

**A CLINICAL STUDY ON THE CHARAKOKTA JEEVANIYA
MAHAKASHAYA GHANVATI IN RAJONIVRITTI JANYA VIKAR
W.S.R. TO MENOPAUSAL SYNDROME**

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Article Received on
15 Jan. 2018,

Revised on 06 Feb. 2018,
Accepted on 27 Feb. 2018

DOI: 10.20959/wjpr20185-11378

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ABSTRACT

Menopause is defined as the permanent cessation of Menses for 1 year and is physiologically correlated with decline in estrogen secretion resulting from loss of follicular function. The present clinical trial was conducted to “A clinical study of Charakokta Jeevaniya Mahakashaya in Rajonivritti Janya Vikar w.s.r. to Menopausal syndrome”. The subjects were randomly divided into three groups. A total 60 patients were selected for the study and all patients completed the study. Specialized rating scales like Kupperman Index Score as well as Menopause rating Scale (MRS) were adopted for diagnostic as well as assessment criteria. The effects were examined on the chief complaints

as well as associated complaints. Result were analysed statistically using paired ‘T’ test. It may be concluded that Jeevaniya Mahakashaya drugs would be an effective therapy for the control of symptoms of menopausal syndrome.

KEYWORDS: Menopausal Syndrome: Jeevaniya Mahakashaya.

INTRODUCTION

“Menopause is generally defined as cessation of period for 12 months or a period equivalent to 3 previous cycles or as time of cessation of ovarian function resulting in permanent amenorrhoea”.^[1] ‘Woman’ this word symbolizes the most important pillar of a family and society. A healthy woman plays the foundation of a healthy family and society. A woman is always considered as a portrait of selflessness in Indian society and they are always expected to be so. That’s the reason why a woman thinks of her family first and gives least preference to her health. But in today’s world women have spread their area of work from home to

outside in every field. This dual responsibility along with professional pressure and stressful life are making a woman's life more miserable specially after menopause.^[2]

Menopause is a transitional phase from reproductive life to the cessation of menstruation. In a few women, it is an asymptomatic or a minimally symptomatic phase that can be ignored by her and her family members, but in some women, it is a symptomatic condition, alarming to both the women and their families. Menopausal symptoms may manifest themselves 2 or 3 years before the actual menopause starts and continue for 2 to 5 years. During menopause major physiology, gynecological and social changes occur.^[3]

Globally more than 470 million people suffer from Menopausal Syndrome and about 25 million woman pass through Menopause each year. According to IMS (Indian Menopause Society) research there are about 65 million Indian women over the age 45 years.^[4] Average age of Menopause is around 47 years but it strikes Indian women as early as 30-35 years. About 75% of women face disturbing physical symptoms and 50% experience only types of psychological manifestations during menopause. About 50% to 60% women seek medical help for that. The age at which menopause occurs varies widely from 40 to 55 years, with the mean age being about 47 years.^[5] In Ayurveda Menopause is considered as a natural process due to aging and not associated with any serious health problems. Menopause occurs at 50 years. Due to aging i.e. Vata predominance & dhatu Kshya.^[6]

In modern science hormone replacement therapy is one and only alternative for these health hazards. But it has wider range of secondary health complication like vaginal bleeding, breast cancer, endometrial cancer, gall bladder disease etc.^[7] Hormone replacement therapy (HRT) is not very effective in Psychological symptom. For Psychological symptoms relief modern medicine use sedative hypnotics and anxiolytic drug in long term use these medicine leads to very serious side effect like drowsiness, impaired motor function, allergic reaction etc. Therefore this research has been undertaken in order to find out a safe and effective medicine in ayurveda.

MATERIAL AND METHODS

Distribution of Patients

60 patients were randomly selected from among the outpatients and inpatients of the Kayachikitsa department of Shri. Khudadad Dunga ji Chikitsalaya, Raipur (C.G.). They were divided into three groups.

Inclusion Criteria

- i) Female of age between 35-55 years.
- ii) Patient having Psychological manifestation during menopause.
- iii) Amenorrhoea for ≥ 6 months.

