

Case Report

Menopausal Transition and the Effect of Ayurvedic Treatment

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ABSTRACT

Background: Menopausal symptoms are common for almost 90% of women need. Vasomotor symptoms like hot flashes, puffiness on the face and lower limbs, and psychological conditions like mood swings, vaginal dryness, dyspareunia, and depression are common during the menopause. Irregular cycles with the above symptoms from menopausal transition till cessation can be treated with the clinical approach of hormone therapy, nonhormonal ayurvedic drug regimen, with lifestyle changes. The purpose of this study was to present an integrated approach to navigate the challenges in treating menopausal symptoms. **Case report:** A 47-year-old female patient presented with menopausal symptoms for 4 years. Ayurvedic Treatment was given according to pitta dosh prakop (heat, inflammation) and vat dosh vrudhi (dryness, instability, nervous energy). **Results:** After 6 months of treatment, symptoms were reduced to manageable levels, the lipid profile improved, and uterine wall thickness decreased. **Conclusion:** Ayurvedic principles of Rasayana, Vata Shaman, and Kapha Vardhan, along with Panchakarma, Sadvrutaa, balanced diet, Yoga, and meditation, can be used for the management of menopausal symptoms.

Key words: Menopause, Hormones, Ayurvedic, Medicines, Yoga.

Perimenopause, which is a phase of transition, starting from 35 to 38, till 49 to 50 years of age, is typically associated with symptoms like hot flashes with sudden sweating, anxiety, depression, related poor sleep, mood swings, and vaginal dryness. This significantly impairs the physical and mental health of women. Erratic oestrogen secretory pattern is associated with this transition [1]. Hormonal changes associated with altering menstrual patterns resulting in high or low oestrogen or no progesterone are responsible for continued and profuse bleeding. Hampered quality of life, disturbed sexual function, lowered bone density, and disturbed reproductive hormones resulting in irregular menstrual cycles before the onset of the menopausal transition. Elevated FSH, a reflection of a dwindling follicle pool, diminishing ovarian follicles, and anti-mullerian hormone, leading to the well-characterized monotropic rise in FSH and inhibin B, which is a cardinal feature of the menopause. An increase in the luteal phase causes ovulation with minimal follicular phase length, and menstrual irregularity deviates hormone pattern, showing anovulatory cycles, and longstanding amenorrhea [2].

The prevalence rate of menopausal syndrome is 78% to 90 %, but only 19.5% of the symptomatic women take treatment. Elevated FSH is predictive of persistent hot flashes experienced by 20% in the late 50s, 10% in the 60s, and 5% in

the 70s. Heart rate variability is associated with increased cardiovascular disease risk, depression, and anxiety disorders [3].

In the context of Ayurveda, menopause is linked with the Vata Dosha-dominated stage of life. Along with these, Pitta Dosha symptoms like hot flushes, irritability, etc., are also seen during this period. Ayurvedic management of these symptoms involves replenishing the body system (dhatu), and improving general condition, correcting Dosha imbalance with appropriate diet, Samshamana therapy, internal detoxification, Sattvavjaya Chikitsa, Yoga therapy, Rasayan therapy, thus an integrated approach [4]. This case is done to evaluate this integrated approach in treating a case of a woman with menopausal symptoms.

CASE PRESENTATION

A 47-year-old female patient presented with symptoms of hot flashes for 4 years, with occasional mild pedal oedema, gradual weight gain, and profuse per vaginum (p/v) bleeding during the menstrual cycle for the past year, followed by p/v spotting since 3 cycles. The patient had come with continuous bleeding for 15 days, and hot flashes with profuse sweating, with sleep disturbance due to sweating, and frequent awakenings. She had a single child of late pregnancy delivered by Lower Segment Cesarean Section (LSCS).

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On examination, the uterus was slightly enlarged with a regular contour. Cervix and fornix were clear, with no pain or tenderness. Blood and urine examinations showed insignificant changes. A transvaginal ultrasound scan (TVS) showed thickened endometrium. Hysteroscopy was done to evaluate the intra-uterine physiology, and it showed a moth-like appearance of endometrium with a thickness of 17mm. Dilation and

Curettage (D and C) was done immediately and the sample was sent to histopathologic analysis, and the results were normal. Ayurvedic Treatment was planned according to pitta dosh prakop (heat, inflammation) and vat dosh vrudhi (dryness, instability, nervous energy). The drugs and the dosage regimen prescribed are shown in Table 1.

