



Effective Management of *Artavakshaya* w. s. r to Oligo-hypomenorrhea through Ayurveda Regimen: A Case Study

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ABSTRACT

Introduction

Menstruation is the act of nature and important part of woman's life that occurs as a regular rhythmic period and remains as a normal physiological. The journey from menarche to menopause involves continuous cyclical changes, and any deviation in the normal quantity or duration of menstrual flow—with or without associated pain—can be linked to conditions such as *Vātaja raja-duṣṭi*, *Kṣīṇārtava*, or *Ārtava-kṣaya*. In these situations, *Vāta* and *Kapha* cause *Mārga-āvaraṇa*, obstructing the natural passage of *Ārtava* and resulting in its depletion. Since *Ārtava* possesses an *Agneya* quality and is primarily governed by *Pitta dosha*, the specific causative factors for *Ārtava-kṣaya* can be understood as those that aggravate *Vāta-Kapha* or lead to *Pitta* depletion.

Methodology

A 26-year-old woman visited the OPD at PLRD Hospital, Khurja, on 27/10/2024 with the primary complaints of scanty and delayed menstrual cycles. For the past three years, her periods had been occurring every 40–45 days, with menstrual bleeding lasting only 2–3 days. She also reported moderate dysmenorrhea, which was evaluated using the Visual Analogue Scale. The patient underwent treatment with *Laṣuna Kalpa* for two successive cycles, considering its *Agneya*, *Srotoshodhaka*, *Kapha-vāta-śāmakā*, *Pitta-varadhaka*, and *Vāta-anulomaka* actions. After completing the therapy, she was observed for one additional cycle without medication.

Result and Conclusion

Patient had regular menstruation with normal duration and interval with adequate amount of menstrual flow and intensity of pain was reduced effectively from moderate to mild. Even after cessation of medicine, she got her menstruation in 30 days with normal amount of flow.

Keywords: *Artavakshaya*, *Artavadushti*, Oligo- hypomenorrhea, *Agneya*

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1. INTRODUCTION

Menstruation is a natural biological event and a significant milestone in a woman's life, marking the transition from girlhood to reproductive maturity. It follows a cyclical monthly pattern and continues as a normal physiological function from menarche until menopause. In Ayurveda texts word “*Artava*” is used for both *Masika Raja Srava*, i.e., menstrual blood, and *stree beeja*, i.e., ovum, at different places according to its significance [1]. But here we have considered *artava* as menstrual blood for my research work.

मासान्निपिच्छदाहार्ति पञ्चरात्रानुबन्धि च।
नैवातिबहु नात्यल्पमार्तवं शुद्धमादिशेत्॥
(च. च ३०/२२५)

Normal menstruation, according to *Acharya Charaka*, has the following characteristics: 1) Intermenstrual period of one month, 2) Duration of bleeding is of five days -3-5 days with differences of opinion, 3) not sticky in nature, not associated with pain, not with burning sensation, 4) Neither very scanty nor excess in amount. *Artava* is *upadhatu* of *rasa* [2]. So any variation in the normal quantity or duration of menstrual bleeding [3], whether accompanied by pain or not, may be associated with conditions such as *Vātaja raja-duṣṭi*, *Kṣīṇārtava*, or *Ārtava-kṣaya* occurring due to deficiency in

dietary nutrition or due to hypo-estrogenic condition or due to decrease in *rasa*, *rakta*, *dhatu* and *upadhatu*. So special emphasis has been given to *Shuddha artava* mentioning *artavadushti* as a causative factor for infertility.

दोषैरावृतमार्गत्वादार्तवं नश्यति स्त्रियः। (सु.
शा.२/२३)

According to *Acharya Sushruta*, doshas obstruct the passage or orifice of channels carrying *Artava* thus *Artava* is destroyed. He has described *Artavakshaya* as *lakshana* not as a disease mentioning it in *Ashta artava dushti* as *ksheena artava* [4].

