

A Clinical Study on the Effect of *Dashmoola Taila Matra Basti* in the Management of *Udavartini Yoni Vyapad*

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ABSTRACT

Udavartini Yoni Vyapad is one amongst such gynecological issue which affects 50% of the women in the reproductive phase. The disease *Udavartini* is mentioned as one among the twenty types of *yoni vyapads* in Charaka Samhita chikitsa sthana. Other classics like Sushruta Samhita and Astanga Samgraha also mentioned clearly about it. The main symptom of *Udavartini yoni vyapad* is “*Artave sa vimukte tu tatksanam labhate sukham*” i.e. relief of pain is obtained immediately after proper discharge of menstrual flow. Along with *Udavartini yonivyapad*, the symptom *Kasta Artava* which can be implied or expressed as “*Kasthena MunchyatiIti Kastartava*” i.e. the condition where in *Artava* is shaded with great difficulty and pain is taken into consideration. In modern perspective it is correlated with dysmenorrhoea which is characterized by severe pain during menstruation. Aim & Objectives: To study the efficacy of *Dashmoola taila matra basti* in the management of *Udavartini yoni vyapad* (Primary Dysmenorrhoea). Materials & Methods: 10 patients diagnosed with *Udavartini yonivyapad* (Primary Dysmenorrhoea) were administered *Dashmoola taila matra basti*. The main ingredient i.e. *Dashmoola taila* was procured from GMP certified pharmacy. Conclusion: Ayurvedic perspective of treatment protocol for *Udavartini yoni vyapad* has been carried out using *Matrabasti* with *Dashmoola taila*. On the basis of observation and results obtained after the completion of the clinical study it can be concluded that *Dashmoola taila matrabasti* shows statistically extremely significant results on intensity of pain (*Vedana*) and amount of menstrual flow (*Artava pramana*). Nausea (*Praseka*) and vomiting (*Chhardi*) during menstruation showed statistically very significant outcome. Thus, *Dashmoola taila matrabasti* can offer very effective, safe and economic outcome in the management of *Udavartini yoni vyapad*.

Key Words *Udavartini yoni vyapad*, Primary Dysmenorrhoea, *Dashmoola taila*, *Matrabasti*

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INTRODUCTION

A women's health status is a primary factor to be considered for the wellbeing and progress of the family as well as the society and country as a whole. However with the advent of new

millennium there have been a lot of changes in the concept life style which have led to genesis of many diseases. Any physical or psychological issue due to the stress and strain of modern era affects the reproductive life as well as social and

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economic life. *Udavartini Yoni Vyapad*¹ is one amongst such gynecological issue which affects 50% of the women in the reproductive phase. The disease *Udavartini* is mentioned as one of *yonivyapads* under twenty types of *yonivyapads* in Charaka Samhita chikitsa sthana. Other classics like Sushruta Samhita and Astanga Samgraha also mentioned clearly about it. But there are many other diseases in which the symptoms of *Udavartini* are described as symptoms. Also, Chakrapani says that any symptom may manifest as a separate entity. Keeping the panorama in mind and looking at the high prevalence of the ailment, the main symptom of *Udavartini yonivyapadi. kasta artava* (painful menstruation) has been emphasized. Due to *vegavrodh, vayu* becomes *pratiloma* and gets lodged in *triyavarta yoni*, characterized by pain, initially obstructs the flow of *rajah* or pushes the *rajah* upwards (*Viloma gati*). The main symptom of *Udavartini yoni vyapad* is “*Artave sa vimukte tu tatksanam labhate sukham*” i.e. relief of pain is obtained immediately after proper discharge of menstrual flow.^{2,3} Along with *Udavartini yonivyapad*, the symptom *Kasta Artava* which can be implied or expressed as “*Kasthena MunchyatiIti Kastartava*” i.e. the condition where in *Artava* shaded with great difficulty and pain is taken into consideration. In modern perspective it is correlated with *Dysmenorrhoea*^{4,5} which is characterized by severe pain during menstruation. Without *Vata* there cannot be any pain. *Vata* is the main responsible factor, though other *doshas* only be present as *anubandhi* to it. So, pain is

produced due to vitiation of *vata dosha* alone or in combination with other *doshas*.⁶ Also *Vata dosha* is the main causative factor behind all *yonivyapads*.⁷ Basti treatment is considered as the best therapeutic procedure for the management of vitiated *vata*, also mentioned in relation to treatment of all the *yonivyapads*. Therefore *matra basti* has been chosen for *udavartini yoni vyapad* to treat the *Viloma gati* of *vata dosha* and cause proper *anuloma* of *vata dosha*. *Samprapti Ghataka* of *Udavartini yoni vyapad* –

