



**PROCEEDING OF INTERNATIONAL CONFERENCE
THEME-GERIATRIC DISEASES CARE AND CURE
SUKHAPRAUDHA-2021**

**Organized BY:
Department of Prasuti Tantra & Stree-Roga Faculty
of Ayurveda Parul University**



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Report

Digital conference Sukhapraudha-2021 was organized by the department of Prasuti Tantra and Stree Roga –Faculty of Prasuti Tantra and Stree Roga on 21/10/2021. “KAGOF” was the special collaborator for this Digital conference in addition to other collaborators for the Digital conference series. Professor and HOD Dr. Manjusha R. Karkare was the co ordinator of the Digital conference .

The main theme being, “Geriatric Diseases –Care and Cure”, a few subthemes for the department of PTSR were identified. They were as under-

1. Gynecological disorders in geriatric women.
2. Role of Ayurveda in menopause vs HRT
3. Herbs used in geriatric women
4. Sthanik chikitsa in geriatric care
5. Fertility related issues in elderly women
6. Ideal lifestyle for Geriatric women
7. Common formulations in geriatric women
8. Psychological problems in geriatric women
9. Rasayans for geriatric women

A brochure of the Digital conference giving a call for papers was circulated on social media. An overwhelming response of 74 papers was received. The papers were presented across 5 groups. The Digital conference was conducted on google meet platform.

The inaugural was held on Thursday 21-10-2021 at 9.30am. Apart from google meet, the inaugural was also live telecasted on Facebook and You tube. Dr. Harish Daga assistant professor of Department of Shalya Tantra provided technical support for the online Dr. Bhagyashree Satpathy co ordinated the session. Dr. Varsha rendered the Dhanwantari Vandana. Professor and HOD Dr. Manjusha R. Karkare welcomed the invitees and delegates. Respected trustee ‘ Dr. Komal Patel madam addressed the audience with her inspiring words. Guest speaker of the session, Dr. Sujata Kadam madam, HOD of PTSR Department -All India Institute of Ayurveda-New Delhi delivered her Guest speech, “The role of Ayurveda in Geriatric women’s diseases” The inaugural session concluded with a vote of thanks by Dr. Lumi Bhagat. 

The sessions and their judges were as under –

1.Kashyap session

Chairperson - Dr. Manjusha R. Karkare

Co-chair person –Dr. Asokan V

Coordinators –Dr. Bhagyashree Satpathy and Dr. Varsha

Winners

1. Dr. Sindhu Umesha

2. Dr. Sruthi M.

2. Harit session

Chair person-Dr. Geeta Patki

Co-chair person-Dr. Shilpa Donga

Coordinators-Dr. Anjali Suthar and Dr. Megha Rathore

Winners-

1.Dr.Chitra G. Menon

2. Dr. Adrija

3.Chakrapani session

Chair person-Dr.Suhas Herlekar

Co-chair person Dr. Mangesh Patil

Coordinators- Der. Nisha Khorajiya and Dr. Jashmin Varaiya

Winners-

1.Dr. Sapna Rathod

2.Dr. Smita

4. Dalhana session

Chair person-Dr. Hetal Dave

Co-chair person-Dr. Shrinawas Jadhav

Co-chairperson- Dr. Divya Ramugade

Winners

1.Dr. Maheshwari D

2. Dr.Shruthi N. V.

5. Atreya session

Chair person- Dr. Veena Patil

Co-chair person-Dr. Seema Mehere

Co-chair person – Dr. Jayasheela Goni

The results were announced on a whatsapp group-Sukhapraudha specially made for that purpose.

E-certificates were distributed to presenters, delegates, winners and all chair and co-chair persons. The scholars of the department had a valuable experience in organizing the Digital conference and conducting various sessions. The Digital conference was a good experience in team work for the entire department.

Dr.Manjusha

R. Karkare

HOD Department of PTSR

PIA-PU

FOREWORD

I feel honored to be requested to write the foreword for this excellent work as special add on by the efforts from the Department of Pasuti Tantra and stree roga on conducting Pre International conference Sukhapraudha 2021 under Azadi ka Amrut Mahotsav on 21/10/2021 presiding eminent guest speakers.

I am indeed happy to write a foreword to the book which is combined efforts from the department of Pasuti Tantra and stree roga. It has taken a herculean task to compile this book after referring voluminous literature of past and present with reference to Geriatric practice: cure and care by the scholars. This is a genuine work compiling original references by the authors from Ayurveda and contemporary sciences. The resources provide comprehensive knowledge about the subject prepared in accordance with the diseases, drugs involved and its etiopathogenesis. Ayurvedic system of medicine has been practiced in the country and globally from time immemorial and has stood the test of many adversities over centuries.

This book of proceedings on Pasuti Tantra and stree roga will be a timely contribution to students, practitioners, scholars and researchers of ayurvedic medicine. It is commendable that an elaborate work has resulted to compile the extensive reference material from different classical texts and commentaries systematically under each article. The purpose of this book will be served by the progressive discussions and constructive feedbacks from the readers. I am sure the readers will be benefited immensely by this book. I wish the department to get more such opportunities to convert such intricate subject into an interesting and readable one.

Dr. Komal Patel

MBBS, M.S

Medical Director and Trustee

Parul University

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STHANIK CHIKITSA IN GERIATRIC WOMEN CARE ROLE OF STHANIK CHIKITSA IN GERIATRIC DISEASE MANAGEMENT

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ABSTRACT

Geriatrics is a progressive phenomenon of the body. Geriatric women are not a just old age women they become structurally, functionally and mentally different from what they were in their young age. As the age progresses women attains menopause, vata plays major role and shows its effect (degenerative) on all the body organs including reproductive system further leads to disease conditions like Sushka yoni, Prasamsrini Yoni, Karnini, Pariplutha, Swethapradara, Andini, Mahayoni etc., By altering the vaginal PH, Hormonal imbalance and Apanavata dusti. Acharyas explained vruddhaavastha as a swabhavaja vyadi. In old age agni bala is reduced both in its jarana shakti and abhyavarana shakti. Hence oral administration of drugs shows minimal effect on above said diseases. Sthanika chikitsa like (yoni dhavana, yoni pichu, yoni varti, yoni poorana, yoni lepana etc) gives best results as yoni is having rich blood supply and presence of mucous membrane having good absorption capacity. In the present topic “ROLE OF STHANIK CHIKITSA IN GERIATRIC DISEASE MANAGEMENT” is taken to give a brief elaborated information regarding sthanik chikitsa in preventing and cure of the geriatric diseases.

Key words – Sthanik Chikitsa, Yoni Prakshalana, Yoni Pichu, Yoni Purana, Geriatric Diseases

Introduction:

Aging is a natural process in which body shows continuous degeneration process as like explained by Acharya's i.e shiryaate iti shariram. Vriddhavastha is grouped under natural disease that is caused due to swabhava (nature) and depends on kala (time). Natural diseases are hunger, thirst, jaravastha, death etc. Geriatrics are a natural phenomenon it's an important task to escape from it, but by following dinacharya ,

ruthucharya and sthanika chikitsa one can delay the process of aging up to some extent. As the aim of the Ayurveda is " swasthasya swastha rakshanam athurasya vikara prashamanam " sthanika chikitsa plays a major role in maintaining the health of the healthy person and curing of the diseased one.

As the age advances, several changes take place in the body i.e in (Dosha, Dathu, Mala, Agni and Ojas etc). Vata dosha plays a major role in old age and it leads to continuous degeneration process, agni bala reduced in it jarana Shakthi and abhyavarana shakthi. It's the physiology that when aahara is taken it comes in contact with agni and aahara get digested followed by formation of rasa which is divided into prasadah baga and kitta baga, from Prasadah baga uttarottara dathus are produced. Oral administration of drugs also got in contact with agni and digestion and absorption takes place. But in old age agnibala is in ksheena avastha and less chances of proper digestion and absorption of the drugs taken through oral route. Hence sthanika chikitsa plays a great role in Gynaecological geriatric care.

Due to vata vitiation there will be formation of different types of diseases in representative system like (yoni srava, swethapradara, yoni shoola, yoni daha, pariplutha etc) of women by alteration in hormonal balance, vaginal ph and apanavata dusti. The above conditions are best cured with sthanika chikitsas like (Yoni Dhavan(Vaginal Douching), Yoni Pichu (VaginalTampooning) ,Yoni Dhupan (Vaginal Fumigation) ,Yoni Lepan(Vaginal Painting) ,Yoni Varti (Vaginal Suppository).

Aims and objectives:

1. To study the probable mode of action of Sthanik Chikitsa in geriatric diseases
2. Importance of sthanika chikitsa in geriatric care

Materials and methods:

Sthanika chikitsa in geriatric care

Yoni prakshalana:

Yoni dhava or prakshalana means cleansing of vagina. It is one of the treatment procedures amongst sixty types of vrana chikitsa. The drugs used in the form of following formulations kwatha, kshirapaka, siddha jala , oil, ghrita etc.

Indications : yoni srava, yoni daha, yoni picchilya, yoni kandu etc Drugs used for yoni prakshalana :

1. In Vata Dosha involvement- triphala, guduchi kashaya or sarala mudgaparni kashaya should be used.

2. In Pitta Dosha involvement- panchvalkala or panchtikta kashaya should be used. 3. In Kapha Dosha involvement- aragwadhadi or nimbadi kashaya should be used. 4. Yoni Dourgandhya - aragwadhadi, sarvagandha dravya kashaya are used 5. Yoni Shoola - guduchi, triphala and danti kashaya are used 6. Yoni Daha - Chandana or lodhradi kashaya.

7. Yoni shrava - Triphala kwatha

Mode of action : It cleanses the vaginal area and helps to cure from infection

As yoni prakshalana is done with Kashaya of the drugs having vranaropana, vrana shodhana, sthambana, shothaghna etc properties it cures local infections and helps to maintain vaginal hygiene.

Yoni pichu:

Vaginal tampon made of cotton or gauze soaked in taila/ghrita/kshara/kashaya is termed as pichu, when placed in vagina it is called yoni pichu.

Indications : Yonidaha, yoni kanda, prasamsini yoni, mahayoni, viplutha, upaplutha, karnini etc

Drugs used for pichu dharana:

1. Yoni daha - chandanadi taila
2. Yoni paka - chandanadi taila
3. Yoni dourgandhya - sarva dravya siddha taila
4. Yoni shoola - saindhavadhi taila or dhatakyadi taila
5. Yonishathilya- suramanda
6. Yonikanda - mushak taila

In general the following oils are used Guduchyadi taila, Bala taila, Dhatakyadi Taila, Udambaradi Taila, Jatyadi Taila, Kasisadi Tail, Dashmool Taila, Taila, Ghrita

Time duration for pichu dharana:

2 to 3 hours is the time limit for pichu dharana but in some conditions where the pichu is advised for hemostasis pichu can be kept for the maximum duration of 40 hours. If pichu remains in vaginal region for more than 48 hours it may lead to Mutrakricha (Burning and painful micturition), Yonishotha (Inflammation in vagina), Yonishula (Pain in vagina) etc. will develop as a complication.

Mode of action:

According to sushruta, Pichu helps in Lekhana karma and thus, removes slough. In Yonipichu, mostly medicated Kashaya, Sarpi and taila are used. These preparations have two main functions i. e. Shodhana (purification) and Ropana(healing). Its various mode of action will depend upon the various types of medicine that used, as different medicines have different action. Depending on the drugs yonipichu can act as an antibacterial, anti inflammatory, controls vaginal discharges, helps in wound healing.

Conclusion:

Thus it is to be conclude that the sthanik chikitsa of ayurvedic system of medicine gives excellent results to the patients suffering from geriatric diseases (Gynaecological) . As intra vaginal controlled release drug delivery system is an effective means for achieving continuous delivery of drug and it not only acts on local level but also acts on systemic level because due to the presence of destent network of blood vessels in the vaginal wall. Medicines used here are cheap, effective and easily available. Each Sthanik Chikitsa holds its own importance and shows marvelous results when applied with proper indications, strict aseptic precautions

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RASAYANA CHIKITSA IN GERIATRIC WOMEN CARE

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INTRODUCTION

Ayurveda means the science of life which consists of 8 branches. Jarachikitsa is the 7th branch of ayurveda which explains about rasayana chikitsa .The term rasayana consists of two words rasa and ayana ,rasa means taste or essence or flavor or juice etc .Ayana means a path or to increase or to circulate.The rasayana will increase and promote the circulation of vital essence all over the body causes the nourishment of uttarottara dhathu with good quality and quantity.According to sushrutha, rasayana tantra means which endows vayasthapana-imparts longevity, age sustainer,rogapaharan through enriching the immunity. ^[1]

“Menopause is just puberty’s evil older sister”. Geriatric women are passing through various process of the body like-premenopause-peri menopause menopause & postmenopause. Perimenopause is the beginning of the next phase of a reproductive women where she faces irregular menstruations, sweaty nights, sleepy mornings etc. That will continue upto 4-8 yrs till she attains menopause. Menopause is defined as permanent cessation of menstruation at the end of reproductive life due to the loss of ovarian follicular activity. It is the point of time when last and final menstruation occurs.

Post-menopause is the last phase of a women’s life counting from her puberty .because from there on wards the hormones will not have any major shifts as such previously happened in her life. Geriatric women are currently passing through this phase , where the estrogens lowered their activity and other functions of the body where highly effected due to that.

Aim and objectives

- To study about physiological changes in geriatric women
- To study the role of rasayana chikitsa in geriatric women care

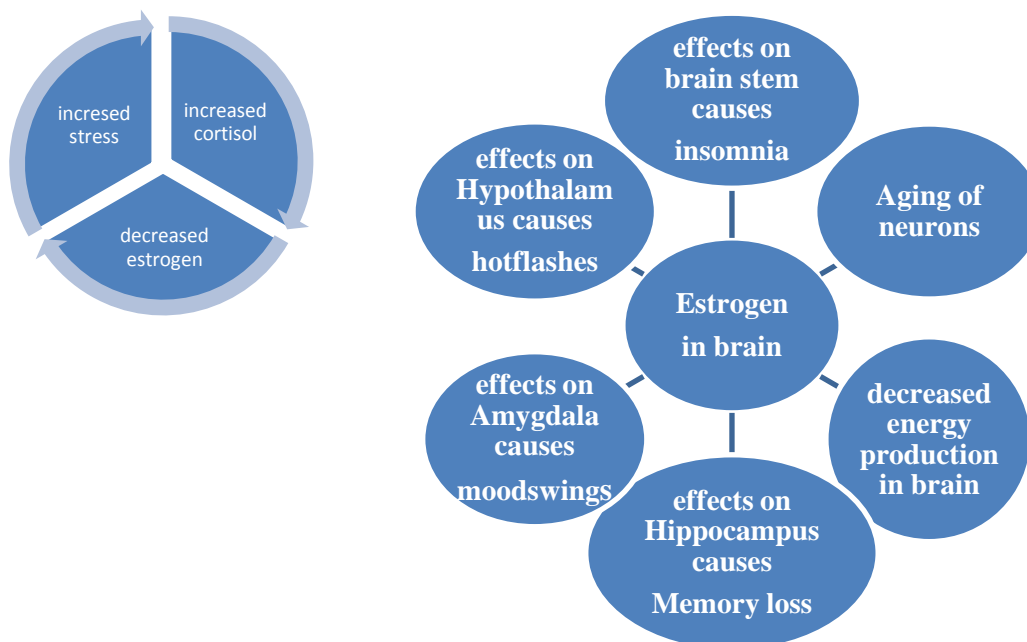
MATERIALS AND METHODS

Literary references are collected from Charaka samhitha, Susrutha samhitha, Ashtanga hrudaya and various other ayurvedic samhithas and books of modern medical science.

Physiological changes in geriatric women

Geriatric women are who attained menopause and going through a postmenopausal stage of their life. During the menopausal transition, estrogen levels decline and levels of FSH and LH increase. The menopausal transition is characterized by variable cycle lengths and missed menses, whereas the postmenopausal period is marked by amenorrhea. The menopausal transition begins with variability in menstrual cycle length accompanied by rising FSH levels and ends with the final menstrual period. Menopause is defined retrospectively as the time of the final menstrual period, followed by 12 months of amenorrhea.

Post-menopause describes the period following the final menses. The major consequences of menopause are related primarily to estrogen deficiency. It is very difficult to distinguish the consequences of estrogen deficiency from those of aging, as aging and menopause are inextricably linked. Many symptoms are found related to postmenopausal syndrome: Hot flashes, irritability, mood swings, insomnia, dry vagina, difficulty concentrating, mental confusion, stress incontinence, urge incontinence, osteoporotic symptoms, depression, headache etc. The deficiency of estrogen decreases the energy of brain and causes the above psychological symptoms and increases the stress



Deficiency of estrogen in cardiovascular system can leads to risk of myocardial infraction ,in urogenital mucosa it causes dry vagina , urge incontinence &in bones it can cause osteoporosis. More changes happens in central nervous system than the other systems. So the geriatric care in women care should be focused on the neuro protective as well as balancing of the other systemic changes^[2]

Discussion

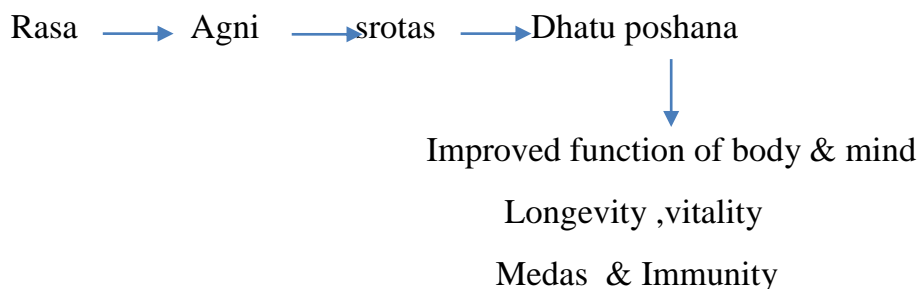
➤ Rasayana chikitsa

Rasayana chikitsa is the heart of jara chikitsa.It is the best way to prevent diseases.The benefits are focused on attaining strength (balya) life giving (jeevaneeya), deerghamayu, medha, smruthi, kanthi, pranathi,vaaksidhi, bulk promoting(brumhaniya) and stabilizing the aging process (vayasthapana).It maintains the equilibrium of dosha ,dhatu,mala which brings health^[3]

➤ Probable mode of action

Rasayana may act at three levels of biosystem to promote nutrition such as -

1. At the level of Agni by promoting the digestion and metabolism.
2. At the level of Srotasa by promoting the microcirculation and tissue perfusion.
3. At the level of Rasa itself by acting as direct nutrition.



- According to Allopathic mode of action rasayana have anti oxidative action which postulates the age associated oxidative reductions, immunomodulatory actions, Antiaging effect, Adaptogenic effect, Neuroprotective action, Hemopoietic action &Anabolic actions^[4]

➤ Rasayana used in geriatric care

RITHU ASAYANA	RASAYANA YOGAS	SINGLE DRUGS	ACHARA RASAYANA
• In vasanta-hrita preparation with	•Chyavana prasha •Brahma rasayana	▪ Ashwagandha ▪ Amalaki	Satyavadinam Akrodham

aragwadhadi gana+ vastsaki gana • In Varsha- vidaryadi gana+rasnadi kalka- ghrita sevana[5]	•Narasimha rasayana •Dhatri rasayana •Vidangadi rasayana	▪ Satavari ▪ Vidari ▪ Gokshura ▪ Bala ▪ Mandukaparni ▪ Guduchi ▪ Yashtimadhu ▪ Shankhupushpi ▪ Brahmi	Madya Nivrati Maithuna Nivrati Ahimsa Anayasaka Dheera Soucha Para Japa para Priyavadinam Prashantam Dana etc.
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Rasayanas should be used only after the shodhana of the patient otherwise it will to diseases. Agni of the patient should be well enough to digest the rasayanas other wise should be continued with deepana pachana chikitsa. Alongwith this achaara rasayana should be followed^[6]

Geriatric women are very prone to disease and always with minimal psychological issues due to their postmenopausal phase. Rasayanas are the best remedy to them because it reaches upto the subtle level of mind through the saptajavaha srothas and nourishes the further. Most of the preparations have phytoestrogens, antioxidants, immunomodulators etc are can be recommended instead of hormone replacement therapy in geriatric women.

Conclusion

Aging is not a disease, it's a natural process of life. Geriatric people are faced with numerous challenges- physiologically & psychologically. Geriatric women needs special care to balance their hormonal changes which is fulfilled by Rasayana chikitsa by which body tissues attain its best capacity to perform their systemic activities. Research studies shown- Hormonal replacement therapy can manage menopausal symptoms it can also leads to breast tenderness, low back pain, vaginal bleeding, mood changes. If properly implemented, rasayana chikitsa can give a better result instead of hormonal replacement therapy.

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STHANIKA CHIKITSA IN GERIATRIC WOMEN CARE

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ABSTRACT

Even though ageing is a natural inevitable biological phenomenon, it causes many biological changes leading to various physical and psychological manifestations. In a woman as part of ageing, when she attains menopause, due to deprivation of oestrogen long term symptomatic and metabolic complications causing various systemic disorders including gynaecological manifestations. Due to the increased life expectancy about one-third of life span will be spent after the menopause. Therefore geriatric women care is of great importance to improve the quality of their life; especially in India having more than 53 million elderly female population. For the common gynecological issues during this stage like per vaginal discharge, vaginal dryness, burning sensation, pruritis etc various treatment modalities in Ayurveda classics like panchakarma, rasayana, sthanika chikitsa and life style modifications can be adopted. Among which sthanika chikitsa or local therapies like yoni prakshalana, yoni pichu, yoni lepana, are the procedures where local route of drug administration is performed at the site of the lesion where high concentration of drug is expected to act at the target organ in a faster and efficient manner than only oral administration. These procedures when applied appropriately in safe accurate manner will be very much beneficial to improve the condition as well as to prevent further progression to serious life threatening conditions like malignancy. This paper is an attempt to analyse the common gynecological disorders of the aged women and the appropriate local therapies or sthanika chikitsas in those conditions. Can provide

Key words: Geriatric women care, Sthanika chikitsa,

INTRODUCTION

Ageing is a natural progressive inevitable biological phenomenon leading to various physiological and psychological changes. This process of growing old varies widely in different individuals. According to Population Census 2011 there are nearly 104 million

elderly persons (aged 60 years or above) in India; 53 million females and 51 million males¹. As per latest report by United Nations Population Fund and Help Age India suggests that the number of elderly persons is expected to grow to 173 million by 2026. According to WHO, about 25 million women pass through menopause each year and by 2030, the world population of menopausal and postmenopausal women is projected to increase to 1.2 billion, with 47 million new entrants each year². According to Indian Menopausal Society, the projected figure of menopausal population in India in 2026 is 103 million³. Due to the increased life expectancy about one-third of life span will be spent after the menopause. In a woman as part of ageing, when she attains menopause, due to deprivation of oestrogen long term symptomatic and metabolic complications causing various systemic disorders including gynaecological manifestations. Therefore geriatric women care is of great importance to improve the quality of their life; especially in India having more than 53 million elderly female population. During menopause, various hormonal changes take place resulting in development of several signs and symptoms affecting the daily routine activities. In Ayurveda the phenomenon of menopause is mentioned as *rajonivritti* which is a *jara pakva avastha* during which *vata dosha* tends to get dominated along with *dhatu kshaya*. The common signs and symptoms associated with menopause are hot flushes, palpitation, fatigue, weakness, dysuria, increased frequency of anxiety, head ache, insomnia, irritability, depression, osteoporosis etc along with other gynaecological issues such as vaginal infections, dryness, pruritis, leucorrhea, dyspareunia. Ayurveda also considers these *lakshanas* after menopause as *svabhavika vyadhi* which can be managed by proper administration of *dinacharya*, *rtucharya*, *panchakarma*, *rasayana chikitsa*, *sthanika chikitsa*, *yoga*, *pranayama*, etc. Among which *sthanika chikitsas* are the local therapies like *yoni prakshalana*, *yoni pichu* etc which can provide very effective management for the gynaecological symptoms.

REPRODUCTIVE SYSTEM CHANGES AND COMMON GYNAECOLOGICAL ISSUES IN GERIATRIC WOMEN

Gynaecological disorders in old age group of women differs from those who are younger or in reproductive age group. The urogenital changes happening after the menopause make the women more prone to gynaecological morbidities. During menopause many physiological changes takes place in all the tissues due to the hormonal variation especially the estrogen deprivation stage results in long term systemic and metabolic complications. The entire reproductive system undergoes atrophic changes. Ovaries shrink in size with thinning of cortex. The muscle coat of fallopian tube becomes thin. The uterus becomes smaller with body : cervix ratio as 1:1. The endometrium also becomes thin and atrophic. The vagina becomes narrower due to gradual loss of elasticity. The vaginal epithelium becomes thin with absent of *Lactobacillus* bacteria

resulting in alkaline vaginal pH. The labia become flattened and the pubic hair becomes scantier resulting in vulval atrophy and narrow introitus. The pelvic cellular tissues become scanty and the ligaments supporting the uterus and vagina lose their tone resulting in pelvic relaxation and uterine descent⁴.

The important symptoms and the health concerns of women after menopause are, vasomotor symptoms like hot flush, palpitation, weakness, osteoporosis, anxiety, head ache, insomnia etc. Estrogen plays an important role to maintain the epithelium of vagina, bladder, and the urethra. Therefore estrogen deficiency produces atrophic epithelial changes in these organs which causes dyspareunia, dysuria etc. The urinary symptoms like urgency, dysuria, and recurrent urinary tract infections and stress incontinence are also common in this age group. Other common gynaecological issues include vulvo vaginal infections, vaginal dryness, pruritis, leucorrhea, pelvic organ prolapse and post menopausal bleeding. Due to the estrogen deficiency, psychological changes as well as atrophic changes of the genitourinary system sexual desire also becomes reduced⁵.

MANAGEMENT THROUGH AYURVEDA

According to Ayurveda ageing can be considered as vridhasvastha or jaravastha which is characterised by the predominance of vata dosha. In vardhakya there will be gradual decline of dhatu, indriya, shareera bala etc. In this phase of vardhakya females attain menopause or rajonivritti during which vata dosha vikaras like insomnia, osteoporotic changes as well as pitta dosha vikaras like hot flushes, irritability etc. As it is a period of increased susceptibility to various disorders, it is very necessary to give utmost care during this geriatric phase. Various treatment modalities in ayurveda like panchakarma, rasayana, rtu shodhana, life style modifications following proper dinacharya and rtucharya can be adopted to improve the quality of life. For the gynecological issues along with vatahara treatments sthanika chikitsas or local therapies explained in the context of streeroga chikitsas can be adopted. These procedures when applied appropriately in safe accurate manner will be very much beneficial to improve the condition as well as to prevent further progression to serious life threatening conditions like malignancy.

STHANIKA CHIKITSA

Sthanika chikitsas or local therapies described by Ayurvedic Acharyas in the management of streerogas have outstanding outcomes. In these procedures where local route of drug administration is performed at the site of the lesion where high concentration of drug is expected to act at the target organ in a faster and efficient manner than only oral administration. The commonly practiced sthanika chikitsa or local

therapies in prasootitantra and streeroga are yoni prakshalana, yoni pichu, yoni varti, yoni dhoopana, yoni lepana, yoni poorana, yoni abhyanga, avagaham and utharavasthi^{6,7}.

Yoni prakshalana / dhawana

Procedure of washing external genitalia as well as genital tract and cervical os with specific medicated decoctions(kashayas). The commonly used drugs for yonidhawana are having anti-microbial, anti-inflammatory and healing properties with the benefit of washing out the accumulated secretions.

It is effective in leucorrhoea or vaginal discharge, vulval or vaginal itching, genito urinary infections, infertility, irregular menstrual cycles, vaginal polyp etc.

Yoni pichu

Placing a tampon (cotton swab wrapped in a gauze piece and tied with long thread) soaked in medicated oil or ghee inside the vaginal cavity. The tampon may also be filled with other medicated preparations like powders (choorna) / crushed raw drugs (kalka) / mamsa according to the condition.

It is used in gynaecological conditions like vaginal itching, burning sensation, pelvic organ prolapse, vaginal discharge, genito urinary infection etc

Yoni varti

Vartis are wicks made by mixing finely powdered drugs with adhesive drugs or binding agents. It is effective in chronic vaginal discharge, genital infections, amenorrhoea etc.

Yoni dhoopana

Yonidhoopana is the procedure in which aromatic vapours are produced from the combustion of herbs to fumigate the genital region. It is indicated in gynecological conditions like vaginal discharge, tenderness, itching etc. The references of dhoopana is found in the management of obstructed labour, retained placenta and post natal care.

Yoni lepanam

Medicines in the form of paste is used for local application. Thee kalka or finely powdered churna mixed with water or medicated liquid and paste with uniform consistency is made. This paste is then applied to affected areas locally. It is effective in uterovaginal prolapse, yoni arshas.

Yoni pooranam

This procedure is defined as filling the vaginal cavity with oils, pastes, powder or bolus. The commonly used form of medications in this procedure are the kalkas or pastes. It is indicated in vataja yonivyapat, pittaja yonivypat, vaginal itching

Yoni abhyangam

This procedure consists of abhyanga of yoni (genital tract). Here luke warm medicated oil or ghrita are applied in the yoni for a specific time in a consistent pressure. This helps in nourishment and strengthening of the local musculature. The main indications are pelvic organ prolapse and stress incontinence

Avagaham

The word 'Avagaha' means to immerse. Avagaha sweda is a type of sudation therapy which is included in drava sweda, in which the patient is made to sit/lie in a tub containing medicated dravadravya to produce fomentation to the body.

Uthara vasti

Vasti which is given through uthara marga i.e through the upper passages (urethra and vagina) is known as utharavasti i.e, Insertion of medicated oil or decoction into intra uterine cavity / urinary bladder. It is indicated in various gynaecological diseases like amenorrhoea (absence of menstruation), menorrhagia (excessive menstrual bleeding), dysmenorrhoea (painful menstruation), irregular menstrual cycles, infertility, retention of urine, dysuria, dyspareunia.

COMMON GYNAECOLOGICAL DISORDERS IN GERIATRIC WOMEN & POSSIBLE STHANIKA CHIKITSA

Gynaecological symptoms/ disorders	Sthanika chikitsas	Formulations
Vaginal discharge (Vaginitis, Cervicitis)	योनि वर्ति	पप्पल्यादि वर्ति
	योनि प्रक्षालन	पञ्चवल्कल क्वाथ/ आरग्वध क्वाथ/ त्रिफला क्वाथ
	योनि धूपन	गुग्गुलु, कुष्ठ, अगरु, घृत etc
	योनि पूरण्	श्यामादि कल्क/ पञ्चतिक्तक कल्क
	योनि पचु	यष्टिमधु तैल / जात्यादि तैल
Pruritis(Vulvo vaginitis)	योनि लेपन	त्रिफला चूर्ण
	अवगाह	आरग्वध क्वाथ/ त्रिफला क्वाथ
	योनि प्रक्षालन	आरग्वध क्वाथ/ त्रिफला क्वाथ

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Vaginal dryness	योनि लेपन	फलस र्प/ सुकुमार घृत / जात्यादि घृत
	योनि अभ्यङ्ग	फलस र्प/ सुकुमार घृत / बला तैल
	योनि पचु	फलस र्प/ सुकुमार घृत / यष्टिमधु तैल
Urinary symptoms (dysuria, incontinence, incomplete emptying, increased frequency, urinary tract infections)	अवगाह	पञ्चवल्कल क्वाथ/ गुडूच्यादि क्वाथ/ दशमूल क्वाथ
	योनि प्रक्षालन	गुडूच्यादि क्वाथ/ पञ्चवल्कल क्वाथ/ बृहत्यादि क्वाथ
	योनि पचु	यष्टिमधु तैल
Pelvic organ prolapse (cystocele, rectocele, uterine prolapse)	योनि अभ्यङ्ग	बला तैल, सुकुमार घृत, फल स र्प
	योनि पचु	सुकुमार घृत, बला तैल, यष्टिमधु तैल
	योनि पूरण	लज्जालु कल्क , वेशवार
	योनि प्रक्षालन	त्रिफला क्वाथ, पञ्चवल्कल क्वाथ, गुडूच्यादि क्वाथ

DISCUSSION & CONCLUSION

The common reasons for per vaginal discharge(yoni srava) in old age women are vaginitis and cervitis for which made of teekshnoshna drugs like pippalyadi varti can be used which will help in draining the discharge and promote healing. Yoni prakshalana with the kvatha preparations according to the dosha predominance can also be done which drains out the abnormal discharge and

Yoni prakshalana or vaginal douche can be done in conditions characterised with per vaginal discharge. The appropriate kvatha like triphala kvatha, panchavalkala kvatha, aragvadh kvatha etc according to the dosha predominance should be selected will help in draining out the discharge, cleansing the vaginal cavity and there by promote the healing. In conditions of recurrent urinary tract infection and itching in the genital region also the process of yoni prakshalana will be beneficial. Pelvic organ prolapse especially with decubitus ulcer like conditions also douche with medicated decoctions are very much effective.

Insertion of vartis like pippalyadi varti made of appropriate powdered drugs into the vaginal cavity is another effective method for the infections like trichomoniasis,

moniliasis, cervicitis etc. This varti absorb the sravas as it is hygroscopic in nature. Yoni dhoopana or fumigation of genital region with medicated smoke using guguulu, agaru, haridra etc drugs acts as sroto shodhaka, kaphagna, kledaghna and srava stambhaka. Therefore it is also indicated in yoni kandu or pruritis, vaginal infections etc.

Yoni poorana or filling up of the vaginal cavity with medicated kalka, choorna, veshavara, pinda etc is also indicated in pelvic organ prolapse, per vaginal discharge etc. Yoni pichu or vaginal tampon soaked with oil or vatahara decoctions diminishes the chances of infection in the genital tract and urinary tract softens the vaginal canal, supports pelvic organ prolapse etc. Acharya Sushruta mentions that just as water extinguishes fire instantly likewise lepana cures vrana shoola, cleanses wound or infection and reduces swelling or inflammation⁸. Therefore it will be effective in yoni arsha, srasta yoni etc.

Avagaha sveda or sitz bath with herbal kashayas will provide local sudation effect, anti inflammatory action and promote ropana of the tissues. Hence it can be practiced for the conditions like pruritis vulvae, vulvovaginitis, recurrent urinary tract infections etc. Avagaha with vatahara kashayas like dashamoola kashaya also provides strength to the pelvic musculature. Yoni abhyanga or gentle massage done in the genital tract or vaginal wall after administration of bala taila or sukumara ghrita or phala sarpi increases the tone and strength of perineal musculature so that it will be beneficial for genital prolapse as well as stress incontinence.

The practice of sthanika chikitsas or local therapies in an appropriate judicial manner with all aseptic precautions is very much beneficial for urogenital issues. In this age group of geriatric women especially during the estrogen deprivation period after menopause along with the shamana chikitsa with herbs having phytoestrogenic effects, shodhana, panchakarma chikitsa, rasayana chikitsa, administration of sthanika chikitsas will provide wonderful results and there by improves the quality of life of geriatric women.

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IDEAL LIFESTYLE FOR GERIATRIC WOMAN

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ABSTRACT:

Throughout the human life cycle, the body constantly changes and goes through different stages. Accompanied by considerable hormonal changes, the life stages of women are generally divided into infancy, puberty, reproductive age, climacteric period, and geriatric. Many health problems occur or intensify simply as a result of the aging process. In the geriatric woman, more chances of Chronic health conditions, Cognitive-Mental- psychological problems, Menopause, Osteoporosis, Malnutrition, Sensory impairments, Oral health, Bladder control problems, constipation etc. So they need care and cure with more attention. Geriatric condition is described in Ayurveda as Jara avastha, and it is predominant of vata dosha. Geriatric Care Management includes Meals – diet supervision and scheduling, Medications – up-to-date lists and schedules, Socialization – keeping the patient from isolation, Prevention – understanding symptoms that could need attention. Keeping the above four factors in balance can help an individual to lead a life of fulfillment even in the old age. In the same way, women can incorporate various principles of Ayurveda like Dinacharya Ritucharya, pathyapathya, swasthvirrita, Abhyang, nasya, vyayam, aachar rasayan, healthy diet (Anna varga, phala varga) Deepan, pachan, yogasan, pranayam, Panchkarma, etc in their life style to improve their quality of life in old age.

KEY WORDS: Geriatric woman, Life-style, Swasthvirrita, Panchkarma, Pathyapathya in geriatrics.

INTRODUCTION:

There are seven stages a human moves through during his or her life span. These stages include infancy, early childhood, middle childhood, adolescence, early adulthood, middle adulthood and old age. Accompanied by considerable hormonal changes, the life stages of women are generally divided into infancy, puberty, reproductive age,

climacteric period, and geriatric. The stage that follows early adulthood is known as middle adulthood where people are generally caught between being productive and being stagnant. This stage reflects the need to create a living legacy: they would either need to feel they have become an important figure for the next generation to follow or they would develop a sense of purposelessness which is generally known as a “mid-life crisis”. This crisis can be solved by having the adults care and nurture children or help the fore-coming generation in other ways or means, however if the crisis remains the person would persist in random non-age-appropriate behavior as well as a continued feeling in stagnation. During this stage adults lose some of their physical aspects as their muscular strength, ability and agility weakens.¹

With changing demographic profile India has more older women than men as life expectancy for women is 67.57 as against 65.46 for men. Gender differences in the aging process reflect biological, economic, and social differences. Both social and health needs of the older women are unique and distinctive as they are vulnerable.

GERIATRIC DEFINITION AND IT'S EFFECT :

Aging refers to the inevitable, irreversible decline in organ function that occurs over time even in the absence of injury, illness, environmental risks, or poor lifestyle choices (eg, unhealthy diet, lack of exercise, substance abuse). Initially, the changes in organ function are not affect baseline function; the first manifestations are a reduced capacity of each organ to maintain homeostasis under stress (eg, illness, injury). The cardiovascular, renal, and central nervous systems are usually the most vulnerable (the weakest links). Diseases interact with pure aging effects to cause geriatric-specific complications (now referred to as geriatric syndromes), particularly in the weak-link systems - even when those organs are not the primary ones affected by a disease.

GERIATRIC WOMAN PROBLEM:

Throughout her life, a woman plays different social roles, viz. daughter, wife, mother, grandmother and care giver, which influence the health of her family. While older men have the privilege to retire from work, women are never relieved of their social responsibilities. At this stage, the protective advantage of hormones is lost and women become more vulnerable to certain diseases than men. It is time now to focus on issues concerning health of this special group. The social problems revolve around widowhood, dependency, illiteracy and lack of awareness ,Emotional problems,like feeling of useless, helpless, Lonlines etc.The most common mental and neurological disorders in this age group are dementia and depression, which affect approximately 5% and 7% of the world's older population, respectively. Anxiety disorders affect 3.8% of the older population, substance use problems affect almost 1% and around a quarter of deaths from

self-harm are among people aged 60 or above. Substance abuse problems among older people are often overlooked or misdiagnosed.

Among the medical problems, vision (cataract) and degenerative joint disease top the list, followed by neurological problems. Lifestyle diseases form another single-most important group of health problems in the elderly women. The risk of cardiovascular disease doubles with the outcome being poorer than men. The most common causes of death among women above the age of 60 years are stroke, ischemic heart disease and COPD. Hypertensive heart disease and lower respiratory tract infections contribute to mortality in these women. Common malignancies viz. Cervical, breast and uterus in women are specific to them and account for a sizeable morbidity and mortality. In a study done at Lady Hardinge medical college in Delhi, Hypertension (39.6%) and obesity (12-46.8%) were very common in postmenopausal women.

Half or more women had high salt and fat intake, low fruit and vegetable intake and stress. There is a need to recognize the special health needs of the women beyond the reproductive age, to be met through strengthening and reorienting the public health services at all levels starting from primary health care to secondary till tertiary care level with adequate referral linkages. All policies and programs need to have a gender perspective. At present there is lack of sensitization and appropriate training of the health personnel in dealing with the needs of elderly. Women too need to be aware to adopt healthy lifestyle and seek timely care. 2

Hormonal imbalance leads to so many gynecological problems, The most common problems encountered in elderly women are vulvovaginal inflammation, genital prolapse, postmenopausal bleeding, and alterations in bladder function.

GERIATRIC IN AYURVEDA:

स्वभा वकास्तु क्षुत्पिपासाजारामृत्युनिद्राप्राकृतयः

I (Su.su.1/33)

Ayurveda has considered Jara or vdrdhiikya as a natural (Swabhavika vyadhi) and inevitable . Jara involves a structural & functional change in the body and the role of Dosa, Dhatu; Mala, Satwa, Agni, Srotas, Oja has been considered with respect to the aging process. In old age as the Kshaya of Saptadhatu is observed, naturally it leads to Ojokshaya which is again of three types; 1. Ojovisramsya, 2. Ojovydpat , 3. Ojoksaya . In old age Vata dominancy and Agnimandya is prime condition along with manodaurbalya.

Sequential Kshaya in Aging: Balya vridhhi chavi medhasukra vikram(Sha. Ma. Khand) Acharya Vagbhata and Sdrangadhara presented an interesting scheme for loss of different biological factors during the lifetime, as a function of aging in different decades

GERIATRIC CARE:

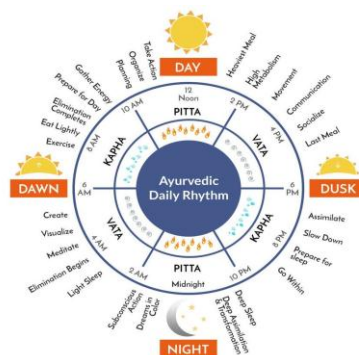
Includes,

1. Meals – diet supervision and scheduling,
2. Medications – up-to-date lists and schedules,
3. Socialization – keeping the patient from isolation,
4. Prevention – understanding symptoms that could need attention. Keeping the above four factors in balance can help an individual to lead a life of fulfillment even in the old age.

GERIATRIC LIFE STYLE BY AYURVEDA:

women can incorporate various principles of Ayurveda like Dinacharya Ritucharya, pathyapathya, swasthvritha, Abhyang, nasya, vyayam, aachar rasayan, healthy diet(Anna varga, phala varga) Deepan, pachan, yogasan ,pranayam, Panchkarma, etc in their life style to improve their quality of life in old age.

According to dominancy of Doshas whole day devided as follow;



First cycle: Sunrise to Sunset-(6:00 am – 6:00 pm)

- 6:00 am – 10:00 am – Kapha
- 10:00 am – 2:00 pm – Pitta
- 2:00 pm – 6:00 pm – Vata

Second cycle: Sunset to sunrise (6:00 pm – 6:00 am)

- 6:00 pm – 10:00 pm – Kapha

- 10:00 pm – 2:00 am - Pitta
- 2:00 am – 6:00 am – Vata

DINACHARYA:

Dinacharya is a concept in ayurvedic medicine that looks at cycles of nature and bases daily activities around these cycles.

Ayurveda contents that, these routines help establish balance and understanding daily cycles are useful for promoting for health.

1. Rise and shine(ब्राह्मे मुहूर्ते उत्तिष्ठेत्)

According to Dinacharya, it is important to wake up before the sun rises. The time between 4:30 – 5:00 am is considered to be an ideal time to wake up. This pre- dawn time is when the Vata dosha is dominant, and the energy present in the environment will make it easy to wake up. Moreover, it is that time of the day when there is a certain amount of peace and freshness that is necessary for the body and soul. Before getting out of bed one should say a prayer since it will induce positive energy into mind and soul.

2. Rinse(मुख प्रक्षालन)

Rinse face with cold water to become alert for the coming day. You should also perform ‘Jalneti’ a technique prescribed by Ayurveda, which involves cleaning your sinus, nasal passage and mouth with the help of a tea pot like vessel called neti pot.

3. Cleansing of your senses(प्रक्षालनं हि पाण्योश्च पादयोः शुद्धिकारणमलमालाश्रमहरं वैश्यचक्षुष्य....)

To enhance all your senses in the morning, your sense organs should be cleaned thoroughly. Wash your hands, legs with warm water, eyes with rose water and ears with sesame oil. Brush your teeth and clean your tongue to enhance your taste buds and to stimulate digestive responses.

4. Drink warm water(उषः जल पान)

Though most people consume caffeine in the morning, Ayurveda recommends the consumption of warm water. It enhances peristalsis and also flushes the kidney of any harmful toxins and free radicals.

5. Evacuation(गुदादिमलमार्गनाम शौचं कान्ति बलप्रदम्।)

Evacuation is one of the most important pillars of health according to Ayurveda. If this does not occur regularly, or is delayed, it slows down digestion and causes constipation. This in turn forms harmful toxins in the body that can give rise to chronic diseases.

6.Oil massage(अभ्यंगम आचरेनित्यं स जरा श्रम वातहा ..), (a.h.su 2/7)

Foot massage,(पाद अभ्यंगस्तु तत स्थैर्य निद्रा दृष्टी प्रसादकृत ।) (a.sm. su. 3/59), (bha.pr 5/63-64) **Head massage**.(अभ्यंग श लतो मूर्धनि सकल इन्द्रिय तर्पाक ।)

Massaging your body, foot and head with essential oils daily will keep your body moisturised and will prevent your tissues from getting dry. This ensures that there is good blood circulation in your body for a calmer and healthier nervous system.

7. Exercise(दोषक्षयो अग्नि वृद्धस्य व्यायमादुपजायते।) (bha.pr. 5/47-48)

This can be done in any form, be it Yoga(ex. Surya Namaskar or walking, jogging). Exercise will remove stagnation and fat from your body and will strengthen your muscles.

8. Bath(दीपनं वृष्यम आयुष्यं स्नानं ऊर्जा बल प्रदम।) (a.h.su 2/16)

Bathing will remove excess oil from the surface of your skin and will make you feel fresh and energized to take on the tasks for the day.

9. Meditation:

Meditation will help you concentrate , by maintaining a balance between your mind, body and soul. It will also calm your nervous system and will make you feel peaceful and steady.

10. Unwind:

After finishing the day's work, it is important to unwind and relax your body. Shut your eyes, lie down, light some scented candles and listen to soulful music. This will not only make you feel at peace, but will also release all the stress and tension from your body. Another effective way of relaxing after a day's hard work is spending time with loved ones.

11. Aachar Rasaysana (सत्यवादिनम अक्रोधं...)(cha.chi.1/4/30-35) &

Sadvritta: (cha.su. 8/30-31)

Various code of conducts given by different aacharyas which brings towards spirituality and also helpful for achiving Dharma, Artha, kaam, Moksha. Good conduct maintains positive health devoid of all diseases, and lives for hundred years.

Benefits of Dinacharya:

1. Connection with nature

This Ayurveda daily routine helps you connect with nature by making you conscious of your natural surroundings. In fact, it ensures that you live in harmony by aligning your body with the rhythm of nature.

2. Prevention of diseases

It promotes a healthy lifestyle since it strengthens your immunity and protects you from diseases.

3. Release of stress

Meditating and massaging yourself with essential oils, releases all the stress and tension from your body and mind.

4. Digestion and absorption

By following a pattern of meal timings and by regulating the amount of food being eaten, it helps your body to digest and absorb the nutrients from food effectively.

5. Discipline

It also helps in maintaining a certain discipline in the mind and body which is beneficial in several other aspects of life.

6. Peace

Meditating and absorbing the positive vibes in your surroundings helps you achieve a peaceful state of mind.

7. Happiness

Following Dinacharya every day, removes all the stress and worries in your life. This, in turn, brings you happiness.

8. Longevity

It ensures a healthy lifestyle and promotes longevity.

DIET FOR GERIATRIC WOMAN

आरोग्यं भोजन आधीनं। (ka. Khi. 5/7)

Health is dependent on food. In old age there is Agni mandya & most of persons do improper food intake . One should consume condusive food in right quality, at right time to maintain health.

Specially woman who are in peri menopause, climacteric phase , menopause or Post menopause period must include Soya bean, Protien rich diet , Fruts, dry fruits, Green leafy vegitables etc.

In ayurveda Anna varga, drava varg, Dugdha vrga, etc given. So One should follow pathapathya accordingly.

YOGASANA & PRANAYAMAA:

योगस्तु चत्त वृत्ति निरोध । (pa. yo. Su. 1 / 2)

Yoga is the process on gaining control over the mind.

यम नियम आसन प्राणायाम प्रत्याहार धारणा ध्यान समाधी अष्ट अंगानि । (Yo. Su. 2/30)

Astang yoga is multi objective Antarang and Bahirang practice of yoga .which connects soul to God . And improve Punarjanma.

ROLE OF STHANIKA CHIKITSA IN GERIATRIC WOMEN- YONI ABHYANGA AND PICHU IN FIRST DEGREE UTERINE PROLAPSE –A CASE STUDY

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ABSTRACT:

INTRODUCTION:

Geriatric problems are much concern for medical professionals, in this current scenario. Old age should be regarded as a normal, inevitable biological phenomenon but, there will be a lot of physical and psychological variations in them. Genital Prolapse of various degrees, non specific vaginitis, Vaginal atrophy, Estrogen deficiency, infections, cervical erosions etc are some of the most commonly facing physical conditions. In Ayurveda, Acharya Charaka classified Stree according age, where in above 60years is considered as vriddha. Vata being predominant in this age, causes many Yoni vyapat. Prasamsini, Mahayoni, Kaphajayonivyapath, Sushka, Phalini/Andini are common. Rasayana & Sthanika chikitsa mentioned in Ayurveda effectively prevent and manage such diseases.

AIMS AND OBJECTIVES: The main objective of this is to assess the efficacy of Ayurveda medicines in Prasamsini yonivyāpat; that is yoni abhyanga and pichu in first degree uterine prolapse.

MATERIALS AND METHODS: Subject diagnosed with Prasamsini yonivyapath who had consulted in Prasuthi Tantra and Stree roga OPD of Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan. Sthanika abhyanga and yonipichu was done for the subject.

DISCUSSION: Sthanika chikitsa has showed significant improvement in the complaints and improved the conditions of the patient.

CONCLUSION: The Yoni abhyanga with Dhanwantara taila and yoni pichu with Changeryadi ghrita caused improvement in tonicity of abdominal and perineal muscle

KEY WORDS: Geriatrics, Vrudha, Yonivyapat, yoniabhyanga, yoni pichu, dhanwantara taila, changeryadi ghrita.

INTRODUCTION

Uterine prolapse is a very common condition with which the patient usually reports to the gynecologists. Laxity of vaginal canal and uterine descent are much common conditions. When we compare with modern science, the basic treatment principles of both Ayurveda and modern science remains same, both medical sciences gives emphasis on re positioning of prolapsed part but, modern science has given more stress upon surgical correction of prolapse¹. When the prolapse of 1st or 2nd degree then the conservative line of treatment which is told in Ayurvedic classics seems to be more beneficial, cost effective and more over it gives mental relief to the patient from the fear of surgery². This paper is to show the efficacy of Ayurvedic basic treatment principle in managment of Prasamsini yoni. Dhanwantara taila is used for yoni abhyanga as it is balavardhaka and helps to improve the stability of vaginal walls and changeryadi ghrita for yoni pichu which is explained for gudabramsha chikitsa is used.

AIMS AND OBJECTIVES

To show the efficacy of Ayurveda treatment in Prasamsini yonivyāpat, Yoni Abhyanga with Dhanwantara taila and Yoni Pichu with Changeryadi ghrita .

CASE REPORT

A 50 year old female Hindu patient, visited to the OPD of Department of Prasooti Tantra and Stree Roga of SDMCAH, HASSAN on 24th January 2021 with complaints of feeling of something coming down in vagina since 1year, and since 6 months increased frequency of micturition, Passing drops of urine on coughing or sneezing with mild burning micturition. Later she developed with difficulty in holding urine urge for even 2 minutes and disturbed sleep.

PREVIOUS HISTORY: N/K/C/O DM/ HTN/ hypo-hyperthyroidism or any other major medical or surgical history.

FAMILY HISTORY:

Nothing relevant to the condition.

PERSONAL HISTORY

BP : 130/80 mmhg

Pulse : 76 bpm

Respiratory Rate : 17 / min

PICCLe: Absent

Built : Moderate

Nourishment : Moderate

MENSTRUAL / OBSTETRIC HISTORY:

Menarche at - 13 yrs of age

Menstrual cycle – attained menopause 5 years back.

Married life – 30 years

O/H – P2 L2 A0D0

P1- Male 28 years FTND, P2 - Male 25 years FTND, difficult labour with prolonged second stage.

Tubectomy done 25 years back

SYSTEMIC EXAMINATION

- CVS: S1 S2 Normal
- CNS: Well oriented, conscious.
- RS: normal vesicular breathing, no added sounds
- P/A- Soft, non tender
- P/S- vagina normal, cervix healthy and normal size, white discharge+
- P/V- External os felt 2.5cm below the level of ischial spines ,but still remained inside the vagina. On coughing - External os felt 4cm below the level of ischial spines but still remained inside the vagina. Dribbling of urine observed on coughing.
- B/L Breast- symmetrical , soft , no lymph nodes/mass detected.

INTERVENTION

- Sthānika chikitsa □ Yoni abhyanga with dhanwantara taila for 5-minutes Yoni pichu with Chāngeryādi Ghrita kept for 3-hours.

OBSERVATION

24/1/21- 30/1/21 1st course of treatment –

- o Micturition frequency had reduced to 6-7 times and can hold urine for 5 minutes.
- o Complaints of passing drops of urine on coughing, sneezing had reduced.
- o Relief from burning micturition.
- o C/o something coming down in vagina reduced slightly .

4/3/21-10/3/21-2nd course of treatment –

- o Micturition frequency and complaints of passing drops of urine on coughing, sneezing reduced
- o Relief with the c/o something coming down in vagina (60%)
- o Patient could hold urine for 10-15 minutes .

DISCUSSION

In post-menopausal age due to estrogen deficiency and atrophic changes there is increased laxity of vaginal canal and laxity in the ligaments causing uterine descent. This post menopausal age is considered as vata predominant age associated with mamasa shaithilya with increased chances of garbhashaya bhamsha³. Mithya āchāra, praduṣṭa ārtava, bījaduṣṭi, and daiva are considered as sāmānya nidāna for all yonivyāpat and dukha prasava⁴. Prasamsini yoni vyapad is pitta dosha predominant yoni vyapad mentioned by Acharya Sushrut; and having features of syandate, kshobita and dusprasuscha. Madhava Nidan has considered sramsate instead of syandate⁵. Commenting on it madhukosha tika says sramsati as swasthanatccavate nissarati iti i.e. the yoni has descended from its actual position⁶.

So we opted for sthanika chikitsa here, it will give a faster result as we are giving treatment directly to the affected part. Vagina is a mucous tissue and readily absorbs the especially in pichu dharan, where pichu is kept for aamutrakal or for 3 hours so the action of the drug is for a longer duration where it remains in contact with the vaginal wall. Potential for systemic delivery through vagina was explored due to its large surface area, high vascularity and permeability. The drugs having vata and pitta shamaka property were selected. Dhanwantara taila is balavardhaka and vatashamaka in action and changeryadi ghrita explained in guda bramsha chikitsa is used for yoni pichu.

CONCLUSION

The yoni abhyanga with Dhanwantara taila and yoni pichu with changeryadi ghrita caused improvement in tonicity of abdominal and perineal muscle . It also helped to relieving all symptoms related to urinary system .

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RASAYANAS FOR GERIATRIC WOMEN

Role of Rasayana Therapy in Geriatric women care: A Review

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ABSTRACT

Geriatrics is the branch of medicine that focuses on health promotion, prevention, diagnosis & treatment of disease and disability in older people. In Ayurveda Acharya Sushruta explained Vruddha avastha (Old age) of life stage. According to Sushruta Vardhkya Avastha is swabhava (physiological). Women attains Rajonivutti (menopause) during this Vruddha avastha. This period is associated with manifestation of ageing process in women. Ageing is a process of physical, mental, emotional & social changes in multidimensional aspect. These physical and psychological changes are generally occur due to disturbed Vata Dosha & Dhatukshaya. During these degenerative changes women affected more as compared to men. And this can be restrained to some extent with the help of Rasayana Chikitsa.

Rasayana Chikitsa is a unique therapeutic method to minimize the intensity of problems occurring during this degenerative phase of life. Rasayana is an Ayurvedic Rejuvenation Therapy. These drugs provide optimum nourishment to the Rasadi Dhatus. Rasayana formulations along with proper balanced diet, Yoga, Pranayam, Sadvrutta can be helpful for menopausal symptoms.

Key words:- Rasayana, Geriatrics, Rajonivrutti , Jara, menopause.

INTRODUCTION

Geriatrics is the branch which concerned with the prevention and treatment of diseases in older people. Geriatrics branch supports research aimed at improving health, function and quality of life of older persons. India has acquired the label of “an ageing nation” with 7.7% of population of India is more than 60 years old(1). Government of India adopted ‘National Policy on Older Persons’ in January,1999. The policy defines ‘senior citizen’ or ‘elderly’ as a person who is age of 60 years or above(2). In Ayurveda, the term ‘Jara’ is used to denote old age people.

Elderly people are highly prone to physical and mental health issues. Specially female are more sensitive than male. So psychological problems such as dementia, depression, anxiety, insomnia, Alzheimer's disease, etc. are more commonly found in female. As menopause occurs around 50's of life, female undergo several changes in their body in response to lower levels of oestrogen, progesterone, FSH & LH. They show typical symptoms of menopause as hot flushes, vaginal dryness, night sweats, palpitations, cardiovascular disease, osteoporosis, loss of libido, etc.

In Vrudhha Avastha, Vata Dosha is more prominent with its Laghu & Ruksha Guna which results in reduction of Dhatus i.e. Dhatukshaya; which further results in Updhatukshaya. This vitiated Vata Dosha also disturbed the other Sharir as well as Manas Dosha leading to various physical as well as psychological diseases. In geriatric women it is better to balanced aggravated Doshas or underlying factors, so that the intensity of these disease will be far less or can be negligible. Ayurveda is a Holistic Science which has got the potential for prevention of disease by health promotion. Ayurveda mostly focus on Ahar (diet), Vihar (lifestyle modification), & Aushadhi (medicine) Chikitsa. Ayurveda describe Rasayana Chikitsa to minimize symptoms associated with Vrudhha Awastha. According to Acharya Charaka, people who undergo Rasayana therapy obtain longevity and freedom from disease.

Classification of Rasayana Chikitsa based on effects(3) :-

- 1) Kamya Rasayana – it is used to attain desirable specific benefits such as long life, wealth, great intelligence, etc.
- 2) Naimittika Rasayana – It is a therapy used to treat a particular disease.
- 3) Ajasrikam Rasayana – It is advised to follow daily and person is habituated to these substances.

