



Research Paper

A Comprehensive Study of *Apan Vayu* with Special Reference to *Aartava* and Its Related Disorders

Dr. Ankolika Solanki¹, Dr. Bhagirath Prajapati², Dr. Nitin Urmaliya³

¹CAMO Health & Wellness Center, Datia, Madhya Pradesh, India

²CAMO Health & Wellness Center, Morena, Madhya Pradesh, India

³Lecturer & H.O.D., Dept. of Agadatantra, Govt. Auto. Ashtang Ayurveda College, Indore, India

Corresponding Author: * Dr. Nitin Urmaliya

Abstract	Manuscript Information
<p><i>Ayurveda</i> is the ancient and oldest surviving complete medical system in the world. Derived from ancient Sanskrit terms <i>Ayus</i> and <i>Veda</i> and offering a rich, comprehensive outlook to a healthy and balanced life, its origin goes back nearly 5000 years. Since women are considered the most essential factor in the continuity of the human race on earth, they are the root of progeny. Health is important for the success of wider society and the economy. Many women are leading high-pressure lives, particularly when it comes to managing their careers and families. Women often tend to ignore health issues, especially reproductive and menstrual health, which are vital for a healthy body and a focused life. Therefore, it is important to sensitize society about the main cause of menstrual disorders (<i>Aartava dushti</i>), their symptoms, complications, and preventive measures (<i>aahar, vihar</i>) to control them. According to <i>Ayurvedic Samhitas</i> the regulation of <i>Aartava</i> is mainly carried out by <i>Apan Vayu</i>, so <i>dushti</i> of <i>Apan Vayu</i> will result in <i>Aartava dushti</i> and disturbed regular menstrual cycle. A total of 100 subjects, between ages 15-40 years were selected for this study, 59% of subjects were in the 15-25 years of age group and 41% were in the 26-40 years of age group. Maximum subjects are in the age group of 15-25 years which shows that symptoms of <i>Aartava</i> dust begin at this age and when it gets ignored it gives rise to disorders later. 98% of subjects belong to the Hindu religion and 2% Muslim religion. That means most women are from the Hindu religion.</p>	<ul style="list-style-type: none"> ▪ ISSN No: 2583-7397 ▪ Received: 22-05-2024 ▪ Accepted: 21-06-2024 ▪ Published: 18-08-2024 ▪ IJCRM:3(4); 2024: 165-172 ▪ ©2024, All Rights Reserved ▪ Plagiarism Checked: Yes ▪ Peer Review Process: Yes <p>How to Cite this Manuscript</p> <p>Ankolika Solanki. Bhagirath Prajapati. Nitin Urmaliya. A Comprehensive Study of <i>Apan Vayu</i> with Special Reference to <i>Aartava</i> and Its Related Disorders. International Journal of Contemporary Research in Multidisciplinary.2024; 3(4): 165-172.</p>

Keywords: *Aartava*, *Apan Vayu*, *Veda*, *Aartavadushti*, physiological expressions

1. INTRODUCTION

Ayurveda is the ancient and oldest surviving complete medical system in the world. Derived from ancient Sanskrit terms *ayus* and *Veda* and offering a rich, comprehensive outlook to a healthy and balanced life, its origin goes back nearly 5000 years. *Ayurveda* therefore is not only a health care system but a form of lifestyle adopted to maintain perfect balance and harmony within human existence, from most abstract transcendental values to the

most concrete physiological expressions. Since women are considered the most essential factor in the continuity of the human race on earth, they are the root of progeny. God has given this liberal gift only to women. In the present era, millennial women are indeed the harbinger of a new era where most women are breaking the glass ceiling through their talents and self-development on personal and professional levels, modern living