आर्तवक्षये यथोचितकालादर्शनमल्पता वा योनिवेदना च।
(सु.सू.१५/१६)

Due to resemblance in clinical features, *Artavakshaya* can be correlated as:

यथोचितकालादर्शनं with delayed menses or oligomenorrhea; अल्पता with hypomenorrhea and योनिवेदना with dysmenorrhea.

पुष्परेतोभ्रमे। (का.कल्प. लशुनकल्प.२६)

Acharya Kashyap in *Kalpasthana* has clearly indicated and explained the *guna*, *karma* and properties of *Lasuna* beneficial in treating various menstrual disorders [5]. This study aims to establish a single drug remedy for *Artavakshaya* that manifests regular menstruation, leading to a healthier reproductive life for women.

1.1.Rationality of Selection of Drug

Artava Kshaya can be considered *Vata Kaphaja vikara* as *Vata* is responsible for all the physiological functions of the body. Also, *Apanavata* is responsible for the proper *Nishkrama* of *Artava*, *Kapha* due to its *Avrodhaka guna* has the capacity to cause obstruction in *Artava vaha strotas* thus contributing to the pathogenesis of *Artavakshaya* along with *Vata Pitta* particularly *Pachaka pitta* also contributes to it as it is responsible for the proper digestion of food and further proper formation of *Dhatus*. Any deviation of *Pachaka pitta* from its physiological function may lead to improper formation of *Rasa dhatu* and hence improper formation of *Artava Updhatu* in turn. Treatment is Ayurveda is based on the concept of destruction of the factors causing pathogenesis (*Samprapti Vighatana*). Therefore, if we consider the *Sampraptitaktika* in this case then it can be laid as follows:

- *Dosha: Vata (Apanavata), Kapha (Kledaka kaphda), Pitta (Pachaka pitta)*
- *Dushya: Rasa-dhatu and Artavaupdhatu*
- *Agni: Agni mandya*
- *Strotas: Rasavaha and Artavavaha*
- *Strodushti: Sanga*
- *Adihsthana: Garbhahaashya*

So the drug having *Vatakapsha shamaka*, *Pitta vardhaka*, *Deepana*, *Pachana*, *Rasapushtikara* properties should be used to treat *Artava kshaya*. Considering the above and line of treatment of *Artavakshaya*, *Lasuna Kalpa* was selected and given to the patient for treatment. *Lasuna Kalpa* consisted of *Lasuna*, *Twaka (Dalchini)*, *Patra (Tejpatta)*, *Shunthi*, *Marich*, *Sukshma Ela*, *Jatiphala*, *Saindhava Lavana* was given with *Ghrta* as an adjuvant. Drugs included under *Lasuna Kalpa* are having various properties that can revert back the pathogenesis of *Artava kshaya* such as they are having *Vatakapshahara*, *Ushna* in *Veerya*, *Deepana*, *Pachana*, *Shoolahara* properties which will be discussed in detail here after.

2. THE CASE

A 26-year-old woman visited the OPD at PLRD Hospital, Khurja, on 27/10/2024, presenting with complaints of scanty and delayed menstrual cycles. For the past three years, her periods had been occurring every 40–45 days, with menstrual bleeding lasting only 2–3 days. She also reported moderate dysmenorrhea, which was evaluated using the Visual Analogue Scale.

Patient had attained her menarche at 12years of age. She was having regular

menstruation 3 years ago. However, presently since 3 years she was having delayed and scanty menstruation.

- Last Menstruation Period:
15/10/2024
- Previous LMP: 1/08/2024
- Menstrual History: 2 days / 40-45 days since 3 years
- Regularity: Delayed
- Pain: Moderate (Pain was assessed based on the Visual Analog Scale {VAS})
- Clots: Absent
- Foul smell: Absent
- Flow: Decreased
- Pad History:
 - Day 1: 1 pad (not fully soaked)
 - Day 2: 1 pad (not fully soaked)

Past Medical History

No history of thyroid dysfunction, Diabetes Mellitus, Hypertension or any other significant medical history was found.

Past Surgical History

No history of any general, gynaecological or any other surgery.