Before use of Rasayana therapy Shodhana Karma (body purification) is indicated. Haritaki, Saindhava, Amalaki, Gud, Vacha, Vidanga, Haridra, Pippali, Suntha powder are described in Charaka Samhita for Virechana(4). This purification is to remove toxins & prepare the body for receiving the Rasayana formulations. After proper evacuation of bowel person shall follow proper Sansarjana Karma. After this procedure suitable Rasayana formulations can be used.

According to acharya Charaka benefits of Rasayana are Dirghamayyu (increase longevity of life), Smruti (good memory), Medha (intellect), Aarogya (proper health), Tarun Vaya (youthfulness), Prabha (excellent luster), Varna (excellent complexion), Swara (excellent voice), Deha Indriya Balam Param (strength of body and sense organs is increased).

Perfection in deliberation, respectability & brilliance are also achieved by Rasayana therapy⁽⁵⁾. Women can achieve blissful health by practising Rasayana therapy.

MATERIAL

Some Rasayana described in Aurveda for Geriatric People :-

1)Ahar Rasayana – Milk, Ghee

Daily intake of milk and ghee gives best effect of Rasayana. As Vata Dosha is more dominant in older women Abhyantar Snehan (internal body oleation) is very important. Ghee is a good source of Omega 3 Fatty acids. Milk is a good source of Vitamin D and Calcium which is most important to maintain bone strength, preserve muscle strength and prevent osteoporosis. Also a balanced vegetarian diet is the most important aspect of the preventive management of menopausal syndrome. Black grams, Bengal grams are good source of phytoestrogen.

2)Achar Rasayana – Person who is being truthful, free from anger, calm, relaxed, soft spoken, loving, compassionate, practicing meditation, Bramhacharya, cleanliness and proper diet- sleep achieves the benefits similar to Rasayana. It is basically related to lifestyle modification by following Dincharya, Ratricharya & Rutucharya. It significantly influence psychological & spiritual wellbeing of a woman.

3)The probable mode of action of Rasayana therapy as per contemporary science is as follows(6)-

1. Antioxidant action – Amalaki
2. Immunomodulatory action – Guduchi
3. Haematopoietic action – Amalaki, Bhiringraj, Mandura, Lauha Bhasma
4. Adaptogenic action – Ashwagandha, Shatavari
5. Antiaging action – Amalaki, Bala, Ashwagandha
6. Anabolic action – Vidarikanda
7. Nutritive action – Ksheera, Ghrita
8. Neuroprotective action – Ashwagandha, Swarna Bhasma, Rajat Bhasma

4)Amalkyadi Rasayana – Kewal Amalaka Rasayana, Amalaka Ghrita, Amalaka Awaleha, Amalaka Churna, Aparajita Amalakawaleha are described in Samhitas.

Amalaki is Tridoshghna Dravya (Balance Vata, Pitta & Kapha). It comes under Vayasthapana Gana (anti ageing & rejuvenate). Amalaki is the highest source of heat stable Vitamin C, source of polyphenols and supports digestion, metabolism, elimination and normal liver function. It is excellent for vision, hair and skin complexion.

5)Medhya Rasayana –

1. Juice of Mandukparni (Centella Asiatica)
2. Juice of Guduchi (Tinospora Cordifolia) with its root and flower
3. Powder of Yashtimadhu (Glycyrrhiza Glabra) with milk
4. Paste of Shankhpushpi (Convolvulus Prostrates)

These Rasayana enhances intellectual & memory functions. These drugs used in Dementia. These herbs are effective in life promoting, disease alleviating, promoters of strength, Agni, complexion, Voice, etc.

6)Shatavaryadi Rasayana – Shatavari contain Phyto estrogenic compound which is more important in postmenopausal women. It shows anti-inflammatory, antioxidant, carminative, estrogenic action. It is classified as an adaptogen and helps in normalising stress and anxiety.

7)Chyavanprasha – It is a powerful immunity booster formulation rich in Vitamin C and antioxidants. It shows rejuvenate, anti viral, anti bacterial, anti fungal properties. It not only repair or regenerate tissue but also protect the body against tissue damage and hence reduces the ageing process in tissues of heart, lungs, liver and skin. The presence of antioxidants protects the body against free radical damage and maintain a balanced ratio of Calcium in the bones.

8)Brahma Rasayana – It is cognitive enhancer and memory booster; and good for conditions like insomnia, anxiety. It prevent detrimental toxins from damaging brain cells and preserve brain cells from degeneration. It prevents deterioration of cognitive functions in people who are suffering from Alzheimer's Disease, Parkinson's disease and other neurological disorders.

DISCUSSION

Ayurveda gives importance to the Geriatric care, as it is one of the branch of Ashtanaga Ayurveda. Jara Chikitsa has a good scope as a preventive tool. Rasayana is a specialized type of treatment having impact on Dhatus, Agni and Strotas of the body. This lead to overall improvement in the formation and maintenance of the living tissues. It helps in the prevention of ageing, improving of physical and mental strength & enhances resistance against diseases. It provide essential nutrients at all levels from macro to micro cellular level.

CONCLUSION

The prime aim of Ayurveda is to maintain the health of a healthy individual and cure the disease. So to maintain the healthy state of body one should follow the Swasthvrutta principles. Rasayana therapies are analysed by our different Acharyas. Therefore person

desire of having long life, vitality and happiness should practise Rasayana therapy with complete devotion.

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LIFESTYLE PROTOCOL FOR GERIATRIC WOMEN –“THE BETTER WAY TO GROW OLD”

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ABSTRACT

The desire to live is common to all living creatures evolved on this grateful planet, the Earth but Man, is a step ahead in the sense, desires not only to live but to live a long, happy and disease free. Ageing is a process of physical, psychological and social change in multidimensional aspects moreover in women menopause bring several changes in the body and mind due to decline in the amount of estrogen and progesterone being produced by the body.

In Ayurveda ageing is considered are dhatukshaya janya avastha. Rajonivritti as a diseased condition is not described separately in the classics but it is mentioned as a part of jara avastha in women. In menopause Lifestyle plays an important role and healthy lifestyle changes can have an enormous impact on conditions which improve the immune system and the endocrine system. A customized lifestyle modification strategy is therefore an essential component in a woman's approach to ameliorating the symptoms of menopause. Hence the lifestyle protocol are elaborated in this paper which includes Dinacharya with Rasayana chikitsa based on the prakruti of the individual.

Keywords: geriatric, menopausal women, Ayurveda, Jara avastha, Dinacharya, Rasayana, vyadhi pratyneeka chikitsa.

INTRODUCTION

Ageing is a lifelong process, which begins before we are born and continues throughout life. The functional capacity of our biological systems (e.g. muscular strength, cardiovascular performance, respiratory capacity) increases during the first years of life, reaches its peak in early adulthood and naturally declines thereafter. The slope of decline is largely determined by external factors throughout the life course. Ageing women make up a significant proportion of the world's population and their numbers are growing. The menopause transition is a major health milestone for women with influences that extend

far beyond reproduction , in addition to the symptoms that accompany menopause , concomitant, biological, physiological, behavioural and social changes shapes women's midlife and future. Many women lack concrete information about what is taking place & what are their options regarding a proper diet, nutritional supplements & exercise and simple knowledge & preparation through Ayurveda that can enable one to embrace it and move on with grace.

AIMS AND OBJECTIVE

Maintenance of health in old age by following life style protocol for avoidance of disease

Rajonivritti

Rajonivritti is not described separately as a pathological condition or severe health problem in Ayurvedic classics. The ancient acharyas termed it as a normal physiology. The term 'Rajonivritti' is made up of two different words viz. "Rajah" and "Nivritti"

As Sushruta mentioned that menopause deals with JarapakvaAvastha of the body. Acharyas termed it as a normal physiology occurring at the age near about 50 years due to Vata predominance and Dhatukshaya

According to Ayurveda, 45-55 years of age are a critical decade. They provide the foundation on which subsequent health is established. Degree of concern in this decade and consequent life style changes determine the grace of future life and its probability of being without the burden of chronic health problems

Lifestyle Factors associated with Early Menopause:

- Poor nutrition & Poverty
- Smoking increases risk of early menopause
- Alcohol consumption may contribute to an early entering into the phase of menopause
- Medical treatments such as chemotherapy & radiation can initiate menopause earlier than usual
- Stress, strain & mental tension leads to early menopause²

Signs & Symptoms of Menopause:

Estrogen levels are rapidly decline, causing symptoms to appear suddenly, more severely and last longer. Several visible symptoms are:

- Age between 40-50

- Irregular periods for 12 months
- Suffering from common symptoms including hot flashes, headache, weight gain, depression, insomnia, mood swings, fuzzy thinking or fatigue³.

Lifestyle protocol for Prevention of menopausal symptoms

Prevention include some important principles of Dinacharya in the daily routine

Anjana: Souvira Anjana has been advised daily, it helps in maintaining the health eye and vision.

Abhayanga:Ushna Abhayanga in sheeta Ritu and Sheeta Abhayanga in Ushna Ritu, strengthens the body, repairs the regenerates tissue, very good in pacifying Vata, relieves tiredness and many more. Shiro Abhyanga Beneficial for hair, Nourishes sense organs, improves sleep. Padabhyanga Strengthens legs & feet, Relieves from senselessness, stiffness, cracks, contraction etc. improves vision and improves sleep.

Nasya: Pratimarsha Nasya has been advised to use daily, usually Anu Tail is used for this purpose. pacifies the Vata Dosha & gives unctuousness to head & neck region, so it prevents mainly the degenerative disorders of brain & sense organs.

SnehaGandusa: Sneha Gandusha - Prevents Vataja disorders of mouth, cracking of lips, dryness of mouth, Swarbheda (loss of voice), etc.

Vyayama: Any kind of activity which brings up tiredness in the body is Vyayama. It promotes Overall health & functioning, strength, digestive power, Body mass & solidity, lightness, reduces fat etc.⁴

VRIDHA AVASTHA IN STREE	VATA DOSHA PREDOMINANT	PITTA DOSHA PREDOMINANT	KAPHA DOSHA PREDOMINANT
LAKSHANA	Nervousness, anxiety, pain, mood swings, vaginal dryness, loss of skin tone, feeling cold, irregular periods, insomnia, mild hot flashes, constipation, palpitation, bloating and joint pain	Prone to Hot temper, anger, irritability, feeling hot, hot flashes, night sweats, heavy periods, excessive bleeding, urinary tract infections, skin rashes and acne	Weight gain, lethargy, fluid retention, laziness, depression, lacking motivation, slow digestion

AHARA	Cereals: jai (oats), shali and shastika rice, godhuma (wheat), mung in less quantity (green gram), urad (black gram) Vegetables: shatavari (asparagus), garjanaka (carrots), trapusa (ripen cucumber), rasona (garlic), palandu (onion), moolaka (radish), kushmandi (pumpkin), ajmoda (celery), vrantaka (eggplant), patola (pointed gourd), nenua (sponge gourd), changeri (Indian sorrel)	Cereals: Yava (barley), jai (Oats), shali and shastika (rice), godhuma (wheat), all legumes except masha (black gram), kulattha (horse gram) Vegetables: madhur (sweet) & tikta (bitter) vegetables, shatavari (asparagus), trapusa (cucumber), ajmoda (celery),leafy greens, chatraka (mushrooms), okra, kalaya (peas), patola (pointed gourd), makoya (solamun nigrum), kakdi (snake cucumber), karela (bitter guard)	Cereals: Yava (barley), corn, china (Indian millet), shali and shastika rice , All legumes especially mung, lentils & beans Vegetables: All katu (pungent) & tikta (bitter) vegetables, shatavari (asparagus), ajmoda (celery), vartaka (eggplant), rasona (garlic), chaulai (amaranthus), changeri (Indian sorrel), shalmali flowers (Salmalia malabarica) palandu (onions), kushmandi (pumpkin), alabu (white gourd), karela (bitter gourd), patola (pointed gourd)
VIHARA	Abhayana with Tila taila, Mahanaryana taila Shiro pichu with Brahmi taila, ksheerabala taila	Go to bed at 10 pm Abhyang with Majisthadi taili, tila taila Shiro dhara	Get up early (6am), Mustard oil recommended for massage.
SHAMANA AUSHADHI	AshwagandhaRasayana Lasuna ksheerapaka, Shatavarichurna, Brahmi vati	Kumari swarasa, Chanadanasaava Usirasava, panchatiktakaghita,	Triphala churna, Shilajatu rasayana, vidanga Rasayana, punaravamandura, Trikatu,

Lifestyle protocol in vridha Avastha

Role of Panchakarma Chikitsa

Panchakarma (“five therapeutic actions”) chikitsa (“treatment”) are physical therapies that thoroughly cleanse and purify the physical and mental impurities from the body and mind. As there is natural vitiation of vata dosha with advancing age it is important to avoid the provocative causes of Vata dosha as a preventive measure, snehan Karma (oleation therapy) is recommended treatment for Vata- vitiation; Basti therapy is considered as prime among all the therapeutic measures, especially for management of Vata disorders. Matra Basti with various medicated oils such as Sukumar Ghrita, Dhanvantari Tail etc. can be used as per indications.

For symptoms occurring due to transition from madhayamavastha (pitta dominant phase) to vraddhavadhastha (vata dominant), use of Ghrita can be recommended. Ghrita is Vata-pitta shamaka (pacifying), Balya (strengthening), Agnivardhaka (promoting digestion), Madhura, Saumya (agreeable), Sheeta-Virya (cooling in effect), Shulahara (pain relieving), JwarAhara (antipyretic), Vrishya (aphrodisiac) and Vayasthapaka (age stabilizer)⁵. Thus, it not only pacifies Vata and Pitta but also improves the general condition of the body and acts as a rejuvenator of the body. Ghrita is Yogavahi⁶. Virechana is best for agni Deepti and elimination of vitiated pitta thereby correcting rasa and Rakta Dhatu

Rasayan Chikitsa- (rejuvenation therapy), a unique concept of Ayurveda, it affords a comprehensive physiologic and metabolic restoration for aging. Rasayana chikitsa is mainly used for maintaining the health of healthy individuals although it can be used for diseased also. The drugs which act at the level of rasa dhatu such as Draksha (*Vitis vinifera* Linn.), milk, Shatavari (*Asparagus racemosus*), Salparni (*Desmodium gangeticum*) etc. they act by enriching the nutritional value of the circulating plasma help in correcting the Dhatukshaya. The drugs such as Pippali (*Piper Longum* Linn.), Haritaki (*Terminalia chebula*), Citraka (*Plumbago zeylanica*), etc. This group of drugs improves the digestion, absorption and metabolism, and has some anabolic effect. Acting at the level of Srotamsi (the microcirculatory channels carrying nutrition to the tissues) are the drugs such as Guggulu (*Commiphora mukul*), Pippali (*Piper longum* Linn.), Rasana (*Allium cepa*), etc. These Rasayana act at the cellular level helps in cellular metabolism leading to improved tissue health and their quality⁷

CONCLUSION

Health problems at menopause represent imbalances in the body that were already in growing in the body and diet plays a key role in balancing hormones during premenopause and in menopause. The lifestyle modification along with Panchakarma and Rasayana chikitsa not only reduce the menopausal symptoms but can also effectively address the aging and allied problems. It can improve the quality of life as well as life expectancy of aging female population. Although menopausal syndrome is not mentioned as a disease in Ayurvedic literature but today's growing population of suffering female prompts us to look for effective and safer alternatives as it is the responsibility of the physician to identify the nature, sign and symptoms of presenting ailment and treat it accordingly.

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AN AYURVED APPROACH TO GYNAECOLOGICAL DISORDERS IN GERIATRIC WOMEN

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INTRODUCTION –

Dr. Ignatz Natcher An Austrian Physician Coined The Word Geriatrics In 1909. However, It Was In 1935 That A British Doctor Marjory Warren; Working In USA First Developed The Practical Concept Of Geriatric Rehabilitation. With Her Initiation, The Elderly Patients Were Gradually Taken Over By Teaching Hospitals. [1] Familiarity With Acute Geriatric Gynaecologic Issues Is Crucial To Providing Satisfactory Health Care For These Patients With Complaints Relating To Incontinence, Pelvic Floor Dysfunction, And Other Gynaecologic Conditions Like Malignancy, Urinary Tract Infection, Incontinence, Pelvic Organ Prolapse.

ते व्या पनो प हन्नाभ्योरधोमध्योर्ध्वसंश्रयाः ।

वयोहोरा पभुक्तानां तेऽन्तमध्या पगाः क्रमात् ॥ (अ.ह.सु. 1/7)

The Tridosha Are Present All Over The Body, But Their Presence Is Especially Seen In Particular Parts. On Division Of The Body Into Three Parts, Kapha Dosha, Between Chest, dominates The Top Part Up to Chest And Umbilicus Is Dominated By Pitta, Below Umbilicus Part Is Dominated By Vata.

GERIATRICS IN AYURVEDA

The Term ‘Geriatrics’ Gets Its Derivation From Greek Words, ‘Geri’ Meaning Old Age And ‘Latrics’ Means Care And Is Concerned With The Care And Health Of Elderly.

It Resembles To The Sanskrit Word 'Geeryadi' Meaning Degenerated. In Ayurveda, Acharya Charaka ^[2] Considered Old Age Above 60 Years Of Age While Acharya Sushruta Considers It Above 70 Years Of Age ^[3]. Here Occurs Continuous Kshinta (Decrease) In Dhatus, Indriya (Senses), Bala–Virya (Strength And Potential), Utsaah

(Excitement In Life) Etc And Also That Elderly Get Prone To Various Diseases ^[4]. However, He Also Accepts That Beginning Of This Kshinta Occurs After The Age Of 40 Years Only According To Acharya Sharangdhar, Loss Of Medha Also Begins After Fourth Decade Of Life. Vata Dosha Is The Most Important Factor In The Pathophysiology Of Ageing And Related Disorders Because Of Its Natural Predominance At That Stage Of Life ^[5].

SOME GYNAECOLOGICAL DISORDERS ARE AS FOLLOW –

STHANAVICYUTA, VIVRTA AND SAMVRITA YONIROGAS

पग्धस्विन्नां तथा योपनं स्वथयतां तथायेत्पुनः ।

पना नामयेस्विमां संवृतां वधवयेत् पुनः ।

प्रवेशयेपनःसृतां च पववृतां ररवतवये ।

योपनुः यथानावृत्ता पह शल्यभूता मता स्विनाः ॥

(च० सं० पच० ३०).

The Displaced (Prolapsed) Yoni Should Be Replaced After Giving Oleation And Sudation. The Jihma Yoni (Crooked, Tortuous Or Bent) Should Be Straightened By Bending It Downwards Or Upwards, Samvrtayoni (Due To Constriction, The Orifice Becoming Either Pinhole Or Very Narrow) Should Be Dilated With The Help Of Fingers, The Yoni Protuberating Outside Should Be Inserted By Gently Pressing With Hand. Balataila, Mushakataila, Laghuphalaghrita (Orally And Tampon), Shatapaki Shirishtaila Sukumartaila, Vataharataila, Suramanda Pichu Are Effective In Pain, Roughness, Stiffness, Displacement, And Anaesthesia Of Vagina.

PRASRAMSINI YONIVYAPAT (UTERINE PROLAPSE)

Uterine Prolapse Is One Among Such Disease Which Is Mostly A Resultant Of Difficult Labour And Improper Postnatal Care. The Phalini Yoni Vyapad, Andini Yoni Vyapad, Prasramsini Yoni Vyapad, And Mahayoni All These Explain The Prolapsed Condition According To The Stage And Part Prolapsed Out. Initial Degrees Of Uterine Prolapse Can Be Corelated To Prasramsini Yoni Narrated In Ayurvedic Classics. Our Acharyas Were Well Aware Of Pelvic Organ Prolapse During Those Days Only, And They Have Also Told The Conservative Line Of Management For The Same. Here

Treatment Can Be Obtained With Satavari Ksheerapaka And Chandraprabha Vati Sevana And Bala Taila Abyanga Ksheera Sweda Of Yonipradesha Followed By Bala Taila / Mushaka Taila Yoni Pichudharana. Veshwar Pinda Should Be Kept In Vagina; All These Gives Strength To Uterus In 1st And 2nd Degree Uterine Prolapse.

SHUSHKA YONI

शुष्का नष्टातववा कपथता । (शा.सं.वव. 7/78 आढमल्ल पका)

Post Menopause, Which Is Another Cause Of Amenorrhoea And Oestrogen Deficiency Ultimately Leading To Vaginal Dryness Where Treatment Should Be

तैलमुत्तरबस्विनेत्यि जीवनीयपसद्धं तैलं योज्यम् । (च.पच.30/102)

Uttarbasti Or Tampon With Taila Made Up Of Jivaniya Group Of Drugs.

RAJONIVRITTI (MENOPAUSE)

तद्वर्षे द्वाशात् काले वतवमानमसृक नः । जराक्वशरीरां यापत न्चाशतः क्षयम् ॥

(सु.शा.३/११)

Sushruta Mentioned 50years As Age Of Rajonivrutti. When Body Is Fully In Grip Of Senility. Arundatta States Age Mentioned Above Is A Probable Age And Not Fixed One It May Have Some Variations In This Regard. Treatment protocol is as follow;

1.Shodhana Chikitsa (Bio-Cleansing Therapies) / Other Therapeutic Procedures Followed By Shamana Chikitsa (Palliative Therapy) Should Be Advocated.

a) **Snehana:** Gentle Massage With Medicated Oils Such As:

1. Mahanarayana Taila
2. Ksheerabala Taila
3. Mahamasha Taila
4. Bala Taila

b) Internal Snehana (Internal Oleation) With Medicated Ghrita

Sukumara Ghrta, Or Mahtriphala Ghrita,Or Dadimadi Ghrita Etc 50 Ml With 2 – 3 Gm Saindhava Lavana Daily For 3-7 Days Before Panchakarma

- c) Shirodhara With Yashtimadhu Kashaya & Milk 45 Minutes Daily For 15 Days
- d) Takra Dhara 45 Minutes Daily For 15 Days
- e) Matra Vasti With Dhanvantara Taila / Sukumara Ghrta 50 Ml Daily For 15 Days

2. Drug Therapy [TABLE NO. 1 – DRUG THERAPY]

Name	Dose	Vehicle	Duration
Shatavari	1-3gm	Water / Milk	15 Days
Amalaki	1-3gm	Water / Milk	15 Days
Madhuyashti	1-3gm	Water / Milk	15 Days
Ashvagandha	3gm	Milk	15 Days
For Fragile Bones			
Asthishrinkhala	1 – 3 Gm	Water	15 Days
Kukkutand Tvak	250 Mg	Milk / Water	15 Days
For Excessive Bleeding			
Pushyanuga Churna	1-3 Gm	Rice Water	15 Days
Chandraprabha Vati	1.5 Gm	Water	15 Days
Lodhrasava	10-20 Ml	Water	15 Days
Ashok Rishta	10-20 Ml	Water	15 Days
Sukumara Ghrita	10-15ml	Warm Milk/Warm	15 Days
Dadimadi Ghrita	20-30 Ml	Warm Water	3 - 7 Days
Saptasaram Kashayam	10-15 Ml	WW Empty Stomach	7-15days
For Hot Flushes / Night Sweats/ Burning Sensation			
Pravala Pishti	250- 500mg	Water / Honey / Milk	15 Days
Mukta Pishti	250-500 Mg	Water / Honey / Milk	15 Days
Chandanasava	15-30 Ml	Water	15 Days
Usheerasava	15-30 Ml	Water	15 Days
Kamadudha Rasa	125- 250mg	Water / Honey / Milk	15 Days
Dhanvantara Taila	60 Ml	Matra Basti	15 Days
For Debility/ Anaemia			
Ashvagandharishta	15-30 Ml	Water	15 Days
Shatavari Guda	6 Gm	Milk	15 Days
Lohasava	15-30 Ml	Water	15 Days
LaghuMalini Vasant Rasa	250mg	Honey / Milk	7 Days
For Insomnial Mood Swings			
Manasamitravataka	125 Mg	Milk	15 Days
Brahmi Vati	125-250 Mg	Milk	15 Days
Brahma Rasayana	10gm TDS	Milk	15 Days

All Above Oral Medicines May Be Used Initially 2 Times In A Day After Meal For 15 Days Followed By Condition Of Patient And Physician's Direction

OSTEOPOROSIS –

Osteoporosis Is A Bone Disease Characterized By A Decrease In Bone Mass And Micro–Architectural Alterations. This Would Lead To A Bone With Less Tensile Strength And Significantly More Susceptibility To Fracture With Less Force. In Ayurveda It Can Be Correlated With The Asthi Kshaya On The Basis Of Pathophysiology And Symptoms. Where Vata Dosha Vitiating Leads To Slow Degeneration Of Bones. For Management Dhatubrinhana Chikitsa, Shaman Chikitsa And Rasayana Is Given. Ajajibhasma, Shatavari Kalpa, Praval Pishti, Ashwagandharishta, Dashamularishta Are Used In Osteoporosis.

RASAYANA THERAPY –

रसायनं तु तत् ज्ञेयम् यिराव्याधीनाशनम् ॥ (शारंगधर)

वर्मायुः स्मृपत मेधामारोग्यं तरु वयः ।

प्रभा व वरौयव हेस्वियबलं रम् ॥

वास्विस्वदि प्रपत कास्वन्तव लभते ना ।

लाभोयो पद्म शानां रसा पनां रसायनम् ॥ (च.पच.1/7)

Rasayana (Rasa = Nutrition + Ayana = Circulation And Promotion) Especially Deals With The Science Of Nutrition, Geriatric Care And Rejuvenation. The Strength Of Ayurveda In The Context Of Geriatric Care Is Rasayana Therapy. Rasayana Stands As An Answer In Preventing Premature Ageing And To Solve The Problems Due To Ageing; It Also Ensures Healthful Longevity Including Mental Health And Resistance Against Various Geriatric Dis-Ease Conditions.

[TABLE NO. 2 – RASAYANA DRUGS]

Age Yrs	Bio-Values	Suitable Rasayana ^[7]
1-10	Balya	Vacha, Kasmari, Svarna
11-20	Vridhhi	Kasmari, Bala, Ashwagandha
21-30	Chavi	Amalaki, Lauha Rasayana
31-40	Medha	Shankhapuspi, Yasthimadhu, Ashwagandha, Guduchi
41-50	Tvaka	Bhringaraja, Somaraji, Priyala, Haridra
51-60	Drishti	Triphala Ghrita, Saptamrta Lauha, Kataka
61-70	Shukra	Kapikacchu, Ashwagandha, Krishna Musali, Milk, Ghrita.

ROLE OF MEDHYA RASAYANA –

The Ayurvedic Classics And Yogic Texts De-Scribe A Set Of Rejuvenative Measures To Impart Biological Sustenance Of The Bodily Tis-Sues, i.e. The Dhatus. Medhya Rasayans Are New Class Of Neuronutrients With Cognition And Memory Ashwagandha Is An Established Antistress And Adoptogen Besides Its Efficacy In Augmenting Neuro-Regeneration. Enhancing, Anti-Aging, And Neuro Regenerative Effect [8]. Brahmi Is Now Used As A Memory Enhancer And Mandukaparni Is Used In The Care Of Mental Retardation.

ROLE OF PANCHAKARMA IN GERIATRIC CARE

In Ayurveda Panchkarma Have Its Own Five Bio-Purificatory Processes With Rejuvenates Activity. The Schedule In The Elderly Should Consist Of Medicated Massage, Sudation, Kayaseka, Pindasweda, Shirodhara And Brimhana Basti Suitably Planned For Each Individual. Such A Package Could Appropriately Considered 'Geriatric Panchakarma.

ROLE OF YOGA IN GERIATRIC

Among This Group Is Chronic Inflammatory And Degenerative Conditions Such As Arthritis, Diabetes Osteoporosis, Alzheimer's Disease, Depression, Psychiatric Disorders, Parkinson's Disease And Age Related Urinary Problems Following Forms Of Yogic Exercises And Pranayama Were Practices Daily For 45-60 Mins

- 1) Omkar
- 2) Sukshama Yoga
- 3) Suryanamaskara
- 4) Sukhasana
- 5) Marjariasana
- 6) ½ Masthendrasana
- 7) Salabhasana
- 8) Pawanmuktasan
- 9) Shavasana 10)Anulomvilom 11)Kapalbhati 12)Bhramari

CONCLUSION –

Increased Life Expectancy, Rapid Urbanization, And Lifestyle Changes Have Led To An Emergence Of Varied Problems For The Elderly In India. Therefore, Geriatric Health Care Must Be Made A Part Of The Primary Health Care Services. Geriatric Woman Suffer From Any Diseases Like Menopause, Post-Menopausal Bleeding, Uterine Prolapse, Osteoporosis Etc. In Ayurvedic Texts And A Separate Medical Discipline Called Rasayana Tantra Was Developed Which Described A Variety Of Methods And

Measures To Promote Healthy Longevity. Undoubtedly, It Is The Strength Of Ayurveda In The Context Of Geriatric Care. It Is The Demand Of The Hour To Develop An Effective Holistic Protocol For Geriatric Care By Combining Rasayana, Panchkarma, Dietetics, Ayurvedic Medicines And Lifestyle And Yoga. The Ayurveda- Based Package Of Geriatric Care May Consist Of Use Of Dashvidha Pariksha, Sadvritta, Swasthvritta, Satvika Diet, Yoga, Meditation, Geriatric Panchkarma And Rasayana Therapy.

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IDEAL LIFESTYLE FOR GERIATRIC WOMEN

Ideal Lifestyle for Geriatric Women According to Ayurveda - A Review

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ABSTRACT-

Geriatrics is nothing but medical care for older adults; that is both male and female older adults. Grossly, geriatric age group starts from at the age of 60 years. Geriatric woman suffers more than geriatric man. Because just before geriatrics, woman got menopause, due to which there is hormonal disturbance along with anatomical changes are seen in woman. In Ayurveda geriatric age may be correlated with Jara-avastha or Vruddha-avastha. Age group more than 50 years old consider as jara or vruddha. In jaravastha there is dhatukshaya in female body which leads to vitiation of Vata dosha. In today's medical science there are very few and limited treatment options are available for geriatric age group problem in women, but Ayurveda science having very effective and useful planes to deal geriatric women problems. Ayurveda having its own holistic approach for treating geriatric women problems. Rasayan chikitsa after proper Panchakarma treatment along with lifestyle modification related to diet and day to day activities plays a key role in geriatric women. Even though without any medicine, only lifestyle modifications also found useful in it. Diet fulfils daily requirements of the body and nourishes bodily dhatus. Which ultimately results into saptadhatuposhana and prevention of vitiation of vata dosha. While daily activities such as Abhyanga (Body massage), Vyayama (Exercise), Snana (Bath), Sadvritta palana (To follow proper rules and regulations) all these are mentioned under the heading of Dinacharya by ancient acharyas; plays an important role in improvement of geriatric condition of women. In this view, it is important to focus on lifestyle modification by Ayurveda in geriatric women; which gives better relief to geriatric women from geriatric problems as well as from menopausal problems.

KEY WORDS- Geriatrics, Jara- Vruddha avastha, Diet, Dinacharya, Lifestyle.

INTRODUCTION-

Geriatrics refers to medical care of old or elderly peoples. Our country facing demographic transition with an ageing population. Due to reduced mortality, reduced fertility and increase life expectancy this transition consist of increase number of old age peoples. People above age of 60 years are included in elderly. ^[1] Geriatric age group peoples suffer from large number of medical, social, psychological and economic problems, creating huge burden on country. Women with geriatrics problems are more than half of geriatric population. So it is very much important to focus on women geriatric problems. The basic aim of Ayurveda is, “Swasthasya swasthya rakshanam aturasya vikara prashamanam.” ^[2] That literally means that ayurvedic science believes not only in curing the disease but also in prevention of disease. And for disease prevention Ayurveda having its own norms, which comes under Ahara (Diet), Vihara (activities), Achara Rasayana (Rules or regulations e.g. Sadvritta Palana). All these norms collectively gives the way of ideal lifestyle, in order to prevent and cure different geriatric problems in women. Let’s discuss these pillars of healthy and ideal lifestyle in geriatric women.

Ideal Ahara (Diet)-

Food or diet which are advisable to consume on daily basis, enlisted by acharya Charaka under the heading of Nitya Sevaniya Dravyas[3] are as follows-

- 1] Shashtik Shali- A kind of rice maturing in 60 days
- 2] Godhuma- Wheat- Rich in Carbohydrate
- 3] Yava- Hordeum Vulgare Linn.
- 4] Mudga- Phaseolus mungo Linn.- Rich in iron and pottassium
- 5] Saindhava- Rock salt
- 6] Amalaki- Embelia officinalis- Vayasthaapan- Rich in Vitamin C
- 7] Antariksha jala- Rain water
- 8] Ghrita- Ghee- Rich in Vitamin A, D, E, K.
- 9] Go-Dugdha- Cow milk- Rich in calcium- Prevents osteoporosis in postmenopausal women
- 10] Madhu- Honey- source of energy in old age
- 11] Jangala Mamsa- Meat of animals dwelling in acrid climate

All above diet are rich in carbohydrate, proteins, vitamins, minerals, amino acids and other body nutrients. In geriatric women there is deficiency of such an essential nutrients. This deficiency is fulfilled by above diet. Also according to Ayurveda in Jara avastha there is Saptdhakukshaya and Vataprakopa in geriatric women. Above diet is saptadhatuvardhaka and tridosahara in nature which is useful in jara or vrudhha avastha.

Ideal Vihara (Daily Activities)-^[4]

Daily activities are mentioned in Dinacharya and Ritucharya by different ancient acharyas, geriatric women should follow these ideal guidelines as follows-

- 1] Wake up early in the morning on Brhama Muhurta (5 am) - This period is of Vata dosha and in jaraavstha there is vitiation of vata, hence by early wake up prevents vata vitiation.
- 2] Shaucha Vidhi (Defecation) - After defecation mala are excreted out of human body, as a result there is increase in life (Ayuvruddhi)
- 3] Anjana, Navana, Gandusha, Dhoom, Tambool- All these activities are Doshashamaka, Vyadhihara and useful in old age.
- 4] Abhyanga (Body massage with medicated oil) - By abhyanga vata dosha get normalized and hence this activity useful in jara avastha.
- 5] Exercise and Yoga- Proper exercise and yogic posture gives strength to abdominal muscles also improves blood circulation of geriatric women and prevents many geriatric and postmenopausal diseases.
- 6] Regular bath- It is vrushya and ayushyakara. Prevents many diseases which are caused by unhygienic conditions in old age women.
- 7] Avoid Smoking, Alcohol- All bad habits should be avoided by geriatric women in order to prevent hypertension and other cardiovascular diseases.
- 8] Proper and adequate sleep should be taken
- 9] Avoid Divaswap and Ratraujagaranam – Diwaswapa causes vitiation of Kapha dosha while ratrau jagaranam causes vitiation of Vata dosha. So avoid these things.
- 10] Clean genital organs regularly to avoid infections.
- 11] High fiber diet to avoid constipation and other bowel disturbances.
- 12] Drink sufficient amount of water.

Achara Rasayana (Behavioral Pattern)-

During old age or postmenopausal age women suffering from many psychological disorders such as anxiety, depression, psychosis, Alzheimer's disease etc. To avoid such diseases every geriatric women should follow following achara rasayana-

- 1] Avoid Dashvidh papa karma ^[4]- Hinsa, Steya, Anyathakama, Paishunya, Parush, Anrut, Sambhinalapa, Vyapada, Abhidhya, Drugviparyaya are 10 papa karma; everyone should not perform these activities. Avoidance of these helps to prevent psychological as well as physical diseases.
- 2] Give respect to beloved teachers, seniors, old doctors, king, and holy things [4]

3] Daivavyapashraya

- Mangala, Bali, Homa-Havana, Swastivachana
- By doing such a procedures geriatric woman gets mental stability and this will help to keep away from psychiatric diseases.

4] Satvavajaya- ^[5]

- Satvavajaya means to have control over the mind and thus abstaining from things that are not good for health

CONCLUSION-

Geriatric period in women is above 60 years. It is the postmenopausal period and hence women face different physiological as well as psychological problems. To deal with these problems lifestyle told by ancient ayurvedic acharyas; is very much effective and useful. Ahara, Vihara and Achara Rasayana these are important factors of lifestyle told by Ayurveda. When geriatric woman follows this ideal lifestyle then she will remain disease free. So ideal lifestyle is very much important.

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“Management of Muhurmuhu Garbha Srava (Recurrent abortion) in Elderly Gravida with Swarna Malini Vasanta Rasa- Observational Clinical study”

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I. INTRODUCTION

Achievement of a progeny is considered to be sacred and equivalent for performing a Yagna. Progeny is regarded as the abode of Purusharthas. But there are various infertility factors which render the couple childless. According to the Indian Society of Assisted Reproduction, infertility currently affects about 10 to 14 percent of the Indian population, with higher rates in urban areas where one out of six couples is impacted. Nearly 27.5 million couples actively trying to conceive suffer from infertility in India. Recurrent pregnancy loss (RPL) Recurrent Abortion (RA), also referred to as recurrent miscarriage or habitual abortion, is defined as 2 or more consecutive pregnancy losses prior to 20 weeks from the last menstrual period. Based on the incidence of sporadic pregnancy loss, the incidence of recurrent pregnancy loss should be approximately 1 in 300 pregnancies. However, epidemiologic studies have revealed that 1% to 2% of women experience recurrent pregnancy loss and more in Elderly women. 4 ‘Garbhasrava’ is one of the types of Shat prakara Vandhyatva according to Harita.

Acharya Bhava Mishra describes Muhurmuhu Garbha srava which can be correlated to Recurrent Abortion / Habitual Abortion.

The ancient text Rasa Yoga Sagara carries reference pertaining to the use of Swarna Malini Vasanta in disorder afflicting ‘Garbhini’.

II. AIMS AND OBJECTIVES

AIM

To Elicit the mode of Action of Svarna Malini Vasanta

To assess the role of Swarna Malini Vasanta in the management and maintenance of pregnancy in patients with history of Recurrent Abortion.

III. MATERIALS AND METHODS

- 20 patients with h/o 2 or more abortions in their 1st trimester were taken for the study.

Inclusion criteria:

- Pregnant patients beyond the age of 35 years
- H/o 2 or more abortions in 1st trimester of pregnancy
- Patients with h/o abortions treated with standard protocol of treatment of abortion

Exclusion criteria:

- H/o Consanguineous marriage
- Rh incompatibility
- Patients with systemic illness - DM, HTn, TB, thyroid dysfunction
- Seminal abnormalities in male partner
- Congenital uterine anomalies - Biconuate , septate uterus
- Cervical incompetence
- Genetic factors causing recurrent abortions

History was recorded and clinical examinations were performed thoroughly according to the study protocol.

• Investigations:

Hb%

Blood group and Rh Factor

Blood glucose levels

USG

TC, DC, ESR

TORCH Test

Hormonal assay

Immunological tests when required

Intervention:

- The selected patients were advised to take Swarna Malini Vasanta, one tablet, with warm water twice daily- early in the morning , empty stomach and at night after food; from time of conception till full term.
- Pathya - Apathya

Follow up study- Regular ANC

• Assessment Criteria: Overall assessment :

Age in years	Patients
35-36	7
37-38	9
39-40	3
41-42	1

Occupation –

Occupation	No of patients
House wives	12
Employees	08

Dietary habits -

Diet	Patients
Vegetarian	9
Mixed	11

History of live births-

Live Births	No of patients
Present	06
Absent	04

Family history of abortions -

FHA	Patients
Present	07
Absent	13

Abortion at same gestational age –

ASGA	No of patients
Present	14
Absent	06

History of number of abortions -

No. of Abortions	Patients
2	09
3	05
4	04
5	01
8	01

Gestational age of abortions -

Weeks	No. of abortions
6	05
7	10

8	22
9	10
10	15

Prakruthi-

Prakruthi	No. of patients
Vata	07
Pitta	09
Kapha	04

Patients having history of various clinical presentations on enrollment to study

Diagnosis	No. of patients
TORCH infection	03
Immune complex	02
PCOD	06
Idiopathic cause	09

V.RESULTS

•Table 1:Overall Assessment

Results	No. of Patients	% Patients
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Major improvement (Full term delivery)	12	60%
Moderate improvement (Pre term delivery)	4	20%
Minor improvement (Abortion beyond threat period)	2	10%
No improvement (Abortion at threat period)	2	10%

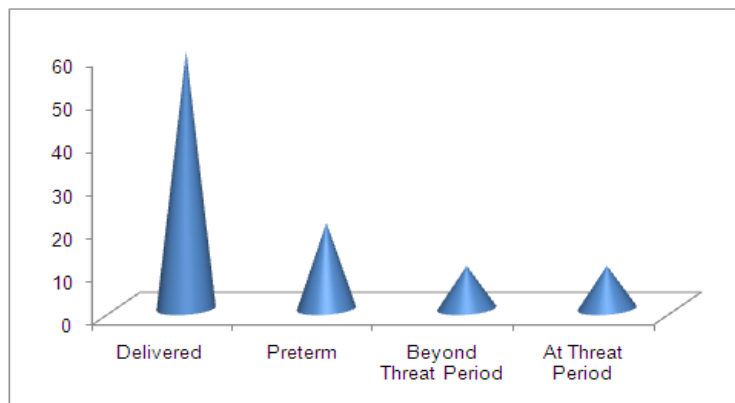
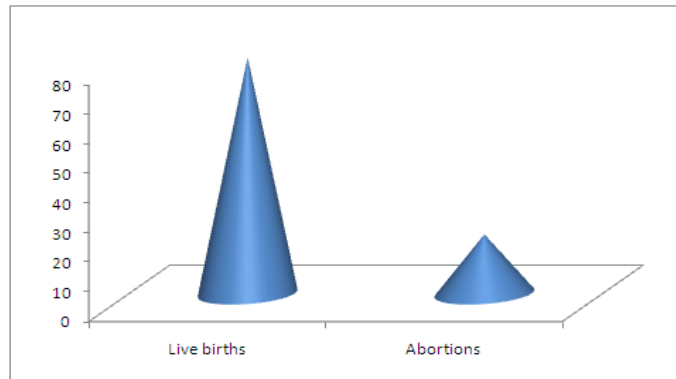


Table 3: Success rate recorded following treatment with SMV

Results	% patients
% of live births	80%
% of abortions	20%



VI. DISCUSSION

• On disease

• Muhurmuhu Garbhasrava mentioned by Bhava Prakasha, can be directly correlated with the recurrent Abortion. Yoni Vyapat causing Muhurmuhu Garbhasrava are Asrija and Putaghni (Pittala Yoni Vyapat). Jataharini causing Muhurmuhu Garbhasravava are, Andaghni, Durdhara, Kaalaratri and Mohini. In the Present Study Pittala Yoni Vyapats leading to Muhurmuhu Garbha Srava is considered.

• On the drug .

• Vasanta Kalpa formulation renowned for rejuvenation effect comprises 8 formulations of Vasanta Malati Rasa. The ashtama Yoga (8th formulation) of “Vasanta Malati Rasa” is termed as “Swarna Malini Vasanta” acc to Rasa Yoga sagara

“Vasanta Malati Rasa” – 8 – “Swarna Malini Vasanta”

- Rasa Yoga Sagara. (2108- 2114).

- ❖ The Phala Shruti says, “.....balagrahe GARBHAYUTASU SHASTAH...” - R.Y.S. 2112
- ❖ meaning indicated in ailments of Garbhini, here refering to - Shoola in Garbhashaya , kati, vankshana , basti, Parshva , shroni and yoni mukha , Rakta darshana / Pushpa darshana , Asrikdara , Anaha ,Mutrasangha , which are the lakshanas of Garbha srava.

•On Observation :

- 14 patients having abortion of same gestational age – indicates that causes were identical in all abortions

- Patients with pitta prakruti showed high incidence of miscarriage , which goes according to fundamentals ascribed in treatment of garbhasrava

High incidence of abortion in 8th week points to the fact that , Critical period when various organs are layed out in fetus, Transfer of functions to placenta

- Maximum of 9 patients with unexplained reasons - 40 – 60% of abortions are unexplained

• Main action of Swarna Malini Vasanta

Ingredients of Swarna Malini Vasanta classified according to the Karmukata:

Pitahara Dravyas	Rasayana Dravyas	Dipana pachana	Bhutaghna Dravyas	Manasadoshahara Dravyas
Swarna Pravala Gorochana Abhraka Mukta Navanita	Swarna Darada Pippali Kasturi Gorochana	Swarna Maricha Pippali Naga Vanga	Swarna Pravala Mukta	Swarna Abhraka Gorochana Nimbu
* All drugs possess Shita Virya	*Also are Visha Hara	*Tikshna and Lekhana	*Graha Dosha	*Hrudya Dravyas

• Probable mode of action of Drug

Drug	Pathology	Disease
Pittahara, Shita virya Dravyas	Sub clinical infections	TORCH / Bacterial infections
Rasayana , Vishahara Dravyas	Immune Complex	APA ACA
Dipana - pachana	Endocrine malfunction	LPD PCOS
Bhutaghna , Graha doshahara	Idiopathic	Causes
Manasadoshahara, Hrudya*	Psychological	Causes

* **“Soumanasyam Garbhadharananam”** – Ca. Sam

- Action of colloidal gold
- Colloidal gold, nanoparticles in specific, is a proved antioxidant and a potent immunomodulator.
- Stabilizes emotions and helps to combat mental stress
- It has a balancing and a harmonising effect on all levels of body, mind and spirit.
- **DISCUSSION On Results**
- **On Results**
 - Encouraging results were seen in cases of Immune complex , infection and idiopathic as causes of abortions leading to BOH , than hormonal imbalance leading to abortion.
 - The approach towards the treatment of the hormonal imbalance is probably by Dipana -pachana , Dhatvagni Vardhaka Dravyas rather than pittahara dravyas.

VII. CONCLUSION

- Svarna Malini Vasanta proved to be effective in abortions of 1st trimester essentially due to immune complex , infections and idiopathic causes leading to BOH
- The study should be conducted on a large sample size to confirm the effect of the drug.

Management of Menopause and associated aging problems through Ayurveda – Finding a safe and effective Treatment

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ABSTRACT: As the age advances function of most organs and systems tends to decline, and there is a wide individual variability and need precise assessment. The climacteric is an important period in women's life where loss of ovarian follicular activity is seen which is characterized biologically by decline in fertility, endocrinologically by alteration of gonadotropins and steroid hormone in body and clinically by alteration in menstrual cycle, etc entering into menopause she experiences variety of psychosomatic symptoms such as Depression, Forgetfulness Irritability, Insomnia, Anxiety, Hot flushes, Night sweats, urinary symptoms, Joint pains, skin & hair problems. Since many years, Hormonal Replacement Therapy (HRT) by using oestrogen alone or in combination with progestins has been the therapy of choice for the relief of menopausal symptoms. Even though they provide a temporary relief in symptoms they have many limitations, risks of venous thromboembolic disease, hampered lipid profile and also risk of breast and endometrial cancer. Hence, there is need for safe alternatives. In Ayurvedic classics, menopause can be studied under the concepts of Jaravaydhi, Rajonivrutti, lakshanas under dhatukshayja and vatavruddhi. Main Treatment principle will be Rasayana chikitsa and vatashamana, it can be achieved by using various ayurvedic herbal and mineral preparations, panchkarma and stahnika chikitsa. Which can be judiciously implemented to alleviate menopausal as well as associated aging problems.

Key words – Rajonivrutti, Ayurveda, Menopause, Rasayana, Hormone.

INTRODUCTION: “Menopause is Permanent cessation of Menstruation at the end of reproductive life of a woman due to loss of Ovarian follicular activity”. Its Natural Process associated with unavoidable manifestations of aging process. Management of menopause involves management of age-related changes, its ill effects and symptoms occurring due to failing follicular activity. Women experiences variety of psychosomatic symptoms such as Depression, Forgetfulness Irritability, Insomnia, Loss of concentration,

Anxiety, Hot flushes, Night sweats, urinary symptoms, Joint pains, skin & hair problems. In modern science, Hormone Replacement Therapy (HRT) is the only alternative for this condition by which one can get some results in combating the disease, but it has a wider range complication like vaginal bleeding, risk of breast cancer, endometrial cancer, gall bladder diseases, venous thromboembolic disease, etc and this therapy is not much effective in the psychological manifestations where use of Sedative, Hypnotics and Anxiolytic drugs done, which may lead to side effects like drowsiness, impaired motor functions, allergic reactions, drug dependence etc. So, there is need to find effective and safe alternatives. In Ayurvedic classics, menopause can be studied under the concepts of Jaravaydhi, Rajonivrutti, its lakshanas under dhatukshayja and vatavruddhi. Main Treatment principle will be Rasayana chikitsa and vatashamana, it can be achieved by using various ayurvedic herbal and mineral preparations, panchkarma and stahnika chikitsa. Which can be judiciously implemented to alleviate menopausal as well as associated aging problems.

MATERIALS AND METHODS: Ayurvedic Samhitas, Ayurvedic and modern text books, websites, published articles, research works.

DISCUSSION:

Menopause: Permanent cessation of Menstruation at the end of reproductive life^[1] Age: Ranges from 45 to 55 Years. Cause: Genetically predetermined condition. Not related to number of pregnancies, race, height, weight, age of menarche etc.

Pathophysiology^[2]: Depletion of ovarian follicular activity impaired folliculogenesis
Fall in Sr. Estradiol No endometrial growth Amenorrhoea.

Menopausal Symptoms: 1. Vasomotor Symptoms – Hot flushes, profuse sweating, palpitation 2. Osteoporosis & Fractures. 3. Genitourinary – Dryness, infections, leucorrhoea. 4. Sexual dysfunction 5. CVS- Vascular endothelial diseases 6. CNS- Dementia 7. Psychological Changes - Depression, Forgetfulness, Irritability, Anxiety.

Management:^[3] -Preventive – Preventing Surgical, Radiation Menopause Counselling – Removing fear, anxiety of natural phenomenon and reassuring the patient.

-Treatment - **Hormonal (HRT)** – Principal hormone is ‘ESTROGEN’. It can be used either single (ideal in hysterectomized woman) or with Progestins (in intact uterus). In many forms like oral, implants, Gel, creams and intrauterine devices. Depending upon the cause we are using, we should use them for short period and with minimum dose. After the withdrawal, the symptoms reappear, patient may become drug dependent, and also develops the risks of breast cancer, endometrial cancer, hampered liver and gall bladder function, altered lipid profile, thromboembolic diseases. And also, not much useful in

psychological symptoms where the use of Sedative, Hypnotics and Anxiolytic drugs done, which may lead to various side effects like drowsiness, impaired motor functions, loss of memory, allergic reactions, drug dependence etc. Hence there is need for an alternative medicine which helps to manage condition and also not having any side effects. Efforts are made to find out the answer in Ayurveda.

Rajonivritti: ^[4] Not directly mentioned in Samhita, Rajonivritti occurring in Jarapakva Shareer can be comparable to the present-day studies showing the mean age of menopause. With advancing age there is gradual diminution in the qualities of Dosha, Dhatu, Mala, Agni.

Nidana – It is considered as a swabhava bala pravritta vyadhi, which occurs during jaravastha. some specific factors also can be considered as the causative factors such as _

1. Kala – Vaya avastha
2. Swabhava - Swabhava of body to degrade every moment.
2. Vayu – apana and vyana vayus are responsible for Raja utpatti, vitiation- rajonivrutti
3. Dhatukshaya - advancement of age-Dhatus deteriorates, Upadhatu artava - rajonivrutti.
4. Karma – Woman living with Mithya achara and vihara get Rajonivritti earlier.
5. Abhighata - to the artavavaha srotas, can be considered as the surgical menopause.

Lakshanas: ^[5] The Jaravastha and Rajonivrittijanya avastha, both are naturally occurring conditions, mainly represent kshayavastha. Moreover, the symptoms of Jaravastha, observed in Rajonivrittijanya avastha. This similarity found as_ Dhatu Indriya Guna, Karma Kshaya, Balakshaya, Vigyana Hani, Grahana Dharana Smarana Medha hani, Slatha Sandhyasthi, Twak Purushya, Vali.

Management: Two main components which need to be addressed as advancing age, its allied changes and menopausal symptoms.

Preventive measures – Attaining Dhatusamya in body by Observing Dincharya Ritucharya, Swasthavritta, Ahara Vidhi Visheshayatanam regular utilization of Rasayana, Vaajikarana , Achara Rasayana, all these helps to prevent Akalaj Rajonivrutti.

Curative measures – Principles of treatment are, Vata dosha hara, Rasayana chikitsa, Shodhan-Shamana aoushadhis and Ashwasana chikitsa. As there is natural vitiation of vata dosha with advancing age avoid the provocative causes of Vata dosha. Use of Snehana, Abhyanga, with vatahara balya oil, internally medicated ghrita, Basti is prime for management of Vata disorders, and is Ardhchikitsa. Yapana basti, Tikta Dravya Ghrita and Kshira basti. We can also use Shirodhara, Shiropichu, can be used. Sthanika Chikitsa–Pariseka, Yonipicu, Utterbasti can be used.

Rasayana Therapy – Rasayana, provide optimum quality of the bodily tissues which provides both mental and physical health. Long life, good memory, disease free, luster, complexion, voice, strength of body and sense, all these are obtained by Rasayana. Thus, it helps to overcome Dhatukshaya Lakshanas.

Shamana Dravyas ^[6] – Vayasthapak, Jeevaneeya Aushadha, Balya Aushadha, Medhya Dravyas, These drugs having properties of immunomodulatory, antioxidant, anti-inflammatory, antiaging, antidepressant and neuroprotective actions. We should also use Satvavajaya chikitsa i.e. counselling and reassuring the patient.

CONCLUSION: Menopause is Permanent cessation of Menstruation at the end of reproductive life of a woman, it can be compared Rajonivritti occurring in Jarapakva Shareera. Eventhough HRT is having some benefits, it cannot be used for long duration and having many side effects. By using Vata shamana, Rasayana, Vayasthapan, Panchkarma, Sthanik Chikitsa explained in Ayurveda we can treat the menopausal symptoms effectively without any or nil side effects.

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HERBS USED IN GERIATRIC WOMAN

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ABSTRACT

Geriatric problems are of much concern for medical professionals in the present-day scenario. Ayurvedic herbs are always better than allopathic medicines. these herbs are classified in classical Ayurvedic texts as rasayana .The Rasayana is a specified type of treatment that leads to an overall improvement in the formation & maintenance of the living tissues & helps in the prevention of ageing improving of resistance against diseases. Bodily strength & process of improving mental faculties ,A lot of clinical & experimental work is done to investigate these properties of Ayurveda herbs .This shows that these herbs have the properties to slow down the natural process of ageing & can successfully manage the common geriatric problems.

Keywords: Ayurvedic Herbs, Geriatric problems , Rasayana

INTRODUCTION :

Ageing is a natural process . old age should be regarded as a normal , inevitable biological Phenomenon . This process can not be reversed . We can only prevent and delay this process. The study of the physical and psychological changes Which are incidental to old age is called gerontology . Discoveries in medical science and important social condition during the past few decades have increased the life span of man. Many people in the developed countries are living up to the age of 70 years and over. In India ,3.8% of the people are over 65 years of age .The age structure of population in the developed countries has so evolved that the number of old people is continually on the increase. These trends are appearing in all countries where medical and social services are well developed and the standard of living is high .Normal metabolic activities alter in old age; therefore ,response of drugs to various body system also gets altered .More toxic and adverse effect of allopathic medicines is reported in old age Ayurvedic herbs are more safe and effective in old age as these are natural to the human body. Ayurvedic

herbs also have the property to slow down the natural process of ageing . these herbs are much useful in the management of common problems of old age.

COMMON PROBLEMS IN OLD AGE :

- | | |
|------------------------------------|------------------------|
| 1- Senile Cataract | 7- High blood pressure |
| 2- Nerve deafness | 8- chronic bronchitis |
| 3- Bony changes affecting mobility | 9- asthma |
| 4- Failure of special senses | 10- cancer |
| 5- Changes in mental outlook | |
| 6- atherosclerosis | |

GERIATRIC IN AYURVEDA

In Ayurveda there is a concept of jaraawstha (ageing) , the last phase of the life span is very commonly known as Vardakas. . According to Ayurveda, ageing (Jara) is a natural phenomenon like that of hunger, thirst, sleep and death [1]. Sushruta has grouped them under the heading of Swabhava Pravritta Vyadhies. Acharya Dalhana has commented over this concept that these diseases occur due to the power of nature while Acharya Chakrapani has commented that nature of a particular individual depends upon the invisible factor's heredity carries out in that particular race in which he or she is born. It is classified as Kalaja Jara and Akalaja Jara. Akalaja Jara is a process in which the ageing process starts before the natural time of onset and the manifestation of the symptoms s is severe. In Ayurveda, treatment and prevention of Akalaja Jara and Kalaj Jara are clearly mentioned in the chapter named Rasayana Adhyayan Prankamiyama Rasayanpadam. The branch of Ayurveda called Rasayanatantra deals with the measures to stay youthful achieve prolonged life, intellect, stamina, strength and to eradicate diseases.

SPECIFIC HERBS FOR TREATING VARIOUS DISORDERS

Various Ayurvedic herbs are successfully used in common problems of old age. Various experimental and clinical works on different modules are also done for evaluations of their effect. These herbs are effective in various disorders occurring in old age. Some of them are as follows.

Bronchial Asthma

Bronchial Asthma is a disease of airways that is characterized by increased responsiveness of the tracheobronchial tree to a multiplicity of stimuli. The single drugs useful in this condition are Sirisa (Albezia lebbeck), Haridra (Curcuma longa), Bharngi

(*Clerodendrum serratum*), Kantakari (*Solanum xanthocarpum*), Brihati (*Solanum indicum*), Vibhitakphal (*Terminalia bellirica*), Yashtimadhu (*Glycyrrhiza glabra*), Tulsi (*Oscimum sanctum*), Vasa (*Adhatoda vasica*), etc.

Experimental study on Haridra (*Curcuma longa*) showed anti-inflammatory, antibacterial, antihistaminic properties. Its ether extract of reduced the histamine content of the rat skin to about 50%. Curcumin, isolated from rhizomes was found to inhibit the carrageenin-induced oedema in rats as well as in mice ^[2].

Experimental study on Puskarmool (*Ingula racemose*) showed bronchodilator properties on isolated trachea. It possessed antihistaminic as well as anti-5 HT activity suggesting its use on bronchial asthma ^[3].

A study on Yashtimadhu showed its immunomodulator, antioxidant, and antitussive properties ^[4].

Experimental study on Tulsi (*Oscimum sanctum*) showed antihistaminic property. The alcoholic extract of leaves was found to protect guinea pigs against histamine and Acacia Arabica-induced asthma.