means a busy lifestyle, which can be full of making money, and fulfilling professional and personal ambitions. That's why for a lot of women, mental and physical health often take a back seat. The two major barriers for women for not maintaining a healthy lifestyle are lack of time and the deprioritizing of their well-being. Health is important for the success of wider society and the economy. Many women are leading high-pressure lives, particularly when it comes to managing their career and family. Women often tend to ignore health issues, especially reproductive and menstrual health, which are vital for a healthy body and a focused life. According to research by Women's Health App NYRA, 33% of women App users suffer from irregular menstruation problems. Therefore, it is important to sensitize society about the main cause of menstrual disorders (*Aartavadushti*), their symptoms, complications, and preventive measures (*aahar, vihar*) to control them. According to *ayurvedic Samhitas* the regulation of *Aartava* is mainly carried out by *Apan Vayu*, so *dushti* of *Apan Vayu* will result in *Aartava dushti* and disturbed regular menstrual cycle. According to *Acharya Sharangdhar Aartava* is the *updhatu* of *Rakta Dhatu*. In women, the Accumulation of *Aartava* takes place inside the uterus and

from the vaginal tract it is expelled out by *Aartavavahi Dhamani*. All movements in the body are regulated by *Vata Dosha* so Expulsion of *Aartava* is also done by *Vata Dosha*, especially *Apan Vayu* which is situated in the pelvic region. *Ayurvedic Samhita* proclaim "*Srotas*" as the innumerable channels which are designed as internal transport system for divergent function, gross and subtle, biological and energetic. In short *Srotas* are macro and micro channels and pathway operating system in body. The word *Srotas* is derived from the Sanskrit word "*Sru Gatau*" which signifies going, flowing, filtering, continuing, secreting and leaking. *Acharya Charak* had elaborated *Srotas* as the structure through which "*Sravanam*" takes place.

स्रोतांसि खलु परिणाममापद्यमानानां धातुनामभिवाहीनि भवन्त्यनार्थेन ॥

(Ch.Vi. 5/3)

APAN VAYU

Table 1: *Sthan* and *karma* of *Apan Vayu*

ACHARYA	STHAN	KARMA
CHARAK	Both vrashana, vasti, medra, nabhi, uru, vashana, guda, aantra. वृष्णौ वस्तिमैद्वं च नाभ्युरुकंक्षणौगुदं। अपानस्थानमन्त्र्यः शुक्रमूत्रशकृन्ति ॥ सृजत्यार्तवगर्भो च युक्ताः स्थानास्थिताश्च ॥ Ch.Chi.28/10-11 ⁽⁶⁴⁾	It eliminates shukra, mutra, mala, <i>Aartava</i> and garbhain a definite time.
SUSHRUT	Pakvashaya पक्काधानालयोअपानः काले कर्षति चाप्यघः। समीरणः शकृन्मूत्रं शुक्रगर्भानिच ॥ Su.Ni.1/19 ⁽⁶⁵⁾	It eliminates mala, shukra, garbha, <i>Aartava</i> from lower part of the body.
ASHTANG SANGRAHA	Apan Pradesh अपनस्त्वपानस्थितो वस्तिश्रोणिमैद्वं वृष्णवक्षणोरुचरो विण्मूत्रशुक्रार्तवगर्भिष्कमणादिविक्रियः ॥ A.S.Su.20/2 ⁽⁶⁶⁾	It circulates in Shroni, vasti, medra, vrashana and uru and eliminates shukra, <i>Aartava</i> , Mala, mutra, garbha
ASHTANG HRIDYA	Guda अपानस्तु अपाने कतेः अधिः तिष्ठति। अपानोअपानगः श्रोणिबस्तिमैद्वंसाचरः। शुक्राआर्तवशकृन्मूत्रगर्भिष्कमणिक्रियः ॥ A.H.Su.12/9 ⁽⁶⁷⁾	It circulates in shroni, vasti, medra, uru and eliminates shukra, <i>Aartava</i> , mala, mutra and garbha.
BHAVPRAKASH	Malashaya (pakvashaya) पक्काशयालयोअपानः काले कर्षति चाप्ययम। समीरणः शकृन्मूत्रशुक्रगर्भानिचान्यधः ॥ भावप्रकाश पूर्वखण्ड 3/15 ⁶⁸	It eliminates mala, mutra, shukra, garbha and Raja outside the body.