Table 1. Ayurvedic Drug Intervention

Sr.	Medicines	Dose	Kal	Given with Anupan (medium)	Duration
1	Dadimavleh	3gm	Morning	Milk	3 months
2	Shatavari ashwagandha churn	3gm each	Morning after Dadimavleh	Boiled in milk	3 months
3	Lodhra Nagkeshar churn	3gm each	Twice after meals	Tandulodak (Rice water)	3 months
4	Praval panchamrut	250mg	Twice after meals	Water	3 months
5	Bael candy	3gm	Twice after meals	Milk, Roasted Flax seeds and Fennel seeds	3 months
6	Syp.M ₂ tone and Chandanasay	20ml	Twice after meals	Water	3 months
7	Chandanbala lakshadi tail yonipichu	Once	At night for 7 days after menstrual bleeding cycle	NA	3 months
8	Shankhpushi tail Nasva	once	At Night	NA	3 months
9	Chandan bala lakshadi matrabasti	Once	7 days after menstrual bleeding	NA	3 months
10	Yoga and Meditation	Omkar, Pranayam, Vajrasan, Virbhadrasan, Viparitkarani, Suptbadhakonasan, Marjrasan, Shavasan, with soothing music of flute.			

RESULT

The patient was followed up for 6 months, and the symptoms were reduced to manageable levels. The lipid profile also showed improvements. The uterine wall thickness also decreased. The pre- and post-treatment values are shown in Table 2.

Table 2. Pre- and post-treatment evaluation.

Parameters	Pre-treatment	Post-treatment
Cholesterol	221 mg/dl	215mg/dl
Triglycerides	334 mg/dl	252mg/dl
VLDL	66.80mg/dl	50.40 mg/dl
LDL	129.9 mg/dl	110mg/dl
Endometrial thickness	17 mm	7mm after the first cycle and scanty after 6 months.
Sanitary Napkins for Menstrual bleeding	3xl: six per day	xl: four per day after the first cycle and onwards
Hot flashes	8-10 times	4-6 times a day after the first cycle and twice onwards
Night sweat	Thrice in the night	Once after the first cycle and occasionally after 3 months

DISCUSSION

The treatment suggested for this patient was according to the health measures suggested in the Ayurvedic holistic approach. Dadimavleh acts as a digestive and metabolic corrector. Pachak, pittashamak, agnideepan, are responsible for digestion and metabolism (agniprasadan) and nourishment

(dhatuprasadan). Lodhra nagkeshar bilva acts to reduce excessive bleeding (rakt stambhan), and prasadan rasayan drugs are also for controlling bleeding [5]. Praval panchamrut, Shatavari, Ashwagandha, Guduchi are rasayan drugs that control the body's heat (pittadosh) and help to replenish all of the body tissues (ras raktadi dhatu). Syrup M₂ Tone and Cnandanasav are uterine tonics [6].

Panchakarma, like Matrabasti controls nervous system problems (vata). It acts as a rasayan (rejuvenator) and balvardhan karma (strength-promoting action) on tissue depletion (dhatukshaya) and vat dosh vridhi. Cnandanbala lakshadi yonipichu tampon cured the vaginal dryness [7]. Flax seeds and fennel seeds, having antioxidants, replenish the body. Nasya has its effect on the nervous system. Depression and anxiety can be reduced with nasal infiltration of medicated oil, and ghee shankhpushi oil is used in this treatment. A balanced diet, yoga, pranayama, and meditation were added for the mental and physical health of the patient [8]. Many previous studies have also evaluated the effects of Ayurvedic treatment for the management of menopausal symptoms. Shamkuwar et al. did a study to evaluate the efficacy of Ayurvedic drugs in postmenopausal syndrome. The response to the treatment was recorded for 5 months, and the results show that the postmenopausal syndrome can be managed with Ayurvedic drugs [9].

In a systematic review to evaluate the efficacy and safety of Ayurvedic and Siddha for managing menopausal symptoms in women, thirteen RCTs were included, and all of them demonstrated significant improvements in hot flashes, night sweats, sleep disturbances, anxiety, depression, and mood

swings. Additionally, hormonal balance and quality of life were improved. Most studies indicated a favourable safety profile, with minimal or mild side effects [10].

Metangale et al have reported that Ayurvedic menopausal care offers a safe, natural substitute for the hormonal therapies. Panchakarma has detoxification effects that reduce severe symptoms and enhance systemic harmony [11]. Sharma R et al, done a clinical trial to evaluate the efficacy of Ashokarishta, Ashwagandha Churna, and Praval Pishti for menopausal syndrome in 51 patients, and they found symptom reduction in all the cases [12]. Thus, from the present study, with the supporting evidence, it can be inferred that Ayurveda can improve general health by managing the underlying causes of imbalances. For complete menopause care, future research should focus on combining Ayurvedic methods and contemporary healthcare systems.

Although this case has shown similar positive results as those of the previous studies, the results can't be generalized as they were obtained from a single patient. The absence of specialized rating scales like the Kupperman Index Score, as well as the Menopause Rating Scale (MRS) and Menopause Specific Quality of Life (MENQOL) questionnaires, was the other limitation. Hence, more RCTs with standardized measurements need to be done to substantiate this clinical evidence.

CONCLUSION

The results of the present study show that various Ayurvedic principles of Rasayana, Vata Shaman, and Kapha Vardhan, along with Panchakarma, Sadvrutaa, balanced diet, Yoga, and meditation, can be helpful for the management of menopausal syndrome. With its insights, Lifestyle changes and proper guidance of treatment can be helpful in propagating a happy and healthy womanhood.

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