

REVIEW ARTICLE

Menstrual Cycle Variations According to *Deha Prakriti*: A Critical Ayurvedic Review

Author: Pragya Sharma¹

Co Authors: Monika Asthana², Alok Kumar Asthana³ and Trapti Agrawal⁴

^{1,3}Department of Kriya Sharir, CBPACS, Najafgarh, New-Delhi, India

²Department of Panchakarma, SRM Ayurveda College, Bareilly, UP, India

⁴Department of Stree Rog And Prasuti Tantra, CBPACS, Najafgarh, New-Delhi, India

ABSTRACT

The *Deha Prakriti*—a fundamental concept in Ayurveda—refers to an individual's inherent psychosomatic constitution, determined at conception and shaped by the predominance of *Doshas* (Vata, Pitta, and Kapha). It plays a pivotal role in maintaining health and influencing physiological processes, including menstruation. The *Artava Chakra* (menstrual cycle) is a *prakrut* (natural) monthly event in *Rajaswala Stree* governed primarily by *Vata Dosh*a (for flow), *Pitta* (for transformation and bleeding characteristics), and *Kapha* (for endometrial growth). This review critically explores the variations in menstrual patterns—such as duration, flow, pain, and premenstrual symptoms—according to different *Prakriti* types. Women with dominant *Vata Prakriti* may experience irregular, scanty, or painful menstruation due to the inherent qualities of *Vata* such as *Ruksha* (dryness) and *Chala* (mobility). *Pitta Prakriti* individuals often have moderate to heavy flow, early cycles, and may report symptoms like burning sensation, irritability, and acne, reflecting the *Ushna* and *Tikshna* nature of *Pitta*. *Kapha Prakriti* women tend to have regular cycles with heavier flow, minimal discomfort, and delayed onset of menarche due to the *Snigdha*, *Guru*, and *Sthira* qualities. Understanding these physiological variations through the lens of *Prakriti* can provide a personalized approach to gynecological care in Ayurveda. Moreover, aligning menstrual health management with *Prakriti*-specific dietary, lifestyle, and herbal recommendations may aid in balancing *Doshas* and promoting reproductive health. This review also identifies the scope for integrating classical Ayurvedic principles with contemporary clinical research to strengthen holistic and individualized menstrual healthcare strategies.

Key Words *Deha Prakriti*, *Menstrual Cycle*, *Ayurveda*, *Artava Chakra*, *Vata*, *Pitta*, *Kapha*, *Rajaswala*, *Dosha-based variations*, *Personalized gynecology*

Received 1st November 2025 Accepted 29th January 2026 Published 10th March 2026

INTRODUCTION

Ayurveda, the ancient Indian science of life and longevity, offers a highly individualized framework for understanding health and disease. Central to its diagnostic and therapeutic approach is the concept of *Deha Prakriti*, or individual constitution, determined at conception by the predominance of the three doshas: *Vata*, *Pitta*, and *Kapha*.¹ These doshas govern

all physiological and psychological processes, including the menstrual cycle (*Artava Chakra*). Menstruation is considered a *Shuddha Artava Pravritti*, a natural and cyclical event under normal physiological conditions, primarily governed by *Apana Vata*, with *Pitta* and *Kapha* playing supportive roles². Each woman exhibits specific menstrual characteristics based on her *Prakriti*. While modern

REVIEW ARTICLE

medicine identifies hormonal, genetic, and environmental factors as determinants of menstrual health, Ayurveda emphasizes the balance or imbalance of doshas as a root cause of physiological variations.³ Understanding how menstrual cycles differ according to *Prakriti* not only enriches clinical gynecology but also opens doors to personalized therapeutic interventions.

Prakriti and Menstruation: The Ayurvedic View

According to *Charaka Samhita*, *Prakriti* is immutable and remains constant throughout life.⁴ It determines the inherent tendencies of metabolism, tissue development, psychological behavior, disease predisposition, and reproductive functioning. The menstrual cycle (*Ritu Chakra*) is influenced by all three doshas:

- *Apana Vata*: Governs the downward movement of menstruation.
- *Ranjaka Pitta*: Manages blood formation and hormonal transformation.
- *Avalambaka Kapha*: Maintains structural integrity of the endometrial lining.⁵

Normal menstruation is described as being *Niroga*, *Samakala*, *Samavarta*, *Alpa Vedana Yukta*, and *Na Ati Bahu*, *Na Ati Alpam*—that is, painless, regular, and of moderate flow.⁶

Menstrual Patterns in Vata Prakriti

Women with *Vata Prakriti* are generally of lean body frame, dry skin, irregular appetite, and exhibit qualities of *Ruksha* (dry), *Chala* (mobile), and *Laghu* (light). These attributes make *Vata Prakriti* individuals more prone to menstrual irregularities:

