Conceptual Study of Premenstrual syndrome - Ayurvedic perspective

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ABSTRACT

Premenstrual syndrome (PMS) is common cyclical disorder affecting women during the luteal phase of the menstrual cycle,characterized by a constellation of physical, emotional and behavioral symptoms that resolve with the onset of menstruation .

In modern medicine, PMS is primarily attributed to hormonal fluctuations, particularly involving estrogen and progesterone,along with alterations in neurotransmitters such as serotonin, leading to symptoms like mood swings, irritability, bloating, breast tenderness & fatigue.

From the ayurvedic perspective,PMS is not described as a single disease entity but is understood the spectrum of Artava Dushti and Yonivyapad, resulting from the imbalance of Doshas, predominantly Vata and Pitta.The vitiation of Apana Vata, along with impaired Agni leading to Ama formation, causes obstruction in Artavavaha Srotas, manifesting as both somatic and psychological symptoms. Additionally disturbances in Mansika Bhavas such as stress, anger and anxiety further aggravate the condition.

Management in modern medicine includes lifestyle modification, pharmacological interventions and hormonal therapy, whereas Ayurveda emphasizes a holistic approach through Nidan Parivarjana (avoidance of causative factors) Shodhana (purification therapies), Shamana (pacifying treatments) and regulation of diet and lifestyle.

In this way PMS is multifactorial condition requiring an integrative approach for effective management and improved quality of life.

Keywords -Premenstrual syndrome,tridosha , Rituchakra, manovaha ,Artvavaha srotas , lifestyle disorders.

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INTRODUCTION

Premenstrual Syndrome (PMS) is a prevalent clinical condition affecting women of reproductive age, characterized by a cyclical pattern of physical, emotional, and behavioral symptoms that occur during the luteal phase of the menstrual cycle and resolve shortly after the onset of menstruation. It is estimated that up to 75–80% of menstruating women experience some form of premenstrual symptoms, while approximately 20–30% suffer from clinically significant PMS, and a smaller proportion experience severe forms such as Premenstrual Dysphoric Disorder (PMDD) . [1,9,10]

From a modern biomedical perspective, PMS is primarily attributed to cyclical fluctuations in ovarian hormones, particularly estrogen and progesterone, which influence central neurotransmitters such as serotonin and gamma-aminobutyric acid (GABA). These neuroendocrine interactions are believed to play a key role in the manifestation of mood disturbances, irritability, anxiety, depression, and somatic complaints such as breast tenderness, bloating, headache, and fatigue. Despite extensive research, the exact pathophysiology of PMS remains multifactorial and incompletely understood, involving genetic, environmental, and psychosocial factors. [9,11]

In Ayurveda, PMS is not described as a distinct disease entity but can be understood under the broader concepts of Artava Dushti (menstrual disorders) and Yonivyapad (gynecological conditions) as described in classical texts such as

Charaka Samhita and Sushruta Samhita. The etiopathogenesis of PMS is primarily attributed to the imbalance of Doshas, especially Vata and Pitta, along with the involvement of Kapha in certain cases. Apana Vata, a subtype of Vata Dosha responsible for the regulation of menstruation, plays a central role in maintaining normal menstrual function; its vitiation leads to disturbances in the menstrual cycle and associated symptoms. [2,5,13,14]

Furthermore, impaired Agni (digestive and metabolic fire) results in the formation of Ama (metabolic toxins), which obstructs the Artavavaha Srotas (channels responsible for menstrual flow), leading to both physical and psychological manifestations. Ayurvedic texts also emphasize the role of Manasika Bhavas (mental factors) such as stress, anger, grief, and (anxiety), which disturb the equilibrium of Rajas and Tamas Gunas, thereby contributing to symptom expression. This highlights the psychosomatic nature of PMS as recognized in Ayurveda. [2,3,5,13]

Thus, while modern medicine explains PMS predominantly through hormonal and neurochemical mechanisms, Ayurveda offers a holistic understanding that integrates bodily humors (Doshas), digestive function (Agni), tissue metabolism (Dhatu), channel integrity (Srotas), and mental health. This integrative perspective underscores the importance of individualized, preventive, and lifestyle-based approaches in the management of PMS. [9,12,13]

