AYURVEDIC CONCEPT OF PREMENSTRUAL SYNDROME WITH SPECIAL REFERENCE TO 
PITTAVRITTA VYANA VAYU

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ABSTRACT

Premenstrual Syndrome (PMS) refers to a complex of cyclical and recurrent physical, emotional and behavioral symptoms that occur specifically in luteal phase and remain for minimum three consecutive menstrual cycles. Up to 80% of women of child bearing age report with few mild symptoms of PMS prior to menstruation. But clinically significant PMS is seen only in 3 to 8% of women. Its more severe form, Premenstrual Dysphoric Disorder (PMDD) has listed one among the Depressive mental disorders by American Psychiatric Association. Premenstrual Syndrome, an often neglecting medical condition due to social taboo of not discussing the issue of menstruation, was not considered as a disease earlier unknown cause and without any specific proved diagnosis and medication in modern medicine. This article is merely an attempt to relate PMS with Pittavrita Vyana Vata, which is an Avaranajanya Vyadhi. In Rituvyayateetakala which is compared mainly with the luteal phase, there is Pittakopavastha and Vatasanchhayavastha. With excess intake of Pittakar Nidan in Rituvyayateetakala, Sanchita Vata specifically Vyana Vayu gets Avritta with Kopita Pitta and manifested in the form of Sarvanga Daha, Santapa, Klama etc. So the disease PMS can be managed and treated on the line of Pittavrita Vyana Vayu so as to provide relief from its deleterious effects and improve her family and social life.

KEYWORDS: Ayurveda, Pittavrita Vyana Vayu, Premenstrual Syndrome, PMS, Tridosha.

INTRODUCTION

PMS is a recurrent and cyclical condition which is characterized by physical, psychological and behavioral changes of sufficient severity which result in deterioration of interpersonal relationships and normal activity. These group of symptoms often occur in luteal phase i.e. 7 to 10 days prior to menstruation and disappears when menstruation starts. PMS is a complex health concern. A lot of reproductive age women suffer from this syndrome. In modern era, women work throughout the month, no matter what. These multitasking modern women have learnt to ignore their natural rhythm, which causes hormonal swings leading to wide range of imbalances and complaints. PMS, which is termed as premenstrual syndrome, is one among these imbalances. It is just an abnormal response to normal hormonal changes. Untreated Premenstrual disorders can lead to modest increase in direct costs associated with increased medical visits and laboratory tests and large increase in indirect costs through lower work productivity[1]. The diagnosis of PMS can also become difficult because many medical and psychological conditions can mimic or worsen symptoms of PMS[2]. Further fate is that there is no proven medicine till date for this syndrome in Modern Medicine. Ayurvedic line of treatment defends a good deal on the stage of disease. It is considered not only a system of Medicine rather it is the way of life. Now Ayurveda is becoming more and more acceptable globally as it is eco-friendly with its holistic approach. It permits to treat the disease without nomenclature by judging the involvement of Dosha Dushya only[3]. This article is an attempt to understand the concept of PMS with Avaranajanita Vyadhi, Pittavrita Vyana Vayu in Ayurveda and devising appropriate measures to counter this menacing problem.

MATERIAL AND METHODS

1) Modern literature from books as well as websites related to PMS.
2) Ayurvedic Samhitas and other literature related to Avarana and Vatavayadi.
3) Research Papers related to PMS.

Etiology

The definite cause of PMS which is also known as premenstrual tension (PMT)[4], is unknown. Many theories have been postulated to explain the cause of PMS. According to some disapproved older theories, the causes of PMS are thought to be estrogen excess, estrogen withdrawal, progesterone deficiency, pyridoxine or vit. B6 deficiency[5], alteration of glucose metabolism and fluid electrolyte imbalances.

