TO STUDY THE ROLE OF DASHMOOL SIDDHA TAILA MATRA BASTI IN THE MANAGEMENT OF KASHTARTAVA

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ABSTRACT

“The concept that changed life styles are responsible for the genesis of diseases” is very old and well known in Ayurvedic conceptualization. Kashtartava is among the few such diseases. It means painful menstruation. The disease ‘Kashtartava’ is not described in classics as well as in Vedas as an individual disease entity. Though it is a symptom of various Yonivyapadas specially Udavarta, Vatala Sanipatika, etc. it is one of the commonest gynecological complaints. It is a Tridosha Vyadhi with Vata predominance. In this, especially there is derangement of Apana and Vyana Vayu. It is a broad term which covers all the problems and ailments that a woman may suffer from during or around menstruation. It includes both primary and secondary types of dysmenorrhea. For this study, however, we considered only primary dysmenorrhea under the term Kashtartava to cover a larger population and to make pin-pointed assessment criteria. Hence we decided to “Study the Role of Dashamoola Siddha Taila Matra Basti in the management of Kashtartava”. A single case study was conducted. She received Dashamoola Siddha Taila Matra Basti. This treatment was selected for the Vatashamaka, Yonishula Prashaman and Shothahara properties of the drugs. The dose was 60 ml per day and the duration of the treatment was for 7 days each cycle for two consecutive cycles. Results were assessed according to a specially prepared grading system for Vedana (Kati, Prushtha, Vankshan), Alpartava, Yathochitkaladarshana. The study suggests that Dashamoola Siddha Taila Matra Basti helps in relieving the symptoms of Kashtartava (primary dysmenorrhea).
KEYWORDS: Kashtartava, primary dysmenorrhea, Dashamoola Siddha Taila Matra Basti.

INTRODUCTION
Women’s health is the primary factor to be considered for wellbeing of family, society and culture. Any physical or mental disorder disturbs her educational, social and economic life. Change in lifestyle, stress like factors are affecting woman’s life in particular & disturbing her day to day life. Kashtartava i.e. dysmenorrhea is one of such condition. It is painful menstruation or menstrual cramps. Almost all women experience some degree of pelvic discomfort during and at the onset of menstrual flow.

Charakacharya opines that Yoni of women does not get affected without Vata.[1] Vitation of Apan vayu therefore leads to Sashul Rajahpravrutti. The acharyas have described gynaecological disorders under a topic Yonivyapad, which are of total 20 types. Sashul Rajahpravrutti i.e. Kashtartava is one of the prominent symptom seen in Udavarta Yonivyapad which is Vata-pradhan.

Due to Vegavrodh, Vayu becomes Pratiloma and gets lodged in trayavarta yoni, characterized by pain, initially obstructs the flow of Rajah or pushes the rajah upwards. Hence it flows with great pain (Kashta). The women get relieved immediately following the free flow of Rajah.[2,3]

It causes significant discomfort and anxiety for the woman as well as her family. For the present study we only considered primary dysmenorrhea as Kashtartava so that we would have clear-cut inclusion and exclusion criteria when selecting patients. Primary dysmenorrhea is a condition which causes painful menstruation without any demonstrable pelvic pathology. In addition to menstrual pain, many woman experience associated symptoms such as headache, constipation, nausea, vomiting, fatigue and leg pains.

The treatment usually advocated in modern medicine, i.e., analgesics, antispasmodics and/or oral contraceptive pills[4], does not provide a long-lasting solution and besides, may lead to serious adverse effects. As yet there is no treatment regimen that can relieve the entire symptom complex of primary dysmenorrhea. Hence, there is a need to find a safe and long-lasting treatment for the condition. Kashtartava, especially when it manifests as primary dysmenorrhea, is a Vata-dominant condition. The drug that we selected for this study is good Vatashamaka drugs according to the classic texts. Dashamoola siddha oil has been advocated
for the treatment of Udavarta Yonivyapada\textsuperscript{[5]} which is one of the main disease conditions included under the term Kashtartava (primary dysmenorrhea).

**AIMS AND OBJECTIVES**

To study the efficacy of Dashmool Siddha Tail Matra Basti in the management of Kashtartava (primary dysmenorrhea).