SROTAS

Table 2: *Srotas* description in *Charak Samhita*

SUTRA STHAN	VIMANA STHANA
<i>Srotas</i> are the composition where <i>sravana</i> karma takes place. ^[17]	In <i>vimana</i> sthan, 13 types of <i>Srotas</i> are described. ^[18]

2. AIMS & OBJECTIVE

1. Conceptual study of *Apan Vayu* in detail.
2. Conceptual study of *Aartava* and its related diseases.
3. The main aim of my thesis is to bring to light the importance of *Apan Vayu* on *Aartava* and its related diseases on both Ayurvedic and modern aspects and to find out the main causes of *dushti* of *Aartava* and *Apan Vayu*.
4. To find out the nidana of *Aartava dushti* and to prepare a specific *aahar* and *vihar* chart which can be helpful to prevent *Aartava dushti* as well as in management of *Aartava* rel.

Aartavadushti

For the living body's origin and living, *Vata*, *pitta* and *Kapha* are *moola*.⁸⁴ When these three *Dosha* s are in equilibrium, they hold the body and when get vitiated they give rise to enormous disease. And also, in the absence of definite treatment, they destroy our body.⁸⁵ In *Ayurveda* literature diseases are described according to *Doshas*. The term *Aartava* is the same as *Rajasrava*, *Stree beeja* and also similar to a woman's organs, then also in *Aartava dushti* the diseases related to *Raja* srava are included. *Acharya* described *Aartava-related* disorders under *ashtaAartava dushti* *Asrigdara*.

Table 3: *Aartavadushti* as Per Different Acharya

No.	Artava dosa	Su.Sa.	A.S.	A.H.	Ha.Sa.	Bhe.Sa.	Sha.Sa.
1	Vataja	+	+	+	+	-	+
2	Pittaja	+	+	+	+	-	+
3	Kaphaja	+	+	+	+	-	+
4	Kunapagandhi	+	+	+	+	-	+
5	Granthibhuta	+	+	+	+	-	+
6	Putipuyanibham	+	Puya	Puya	Puya	-	+
7	Kshisnartava	+	+	+	+	+	+
8	Mutrapurisa	+	+	Mala-tulya	+	-	Mala-sama

3. METHODOLOGY

The methodology explains the rationale and study design for data collection, the employed research design, and the used sampling techniques. Tools for data collection and analysis are outlined. And also, the ethical considerations protocols are ensured and stayed.

Research Questionaries

Research questions are prepared based on a Comprehensive Study of *Apan Vayu* with Special Reference to *Aartava* and its Related Disorders.

Study Design

My study design is an observational-based, semi-structural interview, undertaken to study the "Comprehensive Study of *Apan Vayu* with Special Reference to *Aartava* and its Related Disorders". This Sampling was done and subjects were selected based on *Aartava Dushti*. To find the symptoms of *Aartava* and *Apan Vayu Dushti* modified questionnaires were used. The study was carried out in Government Autonomous Ayurveda College, Gwalior over 18 months. The Institutional Ethical Committee had also approved the study protocols.

The sample size of 100 women was enrolled and also written consent was taken. All 100 women were interviewed using a pre-tested and validated questionnaire proforma and the response rate was 100 %. Based on demographic variables and data related to sleep patterns, diet, Menstrual cycle, and physical and mental health problems of women were gathered. And also, the confidentiality of the records was ensured. Based on *Aartava* and *Apan Vayu* *dushti* a specific *aahar vihar* chart was prepared and given to the subjects as the preventive measures for *Aartava*, *Apan Vayu dushti* .and after one month it was asked by subjects on phone call, weather they are applying these preventive measures on their daily life.