Cardiac Problems

Single Ayurvedic herbs like Arjuna (*Terminalia arjuna*), Pushkaramula (*Ingula racemose*), Guggul (*Commiphora mukul*) and Lasuna (*Allium sativum*) are recommended. Light and vegetarian diet such as rice, Mung (green gram), Patla (*Trithianes dioica*), Amla (*Emblica officinalis*), Draksha (*Vitis Vinifera*), fruits, etc., should be consumed daily.

Study on Arjuna (*Terminalia arjuna*) showed that it induces a dose-dependent decrease in blood pressure and heart rate and inhibits carotid occlusion response without affecting the pressure responses. It was also demonstrated that the hypotensive and bradycardic effects were mainly of central origin.

Study on Lasuna (*Allium sativum*) showed its anti-inflammatory, anti-oxidant, free radicals scavenging, hypoglycemic and hypercholesteremia effect ^[5].

Study on Draksha (*Vitis vinifera*) showed that it has nutritious, demulcent, antioxidant, and hepatoprotective properties ^[6]

Various Diseases of Rheumatoid Spectrum

The commonly used herbs for various diseases of rheumatic spectrum are Guggul (*Commiphora mukul*), Rasna (*Pulchra lanceolata* Oliver and herein), Eranda (*Ricinus communis*), Bhalla taka (*Anacardium occidentale* L.), Chopachini (*Smilax china* Linn.),

Gourakshaganja (*Acorus calamus*), Shunthi (*Zingiber officinalis*), Kupilu (*Strychnos nuxvomica* L.), Nirgundi (*Vitex negundo*) and Asvagandha (*Withania somnifera* (L.) Dunal). The Panchakarma procedures like Patrapinda Swedan, Shalishastika Pindasveda, massage, etc., are useful in these conditions

Study on Ashwagandha (*Withania somnifera*) showed its immunomodulatory adaptogenic and anticarcinogenic effect.

Study on Shatavari showed its nutritive tonic and immunomodulatory properties [7].

Study on Guggul (*Commiphora mukul*) showed significant anti-inflammatory activity in rat paw oedema produced by carrageenin [8]

Shunthi (*zingiber officinalis*) has aromatic, carminative, digestive, stimulant hypolipidemic, and hypoglycemic effect [9]

Liver Disorders

Liver protective herbs like Katuki (*Picrorrhiza kurroa*), Bhumyamla (Phyllanthus niruri), and Rohitaka (*Tecoma undulata*), Bhringaraja (*Eclipta alba*), etc., are used.

Study on Katuki (*Picrorrhiza kurroa*) showed that it has hepatoprotective, antioxidant and adaptogenic properties [10].

Alcoholic extract of Rohitaka (*Tecoma undulata*) dissolved in propylene glycol administered in a dose of 25 mg/kg, i.e. exhibited decreased collagen content of liver and increase in body weight in chlorpromazine damage (0.25 mg/gm, i.e.) in rats. The alcoholic extract produced decrease in alkaline phosphates value in rats against CCl₄ induced liver cirrhosis [11]

Hypertension

Hypertension is defined as a systolic pressure > 140 mmHg and/or diastolic blood pressure > 90 mmHg. The causes of the disease are hereditary and faulty life style. In essential hypertension the exact cause is not known. For the treatment of hypertension, herbs like Sarpagandha (*Rauwolfia serpentina*), Katuki (*Picrorrhiza kurroa*), Brahmi (*Bacopa monnieri*), Shankapushpi (*Convolvulus pluricaulis*), Chandana (*Santalum album*), Bhringaraja (*Eclipta alba*), Lasuna (*Allium sativum*), Punarnava (*Boerhaavia diffusa*), etc.

Lipid Disorders

Lipid disorders are due to improper liver function and due to vitiation of medovaha srotas. The main causes of these are excessive use of alcohol, excessive day sleeping, lack of exercise, various disorders of other body organs. Herbs like Dalchini

(*Cinnamomum zeylanicum*), Triphala (Amalaki (*Emblica officinalis*), Haritaki (*Terminalia chebula*) and Vibhitak (*Terminalia bellirica*)), Guggul (*Commiphora mukul*), Sunthi (*Zingiber officinalis*), Pippali (*Piper longum*), Marica (*Piper nigrum*), Guggul (*Commiphora mukul*), Vidanga (*Embelia ribes*), etc., are useful in lipid disorders.

Insomnia

The chief causes of sleeplessness are various psychic disorders. In Ayurveda, insomnia is considered to be due to Vata disorders. Various diseases that lead to emaciation and depletion of tissues, excessive exercises, faulty uses of Panchakarma procedures, are the main causes of insomnia. Brihman, Santarpan, whole body massage, and use of Vatahar drugs are the main treatment for insomnia. Herbs like Sarpagandha (*Rauwolfia serpentina*), Asvagandha (*Withania somnifera* (L.)), Shankhpushpi (*Convolvulus pluricaulis*), Brahmi (*Bacopa monnieri*), and Jatamansi are useful in this condition.

CONCLUSIONS

Ayurveda has great potential to prevent and treat the diseases of old age. Rasayana can prevent and slow down the natural process of ageing and also effectively manage the diseases of old age. A lot of Ayurvedic herbs and compound preparations come under Rasayana. These herbs are much popular in the society. One of the examples is Chayvanprash that is famous all over the world for its antioxidant, anti-ageing and therapeutic properties. Ayurvedic herbs can be used for geriatrics problems with greater efficacy and safety in the present era.

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Ayurvedic management of Senile Vaginitis – A Case Report

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Abstract

Introduction

Senile vaginitis is the most common disease we come across in OPD's among the geriatric women. It is characterized by variable degrees of discomfort, dryness, soreness, itching in the vulva. Senile vaginitis is estimated to be present in approximately 45% of the postmenopausal women. The main causative factor is the decrease in the Serum oestrogen level after menopause and advancing age. It has potential negative effects on quality of life and can lead to various secondary diseases like urinary tract infection, etc. as the local treatments targeting the affected part will give better results. Here an effort is made to carry out this protocol in the management of senile vaginitis with easily available medicines.

Materials and methods

Subject aged 60 years who approached Prasuti Tantra and Stree Roga OPD of Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan with complaints of burning sensation, dryness in the genital tract associated with generalized body weakness was admitted for Sthanika Chikitsa i.e., Yoni Prakshalana, Yoni Abhyanga and Yoni Pichu along with internal medicines.

Result

After the course of treatment, follow up was done and remarkable changes in the symptoms were noticed.

Discussion

Sthanika chikitsa has showed significant improvement in the complaints and the symptomatic treatment with appropriate internal medicines also helped in improving the general health of the subject.

Keywords Senile vaginitis, post menopausal women, sthanika chikitsa

Introduction

Vaginitis occurring in the post menopausal women is considered as senile vaginitis. Due to the deficiency of oestrogen in this period the vaginal defense is lost. Vaginal mucosa is thin and is more susceptible to infection and trauma. There may be desquamation of the vaginal epithelium which may lead to formation of adhesions and bands between the walls. It is characterized by symptoms like Yellowish or blood stained vaginal discharge and itching, varying degrees of Discomfort, dryness, soreness in the vulva and Dyspareunia. [1] Most of the time patients will approach when the condition get worsened. Treatment should be aimed at improving the general health of the patient and Symptomatic treatment should be done. In modern science treatment like oestrogen supplementation is given. This helps in improving the vaginal epithelium, raises glycogen content, and lowers vaginal pH.[2] these treatments are having a negative effect on the body on long term use and chances of recurrence. Ayurveda is having positive impact on generating a well being in the patient and to an extent prevent diseases from recurring. Keeping this in mind treatment was carried out in the subject. The number of people aged 65 or older is projected to grow from an estimated 524 million in 2010 to nearly 1.5 billion in 2050, [3] with most of the increase in developing countries including India. The ageing related diseases also is on the rise so inorder to tackle this problem and bringing about healthy and strong citizens even in their geriatric period of life measures should be taken from the pre menopausal age itself. And as senile vaginitis is the most common disorder we come across in this particular age group this particular study was carried out.

Case report

A 60 year old lady approached to the OPD of Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Hassan with complaints of burning sensation, dryness in the external genital tract associated with mild generalized weakness since 1 week. Detailed history was taken and local examination was done. Pap smear was done and subject was given internal medicines like Guduchyadi kashaya 60ml bd before food, Chandraprabha vati 1bd after food and Manoll syrup 15ml BD after food for 1 week. And subject was advised to come for review after 1 week with the Pap smear report. As Pap smear was negative for intra epithelial lesion and her generalized body weakness got reduced and slight relief from her other symptoms she was advised to get admitted for further management. During this time period the subject was given Chitrakadi vati 1 TID before food and Panchakola Phanta 50ml BD before food for 3 days for Deepana and Pachana. Later she was given Achasnehapana with Shatavaryadi Ghritham in an increasing dose starting from 30 ml upto 120ml for 4 days in empty stomach. She was given Sarvanga Abhyanga with Ksheera bala taila followed by ushna jala snana for 3

days. On 3rd day she was given Virechana medicine i.e., Trivrut lehya 30gm. A total of 11 vegas were there. After giving Samsarjana karma for next 3 days she was started with Sthanika Chikitsa like Yoni Prakshalana with Panchavalkala Kwatha, Yoni abhyanga and Yoni pichu with Ksheera Bala Taila for 7 days twice daily was done. On discharge the subject was advised Indukantham Kashaya 60ml BD before food, Chandraprabha vati 1BD after food and Manoll syrup 15ml BD after food for 15 days. She was also given Triphala choorna for external washing. Subject was followed up after 15 days and there was significant improvement in her symptoms. Later she was given Vidaryadi Ghritha 5gm BD before food for 1 month. On the next follow up her main complaints like dryness, burning sensation and generalized weakness got relieved.

Personal history

Table no. 1 personal history

Marital life	40 years
Appetie	Reduced
Bowel	Regular, hard stools
Micturition	Regular
Sleep	Disturbed
Addiction	Coffee 5-6 times / day

Menstrual history

Menopause attained 5 years back.

Obstetric history

P3 L3 A0

LCB - FTND, 30 years back

Local examination

Table no. 2 local examination

PV	Anteverted/uterus atrophic/free fornices
PS	Cervix healthy, atrophic, dryness were noted in vagina

Management

Table no. 3 management

Day	Medicine/procedure	Dose	Duration
Day 1 to day 7	Guduchyadi kashaya Chandraprabha vati Manoll syrup	60ml BD BF 1BD AF 15ml BD AF	7 days
Day 8 to day 10	Chitrakadi vati Panchakola phanta	1 tid BF 50ml BD BF	3 days
Day 11 to day 14	Achasnehapana with shatavaryadi ghritha	30ml-120 ml	4 days
Day 15-day 17	Sarvanga abhyanga with ksheera bala taila followed by ushna jala snana		3 days
Day 17	Virechana with trivrut lehya	30gm	1 day
Day 18-day 20	Samsarjana karma		3 days
Day 21-day 27	Stanika chikitsa Yoni prakshalana with Panchavalkala kashaya Yoni abhyanga, yoni pichu with Ksheera bala taila	QS	7 days
Discharge medicine	Panchavalkala kashaya choorna for local washing Indukantha kashaya Chandraprabha vati Manoll syrup	QS 60ml BD BF 1BD AF 15ml BD AF	15 days
1 st follow up	Vidaryadi ghritha	5gm BD BF	30 days

Discussion

Considering the Ayurvedic aspect of senile vaginitis, it can be correlated with Shushka Yoni Vyapat which is having features like Yoni Shosha as explained by Acharya Vagbhata. It is mainly occurring due to Vata dushti and reduction in the Drava bhava in the yoni as explained arunadatta commentary. Burning sensation associated with this can

be due to pitta dosha and body weakness due to vitiation of vata and kapha. Treatment aiming at normalizing these doshas was carried out. The medicines like guduchyadi kashayam having ingredients like guduchi, padmaka, rakta chandana etc helps in bringing normalcy in pitta dosha which to an extent helped in reducing the burning sensation experienced by the subject. Manoll syrup containing ingredients like ashwagandha, amalaki, etc helped in improving the general health condition. Chandraprabha vati is also strengthening and can be given any pathology related to pelvic organs. Chithrakadi vati and Panchakola phanta helps in increasing the agni and pachana of the doshas and it helps in the easy digestion of ghritha which was given next. Shatavaryadi ghritha with its main content shatavari having phyto oestrogens helped in bringing about reducing the dryness in the vagina by its oestrogenic action. Ksheera bala taila used for sarvanga abhyanga as well as sthanika abhyanga and pichu helps in promoting the bala and reducing dryness and burning sensation in the vagina by its direct action on the affected part. Virechana with trivrut lehya for removing the aggravated pitta dosha from the body as virechana is the main line of treatment for alleviating pitta dosha. Panchavalkala kashaya yoni prakshalana helped in alleviating the aggravate vata and pitta dosha by acting locally. Follow up medicines like indukantha kashaya[4] having ingredients like dashamula, daru , etc which are immune modulatory and improved the bala of the subject. Vidaryadi ghritha with contents like vidari, punarnava, panchanguli, etc helped in promoting the general health of the subject and providing the vitality. The general line of treatment mentioned is shodhana, shaman and sthanika chikitsa which was successfully carried out in the subject and helped in normalizing the vitiated doshas and imparting strength in the subject.

Conclusion

The disease senile vaginitis one of the common conditions in post menopausal women is being treated with readily available medicines has helped in reducing the symptoms. Sthanika chikitsa with its direct action on affected part as the medicines will get directly absorbed through the vaginal walls played an important role in improving the condition. Further studies can be carried out by stressing on sthanika chikitsa in treating such conditions.

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GYNECOLOGICAL DISORDER IN GERIATRIC WOMEN

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ABSTRACT

Geriatric gynecology deals with gynecological pathologies encountered in postmenopausal women aged 65 years and above. The rate of increase in number of postmenopausal women is substantially faster in developing than developed world. The age-related geriatric problems have emerged significantly with enhanced longevity of life. These are attributed to the physiological changes seen in reproductive organs due to their altered hormonal milieu. The various gynecological disorders peculiar to ageing are pelvic organ prolapse, postmenopausal bleeding, gynaecological malignancies, urinary incontinence, genital tract infections, vulvovaginal disorders. The spectrum of gynecological disorders in India differ from those in developed world as there are no screening programs for early detection and hardly any dedicated geriatric units. The purpose of the present study is to assess the various types of gynecological problems faced by older women in India and to emphasize the need of promoting screening programs for early detection and treatment of cancers and establishment of geriatric units to meet the special need of this subset of population.

Key words- Geriatric, Gynecological Disorders.

INTRODUCTION

The word geriatric was coined by Dr. Ignatz Natcher an Austran physician in 1909. Geriatric gynecological problems have not received adequate attention in India. Geriatric gynecology deals with gynecological pathologies encountered in postmenopausal women aged 65 years and above. These are attributed to the physiological changes seen in reproductive organs due to their altered hormonal milieu. The various gynecological disorders peculiar to ageing are pelvic organ prolapse, postmenopausal bleeding, gynaecological malignancies, urinary incontinence, genital tract infections, vulvovaginal disorders.

In Ayurveda, geriatric mainly deals with Jara Avastha. Indian ancient lifestyles- Ayurveda is having this branch as Rasayana Chikitsa for ages. Ayurveda understood this

in totally offering wholistic remedies emphasising on proper lifestyles. Ancient science also describes many disorders of geriatric women like- Garbhashay bhransha, Yonibhransha, Rajanivrutti Janya Lakshanas/ Rajanivrutti Janya Vikara, Mutrakruchra, Kaphaja Yonivyapad, Mahayoni. This phase of life is commonly associated with Vata and Kapha Vruddhi and Pitta Kshaya a phenomenon which seems to be responsible for most of the physical and psychological ailments in women.

NEED OF STUDY

Modern system of medicine stresses on Hormone Replacement Therapy with estrogen related hormones which finally ends up with operative procedures to fight these gynecological disorders but educated society as a whole dreads continued use of these sex hormones due to their oncogenic potential. Therefore there is always a need to find out a cost effective safe method to fight geriatric related ailments of women.

Ayurveda has potential to bridge this gap and provide effective therapeutics as it has sufficient understanding of symptomatology to provide outcome.

MATERIALS AND METHODS

Different Ayurvedic classical books, research papers and journals were referred to fulfill this part, it comprises subsection dealing with Ayurvedic management of geriatric ailments in women.

AIMS AND OBJECTIVES

1) To study the critical review of Ayurvedic and modern literature on gynecological disorders in geriatric women.

2) To study the aetiopathogenesis, clinical features and management according to Ayurveda literature.

Prasramsini yonivyapad(Pelvic Organ Prolapse)/ Yonibhransha (uterine prolapse)

It is a disease in which uterus descends out of vagina or experiences downward displacement of uterus or any pelvic organ. Which is categorised as Complete or Incomplete prolapse. The condition is graded by its severity that is 1st grade, 2nd grade and 3rd grade, 4th grade. More severe cases need surgery, but in early stages, exercise may help like kegel's exercise, preventing constipation, lifting heavy loads etc.

According to Ayurveda, here Vata Dosha is always vitiated. During geriatric phase also there is Vata Vruddhi. Here the role of Apana Vayu is to regulate the process of excretion mainly all pelvic organs of excretion depend on quality of Apana Vayu, if this Vata Dosha is vitiated, it may exert downward force and can dislodge the organ gradually.

Management

Principle of management

Medicine with the properties of Grahi (which means to retain the organs at its own place giving strength to support muscles and ligaments of uterus.) And controlling Saman and APANA vayu and aids in the process of digestion and metabolism and helps in releasing the pressure and stress on the pelvic floor muscles in the normal state and ultimately from descend of pelvic organ /uterus.

ACC TO ACHARYA SUSHRUTA- Abhyanga with Ghrita, Oushadha siddha Ksheera Swedana, replacing Yoni by hand, Yoni Purana with vesavara Pinda and bandaged. It should be removed as patient urges for micturition.

ACC TO BHAISHAJYA RATNAVALI- Traivrt Sneha and Swedana.

Acc to Chkradatta- Mushaka Mamsa prepared with Tila Taila can be used.

POST MENOPAUSAL SYNDROME (RAJANIVRUTTI JANYA LAKSHANA)

It is stage in a woman's life which is that the woman loses her ability to ovulate, meaning that the woman stops being fertile. This stage occurs after 50 years of age and is characterised by presenting a series of symptoms, which include the disappearance of menstruation, night sweats, overweight, emotional instability, hot flashes, dry skin etc. Acc to Ayurveda it is because of alteration of doshas.

Vata Dosha Menopause: Symptoms –Nervousness, anxiety, pain, mood swings, vaginal dryness, loss of skin tone, feeling cold, irregular periods, insomnia, mild hot flashes, constipation, palpitation, bloating and joint pain.

Treatment

Diet - increase warm food and drinks. Take regular meals and use spices, fennel and cumin. Decrease –caffeine and other stimulants, refined sugar cold drinks, cucumber, organic food, use spices and cumin and fennel. Avoid hot spicy foods, hot drinks and alcohol, no eating late at night.

Life Style- Early bed-time, oil massage, using almond and olive oil, meditation, yoga, regular exercise like walking.

Herbs- Anti vata herbs include ashwagandha, arjuna, astragalus, cardamom, comfrey root, garlic, ginseng, guggul, hawthorn berries, sandalwood and ziziphus.

Pitta – type menopause Symptoms- Prone to Hot temper, anger, irritability, feeling hot, hot flashes, night sweats, heavy periods, excessive bleeding, urinary tract infections, skin rashes and acne

Treatment:

Diet- Increase cooling foods, water intake, sweet juicy fruits (grapes pears, plums, mango, melons, apples), yellow squash cucumber, organic foods Avoid hot spicy food, hot drinks and alcohol, no eating late at night

Life style: Go to bed at 10 pm, oil massage using coconut and sesame oil, use meditation & other techniques to reduce anger. Exercise & exposure to sun are limited.³

Herbs- Use Anti-Pitta Herbs: Aloe vera, arjuna, barberry, golden seed, saffron, sandalwood, shatavari.

Kapha type Menopause:

Symptoms- Weight gain, lethargy, fluid retention, laziness, depression, lacking motivation, slow digestion Treatment- Prefer light, dry & warm food, consume fruits, whole grown vegetables, use spices such as black pepper, turmeric & ginger. Avoid – Meat, cheese, sugar, cold foods & drinks. Life style- Get up early (6am), Mustard oil recommended for massage. Herbs-Use Anti-Kapha Herbs: Bay berry, cayenne, guggulu, mustard.

KAPHAJA YONIVYAPAT(VULVO VAGINITIS)

It is the inflammation of the vagina characterized by itching, vaginal discharge, and pain .Vaginitis is associated with irritation and infection of the vulva due to its proximity to the vagina . a healthy vagina produces normal secretions to cleanse and regulate itself same as saliva secrets in the mouth. Vaginitis occurs when changing in the normal balance of vaginal bacteria or an infection.

CLASSIFICATION

- Bacterial vaginosis
- Trichomoniasis
- Candida albicans
- Vaginal atrophy
- Non infectious vaginitis

Acc to AYURVEDA Kapaha Dosha gets vitiated due to excessive consumption of abhshyandi substances reaches reproductive system and causes Pichila, Kandu,

Sheeta, Srava, Alpa vedana in vagina, is known as Kaphaj Yonivyapad or Vaginitis. Aggravated Kaphs and low level of Agni is the cause of Kaphaj Yoni Vyapat.

Which is classified under four categories;

1. Inflammatory disease
2. Dysfunctional Uterine Disease
3. Sterility and Habitual abortions
4. Anatomical Defects.

MANAGEMENT

Diet- Consume fresh vegetables, butter guard, red amaranthas

Apathya- Avoid pickles, fermented, deep fried, spicy, bakery food items, avoid excessive consumption of milk products, Viruddha Ahara- combinations like fruit with milk, milk with fish, curd with milk.

Internal Medications- Ashokarishta, Lodhrasava, Aragwadharishta, Pushyanug Churna, Chandraprava Vati, Arogyavardhini Vati, Triphala Guggulu, Nimbadi Guggulu.

External Therapies- Panchavalka Kashaya, Panchatikta Kashaya, Mahamanjishthadi Kashaya, Aragwadha Patra Kashaya, Triphala Kashaya.

Single drugs- Haridra, Aragwadha, Guduchi, Nimba, Karanja, Amalaki etc.

CONCLUSION

Health problems in geriatric represent imbalances in the body that were already in growing in the body and diet plays a key role in balancing hormones during this phase of life in women. Eat a varied diet high in fruit, vegetables, whole grains and dried beans. It is a rich source of phyto estrogen. Variety and moderation are important because just as too much estrogen is unhealthy after menopause, too much phyto estrogen may also be dangerous. Ayurveda describes that these stubborn symptoms are due to the built up wastes and toxins, referred to as “ama” in the body tissue. In this case traditional Ayurvedic detoxification programme “panchakarma” may be needed to clear the body’s channels and gain relief. Lifestyle management also plays a significant role in the time of menopause. Menopause symptoms are Nature’s wake up call to paying more sincere attention to one’s health.

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PSYCHOLOGICAL PROBLEMS IN GERIATRIC WOMEN

AN AYURVEDIC REVIEW

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ABSTRACT-

Geriatrics is a branch of medical science concerned with the diagnosis, treatment and prevention of disease in elderly people and the problems specific to ageing. In India, the population of elderly people is growing exponentially and among them women are larger in number (52% >60 years and 55% >80 years age groups). Women go through many physical and psychological changes during their lifespan. The most affected aspect among many other factors is the “Psychological” aspect. Even in this modern era, India still remains a male dominant society, which highly affects mental health of women. About 15% of adults aged 60 and above suffer from a mental disorder and elderly women are more prone to develop psychological problems than men. The commonly seen psychological disorders are Insomnia, Depression, Anxiety, Dementia, Alzheimer’s disease, etc. Along with physical and mental health, emotional health of elderly women is very important. Because of many hormonal changes, as in menopausal stage, taking care of their mental health becomes utmost important. Ayurveda can prove to be a ray of hope in such situations as it provides a holistic approach for elderly women to overcome the psychological problems at this age.

KEYWORDS: Geriatric women, Psychological problems, Ayurveda

INTRODUCTION:

Ageing is the sequential or progressive change in an organism that leads to an increased risk of debility, disease and death. Senescence consists of these manifestations of the ageing. India is now labelled as the “Ageing Nation” and this exponential rise in elderly population is due to impressive gains that society has made in terms of increased life expectancy. With the rise in elderly population, the demand for holistic care tends to grow. Census 1991 showed the elderly female population (29.4 million) outnumbered elderly males (27.3 million). The NSO Report said this trend has strengthened in the last two decades. The elderly female population is now projected to rise to 100.9 million in

2031, while elderly male population may rise to 92.9 million. Indian women face many difficulties in their day to day life making them more vulnerable to psychological and systemic disorders because physical health affects mental health and vice versa. Mental health of geriatric women is often masked underneath their physical health, including hormonal changes. So special emphasis should be given on improving mental health status of elderly women. Commonly seen psychological disorders in this age are anxiety and depression while the cognitive functions majorly affected are attention and memory. Elderly women are twice more prone than men to develop Psychological problems and paranoid disorders. Thus, for the geriatric women to have a strong emotional and immunological status, Ayurvedic Geriatric Care can play a wonderful role. Many Ayurvedic herbs and compound preparations are useful to improve cognitive functions, reduce chronic stress, cure insomnia and have good results on other disorders like Alzheimer's disease, Parkinsonism, etc.

CONCEPT OF AGEING IN AYURVEDA-

In Ayurveda, the term “Jara” is used to denote old age. Division of life span is given by Acharya Sharangdhara which can be applicable to both men and women. The distribution of old age, specific loss from the body at that particular age and which Rasayan can be used for these changes is described.

Table: Age related degenerations and accordingly preventable rasayanas

Sr. No.	Decades (yrs.)	Age-related bio-losses (Loss of....)	Restorative Rasayanas
1	51-60	Vision (Drishti)	Triphala, Jyotishmati, Shatavari
2	61-70	Virility (Shukra)	Kapikacchu, Ashwagandha
3	71-80	Strength (Vikram)	Bala, Shilajeet, Ashwagandha
4	81-90	Cognitive power	Brahmi, Mandukparni
5	91-100	Locomotive ability	Bala, Ashwagandha

All these degenerative processes lead to many psychological and emotional changes in women. The changes in body, impairment in various systems of body can be hard for some women to accept. These physical changes lead to mood changes, which if not treated or looked upon in time can lead to serious psychological disorders.

The restorative rasayanas can be helpful in keeping the severe changes in check. Rasayan especially deals with the science of nutrition, geriatric care and rejuvenation.

Less the effects of degenerative process, less stress will be faced by the women while coping up with old age.

PSYCHOLOGICAL PROBLEMS IN GERIATRIC WOMEN-

1.DEPRESSION:

It is a common psychological disorder seen in elderly women which is characterised by sadness, loss of interest, pleasure, poor appetite, low energy and poor concentration. Difficult situations like chronic medical problems or death of spouse can lead to depression. “Avasada” is the term used for depression in Ayurveda. Medicines like Saraswatarista, Ashwagandharista, etc along with practicing pranayam can help in mood elevation in depressed elderly women.

2.ANXIETY:

Common fears about ageing can lead to anxiety. Many older women are afraid of being victimized, being dependant on others, being left alone and death. Various hormonal and health changes bring in anxiety. Anxiety is denoted as “Udvega” and Brahmi vati, Smrutisagar rasa Ashwagandha churna along with Suryanamaskar etc. can help in reducing anxiety.

3.INSOMNIA:

Insomnia is difficulty in sleeping or maintaining sleep which leads to adequate or poor quality of sleep. It is one of the most common sleep disorders in elderly women. Chronic insomnia can lead to anxiety, depression, severe fatigue and lack of concentration. Ayurveda has classified it under Vatananatmaja vikara as ‘Nidranasha’. In such cases, lifestyle changes like Madhur rasa aahara sevan, warm bath, consumption of buffalo milk at bedtime can be helpful. Certain medicines which help in improving quality of sleep are- Sarpagandha vati, Manasmitra vatak, Brahmi ghrita, Syrup Shankhapushpi.

4.MENOPAUSAL SYNDROME-

Menopause is the natural cessation of a woman’s menstrual cycle leading to a hormone deficient state that occurs at the age of 45-55 years. Several studies have shown that depression and anxiety are the most common psychiatric symptoms in women with symptomatic menopausal transition. It might be a risk factor for subsequent clinical depressive and anxiety disorders. Withdrawal of hormones may cause a change in the serotonin level- which is a ‘happy hormone’ and thus these mood disorders are aggravated in elderly women. To cope up with this state, we can use herbs containing phytoestrogens like Shatavari, Ashoka, Yashtimadhu, Ashwagandha, Vidari, Tila,

Methika, Rasona, etc. These phytoestrogens bind to estrogen receptors, thus producing estrogenic effect and help in alleviating symptoms of menopausal transition. Other Ayurvedic formulations like Shatavari kalpa, Ashwagandharista, Chandraprabhavati can be useful.

5.SENILE DEMENTIA AND ALZHEIMER’S DISEASE-

Dementia is characterised by progressive impaired cognitive function affecting an individual’s ability to maintain normal social or occupational function. Higher mental functions are affected first in the process in dementia. In later stages the affected places are disoriented in time, place and person. Alzheimer’s disease is the leading cause of dementia. Recent studies have shown that Medhya Rasayan can help in improving cognition and memory and has neuro-regenerative effect. Brahmi is now established as a memory enhancer and has therapeutic role in management of senile dementia.

RASAYANA THERAPY:

Keeping in mind the above psychological problems certain rasayanas can be helpful.

- Anti-Ageing remedies:
Amalki, Ashwagandha, Guduchi, Brahmi, Chyavanprasha
- Single herb Rasayana:
Ashwagandha, Shatavari, Mandukparni, Shakhapushpi, Yashtimadhu, Guduchi, Amalaki, Pippali, Haritki, Bhallataka
- Compound Formulations:

Brahma rasayana, Amalaki rasayana, Vasantkusumakar rasa, Makardhwaj, Shilajit vati, Saraswatarista, Ashwagandhadhi lehya.

CONCLUSION:

Ageing is a biological phenomenon and with increased longevity, the age-related psychological disorders are increased in elderly people in 21st century and among them, women are more in number. It is necessary to throw light on mental status of elderly women. Their problems and needs should be understood and steps should be taken accordingly to help them overcome their psychological problems. It can be done with help of proper counselling, Ayurvedic medicines and meditation.

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Sthanik chikitsa (local treatment) in management of postmenopausal problems

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Abstract:

Though India is the largest country with youth population, the percentage of cohort of elder population increases since last decade due to increased life expectancy and standard medical facilities. Elder women outnumber more than elder men due to gender difference in life expectancy. Geriatric syndromes means cohort of health issues related to old age. Women during her perimenopausal and postmenopausal age suffers from many health issues like atrophic vaginitis, genital prolapse, psychological problems, dementia, sleep disorders, urinary incontinence and increased risk for cardiovascular and cerebrovascular diseases. Health professional have to formulate protocol for proper care and medical facility to elder women. Many local therapies are indicated for management of issues of old age. In ayurveda along with rasayan chikitsa(rejuvenating treatment) many local therapies are mentioned which can be used for management of geriatric syndromes. Murdhnitail, hrudbasti, yonipichu, yoniparishek, yonidhawan, yonilep, yonipuran, yonilep, yonivarti, yoniabhyang, uttarbasti can be advised as per need of geriatric issue with appropriate ayurvedic formulations.

Keywords: Geriatric women, geriatric syndrome, sthanik chikitsa, menopause

1. Introduction

As per the latest UN report, India has the world's largest youth population despite having a smaller population than China. Every third person in an Indian city today is youth, and thus India is said to be youngest country in world.(i) Though, youth populations contributes a major portion of population, the cohort of elder peoples also

increasing since last few years as a result of increase in life expectancy, quality medical facilities and reduction in fertility rates. Most of world's aging women are living in developing countries. In India, Life expectancy for males is 70.4 years and for females 71.8 years.(ii) Gender difference in life expectancy implies that the population of elder women is more than older men. As a population of elder women increases, the health professionals have to be ready to provide adequate and special medical facility to health problems of such cohort.

Elder women have to face many general and reproductive health problems. Many countries, facing new challenges and burden on health cost associated with health issues of elder population. Health sector tries to formulate new policies and guidelines for care of elder cohort of population.

Data on health status of postmenopausal women is not much available for developing countries. As compare to elder men, the rate of certain chronic diseases such as osteoporosis, arthritis, diabetes, hypertension is significantly higher in elder women. About one third of life span will be spent during the period of estrogen deprivation stage with long term symptomatic and metabolic complications. Though menopause is physiological stage of female life, she has to face many local health concerns like urogenital atrophy, sexual dysfunctions and systemic concerns related to cardiovascular system, cerebrovascular system, psychological problems, osteoporosis and fractures. Problems of postmenopausal women can collectively term as geriatric syndrome. Postmenopausal symptoms management includes use of non hormonal and hormonal medicines, which can be given by systemic or local route.

Table 1: Health problems of elder women in postmenopausal age: ⁽ⁱⁱⁱ⁾

Systemic Health concerns	Local Health Concerns	
	Related to Urogenital system	Related to other system
Anxiety	Dysparunia	Hot Flushes
Insomnia	Vaginal dryness	Thinning and wrinkling of skin
Irritability	Atrophic vaginitis	Thinning of Hairs
Insomnia	Decreased sexual desire	Malignancies – Breast
Depression	Dysuria	
Dementia, Alzheimer disease	Recurrent urinary infection	
Mood swing	Urinary incontinence	
Osteoporosis and fracture	Genital Prolapse	
Cardiovascular diseases like strokes, IHD, CAD	Infections, STIs	
Atherosclerosis	Malignancies – Cervical, Endometrial, Ovarian	
Cerebrovascular diseases		

In ayurveda, rasayan chikitsa (rejuvenating treatment) is advisable for elder age group. Many formulations are mentioned in ayurvedic literature under rasayan chapter. Health concerns in geriatric syndromes can be managed well with ayurvedic formulations which can be administered internally or locally. Chikitsa (treatment) can be broadly classified as abhyantar chikitsa (internal medicine) and sthanik chikitsa (local treatment).

2. Management of health concerns of elder women

2.1 Rasayan Chikitsa (Rejuvenation treatment)

Rasayan therapy promotes healthy life by preventing disease, improves immunity, strength, vitality, memory, intelligence and works like rejuvenation. (iv) Rasayan therapy can be used as preventive as well as therapeutic for geriatric syndrome. Health of elder peoples depends on their health status in earlier period of life. Adopting principles of dincharya (principles of daily routine), rutucharya (principles as per season) and rasayan chikitsa from younger age will be helpful for better health status in elder age.

2.2 Sthanik Chikitsa (Local route of drug administration):

Local application of ayurvedic formulation like decoction, medicated oils, ghee etc. is as important as internal rejuvenating formulations. Local symptoms will resolve more rapidly with local application of drug as high concentration of drug is expected to act at target organ than internal medication. Drugs show faster and efficient action on local organs when applied locally. Ayurveda describes many local treatments for gynecological as well as other disorders. We can summarize such local treatment as per problems as geriatric syndrome in women as follows:

Table 2: Sthanik chikitsa (local treatment) for various menopausal symptoms

Health Concern	Local treatment	Meaning
Psychological Problems Sleep disorders	Moordhnitaila :- Shiro-abhyang Shirodhara Shiropichu Shirobasti	Application of medicated oils over head in different ways
Cardiovascular problems	Hrud-basti	Medicated luke warm oil is poured into a well made from black gram paste over precordial region for a specified time.
Skin dryness, thinning etc	Abhyang	Massage with medicated oil
Osteoporosis	Basti	Transrectal administration of medicated milk, oil, ghee
Urinary Problems	Uttarbasti	Administration of medicated oil or decoction through urethra

Genital Problems	Yoni Pichu	Tampon soaked in medicated oil inserted in vagina and withheld for specific period
	Yoni Dhawan	Cleansing of vaginal canal with decoction or medicated oil
	Yoni Varti	Insertion of herbal pessary in vagina
	Yoni parishek	Cleansing of vulval part with decoction or medicated oil
	Yoni dhupan	Fumigation of perineum with herbal medicines
	Yoni Abhyang	Local application of medicated oil over vulval and vaginal region
	Yoni Lep	Application of paste of herbal drug powder over vulval or vaginal area
	Yoni Puran	Filling of vaginal canal with medicated oil / kalka (Paste of powdered drugs)
	Yoni kalka dharan	Insertion of paste of herbal powder in vaginal canal
	Uttarbasti	Intrauterine administration of decoction or medicated oil

a.Psychological issues: Elder women suffer from anxiety, depression, dementia, sleep disturbance, irritability and mood swings during peri-menopausal and postmenopausal period. Rasayan dravyas improves memory, intelligence. Murdhnitail (application of oil over head in different way) is the local treatment described in ayurvedic classics. Sesame oil, oil medicated with jatamansi (*Nardostachys jatamansi*), Himasagar tail can be used for this purpose. Kshirdhara (pouring a cow milk on forehead by specific method for a specified time) (ajay kumar et al 2007, university of rajasthan), jaldhara (pouring water on forehead by specific method for a specified time), takradhara (pouring a curd on forehead by specific method for a specified time) (B. G. Gopinath et al RGUHS, 2003) gives significant result for insomnia, sleep disorder and irritability.

b.Cardiac problems: Hrudbasti is the local therapy in which medicated luke warm oil is poured into a well made from black gram paste over precordial region for a specified time. It is said to be beneficial for cardiac disorders, atherosclerosis, coronary artery blockages, palpitation etc. Cardiac complications are more common in elder women in

postmenopausal period. Hrudbasti therapy can effectively used to overcome these cardiac problems.

c.Skin and hair problems: Dryness of skin and hairs, hair fall are common problems in elder age group. There is predominance of Vata dosha in old age which aggravates such condition. Oleation is ideal treatment for disorders of vata dosha. Abhyang (oleation) with medicated oils helps to take of these problems.

d.Genito-urinary problems: Repeated child birth, poor access to facilities for the repair of birth injuries, poor hygiene, untreated genitor-urinary tract infections are common reasons for genitor-urinary problems in elder age group women. Dysuria, urinary incontinence is a common problem in elder woman. Along with internal medicine uttarbasti (transurethral administration of medicated oil in urinary bladder) had significant result for urinary problems. It helps to alleviate vata dosha. It provides strength to bladder and urethral sphincter. Ashwagandha (*Withania somnifera*) tail uttarbasti shows significant result in stress incontinence (Patil netra K et al.AYUSHDHARA, 2020:7(suppl 1):81-84).

Genital prolapse, reproductive tract infections, atrophic vaginitis, dyspareunia are common gynecological issues in elder postmenopausal women. For local application of medication over genital tract many local therapies are mentioned while describing treatment for gynecological disorders. Local therapies mentioned in management of reproductive system disorder are yonipichu, yoniabhyang, yonidhawan, yonivarti, yonilep, yonipuran, yonidhupan, yoniparishek and uttarbasti. Many ayurvedic formulations mentioned in ayurvedic texts for used as local therapy in different ways. Some of commonly used formulations as local therapy for genito-urinary issues are enlisted below;

Table 3: Commonly used ayurvedic formulations for menopausal problems

Indication	Local therapy	Ayurvedic formulation
Atrophic vaginitis	Yoniabhyang Yonipichu Uttarbasti	Til tail (sesame oil) Shatapushpa tail, shatavari tail Kashmaryadi ghrut Jeevaniyavarg siddh tail Jeevaniyavarg siddha dugdh
Genital Prolapse	Yonipichu Yoniabhyang Yonilep Uttarbasti Yonipuran	Mushaksiddha tail Changeryadi ghrut Chukra tail Traivrut sneha Lajjalu Churn Traivrut sneha Vasa,Goghrut yonipuran
Genital infection	Yonidhawan Yonivarti Yonipichu	Triphala Kashaya Panchvalkal kashaya Kushtha-pippalyadi varti Pippalyadi varti Shodhan tail

	Yoniabhyang Yonikalka dharan Uttarbasti	Dhatakyadi tail Jatyadi ghrut / tail Triphala kalka Hinstra kalka Shyama-trivrut kalka
Urinary incontinence	Yonipichu Uttarbasti	Bala tail Ashwagandha tail
Cervical erosions LSIL	Yonipichu Uttarbasti Ksharkarm (local application of kshar	Jatyadi ghrut / tail Ropan tail Apamargkshar

2.3 Local therapy as part of Menopausal Hormone Therapy (MHT)

“Menopausal hormonal therapy” (MHT) or “hormonal therapy” (HT), previously termed as “hormone replacement therapy” (HRT) is the term used to denote management of menopausal health issues with replacement of estrogen or estrogen with progesterone. Primary goal of estrogen replacement is to relieve vasomotor symptoms and genito-urinary problems like vaginal dryness, atrophic vaginitis, recurrent urinary tract infection etc. Estrogen can be used in form of vaginal gel, vaginal rings.(v)

3.Discussion:

Geriatric syndrome can be effectively managed by internal medication described in rasayan chikitsa (rejuvenating treatment) chapter and by local medication (sthanik chikitsa). While describing treatment of yonivyapad (disorders of female genitals), most of formulations are advised to administer by transvaginal route as local therapy. The purpose behind this vaginal route may be for better efficacy of drug, more absorption and high concentration of drug in local genital organs for better recovery and to avoid systemic adverse effects of drug, if any.

Hormone replacement, either by systemic or vaginal route, is the primary goal for management of menopausal symptoms. Hormone replacement by vaginal route is more preferable than systemic due to minimal side effects. Also vaginal epithelium had higher concentration of estrogen receptors, which facilitate fast action of estrogen.

Vaginal drug administration is a part of Topical Drug Classification System (TCS). It is used as a route for local action of drug in cervico-vaginal region. In recent years, the vaginal route has been rediscovered as a potential route for systemic delivery of therapeutically important macromolecules.(vi)

Drug absorption through vagina get influenced by thickness by vaginal epithelium, vaginal fluid volume and composition, pH of vagina and sexual arousal. The

physicochemical properties of administered drug like molecular weight, lipophilicity, ionization, surface charge, chemical nature also affects absorption of drug.

Supportive reasons for selecting vaginal route for drug administration are:

- i. Mucosal surface with rugae provides a large surface for drug absorption.
- ii. Arteries, blood vessels, lymphatic vessels are abundant in the walls of the vagina.
- iii. Dense network of blood vessels in vagina made it an excellent route for drug delivery for both systemic and local effect.
- iv. Vaginal epithelium had higher concentration of estrogen receptors, which facilitate fast action of estrogen.
- v. Reduced vaginal epithelial thickness in postmenopausal women facilitates maximum drug absorption through thin epithelium.
- vi. Vaginal progesterone absorption in estrogen deficient women who were receiving vaginal estrogen therapy was found to be increased, although prior estradiol therapy should have caused an increase in vaginal epithelium thickness.
- vii. The absorption of progesterone was increased with increased vascularity of the vagina.
- viii. For better efficacy of drug, long term retention of drug formulation in vaginal cavity is necessary. In different forms of local treatment modalities, the drug is advised to retain in place for specific period of time.
- ix. Ideally a vaginal drug delivery system that is intended for local effect should distribute uniformly throughout vaginal cavity. In yonipuran, yonilep, yoniabhyag the drug is advised to uniformly distribute throughout vaginal cavity.
- x. Rapid drug absorption and quick onset of action can be achieved with vaginal route.
- xi. The vaginal bioavailability of smaller drug molecule is good.
- xii. The bioavailability of larger drug molecules can be improved by means of absorption enhancer or other approach.
- xiii. Hepatic first pass elimination of high clearance drugs may be avoided partially.
- xiv. Effective route for delivery of hormones

4.Conclusion:

Geriatric syndrome in menopausal women can be effectively treated with rasayan chikitsa (rejuvenating treatment). Different forms of local therapy mentioned in ayurvedic classics which can be judiciously used for management of menopausal syndrome as per need. Local route of drug administration has its own additional benefits and it is as important as internal medication.

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IDEAL LIFESTYLE FOR GERIATRIC WOMEN

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Abstract

Older adults are the fastest growing segment of society, experience the highest rate of chronic diseases and conditions, and require the highest long-term care costs of all age groups. Healthy lifestyle is considered an important tool to prevent chronic conditions and institutionalization in older adults. Older women are more likely than men to have chronic, or ongoing, health conditions – such as arthritis, high blood pressure, and osteoporosis. Women are also more likely to develop multiple health problems in old age. Older women are also more likely to have memory or other “cognitive” problems, and difficulty carrying out daily activities such as dressing, walking, or bathing without help. There is substantial evidence from epidemiological studies among older adults that individual lifestyle factors, including physical activity, alcohol consumption, smoking behavior, and body weight, are associated with health and functioning. What changes occurs in old age women, what should be eaten, what investigations or examination should be done in older aged women, what medications should be prescribed, what do’s and don’ts should be advised what care should be taken are matter of concern. The elderly's lifestyle is affected by their mental health and can change the pattern of communication or their presence in social activities. Most of the common diseases in aging can be prevented by observing a healthy lifestyle. In other word by improving the lifestyle and improving the level of personal health of the elderly, it can prevent illness and help to improve their physical and mental health.

Keywords – older women, health, lifestyle, Care, mental health.

Introduction –

The most common gynecologic problems encountered in elderly women are vulvovaginal inflammation, genital prolapse, postmenopausal bleeding, and alterations in bladder function.

Geriatric gynecologic disorders generally result from variations in neuroendocrine or musculoskeletal function. The female genitourinary tract is primarily dependent on

circulating estrogens: the changes in genital tissues associated with aging reflect the progressive decline in gonadal-endocrine stimulation.

How to maintain a healthy lifestyle during old age -

1. See the healthcare provider regularly - Even if you feel perfectly healthy, you should see your provider at least once a year for a checkup.

2. Take medications, vitamins, and supplements only as directed.

3. Get screened

- Screenings for colorectal cancer:
- Diabetes check:
- Cholesterol test for high blood cholesterol levels:
- Blood pressure check
- Bone health evaluation
- Depression screening
- Hearing and vision screening

4. Dental check-up

1.5. Get vaccinated - Check with your healthcare provider to make sure you're getting:

- A flu shot—every year in late summer or early fall, before the flu season starts.
- Two pneumonia vaccinations: pneumococcal conjugate vaccine (PCV)13 and pneumococcal polysaccharide vaccine (PPSV)23. Ask your healthcare provider about when to take the two vaccines
- A tetanus shot: every 10 years
- The shingles (herpes zoster) vaccine: once after age 60 or older

6. Lower the risk of falls and fractures

ADVISES –

- Use sunscreen daily
- Quit smoking.
- Drink in moderation
- Exercise.
- Exercise for brain

Steps to Aging Well

1. Stay Physically Active for a Healthy Body and Mind
2. Stay Socially Active With Friends and Family and Within Your Community

3. Follow a Healthy, Well-Balanced Diet
4. Don't Neglect Yourself: Schedule Checkups and Stick to Them
5. Take All Medication as Directed by the Doctor
6. Limit Alcohol Consumption
7. Quit Smoking to Lower Your Risk of Cancer and Heart Disease
8. Get the Sleep That Your Body Needs
9. Practice Good Dental Hygiene Every Day

Warning Signs Shouldn't be Ignored –

- Abrupt weakness or dizziness
- Shortness of breath
- Pressure in your chest area
- Tingling or numbness, especially on just one side of your body
- Loss of balance or coordination
- Difficulty speaking or swallowing
- Excessive sweating
- Sudden vision loss or blurred vision
- Marked swelling, even when you don't have any recent injuries
- Rapid weight loss
- Prolonged confusion
- Wounds that never seem to heal

Benefits of Yoga in Geriatric age group –

- Yoga provides a good balance, blood stream and tissue liveliness, enhance flexibility and core stabilization. If the person attends the Geriatric Yoga programme regularly, many problems, which are caused by age, can be prevented
- It is possible to reload the most essential brain functions with the relaxing characteristic of Yoga
- The person gains experience with his own existence, body and mental performance during the sessions in Yoga practices. He learns to control his body. He analyzes his emotional status about his problem. He gains ability to cope with the symptoms faced

It reduces sympathetic activity with relaxing techniques. Pain, fatigue, depression and stress decrease with relaxing response. Memory becomes retentive.

Asanas: Surya Namaskar, Pavanamuktasana, Ardha Matsyendrasana, Bhujangasana and Shavasana.

Pranayama: Nadisodhana, Kapalabhati, Bhramari, Neti, Bhastrika and Tratak.

Mudras: Khechari mudra removes diseases and old age problems. Dharana, Dhyana, Swadhyaya and Iswara Pranidhana.

Rasayana

Mandukaparni, Yastimadhu, jatamansi, Brahmi Rasayana,

Ashwagandha Lehyam, Maha Triphala Ghrita, Triphala Churna,

Ashwagandha Churna, Narasimha Rasayana, Agastya Rasayana, Amalaki Rasayana, Guggulu, Sallaki, Guduchi.

Discussion -

A healthy lifestyle is a way of life that provides, maintains, and promotes the health and well-being of the people. On the other hand, a healthy lifestyle is a way of life that reduces the risk of severe illness or early death, helping to enjoy more aspects of our lives. In other word by improving the lifestyle and improving the level of personal health of the elderly, it can prevent illness and help to improve their physical and mental health. This should be emphasized since older women often neglect early symptoms of gynecological diseases, some of which are potentially lethal. So regular gynecological evaluation in older women is an integral part of medical care.

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Review of herbs used in geriatric women

Review of ayurvedic herbs used in geriatric women

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ABSTRACT-Background-Ayurveda is a science of life and longevity. According to the Ayurveda, ageing is outcome of kala or parinama. Vata dosha is the most important factor in the pathophysiology of ageing obviously because of its natural predominance at that stage of life. Moreover, geriatric women face various health issues such as heart disease, cancer, stroke, diabetes, Alzheimer's disease, arthritis, obesity, post-menopausal symptoms, atrophic vaginitis etc. Ayurveda has suggested many herbs for delaying the process of ageing and age-related diseases. Prevention and management of health problems in geriatric women can be achieved with the use of ayurvedic herbs. Present article has focused on enhance knowledge of Ayurvedic Herbs used in geriatric women. Material and methods- Literature regarding herbs is reviewed from Nighantus, text books, research articles and websites. Haritaki, Amalaki, Shatavari, Punarnava, Shaliparni, Kumari these herbs are reviewed. Discussion and conclusion- The herbs enumerated here are rejuvenative, carminative, digestive, liver stimulants and tissue replenishers. So, these herbs are effective in various geriatric health issues and in degenerative joint disorders as well as neuromuscular disorders.

Key words: Ayurveda, herbs, geriatric women, diseases, ageing, menopause.

INTRODUCTION- Aging is the process of decaying and this manifests in the form of various degenerative changes. Although these changes are natural, they are not pleasant. Everyone is aware that a person who has taken birth must grow and finally die, but nobody wants to grow old and certainly no one wishes to die. It is the nature of a human being. Ayurveda considers ageing as the swabhava of life. Hence what all is needed is to retard the rate of aging to a limited extend and to promote healthy aging. Senior women are at greater risk than men for many conditions and are affected differently by many diseases that impact both sexes. There are numerous herbs in Ayurveda which can be used in prevention and management of geriatric diseases. Main aim of present article is to review ayurvedic herbs used in geriatric women diseases.

AIM AND OBJECTIVE- To review ayurvedic herbs used in geriatric women.

MATERIAL AND METHODS- Literature regarding herbs is reviewed from Nighantus, text books, research articles and websites.

As per fundamental principles of Tridosha, vata is the predominant dosha during old age.¹ It precipitates atrophy and involution of tissues and is responsible for most of the manifestation of ageing. With the advancing age, the depleted agni leads to decrease in the vigor and vitality with decay and atrophy due to defective metabolism. During this period, there is gradual decline of all the dhatu, virya, indriya, ojas, bala and utsaha. Ayurveda considers ageing as the Swabhavaja vyadhi i.e., it is inherent nature of the living being to get old.

Following are common disorders of geriatric women.²

1. Menopausal Syndrome
2. Urinary Incontinence
3. Indigestion
4. Constipation
5. Respiratory Disorders
6. Hypertension
7. Parkinsonism
8. Senile Dementia & Alzheimer's disease
9. Insomnia
10. Osteoarthritis and osteoporosis
11. Diabetes Mellitus

Following herbs can be used in geriatric women diseases-

1) Haritaki -हरति रोगान् /मलान् इति हरीतकी ।

L. N- Terminalia chebula

हरीतकी पञ्चरसाऽलवणा तुवरा परम् ।

रूक्षोष्णा दीपनी मेध्या स्वादुपाका रसायनी ।

चक्षुष्या लघुरायुष्या बृंहणी चानुलो मनी ॥

श्वासकासप्रमेहार्शःकुष्ठशोथोदर क्रमीन् ।

वैस्वर्यग्रहणीरोग वबन्ध वषमज्वरान् ॥

गुल्माध्मानतृषाछर्दिहिक्काकण्डूहृदामयान् ।

कामलां शूलमानाहं प्लीहानञ्च यकृत्तथा ।

अश्मरीमूत्रकृच्छ्रं च मूत्राघातं च नाशयेत् ॥ (भा. प्र. नि.) 3

Charaka has mentioned Haritaki in Vayasthapana, mahakashaya. Since it is mentioned in vayasthapana mahakashaya, it delays the process of ageing. It acts as rasayana, chakshushya, dipana, hridya, medhya, vatanumolana. It elevates the bala of mansadhatu, due to mansadhatu balavardhana it prevents dhatukshaya, balakshaya and its related vata prakopa. It acts as indriyaprasadhak and dhatuprasadhaka, so it promotes longevity. It strengthens muscles. It is beneficial in hridroga, prameha, udavarta and vibhanda.⁴

2) Amalaki- आमलते धारयति शरीरम् वा रसायनगुणान् ।

L.N- Emblica Officinalis

हरीतकीसमं धात्रीफलं कन्तु वशेषतः ।

रक्त पित्तप्रमेहघ्नं परं वृष्यं रसायनम् ॥

हन्ति वातं तदम्लत्वात्पित्तं माधुर्यशैत्यतः ।

कफं रुक्षकषायत्वात्फलं धात्र्यास्त्रिदोषजित् ॥ (भा. प्र. नि.) 5

Charaka states of all the rasayanas, Amalaki is referred as one of the most potent and nourishing. Amalaki is the best among rejuvenative herbs. Its primary quality and main therapeutic benefit is vayasthapana. It is the main ingredient of many rejuvenating compositions like Chyavanprash, a classical ayurvedic formulation which has been used as a tonic for the young and old for centuries. It acts as rakta vishodhaka, rakta prasada, dhatu shodhaka and varnya. Due to its dhatushodhana property, it excretes the mala of doshas and dhatus from body thus it enhances dhatubala.⁶ It is beneficial in prameha, rajayakshma, pradara and netra rogas.

3) Punarnava- शरीरश्च दृष्टिं पुनर्नवं करोतीति ।

L. N- Boerhavia diffusa

पुनर्नवा श्वेतमूला शोथघ्नी दीर्घपत्रिका ।

कटु कषायानुरसा पाण्डुघ्नी दीपनी परा ।

शोफानिलगरश्लेष्महरी व्रण्योदरप्रणुत् ॥ (भा. प्र. नि.) 7

Prameha, shotha, arsha, kasa, shwasa these are some of geriatric diseases caused due to excessive elevation of vata dosha (vata prakopa). Punarnava prevents vata prakopa and decaying of dhatus (dhatukshaya) by proper excretion of sharirastha mala thus it stabilizes and strengthens dhatus. It acts as vatanulomaka, mutrala, vayasthapana and dipana. It is beneficial in pandu, hridroga, shwasa and shopha.⁸

4) Shatavari- शतेन आवृणोति इति ।

L. N- Asparagus racemosus

शतावरी गुरुः शीता तिक्ता स्वाद्वी रसायनी ।

मेधाऽग्निपुष्टिदा स्निग्धा नेत्र्या गुल्मातिसारजित् ।

शुक्रस्तन्यकरी बल्या वात पत्तास्रशोथजित् ॥ (भा. प्र. नि.)⁹

It is well known as 'Queen of herbs'. This herb referred as ayurvedic rejuvenative tonic for the female. It strengthens the uterus. It helps to remove pathogens and other toxins from the body. Aids in digestion and also boosts the immune system. It helps to ease menopausal symptoms and maintain normal hormone levels within the body. It boosts energy and strength.¹⁰ It acts as balya, hridya, medhya, rasayana, chakshushya and dipana. It is beneficial in arsha, grahani, atisara, gulma, rakta roga, vatashonita etc.

5) Shaliparni- शालस्येव पर्णान्यस्याः ।

L. N- Desmodium gangeticum

शा लपर्णी गुरुश्छर्दिज्वरश्वासातिसारजित् ।

शोषदोषत्रयहरी बृंहण्युक्ता रसायनी ।

तिक्ता वषहरी स्वादुः क्षतकासकृ मप्रणुत् ॥ (भा. प्र. नि.)

It acts as dhatu bruhan due to madhur rasa, nourishes all dhatus and increase oja with madhur, snigdha guna. Also, it acts as rasayana. By madhur, snigdha and guru guna it does dhatupushti and by tikta ushna guna it does dhatwagni deepana. Moreover, Charaka has mentioned shaliparna as shothahara. It is beneficial in jwara, prameha, hridroga, vata vyadhi, vedana, shopha and daha.

6) Kumari- कुमारयति क्रीडते, कुमार क्रीडायाम् ।

L. N- Aloe vera

कुमारी भेदनी शीता तिक्ता नेत्र्या रसायनी ।

मधुरा बृंहणी बल्या वृष्या वात वषप्रणुत् ॥

गुल्मप्लीहयकृद्वृद्धकफज्वरहरी हरेत् ।

ग्रन्थ्यग्निदग्ध वस्फोट पत्तरक्तत्वगामयान् ॥(भा. प्र. नि.)

It is termed as 'Bhedini' in many nighantus because excessive intake of kumari can cause purgation. It acts as balya, bruhan and rasayana. It is helpful in geriatric women for anemic conditions. It is mainly beneficial in yakrit rogas, pleeha rogas and rakta rogas. Also beneficial in jwara, udara roga, vibandha, vedana and gulma rogas.

