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Physio-Pathological understanding of *Aartavavaha Srotas*

Dr. Ashwini Honagannavar,¹ Dr. Pratibha Kulkarni²

¹Post Graduate Scholar, ²Professor, Department of Kriya Sharira, Sri Dharmasthala Manjunatheshwar College of Ayurveda and Hospital, Hassan, Karnataka, INDIA.

ABSTRACT

In Ayurveda, the concept of *Srotas* has been propagated very specifically. *Srotas* have a significant role in maintenance of equilibrium of body elements. Among types of *Srotas*, *Aartavavaha Srotas* is given prime importance which is only present in females. *Aartavavaha Srotas* are the channels which carry *Aartava*. *Aartava* can be considered as *Bijarupia Aartava* and *Drusta Aartava* i.e. ovum and menstrual blood respectively. The root of *Aartavavaha Srotas* are *Garbhashaya* (Uterus) and *Artavavaha Dhamani* (vessels carrying *Artava*). *Garbhashaya* can be compare with uterus, that help for development of fetus. *Dhamani* can be compared with arteries i.e. ovarian arteries responsible for formation of *Aartava* (ovum) and Uterine arteries responsible for flow of *Aartava* (menstrual blood). Pathological changes occurs in the body due to *Sroto Dushti*, *Sroto Sanga* etc. so if any *Viddha* (injury) occurs to *Aartava Vaha Srotas* that leads to *Viddha Lakshana* i.e. *Vandhyatwa*, *Maithunaasahishnutaa*, *Aartava Naasha*.

Key words: *Aartava*, *Srotas*, *Aartavavaha Srotas*, *Viddha Lakshana*.

INTRODUCTION

Srotas (body channel) are the basic entities of the body, responsible for the *Vahana* (transferring) of *Dosha*, *Dhatu* etc.^[1] Body is considered as *Srotomaya* i.e. innumerable in number.^[2] *Srotas* are the pathway in the body in which physiology and pathology depends. *Srotas* which may carry the *Aartava* is called as *Aartavavaha Srotas*. *Rutu*, *Kshetra*, *Ambu*, *Beeja* are primary factors for the *Garbhotpadana*.^[3] *Beeja* refers to *Aartava*, it is an important entity in female reproductive age, which is responsible for the

formation of *Garbha*.^[4]

SROTAS

Srotas derived from sanskrit root "*Srugatau*". The *Srotas* are structures, which originate from its *Moolasthan* and it does the transportation of *Abhivahanasheela Dravyas*.^[5] *Srotas* attains the colour of the *Dhatu* in which they circulate and structural aspect of these are circular, big, small, long in nature.^[6] *Srotas* helps for mainly transformation and transportation of *Dhatu*.^[7]

Types:

Bahya : Male - 9, Female - 12

Abhyantara : 11 pairs (Sushruta), 13 (Charaka)

Karana and Lakshana

When women consume food, having equal quality of *Dosha* and opposite quality of *Dhatu* then it leads to *Srotopradushaka*, that produce *Srotodusti Lakshana* like *Atipravrutti*, *Sanga*, *Siragranti*, *Vimargagamana*.^[8]

Aartava

Shuddha Shonita (ovum) is *Aartava*, produced in *Rutukala* (proliferative stage).^[9] As how *Shukra* is

Address for correspondence:

Dr. Ashwini Honagannavar

Post Graduate Scholar, Department of Kriya Sharira, Sri Dharmasthala Manjunatheshwar College of Ayurveda and Hospital, Hassan, Karnataka, India.

E-mail: ashwinihngnvr@gmail.com

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formed in one month in the same way *Aartava* is formed.^[10] *Aartava* has similar properties like *Rakta*.^[11] It combines with *Shukra* and helps for the fertilization process as well as growth and development of the *Garbha*. *Aartava* is an entity of body, it flows out through the *Yoni*, by the action of *Vata*.^[12] It is having synonyms like *Shonita*, *Asrik*, *Maasikarava*, *Rutu* etc. Its *Pramana* (quantity) is four *Anjali*.^[13] *Aartava* is predominant of *Agni Mahabhuta*.^[14]