Some current theories which explain PMS causes include:

A) Low endorphins in blood- Endorphins are feel good hormones, which contribute to the feeling of happiness and regulates mood. The level of this ‘feel good’ hormone drops during luteal phase of menstrual cycle. So it is possible that low beta endorphins lead to PMS symptoms[6].
B) Serotonin deficiency- Serotonin is a chemical in brain that regulates many functions including mood and sensitivity to pain. In support of this theory, a role of serotonin in the pathophysiology of PMDD has been consistently shown in the research investigations using several experimental models. During the premenstrual phase, patients with PMDD have lower whole blood serotonin level\(^{[7]}\) and lower platelet serotonin uptake\(^{[8]}\) than controls without PMDD.

C) Nutritional cause- Magnesium and calcium deficiency have also been postulated as the cause of PMS because supplementation with these minerals have been shown to improve some PMS symptoms\(^{[9]}\).

D) Prostaglandins- Acc. to another theory, Prostaglandin which is an inflammatory substance, is produced in the areas where PMS symptoms originates like in breast, brain, reproductove tract, kidney and gastrointestinal tract, which may play a role in symptoms like cramping, breast tenderness, constipation or diarrhea\(^{[10]}\).

E) One theories under research include alteration in gamma-aminobutyric acid i.e. GABA system and hypo-prolactinemia\([11\) to 13\].

A genetic component has also been raised by some researchers.

Besides its etiology, there are some risk factors which have been identified to cause PMS. These are.

Smoking\(^{[14]}\). According to a research, women who smoke cigarettes are likely to have more than twice as more severe PMS symptoms than non smoker women.

Obesity\(^{[15]}\)- Research reveals that women with Body mass index (BMI) of 30 or above are nearly three times as likely to have PMS than women who are not obese.

Dietary factors- Frequent consumption of fast food and excessive coffee intake.\(^{[16]}\)

Other than these, Stress, Advanced age, History of depression and Positive family history of PMS has also mentioned in texts as risk factor for PMS.

Epidemiology

Premenstrual Dysphoric disorder (PMDD), as defined by the American Psychiatric Association (APA) Diagnostic and Statistical Manual, Fifth Edition (DSM-5), can be differentiated from premenstrual syndrome (PMS) by the presence of at least one affective symptom, such as mood swings, irritability and/or depression\(^{[17]}\). Symptoms of mild PMS have been reported to affect as many as 75% of women with no menstrual irregularity\(^{[18]}\). Clinically significant PMS occurs in 3 to 8% of women\(^{[19]}\) while approximately 2% are affected severely, with PMDD.

Clinical Manifestations

Most of the women in their reproductive age, suffer from mild physical and/or psychological symptoms just two or three days prior to the onset of menstruation. These symptoms which do not cause functional impairment or severe distress to her, should not considered as Premenstrual syndrome (PMS)\(^{[20]}\). PMS is defined by American College of Obstetricians and Gynecologists (ACOG) as at least one symptom associated with “economic or social dysfunction” that occurs during the five days before the menstruation onset and should remain for minimum three consecutive menstrual cycles.

Women suffering from PMS may experience symptoms of varying duration and severity from cycle to cycle. Common physical signs and symptoms include.

- Cramps
- Constipation or diarrhoea
- Weight gain
- Bloating
- Fatigue
- Sleep disturbances
- Breast tenderness
- Acne
- Change in appetite with overeating and cravings for food

Frequent psychological symptoms of PMS are-

- Anger and irritability
- Depression
- Anxiety
- Crying and oversensitivity
- Exaggerated mood swings

Women with underlying depression often feel better during or after menstruation, but their symptoms do not resolve completely. On the other hand, women with PMS or PMDD have a complete resolution of symptoms when menstruation phase begins\(^{[21]}\).

Role of Ayurveda in PMS

PMS remains as enigma because of the wide ranging symptoms and the difficulty in making a firm diagnosis. There are several theories which have been postulated to explain the cause of PMS but till today, no one has been proven. Secondarily, specific treatment for PMS still largely lacks a solid scientific basis. Widespread recognition of PMS has attracted a broad range of research interest in the treatment and management of the diverse symptoms of PMS. So Ayurveda can be considered as a boon in this challenging disease. Pacification of somatic symptoms along with improvement of psychomotor aspect of disease makes Ayurveda to be preferred choice in PMS.

