



ISSN 0976-0075 Ayurveda e-Journal Rasamruta

World's First e - journal of Ayurveda

Scientific Revolution in Ayurveda!

Asrugdara (excessive menstrual bleeding) and its management

Vishakha Anil Kasane* and Vinayak K Shinde**

College of Ayurved and Research Centre, Pune

Abstract

Ayurveda is a branch of medicine which has served humanity since ancient times. Both Prophylactic and Curative aspect are dealt in this unique and superb science. In daily practice abnormalities in menstrual function are common conditions seen by Gynecologist and Primary health providers. Abnormal menstrual bleeding is certainly a health concern for women that can significantly impact quality of life. Various studies suggests that, over 75,000 hysterectomies are now carried out every year with 30 % of them carried out for menstrual disturbances alone. In the present article we will see the overall management of Asrugdara according to Modern Science, Surgery and Ayurveda.

Key Words

Asrugdara, menorrhagia, abnormal uterine bleeding, treatment

Introduction

In daily practice abnormalities in menstrual function are common conditions seen by Gynecologist and Primary health providers. Abnormal menstrual bleeding is certainly a health concern for women that can significantly impact quality of life.

Asrugdara is one of the most common menstrual disorders associated with excessive menstrual bleeding with or without inter menstrual bleeding. The menstrual cycle may be defined by its length, regularity, frequency and pattern of menstrual blood loss. The average length of menstrual cycle (Rutuchakra) is usually twenty four to thirty five days. The duration of bleeding

is about four to five days, but ranges from two to seven days. The usual volume of blood loss is approximately 30ml and greater than 80 ml is considered abnormal.

Asrugdara Definition -Menstruation when it comes in excess amount, for a prolonged period and even with or without intermenstrual (during menstruation excessive in amount and for prolonged period, but in intermenstrual period even scanty and for short duration) bleeding, different from the features of normal menstrual blood or denoting the specific dosha as described in SushrutaSutrasthana is known as Asrugdara.

Classification of Asrugdara according to Ayurveda

1. VatajaAsrugdara,
2. PittajaAsrugdara
3. KaphajaAsrugdara,
4. SannipatikaAsrugdara.

Classification according to Modern aspect-

1. Menorrhagia - Excessive menstrual bleeding (Excessive menstrual loss in amount or duration or both)
2. Inter menstrual bleeding at regular intervals of 2 to 3 weeks
 - i) Polymenorrhoea - Bleeding is normal in amount
 - ii) Epimenorrhoea- Bleeding is heavy
3. Metrorrhagia- Irregular intermenstrual uterine bleeding
4. Dysfunctional Uterine bleeding (DUB) - In all the above abnormal Uterine bleeding conditions, when no specific or organic cause (Systemic / hematological / pelvic) is found, then, this is called as DUB.

Symptoms of Asrugdara

AtiRajastravapraman (Excessive menstrual blood loss)

Atyadhik Raja kalavadhi (Prolonged duration of menstrual flow)

GranthilRajastravswaroop (Passage of blood clots)

Angamarda (Bodyache)

Adhoudarshool (Pain in hypogastric region)

Kati shool (Low backache)

Management According to Modern Science

A.Medicinal Management-

- 1) Primary health care - Oral iron - folic combination.
- 2) Emergency drugs for heavy menses- Inj. Aquaviron (Free testosterone 15mg in each 1ml ampoule) 50mg I/M daily for two days.
- 3) Oral Contraceptive – e.g. Ovaral-L, Ovaral.
- 4) Non-steroidal anti-inflammatory drugs- e.g.Mefanemic acid 500mg thrice daily.
- 5) Danazole- Danazol 100 mg twice daily is given after food for 4 months.
- 6) Inj.Depo-Provera (Medroxy progesterone acetate) –It is given as 150 mg Intramuscular every 6 weeks
- 7) GnRH agonist – Inj. Decapeptyl 3.75 mg is given Intramuscular every 28 days for 9-12 months

B. Surgical Treatment

- 1) Dilatation and Curettage.
- 2) Trans cervical Resection of Endometrium (TCRE).
- 3) Uterine thermal balloon therapy.
- 4) Trans catheter uterine artery embolization.
- 5) Hysterectomy.

C. Ayurvedic Medicine

- 1) Swarasa- e.g. Vasa swaras.
- 2) Kwatha- e.g.DarvyadhiKwatha.
- 3) Kalka –e.g. Tanduliyakamul (root) kalka taken with Tandulodaka (rice water).
- 4) Awaleha- e.g.Khandakushmandawaleha, Bruhatkushmandawaleha.
- 5) Ghruta- e.g. Vasa Ghruta.
- 6) Oils- e.g. Shatavari tail.

- 7) Rasas- e.g. Bola Parpati, KutajParpati.
- 8) Gutikas- e.g. GokshuradiGuti, ChandraprabhaGuti.
- 9) Asava and Arishta- e.g. Kutajarishta, Ashokarishta.
- 10) Choorna- Pushyanugachoorna with honey followed by rice water, Yashtimadhuchoorna and sita (crystal sugar) with rice water.

Advantages and Benefits of Ayurvedic Medicinal Therapy

1. It is a simple, safe and sure treatment for Asrugdara.
2. It helps in reducing surgical intervention (D & C, Hysterectomy), and its complications.
3. No side effects.
4. Easily available, Cost effective.
5. It is very safe in patients who are otherwise not fit for surgery.

Conclusion:

Considering Asrugdara management Ayurvedic medicines can be used as first line of treatment as it is found quite effective and without any side effects.

*P G Scholar M S (PrasutitantraavumStreeroga)

**Associate Professor, Dept. (PrasutitantraavumStreeroga), College Of Ayurved And Research Centre

References:

1. SushrutaSamhita -
2. Ayurvedatwasandeeepika-Kavi. Dr. AmbikadattShastri, ChaukhambaPrakashan, 13th edition 2010.
3. CharakaSamhita -Pt. Kashinath Pandey, Dr. GorakhnathChaturvedi. ChaukhambaPrakashan, 2008.
4. AstangaHridaya - Kavi. Atridev Gupta, ChaukhambaPrakashan, 2012.
5. Jeffcoats principles of Gynaecology - 6th edition -1990.
6. DrD.C.Dutta, Text book of gynaecology 2nd edition -2000.