



Effect of Agni on Artava: A Comprehensive Ayurvedic Analysis


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In Ayurveda, Agni (digestive and metabolic Agni) is the cornerstone of health, governing digestion, nutrient assimilation, and tissue formation. Artava, encompassing menstrual blood, the ovum, and female reproductive health, is intricately linked to Agni as a derivative of Rasa Dhatu (plasma). This abstract explores the profound effect of Agni on Artava, highlighting their physiological and pathological relationships. A balanced Sama Agni ensures optimal Rasa formation, supporting regular menstruation, fertility, and vitality. Imbalances in Agni - Manda (weak), Tikshna (overactive), or Vishama (irregular) - disrupt Rasa and Artavavaha Srotas (reproductive channels), leading to disorders such as amenorrhea, menorrhagia, dysmenorrhea, or infertility. Manda Agni causes Ama (toxin) accumulation, resulting in scanty or absent periods; Tikshna Agni induces excessive bleeding due to Pitta aggravation; and Vishama Agni leads to irregular cycles and pain from Vata imbalance. Ayurvedic interventions, including dietary modifications, herbal remedies (Ashoka, Shatavari, Trikatu), Panchakarma (e.g., Virechana, Basti), and lifestyle practices, aim to restore Sama Agni and nurture Artava. By addressing Agni, Ayurveda offers a holistic framework for managing menstrual and reproductive disorders, with potential for integration with modern gynecological approaches.

Keywords: Artava, Dhatu, Srotas, Virechana, Basti, Sama, Manda, Tikshna, Vishama

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Introduction

According to *Ayurveda*, total well-being is the condition in which all physiological systems, including *Dosha*, *Agni*, *Dhaatu*, and *Mala*, are in a homeostatic state. A woman's ability to function normally is closely correlated with her menstrual cycle, which is an indicator of her health. Adequate *Artava* (formation) and *Nishkramana* (expulsion) are necessary to preserve women's health. The three stages of a single *Rituchakra*, which lasts for 28 days, are the *Rajahsra Kaala*, the *Ritu Kaala*, and the *Rituvyatita kala*.

Menstrual blood is the blood that accumulates in the body before being expelled (*Artava*). Every month *Rakta* in the *Stree* is evacuated for three to five days after reaching the *Garbha Kostha* (uterus). This is one of the most important physiological processes that permit the synthesis of *Garbha*. *Artava* is *Agneya* and has many traits similar to that of *Rakta*. *Acharya Vagbhata* said that *Rajah* or *Artava* is formed by accumulation of *Artava* (*Rakat*) in uterus during entire month.[1]

Artava is considered as *Upadhatu* of *Rasa Dhatu*. The factors responsible for *Rasa Dhatu Kshaya* are responsible for *Artavaa Kshaya*. The vitiated *Artava* (*Artavaotpadak Ahar*, *Agni* (*Jatharagni* and *Rasagni*) *Rasa Dhatu* and *Artavaavaha Strotas* are the main factors for *Artava* vitiation. *Artava* is *Pitta Pradhan* & *Agneya* in nature. So opposite *Vata* (*Vata* *Kapha* *Ahar* *Vihar*) are responsible for *Artava Dushti*. *Acharya Dalhan* in his commentary on *Susruta* has clearly described that main factor for *Artava Kshaya* are *Vata* and *Kapha Dosha* in combined form. *Agni Dushti* is the root cause of any *Artavaavaha Strotas Vikara*. *Agni* plays a crucial role in the creation of *Artava*. Any disruption in the *Utpatti*, *Vahana* and *Nishkramana* causes *Dushti* of *Artavaa*, which leads to a variety of female disorders.[2]

Pitta particularly *Pachaka Pitta* also contributes to it as it is responsible for the proper digestion of food and further proper formation of *Dhatu*. Any deviation of *Pachaka Pitta* from its physiological function may lead to improper formation of *Rasa Dhatu* and hence improper formation of *Artava Updhatu* in turn. Menstruation is a normal monthly occurrence for women and is a natural event. As most women menstruate between menarche and menopause so menstruation can have a significant impact on one's physical,

Mental, and social well-being, menstrual health is an essential component of overall health for women. It begins at puberty, ranging from the ages of 10 to 16, and ends at menopause at an average age of 45-50. Hormones are secreted in a negative and positive feedback manner to control the menstrual cycle. Hormone secretion begins in the hypothalamus where gonadotropin-releasing hormone (GnRH) is secreted in an increased, pulsatile fashion once puberty starts.

