

CASE STUDY

Role of *Shatavari Taila Prathimarsha Nasya* and *Lasunadi Vati* in the Management of *Arthava kshaya* (Oligo Hypomenorrhea) - A Case Report

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ABSTRACT

Menstruation is the indication of a regular physiological process involving cyclic uterine bleeding due to the shedding of the endometrial lining. It marks a significant milestone in female puberty. Once initiated, the menstrual cycle typically occurs every 21 to 35 days, with an average cycle of about 28 days. However, modern lifestyle changes, dietary patterns, and increased stress levels often disturb the normal physiological rhythm, potentially disrupting the Hypothalamic-Pituitary-Ovarian (HPO) axis. This disruption can give rise to various gynecological issues, among which *Artava Kshaya* is quite prevalent. *Artava Kshaya* is identified as *Yathochitakala Adarshana* (delayed menstruation), *Alpartva* (scanty flow), and *Yonivedana* (pain in the genital area). In the management of *Artava kshaya*, *Shodhana* and the use of *Agneya Dravyas* are emphasized. Hence *shatavari taila Prathimarsha nasya* and *Lasunadi vati* are used in the treatment of *Arthava kshaya*

Materials and Methods: This is a single case study of an Unmarried women aged 27-years who presented with complaints of irregular menstruation since 2 years, along with weight gain. All lab tests were within normal limits; however, ultrasonography revealed findings suggestive of PCOD. In this case *Shatavari taila prathimarsha nasya* 2 drops in each nostril twice a day after cessation of menstruation till onset of next menstruation and *Lasunadi vati* 500mg thrice a day before food for 1 week after the cessation menstruation for 2 months was given. Patient is advised follow up after each menstrual cycle.

Result: The patient got her periods with an interval of 38days after started taking the medicines. Previously patient was getting her periods with an interval of 45-60days.

Key Words *Arthava kshaya*, *Shatavari Taila*, *Lasunadi Vati*, *Oligomenorrhoea*, *Hypomenorrhea*

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INTRODUCTION

Artava Kshaya is a condition characterized by increased *Vata Dosha* and decreased *Pitta Dosha*, commonly presenting as delayed, scanty, and painful menstruation¹. *Acharya Kashyap*

emphasizes the therapeutic significance of *Shatavari Taila* in managing various gynecological conditions, including *Artava Kshaya*. This formulation exhibits *Vatashamaka*, *Agnideepana*, and *Artavajanana* properties,

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making it beneficial in restoring normal menstrual function². Additionally, the *Agneya* property of *Lasunadi Vati* helps to improve menstrual flow and quantity, as *Artava* is mainly *Pitta*-based in nature. According to the classical Ayurvedic principle “*Sarvada Sarvabhavanam Samanyam Vriddhikaranam*”, substances with similar qualities (Samana Guna) promote the growth of similar functions in the body³. *Shatavari* has been traditionally recommended for conditions such as *Viphala Artava*, *Artava Kshaya*, *Stree Bandhyatwa*, *Anartava*, and *Nastartava*.

CASE REPORT

A 27-year-old unmarried female, working as a teacher and belonging to the Hindu religion, visited the Prasuti Tantra Evam Stri Roga OPD of SDM College of Ayurveda and Hospital, Hassan, in January 2025. She presented with chief complaints of **irregular menstruation and weight gain** persisting for the past **2 years**. One year ago, she consulted an allopathic hospital for the same complaints and was prescribed **oral contraceptive pills for 6 months**. However, the irregular menstruation recurred after discontinuation of the medication. Hence she approached for further management at SDM Hospital.

Past Medical History: k/c/o pcod since 2 years, patient took oral contraceptive pills for 6 months

Past Surgical History: No history of any general, gynecological or any other

Surgery.

Family history: No significant family history was found in this case

Vayathika vruttanta:

- Ahara: Mixed diet with dominance of *Madhura*, *Katu* and *Lavana ahara*
- Vihara: Sedentary lifestyle with prolonged standing
- Nidra: Reduced
- Mala: Constipated
- Mutra: 6–7 times/day
- Vyasana Sambandhi: coffee intake (2 times/day)

Menstrual History:

Present menstrual history

- Last Menstrual Period (LMP): 17/1/2025
- Cycle Interval: 45-60 days
- Duration of Flow: 5 days
- Amount of Flow: Approximately 3 pads per day
- Clots: Absent
- Foul Smell: Absent
- Pain: Absent
- Cycles: Irregular

Past menstrual history:

- Menarche: 13years
- Duration : 5days
- Interval : 28-30days
- Amount : 2-3pads/day
- Pain : Absent
- Clots : Absent
- Smell : Absent
- Cycles ; Regular

