A Clinical Study to Evaluate the Efficacy of Rajpravartini Vati & Hingvashtak Vati in the Treatment of Kashtartava W. S. R. To Dysmenorrhoea

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Abstract: The women face a lot of physical & psychological problem both at the time of menarche as well as menopause. Kashtartava is a disease where in a female during her reproductive age experiences difficult & painful menstruation. Pathologically its tridoshas having vata predominance .A total 60 patients were randomly divided in these group. An assessment was done on the basis of subjective as well as objective parameters with the help of vas. The study revealed the good report.

Key words: kashtartava – Dysmenorrhoea, Rajpravartini vati, Hingvashtat vati.

I. INTRODUCTION

Life today has become very difficult for women because its so complex, competitive, ambitious, fast, female have to play a dual role in society which lead tremendous physical & mental stress. The dysmenorrhoea could be attributed to this change circumstance of modern city day civilisation. Kashtartava is a disease where in a female during her reproductive age experiences difficult & painful menstruation. Similar disease entity has been termed as dysmenorrhoea in the modern medical sciences. Dysmenorrhoea meaning painful menstruation is one of the major distressing factor In adolescent girls & women Its complex characterised by Supra pubic cramps, lumbosacral backache, pain radiating down to anterior aspect of thigh, vomiting. Spasmodic or primary dysmenorrhoea is onset from time of menarche with onset of ovulatory cycle. It interrupts social, economical, educational as well as marital life, it may incapacitate the patients from work necessitating her to give up all business & social obligation & taking herself to bed for one or more days during this period, in modern medical science dysmenorrhoea treated by NSAIDS, OCPs, antispasmodic, analgesic etc. Long term of there use these give rise to side effect like hepatotoxicity, nephrotoxicity etc. In ayurvedic classic all gynaecological problems are described under the yonivyapad though the disease kashtartava is not described in the classic as an individual entity yet it is a symptoms of various yonivyapad specially vatala, udavarta, sannipataka etc kashtartava a symptom which is seen right from 15 to 50 years of age.

AIMS & OBJECTIVE

1)To study the clinical efficacy of rajpravartini vati & hingvashtak vati in the treatment of kashtartava 2)To provide safe, cheapest, non HRT & side effect free management of kashtartava

MATERIAL & METHOD

Patients attending the out patient department of prasutitantra & stree rog at R.A.PODAR ayurvedic hospital Worli Mumbai.60 patients were selected for this study.

INCLUSIVE CRITERIA

Patients willing to participate in this study who gave informed written consent before the trial Patients of age of 16 to 45 yrs female presenting with sign & symptoms of kashtartava

EXCLUSIVE CRITERIA

- 1) Patients who were not willing for trial
- 2) Fibroid, malignancy, polyp, PID, IUCD, Endometriosis, PCOD
- 3) DM, HTN, Koch's, STD, HIV
- 4) Acyclic excessive bleeding

Random sampling technique was adopted patients divided into three groups Group1, Group 2, Group 3.

Group1

Rajpravartini vati 500mg twice a day

Group2

Hingvashtak vati 500mg twice a day

Group 3

Rajpravartini vati +Hingvashtak vati =1000mg twice a day

The total duration of treatment for the patients of all the group was three months

FOLLOW UP

Was conducted every month during menstrual flow and then after completion of trial

CRITERIA OF ASSESSMENT

The assessment has been done clinically on the basis of decrease in clinical parameter and improvement in certain physical parameter(by visual analogue scale)

Intensity of pain was calculated by VAS scale The sign & symptoms were assessed by adopting suitable scoring methods.

II. THE DETAILS ARE AS FOLLOW

SYMPTOMS	0	1	2	3	
Intensity of pain	Nil	Mild (VAS)	Moderate (VAS)	Severe (VAS)	
Duration of pain	Nil	Upto 24 HRS	Upto 48 hrs	Upto 72 hrs	
Vomiting	Absent	Once a day	1-2 times/day	More than 2 times	
Breast	No	Mild	Moderate	Severe	
Tenderness	tenderness	tenderness	tenderness	tenderness	
Anorexia	Absent	Mild	Moderate	Severe	
Constipation	No	Hard strain	Alternate day evacuation	With Medication evacuation	
Fever	No fever	Mild fever at night	Moderate fever throughout day	Severe fever	

OVERALL ASSESSMENT-

TO assess overall effect of therapy following criteria was laid down

COMPLETELY CURED-

More than 90% relief in sign & symptoms as well as score obtained on VAS

MARKLY IMPROVED

More than 75% & less than 90% relief in symptoms % VAS score is 1-5

MODRATELY IMPROVED

More than 50% & less than 75% in sign& symptoms & VAS score is 5-9

NO IMPROVEMENT

Less than 25% relief in sign & symptoms & score greater than 9

III. OBSERVATION & RESULT-

Maximum no. of patients are age group 18-25(70.64%),(23.32%) were age group of 26-40 yrs, (6.04%) were age group of 40-45% most of the patients are married(67.74%) were unmarried(33.26%) were housewife & (27.68%) were of of job Maximum number of patients had constipated bowel habit i.e.81.66% & 16.44% was normal bowel habit 84.20% patients had spicy food diet & 16.80% were on non-spicy diet Maximum no.of patients (82%) had spasmodic type of pain of pain & 18% were having dull ache 62% patients use having anorexia 4.2% had fever 16.64% patients had tenderness 6.7% had fever

Assesment	Group	1	Group	2	Group	3	Total	% wise
	n		N	%age	n	%age	no. of	result
		%age					patients	
Completely	13	65	11	55	15	73	39	65.11%
Cured								
Markedly	2	13	1	5	4	20	7	12.09%
improved								
Moderately	4	20	5	25	5	25	14	24.25%
improved								

IV. DISCUSSION

Women are the original source of progeny, which is contradicted by the disorders pertaining to their reproductive system especially an abnormal menstruation. It is an important cause of concern for health in women not only because of many myths & taboos which surround the subject but also because of the fear of underlying gynaecological problem the discomfort inconvenience loss of paid working hours is becoming more noticeable especially with changing role in occupations out side the house hold is being persued. The srotorodha obstructs the normal downoutward movement circulation of the deviated apanvayu gets localised arthavvaha srotas as especially garbhashay much which is already vulnerable to disease because of non observance of regulations related to reproductive systym.at the time of raja pravrutti the vitiated deviated apanvayu causes painfull menstruation. A clinical study using hinvashtak vati & rajpravartini vati was undertaken on patients suffering from kashtartava. this study show that Immediate response seem encouraging not only in sukashta rajpravrutti but also associate symptoms & raja swarupa.

Hingvashtaka vati due to their ras gun virya& vipaka act as pure vatanulomana so causing normal functioning of apanvayu so result in pain relief & rajpravartini vati does the normal flow of raja so obstruction is removed so this result in pain relief but study shows that the patients group which received both the drug got relief quickly that means release of obstruction & normal apanvayugati cause relief.

In view of unsafe & unsatisfactory modern management & successful use . if indigenous drug it has been repeatedly pointed out that a scientific exploration of indigenous methods of treatment may revel a better therapy for these patients . the treatment which may emerge out of indigenous resource may be relatively less toxic & cheap.

V. CONCLUSION

From this study we can conclude that the group receiving both Hingvashatak vati and Rajpravartini vati got relief more and quickly. So this is safe ,cheap remedy.