Data Collection Sources

Based on a stratified random selection technique, the study was conducted. Women of age group 14- 50 were selected according to their age interval and rural and urban residence place in Gwalior city. All the women were registered in the Government Autonomous *Ayurveda* College, Gwalior. The sample size was selected irrespective of their cast, creed, religion, work, etc. and who fulfilled the criteria for the study and also willingly agreed and signed the written consent form. After selecting women, a detailed questionnaire proforma was filled out based on the

effect of *Apan Vayu* on *Aartava* for the collection of relevant variables and data.

Interview For Data Collection

For filling the variables in the structured questionnaire proforma, a face-to-face interview was taken after obtaining the consent of the subject.

Research Type

Clinical - Conceptual

Number of Subjects

100

Duration of Study

1 Year and 6 Months

Study Centre

The study is performed in Government Autonomous Ayurveda College and Hospital, Gwalior the subject was registered in the OPD.

Inclusion Criteria

Women with symptoms of *Aartava duhti* and *Apan Vayu dushti*
 Women Willing for this study.
 Women with age of 14 - 50 years.

Exclusion Criteria

Pregnant and lactating women, are patients suffering from serious diseases like tuberculosis, AIDS, cancer, and renal failure. Women suffering from serious or chronic menstrual disorders who are taking specific treatment for these disorders, PCOD patients, leucorrhoea patients, metrorrhagia.

Data Analysis

The hard copies of the questionnaire are kept in a safe place. Frequency distribution table and cross-tabulation were used. The results were calculated in the form of tables and graphs

Material

For material data collection Ayurvedic text which includes both *bruhatrayi* and *laghuyrayi* were referred. The questionnaire was based on practicing causes of *aahar*, *vihar* and *mana*, factors that affect *Apan Vayu* and also *Aartava*. Modified questionnaires were prepared based on ayurvedic texts and questionnaires for premenstrual symptoms, *mansik*, and *Sharirik* assessments are also included.

Observations

Observations are extracted from the sample of 100 women, which are registered in Govt. Ayurveda College and Hospital, Gwalior. Here some short discussions are as follows -

Table 4: Premenstrual symptoms-wise distribution

Pre-menstrual Symptoms	No	Mild	Moderate	Severe
Nausea and Vomiting	79	21	00	0
Vibandha	69	31	00	0
Atisara	91	9	0	0
Shrama	10	18	67	5
Aruchi	24	59	17	0
Shira shola	61	30	9	0
Vankshana shoola, kati shoola, Janu shola	53	47	0	0