Family History

No significant family history was found in this case.

Personal History

Her personal history indicated a normal appetite, regular bowel movements, normal urination, and restful sleep.

Allergic History

No history of any allergy was found in this patient.

General Examination

- Built: Moderate
- Weight: 50 kg
- Height: 5 feet
- BMI: 21.2
- B.P: 120/70 mm Hg
- Pulse rate: 86/min
- Respiratory rate: 18/min
- Tongue: Uncoated

Systemic Examination

- CVS: S1 and S2 were normal
- NS: Patient was well oriented and conscious
- RS: Normal vesicular breathing

Laboratory Investigations

Routine investigations with baseline hormonal assessment were done on 2nd day of cycle and were found to be normal as follows:

- Hb: 12.6 gm/dl
- ESR: 11mm/hour
- TSH: 2.09 μ IU/ml
- RBS: 125 mg/dl

- FSH: 6.42 mIU/ml
- LH: 4.14 mIU/ml
- S. Prolactin: 9.06 ng/ml

Ultrasound: Suggestive of no abnormalities with normal findings.

Asthavidha Pareeksha:

- *Nadi:* 86/min
- *Mala:* Nirama, once a day
- *Mutra:* 4-5 times/ day and 1 times/night
- *Jivha:* Alipta (uncoated)
- *Sparsa:* Anushana sheeta
- *Druka:* Avisheha
- *Akruti:* Madhyama

Dashavidha Pareeksha Bhava

- *Prakruti:* Vata-pittaja
- *Vikruti:* Vishmasamveta
- *Sara:* Rasa
- *Samhana:* Avara
- *Pramana:* Madhyama
- *Satmya:* Avara
- *Ahara Shakti:* Abhyavahrana
- *Shakti:* Madhyama
- *Jarana Shakti:* Madhyama
- *Vyayama Shakti:* Madhyama
- *Vaya:* Madhyama

Diagnosis (Ayurveda): Artava Kshaya

Diagnosis: Oligo-menorrhoea and Hypo-menorrhoea

Treatment given: *Lasuna Kalpa*

Dose: 1gm

Frequency- Twice a day

Time of administration—*Abhakata*

(Before meal)

Duration: 2 consecutive cycles

Pathya Apathya Advised

Patient was asked to follow *Rajaswala charya* in every cycle. She was advised to include barley-based foods in her diet, such as chapatis prepared from *Yava* or barley *daliya*, taken along with cow's milk and cow's ghee. *Raktashali* rice made with *Godugdha* mixed with *Goghrita* during the bleeding phase of cycle. She was advised not to take spicy, oily, fast food, packed food item etc. She was asked to do *Vyayama*, *Pranayamas* and Yoga according to her body's ability daily.

3. OBSERVATIONS AND RESULTS

Results were assessed before treatment, after completion of the treatment while the patient was on medication, and one menstrual cycle following cessation of therapy. Marked improvement was observed in the duration, interval, and flow of menstruation, along with a significant reduction in dysmenorrhea. The observed changes are as follows:

Table 1: Observation before and after treatment

Signs and symptoms	Before treatment	After 1st menstrual cycle while taking medicine	After 2nd menstrual cycle while taking medicine	After 3rd menstrual cycle while taking medicine
Interval between two cycles	40-45 days	31 days	29 days	30 days
Duration of menses	2-3 days	3 days	4 days	4 days
No. of pads used per day	1 pad/day(not completely soaked)	Day 1- 3 pads/day Day 2- 2-3 pads/day Day 3- 1-2 pads/day	Day 1- 3 pads/day Day 2- 2-3 pads/day Day 3- 1-2 pads/day Day 4- 1pad/day	Day 1- 3 pads/day Day 2- 2 pads/day Day 3- 1-2 pads/day Day 4-1 pad/day
Pain during menses	Moderate	Mild	Mild	Mild

4. DISCUSSION

Artava Kshaya is a common menstrual disorder nowadays. Considering the *Dosha* involvement in *Artava Kshaya* it is caused because of *Vata* and *Kapha dosha* vitiation .