- *Dosha: Vata Pradhana Tridosha,*
- *Dushya: Rasa, Rakta, Artava,*
- *Agni: Jatharagni, Dhatvagni Mandya,*
- *Srotasa: Rasa, Rakta and Artava vaha Srotasa,*
- *Srotodushti: Sangaand Vimarga gamana,*
- *Udbhavasthana: Amapakvashaya,*
- *SthanaSamshraya: Garbhashaya,*
- *Vyaktisthana: TriyavartaYoni.*

The drug for *matra basti* we have selected here is *Dashamoola taila*. *Dashmoola* consists of *Bilva, Agnimantha, Shyonaka, Patala, Gambhari, Shalparni, Prishniparni, Gokshura, Kantakari* and *Brihati*. These ingredients of *dashmoola* have-

- *Rasa: Madhur, Kadhaya,*
- *Guna: Laghu, Ruksha,*
- *Veerya: Ushna,*
- *Vipaka: Madhura,*
- *Karma: Tridoshshamaka.*

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Collectively *Dashmoola taila* acts as *Vatahara*, *Shoola-Shothahara*, *Balya* and *Amapachaka*.

AIMS & OBJECTIVES

To study the efficacy of *Dashmoola taila matrabasti* in the management of *Udavartini yoni vyapad* (Primary Dysmenorrhoea)

MATERIALS & METHODS

Ten patients diagnosed with *Udavartini yonivyapad* (Primary Dysmenorrhoea) were administered *Dashmoola taila matra basti*. The main ingredient i.e. *Dashmoola taila* was procured from GMP certified pharmacy.

Method of Data Collection: The present study was carried out on 10 patients diagnosed with *Udavartini yoni vyapad* (Primary Dysmenorrhoea) from the OPD and IPD of IAMC, UHAN, USTM, Meghalaya. Detailed history, physical examination, laboratory investigations were collected in a specially designed Proforma and then analyzed and selected accordingly.

Study Design: It is a single blind clinical study with pre-test and post-test design.

Inclusion Criteria:

- Women of reproductive age between 15-35years
- Patients complaining of painful menstruation with other symptoms of *Udavartini yonivyapad* for atleast 2 consecutive cycle.
- Primary dysmenorrhoea

Exclusion Criteria:

- Pregnant lady
- Patients with severe anaemia
- Cases of dysmenorrhoea associated with pelvic pathologies like uterine fibroid, uterine myoma, malignancy of reproductive organs etc.
- Patients having chronic systemic diseases likely to influence the menstrual cycle like diabetes mellitus, hypertension, tuberculosis, any veneral diseases etc.

Laboratory Investigations:

- Hb%, ESR, TC, DLC
- RBS
- TSH,
- Urine R/E,
- Viral markers
- USG(Lower abdomen) to know pelvic pathology
- Urine hCG (in patients with h/o amenorrhea)

Table 1 Intervention of the study

• Medicine :	• <i>Dashmoola taila</i>
• Mode of administration:	• <i>Matra basti</i> (Rectal route)
• Dose:	• 60ml
• Duration of treatment:	• 7 Days in each cycle for 3 consecutive cycles
• Duration of study:	• 3months
• Time of treatment:	• Starting from mid cycle
• BT Assessment:	• 1st day of menstrual cycle
• AT Follow up Assessment:	
• AT1	• After 1st cycle
• AT2	• After 2nd cycle
• AT3-	• After 3rd cycle

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Table 2 Assessment Parameters

Sl.no.	Criteria	Scorings	BT	AT-1	AT-2	AT-3
	Intensity of pain (Vedana)	1- Menstruation is not painful and daily activity unaffected. (0-4mm of VAS) 1- Menstruation is painful but daily activity not affected. (5-44mm of VAS) 2- Menstruation is painful and daily activity affected. Analgesics needed. (45-74mm of VAS) 3- Menstruation is so painful that patient is unable to do even the routine work. Analgesics taken but without much relief. (> 75mm of VAS)				
	Duration of pain (Vedana avadhi)	1- No pain during menstruation 2- Pain persists for few hours or occasionally during menstruation. 3- Pain persists up to 4 th day. 4- Pain persists for more than 4 th day.				
	Amount of Menstrual flow (Artava praman)	1- 6-7 Pads/Cycle 2- 4-5 Pads/Cycle 3- 2-3 Pads/Cycle 4- SpottingOr1Pad/Cycle				
	Nausea (Praseka)	1- No Nausea 2- 2-3 Times/Day 3- 4-5 Times/Day 4- >5 Times/Day				
	Vomiting (Chhardi)	1- No Vomiting 2- Occasionally 3- 1-2 Times/Day 4- More Than 2times /Day				
	Fatigue (Murcha)	1- No fatigue 2- Fatigue occasionally. 3- Fatigue 2 - 3 times /cycle. 4- Fatigue > 4times/cycle.				