DISCUSSION -Most of the herbs mentioned above are grouped under vayasthapak gana of Charka Samhita. The herbs explained under this heading are mostly Madhur/Kashaya in rasa, Madhur in vipaka and hence they do dhatuposhana. E.g., Amalaki, Shaliparni, Punarnava etc. Also, the herbs of vayasthapana gana have rasayana property which helps in overall nourishment of dhatu. Rasayana drugs possess strong antioxidant property. Acharya Charka has given unique importance to vayasthapana mahakshaya for maintaining vitality and managing ageing and its allied ill effects. Some herbs like Shatavari and Kumari mentioned above are mainly helpful in gynecological conditions in geriatric women. Altogether, the herbs enumerated here are rejuvenative, carminative, digestive, liver stimulants and tissue replenishers. So, these herbs are effective in various geriatric health issues and in degenerative joint disorders as well as neuromuscular disorders.

CONCLUSION -Aging is a natural process; the body is decaying continuously, as shown by its etymology, that is, Shiryate Iti Shariram. Untimely aging is wholly preventable if the principles of Ayurveda are strictly followed. Moreover, ayurvedic herbs have minimal adverse effects so they are best in the management of geriatric health issues.

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“ROLE OF AYURVEDA IN THE MANAGEMENT OF MENOPAUSAL SYNDROME VS HRT”-A REVIEW ARTICLE

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ABSTRACT:

Ayurveda terms aging as Vradhhavastha (old age) or Jirna (degeneration), signified by Kshaya (decay). Objective of Ayurveda is to accomplish physical, mental, social and spiritual well-being by adopting preventive and promotive approaches as well as treating disease with a holistic approach. Menopausal syndrome does not find mention as disease in Ayurvedic literature, the reason could be women at that time belonged to a society which had Ayurveda as its health standard. They entered in old age as kalaja vridhhavastha (timely aging) and Rajonivritti (menopause) occurring at about age of 50 years passed uneventful.

According to contemporary medical science, this physiological transition from reproductive to post reproductive life is associated with decline in estrogen levels. Over time, this decline may be experienced as a change in the skin elasticity, altered cognitive abilities, hot flushes or flashes, night sweats, menstrual irregularities, and vaginal dryness. Other symptoms, such as depression, nervous tension, palpitations, headaches, insomnia, lack of energy, difficulty concentrating, and dizzy spells are also reported. Osteoporosis is most prevalent in women over the age of 50 as the hormonal influence of estrogen on bone health dissipates with the onset of menopause. To treat the menopause means to relieve the discomfort and disorder due to hormone deficiency and at the same time to ward off degenerative processes of old age or at least to mitigate their effects and slow down their rate of advance. Hormone replacement therapy (HRT) solves only half of the problem but to provide optimum physical and mental fitness Ayurveda is the better option for healthy long life.

Keywords: Menopause, Rajonivritti, Dhatu kshaya, kalaja vridhhavastha.

Introduction:

In Ayurveda, Menopause condition is termed as ‘Rajonivrutti’ (and menopausal syndrome as Rajonivrutti anubandhavyadhis). In Ayurved, Menopausal symptom are

regarded as imbalance of the Dosha[Vata, Pitta, Kapha] and Dhatukshya which occurs as a natural & gradual consequence of aging. Ayurveda has excellent solution for a safe & happy transition into menopause. Ayurveda, the science of life, advocates a holistic treatment of Menopausal syndrome by modification of diet & life style, utilizing various herbs and minerals and offers a reliable option to the convention treatment. Ayurvedic treatment for menopause involves correcting hormonal imbalance with appropriate diet, Samshamana therapy, internal detoxification (Panchakarma therapy), Rasayanthearpyand Yoga therapy.

• Cause of Menopause1-

1. Menopause is because by the nature declining function of the ovaries. Which gradually produces lower and lower levels the hormones oestrogen, progesterone, and testosterone.
2. Other causes include surgery that removes both ovaries or some type of chemotherapy

• Menopausal symptoms2-

- Hot flushes, Night sweats, Trouble sleeping /Insomnia, Joints pain, Fatigue, Depression, Palpitation, Vaginal dryness, Mood swing, Loss of libido, Impaired memory, Urinary incontinence

• **Ayurvedic view for Menopause-** In Ayurvedic classics Menopause condition is termed as “Rajonivrutti & Menopausal symptoms (Rajonivruttianubandhvyadhies) The whole term Rajonivrutti means end of Artava Pravritti or cessation of menstruation.

• Rajonivrutti Kala (Age of Menopause)

Though Rajonivrutti as a diseased condition is not described separately in the classic, Rajonivruttikala is mentioned by almost all Aacharya without any controversy According to Sushruta and various other references (AstangaHridayam) too 50 years is mentioned as the age of Rajonivrutti(3,4) when the body is fully in grip of senility. In Ayurveda Menopausal symptoms are regarded as “imbalance of the Dosha (Vata, Pitta, Kapha) which occurs as a natural and gradual consequence of aging.

• Nidana of Rajonivrutti:

The specific reasons for Rajonivrutti are not described in the Ayurvedic texts. But the most probable reasons for it to occur are:(5)

- (1) Swabhava
- (2) Jarapakvasharira due to kala

(3) Dhatukshaya

(4) Effect of dosha

(5) Vayu

(6) Abhighata

Menopausal symptoms in Ayurveda:

• (Rajoniviruttianubandhlakshan)(6)-

a) Vata dominant menopausal symptoms- Dryness in vagina, extremities get cold, difficulty in getting sleep, mild to variable hot flushes (Invariable), anxiety, panic, nervousness, mood swings, dry skin, palpitations, bloating and constipation

b) Pitta dominant menopausal symptoms-Angry, irritable, excess hot flushes, night sweats, extremely heavy periods with burning sensation, skin rashes, associated complaints such as UTI (urinary tract infection).

c) Kapha dominant menopausal Symptoms-Weight gain, heavy, lethargy, depression, lack of motivation, hormonal changes such as Thyroid malfunction, fibrocystic changes in uterus or in the breast and excessive fluid retention .

Ayurvedic Management For Menopausal Syndrome:-

Most of the Menopause Symptoms are due the Vata aggravation followed by other Doshic factors. The basic concept of Ayurvedic medicine is “Swasthasya swasthyararakshanam and aturasya vikaraprasamanam cha” prevention is better than cure. In the early pre- menopause stage it is better to balance the aggravated or underplaying factors, so that the intensity of the menopause symptoms will be far less or even can be negligible. In order to achieve this one should follow the Dosha based diet and life style principles followed by Ayurvedic herbs on regular basis. If still symptoms persists, it better to undergo “Panchakarma”(Ayurvedic detoxification), which helps in the elimination of vitiated humours or Doshas to bring them to balanced stage, then it is advisable to take few Ayurvedic herbs or decoction and other preparation to make the transition more graceful. Ayurveda has excellent solution for a safe and happy transition into menopause .

Ayurvedic Treatment for Menopausal Symptoms involves correcting Dosha imbalance with appropriate diet, samshamana therapy, internal detoxification (panchakarma therapy/samshodhan therapy), Sattvavajayachikitsa, Yogatherapy, Rasayan therapy.

1. Ayurvedic diet and herbs-

(a) For Vata Dominant Menopause-

Diet - Increase warm food and drinks, regular meals, and use spices such as fennel and cumin. Decrease caffeine and other stimulants, refined sugar, cold drinks, salads.

Lifestyle - Early bedtime, oil massage using almond and olive oil, meditation, yoga, Regular exercise like walking

Herbs- Ashwagandha (Withaniasomnifera), Arjuna (Terminaliaarjuna), Cardamom (Elettariacardomam), Garlic (Allium sativum), Guggul (Commiphoramukul), Sandalwood (Santalum alba) and Zizphus (ziziphusjube).

(b) For Pitta Dominant Menopause-

Diet - Increase cooling foods, water intake, sweet juicy fruits (grapes, pears, plums, mango, melons, apples,) zucchini, yellow squash, cucumber, organic foods. Use spices such as cinnamon, cardamom and fennel. Avoid hot spicy foods, hot drink , alcohol.

Lifestyle - Oil massage using coconut and sesame oil. Use Meditation and other techniques to reduce anger, hatred and resentment. Exercise and exposure to the sun are limited.

Herbs - Aloe vera, Arjuna (Terminaliaarjuna), Amla (Emblicaoffcinalis), Saffron (crocus sativus), Sandalwood and Use spices such as cinnamon, cardamom and fennel.

(c) For Kapha Dominant Menopause-

Diet – Prefer light, dry and warm food, Consume fruits, whole grains, legumes, vegetables. Use spices such as black pepper, turmeric and ginger. Avoid meat, cheese, sugar, cold foods and drinks. Weekly fasting is helpful. Most or all of the daily food should be consumed before 6 p.m.

Lifestyle - Get up early. Mustard oil and linseed oil are often recommended for massage.

Herbs- Cinnamon, Guggul (Commiphoramukul), Mustard (Brassicianigra), Haritki (Terminaliachabula), Nagarmotha (Cyperusrotundus).

1. Samshamana Therapy- Agnideepana, Amapachana, Anulomana, Balya ,
2. Sattvavjaya Chikitsa- counselling and Reassurance
3. Panch karma therapy- Panchkarmachikitsa are physical therapies that thoroughly cleanse and purify the physical and mental impurities from the body and mind. The general purpose of the Panchakarma therapies is to loosen, liquefy and remove the vitiated substances and Doshas from their abnormal sites in peripheral tissues via their natural pathway of elimination. More serious symptoms, such as frequent

hot flashes, sleep disturbance, and moderate to severe mood swings, are signs of deeper imbalances. Ayurveda describes that these stubborn symptoms are usually due to the build-up of wastes and toxins, referred to as "Aama," in the body's tissues. In this case, a traditional Ayurvedic detoxification programme "Panchakarma" may be needed to clear the body's channels and gain relief. This internal cleansing approach is also the treatment of choice for more serious problems such as osteoporosis and high cholesterol. Panchakarma- Abhyanga(Massage), Mriduswedana, Shiro dhara, Mridu Virechan, Basti

4. Yoga therapy

5. Rasayana Therapy 7,8-Triphala:- Triphala consisting of Haritaki (Terminalia chebula), Vibhitaki (Terminalia bellerica), Amalaki (Emblica officinalis), pacify all the three Doshas & also is an excellent Vayasthapana (anti-aging agent) Ashwagandha (Withania somnifera)- It is a powerful antioxidant & immune modulator. It is one that improves strength, muscle mass, relieves stress. In Menopause patient, it controls effectively the vasomotor symptoms (Hot flushes, night sweats, palpitation) Yasthimadhu (Glycyrrhiza glabra)- It is another Rasayana drug which is prescribed for Menopause. It is an excellent antioxidant, Immuno modulator & anti-depressant, memory enhancer. It is described as a promoting agent for life, voice, hair, complexion, strength & libido. rugs Classical anti-aging Formulation e.g. CHYAVAN PRASHA & BRAHM RASAYAN

• DISCUSSION

Menopause is generally defined as the cessation of menses for period of 12 months or a period equivalent to three previous cycles or the time of cessation of ovarian function resulting in permanent amenorrhea. During the period of menopause the woman enters an estrogen deficient phase which leads to the various symptoms. This period is generally associated with manifestation of aging process in women. Hormone Replacement Therapy (HRT) is the only alternative available for menopausal syndrome in modern medicine. It also has a wide range of side effects on the body of the female. While hormone therapy (HT) helps many women get through menopause, the treatment (like any prescription or even non-prescription medicines) is not risk-free. Known health risks include: An increased risk of endometrial cancer (only if you still have your uterus and are not taking a progestin along with estrogen). Increased risk of blood clots and stroke. Increased chance of gallbladder/gallstone problems. Increased risk of dementia if hormone therapy is started after midlife. HT started during midlife is associated with a reduced risk of Alzheimer's disease and dementia. Increased risk of breast cancer with long-term use. Menopause is linked with Vata dosha dominated stage of life. Therefore symptoms in menopausal phase like insomnia, anxiety, urinary symptoms, osteoporotic

changes are due to dominance of Vata dosha. Along with that Pitta dosha symptoms like hot flushes, irritability, etc are seen, during this phase. Degenerative changes are explained in Ayurveda as Dhatukshaya lakshana. Sushruta Acharya has explained that there is Shareera-shithilta in Vrudha-avastha (old age) and women attains Rajonivritti stage at around 50 years. This age is dominated by Vatadosha, this dominant Vatadosha affects the female body.[5] The dominant Vata dosha specially with Laghu and Ruksha guna results in reduction in Dravata of Rasa dhatu. This further leads to Dhatukshya starting from Rasa dhatu, further respective Updhatu kshaya takes place. Thus leading to Artava nasha (amenorrhea). The vitiated Vata dosha also disturbs the other Sharir as well as Manas dosha (Raja and Tama dosha) leading to various psychological disturbances.

- To combat the degenerative process of the body tissue Acharyas have described Rasayana Chikitsa. Rasayana includes drugs which promotes longevity and improve the quality of life and correcting Dosha imbalance with appropriate diet, samshamana therapy, internal detoxification (panchakarma therapy/ samshodhantherapy), Sattvavjayachikitsa, Yogatherapy.

Conclusion:

To treat the menopause means to relieve the discomfort and disorder due to hormone deficiency and at the same time to ward off degenerative processes of old age or at least to mitigate their effects and slow down their rate of advance. Hormone replacement therapy (HRT) solves only half of the problem but to provide optimum physical and mental fitness Ayurveda is the better option for healthy long life.

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Role of Ayurveda in Menopause vs HRT

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Abstract

Menopause though a physiological entity in women, hormonal changes continue long after the FMP (Final menstrual period). This episode of dynamic neuroendocrine changes characterized by distressing clinical symptoms such as reduced fertility, menstrual irregularities, vasomotor symptoms, physical changes impacting skin and uro-genital tract, skeletal and cardiovascular pathology are affecting the woman's day to day life. In such situation it is customary to prescribe HRT (Hormone Replacement Therapy) by and large. Over the last few years due to the ambiguity of the potential risks of HRT there is a difficult situation in whether to or not to resort to HRT during menopause. Although the approach to menopause and the symptoms appearing in the current era is contrasting due to lifestyle changes, multitasking and stress, thus, lifestyle modifications should be the first-line approach for women with menopausal symptoms. Ayurvedic management have proven to be beneficial in such circumstances in easing this transitional period by giving symptomatic support without any adverse effect on the health status of the woman.

Context: During Menopausal transition the body gives out symptoms due to the cessation of ovarian response to Pituitary Gonadotrophin till it adjusts itself to this oestrogen deficiency. HRT is an extrinsic hormonal therapy that tries to postpone this transition and it is not advised for long term use. Weaning of HRT contributes to tenfold withdrawal symptoms compared to the actual transitional symptoms of menopause itself. Neither the natural physiology of menopause can be stopped nor the reproductive age can be postponed. Ayurveda approaches Menopause with symptomatic therapies and phytoestrogens that neutralises this hormonal instability naturally.

Aim: To understand the utility of Ayurveda as a prospective support system during the transitional period of Menopause and to discuss about the intrinsic risk of HRT.

Key words: Menopause, Menopausal transition, Ayurveda, HRT

Introduction:

Around 200 years ago only 30% of women lived through menopause whereas in the current era 90% will live. Rajonivritti in Ayurveda is an indicative syndrome of Jarakala which lies in the conjuncture of later part of reproductive age and beginning of senile age. During this period there is an exacerbation of Pitta and Vata. Healthcare community is in a dilemma on how to curb these symptoms though physiological, hampering the routine activities of a woman. The symptoms caused due to this shift in the hormonal interplay caused by the hypoactivities of Ovarian hormones are more compelling in women in the current generation than the previous generation. Women in the current epoch bear multiple facets in home making, parenting and career which leads them to multitask efficiently to meet all these multifaceted demands. This further adds on to mental stress. Maintenance of peri and post-menopausal health is therefore of utmost importance to minimize the economic impact caused due to this debilitating physiology afflicting our ageing society.

Impact of Menopause on Women's health:

The cessation of menstruation at the end of fertility period around 55 years is menopause. Menopause is one of the episodes of Climacteric. Ovarian response to Pituitary Gonadotrophins is reduced and Ovarian function ceases leading to deficiency in Estrogen, progesterone and androgens. Climacteric occurs due to the waning function of ovaries, which manifests by physical and psychological changes in the body.

The climacteric symptoms may be divided into the following groups

- Vasomotor symptoms like hot flushes are thought to be due to the estrogen withdrawal and a labile vasomotor system.
- Cardiovascular symptoms- Hypertension, Palpitation and Heart disease. The incidence of Coronary thrombosis before menopause is shallow. Women develop coronary heart disease (CHD) several years later than men, with a notable increase in CHD risk during midlife,² a period coincident with the menopause transition.
- Psychological and neurological symptoms- Changes in mood and depression are due to anxiety of losing fertility. These symptoms are either exaggerated post menopause or in some cases developed during the menopausal transition.
- General symptoms and physical symptoms- General symptoms like insomnia, general weakness, fatigue, headache, vertigo, breast tenderness and skin pigmentation are not uncommon. Gastro intestinal symptoms like loss of appetite, indigestion and constipation are also seen frequently.

- Physical changes seen due to the withdrawal of estrogen escorts the reduction in collagen tissue in all the organs of the body i.e., bone, skin and Genito- urinary systems. Some of the physical changes noticed after menopause are atrophy of secondary sexual characters like breast regression, thinning of vulval skin and narrowing of introitus. There is marked atrophy of internal genital organs including uterus, ovaries and supporting ligaments of genital tract. After menopause osteoclastic activity stops. The hypoestrogenic state leads to activation of bone remodelling units with excess of bone resorption relative to formation in turn paving way to Osteoporosis.

HRT in Menopause: When hormones are prescribed for climacteric symptoms, they are prescribed in Estrogens only (Rx of choice for patients who had hysterectomy), Estrogens and progestogens (Patients who have intact uterus), Estrogens and Androgens (especially in symptomatic relief of patients with vasomotor symptoms)

HRT is not advisable for more than 6 months and beyond usage of 5 years³ there is threat for Carcinoma of breast and endometrium. HRT is the only treatment modality approved by the USA FDA but all the menopausal symptoms are not relived by HRT alone. Many other non-approved alternative medicines like SSRIs (Selective Serotonin Reuptake Inhibitors), Gamma-aminobutyric acid (GABA) etc are also prescribed but either these are contraindicated in certain health conditions or some of these have substantial side effects. Menopause is not just an oestrogen deficient state but also exhibits a wide range of secondary health complications.

Contemporary medical systems manage these symptoms by the long-term use of sedatives, hypnotics, and anxiolytic drugs, which may lead to various side effects like drowsiness, impaired motor function, loss of memory, allergic reactions, non-social behaviours, drug dependence. Considering the intensity of the side effects caused by HRT as well as the adjuvant medications used in the management of Menopausal symptoms it is the need of the hour to detect safe and effective Ayurvedic management without any adverse effect in curbing the symptoms affecting the menopausal women.

Ayurvedic Approach to Menopause: In ayurvedic classics there is mentioning of a woman's last epoch of life which is a junction between the last part of reproductive life (madhyamavastha) and beginning of senile age (Vridhavastha) around the age of 50 years. It is mentioned as Rajonivriti kala or end of menstruation. There are references of this state as Surathotsaravarjitha (incapable of sexual indulgence), where the integrity of dhatus are lost leading to slow degeneration of upadatus i.e. raja and stanya. There is evident vata dosha vridhi and dhatu kshaya lakshana.

Symptoms like hot flushes are dealt with the help of Pita shamana dravyas for the thermo regulation and something which are coolant in nature Eg: Vanga bhasma, Guduchi satwa/ Kashaya, Kamadugda rasa etc. In cardiovascular symptoms Hridhya dravyas like Arjuna and prabhakara vati are utilized. In psychological and neurological symptoms, brain tonic / medhya aushadas like brahmi, jatamamsi are employed. For gastro intestinal symptoms, drugs like jeeraka, jyothishmati with properties of Dipana, Pachana and raktha shodana are used.

In the physical changes caused due to menopause utility of Pravala bhasma along with other herbal phytoestrogen in treating calcium deficiency leading to osteoporosis are utilized. Arjuna, jatamamsi, kukkudanda twak bhasma, yashada bhasma etc is also very effective in osteoporosis. Drugs like Bala, Ashwagandha are great rasayana dravyas in Dhātu poshana and nourishing the skin. Shatavari, Guduchi, Ashoka, Gokshura, musta have proved beneficial in vaginal dryness.

Conclusion: With Ayurvedic medicines containing phytoestrogens this hormonal imbalance can be neutralized in the most natural way and is the best way to curtail menopause transitional symptoms. The binding affinities for oestrogen receptors by phytoestrogen is very different from that of synthetic oestrogens⁴. Phytoestrogens uses selective receptor therapy which prevents overdosing. Phytoestrogens have been classified as natural SERMs⁵(Selective oestrogen receptor modulator), and a review of cell and animal studies of phytoestrogens reveals similarities to SERMs. Due to the possible risk of HRT and other alternatives drugs used in allopathic practise it is important to bring out the age-old prescriptions in Ayurveda utilized in menopausal transitional period using the logic of the physician.

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SUKHPARUDHA 2021

HERBS USED IN GERIATRIC WOMEN

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ABSTRACT

In Ayurveda herb is referred as a dravya. Herbs may also called as botanical products or phytomedicines. Geriatric woman is any elderly woman. Human passion on herbal medicine dated back to times immemorial. In Ayurveda we found that dravya that is herbs have played major part in pharmacotherapy since the Vedic period of India. Aging increases the prevalence of disease in women. At the menopausal age symptoms gets started troubling woman. Geriatric is described as Vrudhavstha or Jirnavastha in Ayurveda. It is categorized under natural & Yapya (Palliative) Disease.[1] Ayurveda has solution of every misery of human and Aging is one of the these. So, every problem in geriatric woman has an answer in Ayurveda.

Key words- Dravya, Vrudhavsth, Yapya, Jara, Jirnavastha

INTRODUCTION

Jara is last stage of life & is one among classification of vay. The Vriddhavastha or Jirnavastha is the last phase of life and is represented by the decay or de- generation of the body. Sushrutacharya has mentioned ‘Jara’ (ageing) under ‘Swabhavabalapravritta vyadhi’ which is of two types Viz. Kalaja (Parirakshanakrita), appearing at proper time even after proper protection and Akalaja (Aparirakshanakrita), appearing before proper time due to improper care and prevention. [2]

In both conditions kalaj jara & akalj jara herbs plays important role in prevention & management also. In Ayurveda herbs used in different forms & types to prevent the Akalaj jara & management of Kalaj jara makes life easy & happy forever.

AIM To study the use of herbs in geriatric Women.

OBJECTIVE

To elaborate the problems in geriatric women and its management through various herbs.

MATERIAL & METHOD

Review of literature from various Samhita and other Ayurveda literatures related to geriatric women problems & herbs, and form of e-sources compiled.

CONCEPTUAL STUDY

Reference of Geriatric in Ayurveda as Jara chikitsa:

कायबालग्रहोर्ध्वाङ्गशल्यदंष्ट्राजरावृषान् ॥

अष्टावङ्गानि तस्याहुश्चि कत्सा येषु सं श्रता ।[3]

Acharya Sushrut gives an elaborate and systemic classification of age, where he described old age as above 70 years. [4]

Acharya Charak on the other hand mentioned old age above 60 years [5]

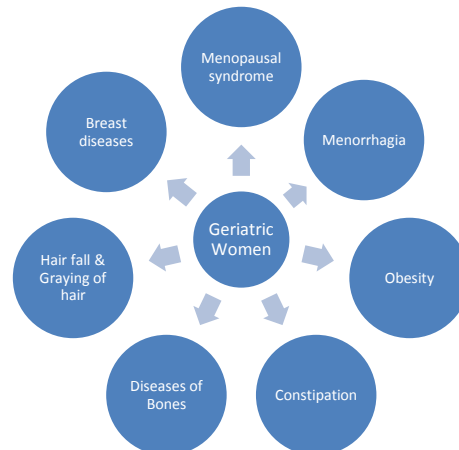
Reference of Herbs in Ayurveda

जगत्येवमनौषधम् ।

न कं चद् वद्यते द्रव्यं वशान्नानार्थयोगयोः ॥ अ. ह. सू. ९

According to Acharya Vagbhat: Every dravya in this world is a medicine. No herb or dravya is present in this world which is not a medicine. Various permutation & combination with various methods are always useful in some way as medicine. [6]

Fig.no. 1 -Major Problems of Geriatric Women



HAIR FALL & GRAYING OF HAIR-

Hair fall & graying of hair is minor disease but it affects social & mental health of woman in this era

- Bhrngaraja (*Eclipta alba*), Japapushpa (*Hibiscus rosa-sinensis*), Amalaki (*Embelica officinalis*), Triphala (Amalaki+Haritaki+ Bibhitak) are very useful as single drug as well as in formulation of oil, tablet many more product.
- Kesya meaning a conducive to the growth of hair. Some of Kesya dravya described Bhavprakash Nighantu are as follows: Vibhitaki (Phala) *Terminalia bellirica*, Sindhuvara (panchang) *Vitex negundo*, Yastimadhu (Moola) *Glycyrrhiza glabra*, Gunja (Seeds) *Abrus precatorious*, Bakuchi (Phala) *Psoralea corylifolia*, Neeli (Panchang) *Indigofera tinctoria*, Bhallataka (Vrint) *Semicarpus anacardium*, Bhringraja (Panchang) *Eclipta alba*, Gambhari (Phala) *Gemelina arborea* ^[8].

BREAST DISEASES:

- Shatavri (*Asparagus racemosus*)- Helps in strengthening & nourishing the breast.
- Kumari (aloe vera)- Kumari has been known to curb the growth of breast & cervical Cancer cells. Regular consumption of aloe vera helps to strengthen the duct of breast.
- Punarnava (*Boerhavia diffusa*)- It helps to clear ama reduces breast tenderness.
- Methi seeds (*Trigonella foenum-graecum*)- It prevents the buildup of ama around the breast tissue.
- Yashtimadhu (*Glyceriza glabra*)- It is powerful anticancerous & hormone balancing properties, it also cleanses the lymphatic fluid, helping the body flush out toxins that are bad for breast tissue ^[9]

MEANOPAUSAL SYMPTOMS:

- Hot flashes are the characteristic symptom of menopause. Sudden feeling of heat followed by profuse sweating is seen ^[10]
- Estrogen deficiency produces atrophic epithelial changes in Genitourinary system.
- Shatavari (*Asparagus racemosus*) churn with milk reduces hot flashes, Dyspareunia along with dysuria & also aids in reducing anxiety; encouraging libido.
- Yashtimadhu (*Glyceriza glabra*)- When used in tea & consumed, helps to decrease the frequency & intensity of hot flashes. It has estrogen like effect that can help women with their transition as natural estrogen declines ^[11]
- Dhanyak (*Coriander sativum*)-water soaked with dhanyak churn overnight called dhanyak Him helps in trouble sleeping & night sweats.

- In geriatric women at menopausal age Insomnia, Depression, Mood swings are some major issues herbs like Brahmi (*Bacopa monnieri*), Jatamansi (*Nardostachyas jatamansi*), Vacha (*Acorus calamus*) are very useful.

MENORRHAGIA:

Heavy bleeding per vaginally is major symptom of underlying pathology & has great impact on woman's day to activity.

- Til (*Sesamum indicum*) churn with curd or honey is mentioned
- Guduchi (*Tinospora cordifolia*) - Juice of guduchi helps to reduce heavy menstrual bleeding.
- Bala (*sida cordifolia*)- Bala mool paste with milk.
- Indrayav (*Holarrhena antidysenterica*)- Indrayav churn with sharkara with its properties helps to detoxify the blood.
- Ashok (*Saraka asoca*)-Cold milk boiled with the decoction of ashoka bark is useful in menorrhagia.^[12]

OBESITY:

Obesity is defined as abnormal or excessive fat accumulation that presents risk to health. Geriatric women with obesity have difficulties in daily activity too.

- Guggulu (*Commiphora mukul*) - Crude guggul as well many combinations of guggul proved as Anti-obesity & Hypolipidemic/hypocholesterolemia activity in practice and in research too.
- Guduchi (*Tinospora cordifolia*) Vidang (*Embelia ribes*), Musta(*Cyperus rotundus*), Shunthi (*Zingiber officinale*), Amala (*Embelica officinalis*), Vacha (*Acorus calamus*) are some herbs when used in proper dose at proper condition gives excellent results in obesity in women.

CONSTIPATION:

Constipation is general term used to indicate hard stools, painful defecation and feeling of bloating, abdominal discomfort or incomplete evacuation. Constipation is similar to vibandha described in Ayurveda

It is a troublesome problem in many of a geriatric woman's life.

Herbs like Erand (*Ricinus Communis*), Draksha (*Vitis vinifera*), Haritaki(*Terminalia chebula*), Aragvadha (*Cassia fistula*), Isabgol Husk (*Plantago ovata*) are very useful in day to day life with no harm to body if used in proper doses & forms.

Few simple measures like consumption of light and easily digestible high fibre diet including fruits, green leafy vegetables, drinking plenty of fluids and regular exercise helps to prevent constipation.

DISEASES OF BONES

- Osteoporosis and Fracture are common after menopause due to decline in collagenous bone matrix resulting in osteoporotic changes.
- Bone loss increase to 5% per year.
- Shallaki (*Boswellia serata*)[13]& Guggulu (*Commiphora mukul*)[14]have shown improvement in the patients of osteoarthritis.
- Herbs like Ashwagandha(*Withania somnifera*) , Asthishrunkhala(*Cissus quadrangularis*) helps to make bones strong.

CONCLUSION:

In conclusion it can be pointed out that, Natural Herbs & their combination is great solution of geriatric Women's problems .But along with herbs in Ayurveda there are multiple therapies, Herbo mineral preparations, lifestyle modification , daily regime according prakruti of every woman is the forever beneficial to the woman's life. Here some herbs are elaborated but there are huge number of herbs that can be useful in either way to Geriatric women.

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Role of Ayurveda in menopause vs HRT

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ABSTRACT-

Menopause is a natural phenomenon occurs at the age of 45-55 years. After the age of 40 years, ovaries reduce their production of sex hormones. As a result, the menses as well as other body functions are disturbed. Finally the menses cease permanently.

The physiological function of most organ systems tends to decline with age, but there is a wide individual variability. Every person deserves precise diagnosis and assessment of function together with individually tailored management. The climacteric is a critical period in women's life where loss of ovarian follicular activity is characterized biologically by decline in fertility, endocrinologically by alteration of hormone levels, and clinically by variation in menstrual cycle length and experience of a variety of symptoms. For decades, estrogen, either alone or in combination with progestins (HRT) has been the therapy of choice.

To treat the menopause means to relieve the discomfort and disorder due to hormone deficiency and at the same time to ward off degenerative processes of old age or at least to mitigate their effects and slow down their rate of advance. Hormone replacement therapy (HRT) solves only half of the problem but to provide optimum physical and mental fitness search for the safe alternatives other than HRT are warranted.

To understand the rationale of therapy, it is important to understand the problem according to fundamental principles of Ayurveda. It also lists the group of drugs that can be used in aging population to alleviate menopausal as well as associated aging problems, tailored according to the individual needs.

KEYWORDS: Menopause, Rajonivritti, Dhatu kshaya, HRT, Vayahsthapan.

INTRODUCTION :

Each phase of a women's life is beautiful and should be considered as gracious. Right from the moment that she entered the world, or when she steps in adolescence which makes her capable to be prepared to experience motherhood, or finally the transition to menopause.

Natural menopause is associated with unavoidable manifestations of aging process in women. As a person grows old, the organ function is challenged both by the diseases and by the physiologic processes associated with ageing. Management of menopause involves management of age related changes, its allied ill effects and menopausal symptoms occurring due to failing follicular activity.

The word 'Menopause' comes from the greek word 'Menos'(month) & 'Pausis' (cessation). Menopause is a natural phenomenon occurs at the age of 45-55 years. Menopause means permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity. Needless to say that this phase also marks the end of natural fertility in a woman. Irregular periods, hot flushes, night sweats, vaginal dryness and mood swings all these are typical symptoms of menopause. Osteoporosis, heart disease and Alzheimer's disease (progressive loss of memory and concentration) are the long-term hazards of menopause. The group of signs and symptoms associated with the phase of menopause are termed as menopausal syndrome. Menopause has become an inevitable phenomenon in a woman's life and many years are spent in the postmenopausal phase. In this millennium, a woman perceives menopause as an opportunity to concentrate on new activities and bring out the best in her. Consequently, treatment of this transitional phase has now gained more importance than ever before.

MODERN VIEW OF MENOPAUSE:-

According to contemporary medical science, this physiological transition from reproductive to post reproductive life is associated with decline in estrogen levels. Over time, this decline may be experienced as a change in the skin elasticity, altered cognitive abilities, hot flushes or flashes, night sweats, menstrual irregularities, and vaginal dryness. Other symptoms, such as depression, nervous tension, palpitations, headaches, insomnia, lack of energy, difficulty concentrating, and dizzy spells are also reported. Osteoporosis is most prevalent in women over the age of 50 as the hormonal influence of estrogen on bone health dissipates with the onset of menopause. The progressive changes in bone structure, quality and density lead to pathological fractures and an increase in morbidity and mortality among menopausal women. Osteoarthritis, the most common articular disorder begins asymptotically in the 2nd and 3rd decades and is extremely common by age 70. Almost all persons by age 40 have some pathologic change in weight bearing joint .

To treat the menopause means to relieve the discomfort and disorder due to hormone deficiency and at the same time to ward off degenerative processes of old age or at least to mitigate their effects and slow down their rate of advance. Hormone replacement therapy (HRT) solves only half of the problem but to provide optimum physical and

mental fitness search for alternatives other than HRT are warranted. To understand the rationale of therapy, it is important to understand the problem according to fundamental principles of Ayurveda.

AYURVEDIC CONCEPT OF MENOPAUSE:

In Ayurveda classics Menopause condition is termed as “Rajonivrutti& Menopausal symptoms (Rajonivruttianubandh vyadhies) the whole term Rajonivrutti means end of Artava Pravritti or cessation of menstruation. Rajonivrutti Kala (Age of Menopause): Though Rajonivrutti as a diseased condition is not described separately in the classic, Rajonivruttikala is mentioned by almost all Aacharya without any controversy. According to Sushruta and various other references (Astanga Hridayam) to 50 years is mentioned as the age of Rajonivrutti when the body is fully in grip of senility. In Ayurveda Menopausal symptoms are regarded as “imbalance of the Dosha (Vata, Pitta, Kapha) which occurs as a natural and gradual consequence of aging.

Ayurveda considers aging Nishpratikriya (changes cannot be resisted) and Swabhavabal Roga (natural disease). Rajonivrutti (menopause) occurring in Jarapakva Shareer (aged body) at the age of 50 years is comparable to the present day studies showing the mean age of menopause to be 51 years. With advancing age there is gradual diminution in the qualities of Dosha, Dhatu, Mala, Agni and Oja.

Artava (menstrual blood) is an Upadhatu (secondary constituent), formed from Rasa Dhatu within a month after proper metabolization of Rakta dhatu by its dhatvagni and bhutagni. The kshaya of Rakta dhatu causes Artava kshaya due to utarottar dhatu kshaya. Kshaya of Updhatu Artava and Shukra, manifest as cessation of menstruation and decreased libido. Further, due to same reasons loss of Ojas (body immunity) makes women more susceptible to illness.

Dhatukshysya leads to Vata Vitiatio. With advancing age, progressive vitiation of Vata due to its fundamental properties, This may explain various symptoms of menopause related to degenerative changes in body such as urogenital atrophy, thinning of the membranes of the vulva, vagina, cervix, and also of the outer urinary tract, shrinking and loss in elasticity of all of the outer and inner genital areas and skin, breast atrophy, decreased libido, problems reaching orgasm and dyspareunia or painful intercourse.

Ama, formed due to mandagni (slow/hypo- function of digestive fire) causes strotovarodh (obstruction of channels), which in turn increases Medo -dushti (disorders of fat metabolism) and decreases the nutrient supply to subsequent Dhatus, Increased accumulation of Meda (fat/adipose tissue) and Mamsa (flesh/muscle tissue) Dhatu can

cause the weight gain, one of the biggest complaints associated with aging. Body weight increases with age. Further, vitiated Vata due to kshaya of Rasa Dhatu when gets lodged in Sandhi (joints), causes Sandhigata Vata (osteoarthritis/osteoporosis)

Although all the three Dosha (Vata, Pitta and Kapha) are always present in body, their relative predominance changes in different conditions and ages. The menopause transition represents a period of dynamic change from middle age to old age. This transition from Pitta dominance to Vata dominance causes most of the symptoms associated with menopause.

MANAGEMENT PROTOCOL

Two main components which need to be addressed in women having problems during menopause are advancing age and allied changes, and menopausal symptoms. An intellectual adoption of the suitable treatment options which includes planned usage of multiple variables as per individual needs is best approach for its management

Aging, though considered Nishpratikriya (changes cannot be resisted) has been dealt scientifically in Ayurveda. Emphasizing Ayu (lifespan), its chikitsa (therapeutics) is called as Vaya Sthapana (age stabilizing). Ayurveda Avatarana (descent of Ayurveda on earth) has been guided by zeal of mankind to have Dirgha Hitakara and Sukhakara Ayu (a longer healthy and happy life). It recommends the countering of aging and related changes by use of Vayasthapak drugs (age stabilizers), to rejuvenate the aged body by Jeevneeya drugs (vitalisers) and for allied aging problems Jarachikitsa i.e. Rasayana Chikitsa (rejuvenating process and formulations).

For menopausal symptoms occurring due to in-equilibrium in Dosha status a wide range of options can be used. This approach should begin with eliciting the potential symptoms at individual level. For women who are encountering depression, which may or may not be directly related to menopause, the treatment needs are quite different from a woman who has no such problem but is experiencing hot flashes.

Due to this high individual variability there is need to develop guidelines that can be tailored as per individual and not just based on risk profile and symptoms. As demographic, life style and health related factors have considerable impact on disease outcome, symptomatic management of menopausal symptom needs to be addressed at individual level.

PREVENTIVE MEASURES ACCORDING TO AYURVEDA:

The most important part of therapeutics in Ayurveda is Swasthyashya Swasthya Rakshanam (to maintain the health). Preventive measures are significantly preferred. The first and foremost objective of chikitsa in Ayurveda is Dhatusamya (homeostasis) and is

the most important component of preventive medicine. Observing Dincharya (daily regimen), Ritucharya (seasonal regimen), regular removal of aggravated Dosha according to Ritu (season) by Panchakarma are the means to keep dosha in harmony; Ahara Vidhi Visheshayatanam (Rules of proper dietary intake), regular utilization of Rasayana (rejuvenation therapies); are various other tools to maintain the homeostasis of the body. Incorporated well in time at the advent of middle age it may not only prevent symptoms related to hormonal changes affecting the body but also save from Akalaj Vradhhavastha (untimely degenerative changes) and other troublesome outcomes related with aging.

As there is natural vitiation of vata dosha with advancing age it is important to avoid the provocative causes of Vata dosha as a preventive measure.

THERAPEUTIC INTERVENTION

Snehan Karma (oleation therapy) is recommended treatment for Vata- vitiation; it can be done externally and internally. The therapy of choice for Vata vitiation is Basti (medicated enema). Basti therapy is considered as prime among all the therapeutic measures, especially for management of Vata disorders, and is accepted as a complete therapeutic measure by many physicians. Yapana basti (a type of enema having palliative property) can be recommended in general. Matra Basti with medicated oils such as Sukumar Ghrita, Dhanvantari Tail etc. can be used. As for example Basti with Tikta Dravya Ghrita and Kshira is recommended in Asthi kshaya .Tikta Rasa by its Deepana (appetite stimulant), Paachana (digestive) and Rochana (stomachic) properties increases the Dhatvagni (metabolic stage). With increased Dhatvagni, nutrition of all seven Dhatu is improved and thus it checks Asthi kshaya. Tikta Rasa by its Lekhana (scraping) property helps in the weight reduction and thus supports the management of Osteoarthritis .

Abhyanga (unctuous body massage) with various medicated oils such as Mahanarayan Taila, Ksheerbala Tail or Masa Tails for external snehan done regularly as daily routine to check vitiating Vata may also prove useful.

For symptoms occurring due to transition from madhayamavasth (pitta dominant phase) to vradhhavastha (vata dominant), use of Ghrita can be recommended. Ghrita is Vata-pitta shamaka (pacifying), Balya (strengthening), Agnivardhaka (promoting digestion), Madhura, Saumya (agreeable), Sheeta-Virya (cooling in effect), Shulahara (pain relieving), Jwar-hara (antipyretic), Vrishya (aphrodisiac) and Vayasthapaka (age stabilizer). Thus, it not only pacifies Vata and Pitta but also improves the general condition of the body and acts as a rejuvenator of the body. Ghrita is Yogavahi (special affinity to carry and to potentiate the actions of the main drug to which it is mixed) and thus helps in increasing bio-availability of other drugs without losing its own property.

Medicated ghrita such as Amalak Ghrita, Shatavari ghrita, Guduchi ghrita, Chitraka ghrita, Panchakola ghrita and Panchatikta ghrita are various medicated Ghrita preparations suitable for menopausal women.

MEDICINAL PLANTS-

Ayurvedic literature is treasure trove of medicinal plants and herbs. Listed below are names for treatment and management of menopausal symptoms and associated problems.

Vayasthapak Aushadha- (Age stabilizer drugs) According to Ayurvedic classification, drugs of this group may possess age sustaining and health promotive properties.

Jeevaneeya Aushadha- (Vitalizers/ restorative drugs) , Drugs of this group may promote longevity and optimize all the vital constituents and functions in the body.

Balya Mahakashaya- (improving strength), the drugs of this group improve vigour and power in body.

Rasayan Chikitsa- (rejuvenation therapy), is a unique concept of Ayurveda. It provides a comprehensive physiologic and metabolic restoration for aging. Rasayana chikitsa is mainly used for maintaining the health of healthy individuals although it can be used for diseased also. The word Rasa in rasayan has multiple references; it refers to the Rasa Dhatu in the context of Rasadi Sapta Dhatu (body tissues) and to the pharmacodynamic properties of a drug in the context of Rasa Guna etc. Ayana means circulation, the measures by which one is capable of getting the nourishing Rasa. Acting through a complex and comprehensive mechanism of rasa-samvahan (circulation of nutrient juices), dhatu, agni and srotas, it nourishes bodily tissues through micro-nutrition, thus helping in regeneration, revival and revitalization of Dhatu. Acting at all levels of Rasa are the drugs such as Draksha (*Vitis vinifera* Linn.), milk, Shatavari (*Asparagus racemosus*), Salparni (*Desmodium gangeticum*) etc. they act by enriching the nutritional value of the circulating plasma. Acting at the level of Agni i.e. at the level of digestion and metabolism are the drugs such as Pippali (*Piper Longum* Linn.), Haritaki (*Terminalia chebula*), Citraka (*Plumbago zeylanica*), etc. they improve the digestion, absorption and metabolism, and has some anabolic effect. Acting at the level of Srotamsi (the microcirculatory channels carrying nutrition to the tissues) are the drugs such as Guggulu (*Commiphora mukul*), Pippali (*Piper Longum* Linn.), Rasana (*Allium cepa*), etc. These Rasayana cleans and activate the micro- circulatory channels i.e. Sroto Shuddhi leading to improved tissue health and their quality . Appropriate applications have potential to ward off problems related not only to aging and natural menopause but also in menopausal symptoms induced due to surgical, medical and other reasons. Aushadha Rasayana- Some of the Rasayan yoga (formulations) that may be helpful is

Hartitaki Rasayan, Amalki Rasayan, Pippali Rasayan, Vidanga Rasayan, Shilajatu Rasayan, Bhallataka Rasayana, Triphala Rasayana, Vardhman Pippali Rasayana etc. They can be used in menopausal women for various indications.

Ahara Rasayana - To ward off problems related with agnimandya and ama accumulation in body leading to dhatukshaya, following the directives of diet becomes even more important in aging and women with menopausal symptoms. Aahar is dhatuposhak and dhatu is responsible for the maintenance of compactness and strength, dhatu reflects in the terms of Sara (absoluteness of body tissues), which makes a person look young and beautiful. Menopausal women should refrain from Vata vitiating food. Laghu (light) and Santarpaka (nutritive) diet is recommended. Packaged, processed, frozen, canned food and erratic food habits should be avoided.

Achara Rasayana - Achara Rasayana (social and personal code of conduct) is unique concept of socio- moral and behavioral therapy which is preventive in nature. It is a non-pharmacological approach by which one can acquire the Rasayana effect

From the options presented, evaluation based on Rogi – Roga Pariksha (examination of the patient as an individual irrespective of his disease and examination of the disease entity/disease state) specific drug and therapeutics can be selected as per individual needs.

Before deciding upon a treatment, the physician should minutely examine and determine, Dushya (the Dhatu and Mala involved), Desha (the area of the body where disease is manifested, the living place of the patient), Bala (strength of the patient), Kala (season, how old is the disease, age of the person etc.), Anala (digestive power of the patient), Prakriti (Body constitution), Vayas (age of the patient and disease), Satva (mind, tolerance capacity of the patient), Satmya (The food and activities to which the patient is accustomed to), Ahara (food habits) and Avastha (stages of the diseases) of the patient and then only should decide the appropriate treatment.

DISCUSSION- Natural menopause is a biological process, at the transition phase of life it brings changes that manifest as symptoms in some warranting attention, and it may pass uneventful in most women. As this is often associated with aging, it is signified by dhatukshya and Vata vitiation. At the dosha level, this involves transition from Pitta dominant phase to Vata dominant phase of life; while aging and natural menopause is distinctly different processes, the consequences of each are similar. Aging women should embrace change of life. By understanding the bodily changes well in advance and making gradual modifications in life style and food habits can give effective results. To prevent or to reduce the symptoms Vayahsthapan, Vajikar, Balya, Rasayan, Vata- Pitta pacifying drugs provide a vast range of options. For research purpose principles and philosophy of

Ayurveda must be kept under consideration. Instead of looking for active chemical constituents, paradigm should be on the trial of the whole drug . A condition such as surgical menopause or premature menopause occurring due to genetic or medical reasons, where menopause occurs before the age of 40 years and is not a part of natural aging process, requires the need to distinguish between chronological age and endocrinal change.

Assessment using elaborate methodology of Rogi Roga Pariksha and deciding therapeutics based on Ayurvedic principals, suggested treatment modalities can be used without any untoward effects for these individuals also. Further, women having menopausal symptoms are led to believe that estrogen decline must be replaced and medical intervention is needed. In majority of such women, the depletion of estrogen which occurs during menopause does not need to be replaced; estrogen is only required for women who have significant menopausal symptoms due to deficiency of the hormones. Understanding age related changes and Doshic involvement at individual level a timely intervention may help such individuals and prevent symptoms also.

CONCLUSION- Ayurveda and modern medicine have basic epistemological differences. Ayurvedic wisdom and logic is more health-oriented than disease-oriented. Started during midlife as component of preventive health care, management of menopausal symptoms based on Ayurvedic principals can not only reduce the menopausal symptoms but can also effectively address the aging and allied problems. It can improve the quality of life as well as life expectancy of aging female population. It provides wide range of treatment options in the form of single herbs, formulations, therapeutic procedures and life style modifications, which can be utilized as per individual needs. Single drugs given under Jeevaneeya, Vayahstapan and Balya Mahakashaya, formulations and Rasayan Yoga, Ghrita Yoga and Achara Rasayan, Aahar Rasayan opens new avenues for scientific researches. Although menopausal syndrome does not find mention in Ayurvedic literature, todays growing population of suffering female prompts us to look for effective and safer alternatives. It is not possible to name each and every disease; it is the responsibility of the physician to identify the nature, sign and symptoms of presenting ailment and treat it accordingly.

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Sthanik chikitsa (local treatment) in management of postmenopausal problems

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Abstract:

Though India is the largest country with youth population, the percentage of cohort of elder population increases since last decade due to increased life expectancy and standard medical facilities. Elder women outnumber more than elder men due to gender difference in life expectancy. Geriatric syndromes means cohort of health issues related to old age. Women during her perimenopausal and postmenopausal age suffers from many health issues like atrophic vaginitis, genital prolapse, psychological problems, dementia, sleep disorders, urinary incontinence and increased risk for cardiovascular and cerebrovascular diseases. Health professional have to formulate protocol for proper care and medical facility to elder women. Many local therapies are indicated for management of issues of old age. In ayurveda along with rasayan chikitsa(rejuvenating treatment) many local therapies are mentioned which can be used for management of geriatric syndromes. Murdhnitail, hrudbasti, yonipichu, yoniparishek, yonidhawan, yonilep, yonipuran, yonilep, yonivarti, yoniabhyang, uttarbasti can be advised as per need of geriatric issue with appropriate ayurvedic formulations.

Keywords: Geriatric women, geriatric syndrome, sthanik chikitsa, menopause

1. Introduction

As per the latest UN report, India has the world's largest youth population despite having a smaller population than China. Every third person in an Indian city today is youth, and thus India is said to be youngest country in world.(i) Though, youth populations contributes a major portion of population, the cohort of elder peoples also

increasing since last few years as a result of increase in life expectancy, quality medical facilities and reduction in fertility rates. Most of world's aging women are living in developing countries. In India, Life expectancy for males is 70.4 years and for females 71.8 years.(ii) Gender difference in life expectancy implies that the population of elder women is more than older men. As a population of elder women increases, the health professionals have to be ready to provide adequate and special medical facility to health problems of such cohort.

Elder women have to face many general and reproductive health problems. Many countries, facing new challenges and burden on health cost associated with health issues of elder population. Health sector tries to formulate new policies and guidelines for care of elder cohort of population.

Data on health status of postmenopausal women is not much available for developing countries. As compare to elder men, the rate of certain chronic diseases such as osteoporosis, arthritis, diabetes, hypertension is significantly higher in elder women. About one third of life span will be spent during the period of estrogen deprivation stage with long term symptomatic and metabolic complications. Though menopause is physiological stage of female life, she has to face many local health concerns like urogenital atrophy, sexual dysfunctions and systemic concerns related to cardiovascular system, cerebrovascular system, psychological problems, osteoporosis and fractures. Problems of postmenopausal women can collectively term as geriatric syndrome. Postmenopausal symptoms management includes use of non hormonal and hormonal medicines, which can be given by systemic or local route.

Table 1: Health problems of elder women in postmenopausal age : ⁽ⁱⁱⁱ⁾

Systemic Health concerns	Local Health Concerns	
	Related to Urogenital system	Related to other system
Anxiety	Dysparunia	Hot Flushes
Insomnia	Vaginal dryness	Thinning and wrinkling of skin
Irritability	Atrophic vaginitis	Thinning of Hairs
Insomnia	Decreased sexual desire	Malignancies – Breast
Depression	Dysuria	
Dementia, Alzheimer disease	Recurrent urinary infection	
Mood swing	Urinary incontinence	
Osteoporosis and fracture	Genital Prolapse	
Cardiovascular diseases	Infections, STIs	

like strokes, IHD, CAD		
Atherosclerosis	Malignancies – Cervical, Endometrial, Ovarian	
Cerebrovascular diseases		

In ayurveda, rasayan chikitsa (rejuvenating treatment) is advisable for elder age group. Many formulations are mentioned in ayurvedic literature under rasayan chapter. Health concerns in geriatric syndromes can be managed well with ayurvedic formulations which can be administered internally or locally. Chikitsa (treatment) can be broadly classified as abhyantar chikitsa (internal medicine) and sthanik chikitsa (local treatment).

2. Management of health concerns of elder women

2.1 Rasayan Chikitsa (Rejuvenation treatment)

Rasayan therapy promotes healthy life by preventing disease, improves immunity, strength, vitality, memory, intelligence and works like rejuvenation.(iv) Rasayan therapy can be used as preventive as well as therapeutic for geriatric syndrome. Health of elder peoples depends on their health status in earlier period of life. Adopting principles of dincharya (principles of daily routine), rutucharya (principles as per season) and rasayan chikitsa from younger age will be helpful for better health status in elder age.

2.2 Sthanik Chikitsa (Local route of drug administration):

Local application of ayurvedic formulation like decoction, medicated oils, ghee etc. is as important as internal rejuvenating formulations. Local symptoms will resolve more rapidly with local application of drug as high concentration of drug is expected to act at target organ than internal medication. Drugs show faster and efficient action on local organs when applied locally. Ayurveda describes many local treatments for gynecological as well as other disorders. We can summarize such local treatment as per problems as geriatric syndrome in women as follows:

Table 2: Sthanik chikitsa (local treatment) for various menopausal symptoms

Health Concern	Local treatment	Meaning
Psychological Problems Sleep disorders	Moordhnitaila :- Shiro-abhyang Shirodhara Shiropichu Shirobasti	Application of medicated oils over head in different ways
Cardiovascular problems	Hrud-basti	Medicated luke warm oil is poured into a well made from

		black gram paste over precordial region for a specified time.
Skin dryness, thinning etc	Abhyang	Massage with medicated oil
Osteoporosis	Basti	Transrectal administration of medicated milk, oil, ghee
Urinary Problems	Uttarbasti	Administration of medicated oil or decoction through urethra
Genital Problems	Yoni Pichu	Tampon soaked in medicated oil inserted in vagina and withheld for specific period
	Yoni Dhawan	Cleansing of vaginal canal with decoction or medicated oil
	Yoni Varti	Insertion of herbal pessary in vagina
	Yoni parishek	Cleansing of vulval part with decoction or medicated oil
	Yoni dhupan	Fumigation of perineum with herbal medicines
	Yoni Abhyang	Local application of medicated oil over vulval and vaginal region
	Yoni Lep	Application of paste of herbal drug powder over vulval or vaginal area
	Yoni Puran	Filling of vaginal canal with medicated oil / kalka (Paste of powdered drugs)
	Yoni kalka dharan	Insertion of paste of herbal powder in vaginal canal
	Uttarbasti	Intrauterine administration of decoction or medicated oil

a. Psychological issues: Elder women suffer from anxiety, depression, dementia, sleep disturbance, irritability and mood swings during peri-menopausal and postmenopausal period. Rasayan dravyas improves memory, intelligence. Murdhnitail (application of oil over head in different way) is the local treatment described in ayurvedic classics. Sesame oil, oil medicated with jatamansi (*Nardostachys jatamansi*), Himasagar tail can be used

for this purpose. Kshirdhara (pouring a cow milk on forehead by specific method for a specified time) (ajay kumar et al 2007, university of rajasthan), jaldhara (pouring water on forehead by specific method for a specified time), takradhara (pouring a curd on forehead by specific method for a specified time) (B. G. Gopinath et al RGUHS, 2003) gives significant result for insomnia, sleep disorder and irritability.

b. Cardiac problems: Hrudbasti is the local therapy in which medicated luke warm oil is poured into a well made from black gram paste over precordial region for a specified time. It is said to be beneficial for cardiac disorders, atherosclerosis, coronary artery blockages, palpitation etc. Cardiac complications are more common in elder women in postmenopausal period. Hrudbasti therapy can effectively used to overcome these cardiac problems.

c.Skin and hair problems: Dryness of skin and hairs, hair fall are common problems in elder age group. There is predominance of Vata dosha in old age which aggravates such condition. Oleation is ideal treatment for disorders of vata dosha. Abhyang (oleation) with medicated oils helps to take of these problems.

d.Genito-urinary problems: Repeated child birth, poor access to facilities for the repair of birth injuries, poor hygiene, untreated genitor-urinary tract infections are common reasons for genitor-urinary problems in elder age group women. Dysuria, urinary incontinence is a common problem in elder woman. Along with internal medicine uttarbasti (transurethral administration of medicated oil in urinary bladder) had significant result for urinary problems. It helps to alleviate vata dosha. It provides strength to bladder and urethral sphincter. Ashwagandha (*Withania somnifera*) tail uttarbasti shows significant result in stress incontinence (Patil netra K et al.AYUSHDHARA, 2020:7(suppl 1):81-84).

Genital prolapse, reproductive tract infections, atrophic vaginitis, dysparunia are common gynecological issues in elder postmenopausal women. For local application of medication over genital tract many local therapies are mentioned while describing treatment for gynecological disorders. Local therapies mentioned in management of reproductive system disorder are yonipichu, yoniabhyang, yonidhawan, yonivarti, yonilep, yonipuran, yonidhupan, yoniparishek and uttarbasti. Many ayurvedic formulations mentioned in ayurvedic texts for used as local therapy in different ways. Some of commonly used formulations as local therapy for genito-urinary issues are enlisted below;

Table 3: Commonly used ayurvedic formulations for menopausal problems

Indication	Local therapy	Ayurvedic formulation
Atrophic vaginitis	Yoniabhyang Yonipichu Uttarbasti	Til tail (sesame oil) Shatapushpa tail, shatavari tail Kashmaryadi ghrut Jeevaniyavarg siddh tail Jeevaniyavarg siddha dugdh
Genital Prolapse	Yonipichu Yoniabhyang Yonilep Uttarbasti Yonipuran	Mushaksiddha tail Changeryadi ghrut Chukra tail Traivrut sneha Lajjalu Churn Traivrut sneha Vasa,Goghrut yonipuran
Genital infection	Yonidhawan Yonivarti Yonipichu Yoniabhyang Yonikalka dharan Uttarbasti	Triphala Kashaya Panchvalkal kashaya Kushtha-pippalyadi varti Pippalyadi varti Shodhan tail Dhatakyadi tail Jatyadi ghrut / tail Triphala kalka Hinstra kalka Shyama-trivrut kalka
Urinary incontinence	Yonipichu Uttarbasti	Bala tail Ashwagandha tail
Cervical erosions LSIL	Yonipichu Uttarbasti Ksharkarm (local application of kshar	Jatyadi ghrut / tail Ropan tail Apamargkshar

2.3 Local therapy as part of Menopausal Hormone Therapy (MHT)

“Menopausal hormonal therapy” (MHT) or “hormonal therapy” (HT), previously termed as “hormone replacement therapy” (HRT) is the term used to denote management of menopausal health issues with replacement of estrogen or estrogen with progesterone. Primary goal of estrogen replacement is to relieve vasomotor symptoms and genito-

urinary problems like vaginal dryness, atrophic vaginitis, recurrent urinary tract infection etc. Estrogen can be used in form of vaginal gel, vaginal rings.(v)

3.Discussion:

Geriatric syndrome can be effectively managed by internal medication described in rasayan chikitsa (rejuvenating treatment) chapter and by local medication (sthanik chikitsa). While describing treatment of yonivyapad (disorders of female genitals), most of formulations are advised to administer by transvaginal route as local therapy. The purpose behind this vaginal route may be for better efficacy of drug, more absorption and high concentration of drug in local genital organs for better recovery and to avoid systemic adverse effects of drug, if any.

Hormone replacement, either by systemic or vaginal route, is the primary goal for management of menopausal symptoms. Hormone replacement by vaginal route is more preferable than systemic due to minimal side effects. Also vaginal epithelium had higher concentration of estrogen receptors, which facilitate fast action of estrogen.