आर्तवक्षये यथोचितकालादर्शनमल्पता वा योनिवेदना
च। (सु.सू. १५/१६)

Acharya Sushruta has defined *Artavakshaya* as deficiency of *Artava*, the menstruation that does not appear in its appropriate time, is scanty in amount associated with pain in vagina.

दोषैरावृतमार्गत्वादार्तवं नश्यति स्त्रियः।

(सु.शा. २/२३)

The doshas impede the pathways or openings of the channels responsible for carrying *Artava*, resulting in the depletion or impairment of *Artava*.

वातकफावृत मार्गाणां त्वप्रवर्तमानं पित्तलैरूपचरैस्त
त्प्रवर्तमानम्। (अ.सं.शा. १/१३)

In Ashtanga sangrha it is mentioned that *vatakapha* obstruct the passage of *artava* thus menstrual blood is not discharged.

क्षीणं प्रागुक्तं पित्तमारुताभ्यां। (सु.शा. २/४)

Vitiation of *vata* and *pitta dosha* causes *ksheena artava*.

The *marga avarana* is done by *vata* and *kapha*, thus hampering physiological release of *artava* leading to *Artavakshaya*.

Since *artava* is *agneya* in nature [6] i.e. *pitta dosha pradhan*, so *vishesh nidana* for *Artavakshaya* can be considered as *vatakapha prakopaka nidana* and *pitta kshaya nidana*.

तत्र संशोधनमाग्नेयानां च द्रव्याणां विधिवदुपयोगः।

(सु.सू. १५/१६)

Acharya Sushruta has explained that *chikitsa* of *artavakshaya* is done according to vitiation of *doshas*.

तत्रापि स्वयोनिवर्धनद्रव्योपयोगः प्रतीकारः।

(सु.सू. १५/१४)

Also he mentioned that *ksheena dosha* and *dhatu* can be increased by intake of particular *dravya* that help to increase that *dosha* and *dhatu*.

वातकफावृतमार्गाणां त्वप्रवर्तमानं पित्तलैरूपचरैस्तत्प्रव
र्तमानम्। (अ.सं.शा.१/१३)

Acharya Vagbhatta explained that use of *pittavardhak dravyas* help in increasing the *artava*.

Acharya Kashyap has explained in *Kalpasthanas* under *Lasuna Kalpa adhyaya*, *Shatpushpa* and *Shatavari Kalpa adhyaya* in the treatment of *Artavakshaya*.

न हि वातादृते योनिर्नारीणांसंप्रदुष्यति।
शमयित्वातमन्यस्य कुर्याद्दोषस्य भेषजम्॥

(च.चि. ३०/११५)

Acharya Charak describes *vata* as a prime factor in all *Yoni vyapad* so has advised to treat *vata dosha* first that normalizes all other *doshas*.

So in *Artavakshaya* use of *Agneya dravya* is strongly recommended, hence drugs capable of increasing *pitta* that helps in increasing *Artava* must be used.

Since *Lasuna* is *bringhaniya* (*dhatuwardhak*), *vrishya* (*virya*wardhaka), *ushna*, *pitta* and *rakta vardhak* according to Bhavprakash [7] so I have selected *Lasuna kalpa* in the management of *Artavakshaya*.

So we can use *Lasuna Kalpa* in the management of *Artavakshaya* caused by any type of above two.

5. CONCLUSION

Ārtava Kṣaya is one of the most common gynecological disorders encountered in present times. Several etiological factors such as stress, faulty lifestyle and dietary habits, and hormonal imbalances have been implicated in its pathogenesis. Ārtava Kṣaya is also considered a precursor to various gynecological and systemic conditions, including infertility, obesity, and depression. Therefore, early and effective management is the need of the hour to prevent future complications. The findings of the present study indicate that *Lasuna Kalpa* is beneficial in the management of Ārtava Kṣaya. It showed significant improvement in key clinical parameters such as the duration, interval, and amount of menstrual flow, along with marked relief in menstrual pain.

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