DEVELOPMENT AND VALIDATION OF ASSESSMENT TOOL FOR ASRIGDARA W.S.R. TO PITTAJA ASRIGDARA

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ABSTRACT
Continuation of race by giving birth to offspring are the special qualities of woman. For proper fulfillment of the same purpose women she is bestowed with the quality of Strikarabhavas. Lady having regular masika dharma, possessing shuddha artava, shuddha yoni and garbhashaya can only bestow a shreyasi praja. On the contrary, abnormality in the menstrual regime leading to uncontrolled heavy menstrual bleeding is a major life threatening condition. Of course the Health of the female is disturbed rather the whole family of her will be in anxious state. Untreated conditions will definitely land up in infertility a major social problem. Proper follow of Rajaswala charya, ahara vihara of the lady will solve the condition in most of the cases. Knowledge of the Healthy menstrual pattern, nature and amount of monthly bleeding, its normal abnormal condition will give the clue on doshik vitiation and is going to prevent the consequence of major illness. Here an attempt is made for Development of standard parameters of menstrual bleeding with respect of pittaja qualities in case of Asrigdara.

KEYWORDS: Artava Lakshanas, Gandha, Pittaja Asrigdara, Ushnata, Varna.

INTRODUCTION
“The Happiness of the human society needs proper care and respect of woman”. Nidation of seed will grow only in a favourable environment, Likewise production of good offspring highly depends on the woman’s health, that’s why nari is said as “Apatyamula”. Menstruation is a natural physical specific property of a female. Artava or menstrual blood is expelled from the uterus through vagina in biological rhythm.
Asrigdara indicates the excessive and irregularity of menstruation. It is a disease caused by vitiation of all the three doshas, with a clear predominance of pitta and manifesting as excessive amount of blood loss or long duration of blood loss or short inter menstrual period. This can be menometrorrhagia.

In charaka Samhita, sharangadhara Samhita, madhava Nidana, bhavaprakasha and yogaratnakara all these acharyas classify Asrigdara under four groups. Among the four varieties, here we are dealing with Pittaja Asrigdara for validation.

Aims and Objectives
- Compilation and analysis of references of Pittaja Asrigdara.
- To develop the parameters for symptoms of Pittaja Asrigdara.

MATERIALS
Instruments - Thermometer, Cappillary glass pipette, Glass plate, dropper, Sample collecting test tube, glass container with a lid for closing.

METHODS
Analysis of symptoms of Pittaja Asrigdara.
- अम्लोणलवणणारे पितं प्रकृतत यदा। पूर्वाक्त प्रदर्श कुर्यात् पैतिंक सिंहगतं ब्रजण।। सनीलस्थवा पीतमल्युणणसिंत स्वतः। निल्लरणरत स्वतं मुहुर्मुख्यस्थानस्थिमतं॥। दाहसांगतुष्ट्ययोजनस्वरस्माप्नुसारं। असुर्दरं पैतिंक स्यात् ........... (चसं.चि.30/214–216)
- नीलं पैतं हरितं श्यामं विस्त्रमनिष्टं पिपीलिकां।
- मक्षिकाणमस्कन्धं च पितंतु दुर्बद्। (विस्त्रम आयामशी दत्तण) ; सू. सू. 14/21द
- गूहामण्डलमोकारकृत्स्तं पैतं हरितं विस्त्रं वस्त्रयाध्याधि
- कदुचाणामयक्षिणमिक्षिणयाय्यायस्कन्धं सच्चतं गोमुखम पितातां॥। (अ.सं.सू. 38/19)
- सपीतीनालिसितत्त्वतः पितालित्वकुं भूषयै गंनान गंनात। (पितालित्वकुं दाहिमिमचादिमचुक्तं। भृष्यै गंनान बहुवैगृह)। (महुकोश टीका)
After analysing these symptoms can be categorised as
1. Generalised symptoms.
2. Symptoms related to Menstruation.

The Generalised symptoms as per different acharyas are

Table I.