Qualities of Aartava

Normal *Aartava* flows without *Piccha* (sliminess), *Daha* (burning sensation), *Arti* (pain) i.e. normal *Aartava* which has equilibrium of *Dosha* will not have these three properties. It flows out 3 to 5 days, quantity is neither too excessive nor too less.^[15] *Aartava* appears like colour of *Gunjaphala*, *Padma Sannibha* (colour of the lotus petals, colour of insect *Indragopa*, colour of *Shashaasrak* (blood of rabbit), *Laksharasop* (colour of resin of laksha), *Yadvasonaviranjayet* (not stains to cloth).^{[16],[17]}

Srava Kaala

Different *Acharyas* coated different *Sravakaala* of *Aartava* as below;

| 3 days | 5 days | 7 days |
|---|--------------------|---------------------------|
| B . P. (Pu. Kh. Garbha 2/204), A. S. (Sā. 1/10); A. H. (Sā. 1/7 | Cha. Chi. (30/225) | H. S. (Sashthasthana 1/9) |

Aartava Dushti Lakshana

When *Aartava* gets *Vruddhi*, it produces symptoms like *Atipravrutti* (excessive flow of *Aarthava*), *Angamarda* (Body pain), *Daugandya* (Bad smell).^[18] When *Aarthava* gets *Kshaya* then it produces symptoms like *Yatochita Kaala Adarshana* (occurs at improper time), *Alpata* (less quantity), *Yonivedana* (vaginal pain).^[19]

Artavavaha Srotas

A channel which carry the *Aartava* is called as *Aartava Srotas*. It is having two *Moolasthana* i.e. *Garbhashaya*

(uterus) and *Aartavavaha Dhamani* (arteries).^[20] *Kshetra* is a consider as *Garbhashaya*.^[21] Union of *Shukra* and *Aartava* forms *Garbha*. *Garbhashaya* gives *Aashraya* to *Garbha*. There are 4 *Aartava Vaha Dhamani* present in females.^[22]

Aartava Vaha Sroto Viddha Lakshana

If any injury to *Aartavavaha Srotas* that leads to *Vandhyatwa*, *Maitunaasahishnuta*, *Aartava Nasha*.^[23]

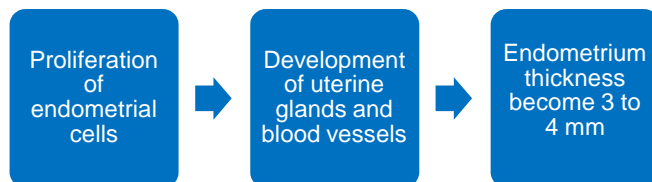
Physiology of female reproductive system

The main function of reproductive system is to ensure the continuation of species, transport of gametes, facilitate fertilization, regular menstruation and reproduction.

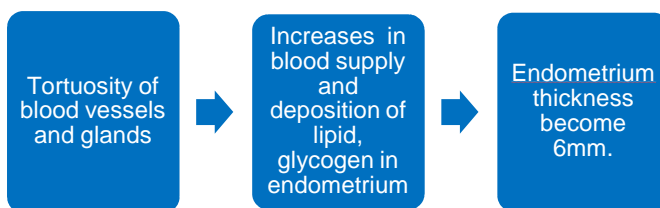
Uterus is mainly responsible for menstruation, implantation, gestation and also uterus has rapid growth and specialized contractile activity during pregnancy and parturition.

Role of uterus in Menstrual cycle

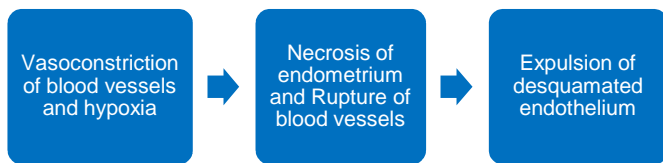
In proliferative phase (5th to 14th day): The secretions of uterine gland become very thin at the stage of ovulation to facilitate the entry of sperm.^[24]



In secretory phase (15th to 28th): Endometrium lining become thick and uterine gland secretions become thicker so the path of sperm is blocked, coitus at this stage is safe. In this stage preparation of uterus to receive the fertilized ovum.