Exclusion Criteria

- i) Age below 35 years and more than 55 years.
- ii) Patient with surgical menopause.
- iii) Patients with evidence of malignancy.

Drugs: Jeevaniya Mahakashaya Ghanvati were prepared in the Rasshastra Avam Bhaishjya Kalpna Vibhag of Govt. Ayurvedic College, Raipur (C.G.)

Investigation: All selected patients were subjected to routine investigation.

Blood - Hb%, ESR, TLC, DLC

Urine - Routine and microscopic

Biochemical examination - Fasting blood glucose.

Grouping/dose/duration of treatment.

Patient included in this study were randomly divided into 3 group each having 20 patients.

Group A – Geevaniya Mahakashaya Ghanvati

Dose - 1 gm/BID

Anupan - Milk

Duration - 3 Months

Group B - Ghanvati and Sarvang Abhayang from oil which is medicated by Jeevaniya herbs
(10 days per month)

Group C - Jeevaniya Mahakashaya Ghanvati and Yog basti with Jeevaniya herbs.
(1 sitting per month)

Follow Up Study: All patients were followed up for 15 days.

Method of Assessment: The improvement in the patient was assessed mainly on the basis of relief in the sign and symptom of the disease. *By Kupperman's Index.*^[8]

Criteria for Overall Assessment of Therapy

The obtained results were measured according to the grades given below:

- Completely Cured: 100% relief.
- Marked improvement: > 75% - < 100% relief.
- Moderate improvement: >50% - 75% relief.
- Mild improvement: >25% - 50% relief
- Unchanged: Up to 25% relief.

OBSERVATION AND RESULTS

In the present study, maximum 41.67% of patients were from the age group of 41-45 years, 95% were Hindu, 51.67% of patients were highly educated, 90% of patients were married, 66.67% of patients were housewives, 53.33% of patients were from middle class society, 73.33% of patients from urban area, 70% of patients from nuclear family, 70% of patients were non-vegetarian, 51.67% of patients were having Avar Jaranshakti, 40% of patients were having Khandit Nidra, 26.67% of patients were having Krur Kostha, 61.67% of patients had Mandagni, 43.33% of patients were having tubectomy, 63.33 % of patients had Vatapitta Prakriti, 63.33% of patients had Madhayam satva, 46.67% of patients had Madhyam Vyayam Shakti. All patients complained of Hot flushes, 90% of patients had Insomnia, 90% of patients had Excessive sweating, 61.67% of patients had Headache, 88.33% had depression, 68.33% had Nervousness, 83.33% had dizziness, 73.33% had hoint pain, 3.33% had Tremor, 55% had Tachy cardia, 93.33% had Irritability, 81.67% Lack of concentration.

Effect of Therapy

Group A: Statistical Analysis done on various symptoms of 20 Patients of Menopausal Syndrome belonging to Group 'A' that was done in 2 months.

Sl. No.	Symptoms	Mean		Mean Diff.	Correction %	S.D.	S.E.	T Value	P Value	Significance
		BT	AT							
1	Hot Flushes (Vasomotor Irritability)	1.9	0.5	1.4	73.68%	0.502	0.112	12.457	0.00	H.S.
2	Insomnia	1.6	0.45	1.15	71.88%	0.745	0.166	6.902	0.00	H.S.
3	Excessive Sweating	1.55	0.5	1.05	67.74%	0.759	0.169	6.185	0.00	H.S.
4	Headache	1.35	0.7	0.65	48.15%	0.489	0.109	5.94	0.00	H.S.
5	Depression	1.45	0.3	1.15	79.31%	0.812	0.181	6.328	0.00	H.S.
6	Nervousness	1.2	0.45	0.75	62.50%	0.716	0.16	4.682	0.00	H.S.
7	Dizziness	1.35	0.6	0.75	55.56%	0.638	0.142	5.252	0.00	H.S.
8	Joint Pain	1.05	0.85	0.2	19.05%	0.41	0.091	2.179	0.042	S