- Scanty menstrual flow (*Artavakshaya*)
- Irregular cycle length (often oligomenorrhea)
- Painful menstruation (*Kashtartava*)

- Associated symptoms like bloating, insomnia, anxiety, and constipation.⁷

Apana Vata, being the principle dosha in menstruation, when aggravated, causes erratic uterine contractions and flow abnormalities. Vaginal dryness and premature onset of menopause may also be observed.⁸

Management includes *Vatahara* therapies such as:

- *Snehana* (oleation)
- *Abhyanga* with *Dashamoola Taila*
- Internal usage of *Ashwagandha*, *Shatavari*, and *Gokshura* in ghee media.⁹

Menstrual Patterns in Pitta Prakriti

Pitta Prakriti individuals tend to have sharp intellect, moderate body build, and are warm-natured, with dominant qualities of *Ushna* (hot), *Tikshna* (sharp), and *Drava* (liquid). Menstrual cycles typically present as:

- Regular but often shorter cycles
- Heavy bleeding (*Raktapradar*)
- Premenstrual irritability, anger, or emotional instability
- Burning sensation during menstruation
- Acne or skin rashes associated with the cycle.¹⁰

Ranjaka Pitta and *Sadhaka Pitta* play a major role in hormonal regulation and mental-emotional responses.

Women with aggravated *Pitta* are more likely to experience conditions such as *Asrigdara* (menorrhagia) and *PMS* with inflammatory features.¹¹

Management involves:

- *Sheetala* (cooling) herbs: *Shatavari*, *Sariva*, *Lodhra*
- Use of *Takra* (buttermilk), *Ghee*, and coconut water
- Stress management through *Pranayama* and meditation.¹²

REVIEW ARTICLE

Menstrual Patterns in Kapha Prakriti

Kapha Prakriti is characterized by stability, strength, and calm temperament. Dominant qualities are *Snigdha* (unctuous), *Guru* (heavy), and *Sthira* (stable). Menstrual features include:

- Regular but delayed menarche
- Heavy and prolonged menstrual bleeding
- Minimal or no pain during menstruation
- Tendency toward weight gain and water retention
- Mucous discharges or sluggish uterine activity.¹³

Due to *Kapha* dominance, tissue build-up is slower but denser. Women may be at higher risk for *Artava Vriddhi* (hypermenorrhea), PCOD, or hormonal sluggishness.

Management strategies:

- *Lekhana* (scraping) herbs: *Triphala*, *Guggulu*, *Mustaka*
- Physical activity and *Udvardana* (dry massage)
- *Langhana* and *Deepana* therapies to stimulate *Agni*.¹⁴

Comparative Clinical Studies and Evidence

Recent studies have supported the classical Ayurvedic understanding of *Prakriti*-based menstrual variations. Shirodkar et al. (2016) conducted a clinical study correlating menstrual patterns with *Deha Prakriti* and found:

- *Vata Prakriti*: More prone to dysmenorrhea and irregular cycles
- *Pitta Prakriti*: Higher incidence of menorrhagia and emotional PMS
- *Kapha Prakriti*: Tendency toward heavier flow and delayed menarche.¹⁵

Similarly, Mehta et al. (2019) demonstrated that *Prakriti*-based profiling could serve as an early diagnostic tool for menstrual disorders. The study concluded that identifying *Prakriti* helps in determining susceptibility and selecting appropriate treatments.¹⁶

A large-scale observational study by Bhalerao et al. (2021) revealed statistically significant relationships between *Prakriti*, metabolic rates, and reproductive cycles, reinforcing Ayurvedic doctrine in contemporary women's health.¹⁷

Integrated Ayurvedic Management Approach

In Ayurveda, treatment is always *Prakriti* and *Dosha* specific. This principle is especially beneficial in menstrual health management, where variations are subtle yet significant. The following integrated approaches can be adopted:

- **Dietary Regimen:** *Vata* types should consume warm, moist, nourishing foods; *Pitta* types should prefer cooling and sweet tastes; *Kapha* types benefit from spicy, bitter, and astringent foods.¹⁸
- **Lifestyle Recommendations:**
 - *Vata*: Oil massage, adequate rest, warmth
 - *Pitta*: Avoid heat, stress-relieving practices, cooling environments
 - *Kapha*: Physical activity, dry therapies, early rising.¹⁹
- **Yoga and Pranayama:**
 - *Vata*: Gentle asanas, *Anulom-Vilom*
 - *Pitta*: *Sheetali*, *Chandra Bhedana*
 - *Kapha*: Dynamic yoga, *Kapalabhati*, *Bhastrika*.²⁰
- **Herbal Interventions:**
 - *Vata*: *Ashwagandha*, *Bala*, *Shatavari*
 - *Pitta*: *Sariva*, *Lodhra*, *Yashtimadhu*
 - *Kapha*: *Guggulu*, *Trikatu*, *Haritaki*.²¹