**MATERIALS AND METHODS**

**Drugs:** Dashmoola

1) **Bilva**

*Latin Name* - Aegle marmelos  
*Family* – Rutaceae, *Rasa* - Kashaya Tikta  
*Virya* - Ushna, Vipak-Katu  
*Doshghnata* - Kaphavata shamak  
*Karma* - Shothahara

2) **Agnimantha**

*Latin Name* - Premna mucronata  
*Family* – Verbenaceae,  
*Rasa* - Tikta Katu Kashaya Madhur,  
*Virya* - Ushna, Vipak-Katu  
*Doshghnata* - Kaphavatashamaka  
*Karma* - Shothahara

3) **Shyonaka**

*Latin Name* - Oroxyllum indicum  
*Family* – Bignoniaceae,  
*Rasa* - Madhur, Tikta Kashaya,  
*Virya* - Ushna, Vipak-Katu  
*Doshghnata* - Kaphavata shamak  
*Karma* - Shothahara

4) **Patala**

*Latin Name* - Stereospermum suaveolens  
*Family* – Bignoniaceae,
Bhosale et al.

Rasa- Tikta Kashaya,
Virya- Ushna, Vipak-Katu
Doshgnata- Tridoshshamaka
Karma- Shothahara

5) Gambhari
Latin Name- Gmelina arborea
Family – Verbenaceae,
Rasa- Tikta Kashaya Madhur,
Virya- Ushna, Vipak-Katu
Doshgnata- Tridosha shamak
Karma- Shothahara

6) Shalparni
Latin Name- Desmodium gangeticum
Family – Leguminosae,
Rasa- Madhur, Tikta
Virya- Ushna, Vipak-Madhur
Doshgnata- Tridosha shamak
Karma- Shothahara, Angamardprashamana

7) Prishniparni
Latin Name- Uraria picta
Family – Leguminosae,
Rasa- Madhur, Tikta,
Virya- Ushna, Vipak-Madhur
Doshgnata- Tridosha shamak
Karma- Shothahara, Angamardprash

8) Gokshura
Latin Name- Tribulas terrestris
Family – Zygophyllaceae, Rasa- Madhur,
Virya- Sheet, Vipak-Madhur
Doshgnata- Vatapitta shamak
Karma- Shothahara, Mutravirechaniya
9) **Kantakari**

Latin Name- Solanum surattens  
Family – Solanaceae, Rasa- Tikta Katu,  
Virya- Ushna, Vipak-Katu  
Doshghnata- Kaphavata shmak  
Karma- Kasahar, Angamardaprasahan

10) **Brihati**

Latin Name- Solanum indicum  
Family – Solanaceae, Rasa- Katu Tikta,  
Virya- Ushna, Vipak-Katu  
Doshghnata- Kaphavata shmak  
Karma- Kasahar, Angamardaprasahan

**Drug Preparation**

The ten ingredients of dried Dashamoola (Bilva, Agnimantha, Shyonaka, Patala, Gambhari, Shalaparni, Prishniparni, Gokshura, Kantakari and Brihati)[6] were collected. Equal amounts of the ten ingredients were taken and made into Yavakuta (crude powder) form. This was soaked in water overnight and on the next day Kwatha was prepared. This Kwatha along with Kalka of Dashamoola was added in Tila Taila and Sneha was prepared as per the standard protocol.[7]

**Investigations**

- CBC 
- Urine (Routine & microscopic) 
- Ultrasound (SOS)

**Follow-up**

After completion of the treatment course the patient was requested to report for follow-up every 7 days for 2 months.
Method of administration of *Matra Basti*

The patient was advised to have a light meal on the day of treatment. Before administration of Basti, Abhyanaga (massage) with Tila Taila was done of the back and lower abdomen. Thereafter, Nadi Sweda (sudation) was performed. After this Purvakarma, the patient was asked to lie down in the left lateral position with the left lower extremity extended and the right lower extremity flexed at the knees and hips. Then 60 ml of lukewarm oil was loaded in an enema syringe. A rubber catheter oleated with oil was attached to the enema syringe. After any air in the enema syringe had been expelled, the rubber catheter was passed through the anus of the patient up to a length of 4 inches and the drug was administered. The patient was asked to take deep breaths during the passage of the catheter and the administration of the drug. The entire oil in the syringe was not administered in order to avoid entrance of *Vayu* into the *Pakvashaya* as it may produce pain. After the administration of *Basti*, the patient was advised assume the supine position. While in this position, the patient's buttocks were gently tapped and the legs were raised for a few minutes so as to raise the waist. These measures were intended to prevent the administered fluid from flowing out too soon. After a short time the patient was allowed to get up from the below table, and she was then advised to rest in bed for at least ½ an hour.