9	Tremor	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00	N.S.
10	Tachycardia	0.85	0.7	0.15	17.65%	0.366	0.081	1.831	0.083	N.S.
11	Irritability	1.35	0.35	1	74.07%	0.561	0.125	7.958	0.00	H.S.
12	Lack of Concentration	1.15	0.95	0.2	17.39%	0.41	0.091	2.179	0.042	S

S - Significant,

N.S. - Non Significant,

H.S. - Highly Significant,

S.D. - Standard Deviation,

S.E. - Standard Error

BT – Before Treatment

AT – After Treatment

Group A showed highly significant result (<0.001) in Hot Flushes, Insomnia, Excessive Sweating, Headache, Depression, Nervousness, Dizziness and Irritability. Significant result in joint pain and lack of concentration. Non-Significant result in Tremor and Tachycardia.

Group B: Statistical Analysis done on various symptoms of 20 Patients of Menopausal Syndrome belonging to Group ‘B’ that was done in 2 months.

Sl. No.	Symptoms	Mean		Mean Diff.	Correction %	S.D.	S.E.	T Value	P Value	Significance
		BT	AT							
1	Hot Flushes (Vasomotor Irritability)	2	0.2	1.8	90.00%	0.615	0.137	13.077	0.00	H.S.
2	Insomnia	2.05	0.35	1.7	82.93%	0.864	0.193	8.794	0.00	H.S.
3	Excessive Sweating	2	0.35	1.65	82.50%	0.812	0.181	9.079	0.00	H.S.
4	Headache	1.2	0.55	0.65	54.17%	0.745	0.166	3.901	0.001	H.S.
5	Depression	1.75	0.25	1.5	85.71%	0.827	0.184	8.11	0.00	H.S.
6	Nervousness	1.5	0.5	1.0	66.67%	0.858	0.191	5.21	0.00	H.S.
7	Dizziness	1.85	0.4	1.45	78.38%	0.998	0.223	6.493	0.00	H.S.
8	Joint Pain	1.45	0.75	0.7	48.28%	0.47	0.105	6.658	0.00	H.S.
9	Tremor	0.1	0.05	0.05	50.00%	0.223	0.05	1.00	0.33	N.S.
10	Tachycardia	1.05	0.65	0.4	38.10%	0.502	0.112	3.559	0.002	S
11	Irritability	1.75	0.4	1.35	77.14%	0.67	0.15	9.00	0.00	H.S.
12	Lack of Concentration	1.45	0.9	0.55	37.93%	0.51	0.114	4.819	0.00	H.S.

S - Significant,

N.S. - Non Significant,

H.S. - Highly Significant,

S.D. - Standard Deviation,

S.E. - Standard Error

BT – Before Treatment

AT – After Treatment

Group B Showed highly significant result in Hot Flushes, Insomnia, Excessive sweating, Headache, Depression, Nervousness, Dizziness, Joint Pain, Irritability and Lack of Concentration. Non significant result in Tremor and significant result in Tachycardia.

Group C Statistical Analysis done on various symptoms of 20 Patients of Menopausal Syndrome belonging to Group 'C' that was done in 2 months.

Sl. No.	Symptoms	Mean		Mean Diff.	Correction %	S.D.	S.E.	T Value	P Value	Significance
		BT	AT							
1	Hot Flashes (Vasomotor Irritability)	2.15	0.1	2.05	95.35%	0.686	0.153	13.358	0.00	H.S.
2	Insomnia	2.15	0.2	1.95	90.70%	0.686	0.153	12.706	0.00	H.S.
3	Excessive Sweating	2.05	0.25	1.80	87.80%	0.615	0.137	13.077	0.00	H.S.
4	Headache	1.1	0.4	0.70	63.64%	0.656	0.146	4.765	0.00	H.S.
5	Depression	2.15	0.1	2.05	95.35%	0.686	0.153	13.358	0.00	H.S.
6	Nervousness	1.65	0.3	1.35	81.82%	0.933	0.208	6.469	0.00	H.S.
7	Dizziness	2.05	0.25	1.80	87.80%	0.894	0.200	9.00	0.00	H.S.
8	Joint Pain	1.75	0.45	1.30	74.29%	0.656	0.146	8.85	0.00	H.S.
9	Tremor	0.25	0.1	0.15	60.00%	0.366	0.081	1.831	0.083	N.S.
10	Tachycardia	1.55	0.5	1.05	67.74%	0.604	0.135	7.764	0.00	H.S.
11	Irritability	2.1	0.1	2.00	95.24%	0.725	0.162	12.328	0.00	H.S.
12	Lack of Concentration	1.75	0.75	1.00	57.14%	0.648	0.145	6.892	0.00	H.S.