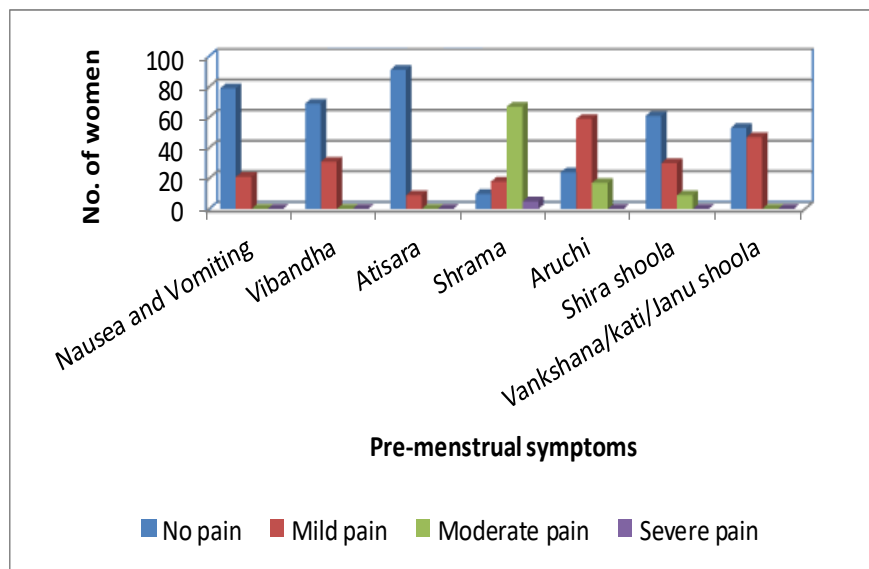


Fig 1: Pre-Menstrual Symptoms

4. DISCUSSION ON OBSERVATIONAL STUDY

1. Comparison of Prakriti with Interval of Menstrual Cycle

In this table, among women with Vata Pitta Prakriti 39 i.e. in (39%) of women, an interval of early menstrual cycle 21-26 days is found in a maximum of women 30 i.e. in (30%), the interval of normal menstrual cycle 27-34 days is found in 9 women i.e. in (9%). Among women in Pitta kapha prakriti 23 i.e. in (23%) of women, the normal interval of 27-34 days is found in maximum women 18 i.e. in (18%). And in 5 women i.e. in (5%) women late interval of menstrual cycle is found of 34- 60 days. Among women in Vata Kapha prakriti 38 i.e. (38%) normal interval of the menstrual cycle of 27-34 days is seen in 7 women i.e. (7%). In 31 women i.e. in (31%) intervals of late Menstrual cycle 34- 60 days are found.

2. Duration of Menstrual Cycle with Prakriti

Among 100 women, subjects with Vata pitta prakriti undergo 4-7 days of menstruation in 30 women i.e. (30%). And in 7 women i.e. (7%) undergoes >7 days of Menstruation. And in 2 women i.e. (2%) undergo <3 days of Menstruation. Among 100 women, subjects with pitta kapha prakriti undergo 4-7 days of menstruation in 20 women i.e. in (20%). And in 3 women i.e. (3%) undergoes <3 days of Menstruation. Among 100 women, subjects with Vata kapha prakriti undergo <3 days of menstruation in 20 women i.e. in (20%). And in 18 women i.e. (18%) undergoes 4-7 days of Menstruation.

3. Dominance of Guna Wise Discussion

In this table maximum of women, 29 take dominance of guru Guna aahar (29%), *laghu Guna* in 20 (20%), *ruksha Guna* in 20(20%), *snigdha* in 15 (15%), *Sheet* in 9 (9%) and *ushna* in 7 (7%) of women. So, the majority of women take guru Guna, which is very heavy to digest and so hamper the prakrit *Agni* and also *dhatu*, the *Tama Guna* may also be elevated due to heavy diet intake, and by taking *ruksha* and *sheet* prominent aahar this vitiates the *vayu* and also results in *Apan Vayu dushti*, and *ushna Guna* which is good for both *rasa pushti* and *Apan Vayu* balance is less taken by subjects.

5. CONCLUSION

The present study was an observational study from which the following data and research of the dissertation are concluded.

- 1) Total of 100 subjects, between the age of 15-40 years were selected for this study, 59% of subjects were in the 15-25 years of age group and 41% were in the 26-40 years of age group. Maximum subjects are in the age group of 15-25 years which shows that symptoms of *Aartavadushti* begin at this age and when it gets ignored it gives rise to disorders later.
- 2) 98% of subjects belong to the Hindu religion and 2% Muslim religion. That means most women are from the Hindu religion.
- 3) 69 subjects (69%) belong to urban areas. 31 subjects (31%) belong to rural areas. This shows that symptoms are *Aartava* and *ApanVayu dushti* were maximum in urban area.

