna. In Pradhana Karma Virechana was given by preparing Kwatha of drugs Nimba, Patola, Vyaghri, Guduchi, Vasa, Triphala-Haritaki, Vibhitaki, After that Virechana was assessed by its quantity of intake medicine and Vega. After obtaining Samyak Virechana Lakshana the Virechana was followed by Samsarjana Karma in Paschat Karma.

After Shodhana of body, Shamana given by **Lohasava** and **Kumari Asava** for the duration of 2 months in proper dose and time. All this Shodhana and Shamana Chikitsa equally help to reduce the signs and symptoms of Pandu and Arajaska.

After all Shodhana Chikitsa in Shamana Chikitsa the formulation like Lohasava was continued which contain Loha and other ingredients and Kumari Asava contains Kumari as the main drug. Kumari Asava has addition with these drugs having Appetizer, Digestive and Carminative properties. The drugs like Amalaki and Pippali acts as a Rasayana and also having Pandu Rogaghna properties. **Amalaki** possess antioxidant activity and contain vitamin C which helps for the proper absorption of iron from the gut. Also the Lohasava is directly indicated in the treatment to Panduroga, Agnimandya, Krimi and Kushta. Likewise the Kumaryasava is indicated in bleeding disorders. All the above treatment was decided on the basis of involvement of Dosha and Dushya.

Raja pravartani vati: The function of Apana Vayu and Raja is the Upa Dhatu of Rasa and Rakta. The Rakta Dushya Janya Raja is formed by Ahara Rasa, so for Nirama Ahara Rasa formation, Deepana Pachana Chikitsa was given. For procedure Matra Basti was given and Shodhana ensures as a complete eradication of Vikruta Doshas. For Vatanulomana Matra Basti was given. It also increases Agneya condition of the body which is resulting into relative increase in Artava.

CONCLUSION

The sign and symptoms of Pandu present in 24 years old female having associated complaints like irregular menses and lack of appetite was fully recovered after 3 months of treatment and also the menses becomes regular and the Hb% was increased with increased in weight by 3.4 kg by Ayurveda modalities like Shodhana and Shamana Chikitsa.

REFERENCES

1. Caraka Samhita, Vol I & II, Chaukhamba Bharti Academy Varanasi, 1984; I – II.
2. Madhava Kara Madhava Nidana, Chaukhamba Sanskrit series Varanasi, 1955; 115.
3. Sharma, P.V. Dravyaguna Vijnana, Chaukhamba Sanskrit Sansthan, Varanasi, 1975; III – II.
4. Shaw, textbook of Gynaecology, Carcinoma of the cervix-25, edited by V. Padubidri and Shirish N.

- Daftary, B.I. Churchill Livingstone PVT Ltd-New Delhi publication, 1994; 11: 428.
5. Sushruta Susruta Samhita, "Ayurvedic Tattwa Sandippika commentary by Ambika Duttshastri; Chaukhambha Sanskrit series office, Varanasi, 1966.
 6. Dutta D C. Textbook of Gynaecology including Contraception. Kolkota. New Central Book Agency, 2009; 4: 5.
 7. Vagbhat Astanga Hridaya with Vidyotini commentary by Kaviraj Atrideva Gupta edited by Pt Yadunandan Upadhyaya, Chaukhamba, Chaukhamba Sanskrit Sanstan, Varanasi, 1975.
 8. Williams M M. A Sanskrit English Dictionary. Delhi: Motilal Banarasisidass Publishers Private Limited, 1997; 440: 1.