



## A CASE REPORT ON RAKTA PRADARA

G. Jashmi<sup>1</sup>, R. Vijaya Santha Kumari<sup>2</sup>

<sup>1</sup>PG Scholar, <sup>2</sup>Associate Professor, Prasuti Tantra, and Stree Roga Department,  
Dr. NRS. Government Ayurvedic College, Vijayawada, Andhra Pradesh.

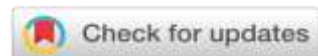
Corresponding Author: [jashmigorle123427@gmail.com](mailto:jashmigorle123427@gmail.com)<https://doi.org/10.46607/iamj2212042024>

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## ABSTRACT

*Rakta pradara* is one of the common gynaecological complaints seen in our OPDs—*Pradirana* (Excessive secretion) of *Raja*, termed as *Pradara* by Acharya Charaka<sup>1</sup>. Prolonged and intermenstrual bleeding is termed *Asrigdara* by Acharya Susrutha<sup>2</sup>. The menstrual bleeding flowing abnormally in volume, duration, intensity, and frequency is called the disease *Raktapradara* (AUB). Various treatment modalities like hormonal therapy, antiprostaglandins, antifibrinolytic agents and surgical interventions are available in modern medicine for the management of AUB. Considering the side effects and adverse effects, Ayurvedic management can be recommended as a safer, more feasible and more effective therapy for the management of *Rakta pradara*.

**Keywords:** *Raktapradara*, *Asrigdhara*, Abnormal uterine bleeding.

## INTRODUCTION

In the present era, due to altered food habits, lifestyle changes and stress, the menstrual health of a female is being disturbed. Abnormal uterine bleeding (AUB) is one of the most common menstrual disorders seen in routine gynaecology practices, affecting about 10%–30% of women of reproductive age over

35 years<sup>3</sup>. The prevalence of AUB in India is about 17.9%<sup>4</sup>. The features of *Raktapradara* closely resemble abnormal uterine bleeding. The present article discusses a case report that was treated successfully by Ayurvedic treatment procedures.

## CASE STUDY:

A 35-year-old female came to Dr. Achanta Lakshmi Govt. Ayurvedic Hospital, Vijayawada, Prasuti & Stree roga opd with complaints of prolonged, heavy and painful menstrual bleeding associated with clots of variable sizes for two years. Her ultrasonography of the abdomen revealed a Fibroid Uterus. She took hormonal therapy for the above complaint. But she didn't get any relief; she came to our OPD for better management.

**Menstrual History:** Age of menarche – 12 years, LMP – 12/07/2023, Cycle interval: 28-30 days, Duration: 10-12 days, heavy bleeding with clots, 6-7 pads/day, thoroughly soaked, dysmenorrhea<sup>+</sup>.

**History of Past illness:** K/H/O hypothyroidism under 75 mcg Thyronorm for eight years.

History of fibroid uterus for two years.

**Obstetrical History: G3P2L2A1, LCB – 14 years**

G1 - FT/ LSCS due to oligohydramnios/ Female child/2.8 kg/ live & healthy

G2 - Spontaneous abortion at 3<sup>rd</sup> month

G3 - FT/ LSCS due to previous LSCS/ Female child / 3.1kg / Live & healthy

**Physical Examination:** BP – 120/80mmhg, PR – 82b/min, RR- 18/min

**Genital Examination** – External genitalia healthy  
Per Speculum – Cervix and vagina walls healthy, Pinhole os

Per Vaginum – Uterus Anteverted, Bulky, Mobile, Fornices free

**Investigations:** Hb- 8.5 gms, HIV - Non-reactive  
HBsAg – non-reactive  
VDRL – non-reactive  
BT& CT normal,

USG: 04/5/23 – Uterus Bulky – 10.0 ×6.3×5.9 cm  
Intramural fibroid -20×21mm  
Submucosal fibroid - 26×20mm  
Fundal intramural - 29×23mm  
Anterior subserosal fibroid - 23×28mm

Endometrial thickness – 11.1mm

**DIAGNOSIS:** Rakta Pradara

Informed consent was taken from the patient.

