

SHORT COMMUNICATION

A Cross-Sectional Study of Jihwa Pariksha (Tongue Examination) in Artavadusti Vikara with Special Reference to Menstrual Disorders

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ABSTRACT

According to Acharya Sushruta, the Artavavaha srotas, or the channels responsible for menstruation, have two main roots: Garbhashaya (the uterus) and Artavavaahi Dhamani (the channels related to menstruation).¹ Within the spectrum of Artavadusti Vikara, several conditions affecting menstruation are identified. These include Anartava, which denotes the absence of menstruation altogether, Artavakshaya, characterized by decreased menstruation occurring at improper times (Yatochita Kaala Adarshana), and Kastartava, referring to painful menstruation. In the context of diagnosing and understanding Artavadusti vikara patients, Jihwa Pariksha, or the examination of the tongue, becomes a valuable diagnostic tool. This examination focuses on observing various features of the tongue, including its color, coating, presence of fissures, texture, and movements. By assessing these characteristics, practitioners can gain insights into the patient's overall health, including potential imbalances in the artavavaha srotas and their associated conditions. To conduct Jihwa Pariksha in patients of Artavadusti Vikara (Menstrual Disorders). To study changes in Jihwa manifested in patients of Artavadusti Vikara (Menstrual Disorders). Jihwa of 43 patients of Artavadusti Vikara (Menstrual Disorders) are observed for colour, coating, fissures, texture and movements. The patients are selected having Anartava, Artavakshaya, Kastartava. From this study it can be said that, the Artavadusti Vikaras have significant relation with Changes in Jihwa, the study found that 90.69% of participants exhibited coating, 81.39% had fissures on the tongue, and 62.79% displayed a mild rough texture upon touch.

KEYWORDS: Jihwa, Artavadusti Vikara, Menstrual Disorders, Tongue examination, Ashtavidha Pariksha.

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INTRODUCTION

Acharya Charaka emphasized the importance of Rogi Pariksha, stating that patients should be examined before any treatment, and the physician's work begins afterwards. Ashtavidha Pariksha, an eightfold examination in Ayurveda, mentioned by Acharya Yog-Ratnakara, is crucial for identifying various disease causes [2]. Ashtavidha pariksha includes Nadi (Pulse), Mootra (Urine), Malam (Fecal matter), Jihwa (Tongue), Shabdham (Voice of patients), Sparsham (Touch), Druk (Eyes & Vision), and Akriti (General body build). Among these, Jihwa Pariksha holds significance in Rogi Pariksha. Ayurveda views the tongue as a body map, where each feature reflects an aspect of the constitution or imbalance. The tongue mirrors the internal functioning of the system, with its coating color serving as a tool to understand the predominant imbalance in the body [3]. The passage of Artavavaha Strotasa, or orifices of channels carrying Artava, is obstructed by aggravated Doshas, thus Artava is not evident, leading to Anartava. Though Artava is not discharged monthly, it is not finished completely due to obstruction of Artavavaha Strotasa by Doshas. Vata and Kapha are referred to as the Doshas here. The clinical features of Anartava are resemble with Amenorrhea [4]. Artavakshaya (Scanty Menses): When Artava gets Kshaya, it produces symptoms like Yatochita Kaala Adarshana (occurs at an improper time), Alpata (less quantity), and Yonivedana (vaginal

pain) [5]. Kashtartava, also referred to as Krichrartava, denotes painful menstruation. While not explicitly labeled as a disorder, it serves as a symptom for certain Yonivyapadas and Artavavyapadas. In modern gynecology, this condition is known as dysmenorrhea [6].

NEED OF STUDY

Menstrual disorders affect a significant portion of the female population, impacting their quality of life and reproductive health. Identifying specific tongue characteristics associated with these disorders can provide valuable insights for clinicians in their diagnostic process. Tongue examination is an easy and indispensable part to know Sama, Nirama, and Vriddhi, Kshaya Awastha of Dosha, finally in the diagnosis of disease. It reflects the overall digestive, nutritive, and metabolic conditions of the body, reflecting what is happening inside. Though it's one of the important examination tools mentioned in Ayurveda, it's not backed by documented scientific research. However, for the diagnosis of diseases like ARTAVADUSTI VIKARA, tongue examination can be a very useful diagnostic tool. In this study, an effort will be made to analyze the changes in Jihwa due to ARTAVADUSTI VIKARA, and this work will be a unique contribution in Ayurveda.

To study Jihwa Pariksha in patients of Artavadusti Vikara (Menstrual Disorders) and conduct and analyse changes in Jihwa manifested in patients of Anartava, Artava Kshaya and Kastartava.

MATERIAL AND METHODS

SOURCES OF DATA: -

(a) Literary source:

- All available literature on Artavavaha Srotas and Jihwa Pariksha.
- All Bhrihatrayi, Laghutrayi and other available Ayurveda texts.
- Modern books.
- Reviewed research articles, papers and journals.
- Authenticated internet sources.