- 4) In total 100 subjects, 58% are graduates 30% were of higher secondary level and 10% were of secondary level and two subjects (2%) were illiterate maximum subjects 58 are graduates.
- 5) 48 subjects (48%) were from middle class society 32 subjects (32%) work from lower middle class and 20 subjects (20%) work from upper middle-class society. maximum subjects belong to middle-class society.
- 6) In total 100 subjects 84 subjects (84%) for married and 16 subjects 16% were unmarried. Maximum subjects were married.
- 7) 78 subjects (78%) were students, 17 subjects (17%) were housewives, and 5 subjects (5%) were working women. The maximum number of subjects were students.
- 8) 79 subjects 70% have menarche between four 11 to 14 years. And 21 subjects had menarche between 12 to 16 years. Maximum subjects had menarche between 11 to 14 years, we show that the age of menarche is decreasing in women due to their faulty dietary habits, sleep patterns, irregular exercise, stress, and workload.
- 9) Hirsutism was present in 53 subjects (53%). It is a state where facial hair and body hair increase and scalp hair decreases. Its possible explanation is the *bheej* dosha of parental *bheej*, from which the development of hair has been affected. Hirsutism can be considered as the *purva roop* of disorders that can develop from *Aartava dushti*.

In 12 Subjects (12%) acne was noticed. *Aam* is formed due to *Agni dushti* and due to improper or partial paka of nutrients circulating in the body. *Aartava dushti* is due to Vata and Kapha dosha and Kapha dosha has a close resemblance with *meda dhaatu* due to *Ashraya Ashriya Bhava*. So due to *meda dushti* there will accumulation of excess *Shleshma* (sebum) in the body and in the skin too, and its proximity with sweat results in acne (*mukhdushika*) coming through hair follicles. In 31 subjects 31% here loss is same due to nutrient deficiency because their food lacks proper vitamins and nutrients.

- 10) In 100 subjects, 39 subjects (39%) were having Vata Pitta prakriti, 38 subject (38%) were having Vata kapha prakriti and 23 subjects (23%) were having Pitta Kapha prakriti. Maximum subjects 39 were having Vata Pitta Prakriti.
- 11) In 39 subjects (39%) Vata Pitta Prakriti, the interval of the menstrual cycle was 21- 26 days. In 30 subjects (30%), 27-34 days was found in 9 women 9%. Hence, we can conclude that the maximum number of women with Vata Pitta Prakriti had early intervals of menstrual cycle.

In 23 subjects (23%) having Pitta Kapha Prakriti, the interval of the menstrual cycle was 27-34 days in 18 women (18%) and 34-60 days was found in 5 women (5%). Hence, we can conclude that the maximum number of women with Pitta Kapha Prakriti had regular menstrual cycles.

In 38% subjects having Vata kapha Prakriti, the interval of menstrual cycle was 34-60 days, in 31 subjects 31% and 27-34

days, in 7 subjects 7%. Hence, we can conclude that maximum with Vata kapha prakrati had delayed interval of menstrual cycle.

12) In 39 subjects having Vata Pitta Prakrati, 30 women (30%) had irregular menstruation and 9 subjects (9%) had regular menstruation. Hence maximum subjects with Vata Pitta Prakrati had irregular menstruation.

In 23 subjects with Pitta Kapha Prakrati, 18 subjects (18%) were having regular menstruation, and 5 subjects (5%) were having irregular menstruation. Thus, maximum subjects with Pitta Kapha Prakrati had regular menstruation.

In 38 subjects with Vata kapha prakrati 32 subjects (32%) undergoes irregular menstruation and 6 subjects (6%) undergoes regular menstruation. Thus, maximum subjects with Vata kapha prakrati shows irregular menstruation.

13) In 39 subjects having Vata Pitta Prakrati, moderate menstruation was found in 30 subjects (30%), and in 7 subjects (7%) excessive menstruation was seen. Thus, maximum subjects with Vata Pitta Prakrati undergo moderate menstruation.

In 23 subjects having Pitta Kapha Prakrati, 20 subjects (20%) undergo moderate menstruation and 3 (3%) subjects undergoes scanty menstruation.

In 38% of subjects having Vata Kapha Prakrati, 20 subjects (20%) undergo scanty menstruation and 18 (18%) subjects undergo moderate menstruation. Thus, maximum subjects of Vata kapha Prakrati show scanty menstruation.

