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EFFECT OF LASUNA KSHEERAPAKA AND ASWAGANDHA-ARJUNA KSHEERAPAKA IN THE MANAGEMENT OF VATA PREDOMINANT SYMPTOMS IN MENOPAUSAL SYNDROME-A CLINICAL COMPARATIVE STUDY

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ABSTRACT

Menopause is the permanent cessation of menstruation due to loss of ovarian follicular activity. The gradual or sudden cessation of oestrogen and progesterone production by the ovaries produces various symptoms called Menopausal syndrome'. According to Ayurveda *Vrudhavastha* is the *Vata* dominant phase and hence *Rajonivruti* is associated with *Vata* predominance. There are many suitable treatment options for symptoms occurring during *Rajonivruti*. *Rasayana Chikitsa* is considered very effective. **Aim:** To evaluate and compare the efficacy of *Lasuna Ksheerapaka* and *Aswagandha-Arjuna Ksheerapaka* in the management of *Vata* predominant symptoms in menopausal syndrome. **Methods:** A randomized comparative clinical study of 2 groups with 20 patients each treated with *Lasuna ksheerapaka* and *Aswagandha-Arjuna ksheerapaka* for one month. **Result:** Both the drugs were found to be statistically significant and *Lasuna Ksheerapaka* shows more effect in two criteria i.e. Mood swings and Myalgia. *Lasuna ksheerapaka* is observed to be more effective may be because of its *Dipana-pachana* property in turn improves the *Agni* by removing the *Avarana* of *Kapha* and does the *Vatanulomana*. **Conclusion:** *Lasuna Ksheerapaka* is having more effect than *Aswagandha-Arjuna Ksheerapaka* in the management of *Vata* predominant symptoms in Menopausal syndrome.

Keywords: Rajonivruti, Menopausal syndrome, Lasuna ksheerapaka, Aswagandha-Arjuna ksheerapaka, Vata.

INTRODUCTION

Menopause is the time at which menstruation ceases, where as climacteric is the phase of reducing ovarian follicular activity¹. The average age of Indian menopausal women is 47 (45-55) yrs. The gradual or sudden cessation of oestrogen and progesterone produc-

tion by the ovaries may produce physical, sexual & psychological symptoms. In 85% of women have a significant impact on their daily personal, professional & social lives which included under the heading 'menopausal syndrome'.

Though, Menopause is a natural process of aging, it is turning into a major health problem in recent years. Currently, the number of menopausal women in India is about 43 million. Projected figures in 2026 have estimated the menopausal population 103 million³. So, menopausal health demands have higher priority in Indian scenario.

In *Ayurvedic* classics, some scattered references are available which mentions that the *Rajonivruthi* occurs in the age of 50yrs in which the *Vata Dosha* become predominant and the *Rasayana Therapy* is the best line of treatment for preventing the long term effects ^{4,5,6,7,8}.

Considering all these aspects, the present study has been designed to evaluate and compare the effect of Lasuna Ksheerapaka⁹ (having ingredients-Lasuna, Ksheera) and Aswagandha-Arjuna Ksheerapaka (having ingredients-Arjuna, Aswagandha, Ksheera) owing its Rasayana, Brumhana, Balya, Vrushya & Vatahara properties¹⁰.

MATERIALS AND METHODS:

Sample source:-

A minimum of 40 patients (20 patients in each group) fulfilling the diagnostic and inclusion criteria attending the *Prasooti Tantra* and *Stree Roga* OPD in Alva's Ayurveda Medical College and Hospital, Moodbidri. Other available sources like Medical camps and other referrals selected for the present study.

Design of study:

Interventions:

Table 1: Interventions

GROUP	DRUG	ROUTE	DOSE		DURATION	KALA
GROUP A	Aswagandha-	Oral	100ml, BD	3g each drug with 100ml	1 month	Before food
	Arjuna			milk & 100ml water,		
	Ksheerapaka			Ksheerapaka preparation		
GROUP L	Lasuna	Oral	100ml, BD	25g drug with 100ml milk &	1 month	Before food
	Ksheerapaka			100ml water, Ksheerapaka		
				preparation		

A randomized comparative clinical study of two groups consisting of 20 patients in each group.

