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An Ayurvedic Approach To Udavartini Yonivyapada With Reference To Primary Dysmenorrhea In Streerog: A Case Study Using Dashamula Trivrutta Snehapana.

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Abstract:-

Udavartini Yonivyapada, as described in Ayurvedic classics, is a condition caused by the upward movement of Apana Vata, leading to painful menstruation—closely correlated with Primary Dysmenorrhea in modern medicine. It is a common gynecological complaint among adolescent and young adult females, often leading to discomfort, absenteeism, and reduced quality of life. Conventional treatments provide symptomatic relief but may have side effects or limited efficacy. Hence, there is a need for a safe, effective Ayurvedic intervention that addresses the root cause.

Keywords: Udavartini Yonivyapada, Primary Dysmenorrhea, Dashamula Trivrutta Snehapana, Sneha Kalpana, Vata Vyadhi, Ayurveda.

INTRODUCTION:-

In Ayurveda, yonivyapada refers to gynecological disorders, with Udavartani Yonivyapada being a condition characterized by upward movement or obstruction of the natural downward flow of Vatadosha in the reproductive system. It is primarily a Vata-dominant disorder, often manifesting as dysmenorrhea, amenorrhea accompanied by pain and psychological disturbances.

विशतिर्व्यापदो योनेनिर्दिष्टा रोगसिंग्रहे॥(च.सिं.चच०३०/७)1

In Ayurveda the 20 yonivyapdas almost covered the entire gynaecological disorders. The word "YONI" denotes female genital tract as a whole genital canal and uterus etc. The word "VYAPADA" means disorders. Thus, the diseases of the genital tract as a whole vagina and uterus probably to be taken from the word "YONIVYAPDA" The diseases interfering with normal marital life, pregnancy, congenital developmental anomalies of female genitalia,

different types of vaginal infections etc. are included under yoni Vyapada.² Vata is main causative factor for diseases in Shakha, Koshtha, Marma as well as Sarvanga. Vata is also responsible for separation and combination of Mala, Mutra, Pitta including all other

Bhavapadarthas and when all this gets exceedingly aggravated, there is no remedy other than shaman and shodhan useful for its alleviation.

According to ayurvedic principles, snehana has significanttherapeutic implications in balancing the Doshas Vata, Pitta andKapha . It is especially beneficial in alleviating vitiated Doshas and promoting a state of equilibrium in the body. This therapeutic procedure is performed with the goal of preparing the body forsubsequent purification procedures, ensuring that the accumulatedmorbid humors or Doshas, which are responsible for disease, are expelled efficiently³. Sneha which pacifies the disease. Sneha pacifies the doshas from all over the body. Shamana means to pacify the dosha in there swasthana. Dashamula trivrutta sneha has vaatanulomak properties There are so many sthanik chikitsa(local therapies) explain in ayurvedic stree rogas. These procedures basically deal with the disorders of Tryavarta yoni ⁵.

The present case study aims to explore the efficacy of Dashamula Trivrutta Snehapana in a 22 year old female suffering from primary dysmenorrhea, providing clinical evidence to support traditional Ayurvedic management of Udavartini Yonivyapada.

CASE REPORT:-

AIM OF STUDY -

To evaluate the efficacy of Dashamula Trivrutta Snehapana in the management of Udavartini Yonivyapada (primary dysmenorrhea) in young females, by assessing its effect on menstrual pain, duration, and associated systemic symptoms.

STUDYING TYPE:-

Single case report – Interventional type

CASE CENTRE:-

Yashwantrao Chavan Ayurvedic Medical College, Chh Sambhaji Nagar, Maharashtra

STUDY DETAIL:-

A 22-year-old female patient with a history of severe lower abdominal pain during menstruation for the past 2 years was selected. No evidence of pelvic pathology was found on clinical and ultrasonographic examination

CHIEF COMPLAINTS:

Pain in lower abdomen before and during menstruation.

Associated symptoms: nausea, backache, fatigue.

HISTORY OF PRESENT ILLNESS:

A 22-year-old unmarried female patient presented with a chief complaint of severe spasmodic pain in the lower abdomen during menstruation for the past 2 years. The pain usually starts a few hours before the onset of menstruation and lasts for 1 to 2 days. It is colicky in nature, radiating to the lower back and thighs, and is associated with nausea, fatigue, and irritability.

The patient reported that the pain was interfering with her daily activities and caused difficulty attending college during the first day of menstruation. She had been using analgesic tablets occasionally for pain relief, which provided temporary and partial relief.

Her menstrual cycles were regular, occurring every 28–30 days, with a moderate flow lasting 3–4 days. There was no history of clots, intermenstrual bleeding, or foul-smelling discharge.

No history of pelvic inflammatory disease, uterine pathology, or hormonal irregularities was noted. Ultrasonography (USG) of the pelvis revealed normal uterus and adnexa, ruling out secondary causes of dysmenorrhea.