In menstrual phase (0 to 5th Day): Due to sudden withdrawal of the estrogen and progesterone that leads to menstruation.^[25]



Role of uterus in pregnancy

Uterus is elastic in nature so it changes in its size. Uterus helps to implantation of blastocyte, holds baby and placenta, a liter of amniotic fluid. The uterus provides nourishment to fetus and helps to develop during gestation.

Arteries

The ovarian artery supplies blood to the ovary and uterus. The ovarian arteries swell during pregnancy, in order to increase the uterine blood supply.

Pathology

If any injury to reproductive organs leads to disease like Infertility, Dyspareunia, Dysmenorrhea etc.

Infertility

According to the world health organization (WHO), infertility can be described as the inability to become pregnant, maintain a pregnancy or carry a pregnancy to live birth. It affects an estimated 48 million women. Infertility is caused by many sources including nutrition, malformations of the uterus and also disorders of ovulation, tubal factors, uterine abnormalities and others.^[26] Previous surgeries are an important cause of tubal disease and damage. Pelvic or abdominal surgery can result in adhesions that alter the tubes in such a way that eggs cannot travel through them.^[27] So it may cause infertility.

Dyspareunia

It is recurrent or persistent pain during or after intercourse. It is due to medical or psychological causes and also vulvovaginal infections, atrophic changes of lower genital tract, painful episiotomy scars, PID, endometriosis, ovarian cysts, pelvic tumor.^[28] Dyspareunia is also caused by cancer of the reproductive tract, uterus or vagina surgery, episiotomy, forceps delivery.^[29] The pain can primarily

be on the external surface of the genitalia or deeper in the pelvis upon deep pressure against the cervix.^[30]

Dysmenorrhea

Menstrual cramps or painful menstruation of sufficient magnitude so as to incapacitate the woman in her day to day activities.^[31] Its usual onset occurs around the time that menstruation begins. Psychosomatic factors, abnormal anatomical and functional aspect of uterus, Hormonal imbalance and also Postsurgical adhesions caused by caesarian section, episiotomy are the cause of dysmenorrhea.^[32]

DISCUSSION

Bija / Aartava - Ovum

Beejarupia Aartava is released after twelve days. The *Beejarupia Aartava* (ovum) released from the ovary reaches the *Garbhashaya* (uterus) and unites with *Shukra* (sperm) forms the *Garbha* (fetus). So it can be taken as *Beejarupi Aartava* is ovum.

Aartava - Menstrual blood

Drusta Artava i.e. *Rajasrava*, which is accumulated in a month is drawn towards the vaginal orifice by *Vata* through the *Dhamani's* and this is called as *Drustaartava* (menstrual blood), which flows for 3 to 5 days. *Drustaartava* can be taken as menstrual blood.

Garbhashaya - Moolasthanana

For Ovum

The release of *Beejarupi Aartava* will be fruitful when it reaches the *Garbhashaya* and unites with *Shukra* and forms *Garbha*. *Garbhashaya* can be considered as uterus. Fertilization occurs in fallopian tube and that move towards the uterus and get implanted in layer of endometrium. Hence *Garbhashaya* is considered as one of the moola of *Artavavaha Srotas*.

For Menstrual blood

Garbhashaya gives shelter for accumulation of *Drustaartava* in a month. Regular discharge of blood and mucosal tissue (known as menses) from the inner lining of uterus through the vagina. Hence *Garbhashaya* is considered as one of the *Moola* of *Artavavaha Srotas*.

Aartavavaha Dhamani - Moolasthanana

There are 4 *Aartavavaha Dhamani* present in females. *Aartavavaha Dhamani* may be considered as arteries i.e. ovarian and uterine arteries.

For Ovum

Ovarian arteries responsible for formation of *Aartava* (ovum).

For Menstrual blood

Uterine arteries responsible for flow of *Aartava* (menstrual blood).

These arteries supplies the blood along with hormones (Estrogen, Progesteron, FSH, LH) and supplementation to endometrium layer of uterus. Arteries which supply more amount of blood during pregnancy for the formation of *Apara*. So by this *Aartavavaha Dhamani* consider as *Moola* of *Aartavavaha Srotas*.