Aims and Objectives

1. To give more clear vision on concept of *Artava*.
2. To determine the relationship between *Artava* and *Agni*.

Materials and Methods

Artava is considered as *Updhatu* of *Rasa Dhatu*. The factors responsible for *Rasa Dhatu Kshaya* are responsible for *Artavaa Kshaya*. To fulfill the motto of the conceptual study, materials have been collected from the *Samhita* and all the available commentaries and other text of *Ayurveda*. Various journals, research papers, articles and text books have been considered to collect the literary materials. Subject related information available on internet has been utilized.

Stages of Artava Chakra

The entire period of one month of *Artava Chakra* is divided into three phases:

Table 1: Predominance of Dosha in Artava Chakra.

Stage	Duration	Predominance of Dosha	Rasa and Guna
Rajahsra	3 to 5 days	Vata	Snigdha, Ushan, Amala, Lavana dravya
Ritukala	12 to 16 days	Kapha	Madhur, Shita, Kshaya
Rituvyatitakala	Days between Ritukala and Rajasra Kala 9 to 13 days	Pitta	Katu, Ruksha, Kshaya

Tridosha and stages of Artav Chakra

Ritukala and Tridosha

The uterus cleans up after the menstrual flow to create a fresh *Raja*. This period is referred to as the proliferative stage in modern science. At this point *Kapha Dosha* starts accumulating in body.

Hence it is responsible for formation of new *Raja*. The *Kapha dosha* continues to function quite actively throughout this time. After performing its function in *Rajakal Vata Dosha* remains passive. *Pitta Dosha* becomes activated as it is the main *Dosha* during *Rajovyatit Kala*. [3]

Rutuvyatitakala and Tridosha

Rutuvyatitakala commences soon after the *Ritukala* is terminated. In this phase of *Pitta* is in active state whereas *Kapha* is in passive state as it performs no function. During this stage if fertilization takes place *Pitta* helps in growth of fertilized ovum. [4]

Rajahsravakala (Menstrual Phase)

The *Rajahsravakala* or the menstrual phase comes at an interval of one month. The duration of this phase varies according to different *Acharya*. In general, the duration is from three to five days. *Vata* is continually active through *Dhamanee*. These characters play a great role in diagnosing various types of *Roga* in *Stree* in which the normal features of the menstrual blood get altered. [5]

The characteristics of Shuddha Artava according to different Acharya.

Table 2: Characteristics of Shuddha Artava

SN	Character	Description
1.	Varna	Color like Gunjaphala, Padm, Alakta, Shashakasrik, Laksha Rasa, Ishat Krishana
2.	Matra	Neither scanty nor excessive, 4 Anjali
3.	Swaroop	Unctuous, not associated with pain or burning sensation
4.	Strava Kala	5 days, 3 days, 7 days
5.	Vishishta Lakshana	Don not stain the cloth after washing

It is essentially degeneration and casting off an endometrium prepared for a pregnancy. Regression of corpus luteum with fall in the level of estrogen and progesterone is an invariable preceding feature. [1]

Decreased level of these two hormones is responsible for menstruation. The function of oestrogen and progesterone is vasodilatation when their level decreased, vasoconstriction takes place due to which blood vessels also constrict and cells starts to necrose and do not get enough blood supply. A vasoconstrictor types of prostaglandins are secreted abundance in the endometrium due to which mucosal layers of the endometrium become vasospastic leads to tortuous blood vessels.

As a result, blood initially seeps into the endometrium vascular layer and gradually the endometrium surface layers is desquamated. During normal menstruation, about 35 ml of blood along with 35 ml of serous fluid is expelled. Menstruation stops between 3rd and 7th day of menstrual cycle. At the end of menstrual phase, the thickness of endometrium is only about 1 mm. [6]

Ritukala (Proliferative Phase)

Ritukala is that period of menstrual cycle in which there is maximum chance of conception if *Beeja* (sperm) is deposited in this *Kala*. *Acharya Sushruta* has said that the duration of *Ritukala* is 12 days in regular menstruation. *Acharya Kashyapa* said that *Ritukala* is counted from fourth day of menstruation. *Acharya Sushruta* has described *Lakshan* of *Ritumati* as - the face of the women who has recently been menstruated gets lively and happy. Her body, face, teeth becomes moist. She gets a desire of sexual intercourse and likes to listen to sweet words. A distinct throbbing sensation is felt in her arms, thighs, pelvis, umbilicus and buttocks. [7]

Rituvyataitakala (Secretory Phase)

The period after completion of *Ritukala* and up to next menstruation is termed as *Rituvyataitakala*. The endometrium prepares itself during this stage to either support a pregnancy or degrade for menstruation. The corpus luteum secretes large quantities of progesterone and estrogen together after ovulation. During this phase of cycle, estrogen causes slight additional cellular proliferation in endometrium, whereas progesterone causes marked swelling and secretory development of endometrium. Endometrial glands become more tortuous. Because of increase in size, glands become tortuous to get accommodated within endometrium. Actually, secretory phase is preparatory period, during which uterus is prepared for implantation of ovum. All these uterine changes during secretory phase occur due to influence of estrogen and progesterone. Estrogen is responsible for repair of damaged endometrium and growth of glands. Progesterone is responsible for further growth of these structures and secretory activities in endometrium. [8]

Pathogenesis

The functions of *Kayagni*, *Bhutagni* and *Dhatwagni* include all the metabolic, neuronal, and hormonal functions of the body.