14) In 39 subjects of Vata Pitta Prakrati, 4-7 days of menstruation was seen in 30 subjects (30%), >7 days of menstruation was seen in 7 subjects (7%), <3 days of menstruation was seen in 2 subjects 2%. Hence, maximum subjects with Vata Pitta Prakrati show 4-7 days of Menstrual cycle.

In 23 subjects of Pitta Kapha Prakrati, 4-7 days of Menstruation was seen in 20 women (20%). <3 days of Menstruation was seen in 3 women (3%). Hence maximum subjects with Pitta Kapha Prakrati shows 4-7 days of menstruation.

In 38 subjects of Vata kapha Prakrati <3 days of menstruation is found in 20 women (20%), 4-7 days of menstruation is found in 18 women (18%). Hence maximum subjects with Vata kapha prakrati shows menstruation of <3 days.

15) In 39 subjects of Vata Pitta Prakrati, painful menstruation was seen in 30 subjects (30%) and mild painful menstruation was seen in 9 subjects (9%).

In 23 subjects of Pitta Kapha Prakrati, mild painful menstruation was seen in 14 subjects (14%), painful menstruation was seen in 9 subjects (9%).

In 38 subjects of Vata kapha prakrati mild painful menstruation was seen in 30 women (30%) and painful menstruation was seen in 8 women (8%). Thus, maximum subjects in Vata Pitta Prakrati had painful menstruation, maximum subjects in Pitta Kapha

Prakrati shows mild painful menstruation and Vata kapha prakrati maximum subjects shows mild painful menstruation. Vata is the main factor for onset of pain or to elivate the impulse of pain. Subjects with Vata Pradhan Prakrati are more prone towards pain when there is imbalance in doshas.

16) In 100 subjects, a maximum 93 (93 %) subjects had visra gandh of menstrual blood and 7 (7%) subjects had foul gandh of menstrual blood.

17) In total 100 subjects' maximum subjects 67 (67%) were vegetarian and 33 subjects (33%) were of mixed diet intake.

18) In total 100 subjects, 60 (60%) subjects take vishmashan bhojan, 25 (25%) subjects take Adhyasan bhojan and 15 (15%) subjects take Samasan bhojan. Thus, maximum subjects 60 (60%) takes Vishmashan bhojan, which is the root cause of Agni dushti which results in dushti of *Apan Vayu*.

19) In total 100 subjects, 36 (36%) subjects take Madhur as dominant rasa, 17 (17%) subjects take Amla rasa as dominant rasa, 13 (13%) subjects take Lavan rasa as dominant rasa, 34 (34%) subjects take Katu rasa as dominant rasa, therefore maximum subjects show the dominance of Madhur, katu, Amla rasa and lavan rasa.

20) In a total 100 subjects, 42 (42%) subjects had moderate appetite, 28 (28%) subjects had poor appetite, 22 (22%) subject takes good appetite and 8 (8%) subjects had excessive appetite. Thus, maximum subjects show moderate appetite.

21) In 100 subjects, 29 (29%) subjects take guru dominance of guna, 20 (20%) subjects take laghu dominance of guna, 20 (20%) subjects take Ruksha dominance of guna, 15 (15%) subjects take snigdha dominance of guna 9 (9%) subjects take sheet dominance of guna 7 (7%) subjects take ushna dominance of guna.

Maximum subjects takes guru, ruksha laghu, snigdha dominance of rasa, which in turn results in Vata kapha imbalance in the body that also affect agni and *Aartava* formation mechanism.

22) In 100 women, 77 (77%) subjects takes tea as diet, 7 (7%) subjects takes coffee, 16 (16%) subjects shows no addiction to supplementary diet. Maximum subjects takes tea and coffee it disrupt the acid base balance which can lead to indigestion, caffeine increase the insulin level, reduce insulin insensitivity, increase cortisol level. Caffeine also effects oestrogen level, tea reduces iron absorption, poor sleep, increase anxiety, stress, and restlessness.