<table>
<thead>
<tr>
<th>Drug</th>
<th><em>Dashmoola Siddha Taila</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Dose</td>
<td>60 ml per day</td>
</tr>
<tr>
<td>Route</td>
<td>Rectal (<em>Matra Basti</em>)</td>
</tr>
<tr>
<td>Duration</td>
<td>Given for 7 days in each cycle for two consecutive cycles</td>
</tr>
<tr>
<td>Time period</td>
<td>Starting from mid-cycle</td>
</tr>
</tbody>
</table>

**ASSESSMENT**

Scoring for different parameters is done as follows

- **Pain (dysmenorrhea)**

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>OBSERVATIONS</th>
<th>CRITERIAS</th>
<th>GRADE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Pain</td>
<td>-Menstruation is not painful and daily activity is unaffected.</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Menstruation is painful but daily activity is not affected. No analgesic required</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Menstruation is painful and daily activity is affected. Analgesic drug is needed</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Menstruation is so painful that patient is unable to do even the routine work and has to miss class/office during menses. Has</td>
<td>3</td>
</tr>
</tbody>
</table>
to take analgesic, but without much relief

<table>
<thead>
<tr>
<th>2.</th>
<th>Duration</th>
<th>-No pain during menstruation</th>
<th>-Pain persists for less than 12 h</th>
<th>-Pain persists for 12-24 h</th>
<th>-Pain persists for more than 24 h</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

- **Associated symptoms**

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>SYMPTOMS</th>
<th>CRITERIA</th>
<th>GRADE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Artava Pramana (assessment by number of pads used)</td>
<td>6–7 pads/cycle</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4–5 pads/cycle</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2–3 pads/cycle</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Spotting or 1 pad/cycle</td>
<td>3</td>
</tr>
<tr>
<td>2.</td>
<td>Rajasrava Avadhi</td>
<td>-Duration of menses 4–7 days</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Duration of menses 3 days</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Duration of menses 2 days</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-Duration of menses 1 day</td>
<td>3</td>
</tr>
</tbody>
</table>

**DISCUSSION**

Kashtartava (dysmenorrhoea) is the most common gynecological problem faced during adolescence. For the present study only primary dysmenorrhoea is considered as Kashtartava.

In the pathogenesis of Kashtartava, it is Tridoshaja Vyadhi with Vata predominance. Rasa, Rakta, Artava are Dushya. Kashtartava is mainly due to obstruction of Apan Vayu. Basti chikitsa is the main chikitsa for Vata Dosha.

For the purposes of this study, therefore, we made an effort to classify all disorders with any type of pain or discomfort related to menstruation as either primary or secondary. All menstrual disorders in which pain or discomfort was the most prominent feature were categorized as primary dysmenorrhea; those in which there were local features such as inflammation or systemic features such inflammation or systemic features such as fever were considered as secondary dysmenorrhea. There are several conditions, including Vatala, Vataja Artavadushti, Udavarta, Suchimukhi and Artavakshaya, in which there is pain associated with menstruation along with backache, pain in groins, stiffness, etc. but no...
abnormality of menstruation other than perhaps a decrease in the amount of flow or the duration. This picture suggests that these conditions are a form of primary dysmenorrhea, without any pelvic pathology.

In the present study we take Dashamool Siddha Taila Matra Basti in the management of Kashtartava. According to the concept of Viryasamkranti (transformation of potency) described by Acharya Charaka,[8] the potency of Dashamoola is already transferred in Dashamoola Kwatha, and the potency of Dashamoola in the Kalka form, on processing with oil, further causes the Viryasamkranti into the Taila. Thus the Taila carries the whole potency of the drug in it. Madhura, Tikta, Kashaya Rasa, Guru, Snighda Guna, Ushna Veerya, Madhura Katu, Vipaka, and Tridoshanashaka Karma of Dashamoola Taila acts on Kashtartava by its Dravya, Guna and Prabhava. It has being proven that Dashamoola has anti-inflammatory, analgesic and antipyretic[9] actions.

CONCLUSION
Vata is the main cause of Kashtartava. It is similar to primary dysmenorrhea. Basti is the first line if treatment for Vata Dosha. Matra Basti is found to be effective in relieving symptoms of Kashtartava.

On the basis of observations obtained after the completion of pilot study, it can be concluded that Dashmool Siddha Taila Matra Basti effective in relieving the whole symptom complex of Kashtartava.

REFERENCES

