

A Comprahensive Review on *Raktapradarahara Choorna* in *Asrigdhara Vis-À-Vis* Abnormal Uterine Bleeding

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Abstract: Background Abnormal Uterine Bleeding (AUB) is variation in normal menstrual flow in terms of amount, frequency, duration and interval in menstrual cycle. The sign and symptom of abnormal excessive vaginal bleeding is given the term *Asrigdhara* in Ayurveda treatises. Excessive uncontrolled bleeding is one of the major gynecological complain causing admission in hospital and later surgical intervention due to emergency created because of prolonged continuous bleeding. Conservative management is a need of time. There are many formulations mentioned in traditional practices to improve quality of life and to reduce the percentage of surgical interventions in gynecological disorder. Aim To evaluate the efficacy of *Raktapradarahara Choorna* in *Asrigdhara*. Materials Classical textbooks of Ayurveda along with Modern literature . Discission *Raktapradarahara choorna* having the qualities of *raktastambhan*, *raktashodhan*, *vatapittaghna* may definitely help in managing *Asrigdhara* which is easily available, cost effective and palatable. Result The compound, *Raktapradarahara Choorna* seems to be an effective combination to relieve symptoms and condition of patient.

Keywords: *Asrigdhara*, Abnormal Uterine Bleeding, *Raktapradarahara Choorna*.

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I. INTRODUCTION

Asrigdhara is characterized by excessive bleeding during *Ritu* (menstruation)/*Anritu* (intermenstrual period) associates with *Angamarda*, *Vedana*, *Dourbalya*, *Bhrama*, *Murcha*,^[1] *Daha* in *Adhaha Pradesha*, *Vankshana*, *Prushta* and *Vrikka*^[2]. Etiology of *asrigdhara* enumerated as A woman who is excessive intake of *Lavana*, *Amla*, *Guru*, *Katu*, *Vidahi*, *Madya*, *Pishita*, *Krishara*, *Payasa* etc, *Prakupita Vata(chala guna)*, *sara* and *drava guna* of *pitta* increase the amount of blood and mixed along with *raja*. Thus, increasing the amount of *Rajas*.^[3] This *rajas* under *Drava rupi vrudha rajas* when reaches the *Dusta Marga*, causes *Pradara*.^[4] Long term intake of *Viruddhahara*, *Madya*, *Adhyashana*, excessive indulgence in *Maithuna*, *Yana*, *Adhwa*, *Shoka*, *Karshana*, *Bhara*, *Abhighata*, *Diva Swapna* is also said to cause *Asrigdhara*.^[5] There are 4 types of *Asrigdhara* namely *Vataja*, *Pittaja*, *Kaphaja* and *Sannipataja*.^[6] *lakshana* in *Vataja Asrigdhara*, the discharged *Rajas* will be *Phenila*, *Tanu*, *Shyava*, *Aruna Varna* associated with pain in *Kati*, *Parshva*, *Prushta Pradesha*. *Rajo varna* in *Pittaja Asrigdhara* is said to be *Asita*, *Peeta* or *Neela*. *Kaphaja* type is characterised by *Ati Raja Pravrutti* which is *Picchila*, *Ghana* and *Shweta Varna*.

In *Sannipataja Asrigdhara* - *Durgandhayukta*, *Majja-Vasopama Rajasrava* is appreciated.

From Vedic period itself, women have been given peerless position as she is responsible for '*prakritidharana*' (*prasavam*), for the creation of entire human race.

The process of cyclic menstruation is a natural phenomenon, normalcy of which indicates to normal reproductive function. Any deviation in either of these frequently results in abnormal bleeding. The abnormal menstrual cycle not only disturbs the general health, but also disrupts the routine work schedule of the women and her entire family with physically psychologically and economically.

The periodicity of menstrual cycle is usually 24 to 35 days. The duration of bleeding is about 4 to 5 days, but ranges from 2 to 7 days. The usual volume of blood loss is approximately 30ml and greater than 80ml is termed as *menorrhagia*.

In Ayurveda, the word 'Asrigdara' explains about prolonged, excessive bleeding and is significantly seen in adolescent and reproductive age group. The prevalence rate of abnormal uterine bleeding in India is 16.09% [7]

AUB is a condition encountered commonly in reproductive age group. The nomenclature was changed in 2011 by international federation of gynecology and obstetrics (FIGO). The FIGO AUB system brought out new definitions for normal and abnormal uterine bleeding in women of reproductive age. This was done for the purpose of having a uniformity in the definitions of normal and abnormal uterine bleeding. The FIGO-AUB system introduced PALM-COEIN to classify and subclassify the potential reason for AUB. This change in nomenclature was needed to facilitate research and clinical care of patients.

According to contemporary science, they include uses of Antifibrotic agents and Hormonal treatment which may lead to many complications.

Our acharya's have given many medical management which includes like *bol parpati*, *rakta-pradaranthaka rasa*, *lodrasava*, *praduripu rasa*, *pushyanuga choorna* etc as per the types of *asrigdhara* but, still there is always need of potent medication for management of *asrigdhara* in a better way. So, hence "Keeping this thing in mind, the drug *Raktapradarahara choorna* [8] explained in *Bhaishajya Ratnavali* for *Asrigdara* was selected for comprehensive study in this article.