(b) Clinical source:

- Patients were taken from OPD & IPD from Parul Ayurved Hospital, Parul Sevashram Hospital, Khemdas Ayurved Hospital, Waghodia, Vadodara, Gujarat.

Type of Study: Observational study.

Details of Clinical Study: An observational trial on 43 diagnosed patients of Artavadusti Vikara (Menstrual Disorders) was conducted for a research study.

Data Collection: Separate case paper Performa had been prepared and observations were noted.

Study duration: 18 Months

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Inclusion Criteria:

- 1) Patients between the age of 18 to 60 years have been included.
- 2) Selection of patients was done irrespective socioeconomic status.
- 3) Patients suffering from Artavadusti Vikara (Menstrual Disorders) as a Anartava, ArtavaKshaya and Kastartava.

Exclusion criteria:

- 1) Patient with local tongue infection and congenital anomalies will be excluded.
- 2) Patients having major ailments of other systems. E.g., AIDS, carcinoma of any organs, pregnancy, Hepatitis B, Hepatitis C, Tuberculosis at the time of enrolling the patient.
- 3) Pregnant women and lactating women were excluded.

Diagnostic Criteria

The symptoms caused by the vitiation of Artavavaha Srotas are,

- Yathochit Kalat Adarshanam (amenorrhea)
- Artava Alpata (Scanty Menses)
- Yoni Vedana (Pelvic pain)
- Artava Atipravritti (Menorrhagia)
- Daurgandhya (offensive smell)
- Vandhyatva (Infertility)
- Maithuna Asahishnutva (Dyspareunia)
- Artavanash (Pathological menopause)

The diseases caused by the vitiation of Artavavaha Srotas are.

- Anartava
- ArtavaKshaya
- Kastartava

METHODOLOGY:

43 pre-diagnosed patients of Artavadushti Vikaaras (Artava Kshaya, Anartava, Kastartava) was taken according to inclusion criteria from OPD and IPD of Parul Ayurved Hospital, Parul Sevashram hospital and Khemdas Ayurved Hospital.

Study design:

- Detailed history taken with specially designed case proforma along with physical examination was carried out.
- Patient with lakshanas of Artavadushti Vikaras was selected as per inclusion criteria and tongue photograph was taken as per protocol.

RESULTS AND DISCUSSION

Dhatu Involved

As this study is on Artavavaha Srotodusti Vikaras so there was involvement of Raja, Rasa Dhatu, and Rakta Dhatu. Raja or Artava Dushti may be result of Rasa and Rakta Dhatu Dushti. Because according to Acharya Charaka Raja is Upadhatu of Rasa Dhatu and According to Acharya Sharangdhara Raja is Upadhatu of Rakta Dhatu [7]. Whenever there is Dushti of Rasa Dhatu, it will be depicted on the Jihwa. As a result of Nidana Sevana, Agni Dushti occurs, culminating in Amarostpatti and Amadosotpatti. Further vitiation of Ama Rasa Dhatu occurs as a result of the Dosha Dushti, resulting in Vidagdha Kapha Utpatti (since Rasa and Kapha are tied to Ashraya - Ashrayi Bhava). As Jihwa is supplied by two Rasavaha Sira (Su. Sa. 7/25) [13]. So, Jihwa is supplied by this vitiated Rasa and Vidagdha Kapha. This Vidagdha Kapha causes the Vitiation of Sthanik Kapha (A. Hu. Su 12/3) as Jihwa is the seat of Kapha and thus performs Jihwa Upalepana [8, 14].

Dosha Predominance:

Vyadhis cannot be produced without Doshas which is mentioned all over in the classics by many Acharayas. This indicates the Nitya Sambandha between Dosha and Vyadhi which means Doshas are the Samavayi Karana [9]. In this study it was found that in most of the patients there was predominance of Tridosha followed by Vata Kapha Predominance and then Vata Pitta predominance. When there is Vata and Pitta vitiation it leads to Agnivaishamya, and when Kapha is vitiated, it leads to Agnimandhy, consequently there is formation of Aam which cause Rasavaha Srotodushti then ultimately leads to Artavavaha Srotodushti. As already mentioned, that if there is vitiation of Vata it will affect the Jihwa via. Rasavahi Sira and Jihwa will be Sheeta (Cold), Khara (Rough) and Sphutita (Fissured) and like the leaf of Vastuka (Chenopodium murale) i.e dry and rough and if by Kapha it is Lipta (Coated) and Atipichhila (Excessively greasy) and Shweta (White in colour) [10]. That is the reason in this study most of the patients were found with Lipta Jihwa and some with both Liptata and Sphuttita character and some with only Sphuttita Jihwa.