AYURVEDIC PERSPECTIVE (NIDANA)

In Ayurveda, PMS is understood as a result of Doshic imbalance, particularly involving Vata and Pitta Dosha, along with impaired digestion and disturbances. [2,5,13]

Dosha Prakopa (Vitiation of Doshas)

- Vata (especially Apana Vata): Responsible for menstrual flow; its aggravation leads to pain, anxiety, and irregularity. [2,13]
- Pitta: Causes irritability, anger, inflammation, and heat-related symptoms. [2,13]
- Kapha (in some cases): Leads to heaviness, lethargy, and fluid retention. [2,13]

Samprapti of Premenstrual syndrome

Nidana (Causative Factors) ↓
Mithya Ahara (improper diet) Mithya Vihara (improper lifestyle) Manasika Nidana (stress, anxiety, anger) ↓
Dosha Dushti (Vitiation of Doshas) ↓
Vata (↑) + Pitta + Kapha imbalance ↓
Agni Vaigunya (Impaired digestion & metabolism) ↓
Ama formation (toxic metabolites) ↓
Dhatu Dushti (Rasa Dhatu & Artava Dhatu affected) ↓
Srotas Dushti (Manovaha & Artavavaha Srotas) ↓
Apan Vayu Dushti ↓
Vyakti (clinical features) **PMS Symptoms** Mood swings ,Irritability, Pain (vata), Burning sensation (piita) ,Lethargy and edema (kapha)

Agnimandya (Impaired Digestive Fire)

Weak digestion leads to the formation of Ama (toxic metabolites), which circulate in the body and disturb normal physiological functions. [13]

Ama Formation

Accumulated Ama obstructs body channels (Srotas), particularly Artavavaha Srotas, leading to improper menstrual function and associated symptoms. [13]

Artavavaha Srotas Dushti

Vitiation of reproductive channels due to improper diet, lifestyle, and stress results in disturbed flow of Artava (menstrual blood). [13,14]

Manasika Nidana

Psychological Emotional factors such as Chinta (anxiety), Krodha (anger), Shoka (grief) disturb Rajas and Tamas Gunas, contributing to both mental and physical symptoms. [3,4,13]

Ahara (Dietary Factors)

Excess intake of spicy, sour, salty foods → aggravates Pitta
Dry, cold, irregular meals → aggravates Vata
Heavy, oily foods → aggravates Kapha

Vihara (Lifestyle Factors)

Irregular sleep patterns
Excessive physical or mental exertion
Suppression of natural urges (Vegadharana)
Lack of exercise or sedentary habits

MODERN PERSPECTIVE

The exact etiology of Premenstrual Syndrome (PMS) is multifactorial and not fully understood. However, several biological, psychological, and lifestyle-related factors are implicated:

Hormonal Fluctuations
Cyclical changes in ovarian hormones, particularly estrogen and progesterone during the luteal phase, play a central role. These fluctuations influence brain chemistry and are considered the primary trigger for PMS symptoms. [9,11]

Neurotransmitter Imbalance
Alterations in neurotransmitters, especially serotonin, are strongly associated with mood-related symptoms such as irritability, depression, and anxiety. Reduced serotonin levels during the premenstrual phase are believed to contribute significantly. [9,10,11]

Genetic Predisposition
A familial tendency has been observed, suggesting that genetic factors may influence susceptibility to PMS. [10,11]

Psychological Factors
Stress, emotional disturbances, and personality traits can exacerbate PMS symptoms, indicating a strong psychosomatic component. [9,10]

Lifestyle Factors
Sedentary lifestyle, lack of exercise, poor sleep, and unhealthy dietary habits (high caffeine, salt, and sugar intake) may aggravate symptoms. [7,10,12]

Nutritional Deficiencies
Deficiencies in calcium, magnesium, vitamin B6, and other micronutrients have been linked with increased severity of PMS symptoms [10,12].