**TREATMENT:** *Samana oushadi*

- *Kanchanara Guggulu*<sup>5</sup> BD with lukewarm water
- *Jeerakadhi Modakam*<sup>6</sup> 6 gms Bd with lukewarm water
- *Pushyanuga churnam*<sup>7</sup> 5gms BD with Tandulodakam
- *Punarnavadi Manduram*<sup>8</sup> BD with lukewarm water
- *Lodhrasava*<sup>9</sup> 10ml Bd with equal quantity of water
- *Pradarantaka ras*<sup>10</sup> 125mg BD with lukewarm water

**Panchakarma—Planned for Dashamula ksheera Yapana Vasthi for five days, one week before menstruation, for five consecutive cycles.**

**Materials and Methods:** *Vasti Netra, vasti putaka, Dashamula kashayam, ksheeram, Madhu, saindhava lavana, satapuspa churnam.*

The *vasti dravya* was prepared according to the standard protocol.

**FOLLOW-UP:** A review was taken after menstruation.

## OBSERVATION AND RESULTS:

**Table 1: Observation Before and After Treatment**

Features	BT	AT
Duration	10-12 days	5-6 days
Pain	Severe	Mild
Number of clots	More	Occasional
No. of pads	6-7 pads /day	3-4 pads/ day

Hb – 10.2 gms

USG – 1/12/23

Uterus – Bulky – 8.6×7.1×5.4cm, ET – 7mm

Submucosal fibroid – 18×18mm

Right Lateral subserosal fibroid - 18×19mm  
Fundal intramural fibroid - 22×21mm  
Posterior intramural fibroid - 19×20 mm  
Rt ovary – 2.4×2.8cm  
Lt ovary – 2.2 ×2.1 cm

## DISCUSSION

Most of the ingredients in the above drugs have *Kashaya, tiktha rasa, laghu ruksha guna and sheeta veerya* properties, which help to control bleeding conditions. As *Vata* is the main causative factor for all the *yonirogas*, *Vasti karma* is selected for the study and is also considered *Purna chikitsa*. *Dashamula* processed with *ksheera* is given as *vasthi dravya*, which provides *dhatuposhana*, in turn, alleviates *Vata dosha*, gives strength to the uterine musculature, and helps in *vatanuloamana* hence decreases the intensity of pain. Because of the *Deepana* and *pachana* properties of the above drugs, it causes *agni deepana*. It helps in *ama Pacana*, leading to *sroto sodhana*, thus causing *prakrita rasa* and *raktha dhatu* formation. The *Lekhana* property of *Kanchanara Guggulu* helps decrease the fibroids' size. In the pathogenesis of *Rakta pradara*, *Chala guna* of *vata dosha*, *Sara* and *Drava guna* of *pitta dosha* increase the amount of blood. The synergetic action of the drugs controls the *Sara* and *Drava guna* of *Pitta dosha*, thus controlling the excessive amount of blood loss. With the help of *ruksha, laghu guna* of *Kashaya rasa* predominant *dravyas*, it shows *sthambana, grahi, Sleshmahara* and *Raktapittahara* properties. The rest of the complaints, more clots, pain, etc, are revealed. Hence, it showed positive results.

## CONCLUSION

*Rakta pradara* is one of the gynaecological disorders seen nowadays. Excessive blood loss during menstruation impacts the quality of life and may become life-threatening if left untreated. Hysterectomy is the ultimate treatment option in the modern medical sys-

tem. Ayurveda has better treatment facilities by using drugs having *Kashaya, tiktha rasa, laghu, ruksha and seeta virya* properties, which help in *raktastambana, raktasodhana* and are also having *Deepana, pachana, anulomana karma* which helps in *Vata hara* decreasing the intensity of pain thus the treatment avoids hysterectomy surgery.

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