II. DRUG REVIEW

धातुज्जनाभ्याचूर्णं तोयपीतं रजो हरेत्। शूलुच्छदमिश्रिपृष्ठभक्षरं च तदर्णकृत् ॥ भै. र. (66/15)

➤ *Raktapradarahara Choorna*

Table 1: Showing the Details of *RAKTAPRADARAHARA CHOORNA*

Sr. No	Drug	Botanical name	Rasa	Guna	Veerya	Vipaka	Chemical composition
01	<i>Haritaki</i>	TERMINALIA CHEBULA [9]	<i>Pancha rasa</i> (except <i>Lavana</i>), <i>Kashaya</i> mainly	<i>Laghu Ruksha sheeta</i>	<i>Ushna</i>	<i>Madura</i>	Chebolic acid Galic acid, corilagin, chebulagic acid, ellagic acid, triterpenoids
02	<i>Amalaki</i>	EMBLICA OFFICINALIS [11]	<i>Amla pradhana</i> , <i>Pañca rasa</i> (except <i>Lavana</i>)	<i>Laghu Ruksha</i>	<i>sheeta</i>		Ellagic acid, gallic acid, chebulagic acid, astringenin, quercetin, corilagin, leucolin
03	<i>Rasanjana</i>	BERBERIS ARISTATA [10]	<i>Katu, tikta</i>	<i>Laghu ruksha</i>	<i>Ushna</i>	<i>Madura</i>	Protoberberine, Karachine, Dihydrokarachine, tetrahydropalmatine

➤ *Haritaki*

Acharya *bhavaprakash* described the *haritaki* as a first drug in *bhavaprakash Nighantu* as said "king of medicine". It is considered as *Deepana*, *rasayana*, *prajastapana*, *garbhasayasothehara*, *rakta-pitta hara*.

A phenolic acid found in terminalia chebula considered a key component of its bioactive compounds. The natural compound chebulagic acid is a benzopyran tannin derived from terminalia chebula. It was originally discovered as an inhibitor of cyclo-oxygenase (a key thrombosis promoter). Cyclo-oxygenase is an enzyme that converts arachidonic acid into prostaglandins and thromboxane.

➤ *Amalaki*

Rasayana, *stambana*, *raktastambaka*, *rakta prasada*, *rakta pitta shamaka*, and ellagic acid improve hematological parameters, quercetin induce thromboelastographic changes in the normal individual and in several coagulopathies, quercetin -a bioflavonoid may help in menorrhagia reducing uterine cells proliferation and migration.

➤ *Rasanjana*

Potent *pittahara* and *garbhashaya shodhaka*, *B. aristata* exhibits various pharmacological activities, including hepatoprotective effects, anti-inflammatory properties, anti-diabetic potential, Karachine, Dihydrokarachine, tetrahydropalmatine inhibition of platelet aggregation and adhesion.

III. PROBABLE MODE OF ACTION RAKTAPRADARAHARA CHOORNA

Raktapradarahara Choorna has *Yonidosha* (Alleviation of Vaginal disorders) properties. It also has anti-inflammatory, analgesic and antifibrinolytic properties that influence the vascular apparatus of reproductive system. In addition, it also does *Kleda Shoshana* (Dryness of moisture), *Raktapitta Prashamana* (Alleviation of *Rakta* and *Pitta doshas*), *Lekhana* (Scraping), *Samgrahi* (Absorbs moisture) and *Stambhaka* (Stoppage or blockage of body fluids). Thus, normalized endometrial thickness. This *Lekhana* action symptomatically enhance as shedding of endometrium and helps in arresting the bleeding. With its *Shothahara* (Anti-

inflammatory) properties it reduces uterine congestion also by its *Shothahara* (Anti-inflammatory) action. It also has *Dahaprashamana* (Reduction of burning sensation) action and corrects burning sensation of the body.

IV. DISCUSSION

In the pathogenesis of *Asrugdara*, the qualities of *Vata*, including its *Chalaguna*, and the *Sara* and *Dravya Guna* of *Pitta*, contribute to an increase in blood flow, which becomes mixed with *Raja* (menstrual blood). To control excessive menstrual bleeding, treatments such as *Raktsthambhak*, *Tikta-rasa*, *Deepan Pachaniya*, and *Sheetagunatmak* drugs may help balance the *Sara* and *Dravya Guna* of *Pitta*. These therapies can address disturbances in the endometrial blood vessels and capillaries, normalizing them and reducing excessive menstrual flow through the process of *Strotoshodhan*, ultimately helping the female experience her menstrual cycle with normal blood flow.

In short, most of the drugs in the above treatment possess *Kashaya Rasa*, which have *Raktsthambhak*, *Raktashodhak*, and *Sandhaniya* properties. These drugs, with their *Sheetveerya* property, are *Raktsthambhak*, *Pittashamak*, and *Daahprashamn*. Their *Vipaak*, being *Katu*, provides *Strotoshodhan*, *Ampachan*, and *Shothhara* properties. Due to these combined effects, the *Grahi* action (ability to retain substances in the body) is achieved, making these drugs highly effective in managing bleeding conditions, particularly in controlling abnormal and excessive menstrual bleeding (HMB).

V. CONCLUSION

Heavy menstrual bleeding (HMB) imposes considerable psychological distress and significantly impairs a woman's physical activities. It often disrupts daily routines and normal social functioning. Prolonged and excessive menstrual bleeding, if left untreated, can result in serious, potentially life-threatening complications. Patients with chronic HMB frequently develop severe anemia and its associated consequences. Abnormal Uterine Bleeding (AUB) adversely impacts the overall quality of life, affecting both physical and mental well-being. Therefore, the above-mentioned observations support the inclusion of this formulation as an effective therapeutic approach in the management of *Asrigdara* (Abnormal Uterine Bleeding) within the Ayurvedic system of medicine.

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