Avarana

Concept of Avarana is one of the least understood concept among all fundamental principles of Ayurveda. According to Ayurvediya Shabdakosha, the word Avarana means Avarodha, Gatirodha i.e. obstruction in the normal Gati of Vata. Vata, which is strongest of all three Doshas, has Laghu, Ruksha, Sheeta, Chala, Vishada, Kharra etc. Guna. It is due to Chala guna of Vata which is responsible for all the movements. If the Gati of Vata becomes obstructed, its functions will get hampered. Acharya Sushruta quoted three pathological conditions of Vata.

Kevala vata
Dosa yukta vata
Avritta vata

In case of Avarana, there are 2 components-one is Avaraka dosha which cause the Avarana or obstruction after getting vitiated, and other component is Avritta dosha which is getting Avritta or obstructed by Avaraka dosha and whose functions get affected by the obstruction. The
Symptoms produced are based on the principle of Karma Vridhhi or Karma hani of Avriddhi dosha and secondarily the location of Dosa dushta sammorgchhana. When there is complete obstruction or Avarana, Karam hani will be seen and when there is partial obstruction, Karma of the Avriddhi dosha gets vitiated so Karma vridhhi will be observed[22].

Simultaneously, the symptoms of Avriddhi dosha may occur in any part of body depending upon the site of Dosa dushta sammorgchhana e.g. when we consider Pittavritta Vyana Vayu, when there is Purva avarana of Pitta to Vyana Vayu, Gatra sanga will be there and when Anshika avarana, Gatra vikshepa will be seen. As the Sthana or location of Vyana Vayu is Sarva Sharira so Avarana of Pitta to Vyana Vayu may take place anywhere in all over the body, depending upon Srotas- Khavaiguanyata and accordingly treatment is done.

**PMS in Ayurveda**

According to Ayurvedic concept, the health of an individual is attributed to the status of Doshas in his body. The balanced state of Doshas is the cause of health while an imbalance of Doshas is termed as disease. In Ayurveda, there is no clear cut evidence of disease Premenstrual Syndrome so it is difficult to give the disease a single Ayurvedic term. It can be correlated with different entities which one explained either as symptoms or disease.

According to Acharya Charaka, in Charaka Sutras thana 18/44, it is impossible to give the name to all the diseases so a learned physician should recognize the balanced or imbalanced state of Doshas in body and then treatment should be initiated after deciding the nature of disease. Taking all this into consideration, Ayurvedic concept of PMS has been made.

Symptoms of the Disease PMS is seen few days prior to menstruation in luteal phase which can be mentioned as Rituvayateetakala in Ayurvedic terminology. As in Ayurvedic concept of menstruation, Artava or Ritu Chakra is classified as Ritukala, Rituvayateetakala and Rajakhala. There is a specific pattern of Dosha dominance during these three Kala[22]. During Rituvayateetakala, there is dominance or Kopa of Pitta Dosha with Vata Sanchayavastha.

**Pittavritta Vyana Vayu**

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<table>
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<tr>
<th>Phase</th>
<th>Ritukala</th>
<th>Rituvayateetakala</th>
<th>Rajakhala</th>
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<tbody>
<tr>
<td>Dosha sanchaya</td>
<td>Pitta</td>
<td>Vata</td>
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<td>Pitta</td>
<td>Vata</td>
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<tr>
<td>Dosha shamana</td>
<td>Vata</td>
<td>Kapha</td>
<td>Pitta</td>
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</tbody>
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Symptoms of Pittavritta Vyana Vayu as mentioned by Acharya Charaka are:  
- Daha Sarvagna  
- Klama  
- Gatra vikshepa sanga  
- Antarapita  
- Vedana

