ROLE OF MATRA BASTI IN SECONDARY AMENORROEA WITH INTERNAL MEDICINE

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ABSTRACT
Absence of menstruation for three to six months after menarche without pregnancy is secondary amenorhoea. Most common causes are hormonal imbalance and stress. In this case a 24 year female comes to OPD with absence of menses since 4-5 months ,she is having same problem from last 3 years taking Regular hormonal treatment. Now the condition is that without taking Tb. primolute N there is no menstruation .Due to fear of side effect she approach us for ayurvedic treatment .After taking proper history I started treatment from the next day with Matrabasti with abhyantara kalpa like Chandra prabhavati, yograj guggul and sutshekhar ras On the fifth day of basti treatment she is having start with menstruation .This procedure was followed for next three cycles. Every month patient came ten days before the menstruation and given the same treatment. Now she is having regular menses without taking hormonal therapy. From this it is proven that Matrabasti is useful in secondary amenorhoea due to hormonal imbalance.

Key words:Secondary amenorrhoea ,Matra Basti, hormonal imbalance and stress ,udavartini ,shuska yoni vyapad.

INTRODUCTION:Today's comparative fast life gives us gift like stress ,irregular and wrong diet habit, suppression of natural urges.all these condition aggrevate apanavayu.,Vikritapanvayu causes udavartini ,shuska yoni vyapad. Female their self also responsible in hormonal imbalance as they prepond or postpond their menses due to holistic functions very casually. Stress also play important role in hormonal imbalance,all these things controlled by vayu.Prakrutvayu regularize homonal imbalance and regularize menstruation with its prakrut anuloman karma.

CASE REPORT:24yrs female patient, came with presenting Complaining of irregular and absense of menstrual cycle, slight chest heavyness.
O/E Blood pressure:110/80 mm of Hg
Pulse:74/min
Sleep: regular
Bladder habit: regular
Bowel:constipation
Appetite: decreased
Occupation: teacher.

Systemic Examination:
CVS:S1 S2 normal.
CNS:well oriented and conscious.
RS:AE-BE clear.
P/A-soft,nontender,liver kidney ,spleen not palpable.
No H/O any major illness.

Investigation:-CBC, urine routine, USG abdomen, thyroid function test .all these test shows no specific abnormality.

Treatment:
1 Matrabasti with til tail 60ml.
2 Chandraprabhavati.500mg bid
3 Yog raj guggul. 500mg bid
4. Sutshekhar ras 250mg bid.
When menstruation starts only oral treatment is continue. Repeat matra basti for next three cycle before 10 days of menstruation date.

**DISCUSSION:** Absence of menstruation for three to six months after menarche without pregnancy is secondary amenorrhea. Hormonal imbalance is common cause. Causes are 1) low estrogen and high testosterone hormone pituitary and thyroid gland also play role. 2) structural Poly cystic ovarian syndrome 3) mal nutrition Present with irregular and absence of menstruation for three to six months, acne headache hirsutism, breast discharge all these symptoms also appears. Diagnosis made with the help of USG abdomen, blood hormone level of estrogen, thyroid function test, CT. Treatment prescribed in text is synthetic hormones. Normal endogenous estrogen O.C. pills for three cycles. Ethinylestradrol for 25 days. Primolute N (norethisteron) 5 mg TDS for three days before expected on set of menstruation. According to ayurveda udavartini, shuska yoni vyapad. vitiated vata is responsible for this. Hetus are vegadharan, stress, improper diet present with improper and absence of menstruation. Management is anuvasanbasti mentioned by kashyapa, charak and sushrut. In the present case there is no systemic illness or local injury or disease of endometrium in USG there is no PCOS so the cause is low estrogen level. This is due to vegadharan and stress leads to psychological upset effect on hormonal secretion by hypothalamus and pituitary gland. Chakrapani mentioned kshinaratav can be due to deficiency either rasa and raktadhatu and estrogen. Sushrut think about the upadhatu, srotomukh avarodha Bhavprakash mentioned rajo nasha one of the nanatmaja vata vyadhi.

In Menstruation, vayu is responsible for rajsar for cyclic change of endometrium excretion and movement, here excretion means not only menstruation but we can think about hormonal secretion and its stimulation. Roots of artava vaha srotas are uterus and uterian arteries which is place of apanavayu and its prakrut action is anuloman. Due to hetus mentioned previously apanavayu changes its direction upward, so there is absence or irregular menses. To treats this condition, basti is only choice for better result as it acts on doshas and mula sthana of vayu as vikrutvayu is responsible for it. Treatment for yoni vyapad mentioned in text is anuvasan basti. Basti also act on central nervous system by giving prakrutanuloman gati to vayu relieves stress, and psychological upset help to regulate hormonal imbalance.

**CONCLUSION:** From the above mentioned case we conclude that, matrabasti with internal medicine acts better in Secondary amenorrhea causing due to stress induced hormonal imbalance.

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