Viddhalakshana**Vandhyatwa - Infertility**

If any injury to *Aartavavaha Srotas* that leads to *Vandhyatwa*. In modern it can be correlate with the injury to female reproductive organs that leads to infertility. Injury is an important cause of tubal disease and damage. Pelvic or abdominal surgery can result in adhesions that alter the tubes in such a way that ovum cannot travel through them, that may cause for infertility.

Maitunaashishnuta - Dyspareunia

Any injury to the *Aartavaha Srotas* that leads to vitiation of *Vata*, that cause the *Maitunaashishnuta*. It can be correlated with intolerance to coitus, difficulty in coitus or painful coitus (dyspareunia). It may be due injury, trauma or irritation to uterus and vagina by an accident, pelvic surgery, cut made during childbirth to enlarge the birth canal (episiotomy) that leads to dyspareunia.

Aartava Naasha - Dysmenorrhea

Injury to *Aartavavaha Srotas* leads to vitiation of *Vata*, that vitiated *Vata* causes the vitiation of *Kapha* so by these *Aavarana* of *Dosha* takes palce in *Aartavaha*

Srotas which leads to *Aartavanasha*. It can be corelate with the injury to ovary, ovarian arteries and uterus, uterine arteries and fallopian tubes that leads to dysmenorrhea.

CONCLUSION

Aartava can be taken as *Bijarupia Aartava* and *Drustaartava* i.e. ovum and menstrual blood respectively. *Moola* of *Aartavavaha Srotas* can be considered as *Garbhashaya* and *Aartavavaha Dhamani*. *Garbhashaya* can be compare with uterus, that help for development of fetus. *Dhamani* can be compare with arteries. Ovarian arteries are responsible for formation of *Aartava* (ovum). Uterine arteries are responsible for flow of *Aartava* (menstrual blood). *Vandhyatva* is caused by injury to the *Aartavavaha Srotas* and its relevance is seen in relation to the tubal diseases and its damage, leads to infertility. *Maithuna Asahishnuta* can be correlated with Injury, trauma or irritation to the uterus and vagina due to an accident, pelvic surgery or cut made during childbirth to enlarge the birth canal. *Aartavanaasha* can be understood with, the injury to ovary and ovarian arteries, uterus and uterine arteries.

REFERENCES

1. Y.T Aacharya, Charaka, Dipika Commentary, Charaka Samhita, Vimanasthana, chapter 5, Verse 3, Ed reprint 2013; Chaukamba Prakashana, Varanasi.
2. Y.T Aacharya, Charaka, Dipika Commentary, Charaka Samhita, Vimanasthana, Chapter 5, Verse 3, Ed reprint 2013; Chaukamba Prakashana, Varanasi.
3. Susrutha, Susrutha Samhita; commentary by Dalhanacharya, Edited by Vaidya Jadavaji Trikarmji Acharya; Sharirasthana, chapter 2, verse 33, Chaukhabha Sanskrit Samsthana, Varanasi, Reprint 2010,p348.
4. K.R Srikantamurthy, Sushruta Samhita; Vol 1, Sutrashtana, chapter 15, verse 5, Ed reprint 2010, Chaukamba Orientalia Varanasi:p99.
5. Y.T Aacharya, Charaka, Dipika Commentary, Charaka Samhita, Sharirasthana, chapter 9, verse 13, Ed reprint 2013; Chaukamba Prakashana, Varanasi.
6. Y.T Aacharya, Charaka, Dipika Commentary, Charaka Samhita, Vimanasthana, chapter 5, verse 25, Ed reprint 2013; Chaukamba Prakashana, Varanasi.