Vaginal drug administration is a part of Topical Drug Classification System (TCS). It is used as a route for local action of drug in cervico-vaginal region. In recent years, the vaginal route has been rediscovered as a potential route for systemic delivery of therapeutically important macromolecules. ^(vi)

Drug absorption through vagina get influenced by thickness by vaginal epithelium, vaginal fluid volume and composition, pH of vagina and sexual arousal. The physicochemical properties of administered drug like molecular weight, lipophilicity, ionization, surface charge, chemical nature also affects absorption of drug.

Supportive reasons for selecting vaginal route for drug administration are:

- i. Mucosal surface with rugae provides a large surface for drug absorption.
- ii. Arteries, blood vessels, lymphatic vessels are abundant in the walls of the vagina.
- iii. Dense network of blood vessels in vagina made it an excellent route for drug delivery for both systemic and local effect.
- iv. Vaginal epithelium had higher concentration of estrogen receptors, which facilitate fast action of estrogen.
- v. Reduced vaginal epithelial thickness in postmenopausal women facilitates maximum drug absorption through thin epithelium.

- vi. Vaginal progesterone absorption in estrogen deficient women who were receiving vaginal estrogen therapy was found to be increased, although prior estradiol therapy should have caused an increase in vaginal epithelium thickness.
- vii. The absorption of progesterone was increased with increased vascularity of the vagina.
- viii. For better efficacy of drug, long term retention of drug formulation in vaginal cavity is necessary. In different forms of local treatment modalities, the drug is advised to retain in place for specific period of time.
- ix. Ideally a vaginal drug delivery system that is intended for local effect should distribute uniformly throughout vaginal cavity. In yonipuran, yonilep, yoniabhyag the drug is advised to uniformly distribute throughout vaginal cavity.
- x. Rapid drug absorption and quick onset of action can be achieved with vaginal route.
- xi. The vaginal bioavailability of smaller drug molecule is good.
- xii. The bioavailability of larger drug molecules can be improved by means of absorption enhancer or other approach.
- xiii. Hepatic first pass elimination of high clearance drugs may be avoided partially.
- xiv. Effective route for delivery of hormones

4. Conclusion:

Geriatric syndrome in menopausal women can be effectively treated with rasayan chikitsa (rejuvenating treatment). Different forms of local therapy mentioned in ayurvedic classics which can be judiciously used for management of menopausal syndrome as per need. Local route of drug administration has its own additional benefits and it is as important as internal medication.

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Importance of Rasayanas and Ayurveda Approaches for Restoring the Health of Geriatric Women W.S.R. to the Management of Gynecological Problems

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Abstract

Ayurveda, the science of life practicing in India since ancient time and acceptance of natural drugs is increasing day by day globally. Ayurveda's approach helps to cure many health ailments, promotes general health and delay consequences of aging, etc. In this regards it is well documented that Ayurveda provides unique modalities for geriatric care and many natural drugs offers health benefits in gynecological issues related to the elderly patient. Natural menopause is biological process associated with middle aged or elderly women. The condition mainly involves Dhatukshya and Vata vitiation. In this connection Ayurveda advocated some approaches (Vayasthapan, Vajikara, Balya and Rasayana) for managing gynecological problems associated with elderly women. The Rasayana and Vata- Pitta pacifying drugs mainly advised for delaying symptoms of aging in geriatric female. These drugs are Yastimadhu, Draksha, Pippali, Haritaki, Chitraka, Shatavari and Shaliparni, etc. Moreover Ayurveda formulations such as; Amalaki Rasayana, Pippali Rasayana, Hartitaki Rasayana, Vidanga Rsayana, Bhallataka Rasayana, Triphala Rasayana and Shilajatu Rasayana, etc. are also recommended for reversing consequences of menopause in elderly women. These drugs also help to restore general health by enriching nutritional value of the circulating plasma. The Ayurveda Rasayana therapy acts at the level of Agni thus improves digestion and metabolic activities which gets suppressed in elderly people. The Rasayana not only rejuvenate whole body but also improves quality of Rasa and establishes hormonal balances, therefore considered good for elderly female.

Key-Words: Ayurveda, Geriatric, Gynecological, Rasayana.

Introduction

Ayurveda is a medical science that routed through the knowledge of ancient philosopher and Vedas. This science encompasses heritages of Indian culture and offers several theories related to the disease prevention and treatment. This science deals with physical, mental as well as spiritual health of person. Ayurveda provides different modalities for maintaining health and curing symptoms of aging, in this regards

Ayurveda practitioner advised specific therapy i.e. Rasayana for managing gynecological problems associated with elderly women [1-4].

The gynecological problems are very common in current scenario due to the stressful and disturbed pattern of life style. The elderly women suffer from many health problems and menopause is major gynecological consequence of aging in elderly female. Dhatukshaya is the main factor which leads degenerative changes in elderly female, Table 1 depicts specific health problems associated with degenerative changes of particular types of Dhātu in elderly female.

Table 1: Dhatukshaya in geriatric female:

S. No.	Types of Dhatukshaya	Related Health Problems/Pathological Symptoms
1	Rasakshaya	Hridravata, Shool, Shosha and Trusha
2	Raktakshaya	Rajonivrutti, Twakrukshata and Sirashaithilyata
3	Mansakshaya	Toda, Rukshata, Sandhi Sphutan and Sandhi vedana
4	Medokshaya	Angarukshata, Shosha and Krushta
5	Ashtikshaya	Asthi kshaya and Sandhi shaithilya
6	Majjakshaya	Asthi sougharya, Dourbalya, Bhrama and Sandhi Shunyatva

As depicted in above table the aging is responsible for many health issues and Raktakshaya in elderly women can lead to symptoms of Rajonivrutti, Twakrukshata and Sirashaithilyata. The Dhatukshaya in geriatric female is responsible for Shoola, Trusha, Rukshata, Sandhi Sphutan, Asthi kshaya and Dourbalya, etc. Moreover geriatric female also suffers with menopausal symptoms therefore special care is needed for restoring health of elderly female. Ayurveda Rasayana therapy offers several health benefits for delaying age related degenerative changes and cure post menopausal symptoms [3-5]. The health benefits of Rasayana recommended for geriatric care depicted in Table 2.

Rasayana yoga (formulations) offers health benefits for reliving menopausal symptoms are as follows:

- ✓ Haritaki Rasayana
- ✓ Amalaki Rasayana
- ✓ Pippali Rasayana

- ✓ Vidanga Rsayana
- ✓ Shilajatu Rasayana
- ✓ Bhallataka Rasayana
- ✓ Triphala Rasayana

Table 2: Rasayana advised for geriatric care

S. No.	Rasayana	Health benefits in geriatric female
1	Yastimadhu	Used for voice, hair, strength and libido
2	Sankhpushpi	Relieves stress and anxiety related to the aging
3	Mandukaparni	Anxiolytic and psychotropic activity
4	Guduchi	Restore immunity and prevent common age related illness
5	Ahara Rasayana	Prevent Agnimandya and accumulation of Ama, imparts Dhatuposhak effects and maintain strength.
6	Ashwagandha	Balya and Vaya-Sthapana properties cures symptoms of early aging
7	Amalaki	Possess Rasayana Karma
8	Haritaki and Vasa	Responsible for Dhatu Pushti

Rasayana Benefits in Menopausal Symptoms:

- ❖ The Sheeta and Madhura Rasayana i.e.; Yastimadhu pacifies hot flushes.
- ❖ Drugs like Shatavari boost mental strength thus prevent post menopausal depression and anxiety.
- ❖ The calming and soothing and Rasayana helps to cure insomnia and mood swings.
- ❖ Some aphrodisiac medicines prevent vaginal dryness, loss of libido and atrophic vaginitis associated with aging.
- ❖ Rejuvenating Rasayana resist dryness of skin and pacify palpitations.
- ❖ The drugs like Pippali and Haritaki boost digestive fire in elderly patient thereby restore metabolic activities which ultimately strengthen Dhatus.
- ❖ Support regeneration, revival and revitalization of Dhatu, therefore delay degenerative effects of aging related to the depletion of Dhatus in elderly female.

Effects of Rasayana at the level of Ojas and Tejas:

Ojas is responsible for immunity, stability and nourishment. The low level of Ojas in elderly women increases susceptibility towards the illnesses. The physical and mental strength get diminishes due to the lack of Ojas in case of geriatric patient. The Ayurveda Rasayana imparts rejuvenating and nourishing effects therefore restore Ojas and improvement in metabolic activities boost immune power thus prevents prevalence of common illness.

Tejas is considered as refined version of Pitta, acts as positive subtle essence of Agni and helps to restore digestive fire. It controls intelligence and enthusiasm, the process of aging witnessed lack of enthusiasm and mental imbalances. Ayurveda Rasayana likes Draksha, Shatavari and Chitraka, etc. improves mental function and provides energy by improving nourishment of body therefore diminishes effects of aging. Ayurveda drugs helps to maintain intelligence and enthusiasm thus govern functioning as like normal level of Tejas.

Rasayana acts on levels of Rasa:

Draksha and Shaliparni strengthen Rasa by enriching nutritional value of circulating plasma (Rasa). Therefore restore circulatory functioning in geriatric female.

Rasayana acts on levels of Agni:

Pippali and Haritaki acts at the level of Agni by improving digestion and metabolism, in this way these drugs nourish whole body and maintain physical as well mental strength.

Rasayana acts on levels of Srotas:

Guggulu and Rasona, etc. acts at the level of Srotamsi thus restore functioning of microcirculatory channels of body thus maintain nutritional supply affected by degenerative changes of aging. These Rasayana cleans micro-channels thereby imparts Sroto Shuddhi action which is important to retain normal process of circulation.

Probable mode of action of Rasayana for Geriatric Care:

Vata Dosha and Agnimandhya mainly causes Rajonivritti and specific Gunas of Rasayana helps to cure this problem in geriatric female as depicted in Figure 1.

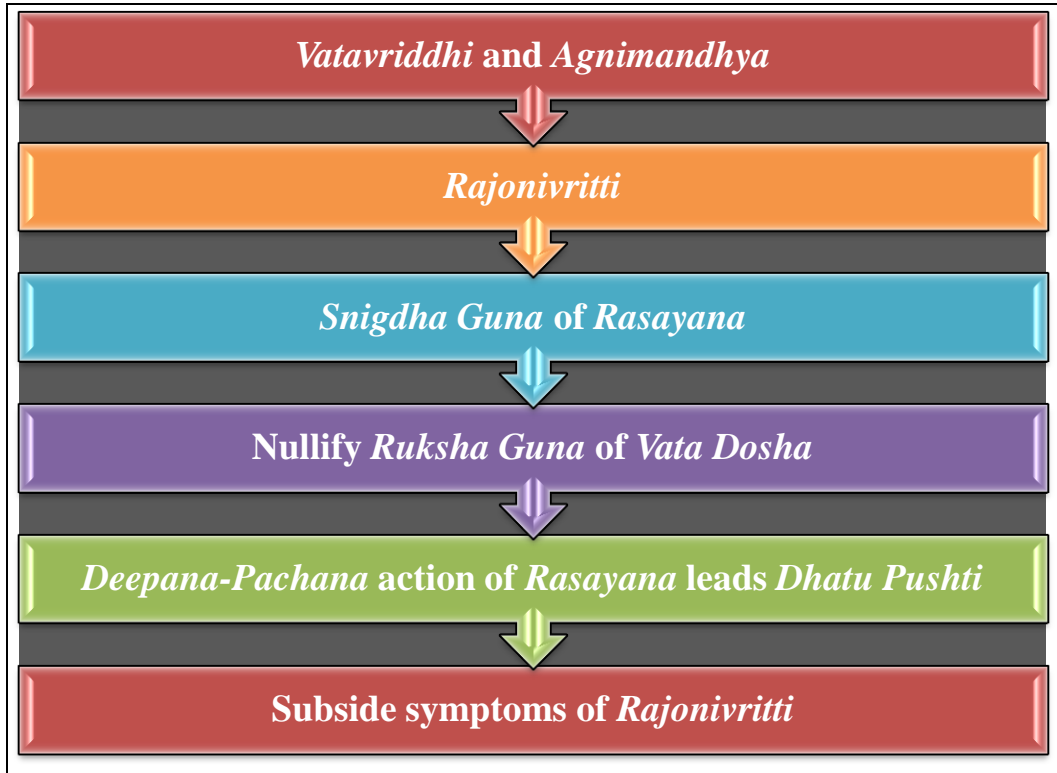
The Madhura and Kashaya Rasa of Rasayana offer Medhya & nourishing effects thus reverse effects of degenerative changes in elderly female.

Sheeta Virya of Rasayana provides calming and soothing effects thus relax mind and cure anxiety or stress related to the menopausal symptoms.

Laghu Guna of Rasayana cleans micro channels of body thus regularizes circulatory process of body.

Tridoshashamaka property of the Rasayana drugs establishes balances amongst Doshas therefore give Vayahsthapana, Balya and Vedanasthapana, etc., properties [6-8].

Figure 1: Mechanism of Rasayana for managing Rajonivritti



Conclusion

Ayurveda offers excellent approaches for graceful and safe transition into menopausal phases for geriatric or middle aged female. Rasayana therapy is considered beneficial for graceful menopause and managing health problems associated with geriatric female. Ayurveda Rasayana reduces menopausal symptoms and effectively cures aging and allied problems. Rasayana improves quality of life in geriatric female since these drugs offers Jeevaneeya and Vayahstapan effects. Rasayana Yoga, Achara Rasayana and Aahara Rasayana, etc. are effective and safer alternatives for curing health of geriatric female.

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GYNAECOLOGICAL DISORDERS IN GERIATRIC WOMEN

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ABSTRACT:

Geriatric gynaecological problems have not received adequate attention in India. Even the vaginal discharge may be indicative of underlying cervical cancer. Increase in the use of various pesticides , exposure to radiations etc . are affecting the quality of life which ultimately affect geriatric health. Various disorders occur particularly in this age group right from oestrogen deficiency symptoms to cancerous growths, having variability in their prognosis. Spectrum of gynaecological disorders, comorbidities, diagnosis and management should have to be noticed and analysed.

The responsibility of the gynaecologist as the primary physician for geriatric patients increases, to detect the cancer earlier and manage it to decrease morbidity and mortality. Not only doctors but also older women need to be aware of their health issues. So it is our duty to make them aware.

Keywords – Prolapse , malignant changes , oestrogen deficiency

Introduction

वयो यथास्थूलभेदेन त्रि वधम्-बालं, मध्यं, जीर्ण मति । (च० सं० व० ८/१२२)[7]

वृद्ध तु क्षीयमाणधात्विन्द्रियादिगुणम् वलीखलति.....। (अ.सं.शा.)

Age is briefly classified in three phases according to Ayurveda ,Bala ,madhyam , jeerna . The word jeerna indicates the decreased power of various systems of our body to various conditions. As there are various changes occurring in female body according to age and hormonal changes her body is most vulnerable to the diseases in this age which we have to care of.

Gynaecological disorders in older women differ from those who are younger. Elderly women experience vasomotor, urogenital, psychosomatic, psychological symptoms and

sexual dysfunction. These urogenital changes make women vulnerable to gynaecological morbidities. Common gynaecological problems encountered in elderly women are vulvovaginal inflammation, genital prolapse, postmenopausal bleeding, malignancy and alteration in bladder function. Population aging is emerging as a pre-eminent phenomenon throughout the world. Among the aged, the women deserve special attention because they outlive men in most societies. Nevertheless, postmenopausal and geriatric gynaecological problems have not received adequate attention in India. There is an obvious need of screening programme for early detection of gynaecological malignancy to provide better geriatric services, but a paucity of data regarding gynaecological morbidity in geriatric women hampers proper planning.

It's our primary responsibility that we have to detect the various life threatening disorders in their early stage and ensure the healthy life to elderly women.

Common gynaecological problems include:

- Cervical Dysplasia.
- Menstrual Disorders.
- Pelvic Floor Prolapse.
- Pelvic Pain.
- Polycystic Ovarian Syndrome.
- Uterine Fibroids.
- Urinary Incontinence.

Causes of various gynaecological disorders in geriatric women.

1. **Estrogen deficiency**-As it is the most important hormone which protects the female genitalia from various infections, abnormalities by its various actions. After menopause deficiency of oestrogen causes atrophy of epithelial lining of genital track making it vulnerable for various infections.
2. **Obstetric History** – Home deliveries ,multiple vaginal deliveries, improper care during puerperium etc causes laxity in pelvic floor which will lead to genital prolapse ,cystocele ,rectocele etc.
3. **Decreased immunity** – Due to dietary deficiency, comorbidities like hypertension, diabetes, age related decreased immunity power will lead to various infections of genital track or aggravate the previously presented uncovered infections. Hence increased incidence of UTI, vaginal discharge occurs in this age. This may lead to many metastatic changes and finally cancers.
4. **Unopposed oestrogen** – Endogenous source of oestrogen like tumours or PCOS or exogenous sources like single oestrogen replacement therapy in menopause will

lead to endometrial hyperplasia ultimately endometrial cancer. Breast cancer also caused by oestrogen therapy

5. **Age related diseases**-Many diseases are common in this particular age e.g. endometrial cancer , ovarian cancer, breast cancer.
6. **Hereditary** – As menarche age ,menopausal age or pattern of a women is generally similar to that of her mother there are increased chances of developing the malignant disorders if she had the family history have the same

Classification of various gynaecological disorders in geriatric women.

1. According to cause

A) Due to laxity of muscles and tissues

1. Urge Incontinence
2. stress Incontinence
3. cystocele
4. rectocele
5. Uterine prolapse

B) Due to oestrogen deficiency

1. Senile Vaginitis
2. 2.Dyspareunia
3. 3.Vaginal infections
4. 4.osteoporosis
5. 5.Pruritus vulvae

C) Due to unopposed oestrogen therapy

1. 1.Endometrial Hyperplasia
2. Endometrial cancer
3. 3.Breast cancer

2 According to site

1.External Genitalia

1. Vulva – pruritus vulvar, lichen sclerosis, vulval carcinoma

2.vagina– Vaginal infections, dyspareunia, vaginal wall prolapse

3.Urinary System- Frequency of micturition, stress Incontinence, urge incontinence recurrent UTI, retention of urine .

2.Internal genitalia

1.Cervix- Cervical erosion

Cervical intraepithelial neoplasia

2.Uterus – Endometrial hyperplasia

Endometrial Carcinoma

Uterine prolapse

3.Ovaries – Ovarian cancer.

Diagnostic methods. Patients should have to undergo screening test of various gynaecological disorders occurring especially in geriatric age group.

1.PAP smear test

To rule out CA – cervix

Should be done if any cervical discharge is present

2 Routine USG pelvis

In case of postmenopausal bleeding, dyspareunia to rule out endometrial hyperplasia

3 Endometrial biopsy

Patients complaining of postmenopausal bleeding, delayed menopause and having co morbid diseases like HTN ,DM have to be ruled out for CA endometrium

Patients having history of CA breast ,CA ovary or having family history of the above have to be screened for CA endometrium^[4]

4 Mammography

As the risk of breast cancer increases with family history of the same or other gynaecological cancers she have to be screened for CA breast to detect it in early case [4]

5. General investigations for vaginal discharge, swab culture, CBC , urine culture have to be done for concerned diseases

6.Screening for hypertension, diabetes, BSL fasting-PP , lipid profile have to be checked regularly as these are all related to each other and geriatric age.

Treatment

1.Prevention

A)Early diagnosis give the proper direction to treatment

B) Dietary supplements, nutritional improvement will improve their immunity ultimately life status

C) Care during reproductive age- Deliveries in hospital postpartum care, avoiding multiple deliveries will reduce the chances of genital prolapse

Pelvic floor exercises also improve the tone of muscles and hence reduce the chances of prolapse

2. Curative

- Proper history taking.
- According to disease
 1. Frequent UTI – general antibiotics along with local oestrogen
 2. Prolapse – surgical intervention
 3. Cancerous growths-surgical interventions along with radio or chemo therapies
 4. According to Ayurveda

वयो यथास्थूलभेदेन त्रि वधम्-बालं, मध्यं, जीर्ण मति । (च० सं० व० ८/१२२) [6]

The old age starts after sixty or seventy and is dominated by the vaat dosha. So the disorders occur in the geriatric age have the predominance of vaat Dosha.

Rajonivrutti ayu:

तद् वर्षाद् द्वादशादूर्ध्वं याति पञ्चाशतः क्षयम् । (सु० सं० सू० १४/६)[9]

Caesation of menses occurs after the age of 55 years .

Relation of shukra dhatukshaya with geriatric age:

शुक्रं धैर्यं च्यवनं प्रीतिं देहबलं हर्षं बीजार्थञ्च । (सु० सं० सू० १५/५)[9]

As dhairya ,chyavan of other dhatus ,dehabaala ,harsha and beeja nirman are the functions of shukra dhatu and these get reduced in vrudhdhavastha so there is a relation between the geriatric age and shukrakshay.

Common gynaecological disorders according to ayurveda

1. Mahayoni
2. Stanarbud- as शुक्रवहे द्वे तयोर्मूलं स्तनौ वृषणौ चा सु.शा.9/12 ^[10]

Stana are moolasthan of shukravaha stratus hence after menopause vaat also affects the moolasthan and form granthi

Dosha -Vaata dosha

Dushya- Saptadhatu especially shukra

Treatment

Chikitsatva for geriatric problems

- 1) Bruhan
- 2) Dhatvagnivardhan
- 3) Shukravardhan
- 4) Vaata shaman

Results and discussion:

The severity of disorders occur in geriatric women vary right from just vulval itching to cancers of ovary , endometrium, breast. Multiparous women will show genital prolapse more than the women having limited no. of deliveries. Women having family history of any gynaecological cancer have higher risk of developing it.

Conclusion:

As the diseases occur in geriatric women will lead to life threatening conditions if not detected early ,we should start to make them aware by conducting various camps so as to reduce morbidity and mortality ultimately improving their life status

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GYNECOLOGICAL DISORDERS IN GERIATRIC WOMEN

AYURVEDIC MANAGEMENT OF GYNECOLOGICAL DISORDERS IN GERIATRIC AGE- A REVIEW

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Abstract

Geriatric women means elderly women or postmenopausal women and the age considering is above 65 year gynecological disorders commonly found in geriatric women, which are postmenopausal syndrome, postmenopausal bleeding, pelvic organ prolapse, recurrent UTI, or cystitis, stress urinary incontinence, malignancy of genital organ, vulvovaginal inflammation. In this age group we should take care of geriatric women and improve the quality of life. some of the treatment modalities explained in Ayurveda like Basti, Uttarbasti, Yonidhavan, Yonipichu etc and also Pathya-Apathya for each condition is also mentioned. All these are very much helpful in treating the gynecological disorders in geriatric age group.

Keywords- Geriatric women, Ayurvedic management, Sthanik Chikitsa, Gynecological disorders

Introduction –

Geriatric gynecology deals with gynecological pathology encountered in postmenopausal women age 65 year and above. The age related geriatric problems have emerged significantly with enhance longevity of life.[1] Geriatric women affected many gynecological disorders like uterine prolapse, stress urinary incontinence etc. In Ayurveda, menopause is compared to Rajonivritti and the age of Rajonivritti is 50 year and above, which is Vata dominant stage of life. During the time of delivery, sometimes the women has complications like obstructed labour, prolong labour, untimely bearing down without active stage of labour, grand multipara etc and in this condition there is high chance of developing disorders like uterine prolapse, rectocele and cystocele at latest stage of life. In old age there is over all facidity of muscle tissue. Hence sometimes

there is urine incontinence leading to involuntary dribbling of micturition and this condition may lead to symptoms like UTI, vaginitis etc.

Materials and methods –

•Postmenopausal Syndrome-

In Ayurveda, menopause compare to Rajonivritti.

‘स्वभावात् ववनाशकारणवनरपेक्षाद उपरमो ववनाशः स्वभावोपरमः॥

[2] च. सु. १६/२७

Menopause age-

..... ‘यावत् पंचाशतः क्षयम्’ ॥ [3] सु. सु. १४/६

Menopause means permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity. ^[4]

Symptoms-

Hot flush, Atrophic vaginitis, Loss of libido, Insomnia, Dementia, Osteoporosis, Recurrent UTI

Ayurvedic management - As it is the period of Vata Vriddhi, therefore the selection of treatment and Ahara should be Vatashamaka, Balya, Jeevaniya and Rasayana.

Shamana Chikitsa- Shatavari Churna + Ashwagandha Churna each 2 gm with milk BD

Shodhana Chikitsa-

1)Yonipichu – Bala Tailam, Tila Tailam

Mode of action-

- I. Vitiated Vata Dosha can be nullified
- II. Prevention from fungal and bacterial infection
- III. Cures postmenopausal vaginal dryness
- IV. Strengthens the vaginal muscles

2)Basti –

Panchtiktsheer Basti for Osteoporosis ^[5].

In Asthivaha Srotodushti Chikitsa Panchatikataksheer Basti and Sarpi are mentioned. It is Rasayana for Asthi Dhatu. They rejuvenate the Dhatu, repair them, remove kha-vaigunya and give Balya to Asthi Dhatu.

3)Nasya- Shatavari Ghrita, Bramhi Ghrita

It is phytoestrogeneic property stimulate olfactory nerve and limbic system, which is turn stimulate hypothalamus leading to stimulations of gonadotrophin releasing neurons, thus regularizing GnRH pulsatile secretion ^[6]. Intern regulate the estrogen level and subside the symptoms of insomnia, dementia.

1) Shirodhara –

Bramhi Tailm- Calming the nervous system and balancing the neurotransmitters.

•Uterine Prolapse –

In Ayurveda Uterine prolapse correlated with Mahayoni Vyapada.

महायोनी व्यापद-

‘ववषमं दुःखशय्यायां मैथुनात् कु वपतोअवनलः’॥

गभाशयस्य योनाश्च मुखं ववष्टम्भयेत वयाः’॥

मांसोत्सन्ना महायोवनः पवावंक्षणशुवलनी’॥ [7]

च. वच. ३०/३५, ३६

Downwards displacement of uterus from its normal position is called prolapse of uterus.

Symptoms-

- Feeling of something coming down per vagina, specially during coughing, walking, Backache and Dyspareunia
- If presence of cystocele – urge of incontinence, retention of urine, painful micturition and If presence of rectocele- constipation

Ayurvedic management of uterine prolapse- ‘सवाव्यापत्सु मवतमान्महायोण्यां ववशेषतः ॥

नवह वाताह्यते योवननाारीणां संप्रदुष्यवतः’ ॥

[8] च. वच. ३०/ ११५

Yonipichu- Bala Tailam – it is use for only first and second degree of uterine prolapse.

To decrease the hardness of displaced organ, For mobilization of organ, Enhancing the strength of local ligaments and muscles.

•Stress Urinary Incontinence –

Urinary incontinence is defined as the involuntary loss of urine. It is always associated with genital organ prolapse. In stress incontinence, There is no desired to pass small quantity of urine during sneezing, coughing and lifting of the heavy weight

Cusative factor –

Geriatric age, multiparous women, obesity, prolapse

Symptoms- involuntary leakage of urine. Ayurvedic management of stress incontinence Matra Basti- with Narayana oil 40 ml daily ^[9]

Yonidhavan – Triphala Kwatha, Panchavalkala Kwatha Mode of action ^[10]

- As the name Dhavana suggests cleaning, it washes out the secretions and discharges of vagina.
- It deals with the altered PH of vagina thus not favoring the micro-organism invasion.

Yonipichu -Bala Tailam and Til Tailam

Shaman Chikitsa – Chandraprabha Vati 500 mg bd

Gokshur Guggulu 500mg bd

Discussion and Conclusion-

Due to recent lifestyle changes and diet, uterine prolapse, urinary incontinence etc disease are seen more commonly in women which can be prevented by using the principle of Jara Chikitsa, Vayasthapan Chikitsa as well as Rasayana and Vajeekaran Chikitsa before onset of menopausal and in Yuva Avastha.

Postnatal complication of women can also be prevented by following Masanumasik Garbhini Paricharya, Sutika Paricharya which will do proper Vataśaman and prevent any future complication in geriatric age.

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ROLE OF AYURVEDA IN MENOPAUSE VS HRT

MANAGEMENT OF MENOPAUSAL SYNDROME THROUGH

AYURVEDA

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ABSTRACT

Menopause is a unique phenomenon and experience to women every woman.¹ It is the ending phase of a woman's monthly menstrual period and ovulation which is defined as a time of cessation of ovarian function resulting in permanent amenorrhea i.e., cessation of menstruation for 6 months to 1 year at approximate age of 45 years or above.¹ Due to a decline in the amount of the oestrogen and progesterone hormone which are produced by her body causes several changes physically and mentally both.² In Ayurveda, there is no specific description for menopause but the word Rajonivrutti is mentioned at 50 years.

The Depletion of Ovarian follicles in menopause leading to decrease in ovarian hormones results in manifestation of aging process in women, hot flushes, sweating, mood changes, irritation, lack of concentration, loss of libido, forgetfulness, osteoporosis etc.³ In Allopathic science this condition is treated by oestrogen, either alone or in combination with progestins (HRT) but in Ayurveda, physiological system based on balance of "vata", "pitta" and "kapha". Rajonivrutti is predominant by vata so, there is a significant tendency to develop more degenerative changes. So, Rasayana therapy described by Acharyas which promotes longevity is very helpful in alleviating the vata and associated symptoms along with Panchakarma therapies like shirodhara, shiropichu, nasaya play a very important role in stress management, improvement in quality of life. A detailed description of menopause is elaborated in the paper highlighting the role of Ayurveda in abating the symptoms of menopause with a case study on successful Ayurvedic **management of menopausal syndrome.**

KEYWORDS

Menopause, HRT, Rajonivrutti, Rasayana, Panchakarma

INTRODUCTION

Menopause is defined as the permanent cessation of menses.² However, manifestations that occur around the time of menopause are caused by the underlying ovarian changes. Various hormonal changes take place in the body during this phase of life. Above 60 million women in India are above the age of 55 years. Due to increase in life expectancy, women spend one third of their life in postmenopausal age. Age for menopause ranges from 45-50 years.² Incidence and prevalence rate of postmenopausal syndrome is 78% of population, but only 19.5% of the symptomatic women take treatment.³ Hence there is a need for definitive management during the Menopausal stage which involves management of age-related changes to improve the quality of life of individuals.

Depletion of primordial ovarian follicles resulting in diminished oestradiol levels. There is 66% reduction in oestrogen.³ Gonadotropins increase as a result of the absence of negative feedback of ovarian steroids, hence FSH (40 IU/L) increases markedly is essential criteria for diagnosis of menopause, reflecting fall in oestrogen and LH rises moderately.³ Over time, this decline may be experienced as a change in the skin elasticity, altered cognitive abilities, vasomotor symptoms like hot flushes, headache, dizziness, night sweats, menstrual irregularities, dyspareunia, incontinence, valvular pruritis lack of energy, difficulty concentrating, vaginal dryness, sleep disturbances and also influence on carbohydrate and lipid metabolism results in increase in insulin resistance and hyperlipidaemia, cardiovascular disease respectively.²

Its deficiency leads to increase in osteoclastic activity results in osteoporosis. There is fall in 2-hydroxylated oestradiol which has neuroprotective action.² Depression, mental stress is more common in these women due to increased level of FSH and cortisol and serotonin deficiency.²

In modern medicine, the management of menopausal syndrome is through hormone replacement therapy (HRT). Often there is spectacular relief from the symptoms of the disease but there is an associated risk of serious side effects such as increased probability of developing breast cancer, uterine cancer, venous thromboembolism, stroke, etc. HRT, however, is not very effective in managing the psychological symptoms associated with menopause. An effort to manage this with long-term use of sedatives, hypnotics, and anxiolytic drugs leads to side effects like drowsiness, impaired motor function, loss of memory, antisocial behaviour, allergic reactions, etc.

Menopausal syndrome does not find mention as disease in Ayurvedic literature, however, the context of Menopause is depicted as “Jara Pakva Avastha” of body and Rajonivrutti.⁵ According to Acharya Sushruta and various other references, 50 years is

mentioned as the age of Rajonivrutti. Rajonivrutti janya lakshan is a group of symptoms produced by degenerative process of body tissue. Menopause involves doshas, dhatus, srotas and manas. The clinical features would be in accordance to it and treatment should be multi-dimensional.

Moreover, Menopause is linked with Vata dosha dominated stage of life. Anxiety, nervousness, insomnia, depression, sabdasahisunta, dryness of skin, vagina, palpitations, bone and joint pain are Vata dominant features. Along with that Pitta dosha symptoms like hot flushes, irritability, mutradaha, amlodgara, short temper etc are seen, during this phase. Excessive sleep, agnimandya, lethargy, weight gain, sluggishness are due to the dominance of kapha.⁵

Materials and Methods: Ayurvedic literature related to Rajonivrutti (Menopausal Syndrome) are searched. Other research journals, papers related to Menopausal Syndrome are also explored. Patient attending the Outdoor Patients Department of Streeroga & Prasooti tantra, SDMCAH, was randomly incorporated into the study irrespective of caste, religion etc.

Case Report: A 48-year-old lady came to O.P.D of PrasutiTantra and Streeroga department of SDMCAH presented with the complaint of generalised weakness, body ache associated with headache since 3 months. For one year she has been experiencing hot flashes, night sweats. She had complaint of low back ache, muscle and joint pain especially knee joint, disturbed sleep, depression, anxiousness. The patient had history of hypothyroidism and diabetes mellitus for 5 years and since then was on modern medication. Menstrual history includes absence of menstruation for 8 years. Obstetric history includes G3P3L3D0A0 three full term normal deliveries.

Table 1: Diagnostic focus and Assessment The patient was diagnosed as having Menopausal syndrome by Australasian Menopause Society Symptom Score Sheet4 -

Symptoms	None - 0	Mild - 1	Moderate - 2	Severe - 3
Hot flushes				3
Light headed feelings		1		
Irritability			2	
Depression				3
Anxiety		1		
Mood changes			2	
Sleeplessness				3
Unusual tiredness				3
Back ache				3

Joint pains				3
Muscle pains				3
New facial hair		1		
Dry skin		1		
Dry vagina		1		
Urinary frequency			2	
Headache				3

The patient attained a score of 35 which suggests that she needs treatment.

COURSE OF TREATMENT - To overcome these above mentioned features our Acharyas mentioned Rasayana therapy, balya, vayasthapka type of drugs, Abhyanga and shirodhara, shiropichu for Mansika chikitsa. The type of treatment depends upon the dosha in which woman's menopause symptoms are manifesting. In order to reduce the signs symptoms of Rajonivrutti some important Rasayana are used. In this, patient was administered Shirodhara up to 20 min. with one litre of ushna jala and shiropichu with kotambchukadi taila for 7 days and given orally ksheerabala capsules and Maha Rasnadi Kwatha 20 ml twice daily, after food for 1 month.

- 1) BALA (*Sida cordyfolia*)- In menopause age it helps as a Rasayana as a Balya and Bruhaniya by normalizing vata and pitta. Hence it is used in diseases which are caused due to vitiation of vata and pitta.
- 2) LAHSUNA (*Allium sativum*) – Acc to kashyapa-its acts as Amruta and Rasayana. Menopause is associated with an increase in oxidative stress and a decrease in some antioxidant parameter. Consumption of garlic extracts and crude black seed may have beneficial effect on improved balance between blood oxidants and antioxidants in healthy menopausal women.
- 3) Mode of action of Shirodhara and Shiropichu-Penetration of topically applied drug into the skin follows passive diffusion.

Effect on endocrine system-An effect of Shirodhara on hormone secretion has also been postulated considering the effect on the hypothalamus.⁶

Effect on anxiety and depression-Shirodhara may have an anti-depressant effect like Mono Amine oxidase inhibitors. Inhibition of the MAO-A decreases the deamination of Nor-Adrenaline (NA) and to a lesser extent of 5-HT which is associated with the antidepressant action. It may decrease anxiety by facilitating the inhibitory presynaptic action of GABA and sedative activities in limbic system. It can be postulated that Shirodhara has some effect on the hypothalamus, with resulting relief of most of the psychic and somatic disorders.⁶



Fig. 1: Shirodhara with ushna jala taila



Fig. 2: Shiropichu with Kotambchukadi

RESULT:

Table 2: Menopause rating scale -

Parameters	Before treatment	After treatment
Joint pain	++++	++
Muscle pain	+++	+
Weakness	+++++	++
Hot flushes	++	+
Anxiety and mood swing	+++	+
Headache	++++	++

DISCUSSION- Menopause is simply not an oestrogen deficiency state but it is associated with large number of symptoms which disturbs women's routine life. There is no specific description regarding clinical features of Rajonivrutti as Ayurveda considers Rajonivrutti is a natural process of aging, signified by Vata vitiation and dhatukshya further respective Updhatu kshaya takes place. The vitiated Vata dosha also disturbs the other Sharir as well as Manas dosha (Raja and Tama dosha) leading to various psychological disturbances. Thus, leading to Artava nasha (amenorrhea). Thus, modern science mainly concentrates on tackling the physical problems of menopause, but the psychological aspect is often neglected. Therefore, here we have made an attempt to focus on the other side of the coin, i.e., the psychological aspects of menopause can be well treated by Shirodhara and Shiropichu and to combat the degenerative process of the body tissue Acharyas have described Rasayana Chikitsa. There is a great scope for research in Ayurveda to find a cure for the management of menopause which can improve the quality of life as well as life expectancy of aging female population with safer aspects as compared to HRT.

CONCLUSION- Menopause viewed as part of ageing, intricately relates the biological, cultural and social aspects of women's life. Shirodhara, shiropichu and Shaman Yoga combined is better in various psychological disturbances mainly include headache, irritability, depression, mood swings, sleep disturbances, etc as compared to HRT. So, it can be concluded that in women with mild to moderate symptoms of menopausal syndrome, a Shaman Yoga along with Shirodhara and Shiropichu gives better result in both somatic as well as psychological complaints. No any adverse effect was noted during the study.

Therefore, it could be a safe alternative therapy of HRT. It is found to be an effective therapy in psychological and somatic problems related with menopausal syndrome.

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A CASE STUDY ON STANA ARBUDA

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KEYWORDS: Arbuda, Ayurveda, breast, cancer, stana.

ABSTRACT:

Background :Stana arbuda is the third major killer cause of cancer death in worldwide (WHO 1998).77% of cases occur in women over 50 years of age.The three dates in a women life that have a major impact on breast cancer incidence are age at menarche, age at first full term pregnancy, age at menopause. Arbuda was prevalent during vedic period and which is a dreadful disease in 21st century.Brihat trayees mentioned about arbuda which is considered as an equivalent of cancer. Generally Arbuda, develops very fast and causes either destruction of local tissues or even marana. **Material and methods :**In this paper,A case presentation on stana arbuda is attempted.**Discussion :** Stana arbuda falls under mamsa pradoshaja vikaras.Every cell and tissue will have it's own agni.The decrease in agni is inversely proportional to the related dhatu and vice versa. In arbuda, the decreased state of dhatwagni is resulting in the excessive growth of the dhatus.**Conclusion:** Ayurveda emphasizes “Swasthasya swaasthya rakshanam aturasya vikara prashamanam cha”prevention of breast cancer may be possible through rasayana.

INTRODUCTION:

Arbuda was Prevalent during vedic period and which is a dreadful disease in 21st century. While going through literature, direct description of the word “stana arbuda” as a disease or symptom is not available, but Acharya's were aware about the disease in terms of stana arbuda. Stana arbuda means the large vegetation of flesh which appears at any quadrants of the stana,becomes slightly painful,rounded,immovable and deep seated and which is due to the vitiation of the flesh and blood by the deranged aggravated doshas;vata,pitta,kapha.It develops too fastly and causes either destruction of local tissues or even marana.Stana arbuda is a mamsavridhijanya and mamsadushtijanya shotha with kapha and medodusti¹.Brihat and Laghu trayees mentioned about arbuda, which is considered as an equivalent of cancer. Cancer in essence is a change in cell metabolism. Breast cancer is that,cancer forms in the cells of breast.The unique aspect of breast cancer, it is the most common (30%) of all cancers and is the second common cause of cancer death in women. One out of eight obstetric – gynecologic patients is likely to

develop breast cancer. According to WHO, In 2020 there were 2.3 million women diagnosed with breast cancer and 6,85,000 deaths globally. At the end of 2020, there were 7.8 million women alive who were diagnosed with breast cancer in the past 5 years. The three dates in a woman's life that have a major impact on breast cancer incidence are

- Age at menarche
- Age at first full term pregnancy
- Age at menopause².

Associated risk factors are never breast fed, obesity. Stana arbuda treatment can be highly effective, especially when the disease is identified early. Treatment of stana arbuda often consists of 1. Sodhana chikitsa, 2. Dhatwagni chikitsa, 3. Rasayana prayoga, 4. Vyadhi pratyahnika chikitsa, 5. Sastra chikitsa.

PATIENT INFORMATION:

A female of 60 years old came to Ayurvedic OPD with diagnosis of stage 3 breast cancer. Soon after diagnosis, Patient was not willing to undergo chemotherapy initially and approached our institution. She is non diabetic, non HTN and not hypothyroidism. Attained menopause at age of 48 years and no physical and systemic illness. No tumour history was reported. She was married but nulliparous. The palpable mass in the right breast was neglected by patient for few months. Then it grows in size and externally findings developed. She approached doctor and referred for CT Scan in October 2020 only in the advanced stage.

CLINICAL FINDINGS:

atient presented with a large lump present in outer upper quadrant of the right breast. On examination - Pain full lump, hard, heaviness present, tenderness present and breathing difficulty. Right axillary lymph nodes are palpable. CT report findings was stage 3 breast cancer. There was no metastasis to other organs. Right Axillary lymph nodes were involved.

TIMELINE:

Oct 2020 : Diagnosis of stage 3 breast cancer was made.

MONTH	MEDICINE	DOSE	FINDINGS	REMARKS
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Nov 2020 To Dec 2020	1.Rasa sinduram cap 2.Nimbamrutha di panchatikthaka m kashayam 3.Bhallataka ghritam 4.shatavari churnam	2 -0-2 A/F 20 ml -0 -20ml + ww - 1tsp – 0 A / f 1 spoon - 0 – 1 spoon A/f	Externally wound, Pain + + + Hardness + + Heaviness++ Tenderness + + + Axillary lymph node - palpable	
Jan 2021	1.Triphala guggulu 2.varanadhi kashayam 3.Shodhitha kupilu churna 4.satavari churnam	1 -0-1 A/F 20 ml -0 -20ml + ww(ES) 1 pinch with satavari ch 1 + spoon - 0 – 1 spoon A/f	Externally wound, Pain + + Hardness + Heaviness+ Tenderness + +	Improved
			Axillary lymph node - palpable	
Mar 2021 To May 2021	1.Rasa sinduram cap 2.Shodhitha kupilu churna 3.Nimbamrutha di panchatikthaka m kashayam 4.satavari churnam	2 -0-2 A/F 1 pinch with satavari ch 20 ml -0 -20ml + ww ES spoon - 0 – 1 spoon A / f	Externally wound, Pain + Tenderness + Axillary lymph node - palpable	Improved
July 2021	1.Triphala guggulu 2.varanadhi kashayam 3.Shoditha kupilu churnam 4.satavari	1 -0-1 A/F 20 ml -0 1 pinch with satavari ch 1 spoon - 0 – 1 spoon A/f	Tenderness + External wound healed	Improved

	churnam			
Sept 2021	1.Rasa sinduram cap 2.Shodhita kupilu churnam 3.Nimbamrutha di panchatikthaka m kashayam 4.satavari churnam	2 -0-2 A/F 1 pinch with satavari ch 20 ml -0 -20ml + ww ES 1 spoon - 0 – 1 spoon A/f	External wound healed	Improved

A/f External wound healed Improved

After 7th follow up the patient got much relief from all of symptoms which was there initially. And the same medicine is going on still now. wound management was done with Triphala kashayam prakshalanam daily and then application of jathyadi ghritam as pichu.

DIAGNOSTIC ASSESSMENT :

CT Scan – stage 3 breast cancer. Poor prognosis. Through ayurvedic medications wound management was done, it healed and patient got good relief.

FOLLOWUP & OUTCOME :

Only upto 7th follow up patient was followed. And the treatment is going on.

PATIENT PERSPECTIVE :

Patient was educated and counselled in regarding to prognosis and limitations of ayurvedic treatment. Informed consent was taken.

DISCUSSION:

Pharmaceutical intervention by Ayurvedic medicine is attempted. Through this, wound healing action in the drugs do wonders in breast cancer wounds. It improved the quality of patient life by decreasing pain, heaviness, Tenderness, hardness. A longer life expectancy is achieved. The possibility to diagnose cancer early then treat according to it.

CONCLUSION :

The five year survival rate of the patient can be prolonged by using Ayurvedic regimen. Followup for another few years can be done. The phytoconstituent named Shatavarin 4 in satavari has anticancer activity, which is given throughout the treatment. Patient is quite happy with wound healing and reduction in symptoms.

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FERTILITY ISSUES IN ELDERLY WOMEN

AN AYURVEDIC APPROACH TOWARDS MANAGEMENT OF FERTILITY ISSUES IN ELDERLY WOMEN

A CASE REPORT

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ABSTRACT

Introduction: Infertility is becoming major issue today's society due to declining rate of fertility and fecundability with age. Fertility gradually declines in age of 30's, particularly after 35. After age of 35 the quality and quantity of egg decreases causing more abortions and chromosomal abnormalities like down's syndrome. In Ayurveda there are four important factors of garbha that are ritu (fertile period, season), kshetra (healthy reproductive organs), ambu (proper nutrient fluid), beeja (ovum or sperm). Beejadushti in females can be correlated decrease in quality and quantity of ovum i.e. anovulation. The fertility issues of geriatric age can be better managed by ayurvedic protocol which help in improving quality of kshetra, ambu, beeja.

Clinical findings: A female with case of putraghani yonivyapath and apraja aged 39 years came to OPD of prasuti tantra and stree roga at SDM hospital, hassan with history of spontaneous abortion twice at two and half month of gestation due to no fetal cardial acctivity and was anxious to conceive since 5 years and associated with WDPV and vulvar itching since 4 years.

Intervention: The case was treated with ayurvedic management protocol for 8 days which included sthaniaka chikitsa for 7 days, shirodhara for 2 days, virechana done on 8th day and then shaman chikitsa followed by yoga basti.

Outcomes: With the following ayurvedic treatment protocol WDPV and vulvar itching cured and patient conceived and given birth to child.

Conclusion: So it can be concluded that Ayurveda is effective in management of fertility issues in elderly women.

Keywords: Infertility, Elderly women, Sthanika chikitsa, Virechana, Shirodhara, Yoga basti, Ayurveda.

INTRODUCTION

Infertility is defined when couples are unable to conceive after one or more year of regular unprotected coitus. According to WHO, one in every four couples in developing country is affected by infertility. Fertility rate in India is declining every year, current fertility rate for India in 2021 is 2.179 births per woman, 0.95% decline from 2020.

Reproductive potential of woman decreases as she get older and fertility can be expected 5-10 years before menopause. Now a days due to career settlement by late 30's, women are getting married late. A woman best reproductive age is in her 20's, fertility and chances of conception gradually declines after 30's, particularly after 35. After the age of 35 the quality and quantity of ovum decreases. There is declinment in quality of chromosomes of ovum that there are more chance of getting downs syndrome in foetus and abortions. In late age also the number of eggs start decreasing that there are more chances of getting anovulatory cycles.

So here we will focus on management of fertility issues in elderly woman by ayurvedic management protocol that includes shaman and shodhana chikitsa.

CASE REPORT

PRESENTING COMPLAINTS

A 39 year old female patient with marital life of 5 years had a history of spontaneous abortion twice at two and half month of gestation due to no fetal cardial activity. After that she has not conceived and she was having itching in vulvar region since 4 years, for further treatment patient approached as outpatient in department of prasuti tantra and stree roga of sri dharamasthala manjunatheshwara college of Ayurveda and hospital Hassan, Karnataka.

CLINICAL FINDINGS

The patient had vatapittaja prakriti with amayukta jihva. The patient was having LMP on 01/02/2020 with regular menstrual history of 5-6 days/28 days. On P/S the cervix was hypertrophied, congestion in lower lip, nebothian cyst at 12'o clock position and WDPV ++. P/V- NS/AV/Tenderness in left and anterior fornices.

INVESTIGATIONS

12/02/2020	PAP smear positive for bacterial vaginosis.
Haematological investigation as on 12/02/2020	

Haemoglobin	11.4 gm%,
total leucocyte count	4800 cells/cmm
erythrocyte sedimentation rate	26mm/hr
fasting blood sugar	92.0 mg/dl
HIV	Negative
HbsAg	non reactive
VDRL	non reactive

Urine analysis as on 12/02/2020	
Leucocytes	Negative
Glucose	Negative
Protein	Negative
Ph	5.0
Specific gravity	1.020

DIAGNOSTIC FOCUS AND ASSESSMENT

On the basis of patient's complaints like spontaneous abortion twice at two and half month gestation can be compared with putragahni yonivyapad due to no development in fetal cardiac activity. As patient was having excessive bleeding during first two pregnancies which lead to miscarriage i.e. without progeny as she was having problem in conceiving, thus can be compared to apraja yonivyapad. As patient was having itching in vulvar region associated white discharge can be compared with kaphaja yonivyapad and finding of hypertrophied cervix and congestion on lower lip of cervix can be compared to karnini yonivyapad. For fertility issue patient was assessed by studying of follicular size on 2/07/2020.

THERAPEUTICAL INTERVENTION

Patient was admitted to in patient department of prasuti tantra and stree roga for management with ayurvedic protocol.

Treatment protocol

S.no.	Internal medication	Duration
1.	Deepana pachana with Chitrakadi vati (500 mg) 2tab tid (before food) + Shunthi jala 50 ml tid (before food)	11/02/2020 – 12/02/2020
2.	Snehapana with phala ghrita 30ml - 1 st day 60ml – 2 nd day	13/02/2020 – 16/02/2020

	90ml – 3 rd day 120ml – 4 th day	
	External medication	
1.	Shirodhara with dashmoola kashaya	11/02/2020 – 12/02/2020
2.	Yoni prakshalana with nimbadi kwatha followed by yoni pichu of doorva ghrita	11/02/2020 – 17/02/2020
3.	Savanga abhyanga with brihat saindhava taila followed by bashpa sweda and ushna jala snana	17/02/2020 – 18/02/2020
4.	Virechana with trivritr lehya 100 gms + draksha kashaya	On 18/02/2020

2. Patient was discharged on 18/02/2020 and was instructed to follow Samsarjana karma from 18/02/2020 – 21/02/2020.

3. Shamana chikitsa to be followed at home :

4. Patient came to opd on 9/06/2020, on 3rd day of LMP. Patient was advised shaman chikitsa and was advised for follicular study for next cycle.

a) tab pushpadhanwa rasa 2 tab – 0 – 2 tab

b) phala ghrita 5 gms – 0 – 0

5. Patient was admitted on 2/07/2020 – 6/07/2020 in patient department for administration for yoga basti

Day	1 st	2 nd	3 rd	4 th	5 th
Type of basti	A	N	N	N	A
		A	A	A	

FOLLOW UP AND OUTCOMES

On 18/02/2020 patient got 10 virechana vegas and type of shuddhi was avara.

On 29/12/2020 patient came to OPD with history of amenorrhea since 1 month, LMP was 17/11/2020. Patient UPT was positive and then regularly followed for ANC. Patient underwent LSCS and given birth to a healthy male baby on 22/07/2021 at 2:45 pm.

DISCUSSION

Vata by virtue of its properties responsible for proliferation and division of cells (granulosa and theca cells) especially Apana Vayu is responsible for ovulation. Pitta is associated with its conversion power like conversion of androgens to estrogen in Graffian

follicle maturity of follicle by its paka karma. Kapha stands as a building and nutrition factor. It binds all the cells together and gives nutrition for growth and development of the cells.

The shodhana therapy in Ayurveda help in removal of toxic elements from body and bring all the vitiated doshas in equilibrium.

Deepana and pachana chikitsa

Chitrakadi vati because of its laghu, ruksha guna and katu, tikta rasa it subsides kapha and by ushna virya and tikshna, snigadha guna it counteracts vata. Both chitrakadi vati and shunthi jala helps in pachana of ama.

Virechana

As patient was diagnosed with putraghani yonivyapad in which due to dushta shonita (ovum) there is recurrent destruction of foetus. To balance vitiated pitta dosha virechana is best treatment as it helps in improving quality of ovum.

Sthanika chikitsa

The bacterial vaginosis can be compared with kaphaja yonivyapad. The nimbadi kwatha has vrana shodhana property, krimighana (antimicrobial, antifungal, antibacterial), shoshana (absorbent), samgrahi (ceases secretion), kledaghana (ceases harmful infection) and tridoshashamaka properties which helped in reducing white discharge and itching in patient. Doorva ghrita has raktastambhaka, krimighana, kaphapittashamaka, vrana ropana, anti-inflammatory, antiproliferative properties which helped in reducing congestion of lower lip of cervix in patient.

Shirodhara

Dashamoola kashaya shirodhara helps in reducing stress in patient. Having no children had psychological impact on mind of patient, which get reduced after shirodhara. It also helps in **improving HPO axis**.

Yoga basti

As apana vayu is mainly responsible for process of ovulation, conception and for vitiated vata dosha basti is indicated as best treatment.

Shamana chikitsa

Pushpashanva rasa, capsule ashwagandha, phala ghrita are administered with the aim of formation and improvement in quality of ovum and process of ovulation.

CONCLUSION

Due to vitiation of tridoshas in elder female of age more than 35 there is less chance of conception, more chance of abortions, poor quality and less formation of ovum. So, by following proper ayurvedic treatment protocol these issues managed, cured and reduced.

FERTILITY ISSUES IN ELDERLY WOMEN

ABSTRACT:

Background: In the present age many women are career oriented and are marrying late. More importance is given to profession than family life. This is giving rise to issues related to fertility and proliferation of assisted reproductive technologies. As the age increases women are more prone to metabolic diseases like Diabetes Mellitus, Hypertension.

If Garbhadhana vidhi is properly followed various fertility issues can be prevented.

Aims & Objectives:

To explore fertility issues in elderly women and the various possible treatment modalities in Ayurveda.

Result:

By following Ayurvedic treatment we can deliver a healthy progeny devoid of severe complications.

Conclusion:

Vata dosha is the pradhana dosha in PRAUDHA AVASTHA. Ayurvedic treatment which improves the fertility and reduces the vata will help an elderly female to deliver a healthy off spring.

Keywords: Female infertility, Shodhana Chikitsa, Shamana Chikitsa, Vandhyatva.

Introduction:

Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus. Fecundability is defined as the probability of achieving a pregnancy within one menstrual cycle. In a healthy couple it is 20% (1). Fecundability is highly age related, thus Infertility evaluation at 6 months (instead of 1 year) should be performed in any women older than 40years and according to some experts in women older than 35 (2).

Female Infertility according to Ayurveda is called as Vandhyatvam. Charaka mentions about Vandhyatva in sharira sthana and chikitsa sthana as: 1. Vandhyatva 2. Apraja 3. Sapraja. And Harita mentions 6 types in thrithiya sthana, 48th chapter. ¹. Dhatukshaya 2. Kakavandhya 3. Anapathya 4. Garbhasravi 5. Mrtavatsa 6. Balakshaya

In these, Garbhasravi – Repeated Abortions Mrtavatsa – Still birth can be taken as fertility issues in elderly women ⁽³⁾.

FACTORS INVOLVED IN ELDERLY WOMEN: ⁽⁴⁾

(a) Ovarian Factors: As the age increases, the number of eggs gets decreased; if at all present the remaining eggs are more likely to have abnormal chromosomes. Premature ovarian failure is cessation of menstrual periods due to failure of the ovaries before age 40, also known as early menopause.

(b) Quality of Eggs: The quality of the egg changes as the age increases. Miscarriages happen as the numbers of remaining eggs dwindle in number. An important change in egg quality is the frequency of genetic abnormalities called an Euploidy. As a woman gets older, more and more of her eggs have either too or few chromosomes. So, Down syndrome is more common in elderly women.

1 in 1480: At age 20

1 in 940: At age 30

1 in 353: At age 35

1 in 85: At age 40

1 in 35: At age 45

(c) Quantity of Eggs: Ovarian Reserve is a term that is used to determine the capacity of the ovary to provide egg cells that are capable of fertilization resulting in a healthy and successful progeny. The decrease in quantity of eggs containing follicles in the ovaries called Loss of Ovarian Reserve. Women begin to lose ovarian reserve before they become infertile and before they stop regular periods. Women with poor ovarian reserve have lower chance of becoming pregnant. Scientific reports states that Ovarian Reserve declines progressively with increasing age, optimal fertility is accepted to be between 20 and 30 years old. Ovarian Reserve Test (ORT) provides an indirect estimate of a woman's remaining follicular pool. The levels of Basal Follicular Stimulating Hormone (FSH), Anti-Mullerian Hormone (AMH), Inhibin B, Basal Estradiol, Ovarian Volume are estimated.

(d) Menstrual cycle: The regular cycle will be seen till early 30s and it may become shorter after 40 years.

(e) Metabolic Diseases: Pregnant women with advanced micro vascular disease such as, Hypertension, Nephropathy, and Retinopathy have a 25% risk of preterm delivery as a result of worsening maternal condition or pre-eclampsia.

Gestational Diabetes Mellitus affects 3% of pregnancies. Preconception glucose control may reduce the rate of complications to as low as that seen in the general population.

Risk Factors for HTN Disorders: ⁽⁵⁾

Risk factor	Risk ratio
Age >40	3
Chronic HTN	10
Diabetes Mellitus	2
Twin Gestation	4

(f) Other diseases in elderly women which impact fertility: Fibroids, Endometriosis, PID.

RISK FACTORS IN ELDERLY PREGNANT WOMEN:

Miscarriages, Still birth, Repeated Abortions, Preterm birth.

MODERN INTERVENTION:

1. ART - Assisted Reproductive Technology [IVF, ICSI, GIFT, ZIFT]
2. Artificial Insemination [IUI]

The success rate of IVF IS ONLY 30% - 35% and in younger women it is 40% in young women below age 35.

In case of IUI only 15% of success is seen and it varies from study to study from 8% - 20%.

AYURVEDIC INTERVENTION: ⁽⁶⁾

Acharyas have mentioned Vrddha stree or Praudha as anarhas for Maithunam. Vata Dosha is predominant in prauda and yoni rogas which implies vatahara chikitsa can be used in treating the fertility issues in elderly women. According to Bhela, Vandhyatva occurs due to various vata rogas and yoni rogas. The aggravated vata expels the Shukra from the uterus, destroys the raja[ovum], thus the women become infertile. Due to sheetatva of Garbhashaya and Sushkatva of Indriya[Penis] infertility occurs. All the factors are due to vata which we could see in Praudha which hinders the conception and gives rise to complications in delivery.