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On General Examination

- Built: Obese
- Weight: 71.2 kg
- Height: 162.56 cm
- Body Mass Index (BMI): 26.9 kg/m² (Overweight)
- Blood Pressure: 120/80 mmHg
- Pulse Rate: 76/min
- Respiratory Rate: 16/min
- Tongue: Uncoated

Systemic Examination

- CVS: S1 and S2 were normal
- CNS: Patient was well oriented and conscious
- RS: Normal vesicular breathing
- P/A: Soft non tender, no organomegaly
- B/L breast: Symmetrical, no lump, no tenderness
- B/L nipples: Normal, no discharge

Rogi pareeksha:

Astasthan pareeksha:

- Nadi : vata-kaphaja
- Mala : Vibaddha
- Mutra : Prakruta
- Jihva : Alipta
- Shabda : Prakruta
- Sparsha: Anushnasheeta
- Druk : Prakruta
- Aakruti : Sthula

Dashavidha Pareeksha:

- Prakriti: Kaphaja
- Vikriti : Vata Kaphaja
- Sara : Madhyama

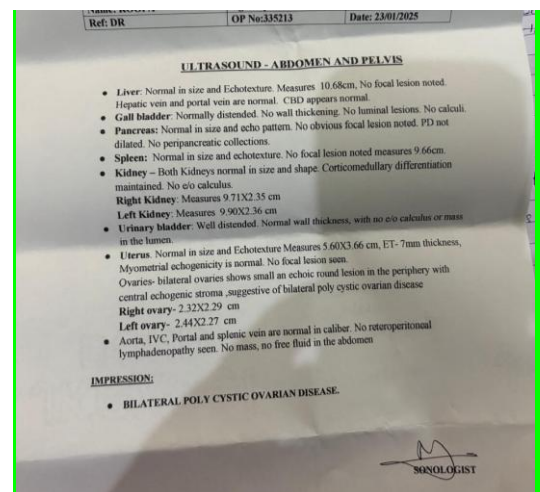
- Samhanana : Madhyama
- Pramana : Madhyama
- Satmya : Sarvarasa Satmya
- Satva : Madhyama
- Ahara Shakti : Madhyama
- Vyayama Shakti : Avara
- Vaya : Yuva

Laboratory Investigations (Image 1)

CBC was done on 23/1/2025 and the values were found to be normal as follows

- Hb: 12.8 gm%
- RBS: 83.9 mg/dl

USG: it is done 23/1/2025 suggestive of B/L polycystic ovarian disease



INVESTIGATION	RESULTS	NORMAL VALUE
HAMETOLOGY		
Haemoglobin	: 13.9gms%	Female: 11.5-13.5gms% Male: 13.5-18.0gms%
Total Count	: 7,200 c/cumm	Adults: 4,000-11,000c/cumm Child: 5,000-16,000c/cumm
Differential Count		
Neutrophil	: 39 %	Adults: 40-75% Child: 20-45%
Lymphocytes	: 55 %	Adults: 20-45% Child: 40-60%
Eosinophil	: 02 %	01-06%
Monocyte	: 04 %	01-08%
Basophil	: 00 %	00-01%
Platelet Count	: 3,31lakhs/cumm	1.4 - 4.50 lakh/cumm
RBC	: 4.37 Millions/cumm	3.7 - 5.6 millions/cumm
PCV	: 38.7 %	38 - 47 %
HCV	: 88.6 Fl	76 - 96 Fl
TCH	: 31.8 pg	27 - 32 pg
MCHC	: 35.9 %	30 - 35%
BIOCHEMISTRY		
RANDOM BLOOD SUGAR	: 98.0mg/dl	70-160 mg/dl
CREATININE	: 0.9mg/dl	0.6-1.5 mg/dl
****END OF REPORT****		
Laboratory Technician	Pathologist	
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Image 1 Investigation

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Treatment protocol: Patients will be given with *Shatavari taila* for *Prathimarsha nasya* two *Bindu* two times a day after the cessation of the menstruation till the onset of next menstruation (Table no 1) and *lasunadi vati* (500mg) thrice a day with *ushna jala* before food for seven days after cessation of menstruation.