Hence *Ayurveda* stresses in maintaining proper *Agni* as a prime factor in the management of many diseases. Due to *Kapha Vardhaka Ahara* and *Vihara*, *Mandagni* results in *Artava Kshaya*. This *Mandagni* results in the formation of *Ama Kapha* along with the *Ama* first vitiates the *Rasa Dhatu*. As *Artava* is the *Upadhatu* of *Rasa Dhatu*, the *Artava* is vitiated. The vitiated *Kapha* along with the *Ama* obstructs the *Artava* in the *Artavavaha Srotas* thereby leading to *Anartava* (Amenorrhea) or *Alpartava* (oligomenorrhea). Aggravated *Kapha* and *Ama* having vitiated *Rasa Dhatu* move towards *Medo Dhatu* as *Kapha*, *Ama* and *Medas* have similar qualities. Hence, they are attracted to each other. *Medo Dhatu* is one of the first *Dhatu* along with *Rasa Dhatu* to reflect a *Kapha* aggravation. The functions of *Kayagni*, *Bhutagni* and *Dhatwagni* include all the metabolic, neuronal, and hormonal functions of the body. Hence *Ayurveda* stresses maintaining proper *Agni* as a prime factor in the management of many diseases. Due to *Kaphavardhaka Ahara* and *Vihara*, *Mandagni* results in *Artava Kshaya*. This *Mandagni* results in the formation of *Ama*.^[9]

So the drug having *Vata Kapha Shamaka*, *Pitta Vardhaka*, *Deepana*, *Pachana*, *Rasapushtikara*, *Lekhana* properties should be used to treat *Artava Kshaya*.

Clinical Assessment and Diagnosis

Diagnosing the effect of *Agni* on *Artava* requires a comprehensive Ayurvedic assessment, combined with an understanding of the patient's history and symptoms. Key diagnostic methods include:

1. Pulse Diagnosis (*Nadi Pariksha*): Evaluates the state of *Agni* and *Dosha*. A slow, heavy pulse may indicate *Manda Agni* and *Kapha*, while a rapid, sharp pulse suggests *Tikshna Agni* and *Pitta*.

2. Tongue Examination: A coated tongue points to *Manda Agni* and *Ama*, a red tongue indicates *Tikshna Agni* and *Pitta*, and a dry, cracked tongue suggests *Vishama Agni* and *Vata*.

3. Menstrual History: Assessing cycle regularity, flow, color, duration, and associated symptoms (pain, bloating, irritability) helps identify *Dosha* involvement and *Agni* status.

4. General Symptoms: Systemic symptoms like fatigue, weight gain, or heat intolerance provide clues about *Agni* and *Dosha* imbalances.

5. Srotas Examination: Evaluating the *Artavavaha Srotas* for signs of obstruction (*Ama*), inflammation (*Pitta*), or irregularity (*Vata*).

Modern diagnostic tools, such as hormonal assays, ultrasound, or blood tests, can complement Ayurvedic assessment by identifying conditions like PCOS, fibroids, endometriosis, or thyroid dysfunction, which can be correlated with *Agni* imbalances. For example, elevated insulin levels in PCOS may align with *Manda Agni*, while hyperestrogenism in menorrhagia may reflect *Tikshna Agni*.^[10]

Conclusion

The effect of *Agni* on *Artava* is a cornerstone of Ayurvedic gynecology, reflecting the intricate connection between digestion, metabolism, and reproductive health. A balanced *Sama Agni* ensures the proper formation and regulation of *Artava*, supporting regular menstruation, fertility, and vitality. Imbalances in *Agni*—*Manda*, *Tikshna*, or *Vishama*—disrupt *Rasa Dhatu* and *Artavavaha Srotas*, leading to menstrual irregularities, infertility, and systemic symptoms. Through dietary interventions, herbal remedies, *Panchakarma*, lifestyle modifications, and seasonal regimens, Ayurveda offers a holistic framework for restoring *Agni* and nurturing *Artava*. By integrating these principles with modern medical insights, practitioners can provide comprehensive care for women's reproductive health. The timeless wisdom of Ayurveda, rooted in the dynamic interplay of *Agni* and *Artava*, continues to offer valuable solutions for promoting balance, vitality, and fertility in women.

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