7. Y.T Acharya, Charaka, Dipika Commentary, Charaka Samhita, Vimanasthana, chapter 5, verse 3, Ed reprint 2013; Chaukamba Prakashana, Varanasi.
8. Y.T Acharya, Charaka, Dipika Commentary, Charaka Samhita, Vimanasthana, chapter 5,verse 24,Ed reprint 2013; Chaukamba Prakashana, Varanasi.
9. Susrutha, Susrutha Samhita; commentary by dalhanacharya, Edited by Vaidya Jadavaji Triakarmji Acharya; Sharirasthana, chapter 2, verse 48, Chaukhabha Sanskrit Samsthana Varanasi, Reprint 2010:p349.
10. Susrutha, Susrutha Samhita; commentary by dalhanacharya, Edited by Vaidya Jadavaji Triakarmji Acharya; Sutrasthana, chapter 14, verse 14, Chaukhambha Sanskrit Samsthana, Varanasi, Reprint 2010.
11. K.R srikantamurthy, Sushruta Samhita; vol 1, sutrasthana, chapter 15, verse5, Ed reprint 2010,chaukamba orientalia varanasi:p149.
12. K.R srikantamurthy, Sushruta Samhita; vol 1, Sharirasthana, chapter 3, verse10, Ed reprint 2010,chaukamba orientalia varanasi:p37.
13. Susrutha, Sushruta Samhita; commentary by dalhanacharya, Edited by Vaidya Jadavaji Triakarmji Acharya; Sharirasthana, chapter 3,verse 3, Chaukhambha Sanskrit Samsthana, Varanasi , Reprint 2010:p350.
14. Susrutha, Sushruta Samhita; commentary by dalhanacharya, Edited by Vaidya Jadavaji Triakarmji Acharya; Sharirasthana, chapter 3,verse 5, Chaukhambha Sanskrit Samsthana, Varanasi , Reprint 2010:p351.
15. Y.T Acharya, Charaka, Dipika commentary, Charaka Samhita, Chikisthasthana, chapter 30, verse 225, Ed reprint 2013; Chaukamba Prakashana, Varanasi:p643
16. Y.T Acharya, Charaka, Dipika commentary,Charaka Samhita, Chikisthasthana, chapter 30, verse 226, Ed reprint 2013; Chaukamba Prakashana, Varanasi:p643
17. K.R Srikantamurthy, Sushruta Samhita; vol 1, Sharirasthana, chapter 2, verse 17, Ed reprint 2010, Chaukamba Orientalia, Varanasi:p21.
18. K.R Srikantamurthy, Sushruta Samhita; vol 1, Sutrasthana, chapter 15, verse 12, Ed reprint 2010, Chaukhamba Orientalia, Varanasi.
19. K.R Srikantamurthy, Sushruta Samhita; vol 1, Sutrasthana, chapter 15, verse 16, Ed reprint 2010, Chaukamba Orientalia, Varanasi.
20. K.R Srikantamurthy, Sushruta Samhita; vol 1, Sharirasthana, chapter 9, verse 12, Ed reprint 2010, Chaukhamba Orientalia, Varanasi:p21.
21. Susrutha, Sushruta Samhita; commentary by dalhanacharya, Edited by Vaidya Jadavaji Triakarmji Acharya; Sharirasthana, chapter 2, verse 33, Chaukhambha Sanskrit Samsthana, Varanasi, Reprint 2010:p348.
22. Tiwari Premavati, Ayurvedia Prasuti Tantra evam Striroga, vol 1st, chapter 1, Ed 2nd 1999, Chaukamba Orientalia, Varanasi;p15
23. K.R Srikantamurthy, Sushruta Samhita; vol 1, Sharirasthana, chapter 9, verse 12, Ed reprint 2010, Chaukhamba Orientalia:p21.
24. K. Shembulingam, Prema Shembuligam, Essentials of Medical Physiology; 5th edition, chapter 80, Jaypee Brothers Medical Publishers (p) Ltd 2010:p467
25. K. Shembulingam, Prema Shembuligam, Essentials of Medical Physiology; 5th edition, chapter 80, Jaypee Brothers Medical Publishers (p) Ltd 2010:p466
26. https://en.wikipedia.org/wiki/Female_infertility
27. <https://web.stanford.edu/class/siw198q/websites/reprotecth/New%20Ways%20of%20Making%20Babies/Causefem.html>
28. Sabaratnam Arulkumaran et.al, Essentials of Gynecology, 1stedition, reprint 2006, Jaypee Brothers Medical Publishers (p) Ltd;p143
29. <https://en.wikipedia.org/wiki/Dyspareunia>
30. <https://en.wikipedia.org/wiki/Dyspareunia>
31. <https://en.wikipedia.org/wiki/Dysmenorrhea>
32. Tolu Oyelowo DC, in Mosby's Guide to Women's Health, 2007

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