SELECTION CRITERIA:

Diagnostic criteria:

- History of cessation of menstruation for 12 months consecutively.
- Manifestation of any 3 among the following symptoms,
- Insomnia
- Anxiety
- Mood swings
- Myalgia
- Palpitation
- Vaginal dryness.

Inclusion criteria:

- Women of age group between 45-55 years.
- Women diagnosed with minimum three menopausal symptoms.
- Women having cessation of menstruation for 12 months consecutively.

Exclusion criteria:

- Artificial menopause including surgical menopause.
- Women with evidence of malignancy & other systemic diseases like Hypertension, Cardiac disorders, Diabetes mellitus, etc which interfere with the present study.
- Patient on medication for psychological disorders and Hormone Replacement Therapy.

Observation period:

Assessment carried out by scoring the gradations before the treatment and during the treatment period on the 15th and 30th day.

Follow up: On the 30th day after the treatment period.

Total study duration including follow up: 60 days

Assessment criteria:

Subjective

- Insomnia
- Anxiety
- Mood swings
- Myalgia
- Palpitation
- Vaginal dryness.

DISCUSSION

Discussion on the result of treatment in group L

The statistical analysis done during and the last day (30th day) of the treatment on the assessment criteria like insomnia, anxiety, mood swings, myalgia, palpitation, and vaginal dryness reveal the significance of the treatment in group L. This leads to the rejection of the null hypothesis stats the ineffectiveness of the drug *Lasuna Ksheerapaka* and the acceptance of the hypothesis stats that *Lasuna Ksheerapaka* has effect in the treatment of *Vata* predominant symptoms of Menopausal syndrome.

Discussion on the result of treatment in group A

The statistical analysis done during and the last day (30th day) of the treatment on the assessment criteria i.e, insomnia, anxiety, mood swings, myalgia, palpitation, and vaginal dryness reveal the significance of the treatment in group A. This leads to the rejection of the null hypothesis stats the ineffectiveness of the drug *Aswagandha-Arjuna Ksheerapaka* and the acceptance of the hypothesis stats that *Aswagandha-Arjuna Ksheerapaka* has effect in the treatment of *Vata* predominant symptoms of Menopausal syndrome.

Discussion on the Comparative effects of treatment in Group L and Group A

The assessment done between the groups reveals significant difference in Mood swings and Myalgia at p < 0.05 which indicate a slightly better effect in group L in consideration to the mean value. Other symptoms were noted statistically insignificant difference between groups. This leads to the acceptance of the alternative hypothesis says; *Lasuna Ksheerapaka* have a better effect in the treatment of *Vata* predominant symptoms in Menopausal syndrome.

Probable mode of action of lasuna ksheerapaka

- Lasuna possess Katu Pradhana Amla Varjitha Pancha rasa which are known to act as Kaphavata Shamaka.
- The Snigdha, Guru Guna of Lasuna decreases the Vardhitha Vata dosha and helps in Anulomana of the Vata.
- The *Ushna Virya* also helps in controlling the *Vata*.
- The karma of Lasuna such as Rasayana and Balya is very much indicated in Jaravastha and helps in preventing the long term complications of senility.
- Lasuna is having the properties like Dipana and Pachana which helps in improving Agni both Jataragni and Dhatwagni. This helps in improving the formation of the Rasa Dhatu and Uttarottara Dhatus reduces the chance of Dhatukshaya, also reduces the symptoms like Vibandha.
- Due to its *Katu Vipaka* and *Tikshnatwa*, the *Kaphanisarana* occurs, thus removes the *Avarana* of *Vata* by *kapha*, and hence helps in *Vata Anulomana*.
- As Lasuna mixed with milk during Ksheerapaka preparation, the Sheeta Virya, Madhura Vipaka and Mrudu Guna of milk balances the Ushna Virya, Katu Vipaka and Tikshna Guna of Lasuna.
- Milk is having the Karmas like Rasayana, Jeevaniya, Balya, Vrushya etc. Properties which

helps in *Dhatupushti* and in balancing *Vata Dosha*.