N.B.: Visual analogue scale (VAS)⁸ for pain: The visual analog scale for pain is a straight line with one end meaning no pain and the other end meaning the worst pain imaginable. Here patient makes a point on a 10cm horizontal or vertical

line to indicate their pain intensity, with 0 indicating “no pain” and “10 indicating the worst possible pain”.

OBSERVATION & RESULTS

Table 3 Effect of treatment on Intensity of pain (Vedana)

N	BT-Mean	AT-Mean	Diff D	SD _{BT}	SD _{AT}	SE	T ₉	P value	Remarks	
10		AT-1	1.20	1.00	0.79	0.42	0.211	4.740	0.0011	E.S
		AT-2	0.90	1.30	0.79	0.74	0.153	8.510	0.0001	E.S
		AT-3	0.50	1.70	0.79	0.53	0.213	7.964	0.0001	E.S

Interpretation: The statistical analysis as shown in table 3 revealed that the mean score of intensity of pain(Vedana)was 2.20 before the treatment , reduced to 1.20 in AT-1 ,0.90 in AT-2

& 0.50 in AT-3and this change is statistically considered as extremely significant with P values < 0.0011,<0.0001& <0.0001.

Table 4 Effect of treatment on Duration of pain (Vedana avadhi):

N	BT-Mean	AT-Mean	Diff D	SD _{BT}	SD _{AT}	SE	T ₉	P value	Remarks
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8	1.56	AT-1	0.80	0.76	0.88	0.63	0.163	3.674	0.0051	E.S
		AT-2	0.44	1.12	0.88	0.53	0.200	5.547	0.0005	E.S
		AT-3	0.33	1.23	0.88	0.50	0.222	5.500	0.0006	E.S

Interpretation: The statistical analysis as shown in table 4 revealed that the mean score of duration of pain(*Vedana avadhi*) was 1.56 before the treatment & was reduced to 0.80 in AT-1,0.44 in AT-2 & 0.33 in AT-3 and this change is statistically considered as extremely significant with P values <0.0051,<0.005 & <0.0001 .

Table 5: Effect of treatment on Amount of Menstrual flow (*Artava praman*):

N	BT-Mean	AT-Mean	Diff D	SD _{BT}	SD _{AT}	SE	T ₉	P value	Remarks	
7	1.40	AT-1	1.40	0.00	1.17	0.84	0.211	0.000	1.0000	N.S
		AT-2	1.30	0.10	1.17	0.48	0.277	0.361	0.7263	N.S
		AT-3	1.40	0.00	1.17	0.52	0.258	0.000	1.0000	N.S

Interpretation: The statistical analysis as shown in table 5 revealed that the mean score of amount of menstrual flow(*Artava praman*) was 1.40 before the treatment & 1.40 in AT-1,0.30 in AT-2 & 1.40 in AT-3 and this change is statistically considered as not significant with P values <1.0000,<0.7263 & <1.0000 .

Table 6 Effect of treatment on Nausea (*Praseka*):

N	BT-Mean	AT-Mean	Diff D	SD _{BT}	SD _{AT}	SE	T ₉	P value	Remarks	
6	0.70	AT-1	0.50	0.20	0.67	0.53	0.133	1.500	0.1679	N.S
		AT-2	0.10	0.60	0.67	0.32	0.221	2.713	0.0239	S.
		AT-3	0.00	0.70	0.67	0.00	0.213	3.279	0.0095	V.S

Interpretation: The statistical analysis as shown in table 6 revealed that the mean score of nausea during menstruation (*Praseka*) was 0.70 before the treatment, was reduced to 0.50 in AT-1,0.10 in AT-2 & 0.00 in AT-3 and this change is statistically considered not significant with P value< 0.1679, statistically significant with P value <0.0239 & statistically very significant with P value< 0.0095.

Table 7 Effect of treatment on Vomiting (*Chhardi*):

N	BT-Mean	AT-Mean	Diff D	SD _{BT}	SD _{AT}	SE	T ₉	P value	Remarks	
8	1.10	AT-1	0.70	0.40	0.74	0.67	0.163	2.449	0.0368	S
		AT-2	0.30	0.80	0.74	0.48	0.200	4.000	0.0031	V.S
		AT-3	0.20	0.90	0.74	0.42	0.233	3.857	0.0039	V.S

Interpretation: The statistical analysis as shown in table 7 revealed that the mean score of Vomiting (*Chhardi*) during menstruation was 1.10 before the treatment which was reduced to 0.70 in AT-1,0.30 in AT-2 & 0.20 in AT-3 and this change is statistically considered significant with P value< 0.0368, statistically very significant with P value <0.0031 & < 0.0039.