S - Significant, BT – Before Treatment
N.S. - Non Significant, AT – After Treatment
H.S. - Highly Significant,
S.D. - Standard Deviation,
S.E. - Standard Error

Group C showed highly significant result in Hot flushes, Insomnia, Excessive sweating, Headache, depression, Nervousness, Joint Pain, Tachycardia, Irritability and lack of Concentration and Non Significant result in Tremor.

Effect of Haematological/Biochemical Values

None of the three groups showed any significant change in haematological and biochemical values after treatment.

DISCUSSION

Present study “A Clinical study on the Charakokta JeevaniyaMahakashaya Ghanvati in Rajonivriti janya vikar w.s.r. to menopausal syndrome.” Has been carried out to study the role of Jeevaniya Mahakashaya in management of Menopausal syndrome.

Keeping in view the world wide increasing concern over the Menopausal syndrome and proposing it as the biggest challenge in forthcoming years, it was thought that we people of Ayurveda should work in never evolving disease and in place where modern medicine has short coming and ayurveda can give better solution to the grieving patients. Menopausal

syndrome is one such disorder where need of alternative medicine is emphasized all over the world.^[2] Hence the present study was planned.

Rajonivritti is a consequence of Jarawastha in female and Vata is the dominant Dosha during this stage. It can be clearly seen that all the disturbance during Rajonivritti are directly proportional to the vitiation of vata during this phase.

Probable Mode of Action of Jeevaniya Mahakashaya

Jeevaniya Mahakashaya's contents are:- Jeevak-Rishibhak, Meda-Mahamedha, Kakoli Kshirkakoli, Mudgparni-Mashparni, Jeevanti, Mulethi.^[9]

Now a days some herbs of jeevaniya mahakashaya are not available because they were from Ashatwarg. So I have used substitutes of these drugs according to Bhauprakash Nighantu.^[10]

Substitutes

1. Jeevak – Rishibhak – Vidarikand
2. Meda – Mahamedha – Shatavari
3. Kakoli – Kshirkakdi – Aswagandha

Draya	Rasa	Gun	Veerya	Vipak	Doshshamkta
Vidarikand	Madhur	Guru, Snigdh	Sheet	Madhur	Vat-Pitta shamak
Shatavari	Madhur, Tikt	Guru, Snigdh	Sheet	Madhur	Vat-Pitta shamak
Ashwagandha	Tikt, Kashaya	Laghu, Snigdh	Ushna	Madhur	Vat-Pitta shamak
Mudgparni	Madhur	Laghu, Ruksha	Sheet	Madhur	Vat-Pitta shamak
Mashparni	Madhur, Tikt	Laghu, Snigdh	Sheet	Madhur	Vat-Pitta shamak
Jeevanti	Madhur	Laghu, Snigdh	Sheet	Madhur	Tridosh shamak
Muleti	Madhur Tikt	Guru, Snigdh	Sheet	Madhur	Vat-Pitta shamak

Based on Rasa

(1) Madhura Rasa

- Due to *Madhura Rasa* the peedana of *dhatu*, deepan of *Agni*, *snehan of strotasa* happens and the catabolic process gets slow. Due to this *Dhatu Kshaya* process is slowed down.
- During Menopause *Vata* and *Pita Doshas* are prominent and *Madhura Rasa* is *Vata* and *Pita Dosha shamak* due to this *Madhura Rasa* is capable of controlling the Menopausal Syndrome.
- *Madhura Rasa* has similar qualities like *Kapha* and provides nourishment capable of developing natural *kapha*. It also generates *Dhatu*. During Menopause *Kapha* remains in *Kshayavastha* so by using *Madhura Rasa* there is an increase in *Kapha*.