23) In 100 Women, 49 (49%) subjects were doing moderate work, 32 (32%) subject were doing active nature of work, 19 (19%) subject were doing sedantary lifestyle of work. This shows that maximum womens are doing moderate and active work which is also a factor affecting normal circulation of *Apan Vayu* and normal menstrual cycle.

24) In hundred womens maximum 15 (15%) subjects were doing irregular vyayam, 17 (17%) subjects were doing less vyayam, 33 (33%) subjects were doing no vyayam, 9 (9%) subjects were doing regular vyayam. Proper vyayam which

are beneficial for jatharagni, uterus and mind, should be practiced regularly because this will help in decrease of occurrence of premenstrual symptoms, headache, upset stomach bloating, fatigue, mood swings menstrual cramps, fatigue.

- 25) In hundred women Asamyak nidra was found in 57 (57%) women, samyak nidra was found in 31(31%) women, alpa nidra was found in 6(6%) women, athi nidra was found in 6(6%) women. Maximum women were found to have Asamyak nidra which will do imbalance in vata and Kapha dosha. Divaswapna will elevate Kapha dosha and will results into Mandagni and ratri jagran will elevate vata dosha and will results into vishamgni. And hence functions of *Apan Vayu* will be disturbed.
- 26) In 100 subjects, 58(58%) subjects were found with vegvidharna of mala, mutra, *Apan Vayu*, 42 (42%) subjects were found with no vegvidharna. This vegvidharna is the root cause of dushti of mala, mutra *Apan Vayu* resulting in occurrences of disorders of this region in later times.
- 27) In 100 subjects, 26 (26%) subjects faced china (stress), 17 (17%) subject faces (krodh), 12 (12%) subject faces Shoka, 10 (10%) subject faces bhaya, 31 (31%) subjects were found to have no boundation in mansik avastha. These mansik bhava vitiates both vata dosha and agni and this has impacts on the endocrine system. Stress can lead to irregular, more painful periods or heavy flow during periods. Women who are usually stressed experience PMS symptoms. In one recent study, it was observed that the effect of stress on ovulation may be the crucial factor related to changes in the length of the menstrual cycle. Stress also affects the sleep pattern in most women.
- 28) In hundred subjects, 44 (44%) subject shows regular bowel habit, 30(30%) subject shows constipated stool, 19 (19%) subject shows regular stool, and 7 (7%) show loose stool. Maximum subjects show irregular, constipated bowel habits which is peculiar sign of *Apan Vayu* dusti. This is evidence that there is a vata dushti.
- 29) In 100 subjects 78 (78%) subjects had saam mala, 22 (22%) subjects had niraam mala.
- 30) In 100 subjects, maximum subjects 39 (39%) had krura koshtha ,38 (38%) had madhyam koshtha , 23(23%) had mridu koshtha .This krura koshtha is due to dominance of vata and hence it will render the physiology of rasa dhatu and *Aartava* formation and will also trigger digestive system.
- 31) In 100 subjects 41(41%) subjects had Vishamagni ,35 (35%) subjects had mandagni, 13 (13%) subjects had samagni, 11 (11%) subjects had tikshnagni.

In a living organism, Agni comprehends various factors that participate and digest the course of digestion and metabolism. The diminished and flared-up state of Agni is responsible for dhaatu kshaya and vriddhi. Agni dushti leads to srotovaigunyata. Agni dushti leads to dusti of *Aartava*, Aam formation, dhatvagni dushti. The normal function of *Apan Vayu* is normal *Aartava* pravriti, so *apan vaigunyata* leads to hampered *Aartava* formation and its pravriti. In some women due to chronic agni

dushti . Women are more prone to Santarmaka vyadhi like obesity and Diabetes. Because Aam production by vitiated agni leads to impair dhatvagni and dhatu poshana and hence improper formation of meda dhatu takes place results in medo vriddhi.

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