CLINICAL FEATURES (LAKSHANA)
Symptoms can be understood based on Doshas predominance:
Vataja PMS:Pain, anxiety, insomnia, mood swings
Pittaja PMS : Irritability,anger, burning sensation
Kaphaja PMS: Breast tenderness, lethargy, edema
These correlate with modern symptoms like depression, bloating,and fatigue [9,10]

METHODOLOGY
The methodology is based on systematic collection, analysis and interpretation of classical Ayurvedic texts and contemporary scientific literature. [2,5,9,10,13,14]
The data for this study were collected from two major sources:
Classical Ayurvedic texts such as Charaka Samhita,and Ashtagana Hridaya to understand concepts like Artava ,Artavavaha Srotas, Dosha imbalance and Yonivyapad [2,5,13,14]
Modern Medical literature including journals , textbooks,and online database [1,9,10,12]

MANAGEMENT (CHIKITSA SIDDHANT)
In Ayurveda, the management of pre menstrual syndrome (PMS)is based on the principles of Dosha Pratyanika Chikitsa (Pacification of vitiated Doshas), correction of Agni, elimination of Ama,and purification of Srotas,as PMS predominantly involves Vata and Pitta Dosha, treatment focuses on their normalization along with mental well being [2,5,13]

1) Nidan Parivarjana - avoidance of causative factors is the primary treatment (charaka Samhita,sutrasthana 16/20) [13]
2) Shodhana Chikitsa -" vataharanam basti shreshtha"- basti is best therapy for vata disorders . (Charak samhita,siddhisthana 1/39) [13]
3) Shamana chikitsa -use of Madhura ,Tikta, and Kashaya Rasa drugs is advised for pitta and vata Shamana(charak samhita, sutrasthana 26) [13]
4) Agni deepana And Ama pachana - "Agnimoola sarva roga"- impaired Agni is the root cause of all the diseases (charak samhita chikistasthana 15) [13]
5) Rasayana Therapy - Rasayana promotes longevity, intellect ,and strength. (Charak samhita chikistasthana 1) [13]
6) Manasika Chikitsa - "Satvavajya punarjanam " (charaka Samhita sutrasthana 11) [13]
7) Pathya - Apathya - diet and lifestyle change

In modern medicine the management of PMS is primarily aimed at symptomatic relief as PMS is multifactorial in origin , a combination of lifestyle modification, pharmacological therapy, and psychological support is often required. [10,12]
1)Lifestyle modification [7,12]
2) Nutritional supplementation [10,12]
3) Pharmacological management -NSAID's , Hormonal therapy, Selective serotonin reuptake inhibitors (SSRI's), diuretics [10,12]
4) Cognitive behavioral therapy etc. [10,12]

CONCLUSION

Aspect	**Ayurvedic View**	**Modern Medicine View**
Definition	Not a single disease, seen as Artava Dushti (menstrual disorder)due to dosha imbalance	PMS is a group of physical and emotional symptoms before menstruation
Main cause	Vata-pitta imbalance especially Apana vata dysfunction	Harmonal fluctuations (estrogen & progesterone imbalance)
Pathophysiology	Agnimandya - Ama formation - srotas obstruction	Neuroendocrine changes affecting

	- Artava disturbance	serotonin and GABA
Psychological Factors	Rajas & Tamas aggravation- affects mind (Manas)	Neurotransmitter imbalance - mood swings , depression
Physical Symptoms	Due to Dosha s: Vata-Pain & anxiety Pitta-irritability,heat Kapha-heaviness,edema	Bloating,breast tenderness,fatigue, headache
Classification	Based on dosha predominance(Vataj,Pittaja,Kaphaja PMS)	PMS/PMDD (premenstrual dysmorphic Disorder)
System involved	Artava Aha Srotas,Rasa & Rakta Dhatu,Manas	Reproductive & nervous system
Diagnosis	Based on dosha ,Dhatu ,Srotas examination	Based on symptoms
Treatment	Nidan parivarjana + Shodhana+ Shamana + lifestyle (Dincharya,Rituchcharya)	Harmonal therapy,SSRI's , lifestyle changes

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