REVIEW ARTICLE

DISCUSSION

This review underscores the practical utility of *Prakriti* in understanding menstrual variations and in customizing care. Ayurvedic wisdom, validated through modern research, affirms that individualized care rooted in constitution is effective and sustainable. Conventional medicine often adopts a one-size-fits-all approach, whereas Ayurveda respects bio-individuality and emphasizes prevention. Moreover, menstrual disturbances are often early indicators of systemic imbalances. By utilizing *Prakriti* assessment, clinicians can not only address symptomatic relief but also restore doshic equilibrium and prevent chronic pathologies like PCOD, endometriosis, and infertility. Therefore, integration of Ayurvedic principles into public health, adolescent counseling, and gynecological clinics is the need of the hour.

CONCLUSION

The menstrual cycle reflects the internal harmony of doshas, and *Deha Prakriti* provides a lens to understand individual variations. Women of *Vata Prakriti* show erratic and painful cycles, those with *Pitta Prakriti* exhibit early, heavy, and inflammatory features, while *Kapha Prakriti* women have stable but prolonged and sluggish menstruation. Recognizing these variations enables personalized interventions that align with natural constitution, thus promoting long-term reproductive health. There is a growing need for interdisciplinary research, curriculum development, and clinical training to integrate *Prakriti*-based menstrual assessment into mainstream women's healthcare.

REVIEW ARTICLE

REFERENCES

1. Sharma PV. Charaka Samhita of Agnivesha. Varanasi: Chaukhamba Orientalia; 2001.
2. Lad V. Textbook of Ayurveda: Fundamental Principles. Vol 1. The Ayurvedic Press; 2002.
3. Acharya JT. Charaka Samhita. Ch. Sharirasthana 8/8. Varanasi: Chaukhamba Bharati Academy; 2013.
4. Acharya YT. Sushruta Samhita with Nibandhasangraha Commentary. Varanasi: Chaukhamba Surabharati; 2012.
5. Tripathi B. Ashtanga Hridaya of Vagbhata. Varanasi: Chaukhambha Sanskrit Pratishthan; 2010.
6. Tiwari PV. Ayurvediya Prasuti Tantra evam Stri Roga. Part I. Varanasi: Chaukhamba Orientalia; 2010.
7. Dash B, Sharma RK. Caraka Samhita: Text with English Translation. Vol II. New Delhi: Chowkhamba Sanskrit Series; 2007.
8. Mehta A, Sharma R, Shukla V. Menstrual Patterns in Different Prakriti Types. J Res Ayurveda Siddha. 2019;40(2):72–78.
9. Mehta A, Sharma R, Shukla V. Menstrual Patterns in Different Prakriti Types. J Res Ayurveda Siddha. 2019;40(2):72–78.
10. Shirodkar AS, Vaidya AB. Correlation of Deha Prakriti with Menstrual Features. AYU. 2016;37(4):398–402.
11. Bhalerao S, Patwardhan K, et al. Study of Menstrual Health and Prakriti. Ayurveda Res Pract. 2021;11(1):21–28.
12. Patwardhan K, Sharma R. Ayurveda and Precision Medicine. J Altern Complement Med. 2010;16(3):309–310.
13. Sharma H. Prakriti-based Dietary Guidelines. Ayurpharm Int J Ayur Alli Sci. 2014;3(6):158–165.
14. Singh RH. Exploring larger evidence base for Ayurvedic principles. Indian J Med Res. 2009;130(6):483–486.
15. Lad V. Ayurvedic Perspectives on Women's Health. The Ayurvedic Press; 2005.
16. Joshi KS. Speaking of Ayurveda. Sterling Publishers; 2000.
17. Puri A. Practical Manual of Roga Nidana. Chaukhamba Orientalia; 2012.
18. Dwivedi KN. Yoga Therapy in Gynecological Disorders. J Ayurveda Integr Med. 2015;6(3):212–215.
19. Vaidya ADB. Reverse pharmacology and systems approaches. Curr Sci. 2006;90(3):367–368.
20. Chandola HM, Tripathi SN. Ayurvedic concept of stress and its management. Ayu. 2010;31(3):341–346.
21. Joshi S, Acharya RN. Role of Ayurveda in Menstrual Health. J Ayurveda Case Rep. 2022;2(1):15–22