Table 8 Effect of treatment on Fatigue (*Murcha*):

N	BT-Mean	AT-Mean	Diff D	SD _{BT}	SD _{AT}	SE	T ₉	P value	Remarks	
4	0.50	AT-1	0.10	0.40	0.71	0.32	0.163	2.449	0.0368	S
		AT-2	0.10	0.40	0.71	0.32	0.163	2.449	0.0368	S
		AT-3	0.10	0.40	0.71	0.32	0.163	2.449	0.0368	S

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Interpretation: The statistical analysis as shown in table 8 revealed that the mean score of fatigue (*Murcha*) during menstruation was 0.50 before the treatment was reduced to 0.10 in AT-1, AT-2, & AT-3 and this change is statistically considered as significant with P values <0.0368.

DISCUSSION

Along with new discoveries and innovations the modern era has a lot of stress and strain because of more career orientation, competition and change in life style. This change in life style are affecting the women's life in particular and deranging her reproductive life as well the economic and social life. One such disorder is *Udavartini yoni Vyapad* (Dysmenorrhoea), where a woman suffers from pain in various degrees along with other associated signs and symptoms hampering her both physically and psychologically. The health of women is of prime importance for the society because she is the only one who can procreate and build a healthy nation. Ayurveda have beautifully described about *Dinacharya*, *Ritucharya* as well as *Rajaswala parichaya* i.e. specific diet and regimens to follow during the day, during particular season, specific during menstruation respectively. Till the time these *Paricharyas* were followed there were fewer incidences of disorders and diseases and the shift from these healthy modes of living has cause an increase in number of menstrual disorders.

Vata is the *pradh`an dosha* in *Udavartini yoni vyapad* and there is no medicine more effective than *taila* for the treatment of *Vata Dosha*⁹. So, in the present study we have chosen *Dashmoola taila matra basti*¹⁰ for the management for *Udavartini yoni vyapad*. *Dashmoola taila* by its *Teekshna*, *Usna*, *Sukshma*, *Sara* and *Vyavayi Guna* clears the *Srotavrodh* by entering the *srotas* and causes *anuloma gati* of *apana vayu*. Studies have proven that *Dashmoola taila* possess anti-inflammatory, analgesic as well as antipyretic actions^{11,12}.

Both Acharya Charaka and Acharya Susruta opines that the *virya* of *basti* administered through the rectal pathway reaches the whole body similarly the way when a tree is watered at the root reaches and nourishes the tree. In modern parameters it is explained that the different chemical constituents of *Basti* acts on the Enteric nervous system (ENS) and stimulates the Central Nervous system (CNS) and acts on molecular level. Thus *basti* holds the capacity to balance the hypothalamo-pituitary-ovarian axis and hormones involved in normal functioning of the reproductive system of a healthy woman.

CONCLUSION

Udavartini Yoni vyapad (Dysmenorrhoea) is one of the common diseases of the women in their reproductive phase. The symptom of *Udavartini yoni vyapad* is painful menstruation which disrupts the normal functioning quality of life and interpersonal relationship of a woman. Though

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there has been many progress in modern medicine but still the drug of choice for dysmenorrhoea is NSAIDS which exhibits a common side-effect in the form of gastrointestinal irritation during menstruation along with other features such as nausea, headache, dizziness etc.

Therefore an Ayurvedic perspective of treatment protocol for *Udavartini yoni vyapad* has been carried out using *Matrabasti* with *Dashmoola taila*. On the basis of observation and results obtained after the completion of the clinical study it can be concluded that *Dashmoola taila matrabasti* shows statistically extremely significant results on intensity of pain (*Vedana*) and amount of menstrual flow (*Artava praman*) with P values <0.0001 . Nausea (*Praseka*) and vomiting (*Chhardi*) during menstruation showed statistically very significant outcome with P values <0.0095 & $P <0.0039$ respectively. The Symptom fatigue (*murcha*) showed statistically significant result with P value <0.0368 . Not much change was observed in case of amount of Menstrual flow (*Artava praman*) with statistically not significant values of P. Thus, *Dashmoola taila matrabasti* can offer very effective, safe and economic outcome in the management of *Udavartini yoni vyapad*.

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