TIME OF ADMINISTRATION *PRATIMARSHA NASYA:*

Table 1 Intervention

S.No	TIME	QUANTITY
1	<i>Prabhate</i> (after waking up)	2 <i>bindu</i>
2	<i>Sayankala</i> (before sleeping)	2 <i>bindu</i>

LASUNADI VATI:

ASSEMENT CRITERIA

Table 2 Assessment Criteria

SL.NO.	PARAMETER	BEFORE TREATMENT	AFTER MENSTRUAL CYCLE	FIRSTAFTER MENSTRUAL CYCLE	SECONDAFTER TREATMENT
1.	Duration of menstrual flow	3-4days	3-4days	3-4days	3-4days
2.	Quantity of bleeding	2-3pads/days	2-3pads/days	2-3pads/day	2-3pads/day
3	Interval between two menstrual cycles	45-60days	38days	38days	31days
4	Pain	Mild	Mild	Mild	Mild

Nidana panchaka:

Nidana: *Ahara: Ati-madhura, Guru, katu, Tikshna Ahara sevana, Samprapti ghatakas:*

- *Dosha – Vata , Kapha*
- *Dushya – Rasa*
- *Upadhatu- Arthava*
- *Srotas – Rasavaha, Arthavaha, Medovaha Srotas*
- *Agni – Jataragnimandya, Dhatwagnimandya*
- *Udbhava Stana –Amashaya*
- *Sanchara Stana – Sarva Shareera*
- *Vyakta Stana – Garbhashaya*
- *Roga Marga – Abhyantara*

Dosage - one *vati* (500mg)

Time- Three times a day before food

Anupana- ushna jal

OBSERVATION AND RESULTS

The outcomes were assessed before treatment, during the course of medication, and one cycle after the cessation of medicines. Significant improvement was noted in the interval between two menstrual cycles. The observations are as follows

- *Sadyasadyata- Sadhya*
- *Vihara: Vega Dharana, Ratrijagarana*
- *Rupa-Arthava kshaya*

DISCUSSION

Artavakshaya is caused due to an imbalance in the *Vata* and *kapha Dosha*, which leads to delayed periods (*Yathochit Kaal Adarshana*), less bleeding (*Alpata*), and pain in the pelvic area (*Yoni Vedana*).

GnRH helps in regulating gonadotropins, which controls the entire menstrual cycle through pituitary control. Hence, any disturbance in the

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hypothalamic-pituitary-ovarian (HPO) axis can contribute to several gynecological disorders⁴.



Figure 1 *Samprapti*

Nasya karma, a therapeutic nasal administration in *Ayurveda*, is considered effective in balancing *Urdhwajatrugata Dosha*, especially *Vata* and *Kapha*, and in regulating *Prana Vata*. Since *Prana Vata* governs the functioning of other *Vata* subtypes, this in turn supports *Samana Vata*, which resides near *pachaka pitta* and aids in the transformation of food into *Ahara Rasa* and *Kitta Bhaga*. The formation of *Rasa Dhatu*

subsequently leads to the production of *Upadhatu*s like *Artava* and *Stanya*, and supports the sequential formation of other *Dhatu*s. Moreover, *Apana Vata* is directly responsible for the timely expulsion of menstrual blood, ovulation, and conception. Thus, the proper functioning of *Apana Vata* is crucial for a healthy reproductive cycle. Since “*Nasa hi Shiraso Dwaram*” (the nose is the gateway to the head),

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Nasya serves as an ideal *Shodhana* procedure for disorders related to HPO axis disruption, which is often implicated in conditions like *Artava kshaya*⁵.

The drug '*Shatavari taila*' has *Tridosha Shamana* property and is predominantly *Vata Shamaka*. It has *Arthava janana* property and It also has *Agni Deepaka* and *Sroto-Shodhaka* property. Some of its ingredients have *Anulomana* property, which also acts on *Vata*. The drug as a whole is *Medhya*, *Ojasya*, and *Rasayana*⁶. Considering all these properties, the drug acts on the mind with the help of *Nasyakarma* which acts on the HPO-Axis and regularizes the hormonal imbalance And Most of the ingredients in *Lasunadi Vati* exhibit *Guru*, *Snigdha*, *Teekshna* qualities, along with *Ushna Virya* and *Katu Vipaka* and also It does actions like *Deepana*, *Pachana*, *Rasayana*, *Ruchikara*, and *Vatanulomana*. These collectively helps in digesting *Ama* and increasing *agni*. By enhancing *Pitta*, they increase the *Agneya* quality in the body, which plays a vital role in the formation of *Artava*. Thus, it can be concluded that the ingredients of *Lasunadi Vati* are mainly *Vata-Kapha* pacifying, *Pitta* enhancing, and *Artava* promoting in nature.

CONCLUSION

Ayurveda aims to restore the balance of *Doshas* through two main approaches: *Shodhana Chikitsa* (purificatory therapy) and *Shamana Chikitsa* (palliative therapy). *Shatavari Taila* is a polyherbal formulation containing diverse

phytoconstituents with multiple pharmacological actions. It is considered a highly effective remedy in *Ārtavakṣhaya* due to its *Rasa*, *Guna*, *Veerya*, *Vipaka*, and *Karma*. This formulation supports both the restoration of general health and the management of various gynecological disorders. It offers both preventive and curative benefits, with minimal adverse effects.

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