Changes on Jihwa in Artavakshaya:

In this study 26 patient were found of Artavakshaya. Acharya Sushruta has clearly mentioned that, Vata Dosha and Kapha Dosha both are responsible for the Artavakshaya. Vitiation of Artavavaha Srotas occurs by Srotorodh which may result of Vata and Kapha Dosha. - It was found that out of total 26 patients of Artavakshaya, all patients were found with coating on Jihwa. Artava is Upadhatu of Rasa according to Acharya Charaka. So, Artavadushti can be result of Rasa Dushti. Kapha is the Kitta Bhaga of Rasa Dhatu, so whenever there is Rasa Dushti, there will be formation of increased amount of Kitta Bhaga that is Kapha which results in Lipta Jihwa. - It was found that out of total patients of Artavakshaya 19 patients were found with fissure on tongue and 14 patients were found with mild rough surface on touch. Due to Nidan sevan When Rasa is afflicted with Vata it will affect the Jihwa as Jihwa is supplied by two Rasavahi Sira and which is represented on the tongue and it can affect the Sthanik Dhatu of the tongue and which leads to the formation of fissure on the tongue [11]. Aggravated Vata Dosha causes Rookshata in the body this Rooksha Guna dries up the moisture of the Jihwa and found mild rough surface on touch.

Changes on Jihwa in Anartava:

In this study, five patients were found of Anartava. The Acharyas have mentioned that the doshas responsible for the obstruction of the passage of Artavavaha Strotasa are Vata and Kapha, which lead to coating over the jihwa and fissure [12]. Among the five patients, four presents with patchy coating and one with thin coating. Two patients exhibit 1-3 fissures, while two others show 4-10 fissures due to vitiation of Vata dosa. Additionally, in four patients, a mild rough surface of the tongue on touch is observed.

Table 1: Diagnosis during Tongue Examination in Artavadusti Vikara

Diagnosis	Frequency	%
Anartava	5	11.6%
Artava kshaya	26	60.5%
Kartartava	12	27.9%

Table2: Distribution Based on changes in Jihwa in Anartava (Amenorrhoea)

S. N.	Changes on Jihwa		N=5	
			f	%
1	Colour on Jihwa	Normal	5	100.0
2	Coating on Jihwa	Patchy coating	4	80.0
		Thin coating	1	20.0
3	Fissure on Jihwa	No fissure on tongue	1	20.0
		Ranging from 1-3 in numbers	2	40.0
		Ranging from 4-10 in numbers	2	40.0
4	Texture on Jihwa	Normal surface of tongue on touch	1	20.0
		Mild rough surface of tongue on touch	4	80.0
5	Movement on Jihwa	Normal Movement of tongue	3	60.0
		Tongue movement slightly restricted but does not affect the normal function.	2	40.0

Table3: Distribution Based on changes in Jihwa in Artavakshaya (Scanty Menses)

S. N.	Changes on Jihwa		N=26	
			f	%
1	Colour on Jihwa	Normal	20	76.9
		Abnormal	6	23.1
2	Coating on Jihwa	Patchy coating	12	46.2
		Thin coating	14	53.8
3	Fissure on Jihwa	No fissure on tongue	7	26.9
		Ranging from 1-3 in numbers	11	42.3
		Ranging from 4-10 in numbers	8	30.8
4	Texture on Jihwa	Normal surface of tongue on touch	12	46.2
		Mild rough surface of tongue on touch	14	53.8
5	Movement on Jihwa	Normal Movement of tongue	22	84.6
		Tongue movement slightly restricted but does not affect the normal function.	4	15.4

Table 4: Distribution Based On changes in Jihwa in Kashtartava (Dysmenorrhea)

S. N.	Changes on Jihwa		N=12	
			f	%
1	Colour on Jihwa	Normal	12	100.0
2	Coating on Jihwa	No coating	2	16.7
		Patchy coating	6	50.0
		Thin coating	4	33.3
3	Fissure on Jihwa	Ranging from 1-3 in numbers	6	50.0
		Ranging from 4-10 in numbers	6	50.0
4	Texture on Jihwa	Normal surface of tongue on touch	13	59.1
		Mild rough surface of tongue on touch	9	36.0
5	Movement on Jihwa	Normal Movement of tongue	20	90.9
		Tongue movement slightly restricted but does not affect the normal function.	2	9.1

Changes on Jihwa in Kastartava:

In this study 12 patients were found with kastartava patients, with 4 exhibiting a thin coating, 6 having 1-3 fissures, and another 6 showing 4-10 fissures. Moreover, 9 displayed a rough tongue surface upon touch.

CONCLUSION

From this study, it can be concluded that there is a significant relationship between Artavadusti Vikaras and changes in the Jihwa, both clinically and statistically. The presence of coating, fissure, and texture

alterations on the Jihwa indicates a correlation with Artavadusti Vikaras. The coating on the Jihwa, attributed to the generation of Mala Rupa Kapha due to Ama Rasa Dhatu or Rasavaha Srotodushti, along with Vata affliction, which may lead to fissures, supports this assertion. Vata Dosha's Rookshata quality contributes to the drying of Jihwa moisture, resulting in a mild rough surface. The study found that 90.69% of participants exhibited coating, 81.39% had fissures on the tongue, and 62.79% displayed a mild rough texture upon touch. These findings underscore the significance of evaluating Jihwa changes in diagnosing and understanding Artavadusti Vikaras.

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