The main chikitsa to be done is Vasti karma as it is the pradhana shodhana karma for vata dosha. Brhmana dravyas, ahara, oushadhi should be given to compensate the loss of bala and dhathu, as Praudha will have a decline in it.

Vasti is the best among all kinds of therapies because it provides the body with quick nutrition and mitigates the abnormal vata. It makes the Garbhashaya healthy, even the sterile women can conceive. Bhela adds on to it that Niruha Vasti acts like nectar in treating Vandhyatva, by curing vata dosha, rajo dosha leading to conception. While Charaka opines Anuvasana vasti is effective. Sushruta says Yapana vasti acts as both Shodhana and Snehana. On the whole Vasti plays a vital role in Vandhyatva and other complications of elderly pregnant women. All poorva karma like sneha svedam and other procedures like vamanam virechanam should be done. Acharyas have mentioned so many types of vasti , few examples have been given below:

A.Narayana Taila vasti [Also used for nasyam, abhyangam, panam]

B.Bala Taila Vasti[Mooda Garbha]

C.Lashuna Taila Vasti

D.Shatapushpa Taila Vasti

E.Shathapaka Taila Vasti

F.Traivrita sneha Vasti

G.Shathavaryadi Vasti

H.Guduchyadi Vasti

After shodhana karma laghu ahara and dravyas like lashuna, karkati moolam, dvibrhati,ksheeram, mamsam should be taken. Katu, amla, lavana, ushna, vidahi dravyas to be avoided. Shodhana karma regulates and restores the normal physiological function and relieves the obstruction. It is only in a shuddha garbhashaya achieved after shodhana treatment, conception occurs as a result of union of shukra and artava along with descent of jiva.

SHAMANA OUSHADHIS

Phala ghrtam, Phala Kalyanaka ghrtam, Sheetakalyanaka ghrtam, Jeevaniya ghrtam, Lashuna ghrtam, Lakshmanadi ghrtam, Kumarakalpadruma ghrtam(Preterm birth).

Maharasnadi Kashyam (Sharangadhara Samhita)

Dasamoola Arishtam

The above said medicines help in mitigating vata dosha, ghrtam acts as rasayana , strengthens the uterus and helps in Sukkha prasava in Praudha.

HOME REMEDIES

1. Oral intake of vata shunga collected in pushya nakshatra in shukla paksha with water during rtukala
2. Vasa moola one karsha taken with tila tailam one kudava in early morning and diet intake of milk and rice in the evening.
3. Oral intake of kalka made from tender fruits of karpasa with milk during menstrual phase.

CONCLUSION:

In this modern world, elderly primigravida is common. Modern treatments are heavy to bear the expense by the patient with least success ratio. Our Ayurveda emphasises in prevention rather than curing by strictly following our Dinacharya and Rtucharya. Elderly conception can be maintained and delivered gracefully with the help of Ayurvedic Shodhana Karma and Shamana Oushadhis. Rasayana and Vajikarana chikitsa helps in maintaining the Garbha in elderly women.

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FERTILITY ISSUES IN ELDERLY WOMEN EFFECTIVE AYURVEDIC MANAGEMENT OF INFERTILITY DUE TO LOW AMH IN ELDERLY WOMEN- CASE STUDY

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ABSTRACT

Pregnancy or the motherhood beyond the edge of reproductive age is referred as Pregnancy in “Elder gravida”. In the developing and developed countries age of marriage and their by child bearing are relatively late in life. Chances of pregnancy for healthy couples in their 20s and early 30s is around 1 in 4 women, 40s around 1 in 10 women. Generally reproductive potential decreases as women get older and fertility can be expected to end 5 to 10 years before menopause. Age is the single biggest factor affecting a women’s chance to conceive and to have a healthy baby.

Risk of pregnancy complications increases with age. The risk of miscarriage and chromosomal abnormalities in the fetus increases from the age of 35. Complications such as GDM, Placenta previa, Caesarian section and still birth are common among older women than younger women.

According to Ayurveda, Infertility primarily refers to the biological inability of women to contribute to conception and also who is unable to carry pregnancy to full term. Ayurvedic management gives a new hope in women by strengthening body’s own self healing and balancing mechanism and rely on intervention by any outside or foreign substance to replace or correct the hormones in the body.

Case study: A patient named Akanksha aged 38 years diagnosed as Infertility with low AMH value treated with Virecana followed by Matrabasti and shaman chikitsa.

Key words: Infertility, AMH, Virechana and matrabasti.

INTRODUCTION:

Infertility is a condition which leads to physical, psychological & social detriments to the couples. Even though so much advanced techniques are there in ART (Assisted reproductive technique), the success rate of IVF techniques depends largely on the

ovarian response during retrieval, which reflects on the ovarian reserve, which will come to know from blood level of AMH.

AMH is released from the granulosa cells of preantral and antral follicles, then it released into the circulation, it is best endocrine marker for assessing ovarian reserve of elderly women.. Uncertainty in the ART procedure outcome can be minimized to a greater extent. This case report of low AMH resembles to Dhatu kshyajanya vandyatwa. the role of the effective ayurvedic protocol to improve the AMH level to a satisfactory level to have a better response to ovarian stimulation for IVF has to be validated.

CASE REPORT :

The reported case is 38 years old married, non smoking, non alcoholic with secondary infertility (P1 L1 A0) since 3 years with low AMH and low USG showed endometrial thickness of 7.33 mm. She received to IUI treatment and one IVF which were unsuccessful. Her family history was negative for any premature ovarian or low AMH. Her personal history revealed regular bowel habit and sound sleep. Her appetite was apparently normal and the Tongue was uncoated. She attained menarche at 14 years, menstrual cycle with the gap of 28 to 40 days. obstetrics history P1 A0 L1. First delivery was 4 years back, pregnancy was uneventful and delivered through cesarean section.

Her blood pressure (BP) 110/70 mmHg, pulse rate 86 bpm and body mass index 22 kg/m². She Pitta Kapha prakruti with madhyama satwa and madhyama kosta. In view of symptoms of irregular menstruation with low AMH diagnosed as datu kshya janya vandyatwa.

THERAPEUTIC FOCUS AND ASSESSMENT:

Patient was given which Deepana pachana followed by Virechana (sneha pana with phala gurhta). Matra basti with shata pushpi taila. Samana chikitsa done for two months with Shatapushpa Shatavari churna 1tsp BD with Phala grita (before food), Pushpa dhanwa vati 1BD (after food), and Kushmanda avaleha 1tsp BD.

FOLLOW-UP AND OUTCOME:

After two months followup done in the OPD with reassessment AMH value showed significant improvement.

DISCUSSION :

Over the past few decades in modern medical field, Hormonal therapy, IUI, IVF, embryo transfer, gametes intra fallopian transfer are developed but with high expensive & minimal success rate.

AYURVEDIC APPROACH

Ayurveda supports the body by strengthening body's own self healing mechanism. It doesn't rely on outside substance to fulfill the hormone level.

MODE OF ACTION

Basti dravya enters enteric nervous system. These signals stimulate endogenous opioids present in GIT mainly by endorphins. Regulates hormone.

CONCLUSION :

- Infertility itself doesn't stand alone. It is the result of some other disease so the herbs used in the treatment are directed towards the underlying cause.
- Ayurvedic treatment gives a new hope in elderly women with depleted ovarian reserve. In Charaka samhita, there is an effective, holistic and wide range of treatment modality for infertility based on Ayurvedic principles. The treatment of Infertility comprises of administration of panchakarma therapies, rasayana and vajikarana dravya
- Shatavari is a best herbal drug for low AMH, hence it's called "Pushpa prajakari".
- Rutu, Kshetra, Ambu and Beeja are the prime requisites for Garbha. Beeja is most essential among them.
- • All the Tridosas play an important role in the process of gametogenesis, Vata is responsible for Proliferation & division of cells, Pitta does formation of hormones by conversion/ paka, kapha helps for (growth & proper nourishment of oocyte).
- Apart from this following pathya plays a vital role in the prevention and cure of diseases. Dietary management involves strict compliance and adherence to foods that increase Oja. This is important to regulate the ovulation and enhance fertilization.

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STHANIKA CHIKITSA IN GERIATRIC WOMEN

A CLINICAL APPROACH FOR THE MANAGEMENT OF SUSHKA YONI THROUGH STHANIKA CHIKITSA IN RAJONIVRTTI"- A CASE STUDY

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ABSTRACT

Menopause is an unavoidable condition in every women life and they wish to have it with ease. Vaginal dryness is the symptom of genitourinary syndrome during menopause, which is often associated with irritation, pain and loss of libido. Our Acharya's explained as Rajonivritti. During this phase the sushkata in the yoni is mainly due to involvement of vata dosha. Here the Vata hara line of treatment is applied through. Sthanika chikitsa, which plays a major role and more advantageous in stree roga as the treatment is given directly to the affected area. Sthanika chikitsa like Abhyanga, Nadi sweda and yoni pichu which was given for the following case in Rajonivrtti.

Case study: A Patient aged 49 years old female came to OPD with a complaint of dryness in vagina with irritation associated with pain on and off since 1 years and her symptoms were increased since 3-4 days. She attained menopause 2 years back. Treatments like Abhyanga with ksheera bala taila followed by Nadi sweda with Ashwagandha ksheera paka and yoni pichu with Ashwagandha ghrita was given for 7 days and had a fruitful outcome.

Key words: Menopause, Sushka yoni vyapath, Sthanika chikitsa.

INTRODUCTION

Permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity which defines the menopause and the age ranges between 45-55 years. The depletion and resistant of follicles to pituitary gonadotropins leads to impairment in folliculogenesis with diminishing estradiol production. The fall in the estradiol level affects different physiological, psychological, different organs and system and marked changes can be seen in ovaries, fallopian tubes, uterus, menstrual changes, vagina, vulva, Breast fat, bladder and urethra, loss of muscle tone and in Adrenals. The

vagina becomes narrow and vaginal epithelial becomes thin and rugae patterns and no glycogen, due to marked estrogen deficiency leads to vaginal dryness and atrophy. Age of Rajonivritti explained as 50 years and also it depends on the nutritional status of women.

AIMS AND OBJECTIVE

To evaluate the effect of Sthanika chikitsa in dryness and pain in vagina.

METHODOLOGY

SINGLE CASE STUDY-The present case study is successful Ayurvedic management of a case of Sushka yoni since 1 year. A 49-year-old female patient came to OPD of Sri Sri College of Ayurvedic Science and Research Hospital, Bangalore.

HISTORY OF PRESENT ILLNESS: It is a Single case study. A Patient aged 49 years attained menopause 2 years back, with the complaint of dryness in vagina with irritation associated with pain on and off since 1 year and symptoms were increased since 3-4 days and approached to OPD of Prasuti Tantra and Stree Roga, Sri Sri College of Ayurveda Science and Research. For the above condition the patient was underwent Sthanika Abhyanga with Ksheera Bala Taila Sthanika Nadi Sweda with Ashwagandha Ksheera Paka and Yoni Pichu with Ashwagandha Ghrita followed by oral medications.

MENSTRUAL HISTORY Regular MENOPAUSE ATTAINED: 2 years back MARITAL HISTORY: Married OBS HISTORY: P2L2A0D0	EXAMINATION FINDING Neck- NAD Breast – NAD p/A- NAD P/S- NAD P/V-NAD	INVESTIGATIONS Hb – 12gm /dl RBS- 98mg/dl USG Abdomen – Normal study Urine R/M - Normal
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TREATMENT PLAN

SL.NO	STHANIKA CHIKITSA	DURATION
1	Sthanika abhyanga	7 days
2	Sthanika nadi sweda	7 days
3	Yoni pichu	7 days
4	Shatavari granules	2tsp -0-2tsp with milk
5	Ksheera bala taila	External Application X 7days

PATHYA	APATHYA
Shatapushpa, nuts, milk,	Hot and spicy food, caffeine, day

amalaki, egg white, soybean, peanuts, whole grains, yoga and pranayama	sleep, irregular meal, awake at night, oily foods, cold drinks.
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PAIN ASSESSMENT

Vaso Analog scale

Before Treatment-	6
After Treatment	1

RESULT

The single case study demonstrates that Sthanika chikitsa with vata and pitta hara dravyas helps to decrease the symptoms of menopause Like dryness in vagina. No adverse effect and complications are seen and the dryness of vagina is reduced

DISCUSSION

The dryness in vagina which is one of the common symptom during menopause due to estrogen depletion and during the age of menopause there will be increase in vata .and also disturbance in the vaginal flora. Snehana and swedana is a best line of treatment for vata vyadi explained as a purva karma for panchakarma by all Acharyas. Abhyanga with ksheera bala taila – murchita tila taila and bala which are vata shamaka and in the form of taila it helps to allivates vata.. Ashwagandha Ksheera paka nadi sweda is a type of snigdha sweda and does vata shamana. Yoni pichu which maintain the vaginal pH and flora and also strengthens the walls of vagina and reduces the chances of infection. Ashwagandha ghrita which acts as vata shamaka and ghrita which is considered as best sneha, absorb quickly due to its lipophilic action. The medication remains for long time in vagina through easy absorption of drugs through mucosa and sub mucosa. which the action of drugs take place followed by the oral intake of shatavari granules with milk acts as rasayana and help to maintain health and external application of ksheera Bala taila relives pain and improve the condition.

CONCLUSION

The unavoidable condition in every women life want to land with ease. the ayurveda management through Sthanika chikitsa and rasayana therapy helps to improve the menopausal conditions instead of hormonal replacement therapy and the Sthanika chikitsa also helps to improve the condition in a short period of time without any adverse

and systemic effect, had a fruitful outcome in case of Suskha yoni and thus improve the quality of life in menopausal women.

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GRACEFUL AGEING IN STREE

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Ageing is an inevitable part of growing older. A progressive generalized impairment of action resulting in loss of adoptive response and increasing risk of age related diseases and disabilities. It is the process of deterioration.

Ageing brings about physiological, psychological and immunological changes and nutritional status. It is necessary to give care which help to achieve the health purposeful and peaceful independent living.

The other causes includes stress, emotional factors play very important role. Now a day's nuclear family is common. The society is witnessing a gradual but definite withering of the Joint family system as a result of which a section of the family, primarily the ageing process are exposed to emotional neglect and lack of physical support. They are facing number of problems ranging from absence of ensured and sufficient income to support themselves and their dependence to ill-health, social insecurity, loss of social role and recognition to non-availability of opportunities for creative use and free time.

To combat the science of ageing includes regular exercises, quit smoking, manage stress, good diet, enough rest, drink plenty of water, regular health check up.

Ayurveda considered jara i.e., ageing is one among the swabhavaja vyadhi. The lakshanas like decrease of sharira dhatu, rasa, rakta, indriya bala, virya, purushartha, parakrama, grahana, dharana, smarana, vachana and vignyana shakthi are inevitable.

The treatment and management are clearly mentioned in ayurveda which includes preventive and conservative methods like :-

- Rasayana-Vajikarana These two are comes under Ashtanga Ayurveda. The dravyas enhances physical, mental, immune health to prolong healthy life. Rejuvenating formulations have a rich anti-oxidation resource potential to retard the progressive process of oxidation in cells
- Therapeutic procedures Abhyanga, Shodhana
- Ekamulika aushadhas includes vayastahpana, jivaniya , balya, medhaayushkara ojavardhaka dravyas
- Ahara – Hitahara, Pathyahara and also following the ahara sevana karma

- Vihara - Dinacharya, Rutucharya, Gramya dharma , Vyayama, Yoga & Pranayama
- Vichara - Sadvrutta, achara rasayana, satvavajaya chikitsa.

Ageing is emerging as one of the major social challenge hence there is need to pay greater attention, promoting holistic policies and programs to this vulnerable segment of society. It is the duty of government, local bodies, voluntary organizations, home for the aged and the young people to look after the aged persons to make their life comfortable, meaningful and enjoyable one.

“Growing old happens in mind, but reshaping of ageing process is within our control.”

Key words: Ageing, Jara, Rasayana-Vajikarana, Pancakarma, Ahara, Vihara, Vichara

INTRODUCTION

Ayurveda being oldest and traditional system of medicine and medication based on experience and observation thus Ayurveda called as Holistic Science. Ayurveda maintains health by maintaining equilibrium with nature between individual's body, mind, and spirit. Mainly concentrates on prevention of the disease and encourages the maintainence of health. Ayurveda enables us to create balance of body, mind and conciousess. To prevent disease and to promote health of an individual Achrayas explained Rasayana and Vajeekarana. The word Rasayana comprise of two words Rasa and Ayana ie Rasa-nutrition and Ayana-path or way¹. Rasayana is a Sanskrit word literally meaning path of essence. Main aim of Rasayana is to enrich or to nourish the Saptadhatu. Rasayana concentrates mainly promoting the health of an individual and curing the disease of an individual². There are many quotations said by our Acharyas regarding Rasayana:

- Labhopyai Shastanam Rasadinam rasayanam ie which nourishes the rasadi dhatus³
- Yat Jaravyadhidhwamsi bhesajam tat rasayanam ie not only cures the disease but also deals jara (Geriatrics) chikitsa⁴.
- Rasayana tantram nama vayasthapanam ayumedhabalakaram rogarashamanam samartham cha ie Rasayanatantra is one which does the Vayasthapanam (youthfulness), medhya (intelligence), Balakara (promotes strength) and also capable of curing the disease⁵.

IMPORTANCE OF SHODHANA:

Rasayana is not beneficial to who has not undergone Shodhana (purificatory therapy); it will be waste just as dyeing dirty clothes does not make the colour shine bright. After ascertained that the koshta is shuddha, he should be administered Rasayana therapy according to vaya, prakriti and satmya⁶. Rasayana yields benefits in Young age and Middle age persons.

Classification of Rasayana

1) Mode of action :

- a) Samshodhana
- b) Samshamana

2) Mode of administration

- a) Kutipravesika
- b) Vatatapik

3) Purpose of administration

- a) Kamya: Prana kamya, Medha kamya and Sri kamya
- b) Naimittika : it is vyadhinimittaja
- c) Ajasrika : Ksheera Ghrita abhyasa

4) Based on Achara Rasayana

- a) Aahara rasayana
- b) Achara rasayana
- c) Dravya rasayana

5) According to Bhesaja bheda

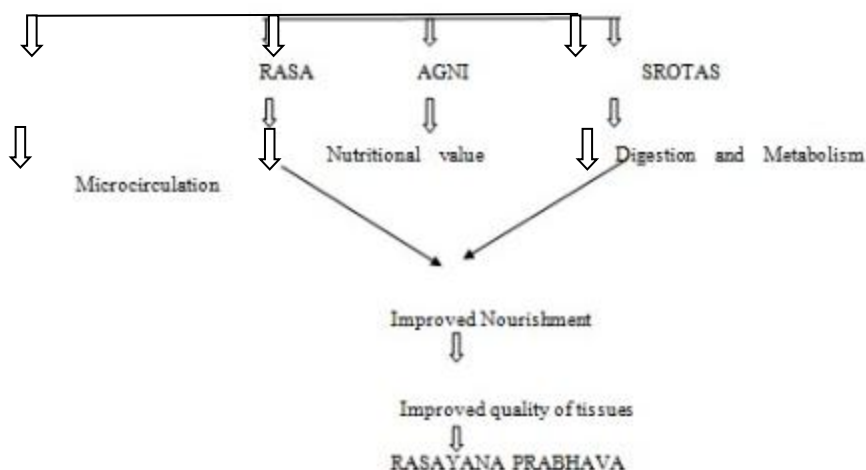
- a) Dravyabhuta
- b) Aadravabhuta

BENEFITS OF RASAYANA⁷

Sthapaka (stabilizes)	Vardhaka (enhances)	Aprapthapaka (endows)
Vayasthapaka (youthfulness)	Ayu (longevity)	Arogya (health)
	Smriti (memory)	Taruna (young)
	Bala (strength)	Prabha (complexion)

	Medha (intelligence)	Swara (voice)
		Varna (colour)
		Deha indriya bala (strength of body and sensory organs)
		Vaksiddhi (clearness of voice)
		Kanti (lusture)

PROBABLE MODE OF ACTION OF RASAYANA



JARA IN STREE -

An individual is expected to stay healthy and have long life. Women attain menopause 40s or 50s, it is a natural biological process which marks the ageing in women during this time she experience both physical, mental and hormonal changes, where she needs extra care and concern to overcome the complaints and complications related to menopause.

Ageing is an inevitable part of growing older. A progressive generalized impairment of action resulting in loss of adoptive response and increasing risk of age related diseases and disabilities.

Ageing brings about changes in physiological, psychological and immunological and nutritional status in every individual. It is necessary to give care which help to achieve purposeful and peaceful independent quality living.

BIOLOGICAL EFFECTS OF RASAYANA DRAVYAS:

MULTIDIMENSIONAL APPROACH:

- Imuno modulatory effects- Immuno competent, Immuno stimulatory, Humoralimmunity, Immunopotentiating
- Antioxidant
- Antiageing effects
- Anabolic effects
- Nootropic effects

CONCLUSION

Rasayana is a procedure of Protective, Nutritive and Homeostasis of body, mind and senses. The purpose of Rasayana is to obtain strength, immunity, ojas, and vitality and strengthen the senses. Rasayana brings about regeneration, revival and revitalization of the bodily tissues or dhatus. Rasayana is a standard treatment influences the bodily elements like Dhatu, Agni and Srotas.

An individual is expected to stay healthy and have long life. Ageing is an inevitable part of growing older. A progressive generalized impairment of action resulting in loss of adoptive response and increasing risk of age related diseases and disabilities. Ageing brings about changes in physiological, psychological and immunological and nutritional status in every individual. By following ayurvedic principles like Ahara, Vihara, Vichara, Rasayana, Vaajikarana and Sthanika Chikitsa especially for Jara Stree will achieve purposeful and peaceful independent living. "Growing old happens in mind, but reshaping of ageing process is within our control."

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AN ARTICLE ON GYNAECOLOGICAL DISORDERS IN GERIATRIC WOMEN

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ABSTRACT:

The Indian society which was pyramidal till 20th century, has become rectangular today and morbidity related to geriatric gynaecological problems is on the rise. Common gynaecological problems encountered in elderly women are vulvovaginal inflammation, genital prolapse, postmenopausal bleeding, malignancy and alteration in bladder function. Pelvic organ prolapse and genital malignancy are the major gynaecological disorders above 60 years in women. Post menopausal bleeding is the commonest complaint. Ovarian and endometrial cancer are showing a rising trend in the women above 60 years. The risk of developing Gynecological tumor is highest in geriatric women. Women over the age of 65 have a higher risk of developing cancer of the uterus (two fold), ovaries (three fold) and Cervix (10% increased risk). Postmenopausal and geriatric gynaecological problems have not received adequate attention in India. There is an obvious need of screening programme for early detection of gynecological malignancy to provide better geriatric services. The Geriatric care can best be summed up by the slogan of the British Geriatric society “Adding Life to Years”.

Key Words: Geriatric women, Gynaecological Disorders, Genital Malignancy, Ovarian and Endometrial Cancer.

INTRODUCTION:

The word Geriatrics was coined by Dr. Ignatz Natcher an Austrian physician in 1909. Regular gynecologic evaluation in older women is an integral part of medical care, just as it is for women of reproductive age. Geriatric gynaecology deals with gynaecological pathology encountered in postmenopausal women at and above 60 years of age with an intention of early diagnosis and management. A major challenge for the world in the 21st century is the ageing of its population. The age-related geriatric problems have emerged significantly with enhanced longevity of life. These are attributed to the physiological changes seen in reproductive organs due to their altered hormonal milieu. The unique

features of geriatric illnesses are chronicity and heterogeneity, greater severity and slow or sometimes no recovery. The various gynaecological disorders peculiar to ageing are pelvic organ prolapse, postmenopausal bleeding, gynaecological malignancies, urinary incontinence, genital tract infections, vulvovaginal disorders.

Vulvovaginal inflammation:

Vulvovaginitis is an inflammation or infection of the vulva and vagina. It's a common condition that affects women and girls of all ages. It has a variety of causes. Other names for this condition are vulvitis and vaginitis. Bacterial vulvovaginitis affects near 30 % trusted 2017 case sheet indicates that vaginal candidiasis (yeast infection) is the second most prevalent vaginal infection

Genital Prolapse:

Uterine prolapse occurs when pelvic floor muscles and ligaments stretch and weaken and no longer provide enough support for the uterus. As a result, the uterus slips down into or protrudes out of the vagina. Uterine prolapse can occur in women of any age. But it often affects postmenopausal women who've had one or more vaginal deliveries. Mild uterine prolapse usually doesn't require treatment. But if uterine prolapse makes you uncomfortable or disrupts your normal life, you might benefit from treatment.

Post Menopausal Bleeding:

Endometrial atrophy, uterine fibroids, and endometrial cancer are common causes of postmenopausal vaginal bleeding. About 10% of cases are due to endometrial cancer. Uterine fibroids are benign tumors made of muscle cells and other tissues located in and around the wall of the uterus. Women with fibroids do not always have symptoms, but some experience vaginal bleeding between periods, pain during sex, and lower back pain.

Genital Malignancy :

Vulvar Cancer , Vaginal Cancer , Cervical Cancer , Womb Cancer , Fallopian Cancer , Ovarian Cancer.

Female genital cancers are an important cause of death in women. Numerous types of vaginal and vulvar cancer are seen in clinical practice, with main symptoms being vaginal bleeding, discharge, pruritis, local pain, and the presence of a mass. The diagnosis and identification of the exact tumor type rest on clinical criteria, findings obtained from imaging studies, and a properly obtained biopsy.

Discussion :

The low literacy rate, lack of awareness of screening programmes and lack of health education, the non availability of medical facility, most of the women visit to hospitals only when symptomatic. Most of the patients deny to have pap smear or any other screening test. Overall gynecological conditions may become less frequent to elderly women once they are menopausal naturally or after major gynecological surgery, such as hysterectomy. Post menopausal bleeding is the most alarming and caused apprehension. Thorough evaluation is done always focusing to exclude malignancy. In urogenital disorders UTI and other infections like candida vaginitis, trichomonas and mixed infections are common because of lack of estrogen and change in vaginal pH and other medical disorders. Incomplete and ineffective voiding of urine causes urinary stasis causing UTI. Vaginitis and UTI are common urogenital infections, for which candida vaginitis is the commonest cause. In older women, vaginal pH changes owing to lack of oestrogen and predisposes to candida vaginitis. Ineffective voiding and incomplete bladder emptying leads to urinary stasis and colonisation by pathologic bacteria resulting in UTI. UTI was the sole source of infection in 10% of febrile older women.

Conclusion

Changing demographics rise the problem of providing gynecological care for these elderly women. The responsibility of the gynecologist as the primary physician for geriatric patients increases, to detect the cancer earlier and manage it to decrease morbidity and mortality. There should be increased screening programmes for cancer making this available for all the women at all stages and at all levels. There should be establishment of geriatric units to improvise on the health of women over 60 years to give them quality of life. Old age should be a boon and not a curse to our mothers and elderly women.

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THE EFFECT OF VAYASTHAPANA GANA KSHEERABASTI IN GENITO URINARY SYNDROME OF MENOPAUSE ALONG WITH DIFFUSE EPISCLERITIS - A CASE REPORT

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ABSTRACT-

Background- GSM describes the multiple changes occurring in the external genitalia, pelvic floor tissues, bladder and urethra, and the sexual function and libido, caused by hypo-oestrogenism during the menopause transition and post menopause. Episcleritis is inflammation of the thin, loose, highly vascular connective tissue layer that lies between the conjunctiva and sclera, its incidence is less than 1/1000 and most cases are found to be idiopathic. It presents with acute onset of redness, lacrimation and photophobia. Episcleritis mentioned in modern ophthalmology can be understood as Sirajala in ayurvedic classics. Case report- A 55 years postmenopausal women with the complain of painful burning micturition, constipation, white discharge p/v with itching since 7 days & one eye red since one month came to PTSR OPD, ITRA. Menopause had occurred 7 years back. Patient was given trikatu choorna for 3 days followed by Vayasthapana gana ksheerabasti 450ml for 8 days in apana kaal between 4-5pm & Vayasthapana gana choorna 5gm bd ksheerapaka before meal for one month. Panchavalakal, nimba choorna for vaginal wash, & chandraprabha vati 2tab bd with luke warm water for 15 days. Patient got relief in constipation and gas formation after ksheerabasti. Vaginal wash and chandraprabha vati gave relief in burning micturition, white discharge. After 4th day of ksheerabasti patient got relief in redness in eye which was concerned as autoimmune disorder by modern consultant. Conclusion- Hence showing sarvadaihiik effect of ksheerabasti.

KEYWORD- Episcleritis, Sirajala, Ksheerabasti, Vulvo-vaginal atrophy, Sukhapraudha

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Introduction

GSM (Genitourinary syndrome of menopause) includes wide spectrum of vulvovaginal symptoms and urinary troubles replacing the term vulvovaginal atrophy (VVA). It is a silent epidemic condition affecting 50-60% postmenopausal women. Estrogen withdrawal causes thinning, narrowing, tissue loss & reduced blood supply in vulvo-vaginal area, which results GSM. GSM causes burning in vagina, dyspareunia, urinary urgency, repeated UTI. Dyspareunia affects all the domain of sexual function and deteriorates the quality of life. Anatomical modification related to GSM includes- thinning of vaginal mucosa, mucosal dryness, atrophy of elastic and collagen tissue with reduced blood supply. Menopause results altered appearance and function of smooth muscle cells, increased density of connective tissue and fewer blood vessels, an increase of vaginal pH, which is an index of poor vaginal epithelium maturation, indicates estrogen deficiency and it results chronic VVA or GSM¹. There is also changes in vaginal flora associated with the loss of superficial cells, glycogen, and lactobacilli result in increased pH and the increased potential for vaginal and urinary tract infection and inflammation. Decreased in vaginal blood flow and lubrication often result in dryness and dyspareunia². The reduced blood supply and less elasticity make the vagina prone to petechial, injury and pain.

Vitiated Apana Vata and Rasa Dushti causes constipation and flatulence, burning micturition, itching vagina, dyspareunia. Vitiated Vyana Vata and Rasa Dushti cause vaginal dryness involving Artavavaha Strotas. Vitiated Vata and Mamsa Dushti cause atrophic vaginitis involving Artavavaha Strotas. All these together lead to genitourinary symptoms^{3,4}.

Episcleritis is benign recurrent inflammation of the episclera, involving the overlying tenon's capsule but not the underlying sclera⁵. As a rule, episcleritis presents with acute onset of redness, lacrimation and photophobia. Generally, it is painless with minor eye tenderness. It commonly affects a single quadrant in one eye as opposed to scleritis that may involve more than one quadrant. The above presented disease can be compared with Sirajala a rakthaja (vitiated by blood) chedhana (excision) sadhya (curable) vyadhi (disease) described under suklagata netra roga (diseases of the sclera) in ayurveda². The signs and symptoms of sirajala are jalabha (network of vessels), Katina sira Mahan (tough raised vessels) ⁶.

Case report

A 55 year old postmenopausal lady came to O.P.D of Prasutitantra and Streeroga department of ITRA Jamnagar. Since one year she was experiencing hot flashes, night sweats and increased sweating. She had complaint of flatulence, constipation, white discharge p/v with itching, tiredness since 7 days. She felt poor memory, increased anger, headache, disturbed sleep, depression, anxiousness for last one year. She was having decreased sexual desire, pain during coitus and vaginal dryness. Since 7 days she presented with decreased amount of micturition and burning sensation during micturition. Since one month she was having redness in her one eye for which she took modern medicine but not relieved. The symptoms were severe enough to disturb the quality of her life and for the above said complaints she consulted gynaecologist.

Her past menstrual history revealed that she had menarche at the age of 14 years, having regular cycles, with 2-3 days duration and moderate amount of bleeding. Her last menstrual period was on 16/8/2013. Her obstetric history was gravida 3; Parity 3; Abortion 0; Living 3.

Her personal history revealed she had reduced appetite, constipated bowel, disturbed sleep, decreased frequency and burning micturition.

Clinical findings

Her vital signs revealed afebrile, having blood pressure 130/70 mm Hg, heart rate-72/minute and respiratory rate-14/minute. She was of Kapha Pitta prakriti with Madhyama satwa. Her pelvic examination showed no signs of redness, swelling, cystocele and rectocele on inspection. P/S finding showed vagina dry, pinkish pale, cervix firm, and round, with mild whitish discharge. P/V finding showed uterus anteverted, cervix firm mobile with no tenderness on movement, fornix clear.

Red eye was diagnosed as diffuse episcleritis but it was not relieved by modern medications.

Diagnostic focus and Assessment

The patient was diagnosed as having Menopausal syndrome by Australasian Menopause Society Symptom Score Sheet. The patient attained a score of 49 which suggests that she needs treatment. Table 1: Australasian Menopause Society Symptom Score Sheet

Investigations

Hb- 11gm%, ESR- 90mm/hr, Urine R/M- pus cells—18-20/hpf

USG findings were- Uterus- AV Normal size, ET 3mm, Atrophic ovary, mild adenomyosis, and small fibroid.

Therapeutic intervention

The patient was given Deepana pachana with Trikatu churna with warm water for three days. Then she was given Ksheerapaka Basti of Vayasthapana Gana Choorna 7 for 8 days in apana kaal 4-5pm. Fine powder of Vayasthapana Gana (total 30gm) was boiled with 15 parts of Ksheera (450 ml) and 15 parts of water (450ml) until only milk part remains⁸. Thus obtained Ksheera Paka is filtered and used for Basti procedure.

Vayasthapana gana choorna 5gm bd ksheerapaka pan before meal for one month.

Panchavalakal, nimba choorna for vaginal wash, & chandraprabha vati 2tab bd with luke warm water for 15 days.

Outcome

It was observed that after eight days of basti, the patient got marked relief of hot flashes, micturition problems, bloatedness, gas trouble, disturbed sleep and emotional disturbances. After two months of treatment, patient got better relief of almost all symptoms except for sexual problems, weight gain and vaginal dryness. Patient got relief in constipation and gas formation after ksheerabasti. Ksheerabasti, oral, vaginal wash and chandraprabha vati gave relief in burning micturition, white discharge with itching. After 4th day of ksheerabasti patient got relief in redness in eye which was concerned as autoimmune disorder by modern consultant. She felt good appetite, regular bowel, wellness of mind and body.

Discussion

Ayurveda describes Rajonivritti as the end of Artava pravritti. This occurs in jarapakwa sareera and may get manifested from the age of 50. In Jaraparipakwa sareera, there will be degradation in the formation of Artava which is the Upadathu of rasa due to Applenana⁹. There will be gradual depletion of dhatus, upadhatus and ultimately ojas. Ras-rakta dhatu kshaya causes kshaya of nagapushpa and Bahya pushpa resulting in Rajonivritti. Rasayana (Rejuvenation therapy) delays the degenerative process of our body may be useful in the management of Menopausal Syndrome. Drugs mentioned under Vayasthapana Gana have the property of rasayana, vyadhi nasanam, medhya, balya, jeevaneeya, dhatu pushti Kara. Most of the drugs have Tikta, Madhura and Kashaya rasa and having Madhura Vipaka. Tikta, Kashaya rasa are Pittashamak and also subside Kapha dosha. Madhura rasa having soothing effect promotes strength and pacify Pitta and Vata Dosha. So, Vayasthapana Gana choorna works as Tridosha Shamaka and reduce the Rajonivritti janya lakshanas by balancing Tridosha. Most of the drugs having

Dipana, Pachana property which improves the status of Agni in this patient. Amalaki, Shatavari, Jatamansi, Mandukparni, Guduchi, Shalparni and Punarnava have Hridya property; Amalaki, Shatavari, Jatamansi, Mandukparni, Haritaki, Jivanti have Medhya property. The drug Punarnava, Mandukparni, Shatavari and Aparajita helps to reduce psychological symptoms of patient. Researches shown that Aparajita induces feeling of calm and peace promotes good sleep and relieves anxiety and mental fatigue¹⁰. Researches shown that the drug Punarnava possess antistress, adaptogenic, immunomodulatory, antibacterial activity¹¹. Punarnava, Jivanti and Shatavari have Mutrala Properties which reduced bladder problems. Punarnava, Amalaki and Guduchi normalized the blood pressure of the patient. Vasomotor symptoms of the patient is mainly improved by phytoestrogenic activity of Shatavari¹² and due to Seeta virya of Amalaki, Jeevanti, Mandukaparni, Shatavari; dahasamani property of Guduchi. The physical symptoms of patient were improved mainly by Vata pacifying action of Rasna; anti-inflammatory action of Guduchi, Sthira and Punarnava. The increased physical and mental well-being of the patient may be due to the rejuvenative action of Abhaya and Aamalaki. Majority of the drugs of Vayasthapana Gana has been investigated in modern pharmacology for its antioxidant, free radical scavenging, cytoprotective, immunomodulatory, adaptogenic, antifungal, anti-inflammatory, anti-aging, neuroprotective properties by which it reduces genito urinary syndrome of Menopause¹³. Basti is the most important treatment for vata, drugs given in basti form has specific target action and quick absorption. Ksheera is jeevaneeya, medhya, rasayana, brimhana, especially pitta samana and in form of basti maximum absorption would be ensured. Owing to this properties of vasti, the patient felt marked improvement the patient got marked relief of hot flashes, joint pain micturition problems, bloatedness, gas trouble, disturbed sleep and emotional disturbances.

As described by Aacharyas, shuklagata roga have rakta dushti and affects sira. In Sirajala, kapha is the sthanika dosha i.e. ashraya and rakta is in prakopa awastha i. e. ashrayi. According to ashraya-ashrayi chikitsa principle, the treatment should be kapha-rakta shamaka. Moreover it also has features of netra aamavastha like- raga, shopha, gharsha, shoola, ashru etc. therefore aama pachana treatment should also be added. vayasthapana ksheerapaka basti by its saravadaihika effect and vata pitta shamaka property pacifies rakata dushti resulting in relief in redness and pain in eye. chandraprabha vati acts as catalyst for other herbal ingredients to deliver swift therapeutic action.

Conclusion

Menopausal syndrome having genito urinary symptoms can be successfully managed with Vayasthapana Gana Ksheerapaka Basti, orally with Vayasthapana gana churna.

Vayasthapana Gana Ksheerapaka Basti and oral Vayasthapana gana churna also help in treatment of diffuse episcleritis.

Acknowledgement

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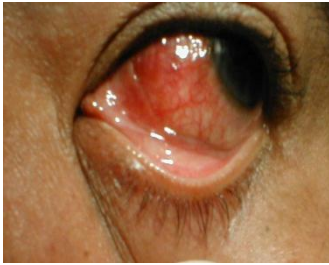
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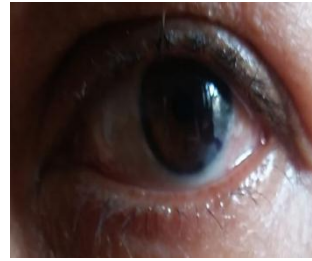
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Table 1. Australasian Menopause Society Symptom Score Sheet

Symptoms	None-0	Mild-1	Moderate-2	Severe-3
Hot Flashes				3
Light headed feelings		1		
Irritability				3
Depression				3
Unloved feelings				3
Anxiety				3
Mood changes				3
Sleeplessness				3
Unusual tiredness				3
Backache				3
Joint pains				3
Muscle pains			2	
New facial hair	0			
Dry skin			2	
Crawling feelings under skin			2	
Less sexual feelings				3
Dry vagina				3
Uncomfortable intercourse				3
Urinary frequency				3
Headache				3



Before ksheerabasti



After ksheerabasti

ROLE OF SHATAVARI AND ASHWAGANDHA IN THE IMPROVEMENT OF GERIATRIC WOMEN HEALTH -A REVIEW ARTICLE

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ABSTRACT

Introduction Ageing is the accumulation of changes in a person over time. Geriatric care has to address two fold problems, firstly the basic anti-aging care to retard the rate of physiological ageing and secondly the medical management of diseases specifically occurring in old age. Vriddavastha is the period after 60 or 70 years of age. This stage of life becomes very crucial as degenerative change occurs to dhatu, indriya, bala, veerya, utsaha, paurusha, parakrama, grahana, dharana, smarana, vachana. Disease and disability of older women are very closely related to the loss of female sex hormones after menopause. HRT (hormonal replacement therapy) is the conventional treatment practiced for it. Ayurveda has a focused branch of medicine called rasayana, which deals with diseases as well as problems related with ageing. Rasayana chikitsa in Ayurveda are having similar effect in comparison to hormonal replacement therapy. Shatavari and Ashwagandha are selected for this purpose, as both of them are known for their anabolic potentials (rasayana) and phytoestrogenic properties. An anabolic rasayana tends to give dhatu poshana leading to the proper nourishment of all the dhatus by enhancing nutrition and qualities of all dhatus. Shatavari and ashwagandha are said to be good source of phytoestrogens and are recommended for all three dosha vitiation. Aims and objectives: The purpose of this review is to evaluate and explore the pharmacological and phytoestrogenic activities of shatavari and ashwagandha in geriatric women health. Materials and methods: Literatures such as Brihatrayee, Nighantu modern text books written in 21st century and recent journals were critically reviewed to explore safety and efficacy of pharmacological and phytoestrogenic activity of shatavari and ashwagandha in geriatric women health. Discussion: Shatavari is the main rejuvenative tonic for the female, having gunas like balya, vayasthapana, rasayana, medhya and agnivardhaka properties which help to reduce the dhatukshaya lakshanas also reduce manasika

laskhanas when given orally. Ashwagandha due to its vayasthapana and balya properties, directly acts as rasayana causing dhatu pushti and manasa tarpana. Further it supports sound sleep, has anti-stress effect, improves degenerative changes, also affects elements of the central nervous system and the immune system. Conclusion: Thus an attempt to highlight the role of shatavari and ashwagandha in the improvement of geriatric women health through its pharmacological and phytoestrogenic properties. Key words: geriatrics, shatavari, ashwagandha, rasayana pharmacology, phytoestrogen.

Introduction: Aging is essentially a physiological phenomenon which results because of overwhelming of inherent evolutionary processes by the involutionary changes occurring in the mind-body system. Geriatric care has to address two fold problems, firstly the basic anti-aging care to retard the rate of physiological ageing and secondly the medical management of diseases specifically occurring in old age such as osteoporosis, obesity, hypertension, diabetes, Alzheimer's disease, degenerative arthritis. Disease and disability of older women are very closely related to the loss of female sex hormones after menopause. In Ayurveda geriatrics is considered as jarapakwa avastha and in women it can be considered as postmenopausal phase or rajonivrutti. Rajoni vrutthijanya laskhanas are produced as a result of dhatukshaya in the body(1). In this stage majority of women encounter problems like hot flushes, nightsweats, palpitations, insomnia, anxiety irritability, vaginal dryness, vaginal and cervical atrophy. A common practice to relieve menopausal symptoms is to administer hormone replacement therapy, which is not free from adverse effects, therefore women are turning to natural medicine in an attempt to have a safe alternative to synthetic steroidal hormones. Shatavari and ashwagandha being known sources of phytoestrogens can be effective in reducing adverse menopausal symptoms.

Ayurveda has a focused branch of medicine called rasayana, which deals with diseases as well as problems related with ageing. Shatavari and Ashwagandha are selected for this purpose, as both of them are known for their anabolic potentials (rasayana) and phytoestrogenic properties. An anabolic rasayana tends to give dhatuposhana leading to the proper nourishment of all the dhatus by enhancing nutrition and qualities of all dhatus.

India is abundantly enriched with a good sort of herbs having therapeutic worth. Shatavari is most commonly used ayurvedic herb. *Asparagus racemosus* (family-Asparagaceae) traditionally known as SHATAVARI means "who possesses a hundred husbands or acceptable to many, indicates that this herb is highly effective in problems related with female reproductive system, main rejuvenative tonic for the female(2). ASHWAGANDHA (*Withania somnifera*, family-solanaceae) used as a broad

spectrum remedy in india for centuries.ashwagandha is categorized as an anti-inflammatory, antioxidant herbal suppliment Therapeutic implications for cancerous tumors as well as neurodegenerative diseases documented,classified as an adaptogen ,which indicates its ability to regulate physiological processes and there by stabilize the body's response to stress⁽⁹⁾

MATERIALS AND METHODS : Literatures such as Brihatrayee,Nighantu ,modern text books written in 21st century and recent journals were critically reviewed to explore safety and efficacy of pharmacological and phytoestrogenic activity of shatavari and ashwagandha in geriatric women health.

RESULT AND DISCUSSION:

ACTIVE CONSTITUENTS OF SHATAVARI :The major constituents of *Asparagus racemosus* are steroidal saponins(shatavri 1)which are present in roots .Shatavarin IV is a glycoside of sarsasapogenin having two molecules of rhamnose and one molecule of glucose.other active compounds such as quercetin,rutin,,hyperosid are found in flowers and fruits.while diosgenin ,querticin -3 glucuronid present in leaves .also contains vitamins A,B1,B2,C,E Mg,P.Ca,Fe and folic acid .other primary constituents are asparagin,arginine tyrosine flavonoids,resin,tannin. ⁽⁴⁾

PHARMACOLOGICAL ACTIONS OF SHATAVARI RELATED TO GERIATRIC WOMEN HEALTH :A *racemosus* is also suggested for its soothing agent upon systemic dryness which is part of natural aging process. *Asparagus* root possesses aphrodisiac,anti-carcinogic ,anti-proliferative,cardio protective ,anti -bacterial ,anti-fungal,anti -oxidant,anti-depressant,hepatoprotective,immunomodulant,anti -inflammatory,anti -diabetic ,anti- spasmodic,diuretic,anti-septic properties(5).Useful for menopause,leucorrhea and has the capacity to balance pH in the cervical area.It endores positive emotions that calming fresh sensitivity and the sizzling emotions such as irritability,anger,jelousy,resentment, and hatred. also helps with pain, restless sleep,disturbing dreams,in those having weak emotional and physical heart.

PHYTOESTROGENIC ACTIVITY OF SHATAVARI : Shatavari is mainly known for its phytoestrogenic properties Phytoestrogens exhibit structural similarity and mimic the effect of naturally occurring estrogen compounds in the body The majority of phytoestrogens belong to a large group of phenolic compounds known as flavonoids,isoflavones,prenylated flavonoids are estrogens with the most potent estrogenic activity .They promote growth differentiation,and physiological functions,of the female genital tract,pituitary,breast and several other organs.Phytoestrogenic compounds are capable of binding to the estradiol(E2) receptors (E2R).In silico research

has suggested that shatavari derived phytoestrogen including rutin, kaempferol, genistein, quercetin bind to E2R with greater affinity than a selective estrogen receptor modulator control, Bazedoxifene. ⁽⁶⁾ The potential for estrogen like effects of shatavari supplementation has implications for both muscle and bone health after menopause. In the presence of excess of estrogens in the body, phytoestrogens may have antiestrogenic effect by occupying some estrogen receptors various formulations containing shatavari have shown their effectiveness in alleviating the symptoms in and postmenopausal period and in hysterectomised patients.

AYURVEDIC REVIEW: Shatavari secures the honour of a rasayana in Ayurveda which means herbal medication encouraging regular health by boosting cellular endurance. Charaka samhitha and ashtanaga hridaya are the two main texts on ayurvedic medicines, lists shatavari as part of the formulas to treat disorders affecting women's health. Charaka describe the guna of shatavari as balya and vayasthapana, also in bhavaprakasha Nighantu its properties are balya, medhya, agnivardhaka properties which

Rasa	Madhura, tikta
Guna	Guru, snigdha
Vipaka	Madhura
Virya	Sita

help to reduce dhatukshaya laskhanas. Rasa panchaka of shatavari mentioned in table no 1 below

Shatavari has vatapittahara properties, helps to relieve symptoms caused due to vata and pitta. Shatavari is the having gunas like balya, vayasthapana rasayana, medhya and agnivardhaka properties which help to reduce the dhatukshaya laskhanas also reduce manasika laskhanas when given orally. Shatavari has a long term use in Ayurveda for increasing satwa (healing energy) inside the body. It also increases ojas, acts on sapta dhatus. (7) An anabolic rasayana tends to give dhatuposhana leading to the proper nourishment of all the dhatus by enhancing nutrition and qualities of all dhatus

Other uses: vrushya, kshayapaha, pushtida, chakshushya, pittasrahara, gulmahara, shophahara, kshataskheenahara, retodoshahara.

FORMULATIONS: shatavari gritha, shatavri taila, shatavri kwatha, mahanarayana taila, shatavri guda, shatavri churtna, shatavari mandura.

ASHWAGANDHA: ACTIVE CONSTITUENTS : It include alkaloids (isopelletierine, anaferine, cuseohygrine), etc steroidal lactones and saponins. sitoindosides and acylsteryl glucosides in ashwagandha are anti stress agents. Active principles of

ashwagandha for instance the sitoindosides VI-X and withaferin-A have been shown to have anti-stress activity⁽⁸⁾

PHARMACOLOGICAL ACTIONS OF ASHWAGANDHA RELATED TO GERIATRIC WOMEN HEALTH

Anxiety is one of the prominent features of post-menopausal women because of sudden withdrawal of sex hormones i.e estrogen and progesterone. Ashwagandha is one of the medhya rasayana but also acts as anxiolytic drug, helps to reduce anxiety level in post menopausal women and hence improve the quality of life. Ashwagandha known for its ability to support especially brain function and nervous system, adrenal and sexual functions, helping relief stress and promoting feeling of calmness and relaxation. It is also known for its neuroprotective, thyroid modulating, anti-tumor, anti-inflammatory properties. It may help protect the heart and brain damage, reduce adrenal insufficiency, support memory and promote nerve cell regenerations, maintains normal blood sugar and cholesterol levels, improves sleep, increases muscle strength and support immune system. It improves level of sex hormones by reducing cortisol levels. Ashwagandha supports healthy levels of luteinizing hormone which triggers development of the corpus luteum out of which progesterone is made.⁽¹⁰⁾

PHYTOESTROGENIC PROPERTIES OF ASHWAGANDHA : Ashwagandha beneficial in normalizing oestrogen and reducing hot flushes, mood fluctuations, sleep issues, irritability and anxiety. It prevents loss of bone mineral density and help normalize follicle stimulating hormone which increases the risk of postmenopausal osteoporosis⁽¹⁰⁾

AYURVEDIC REVIEW : Among the ayurvedic rasayana herbs, Ashwagandha holds the most prominent place. It is known as “sattvic kapha rasayana” herb.

Rasa	Tikta, kashaya
Guna	Laghu, snigdha
Virya	Ushna
Vipaka	Madhura

Due to madhura rasa and snigdha guna present in ashwagandha helps to increase from rasadhatu to shukra dhatu. Tikta rasa does agni deepana karma. Therefore dhatu gets nourishes and enhanced. Ashwagandha helps to increase prithvi and jala mahabhoota amsa present in dhatu which results in increase of mamsa dhatu. Mamsa dhatu helps to provide nourishment to body and helps in brahmana karma. It has kaphavatahara properties. Ashwagandha due to its vayasthapana and balya properties, directly acts as rasayana causing dhatupushti and manasa tarpana.⁽¹¹⁾

Other actions:kantivardhaka,Kasahara,krimigna,shophhahara,kanughna

FORMULATIONS: Ashwagandhadya gritha,ashwagandhadya kwatha,Ashwagandha rasayana,AShwagandhadi lehya,Balashwagandhadi taila.

CONCLUSIONS : Ayurveda and modern medicine have basic epistemological differences.Ayurvedic wisdom and logic is more health -oriented than disease oriented.in modern view,A common practice to relieve menopausal symptoms is to administer hormone replacement therapy,which is not free from adverse effects,therefore women are turning to natural medicine in an attempt to have a safe alternative to synthetic steroidal hormones. Rasayana chikitsa in Ayurveda are having similar effect in comparsion to hormonal replacement therapy in modern view.Hence both of these drugs are selected having rasayana and phytoestrogenic proeprties.Shatavari and ashwagandha have shown highly significant result in treating symptoms postmenopausal symptoms like hotflushes,night sweats,palpitations insomnia,anxiety irritability.Shatavari and ashwagandha are the important medicinal plants having traditional importance as it is used in the indigenous system of medicines like Ayurveda,sidda and unani.Clearly,more research is needed to define the effect of phytoestrogens from shatavari and ashwagandha and characterizing formulations and /or isolated phytoestrogens is imperative. Further more drugs having similar gunas needs to be explored.

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RASAYANA CHIKITSA IN GERIATRIC WOMEN CARE

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INTRODUCTION

Ayurveda means the science of life which consists of 8 branches. Jarachikitsa is the 7th branch of ayurveda which explains about rasayana chikitsa. The term rasayana consists of two words rasa and ayana, rasa means taste or essence or flavor or juice etc. Ayana means a path or to increase or to circulate. The rasayana will increase and promote the circulation of vital essence all over the body causes the nourishment of uttarottara dhathu with good quality and quantity. According to sushruta, rasayana tantra means which endows vayasthapana-imparts longevity, age sustainer, rogapaharan through enriching the immunity. ^[1]

“Menopause is just puberty’s evil older sister”. Geriatric women are passing through various process of the body like-premenopause-peri menopause menopause & postmenopause. Perimenopause is the beginning of the next phase of a reproductive women where she faces irregular menstruations, sweaty nights, sleepy mornings etc. That will continue upto 4-8 yrs till she attains menopause. Menopause is defined as permanent cessation of menstruation at the end of reproductive life due to the loss of ovarian follicular activity. It is the point of time when last and final menstruation occurs.

Post-menopause is the last phase of a women’s life counting from her puberty. Because from there onwards the hormones will not have any major shifts as such previously happened in her life. Geriatric women are currently passing through this phase, where the estrogens lowered their activity and other functions of the body were highly effected due to that.

Aim and objectives

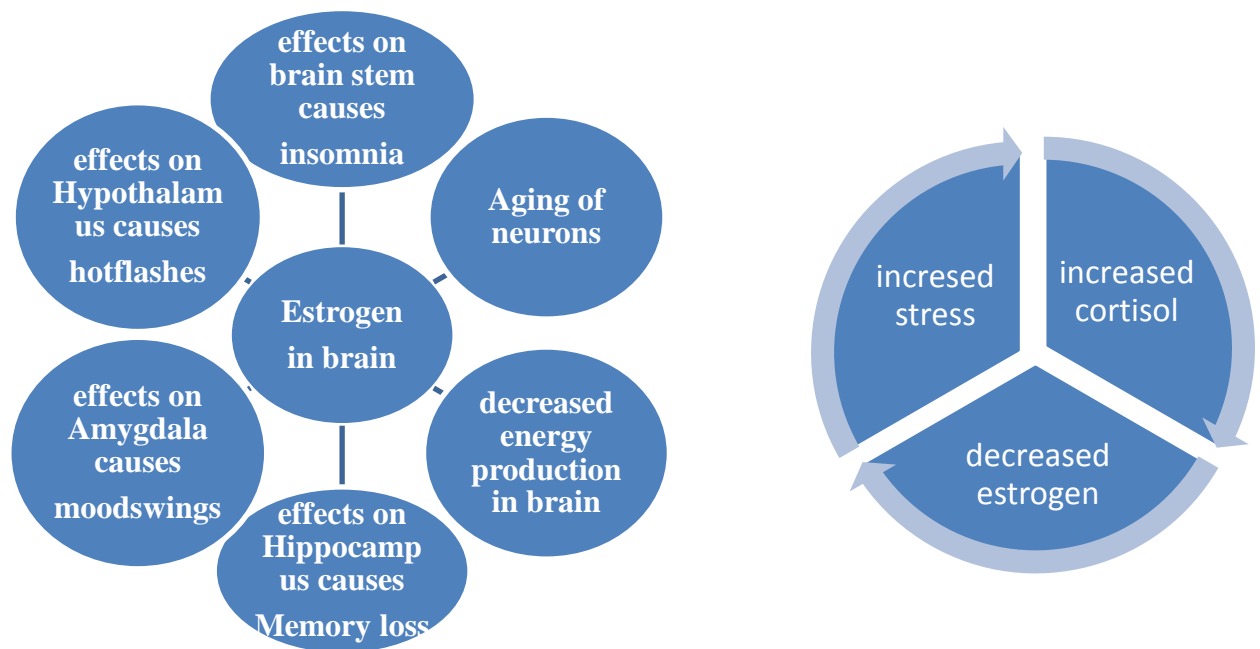
- To study about physiological changes in geriatric women
- To study the role of rasayana chikitsa in geriatric women care

MATERIALS AND METHODS

Literary references are collected from Charaka samhitha, Susrutha samhitha, Ashtanga hrudaya and various other ayurvedic samhithas and books of modern medical science.

Physiological changes in geriatric women

Geriatric women are who attained menopause and going through a postmenopausal stage of their life. During the menopausal transition, estrogen levels decline and levels of FSH and LH increase. The menopausal transition is characterized by variable cycle lengths and missed menses, whereas the postmenopausal period is marked by amenorrhea. The menopausal transition begins with variability in menstrual cycle length accompanied by rising FSH levels and ends with the final menstrual period. Menopause is defined retrospectively as the time of the final menstrual period, followed by 12 months of amenorrhea.



Post-menopause describes the period following the final menses. The major consequences of menopause are related primarily to estrogen deficiency. It is very difficult to distinguish the consequences of estrogen deficiency from those of aging, as aging and menopause are inextricably linked. Many symptoms are found related to postmenopausal syndrome: Hot flushes, irritability, mood swings, insomnia, dry vagina, difficulty concentrating, mental confusion, stress incontinence, urge incontinence, osteoporotic symptoms, depression, headache etc. The deficiency of estrogen decreases the energy of brain and causes the above psychological symptoms and increases the stress. Deficiency of estrogen in cardiovascular system can lead to risk of myocardial infarction, in urogenital mucosa it causes dry vagina, urge incontinence & in bones it can cause osteoporosis. More changes happen in central nervous system than the other

systems. So the geriatric care in women care should be focused on the neuro protective as well as balancing of the other systemic changes. ^[2]

Discussion

➤ Rasayana chikitsa

Rasayana chikitsa is the heart of jara chikitsa. It is the best way to prevent diseases. The benefits are focused on attaining strength (balya) life giving (jeevaneeya), deerghamayu, medha, smruthi, kanthi, pranathi, vaaksidhi, bulk promoting (brumhaniya) and stabilizing the aging process (vayasthapana). It maintains the equilibrium of dosha, dhatu, mala which brings health. ^[3]

➤ Probable mode of action

Rasayana may act at three levels of biosystem to promote nutrition such as -

1. At the level of Agni by promoting the digestion and metabolism.
2. At the level of Srotasa by promoting the microcirculation and tissue perfusion.
3. At the level of Rasa itself by acting as direct nutrition.