In Rituvayateetakala, already Pitta remains in Kutupavastha; and when Pittavardhaka nidan sevana is done by any women specifically during this Kala, there is exponentially rise in Pitta quantitatively. This excessive Kutipa Pitta blocks the normal path of Vata specifically Vyana Vayu. Vyan vayu is responsible for all Gati, Prasara, Aakunchana, Utkshepa, Avakshepa, Nimesh unmesha adi kriya, leading to manifestations of Pittavritta Vyana vayu like Sarvanga daha, Klama etc., Thus Both Pitta and Vyana vayu in turn leads to Avaraka and Avriddhi components of Avarana respectively. As the Rituvayateetakala ends and Rajakhala begins; Pitta, which is in aggravated state and was acting as Avaraka dosha, automatically comes back to its Shaman state so pacifies the symptoms of Pittavritta Vyana Vayu or PMS. Simultaneously, in PMS or PMDD, due to genetic predisposition, risk factors like cigarette smoking, stress, junk food (which is common in today’s working women), there is imbalance of various hormones including estrogen and progesterone.

This cyclical fluctuation in circulating estrogen and progesterone cause marked change in neurotransmitters like Opioid[24], GABA[25] and serotonin[26] system which manifests in the form of PMS.

**PMs, PMDD**

- Genetic predisposition, stress, risk factors like cigarette smoking, junk food
- Imbalance of various hormones like estrogen and progesterone
- Cause marked change in neurotransmitters like GABA, serotonin
- Manifests as PMS, PMDD

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Pittavritta Vyana Vayu can be managed on the line of Avarana Chikitsa. Acharya Charaka has mentioned the treatment of Pittavritta Vyana Vayu in Vatavadyadhi Chikitsadhyaya. Nidana Parivar jan, the 1st line of treatment should be done by avoiding Pittavardhaka ahara, Viharaha. The management of Avarana should aim towards cleansing the Srotas with different medications, Vatanulomana along with Panchkarma therapy. The selection of specific Panchkarma is done to remove of Avara ka Dosa, i.e. Pitta. So when Pitta is obstructing Vyana Vayu, then Pitta Avarana removal management should be done. Virechana with Eranda taila can be a choice of drug in this disease. Depending upon the Anupana, Eranda Taila removes various Avarana e.g. when administered with Mansa rasa and Yusha, it mitigates Vata, when administered with milk, mitigates Pitta and when it is administered with Gomutra, it mitigates Avarana of Kapha dosha. So in all type of Avarana, Eranda taila can be used accordingly. Yapana Basti can be given as it is choice of treatment in majority of Avarana due to its Tridoshabhara property. It can be given at any time, in any season and is devoid of any complication. Other than this, Manjisthadi ksheera Basti, Madhuyasthi ksheera Basti, Guduchyadi ksheera Basti, Pichha Basti may be considered for the management. In Nassya chikitsa, Ksheera nasya can be administered. Besides this, other Panchkarma procedures can be used depending upon the location of Doshadushya sammourchhana. Rasayana drugs with Madhura rasa (which pacifies Vata as well as Pitta) e.g. Bala, Goghrita, Shatavari, Draksha, Kharjoor, Madhuyasthi, Madhura Trifla can be used internally. Yogic exercises like Pranayama, Bhramri, Sheetali etc. can be practiced to reduce the psychosomatic manifestation of the disease.

CONCLUSION

Throughout most of the history, there has been a certain amount of taboo involved in the discussion of the female menstrual cycle. During the cycle, hormonal fluctuation happens within the body which may lead to various annoying symptoms. This recurrent complex of physical, psychological and behavioral symptoms which is termed as Premenstrual Syndrome, affects large population of females. Many of them do not like to disclose such complaints to anybody due to which several of them left undiagnosed and if left untreated, it affects her social life as well as family life. So they should be diagnosed and treated properly. PMS is not known by a single name in Ayurveda so according to its symptoms and phase of occurrence of symptoms, the disease can be related to Pittavritta Vyana Vata. Though an effective cause and so the effective treatment has not yet been found for PMS in Modern Medicine, Ayurveda can offer a great benefit to the female population by improving her psychosocial as well as physical health which ultimately contributes to a healthy society.

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Source of support: Nil, Conflict of interest: None Declared

Cite this article as:

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