The patient's bowel habits were regular, micturition normal, and appetite moderate. Sleep was occasionally disturbed during menses due to pain.

She reported emotional stress and irregular food habits, often skipping meals or eating spicy and dry food, which are considered Vata aggravating in Ayurveda.

History Of Past Illness

No major illness reported

No history of hospitalisations or chronic diseases

DRUG HISTORY

No regular medication or long-term drug use

Examination - Dashavidha pariksha

The patient is a 22-year-old female in Yuva avastha (youth age group). Her Prakriti is Vata-Pitta dominant, with a medium build, slightly dry skin, and an active, alert nature. Vikruti shows Vata aggravation, presenting as lower abdominal pain, backache, and fatigue during menstruation, indicating Apana Vata Avarana. Sara (tissue excellence) is of medium level, especially Rasa and Rakta Sara. Samhanana (body compactness) is medium, and Pramana (body proportion) is within normal limits. Satmya (adaptability) is moderate; she tolerates regular diet but feels discomfort with spicy, dry, or irregular food. Satva (mental strength) is medium; she experiences mild stress and average pain tolerance but responds positively to counseling. Ahara Shakti (digestive capacity) is moderate, with a tendency to skip meals sometimes. Vyayama Shakti (capacity for physical activity) is also moderate, as she performs light exercise daily. Overall, her physical and mental constitution is balanced but Vata-dominant, predisposing her to Udavartini Yonivyapada (Primary Dysmenorrhea).

Interventions for udavartini yonivyapad:-

Dose: Dashamula trivrutta

senhapana 20ml

Route of administration:-Orally

Anupan :- Koshnajaal

Aushadha sevankal :- Abhakta

FOLLOW UP

After treatment 1st menstrual cycle After treatment 2nd menstrual

Duration of Treatment:

7 days before menses for 2 cycles

Food to avoid :-

dry, cold, spicy

Result:-

After the administration of Dashamula Trivrutta Snehapana followed by Sansarjana Krama, the patient experienced a marked reduction in lower abdominal pain during menstruation. The intensity of pain on the Visual Analogue Scale (VAS) reduced from 8/10 before treatment to 2/10 after two menstrual cycles. The duration of pain also decreased from 2 days to less than half a day. Associated symptoms such as nausea, backache, fatigue, and irritability were significantly reduced. The menstrual flow became more regular and smooth, with improved comfort and emotional stability during the cycle. The patient reported better sleep and overall relief from menstrual distress. No adverse effects were observed during or after the treatment period.

DISCUSSION:

Primary dysmenorrhea is a common gynecological disorder characterized by painful menstruation without underlying pelvic pathology. In Ayurvedic terms, it can be correlated with Udavartini Yonivyapada, which involves aggravated Vata Dosha, particularly Apana Vata, leading to excessive pain and disturbance in normal menstrual flow.

The case study aimed to assess the efficacy of Dashamula Trivrutta Snehapana, a classical internal oleation therapy, in alleviating the symptoms associated with this condition. Dashamula, a combination of ten roots, possesses anti-inflammatory, analgesic, and Vata-pacifying properties. Trivrutta acts as a mild purgative, facilitating the removal of Ama (toxins) and correcting Vata imbalance, which is often responsible for menstrual pain and irregularities.⁶

In this patient, administration of Dashamula Trivrutta Snehapana was preceded by assessment using Dashavidha Pariksha to determine the patient's Prakriti, Vikriti, and digestive strength. The treatment was well-tolerated, and significant improvements were observed in pain intensity, duration of menstrual bleeding, and associated symptoms such as lower abdominal discomfort, irritability, and fatigue.

The therapeutic effect can be explained on both Ayurvedic and modern pharmacological grounds. Ayurvedically, internal oleation followed by purgation pacifies aggravated Vata and improves Apana Vata function, thereby normalizing uterine contractions. Modern pharmacology supports that constituents of Dashamula possess anti-inflammatory, analgesic, and spasmolytic effects, which can contribute to reduced uterine cramping.

Additionally, the improvement in overall well-being and reduction of associated systemic symptoms suggest that Dashamula Trivrutta Snehapana not only addresses the local uterine pathology but also helps in systemic balancing of Vata, enhancing the holistic approach of Ayurveda.

No adverse effects were observed, indicating that the therapy is safe when administered according to classical guidelines, with appropriate patient selection and monitoring. However, larger randomized controlled trials are needed to establish definitive efficacy and safety profiles for wider clinical application.

CONCLUSION: The present case study demonstrates that Dashamula Trivrutta Snehapana is effective in reducing pain and associated symptoms in primary dysmenorrhea, validating the classical Ayurvedic approach to Udavartini Yonivyapada. This highlights the potential of Panchakarma-based therapies in managing gynecological disorders with minimal side effects.

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