• According to Allopathic mode of action rasayana have anti oxidative action which postulates the age associated oxidative reductions, immunomodulatory actions, Antiaging effect, Adaptogenic effect, Neuroprotective action, Hemopoietic action & Anabolic actions ^[4]

➤ Rasayana used in geriatric care

RITHU RASAYANA RASAYANA YOGAS SINGLE DRUGS ACHARA RASAYANA

- In vasanta- ghrita preparation with aragwadhadhi gana+ vastsaki gana
- In Varsha- vidaryadi gana+rasnadi kalka- ghrita sevana ^[5]
- Chyavana prasha
- Brahma rasayana
- Narasimha rasayana
- Dhatri rasayana
- Vidangadi rasayana
- Ashwagandha
- Amalaki
- Satavari
- Vidari
- Gokshura

- Bala
- Mandukaparni
- Guduchi
- Yashtimadhu
- Shankhpushpi
- Brahmi

Rasayanas should be used only after the shodhana of the patient otherwise it will to diseases. Agni of the patient should be well enough to digest the rasayanas other wise should be continued with deepana pachana chikitsa. Alongwith this achaara rasayana should be followed. ^[6]

Geriatric women are very prone to disease and always with minimal psychological issues due to their postmenopausal phase. Rasayanas are the best remedy to them because it reaches upto the subtle level of mind through the saptajavaha srothas and nourishes the further. Most of the preparations have phytoestrogens, antioxidants, immunomodulators etc are can be recommended instead of hormone replacement therapy in geriatric women.

Conclusion

Aging is not a disease, it's a natural process of life. Geriatric people are faced with numerous challenges- physiologically & psychologically. Geriatric women needs special care to balance their hormonal changes which is fulfilled by Rasayana chikitsa by which body tissues attain its best capacity to perform their systemic activities. Research studies shown- Hormonal replacement therapy can manage menopausal symptoms it can also leads to breast tenderness, low back pain, vaginal bleeding, mood changes. If properly implemented, rasayana chikitsa can give a better result instead of hormonal replacement therapy.

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MANAGEMENT OF PSYCHOLOGICAL PROBLEMS IN GERIATRIC WOMEN WITH MURDHNI TAILA

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INTRODUCTION

Geriatrics is emerging as a major medical speciality all over the world. The world population of elderly is increasing across the world. Old age women population are affected with physical, psychological, emotional and social challenges in their life. The most common psychological symptoms are anxiety, depression, and sleep disorders¹. In Ayurveda, geriatrics is considered as jarapakwa avastha and in women it is considered as post-menopausal phase or Rajonivrutti. Vata predominant diseases are most common in this stage. The factors for Vataavridhi in old age are due to Vriddhavastha, Dhatukshaya, Rukshata, Shosha, etc. There is no direct reference available regarding lakshanas of Rajonivritti in the Ayurvedic classics. Snehana is the best management for vatashamana in jarapakwa avastha. Murdha is one among the trimarma of the body and considered as uttamanga which is the seat of prana. Murdha taila is considered ideal for relieving psychological problems by vatashamana by nourishing the shirapradesha.

MATERIALS AND METHODS

The study was done by collecting literature regarding the descriptions available for the management of psychological problems in geriatric women with murdhni taila.

PSYCHOLOGICAL PROBLEMS IN GERIATRIC WOMEN

The most common psychological disorders in post-menopausal age group are dementia, depression, insomnia, anxiety, mood swings, anxiety, irritability etc which are mainly due to vata dosha. Manasika doshas (Raja and Tama) are also responsible for this. Dementia (smritinasha) is characterized by progressive loss of memory and other cognitive domains, affecting an individual's ability to maintain normal social or occupational function. It has physical, psychological, social and economic impacts.

Currently more than 55 million people live with dementia worldwide. The rate of incidence of dementia and Alzheimer's disease are higher for women than for men². Depression (mano- avasada) is a common mental disorder in elderly and contributes to significant psychological and social distress, physical disability and higher mortality. It is characterized by sadness, loss of interest, pleasure, feeling of guilt, or low self-worth, disturbed sleep, poor appetite, low energy, and poor concentration. Anxiety is one of the most common symptoms seen in the elderly. It is a psychological and physiological state characterised by cognitive, somatic, emotional and behavioural components. Anxiety disorders occur more often in women. Insomnia is the most common sleep disorder in elderly, it comes under vataja nanatmaja vikara and called Anidra or Nidranasha. The incidence of insomnia in women is 1.3 times greater than in men³.

MURDHNI TAILA

Murdhni Taila or Moordha Taila is a type of Bahya Snehana procedure on the shiras in which medicines remains in contact with the scalp for a fixed duration of time. Murdha Taila is also practiced as a part of Dinacharya.

Types of Moordha Taila⁴ –

Moordha Taila or Murdhni Taila is of 4 types –

1.SHIRO ABHYANGA –

Application of oil on shiras followed by massage is shiro abhyanga. Shiro abhyanga is specially indicated in roukshya, kandu mala etc. Daily application of shiro abhyanga specially indicated in jara, srama and vatavikaras.

2.SHIRO SEKA / SHIRO DHARA –

Shiro dhara or seka or prishika is a procedure in which different forms of medicated liquids is poured in stream over the head for a fixed duration of time (usually 35-45 minutes or 60 minutes). Shirodhara is an effective procedure for head related diseases in a prophylactic and curative way. It is very effective in cases of insomnia, anxiety and depression. Acharya vagbhata prescribed parisheka for conditions of arumshika, shirasthoda, daha etc which are the common conditions seen in elderly women. Ksheeradhara, Snehadhara, Dhanyamladhara, Kashaya dhara, Takra Dhara, Lala dhar, Kashaya dhara are the different variations of parisheka.

3.SHIRO PICHU –

The Pichu is kept in shiras for a fixed duration of time (usually 1-2 hours to 1/4 to 1/2 a day). Shiro Pichu is used to treat many diseases occurring due to Shiro abhithata, Pakshaghata, Anidra, Shiro rukshata ,kesha shatana sputana and dhoopana.

4.SHIRO BASTI –

Shirobasti is specially indicated in conditions of prasupthi, ardita, nidranaasa, timira and other daruna shirorogas.

Among the above four Shiro Pichu is the most effective and beneficial procedure.

DISCUSSION

This paper is to highlight the role of murdhni taila in the management of psychological problems in geriatric women. Proper use of murddhni taila will cure all types of vataja shirorogas, results in indriyaprasada, and provide swara-hanu-moordhabala

RESULT

Tarpana or Snehana type of treatment is the preferred treatment in psychological problems such as dementia, depression, insomnia, anxiety, mood swings, anxiety etc which are more common in post-menopausal women. For promoting health, preventing disease and managing chronic illness murdha taila is very important. So, it is considered as ideal for relieving psychological problems in geriatric women.

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ROLE OF AYURVEDA IN MENOPAUSE VS HRT

AN AYURVEDIC VS CONTEMPORARY OVERVIEW OF MENOPAUSE

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ABSTRACT

Menopause is said to be universal reproductive phenomenon. This phase of life is more vulnerable for women as long with ageing she suffers from inevitable scars of menopause. Menopause means permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity. In Ayurveda menopause condition is termed as “ Rajonivrutti”. Rajonivrutti janya lakshana is a group of symptoms produced by degenerative changes in the body. Degenerative changes are explained in Ayurveda as Dhatukshaya lakshana. Vata dosha dominance is seen in the later stage of life. Hormone Replacement Therapy (HRT) is the only alternative available for menopausal syndrome in modern medicine. It also has a wide range of side effects on the body of female. But in Ayurveda to combat the degenerative process of the body tissue, Acharyas have describe Rasayana Chikitsa. Ayurveda has excellent solution for a safe and happy transition into menopause. Ayurveda, the science of life, advocates a holistic treatment of menopausal syndrome by modification of diet and lifestyle, utilizing various herbs and minerals and offers a reliable option to the convention treatment. Ayurvedic treatment for menopause involves correcting hormonal imbalance with appropriate diet, Samshamana therapy, internal detoxification (Panchakarma therapy), Rasayana therapy and Yoga therapy.

KEYWORDS – Menopause, Rajonivrutti, Ayurveda, HRT

INTRODUCTION

Menopause is a natural phenomenon occurs at the age of 45-55 years. Menopause means permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity[1]. Various symptoms seen in menopausal phase which includes vasomotor symptoms like hot flushes, night sweats, headache, insomnia, dizziness etc. Psychological symptoms include mood swings, anxiety, depression

irritability etc other symptoms include loss of libido, dyspareunia, osteoporotic changes as well as cardiovascular changes. Being an alarming problem, it needs an effective and safe treatment. In modern science, Hormone Replacement Therapy (HRT) is one and only alternative for this health hazard by which one can get spectacular achievement in combating the disease, but it has a wider range of secondary health complications like vaginal bleeding, breast cancer, endometrial cancer, gallbladder diseases etc. on the other hand this therapy is not much effective in the psychological manifestations of this stage. In Ayurveda, this phenomenon taken in a different way and not as a serious health problem. As Acharya Sushruta mentioned menopause deals with “Jara Pakva Avastha” of the body. The ancient Acharyas termed it as a normal physiology occurring at the age near about 50 years is mentioned as age of Rajonivrutti[2], due to Vata predominance and Dhatukshaya.. Rajonivrutti janya lakshana is a group of symptoms produced by degenerative process of body tissue. Degenerative changes are explained in Ayurveda as Dhatukshaya lakshana. To combat the degenerative process of the body tissue Acharyas have described Rasayana chikitsa. Rasayana includes drugs which promotes longevity and improve quality of life Rasayana therapy can be used in the management of menopausal syndrome.

Modern view of Menopause

Menopause is defined as permanent cessation of ovarian function resulting in permanent amenorrhoea.

Menopausal Symptoms - Vasomotor symptoms like hot flushes, night sweats, headache, insomnia, dizziness etc. Psychological symptoms include mood swings, anxiety, depression irritability etc other symptoms include loss of libido, dyspareunia, osteoporotic changes as well as cardiovascular changes.

Management of Menopausal Syndrome –

1)Counseling

2)HRT(Hormone replacement therapy) – HRT has a wider range of secondary health complications like vaginal bleeding, breast cancer, endometrial cancer, gallbladder diseases etc. on the other hand this therapy is not much effective in the psychological manifestations of menopausal syndrome.

Potential Health Risks of HRT & side effects of HRT

Potential Realth Risks of HRT	Side Effects of HRT
Endometrial cancer Endometrial hyperplasia Breast cancer Gall bladder disease Thrombophlebitis	Oestrogen related: vaginal bleeding, increased cervical mucus, Nausea, Vomiting, Fluid retention, Weight gain Progesterone related: symptoms like PMS, Anxiety, Irritability, Depression, Sleep disturbance Other: Itching, Headache, loss of hairs etc.

Ayurrrvedic view for Menopause-

In Ayurvedic classics menopause condition is termed as Rajonivrttti & Menopausal symptoms (Rajonivrutti janya lakshana). Women attains Rajonivrutti stage at around 50 years. This age is dominated by Vatadosha, affects the female body ^[3]. The dominant Vata dosha specially with Laghu and Ruksha guna results in reduction in Dravata of Rasa dhatu. This further leads to Dhatukshaya starting from Rasa dhatu, further respective Updhatu kshaya takes place. Thus leading to Artava nasha (amenorrhoea). The vitiated Vata dosha also disturbs the other Sharir as well as Manas Dosha Raja and

Tama dosha) leading to various psychological disturbances. Basic of Ayurvedic Therapy in Menopause-

Sushruta contributed ageing and diseases as the cause for the menopause. According to jararogchikita sutra rasayana is the only way to combat symptoms associated with jara.

Rasayana Therapy -

Literarily the term Rasayana refers to the means of obtaining the optimum nourishment to the Rasadi Dhatus. Thus, the Rasayana is a specialized type of treatment influencing the Dhatus, Agnis and Strotas of the body leading to an overall improvement in the formation and maintenance of the living tissues and helps in the prevention of ageing, improving of resistance against diseases, bodily strength and process of improving mental faculties. In Ayurveda for menopausal syndrome we used drugs which are Vatapitashamak, Rasayana, Hrudya, Ojovardhaka, Vatanulomak, Deepaniya, Balya, Medhya and Brimhana are the drug of choice. Many of the Rasayana herbs are capable of strengthening the immune system; e.g. Shatavari, Ashwagandha, Amalaki, Bala, Yashtimadhu, Dashmool, Rason, Guggul. Rasayan drugs which specially influence Medha and promotes mental competence. Such rasayana are called Medhya rasayana. Acharya Charaka has described four Medhya rasayana namely Shankhapushpi, Madukparni, Guduchi and Yashtimadhu. ^[4] helps to reduce psychological symptoms.

Preparations like Ashwagandha ghrita, Shatavari gharita, Bhramhi ghrita, Rason kshirpak, Saraswatarishta, Chyawanprash can be used for menopausal syndrome

Shatavari – Shatavari contains natural phytoestrogens and so can be used as an alternative to synthetic HRT, gently and naturally rebalancing estrogen levels.

Samshamana therapy- Agnideepana, Amapachana, Anulomana, Balya. Panchakarma therapy – Snehana, Swedana, Shrirodhara, Nasya, Pichu, Basti

Yoga therapy-Yoga and Pranayama can be beneficial in relieving stress and other psychological symptoms as well as improve muscle tone.

Sattvavajaya Chikitsa – Counseling and reassurance regarding stress management and develop positive approach towards menopause can be helpful.

CONCLUSION – Nowadays, symptoms related to menopause are becoming a major problem for which a safe and effective line of treatment is necessary. Hormone

Replacement Therapy (HRT) is the only alternative available for menopausal syndrome in modern medicine. It also has a wide range of side effects on the body of female. On the other hand this therapy is not much effective in the psychological manifestations of this stage. In Ayurveda special branch of Rasayana is explained which is life promoting and deals with aging problems., to improve health as well as longevity. menopausal symptoms generally occur due to disturbed Vata dosha. Dhatukshaya is responsible for Vata vruddhi and vitiated Vata dosha affects various systems in women's body. From the above theory we can conclude that various Aurvedic drugs having properties of Rasayana, Vata shamana along with Panchakarma, Sadvritta, Yoga can be helpful in management of menopausal syndrome as alternative to HRT.

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ROLE OF STHANIKA CHIKITSA IN POST MENOPAUSAL WOMEN CARE

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ABSTRACT

Geriatrics focuses on the healthcare of the elderly people. In Ayurveda the age of a women is classified into different epochs , among which Vriddhavastha can be correlated with Geriatric Age group.Vriddha avastha coincides with Menopause,during which the predominant Dosha is Vata.Hence there are more chances of Vatika disorders,like rukshata in the yoni pradesha causing vaginal discomfort,itching(Yoni kandu),Dyspareunia(Yoni shoola,Yoni sparshasahatwa) and recurrent vaginitis(Yoni srava).Another major complaint during this period is Shitilata of Yoni pradesha causing Urge incontinence ,stress incontinence etc.which later leads to increased frequency of micturition and recurrent urinary tract infections .There are also increased chances for Genital prolapsed because the supporting structure becomes weak and lax as the age advances.

Ayurveda has given different modes of treatment for these gynaecological issues like shodhana chikitsa ,Shamana chikitsa and sthanika chikitsa, Where Sthanika chikitsa like Yoni dhavana, Yoni-pichu, Yoni-dhoopan, Yonilepana, Yoni-purana etc can be used as preventive as well as curative therapy to prevent discomfort due to Rukshata as well condition like Mahayoni due to Yoni Shitilata . Each sthanika Chikitsa has its own importance and shows marvellous results when applied with proper indications, strict aseptic precautions and extreme carefulness. These Sthanika Chikitsa are considered as effective therapy for disease management ,and also provides the advantages of being inexpensive and easy to use. This paper highlights Sthanika Chikitsa as preventive as well as curative measure in Geriatrics.

KEYWORDS: Geriatrics,Sthanika Chikitsa,Menopause,Vriddhavastha,Yoni Rukshata, Yoni Shitilata

INTRODUCTION

Ayurveda is the branch of science which gives equal importance for prevention and cure, Post menopausal time can be correlated with Vriddhavastha. Since Vata is predominant Dosha during this period, all measures by which Vata can be controlled should be adopted. Yoni Rukshata and Yoni shitalata are the two underlying cause for all gynaecological problems during this period. Yoni rukshata leads to vaginal discomfort, itching (Yoni kandu), Dyspareunia (Yoni shoola, Yoni sparshasahatwa) and recurrent vaginitis (Yoni srava). Yoni shitalata leads to Urge incontinence, stress incontinence etc. which later leads to increased frequency of micturition and recurrent urinary tract infections. There are also increased chances for Genital prolapse due to this shaithlya. Sthanika chikitsa which is appropriate to the condition with right medicine gives marvellous results in these gynaecological conditions. These Sthanika chikitsa should be performed according to the prescribed procedure under strict aseptic precautions

OBJECTIVES

- To study about different sthanika chikitsa used in Post menopausal women.
- To study mode of action of sthanika chikitsa used in Post menopausal women

MATERIALS AND METHODS

This is a conceptual type of study. Textual materials are used for study from which various references have been collected. Ayurvedic classical texts, online journals, research papers, articles from pubmed etc are referred for this study.

STHANIKA CHIKITSA IN POST MENOPAUSAL WOMEN

सर्वतः सु वशुद्धयाः शेषं कर्म वधीयते।

बस्त्यभ्यग्न परिषेकम् प्रलेप पचु धारणम्॥ (A.S.U.39/53)

1) YONI DHAVANA

Yoni dhavana is the procedure of cleaning Yoni and Apathyamarga with kwatha or any other drava dravya

Prakshala Dravyas having Tikta Kashaya Rasa and Laghu Ruksha is selected, so their action is Vrana Shodhana, Ropana, Srava kleda shoshana, Kandughna, Krimighna, Sothahara and Vedana sthapana.

DISEASE CONDITION	DHAVANA DRAVA DRAVYA
Yoni paicchilya	Triphala kwatha, Panchavalakala kwatha
Yoni kleda	Triphala kwatha, Pancha valakala kwatha
Yoni sheetalata	Dasamoola kwatha

Yoni kandu	Kashaya of Guduchi, Triphala and Danti
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2)YONI PICHU

Vaginal tampon made of cotton and gauze soaked in Taila/Ghrutha/Kashaya is termed as Pichu, when placed in yoni it is called Yoni pichu .Vesha vara is a modified form of pichu indicated in Mahayoni

पचु तैलं पचुना तुलकेन तैलं वातहर द्रव्य क्वाथ सद्ध योनिषु धारयेत्।

(सु.सं.उ. 37/27, डल्ह.टी

Sneha in pichu does the brimhana of Garbhashaya and Yoni.Vatasamaka property of the drugs helps in correcting Apana vayu

DIESEASE CONDITION	PICHU DRAVYA
Yoni rukshata	Guluchyadi taila
Yoni karkashata	Bala taila,Dhatakyadi taila
Yoni shoola	Saindhava taila,Dhatakyadi taila
Prasramsini	Phala grita pichu
Mahayoni	Changeryadi ghrta pichu,Veshavara

3)YONI PURANA

Yoni poorana is the filling of Yoni with either Taila,kalka ,Pinda,Churna etc made into compact mass and inserted into Yoni.It is usually done when large quantity of drug is required to be retained at the site of action.

Sneha poorana is Balya in action,thus Strengthens Yoni. Kalka and choorna dharana which is mainly of thikta-kashaya rasa pradhana acts as Ropana,sravahara,kledahara.

DIESEASE CONDITION	PURANA DRAVYAS
Vataja Yoni vyapat	Himsra kalka
Yoni shula	Lasuna,Grhadhuma,Visala,Vayuvidanga,Kantakari
Yoni kandu Yoni sparshashtwa	BruhatiPhala+DwiHaridra kalka
Mahayoni	Vasa of Risha and Varaha processed with madhura gana dravyas

4)YONI LEPANA

Medicines in the form of Kalka applied externally in Yoni is called as Yoni lepana.

Lepa is Vatahara hence relieves Yoni shoola. Tikta –Kashaya Rasa pradhana of the lepa acts as Vrana shodhaka , Vrana ropaka and Sopahara

DIESEASE CONDITION	LEPANA DRAVYA
Yoni Gadikarana	<ul style="list-style-type: none"> Palashabeeja,Udumbara,tila taila,Madhu Makandha phala,Madhu,Karpooram
Yoni Shula	Lasuna,Grihadhooma,Visala,Vayuvidanga,Kantakari

5)YONI DHOOPANA

Fumigation of Yoni with Oushada yuktha Dhuma is called Yoni Dhupana

Site of Dhoopana- Bahya Yoni

Dhoopa is Sroto shodaka , Kaphagna,Kledagna and Srava sthambaka

DIESEASE CONDITION	DHOOPANA DRAVYAS
Yoni Sparshasahatwa	Daruharidra,Brihati phala
Yoni kandu	Haridra,Dviharidra,Brihatiphala
Sweta pradara	Sarala,Guggulu,Yava with Ghrita Katu matsyaka with taila

DISCUSSION

The action of sthanika chikitsa is mainly by the absorption of drugs across the vaginal mucosa.Vaginal drug delivery offers many advantages over the Oral route of administration by ,the avoidance of hepatic first pass metabolism,avoidance of enzymatic deactivation in GIT,large permeation area and rich vasularisation.Drugs administered via the vaginal route are absorbed through-Transcellularly via concentration dependent diffusion through the cells.Paracellularly mediated by tight junctions.Vesicular or receptor mediated transport. The drugs used in Sthanika Chikitsa acts by exerting its antiseptic, antimicrobial,antifungal,anti inflammatory and analgesic action.

CONCLUSION

Sthanika Chikitsa are cost effective,safe,effective with almost no side effects.This can be a boon to Stree roga when the Vaidya apply this therapy in practice logically and carefully under strict aseptic precautions.Sthanika Chikitsa holds its own importance and shows tremendous results when applied with proper indications ,strict aseptic precautions and extreme carefulness.

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ROLE OF AYURVEDA IN MENOPAUSE VS HRT

ROLE OF AYURVEDA IN MENOPAUSE VS HRT

- A REVIEW

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Abstract -

Menopause is a physiological ageing change that occurs in women's life. It is permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity. During menopausal stage in women's body there is imbalance between hypothalamic-pituitary-ovarian axis, these can leads to hypoestrogenic state. Due to low estrogen sign and symptoms like hot flushes, irregular or stoppage of menstruation, insomnia, irritability etc. seen. In modern science to overcome these symptoms & complications hormone replacement therapy is given like hormonal tablet, hormonal patches, hormonal creams & gel etc. But HRT has wide range of side effects such as endometrial cancer, breast cancer etc. which seen in long term therapy.

In Ayurveda we can correlate menopause as a dhatukshaya avastha or rajonivrutti. Acharya Sushruta described this avastha under the heading of parihani. In Ayurveda various therapies were described like Nasya, Shirodhara, yonipichu etc. under panchakarma chikitsa. Rasayana chikitsa, herbal medicines and yoga also described by different aacharya for dhatukshaya avastha. Through Ayurveda we can correct the hormonal imbalance by above management. These treatment reduces the physical & psychological symptoms without any side effects. So Ayurveda plays important role in management of menopause.

Keywords: Menopause, HRT, Rajonivrutti, Ayurveda

Introduction –

Menopause is a physiological ageing change that occurs in women's life. It is defined as permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity. To confirm that menopause has set in it will take about 12 months of amenorrhea. The age of menopause is between 45 – 55 yrs. [1] During

menopausal stage in women's body there is imbalance between hypothalamic-pituitary-ovarian axis which leads to hormonal imbalance that produces several signs and symptoms. These signs and symptoms are due to hypoestrogenic state.

During this stage of menopause women may face symptoms like hot flushes, night sweating, irregular or stoppage of menstruation, palpitation, fatigue, vaginal dryness, loss of libido and psychological symptoms like anxiety, depression, insomnia, mood swings, irritability, inability to concentrate etc. Women also face some conditions like osteoporosis, urogenital atrophy and dementia etc. ^[2]

In Ayurveda the context of menopause is depicted as Rajonivrutti and jarapakva avastha of body. Acharya Sushruta described 4 stages of madhyama avastha i.e. Vruddhi, Yauvan, Sampurnata, Parihani. Out of which menopause comes in 4th stage i.e. parihani stage which starts at the age of 40 years and ends at 70 years. ^[3] Where parihani means gradual degenerative changes of body (Dhatukshaya) occurs. Acharya Sushruta also described 50 years is the age of menopause (Rajonivrutti). In this stage there is predominance of vata dosha and menopausal symptoms are due to vata vruddhi and dhatukshaya. It is a transitional phase where pitta phase is converted into vata phase.

As menopausal symptoms cause physical and psychological symptoms which will affect the routine of women. So we need to manage the menopausal symptoms. In modern science management is done by counselling, multivitamins and hormone replacement therapy. But it has a wide range of side effects such as endometrial cancer, venous thromboembolic disease etc.

Ayurveda plays an important role to pacify the rajonivrutti lakshanas by means of various procedures of panchakarma, rasayana chikitsa, various herbal drugs & formulations which are already mentioned in Ayurveda. They are effective and don't have side effects.

HRT in Menopause –

HRT is hormone replacement therapy is a medication containing the hormone that women's body stops producing after menopause.

There are 2 types of hormones used in HRT for menopause

- Estrogen
- Progesterone

HRT may involve either taking both of these (combined HRT) or just estrogen (estrogen only HRT)

HRT available in the form of hormonal tablets, hormonal patches, hormonal creams, hormonal gels, hormonal implants etc.

Benefits of HRT -

It help to relieve most of the menopausal symptoms like hot flushes, night sweating, vaginal dryness, dry skin, insomnia etc.

It also prevents osteoporosis and cardiovascular disease.

It is used in premature menopause and it helps to reduce the risk of developing diabetes.

Side effects of HRT –

As we see HRT has benefits in menopause but it has wide range of side effects after taking long term therapy as mentioned before. It may develops side effects like endometrial cancer, breast cancer, venous thromboembolic disease, coronary artery disease and cholecystitis etc. ^[4]

Role of Ayurveda in Menopause –

As we see HRT has benefits as well as wide range of side effects. So we need to look for alternative management for menopause which having lesser or no side effects. Ayurveda offers the alternative treatment for menopause.

In menopause there is a degenerative changes occurs in body, so to combat this degenerative changes aacharya described Rasayana chikitsa. Ayurvedic management involve correcting the dosha imbalance with healthy diet, shamana chikitsa, panchakarma therapy, satvavajaya chikitsa, rasayana chikitsa and yoga therapy.

Discussion – Ayurvedic Management

A] Shamana chikitsa – It involve he agnideepana, aamapachana, anulomana, balya and medhya drugs. Which improve the dhatuposhana in tern reduces the dhatukshaya lakshanas, balya drugs strengthen the body. Medhya drugs helps to reduce the psychological symptoms. Also the majority of symptoms are due to vata predominance so we can use madhur rasatmaka and ushna, snigdha, guru gunatmaka dravyas to balance the vata dosha. Following drugs we should use in this-

E.g. Shatavari, Ashwagandha, Bala, Dashamoola, Amalaki, Arjuna, Rasona, Guggulu, Yashtimadhu and Medhya Dravyas like Bramhi, Shankhapushpi, Guduchi, Mandukaparni etc.

1] Shatavari – it is balya, vayasthapana, medhya and agnideepana. It contains phytoestrogen so it can be used as alternative to HRT.

2] Amalaki – it contains highest amount of stable vitamin C. It is a powerful antioxidant, cytoprotective nature and immune modulatory action which promotes anti-aging action.

3] Formulations – Bramhi Vati, Shatavari Ghrita, Saraswatarishta etc.

B] Rasayana chikitsa – It helps in obtaining the optimum amount of nourishment to the rasadi dhatu also helps to improve dhatu, agni and srotasa. It decreases the ageing process and increases the longevity of life, it also increases the mental as well as physical strength. It helps in preservation of youthfulness. According to Acharya Charaka it produces long life lasting memory, talent, youth and luster. [5] Following are some examples of rasayanas –

Examples –

1] Ekal dravya rasayana - Amalaki, Ashwagandha, Guduchi, Bramhi, Shankhapushpi, Yashtimadhu, Haritaki, Bhallataka, Mandukaparni etc.

2] Formulations – Chyavanprasha, Brahma Rasayana, triphala rasayana, Amalaki Rasayana, Medhya Rasayana (Shankhapushpi, Mandukaparni, Guduchi, Yashtimadhu) etc.

C] Panchakarma therapy – Panchakarma helps to loosen, liquefy and remove vitiated doshas from their abnormal site in peripheral tissue via their natural pathway of elimination and cause balance of doshas (shakha to koshtha). Hence the symptoms of menopause caused due to vitiated doshas get relieved.

1. **Snehana** – it helps to treat the vata dosha imbalance. It is also considered as jarahara (decreases the ageing process) e.g. Bala taila.
2. **Shirodhara** – It reduces the vata dosha. Warm oil pouring on forehead improves blood circulation to brain and hypothalamus, hence activates the HPO axis and helps in hormonal imbalance. It also causes vasodilation so relieves symptoms like hot flashes. It has a tranquillizing effect due to continuous flow of oil on forehead. It increases the dhi and smriti (memory and retaining power). Hence it helps in psychological symptoms. E.g. jatamansi taila, bramhi taila, shatavari taila, takradhara.
3. **Nasya** – Nasya is considered as gateway of shira. So sheha given through nasya reaches to shirogata marma and spreads to the mastishka and helps to remove vitiated doshas. [6] As shira is considered as sthana of mana, so it will act on manovaha srotasa and relieve manasik lakshanas. E.g. anu taila, shatavari ghrita, panchendriyavardhan taila.

4. **Yonipichu** – It softens the vaginal canal. So helps in vaginal dryness. E.g. shatadhauta ghrita, shatavari ghrita/ taila, bala taila
5. **Basti** – It is considered as best treatment of vata dosha. It is also useful in dhatukshaya avastha and helps to overcome osteoporosis. E.g. anuvasana basti - bala ashwagandhadhi taila, also other basti like panchatiktaaksheer basti, majja basti.

D] Satvavajaya chikitsa – counselling and reassurance to patients helps to reduce the psychological symptom.

E] Yoga therapy – yoga, exercise, pranayama, and meditation helps to relieve psychological symptoms as anxiety, stress, depression etc. it also helps to improve agni and dhatuposhana.

Conclusion –

Menopause is a natural biological process in women's life. Only few women experience menopausal symptoms which affects day to day life. To relieve this symptoms modern science has HRT but it has side effects. Through Ayurveda we can relieve this menopausal symptoms easily without any side effects. So Ayurveda helps well than HRT to combat the symptoms.

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STHANIKA CHIKITSA IN THE GERIATRIC WOMEN SUFFERING FROM DYSPAREUNIA – A CASE STUDY

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ABSTRACT - The etiological factor of Yoni Vyapat are mainly due to the vitiation of Doshas, among which Paripluta Yoni Vyapat is due to the vitiation of Vata Dosha, which can be correlated to Dyspareunia. Dyspareunia means the coital act is difficult and or painful. There are different etiology depending upon the site of pain, out of which Vagina Atrophy prevalence of 67.5% associated with vaginal dryness – 62%, itching 40%. For the better and fruitful result Sthanika Chikitsa (local therapies) has been enumerated as an important part of Yoni vyapat chikitsa, which includes Yoni Parisheka (cleansing of vagina), Yoni Abhyanga (massaging of vagina with medicated oil), Yoni Pralepa (semisolid drug applied on the vaginal wall), Yoni Pichudharana (medicated soaked tampon place in vagina).

CASE STUDY – A female aged 49 years, approached OPD complaining of painful coitus along with dryness and itching of vagina, which increased after her menopause. The condition was treated with Sthanika chikitsa followed by internal medications.

KEYWORDS – Paripluta, Dyspareunia, Vaginal Atrophy, Sthanika Chikitsa.

•**INTRODUCTION:** Dyspareunia means that the coital act is difficult and or painful. It is the most common sexual dysfunction¹. Based on the clinical symptom of excessive external and internal pain during intercourse, this condition can be correlated to Paripluta Yoni Vyapat which is explained by Acharya Sushruta under Vataja Yoni Vyapat². As Yoni is considered as the sthana of Apana Vayu, Sthanika Chikitsa helps in relieving the symptoms

•**CONCEPTUAL VIEW:** Acharya Sushruta has explained Vimshati Yoni Vyapat, of which he has explained Paripluta Yoni Vyapat under Vataja Yoni vyapat, and Acharya Madhava and Bhava prakasha also explained Paripluta under Vataja condition. The cardinal feature include Graamyadharma – ruja (Pain during intercourse) & Bahyabhyantara vata vedana (Excessive external and internal pain)¹. Similarly in the

contemporary science, the etiological causes of Dyspareunia depends upon the site of pain – Superficial, Vaginal, Deep².

SUPERFICIAL VAGINAL DEEP

<u>SUPERFICIAL</u>	<u>VAGINAL</u>	<u>DEEP</u>
Narrow introits	Vaginitis	Endometriosis
Tough hymen	Vaginal septum	Chronic cervicitis
Bartholin's gland cysts	Tender scar	Chronic PID
Tender perineal scar	Secondary vaginal atresia	Retroverted uterus
Vulvar infection	Tumor	Prolapsed ovary in POD
Urethral pathology	VAGINAL ATROPHY (Menopause)	
Vulvar vestibulitis syndrome		

Menopause is a Natural transition from reproductive phase to non-reproductive phase in a women's life. It occurs with stoppage of menstruation (amenorrhea) for twelve consecutive months. It sets the stage for aging and accelerates the process of non-communicable diseases. Worldwide the age of menopause is in between 45 and 55 years. Due to increased life expectancy, especially in affluent society, about one-third of life span will be spent during the period of estrogen deficiency stage with long term symptomatic and metabolic complications³.

MANAGEMENT: Treatment depends upon the cause. In infective lesions it has to be treated with antibiotics, in Tender scar it has to be excised similarly in Vaginal Atrophy in post-menopausal condition HRT is extremely effective option. There are certain indications, contra indications for HRT along with certain side effects.

Side effect of HRT⁴ –

- Estrogen related: Vaginal bleeding, Increased cervical mucus, Nausea, Vomiting, Fluid retention, Weight gain
- Progesterone related: Symptoms like PMS, Anxiety, Irritability, Depression, Sleep disturbances.
- Others: Itching, Headache, Coronal changes, Loss of hair etc.

In our Classics, there is no direct reference for the management of Paripluta Yoni Vyapat, but as it is explained under Vataja Yoni Vyapat, the same line of management can be adopted in treating the condition⁵-

“वातार्तायाः पचुं दद्याद्योनौ च प्रणयेत्ततः। वातार्तानां च योनीनां सेकाभ्यङ्ग पचु क्रयाः॥

उष्णाः स्निग्धाः प्रकर्तव्यास्तैलानि स्नेहनानि च। हिंसाकल्कं तु वातार्ता कोष्णमभ्यज्य धारये ॥”

(C. CHI. 30/61 -62)

Here, while explaining the sutra they have given importance of sthanika chikitsa such as Yoni Picchu, Yoni Seka , Yoni Abhyanga , Yoni Kalka dharana.

STHANIKA CHIKITSA⁶:

“सर्वतः सु वशुद्धायाः शेषं कर्म वधीयते। बस्त्यभ्यङ्गपरिषेकप्रलेप पचुधारणम्॥”

(A.S.U 39/53)

Sthanika chikitsa has been enumerated as an important part of Yoni Vyapad Chikitsa, such as Basti (inserting the medicated oil inside the uterus), Yoni Parisheka (cleansing of vagina), Yoni Abhyanga (massaging of vagina with medicated oil), Yoni Pralepa (semisolid drug applied on the vaginal wall), Yoni Pichudharana (medicated soaked tampon placed in vagina).

BENEFITS OF STHANIKA CHIKITSA ⁷:

- Avoidance of hepatic first – pass effect, thus prevention of hepatic toxicity
- Easy to administer and possible self-insertion and removal.
- Fast acting on the local region and on reproductive system
- Protection of drug against gastrointestinal enzymes
- Avoidance of parenteral route associated inconvenience

PROBABLE MODE OF ACTION⁷:

- Anatomist has described that epithelium consist as many as 40 distinct layers. The rugae of the epithelium create an involute surface and results in a large surface area that covers 360cm, this large surface area allows the trans-epithelial absorption of medications via the Vaginal route.
- The post Fornix has rich blood supply so actively absorption of drug.
- In oral route some medicine's active ingredient metabolized in liver and degrades as a result the Effect of drug reduced.

- The presence of dense network of blood vessels has made the vagina an excellent route of drug delivery for both systemic and local effects.
- Blood leaving the vagina enters the peripheral circulation via a rich venous plexus, which empties primarily into the internal iliac veins.
- Vaginal permeability is much greater to lipophilic drug than to hydrophilic drug. However, it is generally accepted that low molecular weight lipophilic drugs are likely to be absorbed more than large molecular weight lipophilic or hydrophilic drugs.

CASE REPORT:

• Patient details :

A Female aged 49years, from Hosadurga, Chitradurga. Occupation: House wife
Religion: Hindu, Socio-economic status: Middle class, marital status: Married

• Case history:

Complaints of painful coitus along with dryness and itching of vagina since 3-4 years, which increased since 2 years after attaining menopause.

Also complaints of blackish flakes on scratching since 3 months

• Menstrual history:

Menarche: 15years

Menstrual history : 4-5days

(Before menopause) 26-28days (Regular)

Menopause - 47years (Attained naturally).

• Obstetric history:

Married life: 27 yrs.

P1L2A1DO:

L2– LSCS – Twin pregnancy (1998),

A1 – MTP (7Week of pregnancy) (2005)

Coital history: Once in 3-4 months, Dyspareunia - ++

Surgical history: B/L Tubectomy done on 2005

•Examination:

GENERAL EXAMINATION

Temp -97.2 F Pulse -86bpm

BP -130/80 mm Hg.

SYSTEMIC EXAMINATION

CNS- Properly oriented to time, place and person, HMF intact

CVS- S1, S2 heard, No murmurs

RS- NVBS+, No added sound

LOCAL EXAMINATION

BREAST EXAMINATION: B/L Symmetry, No tenderness, No palpable mass, No discharge from the nipple.

P/A EXAMINATION: Soft, non-tender. No organomegaly, BS +

P/S EXAMINATION: Cervix – Healthy, Cystocele+

P/V EXAMINATION: Uterus anteverted Normal size.

•INVESTIGATIONS:

Hb-13.1gm %, Platelets -2.8 lakhs /cumm, RBS-108 mg/dl.

PAP Smear- Negative for intra epithelial lesion or malignancy

Urine routine and microscopy: Pus cell- 4-5, Epi cells- 5-6

USG – Nothing abnormal detected.

TREATMENT:

STHANIKA CHIKITSA:

Yoni Abhyanga with Ksheera bala taila

Yoni Picchu with Guduchyadi taila

X 14 days.

INTERNAL MEDICATION:

- Aloes Compound 2-0-2 (After food)
 - Dhanwantaram vati 2-0-2 (After food)
 - Dashamoolarista 4tsp -0-4tsp with equal water (After food)
 - Shatavari kalpa 0-0-1tsp (Bed time)
 - Dhatupostik churna 1tsp-0-0 with a glass of milk (Empty stomach)
- X 1month

FOLLOW UP - Previous complaints of Vaginal dryness and flakes on itching reduced – 60%, Dyspareunia reduced – 50%

DISCUSSION:

- As Yoni is Ashrayi for Apana Vayu, and the Paripluta is a Vataja Yoni Vyapat, tackling Vayu is the considered as first line of treatment and thus Sthanika Chikitsa plays a very important role.
- Pichu provide muscle strength,
- Stretchability & tissues nourishment,
- Yoni abhyanga helps in strengthen the muscles of vagina & providing nourishment to the local region
- Ksheera bala taila

“बला-कषाय-कल्काभ्यां तैलं क्षीर-समं पचेत् ।

सहस्र-शत-पाकं तद् वातासृग्-वात-रोग-नुत्

रसायनं मुख्य-तमम् इन्द्रियाणां प्रसादनम् ।

जीवनं बृंहणं स्वर्यं शुक्रासृग्-दोष-नाशनम् ॥“

(A.H.C. 22/45-46)

Guduchyadi Taila

गुडूची कटुका तिक्ता स्वादुपाका रसायनी ।

संग्राहिणी कषायोष्णा लघ्वी बल्याऽग्निदीपनी ।

दोषत्रयामतृड्दाहमेहकासांश्च पाण्डुताम् ॥

कामलाकुष्ठवातास्रज्वरकृ मवमीन्हरेत् ।

प्रमेहश्वासकासार्षःकृच्छ्रहृद्रोगवातनुत्”

(B.P.N Guduchyadi varga)

CONCLUSION:

Our Acharyas was very clear about the Mode of action of Sthanika Chikitsa, and has explained different types of Sthanika chikitsa for the management of maximum

reproductive disorders, with a specific purpose i.e. strengthening, nourishing, and regenerate new tissues.

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Herbs used in geriatric women

Review of ayurvedic herbs used in geriatric women

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ABSTRACT-Background-Ayurveda is a science of life and longevity. According to the Ayurveda, ageing is outcome of kala or parinama. Vata dosha is the most important factor in the pathophysiology of ageing obviously because of its natural predominance at that stage of life. Moreover, geriatric women face various health issues such as heart disease, cancer, stroke, diabetes, Alzheimer's disease, arthritis, obesity, post-menopausal symptoms, atrophic vaginitis etc. Ayurveda has suggested many herbs for delaying the process of ageing and age-related diseases. Prevention and management of health problems in geriatric women can be achieved with the use of ayurvedic herbs. Present article has focused on enhance knowledge of Ayurvedic Herbs used in geriatric women. Material and methods- Literature regarding herbs is reviewed from Nighantus, text books, research articles and websites. Haritaki, Amalaki, Shatavari, Punarnava, Shaliparni, Kumari these herbs are reviewed. Discussion and conclusion- The herbs enumerated here are rejuvenative, carminative, digestive, liver stimulants and tissue replenishers. So, these herbs are effective in various geriatric health issues and in degenerative joint disorders as well as neuromuscular disorders.

Key words: Ayurveda, herbs, geriatric women, diseases, ageing, menopause.

INTRODUCTION- Aging is the process of decaying and this manifests in the form of various degenerative changes. Although these changes are natural, they are not pleasant. Everyone is aware that a person who has taken birth must grow and finally die, but nobody wants to grow old and certainly no one wishes to die. It is the nature of a human being. Ayurveda considers ageing as the swabhava of life. Hence what all is needed is to retard the rate of aging to a limited extend and to promote healthy aging. Senior women are at greater risk than men for many conditions and are affected differently by many diseases that impact both sexes. There are numerous herbs in Ayurveda which can be used in prevention and management of geriatric diseases. Main aim of present article is to review ayurvedic herbs used in geriatric women diseases.

AIM AND OBJECTIVE- To review ayurvedic herbs used in geriatric women.

MATERIAL AND METHODS- Literature regarding herbs is reviewed from Nighantus, text books, research articles and websites.

Acharya Sushruta gives an elaborate and systemic classification of age, where he described old age as above 70 years.¹ Acharya Charaka on the other hand mentioned old age above 60 years.² As per fundamental principles of tridosha, vata is the predominant dosha during old age.³ It precipitates atrophy and involution of tissues and is responsible for most of the manifestation of ageing. With the advancing age, the depleted agni leads to decrease in the vigor and vitality with decay and atrophy due to defective metabolism. During this period, there is gradual decline of all the dhatu, virya, indriya, ojas, bala and utsaha. Ayurveda considers ageing as the swabhavaja vyadhi i.e., it is inherent nature of the living being to get old. Following are common disorders of geriatric women.⁴

1. Menopausal Syndrome
2. Urinary Incontinence
3. Indigestion
4. Constipation
5. Respiratory Disorders
6. Hypertension
7. Parkinsonism
8. Senile Dementia & Alzheimer's disease
9. Insomnia
10. Osteoarthritis and osteoporosis
11. Diabetes Mellitus

Herb	Rasa	Vipaka	Virya	Doshaghna
Haritaki	Lavanvarjit pancharas	Madhur	Ushna	Tridoshaghna
Amalaki	Amlapradhan pancharas	Madhur	Sheeta	Tridoshghna
Punarnava	Madhur, Tikta, Kashaya	Madhur	Ushna	Kaphapittasha mak
Shatavari	Madhur, Tikta	Madhur	Sheeta	Vatapittasham ak
Shaliparni	Madhur, Tikta	Madhur	Ushna	Tridoshghna
Kumari	Katu, Tikta	Katu	Sheeta	Kaphaghna

Table 1. List of herbs used in geriatric care in women

1) **Haritaki** - हरति रोगान् /मलान् इति हरीतकी ।

L. N- Terminalia chebula

हरीतकी पञ्चरसाऽलवणा तुवरा परम् ।

रूक्षोष्णा दीपनी मेध्या स्वादुपाका रसायनी ।

चक्षुष्या लघुरायुष्या बृंहणी चानुलो मनी ॥

श्वासकासप्रमेहार्शःकुष्ठशोथोदर क्रमीन् ।

वैस्वर्यग्रहणीरोग वबन्ध वषमज्वरान् ॥

गुल्माध्मानतृषाछर्दिहिककाकण्डूहृदामयान् ।

कामलां शूलमानाहं प्लीहानञ्च यकृत्तथा ।

अश्मरीमूत्रकृच्छ्रं च मूत्राघातं च नाशयेत् ॥(भा. प्र. नि. ह.19-22) 5

Charaka has mentioned Haritaki in vayasthapana mahakashaya. Since it is mentioned in vayasthapana mahakashaya, it delays the process of ageing. It acts as rasayana, chakshushya, dipana, hridya, medhya, vatanumolana. It elevates the bala of mansadhatu, due to mansadhatu balavardhana it prevents dhatukshaya, balakshaya and its related vata prakopa. It acts as indriyaprasadhak and dhatuprasadhaka, so it promotes longevity. It strengthens muscles. It is beneficial in hridroga, prameha, udavarta and vibhanda.6

2) **Amalaki**- आमलते धारयति शरीरम् वा रसायनगुणान् ।

L.N- Emblica Officinalis

हरीतकीसमं धात्रीफलं कन्तु वशेषतः ।

रक्त पित्तप्रमेहघ्नं परं वृष्यं रसायनम् ॥

हन्ति वातं तदम्लत्वात्पित्तं माधुर्यशैत्यतः ।

कफं रूक्षकषायत्वात्फलं धात्र्यास्त्रिदोषजित् ॥(भा. प्र. नि.ह.39,40)7

Charaka states of all the rasayanas, Amalaki is referred as one of the most potent and nourishing. Amalaki is the best among rejuvenative herbs. Its primary quality and main therapeutic benefit is vayasthapana. It is the main ingredient of many rejuvenating

compositions like Chyavanprash, a classical ayurvedic formulation which has been used as a tonic for the young and old for centuries. It acts as rakta vishodhaka, rakta prasada, dhatu shodhaka and varnya. Due to its dhatushodhana property, it excretes the mala of doshas and dhatus from body thus it enhances dhatubala.⁶ It is beneficial in prameha, rajayakshma, pradara and netra rogas.⁸

3) Punarnava- शरीरश्च दृष्टिं पुनर्नवं करोतीति ।

L. N- Boerhavia diffusa

पुनर्नवा श्वेतमूला शोथघ्नी दीर्घपत्रिका ।

कटु कषायानुरसा पाण्डुघ्नी दीपनी परा ।

शोफानिलगरश्लेष्महरी व्रण्योदरप्रणुत् ॥(भा.प्र.नि.गु.231)9

Prameha, shotha, arsha, kasa, shwasa these are some of geriatric diseases caused due to excessive elevation of vata dosha (vata prakopa). Punarnava prevents vata prakopa and decaying of dhatus (dhatukshaya) by proper excretion of sharirastha mala thus it stabilizes and strengthens dhatus. It acts as vatanulomaka, mutrala, vayasthapana and dipana. It is beneficial in pandu, hridroga, shwasa and shophya.¹⁰

4) Shatavari- शतेन आवृणोति इति ।

L. N- Asparagus racemosus

शतावरी गुरुः शीता तिक्ता स्वाद्वी रसायनी ।

मेधाग्निपुष्टिदा स्निग्धा नेत्र्या गुल्मातिसारजित् ।

शुक्रस्तन्यकरी बल्या वात पत्तास्रशोथजित् ॥(भा. प्र. नि.गु.186)11

It is well known as 'Queen of herbs'. This herb referred as ayurvedic rejuvenative tonic for the female. It strengthens the uterus. It helps to remove pathogens and other toxins from the body. Aids in digestion and also boosts the immune system. It helps to ease menopausal symptoms and maintain normal hormone levels within the body. It boosts energy and strength.¹² It acts as balya, hridya, medhya, rasayana, chakshushya and dipana. It is beneficial in arsha, grahani, atisara, gulma, rakta roga, vatashonita etc.

5) Shaliparni- शालस्येव पर्णान्यस्याः ।

L. N- Desmodium gangeticum

शा लपर्णी गुरुश्छर्दिज्वरश्वासातिसारजित् ।

शोषदोषत्रयहरी बृंहण्युक्ता रसायनी ।

तिक्ता वषहरी स्वादुः क्षतकासकृ मप्रणुत् ||(भा.प्र. नि.गु.31-33)13

It acts as dhatu bruhan due to madhur rasa, nourishes all dhatus and increase oja with madhur, snigdha guna. Also, it acts as rasayana. By madhur, snigdha and guru guna it does dhatupushti and by tikta ushna guna it does dhatwagni deepana. Moreover, Charaka has mentioned shaliparna as shothahara. It is beneficial in jwara, prameha, hridroga, vata vyadhi, vedana, shophya and daha.¹⁴

6) Kumari- कुमारयति क्रीडते, कुमार क्रीडायाम् ।

L. N- Aloe vera

कुमारी भेदनी शीता तिक्ता नेत्र्या रसायनी ।

मधुरा बृंहणी बल्या वृष्या वात वषप्रणुत् ||

गुल्मप्लीहयकृद्वृ द्धकफज्वरहरी हरेत् ।

ग्रन्थ्यग्निदग्ध वस्फोट पत्तरक्तत्वगामयान् ||(भा.प्र. नि.गु.229-230)15

It is termed as 'Bhedini' in many nighantus because excessive intake of kumari can cause purgation. It acts as balya, bruhan and rasayana. It is helpful in geriatric women for anemic conditions. It is mainly beneficial in yakrit rogas, pleeha rogas and rakta rogas. Also beneficial in jwara, udara roga, vibandha, vedana and gulma rogas.¹⁶

DISCUSSION -Most of the herbs mentioned above are grouped under vayasthapak gana of Charka Samhita. The herbs explained under this heading are mostly madhur/kashaya in rasa, madhur in vipaka and hence they do dhatuposhana. E.g., Amalaki, Shaliparni, Punarnava etc. Also, the herbs of vayasthapana gana have rasayana property which helps in overall nourishment of dhatu. Rasayana drugs possess strong antioxidant property. Acharya Charka has given unique importance to vayasthapana mahakshaya for maintaining vitality and managing ageing and its allied ill effects. Some herbs like Shatavari and Kumari mentioned above are mainly helpful in gynecological conditions in geriatric women. Altogether, the herbs enumerated here are rejuvenative, carminative, digestive, liver stimulants and tissue replenishers. So, these herbs are effective in various geriatric health issues and in degenerative joint disorders as well as neuromuscular disorders.

CONCLUSION -Aging is a natural process; the body is decaying continuously, as shown by its etymology, that is, Shiryate Iti Shariram. Untimely aging is wholly preventable if the principles of Ayurveda are strictly followed. Moreover, ayurvedic herbs have minimal adverse effects so they are best in the management of geriatric health issues.

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MANAGEMENT OF ATROPIC VAGINITIS BY STHANIKA CHIKITSA – A CASE STUDY

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ABSTARCT -

The life of a women are generally divided into infancy, puberty, reproductive age, climatric period and elderly years. These stages accompanied by considerable hormonal changes. In menopause woman enter an estrogen deficiency phase, which accelerates the aging process resulting into inevitable changes like hot flushes, psychological changes, osteoporotic changes, vaginal dryness, dysperuniea, dysurea etc. This is the age of Rajonivrutti and the symptoms are more nearer to vata vruddhi lakshanas. Atropic vaginitis is a condition where the lining of vagina gets drier and thinner results in itching, burning and pain during sex and urinary system related problems also. 40% perimenopausal woman suffers with this. Sthanika chikitsa are local treatments mentioned in Ayurveda which plays important role in the management of many Yonivyapadas. Sthanika chikitsas in stree roga includes Yoniprakshalana, yonipichu, yoni abhyanga, yoni dhupana, varti, kshara karma etc. This paper will be dealing about management of case of atropic vaginitis with the help of sthanika chikitsa.

Key words- Sthanika chikitsa, Perimenopause, Atropic vaginitis, Yonivyapad

INTRODUCTION

Health is an important factor that contributes to human well-being and economic growth. A healthy women is a promise of a healthy family. In different phases of woman's life, from puberty to post menopause health of reproductive system is important as creation of good offspring and caring of children is highly depends on the woman's health. Ayurveda also given prority on women reproductive health. Under the heading of yonivyapath many reproductive system related issues in all age group are discussed

Vaginitis is a condition charecterised by infection and inflammation of vagina. There are different types of infections based on causative organisms like bacterial , candidial , trichominal, monilial, gonorrheal etc1.Vaginitis in postmenopausal women is called

atrophic vaginitis. The term is preferable to senile vaginitis. There is atrophy of the vulvovaginal structures due to estrogen deficiency. After menopause the vaginal defence is lost. Vaginal mucosa is thin and is more susceptible to infection and trauma. There may be desquamation of the vaginal epithelium which may lead to formation of adhesions and bands between the walls.² Vulvovaginal atrophy is a silent epidemic that affects up to 50%–60% of postmenopausal women who are suffering in silence from this condition. Hormonal changes, especially hypoestrogenism inherent in menopause, are characterized by a variety of symptoms. More than half of menopausal women are concerned about the symptoms of vulvovaginal atrophy, such as dryness, burning, itching, vaginal discomfort, pain and burning when urinating, dyspareunia, and spotting during intercourse. All these manifestations significantly reduce the quality of life and cause discomfort in the sexual sphere.³

CASE REPORT

A female patient aged 60 years attending the outpatient department, presenting with complaint of vaginal itching with burning sensation since 1 month along with yellowish discharge per vaginally. Itching is hampering her daily activities. She was also suffering from burning micturition since 20 days. The complaints started gradually 3 months ago and she had not taken any treatment for this. Now since a month the symptoms became severe day by day. Her Personal History- Diet: Mixed, prefers fried items, dry items Appetite: Moderate, Bowel: Constipated, Micturition: 3-4 times per day, burning sensation, Sleep: Sound, Habits: Intake of tea, 2-3 times, Exercise: Nil

Menstrual history- She attained menopause 6 years back.

On examination-

General examination - Conscious, well oriented, BP- 130/84mmhg, Pulse- 88/m, BMI-35

Systemic examination- External genitalia – itch marks seen in labia

Per speculum examination – Vagina dryness seen with small hemorrhagic spots in vaginal walls Cervix- Small , slight yellowish discharge seen

Per vaginal examination- Uterus – Anteverted, small, no fornices tenderness , no cervical motion tenderness

Investigations - PAP Smear test – negative for intraepithelial lesion, Blood and Urine routine – Normal study

INTERVENTION

Table no .1

Procedure	Drug	Days of treatment
Yoni prakshalana	Triphala kwatha	7days
Yoni Abhyanga	Mahanarayana taila	7 days
Yoni swedana	Nadi sweda	7days
Yoni pichu dharana	Shtavari ghruta	7 days
Shamana	Phala ghruta	30 days
	Rasna erandadi kashaya	30 days

RESULTS

The following changes observed during and after treatment

Table. No 2

Day of treatment	Symptoms		
	Vaginal itching and dryness	Burning sensation	Discharge
Day 1 and 2	no change	No change	Slightly seen
Day 3	no change	Slightly reduced	Slightly seen
Day 4	Slight reduction	No change	No change
Day 5 &6	Slight reduction	Slight reduction	Reduced
Day 7	Reduced	Reduced	Reduced

After sthanika chikitsa and 20 days of shaman chikitsa patient came for follow up. There was symptomatic relief. On examination there was no haemorrhagic spots and rashes seen in vagina. Yellowish discharge was absent. The internal medicines were continued for a month of time and Pathyaharas are advised .

DISCUSSION

Importance of sthanika chikitsa

Sthanika chikitsa means local treatments that to be given through pelvic area. In Ayurveda. Sthanika chikitsa includes Yoni dhavana, pichu dharana, dhoopana, purana, yoni swedana, yoni varti and utara basti. In samanya chikitsa of yonivyapath along with shodhana and shaman sthanika chikitsas are mentioned⁴. The vagina provides a promising site for local effect as well as systemic drug delivery because of its large surface area, rich blood supply, avoidance of the first-pass effect, relatively high permeability to many drugs⁵. It bypasses portal circulation, increasing the bio availability of the drug. Action is based on the property of drugs used in the form of taila,

ghrita etc.diminishes the chances of infection in the genital tract as taila is yoni-vishodhana

The symptoms of atropic vaginitis can be correlataed with vataja yonivyapath in Ayurveda. Clinical features of vatala yonivyapath are roughness, dryness and numbness in vagina, tingling sensation and pain. These are more close to the symptoms of atropic vaginitis. For the treatment vatala yonivyapath, snehana, different varities of sweda and sthanika chikitsas like parisheka, kalka dharana, pichu dharana internally vata prashamana yogas are mentioned6

On this basis in above mentioned case we had given yoni dhavana to flush out the discharge. Yoni abhyanga done with mahanarayana taila which helped in reduce dryness . Yoni swedana done with nadi sweda. Snehana and swedana together very good treatment for vata pradhana vyadhis. Pichu kept with shatavari ghruta helped in retension of drug for long duration. Shaman aushadhis helped in vata and pitta prashamana and improving general health.

CONCLUSION

Sthanika chikitsa with shaman aushadhis plays important role in the treatment of atropic vaginitis.

