

**STUDY OF CORRELATION BETWEEN PITTAVRUTTA APAN AND RAKTAPRADAR
WITH SPECIAL REFERENCE TO MENORRHAGIA**Swati Tejraro Deshmukh^{*1}, Avinash Deshmukh² and Deepali Amle³¹P. G. Scholar, ²Associate Professor, ³HOD of Rog Nidan Department.
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ABSTRACT

The concept of Avarana is most unique condition in Ayurveda to understand, analyse, and interpret. The word avarana means avarodha and gatinirodha. There are many types of avarana mentioned in charaka samhita. One of the type is pittavrutta apan, in which pitta dosha is avaraka dosha apan is avrutta, one of the symptoms is Asruksrava in the form of Raktapradara which may correlated with Menorrhagia which is very common disorder. So if diagnosis and treatment is done in context of avarana then chronicity of disease will be reduced.

KEYWORDS: Avarana, pittavrutta apan, menorrhagia.**INTRODUCTION**

All the function of the body is controlled by three fundamental factors called Tridosha. The manifestation of vaatvyadhi usually occurs either through dhatukshya or through margasya avarana. Vaata possesses chala guna quality which is responsible for different body processes, if vata gets obstructed then its work is hindered and results in vaatvyadhi manifestation.

Avarana literally means obstruction or to cover. Knowledge of avarana helps in understanding the pathophysiology i.e. samprapti it is easy to treat disease.^[1]

Women handle the menstruation in various ways. For example, some may interpret dysmenorrhoea period pains as part of a monthly cycle. However, menorrhagia is one of the most frequently reported complaints of childbearing females. Generally speaking, total menstrual blood loss is between 35-80ml, but losses of more than 80ml are defined as heavy, but may be 500ml in extreme cases.^[2]

Menorrhagia symptoms mimic the symptoms of pittavrutta apan. So there is vikruti visham samaway which helps in understanding pittavrutta apan. In any type of avarana there is two components one is avrutta dosha and the dosha whose function get affected by obstruction or covering and second component is the avaraka which causing avarana of peculiar dosha.

Types of Avarana^[1] - 3

- Doshavrutta vata
- Dhatwavrutta vata
- Parasparavrutta vata

The symptomology of the avarana depends on the place wherever dosha dushya sammuchharna has taken place.

MATERIAL AND METHODS**Pitta dosha^[2]**

Sthana- pitta doshas one of the samanyasthana is rudhir and ranjak pitta, it shows function related to erythropoiesis. Sara and drava guna of pitta vitiates function of Apan vayu.

Apan vayu^[5]

Apan vayu which is located in shroni, medhra, basti, it is responsible for elimination of urine, stool, toxins etc. this type of vata has anuloman gati i.e. it governs with downward direction when its gati is hampered, it results in disturbances of apan vayu and eventually deteriorates evacuation of menstrual content.

Paraspara avaran

One vata type can cause occultation or obstruction of movement of another vata type.

This phenomenon is called anyonya avarana or paraspara avarana. In nature it is observed that one stream of air obstructs another stream leading to the manifestation of parasparaavarana.

Various fractions of vata move in different directions in the body so that function of one gets obstructed by others, prana, udan moves upward, Apan moves downwards, samanas in lateral direction and vyan moves all over the body. A slight variation in the pathway resulting functional impairment as well as disease. In this type of avarana pitta dosha which is avritta doshas and the apan vayu is awaraka which causes excessive excretion of asruka. The chala guna of vayu and sara guna of pitta plays an important role in forming samprapti of asrugdara,

Lakshanas- Haridramutravarchastvam, guda medhra tapa; rajasccha ativartanam^[1]

- Yellow coloration of urine and stool-haridramutravarchastvam
- Sensation of heat in anus and phallus- guda medhra tapa
- Menorrhagia- rajasccha ativartanam
- Burning sensation

PATHOGENESIS OF MENORRHAGIA^[4]

Menorrhagia also called heavy menstrual bleeding. Clinically menorrhagia defined as total blood loss exceeding 80ml per cycle or menses lasting longer than 7 days.

Endometrium normally produces prostaglandins from arachidonic acid, which are fatty acids. Of these, PGE2 and PGI2 are vasodilators and platelets aggregators. PGF2 α and thromboxane A2 cause vasoconstriction and platelets aggregates. Progesterone is responsible for secretion of PGF2 α . In anovulatory cycles, absence of progesterone causes absence or low level of PGF2 α and menorrhagia. In other cases it is observed that tissue plasminogen activity which fibrinolytic enzyme is increased, and this increased fibrinolysis causes menorrhagia.

Correlation of pathophysiology of Pittavritta apan and raktapradar with special reference to Menorrhagia^[3]

Acharya Charaka has also enumerated asrigdara amongst the diseases of vitiated and pittavritta apan vayu. It can therefore be considered that vayu can be also vitiated only due to covered by pita. The chala guna of vayu and sara guna of pitta plays important role in forming the basic samprapti of asrigadara.

The entire process of development of vyaadhi is because of various causative factors tridosha gets vitiated and leads to agnimandya which leads to rasagni vaishmya and this again leads to vikrutta rasa dhatu nirmana.

Hence the artava is updhatu of rasa also gets vitiated and rakta due to its rasabhavata gets vitiated and increase in amount by pitta prakopak nidhan sevana, the sara and drava guna of pitta being especially vitiated. This factors

affects the uterine vascular circulation along of this pittavritta apan and its chala guna of apan vayu leads to excessive and irregular bleeding which term as Asrigdara.

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