<table>
<thead>
<tr>
<th>Daaha</th>
<th>Charaka</th>
<th>Sushruta</th>
<th>Dalhana</th>
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<tbody>
<tr>
<td>Raaga</td>
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<td>Trushna</td>
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<td>Moha</td>
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<td>Jwara</td>
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<td>Bhrama</td>
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<td>Angamarda</td>
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<tr>
<td>Garbhasaya Arti</td>
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<tr>
<td>Daha in shroni, vankshana, prushta, vrukka and kukshi.</td>
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</table>

Symptoms related to Nature of Menstrual flow are

Table II.

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<tbody>
<tr>
<td>Peeta Varna</td>
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<td>Asita Varna (Krushna+Raktha)</td>
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<tr>
<td>Harita Varna</td>
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<td>Shyaava Varna</td>
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<tr>
<td>Rasaanjanavath (Krishna+Peeta)</td>
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<td>Gruhadhumavath</td>
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<td>Gomutrabha</td>
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<td>Sachandraka</td>
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<td>Katu Rasayukta</td>
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<td>Pepeelika makshika apriya</td>
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<td>Askhandhata</td>
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<tr>
<td>Ushnata yukta</td>
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<td>Muhur muhur srava</td>
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<td>Bhrusha Vega srava</td>
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<td>Ruja yukta srava</td>
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Self designed assessment criteria of some of the above mentioned generalised and localized symptoms are as follows.

1. **Ushnata yukta Pitta dushita artava**
In case of Asrugdara there is feeling of hotness by the patient during menstrual flow. This can be assessed by measuring per vaginal temperature. Here gradings were given according different temper mentioned.

![Image of a thermometer]

Normal Vaginal Temperature  99 F - 0  
Mild rise of Vaginal Temperature  99-100 F - 1  
Moderate rise of Vaginal Temp. 100 – 101 F – 2  
Severe rise of Vaginal Temp 101 -102 F – 3

2. **Varna of Pitta dushita artava**
Colour of Menstrual blood in Pittaja Asrugdara are peeta, neela, harita, asita, and shyava varna. A standard colour strips were prepared as per the colour explained. Menstrual blood of patient is compared with those standard coloured strips.

<table>
<thead>
<tr>
<th>Neela varna</th>
<th>Peeta varna</th>
<th>Harita varna</th>
<th>Shyav varna</th>
</tr>
</thead>
</table>

![Standard Colour Strips of Pitta artava](image)

3. **Gandha of Pitta dushita artava**
Perception of different varieties of altered smell of artava is explained in classics for pittaja asrugdara patients, According to those varied smell perception, patients were enquired for the presence of any of these odour in their menstrual flow.
Table III.

<table>
<thead>
<tr>
<th></th>
<th>Sushruta</th>
<th>Vagbhata</th>
<th>Dalhana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mathsya Gandha</td>
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<td>✓</td>
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<tr>
<td>Visra Gandha</td>
<td>✓</td>
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<tr>
<td>Aama Gandha</td>
<td>-</td>
<td>-</td>
<td>✓</td>
</tr>
</tbody>
</table>

4. **Artava apriyata by pipeelika and makshika.**

As per our classics, in *Pittaja Ashrughara - Pitta dushita artava* is disliked or rejected by flies and ants. This can be demonstrated as follows.

Clean glass container with a covering lid is taken. 2ml of Menstrual blood is dropped in the centre. Housefly and ants were allowed inside the container where menstrual blood is placed. These insects were observed for half an hour. Wandering around the sample or rejection of Menstrual blood by these insects confirms the predominance of *Pitta*.

5. **Askandata lakshana of Pitta dushita artava**

*Acharyas* explain that *Pitta dushita artava* is *Askandata* in nature. To know this inability of clotting mechanism, Menstrual blood is taken in micro-capillary tube. The capillary tube is then broken slowly after 4 minutes duration. Absence of fibrin strings or thread like structure while breaking the capillary tube confirms that *Pitta dushita artava* does not clot.