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HERBS USED IN GERIATRIC WOMEN

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ABSTRACT

Geriatrics or geriatric medicine is a specialty that focuses on health - care of elderly people. It aims to promote health by preventing and treating diseases and disabilities in older adults. Elderly people are vulnerable to a lot of diseases and disabilities, many people face problems of loneliness also. Therefore these elderly people should be treated with utmost care and we should concern them specially. Geriatric women are again very special category, whom should be treated different from men, as women after menopause already suffer from a lot of issue, they are to be considered with treatment which will balance their hormonal imbalance issue, their calcium deficiency, weakness, and other elderly issues. In general use, herbs are widely distributed and widespread group of plants, excluding vegetables and other plants consumed for macronutrients, with savory or aromatic properties that are used for flavoring and garnishing food, for medicinal purposes, or for fragrance. Elderly people may face many difficulties so if we can use herbs in geriatric care or geriatric medicine that will be really a boon, the strength physically and memory power all diminish during this time, so if herbs with special qualities which will rejuvenate and nourish their body physically and mentally and will help to stay fit and strong and will alleviate a lot of geriatric problems. So here in this article certain herbs which can be used in geriatrics are thrown light.

KEY WORDS: Geriatrics, Geriatric women, Elderly, Herbs, Geriatric medicine.

INTRODUCTION

Globally, the population is aging and the proportion of older people is rising. (United Nations, Department of Economic and Social Affairs 2017). A characteristic of ageing population is the ‘feminization’ of ageing (WHO,2002), the female to male ratio increase, world wide women account for 61% of those aged 80 years and above (UN, Department of Economic and Social affairs 2017). Almost everywhere in the world women live longer than men and are more likely to experience serious illness and have co/multimorbidities, which adversely affect their quality of their life. Furthermore, older women experiences increased frailty, the consequences of increased longevity. Women around the age of 45-50 will attain their menopause, they start a lot of issues a few years before attaining menopause. Many issues are related with calcium and vitamin D, and other deficiencies. Ailments due to hormonal imbalance are also common.

Once after attaining menopause , issues due to this hormonal imbalance like hot flushes, irritability, mood swings, insomnia, dry vagina, difficulty in concentrating, mental confusion, stress incontinence, urge incontinence, osteoporotic symptoms, depression. Headache, vasomotor symptoms are common. Other illness like hypertension, diabetes, heart disease, gastric issues, bowel disorders, dementia, arthritis, poor memory, parkinsonism, alzheimers, and other psychological illness are also common. Obesity, metabolicsyndrome, and diabetes, cardiovascular disease , cognitive decline, depression and cancer are the major disease of concern. An herb is a plant or plant part used for its scent, flavor, or therapeutic properties. Herbal medicines are one type of dietary supplement. There are a lot of herbs which act as rejuvenators, elderly women mainly need to rejuvenate their body. So intake of these drugs will help them to keep healthy. There are herbs which are cardi tonic, cardioprotective, hepatoprotective, immunoboosters, some are rich source of calcium, vitamins and iron contents. If in oldage if we wisely use these herbs all the necessary nutrients are being able to obtain. This will help us to stay healthy and happy during oldage.

SOME OF MAIN HEALTH ISSUES FACED BY GERIATRIC WOMEN

Many symptoms occur postmenopause ,including hot flushes, weight fluctuation and vaginal dryness. Some of these symptoms are temporary and some are permanent. Post menopause is the period after the point when a persons menstrual cycle stops completely . This cessation typically happens between age ages 40 and 58, according to The North American Menopause Society (NAMS).¹ The core symptoms during oldage are vasomotor ailments, psychological issues ,metabolic disease, skin related issues, and immunity related issues ².

LIST OF SOME DRUGS WHICH HAS MULTI ACTIONS AND HELP TO BATTLE GERIATRIC AILMENTS

GUDUCHI- *Tinospora cordifolia*

Potential medicinal properties reported by scientific research include antidiabetic, antipyretic, antispasmodic, anti inflammatory, anti-arthritic, antioxidant, anti-allergic, anti-stress, anti-leprotic, antimalarial, hepato-protective, immune modulatory and anti-neoplastic activities. This plant is used abundantly in Ayurveda , belong to menispermaceae family. According to Ayurveda Gudoochi have lot of actions in , among them it is considered as supreme drug as Balya (health promoting, strength giving), Rasayana (rejuvenating). Many among oldage illness and troubles can be battled if elderly women start the habit of consuming a decoction prepared with Guduchi in a prescribed quantity. While there are no serious or potential side effects of the herb, in some cases it cause constipation or lower blood sugar level. The nutrient content of this

plant are carbohydrates, proteins, fat, fibre, iron, calcium and vitamin C. Guduchi can combat disease like thrombocytopenia, Alzheimer's disease, Buerger's disease, hyperuricemia, gout, leprosy. So this is a sure choice of herb in geriatric women.³

ASHWAGANDHA- *Withania somniferum*

This plant belongs to Solanaceae family. Used in many of Ayurvedic preparations. The medicinal properties of this plant is known from the classical period itself. Ashwagandha has actions like Rasayana and Vajeeekarana. It also do the nourishment of seven Dhatus. It rejuvenates body, provides strength, it arrest odema, , it can be used in chronic cough, and emaciation, it also arrest tumors. Ashwagandha can be used in emaciation like the powder is made and it is roasted in ghee and can be consumed. Elderly people may suffering from insomnia Ashwagandha powder boiled in milk in milk and if consumed will help to get good sleep. Elderly people also suffer from urinary tract infections, if consumed with milk helps to cure these ailments. It helps to strengthen the nervous tissue also.⁴

BALA- *Sida cordifolia*

This plant belongs to family Malvaceae, there a wide variety of Bala. This plant has many wonderful medicinal properties. The medicinal value of this plant has been known from the classical age itself , Ayurveda classics have a wide range of references about this plant. Bala is best in all kind of pain. Elderly people are common to suffer from different types of body aches. In Ayurveda Bala help to alleviate Vata Dosha , geriatric women are prone to such Vata predominant disease, so consuming this herb would help greatly. It improves cardiac functioning, it promotes good sleep, It is good in piles, it helps to get cure from rheumatic fever, odema and other related ailments. The habit of drinking Bala Ksheera Paka will help to give good strength for geriatric women.⁴

PALANDU-*Alium cepa*

This is widely used in daily food, but the medicinal properties has been discussed in our classics. This plant belongs to Liliaceae family. It helps to cure from cough ,cold, allergies, and breathing difficulties. In splenomegaly daily intake of Palandu greatly helps. It also helps to alleviate body aches. Palandu act as cardi tonic and recent researches shows that they act as cardi protective. So using of Palandu also improves strength in geriatric women.⁴

GOKSHURA- *Tribulus terrestris*

This is another herb which can be used in elderly women, these women are common to suffer from, urinary infections, and difficulty in micturition and also pedal odema and poor kidney function. Gokshura is having the property to give a cure from all of the

above told ailments. Gokshura boiled in water and if consumed daily will help to cure from ailments, powder if mixed with water and consumed will help to cure pedal odema and it improves proper kidney functioning. So this herb can also be used in geriatric women.⁴

PUNARNAVA-Boerhavia diffusa

This plant belongs to Nyctaginaceae family. This plant has been told many a times in our classics. This plant is popularly used by many villagers as a vegetable in their daily food. This plant has a lot of medicinal properties. There are different varieties of Punarnava. This is best in diseases of skin, kidney troubles, liver diseases, rheumatic complaints, insomnia, fever, cough, addiction etc. If consumed daily two spoon of Punarnava juice will help to strengthen our kidney function and liver function, It is best in all kind of odema, The decoction of Punarnava is said to be best to cure insomnia. So if consumed as a vegetable once or twice in a week may help to keep away from many ailments and imparts good sleep . So this herb can be used by geriatric women.⁴

AMLA- Emblica officinalis

This plant belongs to Euphorbeaceae family It is called as miracle fruit. It has lots of medicinal value. Our classics have mentioned a lot of it medicinal values. People of any age can use Amla. It is being used internally and externally for many purposes. The medicinal values are It is rich source in vitamin C. It rejuvenates the body, It gives immunity, It helps to fight diabetes, In mouth ulcers which is common in old age people due to poor digestion and absorption Amla can be used along with cumin seeds and curd. In breathing difficulty it can be consumed with Pippally, in hyper acidity it can be used. In urinary obstruction and head ache it can be used externally as application to umbilicus and head respectively. In indigestion,, dyspepsia, diarrhoea Amla can be used or its leaf can be mixed with buttermilk and can be used. In vomiting and improving immunity Amla can be consumed daily. In cancer vit C will help to combat against the carcinogenic cells , so consuming Amla will help greatly, also it helps to prevent arteriosclerosis and act as cardioprotective, the Chyavanaprash made up of Gooseberrys can be consumed. So people of elderly age can consume Amla in their daily food.⁴

OTHER HERBS

A number of other herbs are there which can be used in geriatric women they are Shatapushpa, Jeeraka, Haridra, Durva, Dronapushpi, Brahmi, Kapikachu, Mandukaparni, Thulasi, Amaranthus, Moringa, Isabgol, ,Kumari, Vishnukrantha, Sankhupushpi, Asoka, Bilva etc are some among them.⁴

CONCLUSION

We all know geriatric women are those who are to be given care properly . They are vulnerable to many diseases so they should be concerned greatly. They happen to get a lot of physical and psychological issues so they are prone to different diseases easily. Herbs are magic remedies for many ailments, some herbs can be used as vegetable in their daily food , but some can be consumed as medicines in prescribed doses. When used wisely these herbs will provide them with strength and help them to battle with their geriatric health ailments.

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COMMON AYURVEDA FORMULATIONS IN GERIATRIC WOMEN CARE

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ABSTRACT

Aims and objectives

To present some of the common Ayurveda formulations prescribed in geriatric problems of women.

Need of the presentation

With advancement of time, the world population of the elderly people is increasing significantly. As the age advances, the prevalence of illness increases and hence the life expectancy of an individual decreases. Now a days, Geriatrics is emerging as a major medical speciality globally. The western system of medicine has got many limitations in improving the general health of a person, apart from providing medical management of the diseases occurring during the later part of life. Hence Ayurveda should have an upper hand in the management of women geriatric problems. It is a need of the hour to highlight some of the common, economic and easily available Ayurveda formulations, viz Dhanyaka Hima, Jeeraka Rasayana, Kukutanda Twak Bhasma, Chavanaprasha Rasayana are the ones, which will be extremely helpful to improve the geriatric women problems in our daily clinical practice.

Key words

Geriatric, Woman care, Ayurveda in Geriatrics, Ayurveda woman care.

INTRODUCTION

From Greek - geron meaning old man + iatreia meaning the treatment of disease. The branch of medicine concerned with the diagnosis, treatment and prevention of disease in older people and the problems specific to aging.

JARA/ RASAYANA CHIKITSA

Jara- Swabhavajanya Vyadhi (natural & inevitable process)

Etymologically – Jr +Ana + Tap

Derived from “jrish vayohanow” – “Vayah krta slata mamsadyavastha vishesha” – The muscles and other tissues are loosened under the influence of aging.

रसायनतन्त्रं नाम वयःस्थापनम् आयुर्मधाबलकरं रोगापहरणं समर्थं च । (सु सू 1/7)

That which arrests/ delays the aging process, which supports or improves life span and intelligence/ cognition and which is able to cure /destroy diseases of both body and mind.

NEED OF MEDICINES IN GERIATRIC WOMEN

With the rise in elderly population all over the world including India, it is now felt necessary to develop newer strategies for Geriatric health care. Geriatric care has to address two-fold problems, firstly the basic anti-aging care to retard the rate of physiological ageing and secondly the medical management of diseases specifically occurring in old age. Ayurveda on the other hand has got the potential for prevention of diseases by promotion of health and management of diseases occurring in old age. It has a focused branch called Rasayana which deals with the problems related to ageing and methods to counter the same. Significant causes of morbidity among the elderly women are as follows,

- MENOPAUSAL SYMPTOMS
- GARBHASHAYA DOORBALYA
- ASTHI KSHAYA
- PSYCHOLOGICAL DISTURBANCES
- BALAKSHAYA/ DHATU KSHAYA

COMMON AUSHADHA YOGAS

The Aushadha yogas commonly used in the above conditions are as follows-

- IN MENOPAUSAL SYMPTOMS LIKE- HOT FLASHES – DHANYAKA HIMA

प्रातः सशर्करः पेयो हिमो धान्यकसम्भवः ।

अन्तर्दाहं तथा तृष्णां जयेत् स्रोतो वशोधनः २ ॥ (Sha.Sam.Madyamakhandha 4/7)

Rasa- Kashaya, Tikta, Madhura Guna- Laghu, Snigdha Vipaka- Madhura,
Doshaharatva- Tridosha hara, Srotokarma –Shrotoshodhana

- GARBHASHAYA BALYA – JEERAKADI RASAYANA/ MODAKA

जीरकद् वतयं कृष्णा सुषवी सुर भवचा ।

वामकं सैन्धवं चा प यवक्षरो यवानिका ।।

एषां चूर्णं घृते कञ्चित् भृष्टवा खण्डेन मोदकं ।

कृत्वा खादेद्यथाव द्ध योनिरोगाद् वमुच्यते³ ।। यो. र- योनिरो प्रकरण 13-14

Agni karma – Dipana, Pachana,

Doshagnata – Kapha Vata Shmana, Vatanulomana

Karma- Shulahara, Kosta shuddhikara.

•ASTHI POSHAKA YOGA – KUKKUTANDA TWAK BHASMA⁴

- Rich source of calcium – $\text{CaCO}_3 + \text{CaO}$..
- Clinically indicated in Garbhashaya related issues – menstrual disorders, leucorrhoea, Infertility etc.
- Effective in treatment of anemia.

•FOR PSYCHOLOGICAL SUPPORT – ASHWAGANDHA CHURNA⁵

Rasa – Tikta, Katu, Madhura Guna – Laghu, Snigdha Varya –Ushna Vipaka -Madhura
Doshaharatva – VataKapha Hara, Pittakara .

- Anupana – Milk (Balya, Medhya, Ojasya, Vrushya, Rasayanam).
- Anti anxiety effect .
- Nadi balya.
- Increases vyaadhikshmatva.(used extensively during covid-19 pandemic)

•RASAYANA YOGA – CHYAVANAPRASHA RASAYANA⁶

Agni karma – Dipana,

Mala karma – malanulomana, Mutradoshahara,

Sroto karma- Sroto shodhana

. Doshaharatva - Tridosha hara, Vatanulomana .

▫ जरा जर्जरितो अप्यासीत् नारीनयन नन्दन - elderly person also regains their lost complexion, beauty etc.

▫ मूत्र शुक्राशयान् रोगान् व्यपोहति - corrects the problems related to pelvic organs.

▫ अङ्गवर्धन in वृद्ध, बाल, क्षीण etc - improve physic in elderly, children and debilitated persons.

▫ पवनानुलोम्यं - Corrects (Apana) vaayu vikrti.

▫ अग्निबल, इन्द्रियबल वृद्ध - improves digestion, physical strength, sensory organ functioning.

▫ वर्ण प्रसादं - improves complexion.

DISCUSSION: Perimenopause, Menopause and Post menopause are the stages in a woman's life when her monthly period stops. This is the end of woman's reproductive age. During post menopausal age, ovaries no longer produce high levels of hormones - Estrogen, Progesterone and Testosterone. Together, estrogen and progesterone control menstruation. Estrogen also influences how the body uses calcium and maintains cholesterol levels in the blood. During this stage, menopausal symptoms such as hot flashes, irritability, mood swings, Insomnia, Vaginal dryness, Night sweats etc may occur. However some women continue to experience these symptoms for a decade or longer after the menopause transition. As a result of the lower levels of estrogen, postmenopausal women are at increased risk for a number of conditions such as osteoporosis and heart disease. Hence we being the practitioners of Ayurveda can effectively contribute to improve the quality of life of a postmenopausal/ geriatric woman by minimizing her sufferings and improving her health status.

CONCLUSION

Ayurveda as a health science has got both preventive and curative roles, for which it is known and accepted worldwide. This presentation is an effort to highlight how simple oushadha yogas of Ayurveda can be effectively used in improving the health status of a geriatric age woman. By considering the dosha, dushya, agni, ama etc of a post menopausal woman, we can effectively manage her geriatric health issues with the help of easily available, simple, effective and economical preparations. Further studies in this regard must be conducted for the betterment of the society and the science.

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RASAYANAS FOR GERIATRIC WOMEN.

AN EFFECT AND BENEFITS OF RASAYANA THERAPY IN GERIATRIC WOMEN.

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ABSTRACT:-

Every living being on the earth has to pass through the process of ageing and human being is not different. According to Ayurveda, Rasayana is jara vyadhi nashaka oushadha. It is an Ayurvedic rejuvenation therapy which helps in maintenance and promotion of health. According to Caraka, people who undergo rasayana therapy obtain longevity and freedom from disease. Rasayana therapy prevents effect of ageing and provides longevity, improves mental and intellectual competence, preservation of youthfulness, increased luster and glow of the skin, healthy condition of voice, excellent potentiality of the body and the sense organs.

As women get older, they may be less likely to get regular gynecological care. Women who are past childbearing years still need regular gynecological care, and many conditions affecting the female reproductive system occur in the later years, after menopause. Ayurveda classics describe a large number of rasayana drugs for geriatric care. Popular rasayana drugs are Ashwagandha, Shatavari, Brahmi, Mandukaparni, Amlaki, Shankapushpi etc. Some compound formulations like Chyavanaprasha, Amlaki rasayana, Brahma rasayana also can be used for geriatric care. Thus by the use of these rasayana therapy we can replenishes the vital fluids of the body, boost the ojas and the immune system, thus keeping away from diseases and prevents against ill effects of advanced age.

Keywords: Rasayana, Geriatrics, Chyavanaprasha, Amlaki rasayana, Brahma rasayana, Shatavari.

INTRODUCTION

Geriatrics – Geri (old age) + iatrics(care). It is a special division of medicine related to the preventive and curative measures of elderly. Geriatric problems are best confronted by preventive measures than curative ones. Ayurveda, has broad spectrum of preventive measures for combating the ageing process. It has a focused branch called Rasayana

which deals primarily with geriatric problems. Rasayana is the destroyers of jara and vyadhi. Rasayana therapy prevents effect of ageing and provides longevity, improves mental and intellectual competence, preservation of youthfulness, increased luster and glow of the skin, excellent potentiality of the body and the sense organs. The concept of Rasayana therapy is not a single drug treatment but it is a comprehensive and specialized regimen capable of producing healthful longevity and improved mental faculties by acting at the level of Rasa, Agni, and the Shrotamsi, thus enabling the organism to procure the best qualities of different dhatus.

As women get older, they may be less likely to get regular gynecological care. Women who are past childbearing years still need regular gynecological care, and many conditions affecting the female reproductive system occur in the later years after menopause. Due to increased life expectancy, specially in affluent society, about one-third of life span will be spent during the period of estrogen deprivation stage with long term symptomatic and metabolic complications.

ENDOCRINOLOGY IN MENOPAUSE WOMEN1

Few years prior to menopause, along with depletion of the ovarian follicles, the follicles become resistant to pituitary gonadotropins. As a result, effective folliculogenesis is impaired with diminished estradiol production. In the time of menopause stage, the estrogen level in the body got decreased. This decreases the negative feedback effect on HPO axis resulting in increase in FSH. The sustained level of estrogen may cause endometrial hyperplasia and clinical manifestation of menstrual abnormalities prior to menopause. Due to the physiologic aging GnRH and both FSH and LH decline along with the decline of estrogens.

ORGAN CHANGES:- 2

Ovaries- shrink in size, become wrinkled and white.

Fallopian tube- show features of atrophy. The muscle coat become thinner.

Uterus- become smaller and the ratio between the body and the cervix reverts to the 1:1 ratio. Vagina- becomes narrower due to gradual loss of elasticity.

Vulva- shows features of atrophy.

Breast fat- reabsorbed and glands atrophy. The nipples decrease in size.

Loss of muscle tone- leads to pelvic relaxation, uterine descent and anatomic changes in the urethra and neck of the bladder.

PHYSICAL DISORDERS:-3

Osteoporosis and fracture- Following menopause bone loss increases to 5% per year. It is mainly due to estrogen loss and deficient nutrition.

Cardiovascular and Cerebrovascular diseases- Oxidation of LDL and foam cell formation cause vascular endothelial injury, cell death and smooth muscle proliferation. All these lead to vascular atherosclerotic changes, vasoconstriction and thrombus formation.

Dementia - Estrogen is thought to protect the function of CNS. Dementia and mainly Alzheimer disease are more common in post-menopausal women.

Urogenital atrophy- Estrogen plays an important role to maintain the epithelium of vagina, urinary bladder and the urethra. Estrogen deficiency produces atrophic epithelial changes in these organs.

Hair loss and baldness- This is due to low level of estrogen with normal level of testosterone. Sexual dysfunction- Estrogen deficiency is often associated with decreased sexual desire.

Psychological changes- There is increased frequency of anxiety, headache, insomnia, mood swing and inability to concentrate.

The hormone replacement therapy (HRT) is indicated in menopausal women to overcome the short term and long term consequences of estrogen deficiency. The risks of HRT are Endometrial cancer, Breast cancer, Venous thromboembolic disease, Coronary heart disease, Lipid metabolism, Dementia and Alzheimer disease are increased.

Ayurvedic Role in Geriatric Disorders-

Ayurveda has 2 main objectives:-

1. To maintain the healthy state.
2. To cure the disease of individual.
3. A rasayana may act at 3 levels of biosystem to promote nutrition such as -
4. At the level of Agni by promoting the digestion and metabolism.
5. At the level of Srotasa by promoting microcirculation and tissue perfusion.
6. At the level of Rasa itself by acting as direct nutrition.

Acharya caraka has mentioned that on administration of Rasayana one attains longevity, memory, intelligence, freedom from diseases, youthful age, excellence of lustre, complexion and voice etc.

BIOLOGICAL EFFECTS OF RASAYANA DRUGS:-4

The concept of Rasayana had invoked a good deal of scientific enthusiasm way back in late 60's

1. Anabolic effect and promote tissue building.
2. Anti stress and adaptogenic effects. Eg:- Aswagandha and Shilajathu- it can neutralize the negative effect of stress and restore homeostasis.
3. Immunomodulatory effect.
4. Anti oxidant effect :- it enhances the natural enzymatic defence mechanism of the body.
5. Anti ageing effects- it could influence the secretion of a hormone DHEA the deficiency of which is implicated in the process of ageing. Repeated stress on every cell causes aging process.

ASWAGANDHA RASAYANA-

It is known as sattvic kapha rasayana. It could be an effective alternative that can counter aging issues including sleep quality and mental alertness improvement. It enhances the function of brain and improves the memory. It improves reproductive function and cell mediated immunity. SHATAVARI RASAYANA-

It is the source of phytoestrogens. The symptoms of menopause are due to the body experiencing a withdrawal to oestrogen, thus phytoestrogens occupy vacant receptors and stimulate estrogenic action. Various formulas containing Shatavari have shown their effectiveness in alleviating the symptoms in postmenopausal period and hysterectomized patients.

AMALAKI RASAYANA-

In Ayurvedic classics, Amalaki has been mentioned as the best rasayana and vayasthapana drug. It consists of rich of vitamin C. It is having anti oxidant and anti ageing property. It is treating the symptoms like insomnia, constipation, digestive weakness and anemia. It promotes intellect. SHANKAPUSHPI RASAYANA-

It is medhya, hrudya, deepana- pachana and tridosha hara. The powerful antioxidants and flavonoids present in it improve the memory capacity and reduces mental fatigue. It is having anti stress, anti depressive and anti anxiety properties.

CHYAVANAPRASHA RASAYANA- 5

It helps in rejuvenation, enhancing immunity, prevents khalitya, palitya and wrinkling of the skin. It is having anti oxidant and tissue regenerating capacity. It improves intelligence and

memory and it is beneficial for mental clarity.

BRAHMA RASAYANA-6

It improves ahara shakti and vyayama shakti and it is rich in vitamins, protein and dietary fibre. It helps in immune modulation, body building and prevention of oxidative damage and it is a cardiogenic. It improves metabolism, strengthen the respiratory system, memory, strengthens the endocrine system and balances the hormonal flow.

DISCUSSION-

Rasayana therapy is thus, associated with multidimensional effects on the physiology. It maintains positive health, perverts youth, sleep, physical as well as mental fatigue, weakness and maintains proper balance between Vata, Pitta and Kapha. Rasayana drugs having Madhura, Guru, Snigdha and sheeta properties act at the level of Rasa by improving the nutritional value of the PoshakRasa which help to obtain the best qualities of dhatus. The drugs like amalaka, aswagandha, shatavari etc helps to balance the body natural processes and modulate the neuro endocrine immune activities. The probable mode of action of Rasayana drugs could be through chelation of free radicals (ferrous ions) and also as a chain breaker.

CONCLUSION-

The properties and benefits of Rasayana mentioned in the classics can be corelated with adaptogenic property. It helps to normalize body functions, strengthen systems, promote homeostasis and have a protective effect against a wide variety of cellular stress. It is effective in improving the quality of life in geriatric women and helps in alleviating the symptoms in post menopausal period.

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GYNAECOLOGICAL DISORDER IN GERIATRIC WOMEN (RASAYANA FOR GERIATRIC WOMEN)

ACTION OF MEDHYARASAYANA IN MENOPAUSAL WOMEN

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ABSTRACT:

Menopause is defined as ‘cessation of menstruation’. It is a naturally occurring phenomenon in women’s life. According to Ayurveda, rajonivritti is mentioned as ‘jara pakva shareeranam yati pachashatah kshayam’. i.e it occurs at the age of or following the age of 50 yrs. This episode of women’s life is very troublesome with increasing incidence of ailments (including physical and psychological). Ayurveda, the science of life emphasis on prevention rather than cure. Therefore, there are many evidence of mentioning Rasayana dravyas even for a healthy individual and the disease afflicted. The term Rasayana, which is self-explanatory is the drug or compound that which nourishes the individual at the level of physical, psychological, social, and spiritual level. The rasayanas that are explained for dhatu poshana eventually possess action of vayasthapana i.e., by preventing ‘jara pakva’ of dhatus of the menopausal women. Similarly, medhya Rasayana have effect on psychological trauma of the menopausal women. By their action at the level of hypothalamus, it also has a regulation effect imbalanced hormonal levels there by stress & cognition related issues of menopause women could be addresses with the administration of medhya Rasayana.

The action of medhya Rasayana, though understood in certain level of memory, cognition or brain related pathologies. It has its effect on regulating “vata”- thereby could easily reverse the damage of nerve tissues and muscle tissue damage. In the form of achara Rasayana, menopausal related spiritual health could also be maintained. thus, the concept Rasayana exclusively mentioned in Ayurveda endows the best rejuvenating measures in the menopausal women.

Keywords: Menopause, Naimittika Rasayana, Dravya, Rasayana, medhya, achara, rejuvenation.

Introduction:

Menopause is defined as cessation of menstruation that is amenorrhea for a period of complete 12 months which is thus confirmed with the irreversible changes in the hormonal and reproductive functions of female. In Ayurveda it is described as *rajonivrutti* which means the end of *artava pravrutti*. It defines *jarapakva shareeranam yati panchashatah kshayam* i.e. the degenerated, deteriorated *dhatu* esp. the *artava*. It is not a pathology but a state of depletion where the management in Ayurveda is through *Rasayana karma* which is *rasa dhatu poshana* and in turn *preenana* of its *upadhathu* *Artava* also and all other subsequent *dhatu*s. When it comes to menopause, the changes are governed by H-P-O Axis, the management through *medhya Rasayana* is understood to be more beneficial as it has capacity of not only reversing physical pathologies but can also rejuvenate the body, mind, and soul effectively.

The physiology of menopause involves the ovary getting less sensitive to pituitary gonadotrophins FSH & LH leading to drop in levels of oestrogen which gives negative feedback effect on pituitary gland resulting increased LH, FSH levels, decreased oestrogen levels. The term coined in Ayurveda “*jara*”-*jeernam gacchati* -deplete or degenerate

Pakva -undergoing transitions and transformations.

Shareera – sheeryate that which degenerates

Indicates this state of menopause is *vata bhooyishta* due to *dhatu kshaya*.

Materials and methods:

The management of “*jara pakva shareera*” includes correction right from its root therefore understanding each and every clinical presentation through their bio-chemical changes is very necessary.

hot flashes and perspiration – due to disturbed hypothalamus gland which is responsible for thermoregulation of body.

[could be taken as *dravadhathu vikara* due to vitiated *vata*]

Vaginal dryness -due to altered PH of vaginal fluids.

[due to *apreenana* of *rasadhathu*, *upadhathu artava* also gets afflicted]

Insomnia – due to loss of emotional balance

Mood swings – due to fluctuating serotonin levels

anxiety & depression

Cognitive inabilities

The decrease in levels of oestrogen causes fluctuation of serotonin causing psychological imbalance in menopausal woman.

Here it is indicative that even vitiation of vata dosha afflicting three doshas causing neurological diseases, cognitive disturbances in menopausal woman are considered.

As the phase of menopause is understood as not as pathology but as stage of every woman's life, rather prescribing a bunch of medicine merely not makes a management but administration of Rasayana fetches more results than that of simply treating with compound drugs.

The Rasayana, by its action is

“Ayuhu pradanani Amaya nasanani bala agni varna svara vardhanani” [ch.chi.1.3/30]

*Ensures longevity of life

*Cures the ailments

*Promotes bala, agni, varna, svara.

The whole action is intended through group of medhya Rasayana in order to correct the menopausal changes right from hypothalamic level.

“mandookaparnyaha svarasa prayojyah ksheerena yashtimadhukasya choornam

Raso guduchyastu samoola pushpyaha kalkaha prayojyaha khalu shankapushpyaha”

[ch.chi.1/30]

Drug	Part used	Active principle	Action intended
Mandukaparni	Fresh whole plant juice	Scopolamine	Neuroprotective Prevention of amyloid plaque Inhibits memory impairment
Yashti madhu	Kalka or churna	Glycyrrhizine	Circulation to CNS Aphrodisiac

Guduci	Kanda rasa	Alkaloids lactones	Cognitive enhancement by immune stimulation Synthesis of acetylcholine
Shankha Pushpi	Kalka	Kaempferol	Nerve tonic (Beneficial in epilepsy)

Mode of action

- ❖ Action on behaviour sides being neuroprotective, brain growth promoter
- ❖ Anti-seizure activity from direct or indirect modulation of ATPase activity
- ❖ Potent antioxidant and terminate free radicals
- ❖ Anti-hypoxic property to CNS & Memory enhancing
- ❖ Supplementation of choline – antioxidant & Immunomodulatory properties
- ❖ Regulating the body's production of stress hormones – adrenaline & cortisol
- ❖ Neuro protective and hepatoprotective action
- ❖ Antioxidant activity by decreasing lipid peroxidation
- ❖ Anti-arthritis activity
- ❖ Sedative and hypothermic action.

Conclusion:

- ❖ Medhya Rasayana with its action by prabhava are beneficial in treating menopausal degeneration. Medhya Rasayana act on the basis of antioxidant, adoptogenic immunomodulatory action. Their action on modulation of biological axis and neurotransmitters requires further analysis.

BEYOND HORMONE THERAPY – THE CONCEPT OF AYURVEDA FOR MENOPAUSE AND ITS MANAGEMENT

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ABSTRACT :

Menopause means permanent cessation of menstruation at the end of Reproductive life due to loss of ovarian follicular activity. The clinical diagnosis is confirmed following stoppage of menstruation for 12 consecutive months without any pathology. During the period of menopause the woman enters an estrogen deficient phase which leads to various symptoms. The period is generally associated with manifestation of aging problem in women, other symptoms include hot flushes, sweating, mood changes, loss of libido etc. These symptoms affect the quality of life of the female.

Hormonal Therapy (HT) is the only alternative available for menopausal syndrome in modern medicine. It also has a wide range of side effect on the body of the female.

In Ayurveda the concept of menopause is described as Jarapakwa avastha of body and Rajonivrutti. Rajas means Menses and Nivrutti means Cessation or pause. Permanent cessation of menses is Rajonivrutti (menopause). Rajonivrutti janya lakshana is a group of symptoms produced by degenerative changes in the body. Degenerative changes are explained in Ayurveda as Dhatukshaya lakshana. Vata dosha dominance is seen in the later stage of life. According to Ayurveda menopause involves Dosha, Dhatu, Strotas and Mana. The clinical features would be accordance to it and treatment should be multidimensional. So wide variety of alternative medicine are used to improve menopausal symptoms, with proper Aahar, Vihar, Aushadhi, Rasayana Therapy, Panchakarma, Vayasthapaka type of drug, so the effect of menopause can be minimized to great extent.

KEYWORDS : Menopause, Rajonivrutti, Dhatukshaya, Rasayana, Vayasthapak.

INTRODUCTION :

Menopause means permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity. It is the point of time when last and final menstruation occurs. The clinical diagnosis is confirmed following stoppage of menstruation for 12 consecutive months without any other pathology. The age of menopause ranges between 45 - 55 years and is mainly genetically predetermined. The age of menopause is not related to age of menarche or age at last pregnancy. It is variably related to lactation, use of OCP, socioeconomic condition, race, height. Thinner women have early menopause. However, cigarette smoking and severe malnutrition living in high altitude may cause early menopause. Late menopause is seen in women with high parity or high BMI. ^[1]

Menopause transition is the period of time during which a woman passes from reproductive to the non-reproductive stage. This phase covers 4-5 years on either side of menopause. It is associated with elevated serum FSH levels and variable length of menstrual cycle or missed menses.

In Ayurveda the concept of menopause is described as Jarapakwa avastha of body and Rajonivrutti. Rajas means Menses and Nivrutti means Cessation or pause. Permanent cessation of menses is Rajonivrutti (menopause). Rajonivrutti janya lakshana is a group of symptoms produced by degenerative changes in the body. Degenerative changes are explained in Ayurveda as Dhatukshaya lakshana. Vata dosha dominance is seen in the later stage of life. According to Ayurveda all acharyas have agreed regarding the age of menopause as 50 years. Menopause involves Dosha, Dhatu, Strotas and Mana. The clinical features would be accordance to it and treatment should be multidimensional. So wide variety of alternative medicine are used to improve menopausal symptoms, with proper Aahar, Vihar, Aushadhi, Rasayana Therapy, Panchakarma, Vayasthapaka type of drug. ^[2]

To understand the rationale of therapy, it is important to understand the problem according to fundamental principles of Ayurveda.

MATERIAL AND METHODS :

All available authentic books viz. Samhitas and their respective commentaries have been referred for specific materials. Different related modern books, websites on internet, magazines, articles etc. have been used as literary materials and humble attempt has been made to draw conclusion.

Modern aspect of Menopause :

Menopause is defined as permanent cessation of ovarian function resulting in permanent amenorrhoea, it occurring between age of 45- 55 years of average is 47 years. Climacteric is phase of declining in ovarian function. Therefore no corpus luteum and hence no progesterone is secreted by the ovary leading to anovulatory cycle and thus irregular menstruation occurs. later graffian follicle formation also stop , estrogen activity and atrophy of endometrium leads to amenorrhoea. Therefore , there is fall in estrogen level and rebound increase in FSH and LH level by anterior pituitary gland. ^[3]

Menopausal Symptoms : ^[4]

Hair loss, digestive disturbance, cystitis, vaginitis, anxiety, nervousness and depression, vaginal dryness, excessive sweating, hot flushes, irregular periods, disturbances in menstrual pattern, sore breast, fatigue, dizziness, joint pain, headaches, tachycardia, decreased libido, bladder incontinence, vaginal atrophy, palpitation, osteoporosis.

Diagnosis of Menopause : ^[5]

Cessation of menstruation for consecutive 12 months during climacteric.

Average age of menopause is 50 years.

Appearance of menopausal symptoms Hot flushes and night sweating.

Vaginal cytology – showing maturation index of at least 10/85/5 (features of low estrogen).

Serum estradiol : <20 pg/ml.

Serum FSH and LH : >40 mIU/ml (three values at weeks interval required).

Management :

Counseling, Cessation of smoking and alcohol.

Lifestyle modification – Physical activity, adequate calcium intake.

Nutritious diet – Balance with calcium and protein.

Antioxidants and multivitamins – Supplementation of vitamin D3 1500-2000 IU/ day.

HT (Hormonal Therapy) : ^[6]

Indicated in menopausal women to overcome the short-term and long-term consequences of estrogen deficiency.

Duration of HT – Hormonal therapy should be used with lowest effective dose and for the shortest period of time as possible.

Indication of HT :

Relief of menopausal symptoms, Relief of vasomotor symptoms, Prevention of osteoporosis, To maintain the quality of life in menopausal years, Premature ovarian failure, Gonadal dysgenesis, Surgical or radiation menopause.

Contra-indications of HT :

History of breast cancer, Undiagnosed genital tract bleeding, Estrogen – dependent neoplasm in the body, History of venous thromboembolism or active deep vein thrombosis (DVT), Active liver disease, Prior cholestatic jaundice, Gall bladder disease, Prior endometriosis.

Benefits of HT :

Improvement of vasomotor symptoms (70-80%), Improvement urogenital atrophy, Increase in bone mineral density (2-5%), Decreased risk in vertebral and hip fracture (25-50%), Reduction in colorectal cancer (20%), Possibly cardioprotection.

Risk of HT :

Endometrial cancer, Endometrial hyperplasia, Breast cancer, Gall bladder disease, Thrombophlebitis, Coronary heart disease.

Ayurvedic view on menopausal symptoms :

According to Ayurveda , all classics have mentioned the age around 50 years for Rajonivrutti. Kashyap adds the age of menarche or menopause depends on nutrition and health status of an individual. Acharya sushruta has explain that there is shareera shithilta in vrudha-vastha and women attains rajonivrutti stage at around 50 years. The age is dominated by vatadosha, this affect the female body. This further leads to dhatukshaya leading to artava nasha (amenorrhoea).^[7]

Types of Rajonivrutti :

1] Akalaja Rajonivrutti – Rajonivrutti occurs before or after its probable age.

2] Kalaja Rajonivrutti – Rajonivrutti occurs at its probable age.

Clinical features according to Dosha, Dhatu and Mana :^[8]

Vata Dosha : Anxiety, nervousness, insomnia, depression, shabdasahishnuta, dryness of skin and vagina, palpitation, bone and joint pain.

Pitta Dosha : Hot flushes, midnight sweating, ache, mutradaha, amlodgara, skin rashes.

Kapha Dosha : Excessive sleep, aruchi, agnimandya, lethargy, weight gain.

Rasa Dhatu : Palpitation, shabdasahishnuta, thirst, srama.

Rakta Dhatu : Hot flushes, excessive sweating, shira shaithilya.

Mansa / meda / asthi Dhatu : Sandhi vedana, sandhi sputana, asthi kshaya, bone pain, asthi and sandhi shaithilya.

Artava : Anartava, vaginal dryness.

Manasika : Bhaya, shoka, krodha, mood swings etc.

Samprapti of Rajonivrutti :

Vrudhavastha – increased vata dosha – affects manas guna (raja and tama) /Dhatukshaya – Artava kshaya – menopausal symptoms.

Management :

Hormonal imbalance produced in condition of menopause, is the base of various physical and psychological manifestations.

Drug advised according to Doshas : ^[9]

Vata dosha – Kumari, ashwagandha, saffron, arjuna, jiraka, ela, guggulu, lasuna, madhuka.

Pitta dosha – Arjuna, aloe vera, brahmi, shatavari, madhuyashti, chandana.

Kapha dosha – Trikatu, haridra, twak, guggulu,.

Preparations like :

Ashwagandha ghrita ,Shatavari ghrita, Rason kshirpaka, Brahmi ghrita, Saraswararishta, Chyawanprash.

Ahar : Soya, wheat, egg white, milk, pea, nuts, dadima, garlic,

Vihar : Ashtangyog, asanas, change of lifestyle, yoga.

Panchakarma : Snehana, swedana, shirodhara, basti, nasya, picchu, uttarbasti.

DISCUSSION :

Menopause is simply not an estrogen deficiency state but it is associated with large number of stmpoms which disturbs womens routine life. So it needs an effective and safe treatment. In modern science hormonal therapy (HT) is one and only alternative for

this health condition. But it has wider range of secondary health complications like vaginal bleeding, breast cancer, endometrial cancer, gall bladder disease etc.

Therefore, wide scope of research to find safe, potent, cost effective remedy from Ayurveda for the management. It has proven that this health condition can be well manage by certain ayurvedic therapeutics having Medhya and Rasayanas properties. Which are very well proved for physical and psychological health.

CONCLUSION :

Nowadays , symptoms related to menopause are becoming a major problem. For which a safe and effective line of treatment is necessary. In Ayurveda Rasayana therapy is explained, which is life promoting and deals with the aging problem, to improve health as well as longevity. So the concept of menopause according to ayurvedic literature is not only unique but also scientific with beneficial in todays era.

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Psychological problems in geriatric women

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Abstract

Disease is nothing but Dysregulation in easiness.

21st century is the country of Psychosomatic Disorders and SADD syndrome (Stress, Anxiety, Depression and Disease)¹. The real meaning of healthy life is 7 dimensional equilibrium , Bhautik (physical), Bouddhik (Intellectual), Bhavanatmak (Emotional), Samajik (Social), Adhyatmik (spiritual), Vyavsayik (occupational), Paryavaran (environmental).

According to ayurveda ageing is in evitable outcome of kala or Parinaam². Geriatrics is a progressive irreversible phenomena of body rather than disease in which the body loses its ability to respond to a challenge to maintain homeostasis. In Ashtanga Ayurveda “Jara” is incorporated at 7th number among its eight branches. The aging experience of women is distinctively different from that of men, which underpins their differences in mental health problems. The proposed project is aimed to explore the knowledge about geriatric women psychological problems and measures to cope with them.

Keywords :- Geriatric Women, Psychological Ailment

Introduction

Late onset mental illness can be complex. Women's mental health is textured and varies as much as women themselves.³ Women's health has become a particular specialty in health care, many women have births that result in posttraumatic stress disorder (PTSD). Women's mental health has a direct impact on their physical health. For example, depression is a major risk factor for heart disease. Women's Mental Health Across the Lifespan covers mental health from a lifespan developmental perspective, from adolescence to old age. Older women are vulnerable to mental health issues because they are both women and older persons, which is usually described as double jeopardy or layered vulnerability. Older women also show resilience in mental health as a result of acquired coping strategies from being a disadvantaged group.

Many risk factors for older women's mental health have been identified, including genetic, behavioral, and physical health, which are also shared by women at other life stages. The aging experience of women is distinctively different from that of men, which underpins their differences in mental health problems and their contributing factors.

Perspectives to Understand Women's Mental Health ⁴

Older women are more likely to live in poverty, be widowed, and have poorer health, which suggests more stressors and poorer mental health; on the other hand, older women also display unique resilience factors that counter balance their disadvantages, such as that women have advantages in using coping strategies (e.g., intrapsychic coping) that are effective to cope with adversities in old age as a consequence of their lifelong disadvantaged situation, and reduced differences in traditional social and gender roles when people get older.

Poverty and financial strain among older women are serious problems, and they are both strong predictors of poor mental health and barriers to mental health utilization.

Social Relationships and Older Women's Mental Health-

- **Spouse's declining health-** Older women's mental health is intertwined with and profoundly affected by the people around them, especially spouses. In old age, declining health in spouses imposes higher risks on older women for poor mental health outcomes due to the caregiving burden caused by providing care to their spouses. Older women's mental health negatively affected by their spouses' onset of health problems.
- **Widowhood-**Widowhood is a remarkable experience in old age, starts a significant transition in life and loss of roles with accompanying stressors, and has important mental health consequences. Financial strain is a major problem for widowed women and an important reason for higher levels of depression among widows. Widowhood also has an indirect negative effect on women's mental health through the increased likelihood of living alone.
- **Relationship with children**—Relationships and interactions with children have been prominent factors that affect older adults' mental health. Older women are more likely to have stronger ties with their adult children, such as they are more likely to coreside with children, have more contact, and exchange more support, the effects of intergenerational relationships on older women are different.
- **Grandparenting-**Older women's mental health is affected by their involvement in grandparenting, custodial grandmothers usually have more mental health problems, such as depression and anxiety, than other grandmothers because of higher levels of stressors in their lives as a result of competing obligations. Risk factors for higher levels of mental health problems among those grandmothers, include higher levels of stress, poverty, shorter time after stepping into the primary caregiver roles, poor health, and lack of social support.

• **Retirement**-Retirement typically happens in later life and is an important transition that could tremendously change individuals' social roles, financial security, lifestyle, and support system, and thus has noticeable mental health implications.

❖ Potential Triggers Mental Illness⁵

According to the World Health Organization and the Geriatric Mental Health Foundation. These include:

- ❖ Alcohol or substance abuse
- ❖ Dementia-causing illness (e.g., Alzheimer's disease)
- ❖ Illness or loss of a loved one
- ❖ Long-term illness (e.g., cancer or heart disease)
- ❖ Chronic pain
- ❖ Medication interactions
- ❖ Physical disability or loss of mobility
- ❖ Physical illnesses that can affect emotion, memory, and thought
- ❖ Poor diet or malnutrition

The 3 D's of Geriatric Psychiatry

Dementia / Delirium /Depression

- **Dementia:** A condition of acquired cognitive deficits, sufficient to interfere with functioning, in a person without depression (pseudo-dementia) or delirium.

Warning Signs for Caregivers	Behavioural Flags for Healthcare
Difficulty performing familiar tasks	Frequent phone calls
Problems with language	Poor historian, vague
Disorientation to time and place	Poor compliance/meds instructions
Poor or decreased judgment	Change in Appearance / hygiene / makeup
Problems with abstract thinking	Word finding / decreased interaction
Misplacing things	Appointments - missing /wrong day
Changes in mood and behaviour	Confusion: surgery, meds
Changes in personality	Weight loss / dwindles
Loss of initiative	Driving: accident/ problems
Memory loss that affects day-to-day function	Head turning sign

Warning signs of Dementia:-

- **Delirium:** An acute, potentially reversible, condition characterized by fluctuating attention & level of consciousness, disorientation, disorganized thinking, disrupted sleep/wake cycle.
- ❖ Poor historian.
- ❖ Assumptions are made about "usual" functioning.
- ❖ Increased risk of permanent cognitive decline.
- ❖ Higher death rates.
- ❖ Worse rehabilitation outcomes.
- **Depression:** Alteration in usual mood with sadness, despair, lack of enjoyment in previously enjoyed activities and vegetative symptoms sufficient to interfere with functioning. Alteration in usual mood with sadness or negative mood state (anger, irritability, despair), lack of enjoyment in previously enjoyed activities and vegetative symptoms sufficient to interfere with functioning.

View late life depression as a sentinel event that substantially increases the risk for decline in general health and function.,older women have a higher prevalence rate of depression. Caregiving responsibilities have also impaired older women's health and exposed them to long-term stressful situations.

- Some risk factors for geriatric depression:-
 - ❖ Major life events such as widowed or divorced
 - ❖ Structural brain changes
 - ❖ Peripheral body changes such as major physical or chronic debilitating illness.
 - ❖ Previous history of depression
 - ❖ Caregiver for person with dementia or other debilitating medical condition
 - ❖ Excessive alcohol consumption
 - ❖ Taking medications, such as centrally acting BP meds, analgesics, steroids, antiparkinsons, benzodiazepines.
- Cognitive deficits: can be a decline compared to previous levels in language, executive function, memory, orientation, visuo-spatial abilities etc. older women have higher risks of developing Alzheimer's disease. the average age of schizophrenia onset in women is several years older than in men and the majority of later-onset cases i.e., after 45 years.

Mood Disorder due to Medical Condition:

- ❖ Stroke induced depression or mania
- ❖ Depression associated with Parkinson's disease
- ❖ Depression or mania due to endocrine disorders (thyroid, adrenal)
- ❖ Depression due to infectious illnesses
- ❖ Substance-induced depressive or manic syndromes (alcohol, benzo)
- ❖ Depression and cognitive problems due to sleep apnea

Triggering causes for Psychological Ailment among geriatric women :-

- ❖ Role changes-Change of roles in old age affects older women's mental health. Old age is associated with loss of roles. And older women experience the loss of roles in different ways. having multiple roles results in competing demands and reduces the performance for each role, which results in burnout, failure, and stress that compromise individuals' mental health.
- ❖ Anxiety Disorders and Posttraumatic Stress Disorder-Older women are more likely to have anxiety disorders because of various medical, psychosocial and substance usage factors. In addition, women are more at risk of developing posttraumatic stress disorder symptoms as they are more frequently subjected to the high frequency of trauma in the form of physical and sexual assault. Older age

presents more challenges for older women because older trauma survivors are likely to experience greater severity of trauma symptoms, or have delayed trauma reactions because of the co-occurrence of stressful life events, such as retirement and loss of social supports, and compromised coping capacities.

- ❖ Menopausal syndrome-It is a natural and normal phenomenon of ageing. Reduced production of sex hormones due to less active ovaries lead to menopause. Menopausal Syndrome includes symptoms associated with the physiological changes that take place in a woman's body as period of fertility ends. severe symptoms in this period ,it mainly associated with mood swings ,sleeplessness ,lassitude, stress incontinence, loss of sexual desire because of dysregulation in sex hormones (Estrogen & Progesterone).
- ❖ Effects Of Mental Health On Health Among Older Women-Mental health problems, especially depression, are closely related to mortality, morbidity, and functional decline among older women. For example, depression was associated with higher risk of mortality, self-rated health, cardiovascular disease, diabetes, fracture and other dimensions of functioning, such as negative attitudes of aging, and self-rated success in aging. The effect may depend on the types of depression, The risks of depression on mortality, morbidity, and functional decline could be the result of risky behaviors, such as reduced physical activities and social interactions, higher risks of indulging behaviors such as smoking, compromised sleep quality, and persistent fatigue. It could also be the result of mental stress that is closely related to risk factors associated with mortality, such as hypertension, autonomic dysfunction, and increased circulating platelets.

Investigations

Examination of Geriatric Mental status

Prevention, early identification, treatment and follow-up are key to recovery/well being

We do not have the precise tools to assess the state of mental health unlike physical health.

Ashtvidha Sattva Pariksha⁶ -Eight fold mental status examination has been prescribed to examine a patient's mental status.

- ❖ Identity Basic Detail Psychiatric assessment
- ❖ Chief Complaint
- ❖ History of present illness
- ❖ Medical history
- ❖ Family history,Habits, temperaments,Psychomotor activity

- ❖ Decision,Memory
- ❖ Orientation and responsiveness
- ❖ Desire
- ❖ Constitution
- ❖ Mental Stamina

Treatment

- ❖ To treat women, clinicians need to take into account how women's size and body composition (e.g., smaller stature, higher percentage and different location of body fat) affect treatment .
- ❖ In addition, monthly cycles, pregnancy, postpartum, lactation, and menopause need to be seen as integral to comprehensive care.
- ❖ Medication & Psychotherapies can be an important part of treatment/recovery⁷.
- ❖ ECT can be an important part of treatment/ recovery
- ❖ Physical exercise, healthy diet, stable housing, stable finances, spiritual well being, social connections, laughter, brain exercise are all important parts of recovery and well being.

Suggestive Preventive Measures-

- ❖ Practice personal and social good conduct.
- ❖ Try to search happiness among all the minute activities.
- ❖ Avoid watching/listening more negative news.
- ❖ Follow a schematic Daily Routine.
- ❖ Sound Routine Sleep.
- ❖ Try to bounce back and pull back the life on healthy pathways.

Ayurvedic Dietary Suggestions

Pathya⁸

Madhura, Brimhana , Masha, Mudga, Nuts, Egg, Muttons, Pulses, Grains, Milk, Ghee, Soumanasyam, Mithavyayamam

Apathyam

Amla, Lavana, Katu, Tiktha, Pappaya, Pineapple, Pickle, Beef, freezed meat, carrot, cabbage, brinjal, coffee , Krodha, soka, Bhaya, Athivyayama etc.

Broiler chicken alters hormone level.

Conclusion

Women in their older age are facing special challenges as a result of accumulated social, economic, and health disadvantages over the life course. But older women also show resilience because of developed coping skills and better developed social networks and family engagement due to kin keeping and caregiving roles. Older women experience resilience in mental health regardless of life-long disadvantages; however, the resilience has to be understood in the broader social context of vulnerability, especially cumulative disadvantages that could exacerbate among the disadvantaged subgroups among older women, such as those who are of lower socioeconomic status, minority status, and with traumatic experiences. Thus an additional efforts should be made to examine older women's mental health from a life-course perspective with emphasis on social connections, social positions, and heterogeneity among older women to better meet their mental health needs. Lifestyle, food habits, family history, occupation, psycho-social, marital relationships are major contributors. Contribution of Ayurveda is valuable in this juncture.

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Psychological problems in geriatric women

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Abstract : Ageing is a natural process happening in everyone's life and the world's population is ageing rapidly. Even though the older adults are capable in contributing decades of experiences to their family and society, only a few percentages enjoy the privilege of healthy aging. More than 20% of adults above the age of sixty reported to have mental or neurological diseases. Among them the majority is women. The trend Feminization of aging also got several health implications in women's mental health. Many a times the mental health in older women often masked underneath their physical issues including chronic pain, hormonal changes etc. They fall in a relatively neglected group and their mental health is least addressed. Commonly reported psychological issues in older women are depressive disorders, anxiety, somatization, sleep disturbances, decreased concentration and other cognitive impairments. The life stressors that women experience in all the phases of life contribute her bad health. Menopausal transitions do play a role in determining the mental health of older women. Ayurvedic concept also explains a decline in the functions of dhathus, indriyas, dharana, smarana etc during vridhavasta. Vridha being a vata dominant phase are more prone to vataja nanatmaja vyadhis like vishada, anavastitha chitatva etc. Various psychotherapies including satwavajaya chikitsa that encourage empowerment have a role in restoring the mental health. Symptomatic treatments based on dosha predominance and rasyanas can also be adopted. Dravyas like aswagandha, sankupushpi, jatamamsi, somalatha etc can do wonders in restoring the mental health. Thus an early diagnosis and a professional intervention at the right time will help.

Key words: Older women, Psychological issues, Menopause, Satwavajaya chikitsa, Rasayana

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Introduction: Ageing is a natural process happening in everyone's life and the world's population is ageing rapidly¹. As per the data of WHO, the proportion of older adults is estimated to be almost double between the years 2015 to 2050¹. Even though the older adults are capable in contributing decades of experiences to their family and society, only a few percentages enjoy the privilege of healthy ageing. More than twenty percentages of

adults above the age of sixty reported to have mental or neurological diseases and among them the majority is women¹. Also women hold a major share in the proportion of old age population. They are more likely to experience mental health issues like depression, anxiety² etc.

Feminization of aging: Women aged above sixty years comprise more than their male counterparts in many regions, this trend is feminization of aging³. This many a time resulting in an increased likelihood of women ending up alone. It has got several health implications including the need for women's healthcare services³.

Probable causes: Many a times the mental health in older women often masked underneath their physical health including chronic pain, hormonal changes etc. They fall in a relatively neglected category and their mental health is least addressed or concerned. The life stressors that women experience in all the phases of her life contribute her bad health. Pressure created by their multiple roles, gender discrimination, sexual or domestic violence, socio-economic disadvantages like income-inequality, low or sub-ordinate social status ⁴ etc adds to this. Older women widowed, separated or divorced may not remarry as common as men, and when their children move away and begin adult life these mothers often felt isolated and depressed. Social and cultural norms imposed unremitting responsibilities for the care of others in women. Older caregiver women who care for an unhealthy partner or children are more vulnerable to developing mental health disorders ⁵.

Psychological /psychiatric conditions: Depressive disorders, Anxiety, Somatization, Sleep disturbances, decreased concentration and other cognitive impairments⁶ are the common conditions reported in older women when comparing to men. Even though exacerbation of other psychiatric conditions like schizophrenia noted in menopausal period, late onsets are rarely reported⁶. Depressive disorders are common psychiatric disease in older women and may present with physical complaints rather than the complaints of depression and often misdiagnosed⁷. Also the new onset of insomnia may occur during menopause and persist even after other symptoms resolved⁸.

Menopause and mental health: Menopause transition is a time in women's life that can be marked by various physical and psychological changes. Fluctuations and decline of ovarian hormones can cause these changes⁹.

Biological changes associated with ageing:

Neuropsychiatric changes like takes longer to learn, psychomotor speed declines etc happens, in memory, task requiring shifting attention will be difficult, simple recall declines etc happens in old age. Also changes in neurotransmitters will happen for

example norepinephrine decreases, monoamine oxidase increases etc. In brain the gross weight decreases, ventricles enlarge, gyral atrophy happens, sulci get widened during old age and in women estrogen level decreases and FSH , LH increases in menopause¹⁰

Ayurvedic concept of aging: Ayurvedic concept also explains a decline in the functions of dhathus, indriyas, dharana, smarana etc during vridhavasta. Vridha being a vata dominant phase are more prone to vataja nanatmaja vyadhis like vishada, anavastitha chitatva etc.

Management: To promote healthy ageing one must follow dinacharyas, rtucharyas etc in their life. Seasonal purifications (rtu sodhana) will also help to eliminate the accumulated doshas on time and in turns it keeps one's body and mind healthy. Considering the prakrti, doshas, bala etc vatatapika rasayanas can also be taken. Dravyas like aswagandha, sankupushpi, jatamamsi, somalatha etc can do wonders in restoring the mental health. Aswagandha being an adaptogen with its active principle component withanolides seems to be more acceptable in conditions like anxiety, depression, aging etc. A study particularly reported its action in mental and physical health of elderly women says that it improves the nutritional status and cognitive functions¹¹ in elderly. Antioxidant, antidepressant and anxiolytic activities of Sankupushpi were also reported in studies and are widely used¹². Somalatha, bala, jatamamsi etc can also be used according to dosha and vyadhi in geriatric population.

In psychiatric conditions where insight remains intact psychotherapies can also be adopted. Ayurveda explains a well structured psychotherapy module i.e, satwavajaya chikitsa, and the process includes ¹.jnana, (Knowledge of self) in this, help them to get an awareness of their own health conditions, make them aware about their potentials and strength, make them aware about the opportunities they have and re-inforce that old age is the golden years of adulthood and they can do better.². Vijnana (Scientific knowledge) in this step makes sure that they are interacting with qualified health professionals for their signs and symptoms instead of doing some unscientific things.³. In Dhairya (Determination or patience) help them to be determined to not give up, for that reinforce the coping skills. Join in voluntary groups or in group activities according to their field of interest.⁴. In smriti (application of recollections) help them to recollect their own happy moments, moments they overcome failures etc, and discuss the techniques they used then and modify them accordingly. ⁵. In the step of Samadhi help them to attain a stable state of mind by doing Deep Relaxation Techniques, simple stretching movements according to their mobility, pranayamas etc. Thus an early diagnosis and timely intervention by a qualified professional will certainly help those mothers who spend the major portion of their life in serving others to make the rest of their life as golden years.

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