Probable mode of action of aswagandha-arjuna ksheerapaka

- Aswagandha is known for its Vrushya and Rasayana properties which are indicated in pacifying the Rajonivruthi lakshanas.
- The Snigdha guna and Ushna Virya pacifies Vata. Madhura and Tikta Rasa are Vatapittashamaka.
- Aswagandha is included in the Balya Varga and Madhuraskandha indicating the Vatahara as well as Rasayana Karma of the drug.
- Aswagandha contains withasomnine as a major chemical constituent which act as annxiolytic and induces sleep. Its somniferous roots are the main part which is used in the formulation.
- Aswagandha is said to possess antidepressant property which helps in relieving depression and elevating the mood.
- The antioxidant effect of Aswagandha helps in delaying ageing and hence best suited in Jaravastha.
- Arjuna having Sheeta Guna and Hridya, Balya, Sandhaniya etc. Karmas also helps in symptoms like palpitation, body ache etc. of Menopausal syndrome.

CONCLUSION

Old is a stage in life signified by *Dhatuparipurnata*. It is *Jeernavastha* when *Shareera Dhatu* progress towards *Kshaya* and vitiated *Vata* manifests symptoms that have been described as *Rajonivruti*. The *Vata Dosha* especially *Apanavata Dushti* leads to many symtoms. *Dhatukshaya* as well as the *Avarana* of *Vata* were the prime causative factors for such symptoms. The main principle of management of *Rajonivruti* is *Agnivardhaka*, *Vatakaphashamaka* and *Vatanulomaka Chikitsa*. *Lasuna* is the trial drug which having *Dipana*, *Pachana*, *Rasayana*, *Balya*, *Brimhana Karmas*. Both the drugs show action in almost same manner as they have similar properties like *Vatanulomana*, *Balya*, *Rasayana*, *Vrushya* etc.

Both the drugs were found to be statistically significant in Menopausal syndrome and statistically Lasuna Ksheerapaka shows more effect in two criteria i.e. Mood swings and Myalgia where the association of Kapha is more. This may be because of its Dipana-pachana, Vatanulomana, Kaphanissarana, Srotosodhana property of Lasuna. Both the formulations were not reported any adverse effect during the clinical trial.

LIMITATIONS OF THE STUDY

- Strong flavour of *Lasuna* was a challenge. It made the drug less palatable and acted as a limitation to its oral administration.
- Fresh preparation of each dose before administration was found to be not very convenient.

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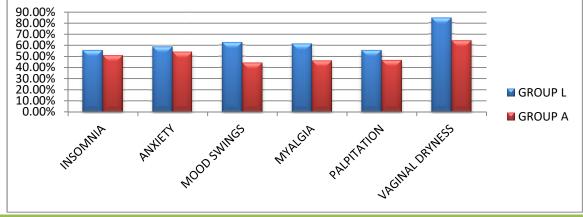
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COMPARATIVE EFFECT OF GROUP A AND GROUP B

Table 2: Comparative effect of both groups:-

Symptoms	BT-AT Mean		d	% of relief		t	P
	Group A	Group B		Group A	Group B	_	
Insomnia	1.50	1.30	0.20	55.55%	50.98%	0.809	>0.05
Anxiety	1.00	1.30	0.30	58.82%	54.16%	1.101	>0.05
Mood swings	1.25	0.75	0.50	62.50%	44.11%	2.207	< 0.05
Myalgia	1.75	1.20	0.50	61.40%	46.15%	3.240	< 0.05
Palpitation	0.75	0.70	0.05	55.55%	46.66%	0.346	>0.05
Vaginal dryness	0.55	0.45	0.10	84.61%	64.28%	0.461	>0.05

Graph 1: Comparative effect of both groups:-



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