- *Madhura Rasa* has prominence of *Medhya Guna* and is very useful in all psychological diseases, so it helps in confirming all the mental states during Menopause.

(2) *Tikta Rasa*

- *Tikta Rasa* destroys the *upalepa of strotas* and helps in undisrupted movement of *mala and dhatus*, it also destroys *aam* and *kleda*. It also helps in controlling the process of *Agnimadhya* resulting in reduction of the process of *Dhatu Kshaya*.
- In *Tikta Rasa medhya Guna* is prominent. So it is very useful in controlling/eradicating psychological disorders.
- *Tikta Rasa* is *Pitta* and *Daha shamak* in nature. So it is capable of removing Pittaj symptoms like *swedaadhikya* and *Hotflushes* which are seen during Menopausal syndrome.

(3) *Kashaya Rasa*

- *Kashaya Rasa* is *pitta dosha shamak* and does not allow *Kledotpatti in Strotas*.

(4) *Katu Rasa*

- *Katu Rasa* is *deepan* and *pachan*. So *Katu Rasa* controls the process of food digestion by removing *Agni Vaishamyata* and helps in producing *uttarottar dhatu* resulting in reducing the process of *dhatu kshaya*.

Based on *Gunas*

(1) *Guru Guna*

- *Guru Guna* increases the *dhatus* due to which the process of *dhatu kshaya* slows down and body gets nourishment.

(2) *Laghu Guna*

- *Laghu Guna* acts as *pathya* for *Body, dhatus, strotas* and *Agni*. Since *Agni* is *Deepak* and *strotashodhak* it removes *agni's vaishamyata* and results in appropriate process of production of *dhatus* due to which the process of *dhatu kshaya* gets slowed down.
- *Laghu Guna* gives delight and energy to the body.
- *Laghu Guna* increases *satva* due to which psychological disorders during menopausal syndrome is under control.

(3) Snigdha Guna

- *Snigdha Guna* does *snehan* to *dosha*, *dhatu*, *mala* and *strotasas* resulting in *anulom* of *vayu* due to which activities of the body is controlled and process of *dhatu kshaya* is slowed down.
- *Snigdha Guna* is *vatha shaamak* and *kafa vardhak*. It increases *dhatu*s due to which the process of *dhatu kshaya* does not happen.
- *Snigdha Guna* acts as a *rasayan* due to which premature menopause does not happen.

(4) Ruksha Guna

- Small quantities of *Ruksha Guna* are present in *Jeevaniya Mahakashaya dravya*. Due to presence of *Ruksha Guna*, *kleda* is removed from body, *agnideepan* and *sthroto shodhan* resulting in slowing down of the *dhatu kshaya* process.

Based on Virya**(1) Ushna Virya**

- *Ushna Virya* controls *kupit vata* in body and does *agnideepan* which gets rid of *agnivyshamyata* due to which *dhatuposhan* process is executed properly.
- *Ushna virya* increases *satva*.

(2) Sheeta Virya

- Due to *Sheeta Virya* there is an increase in mental pleasure, happiness and delight due to which the process of *dhatu kshaya* is reduced.
- *Sheeta Virya* is *pitta shamak*, *rajoguna shamak* and *sowmanasya janan*.

Based on Vipak**(1) Madhura Vipak**

- All the *Vipaks* of *Jeevaniya Mahakashaya dravya* are *madhura*. Due to *Madhura Vipak* all the *dhatu*s and *ojas* are nourished which results in a situation of *samadhatu*.
- *Madhura Vipak* are *vata pitta shamak*.
- At mental level this is *rajo guna shamak*.

CONCLUSION

This study shows that menopausal syndrome can be managed by *Jeevaniya* drugs. It is better in various psychological disturbances mainly include irritability, depression, sleep disturbance, Nervousness and dizziness. I have got excellent result in Hot flushes. So it can

be concluded that in women with symptoms of menopausal syndrome, a treatment of Jeevaniya herbs gives better result in both somatic as well as Psychological complaints. No adverse effect was noted during the study. Therefore it could be safe alternative to the modern drugs.

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