6. **Vegasravi lakshana of Pittadushita artava**

The *Pittaja asrughara artava* is not having clots during its flow. This *artava* is having *vegasravi guna*. Due to the action of fibrinolysis, the clotting mechanism is altered.
This can be understood by observing the duration of soaking of sanitary pads by the menstrual blood.

Soaking of one pad within 5-6 hours – 0
Soaking of one pad within 3-4 hours – 1
Soaking of one pad within 2-3 hours - 2
Soaking of one pad within 1-2 hours – 3

**DISCUSSION**

After scrutinizing the details of pittaja Asrugdara lakshana, for proper understanding of the disease condition, we have developed certain parameters with gradings. These were standardized after adequate pilot study. The nature of artava in case of pittaja asrugdara is explained by all our acharyas. Among them important, clinically projectable signs and symptoms were considered.

The parameters developed for the Pittaja Asrugdara sample are as follows.

1. *Ushnata yukta Pitta dushita artava*
2. *Varna of Pitta dushita artava*
3. *Gandha of Pitta dushita artava*
4. *Artava apriyata by pipeelika and makshika.*
5. *Askandata lakshana of Pitta dushita artava*
6. *Vegasravi lakshana of Pittadushita artava*

There is increased hotness in vagina is mentioned and as well as observed in the patients of *Pittaja Asrigdara*. For the clinical purpose, to assess the condition, thermometer can be very well used in the patients during their bleeding phase, according to the vaginal temperature grading mentioned will help us to know the severity.

There is mention of variation in the colour of the menstrual blood in every *doshik* vitiation. In the same way, reference for different pittaja artava varna is explained. They were *peeta, neela, harita, asita, and shyava varna*. The pittja artava should coincide with the colour
mentioned. With this point of view, standard colourometer is prepared. The altered colour if resembles with the colour of standard strips, that infers the involvement of the pittadosha in causing abnormal menstrual blood loss.

Pittaja type of gandha is also mentioned by our acharyas, they are matsya gandha, ama gandha and visra gandha. When enquired with the patients they accepted with the presence of fishy odour. Accepting of these odour in their menstrual blood, will give the clue regarding pittaja involvement in the excessive menstrual flow.

The rejection of sample of menstrual blood of the patient of Asrugdara is very well seen, when we treated the sample to the flies and ants. There were no fibrin strings seen when capillary tube containing menstrual blood is broken. This confirms inability to clot or Askandata lakshana of Pitta dushta artava. Vegasravi laxkhana of the artava is analysed by counting the wetting of the sanitary pads in particular duration of time. Grading were given according to wetting of single sanitary pad in different time duration. That definitely confirms the less flow or heavy menstrual flow.

All these parameters were of tremendous clinical value in understanding the tara tama bhava of pittaja lakshanas. Other differential variable diseases can be easily ruled out. Final diagnosis is achieved on the ayurvedic parameters only. There won’t be any doubt in treating such patients. These were like investigatory modalities of ayurveda. There is necessary for development of such standard parameters for all the doshas and lakshanas mentioned in our literature. The clinical trial should be conducted on these conceptual work.

CONCLUSION
To have complete knowledge of any particular subject is a reward itself. In Ayurvedic science there are tremendous references available for the research scholar and the work to be done is awaiting. In this view, conceptual study and analysis of the pittaja asrugdhara is the need of the day. Inadequate parameters for the analysis of the condition in the present day scenario is the main drawback for ayurvedic literature. Here standard parameters were prepared for analysis of doshik involvement in case of pittaja Asrugdara. These parameters will help us in understanding of the condition, ruling of differential diagnosis and treatment of the Asrugdara patients. The unavoidable consequences can be very well prevented.
REFERENCES
3. Astanga- Samgraha of Vraddhavagbhata edited with Saroj hindi commentary by Dr. Ravi Dutt Tripathi, Chaukhambha Sanskrit Pratisthan Delhi, 2003.