

Ayurvedic Approaches to Women's Health

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Ayurveda means "systematic knowledge of life, or the process of creation." Treating specific cases requires that one understand universal and underlying principles of the life process. To be more concrete, by Vedic times the ancient Yogis had developed a concept similar to Einstein's about the interchangeability of energy and matter. They conceptualized energy as having the potential to manifest in five states of matter: solid, liquid, luminous or combusive, gaseous, and pure space devoid of matter. In living systems, solid and liquid act similarly to create structure and are referred to as kapha; luminous/thermal (and in some schools of Ayurveda, luminous + liquid) creates the potential for metabolic activity and is called pitta; and vata, or the gaseous/space factor allows for movement, and thus communication, perception, and cognition. These three factors are called doshas (lit. "fault") and the primary principle upon which Ayurvedic diagnosis and treatment is based is thus called tridosha.

Living beings are biologically coded genetically, and their basic identity in terms of the balance of the three doshas as well as the temperament of the noncorporeal being who will enter the developing fetus, form what is called prakriti, or innate nature, which is established at the time of conception. As the organism grows, this basic identity is physiologically maintained by processes which are homeostatic, immunologic, behavioral, etc. But the problem

is that the physical universe, including the body-mind complex of the developing being, is continually in a state of flux. This process of change, while providing an impetus for mental and spiritual growth, also continually threatens the innate balance of doshas necessary for the health and well being of the individual life form.

CYCLES OF CHANGE AND THE FEMALE PREDICAMENT

Vikriti, an imbalanced ratio of the doshas relative to the individual's prakriti, is what is actually treated in Ayurveda, and it is assessed by examining the patient, including reading the doshas in the pulse, and by extensively questioning the person about symptoms and past history. For example, an excess of pitta is indicated by a cluster of some of the following symptoms: excessive heat, inflammation, or acidity in the body, increased perspiration, malodorous quality of body secretions, violent or competitive dreams, body secretions more reddish, yellowish, or greenish than normal, skin more reddish or yellowish than normal, perhaps with rashes or acne, behavior more competitive, aggressive, and compulsive than usual, emotions of anger, irritability, or frustration, a medical history of stress-related diseases. If vata is the main culprit, chilliness, dryness, constipation, gaseous bloating, insomnia, weight loss, fidgeting, inner trembling or heart palpitations, nervousness,

spaciness, difficulty concentrating, exhaustion, anxiety, insecurity, or a history of skeletal or nervous system disorders may be evident. If kapha is responsible, the body will feel heavy and cold, lethargic, and may exhibit excess weight, excess mucous, or water retention. Accumulations of abnormal tissue, and emotional patterns of denial, clinical depression, and weeping can present. If excesses of more than one dosha are present, combinations of the above symptom clusters will appear.

Those changes which have more universal and predictable causes, such as the cycling of the doshas through the day, the year, and the life-span are described and accounted for in Ayurvedic diagnosis and treatment. The Ayurvedic understanding of the cycle of doshas through the life-span is particularly important to issues of women's health. From the development of the fetus in utero through young adulthood, the time of normal body growth, kapha dominates. Pitta begins its first dramatic increase at adolescence and comes to dominate the body process usually no later than the early thirties. It is highest in the middle years, when, driven by pitta emotions, people typically are concerned with career advances, and risk is high for many pitta disorders such as high blood pressure, non-congestive heart disease, ulcers, hyperthyroid, etc. It is also a high-risk time for many female disorders. Vata begins to exert considerable influence during the sixties, and by the seventies it

is the dominant dosha, creating the patterns of dryness of tissues and decreased bone density associated with the aging process. This transition from the pitta to vata stages of life, while relatively more smooth in men, becomes, in women, the sometimes cataclysmic process of menopause.

Why? Because women have, in addition to the reproductive complexity necessary to carry and nurse a child, an additional cycling of the doshas every month throughout the reproductively fertile period of their lives. It is this additional cycle, from the perspective of Ayurveda, which renders women more medically complex entities than men. Each month, with the ending of menstrual bleeding, women may experience a temporary feeling of depletion, due to the elimination of pitta (through the heat and rakta, or red blood cells) and kapha (through the serum, or rasa, part of the blood) which has just occurred in the process of menstruation. Some Ayurvedists also explain that some amount of ojas, or vital energy, is lost in menstruation, not only because ojas, once formed, is pervasive throughout all the body tissues, but also, because of the relationship of menstruation and oogenesis. Artava in females is considered by some as equivalent to shukra dhatu in males as the precursor tissue for the formation of ojas. This brief period of depletion is, however, followed quickly by a phase of kapha increase as the endometrium is built up again. The influence of kapha persists until a few days before ovulation, when vata, the kinetic factor, becomes active in order to propel the egg through the fallopian tubes into the uterus. If fertilization does not occur, the dominance of vata at ovulation gradually gives way to pitta in the premenstrual days and during menstruation. Since doshas are bioenergies, which manifest both emotionally and physiologically, the effects of their rapid cycling, approximately every 28 days, forms the basis for a great many of the health issues which women encounter during the 35 to 40 years of their reproductive lives.

Although any individual, regardless of constitutional type, can be provoked in

any dosha, and it is the vikriti, the imbalanced ratio of doshas which we treat in Ayurveda, still these cyclical imbalances operate within a specific individual constitutional background which must be taken into account in formulating individual treatment plans. Because of the stabilizing quality of kapha, increases and fluctuations of the doshas are weathered better by women in whom kapha naturally dominates. Other than occasional water retention or sluggishness, which can be dealt with easily enough through appropriate exercise during the life-span and the monthly cycle, and a propensity to vaginal yeast infections and benign tumors, kapha women often experience little difficulty with either menopause or the menstrual cycle. Metabolic stimulators, such as arogyavardini, chitrak, and trikatu, and substances which open channels and remove excess tissues, such as trifala and various guggulu preparations can be used as needed.

Vata dominant women, on the other hand, have little internal insulation, either physically or emotionally, to buffer them against physiological storms, and must make efforts and time in their lives for meditation, relaxation, and the company of supportive friends and family. Vata women often need a diet of anti-vata foods and herbs (e.g., brahmi, vidari, bala, ashwagandha, etc.), as well as frequent oleation to decrease vata and promote relaxation. Apana prana, often weak in vata-dominant individuals, can also be strengthened through vasti (oil and herbal enemas) and Yoga practices such as ashvini mudra. Dashmula, the ten-roots formula for apana pran disorders, used as both tea and douche, is particularly useful as a general treatment. Greater efforts toward rejuvenation in postmenopausal years are essential for vata-dominant women, because the drying and emaciating effects of vata, such as those seen in osteoporosis and loss of skin tone, can affect them more severely.

But it is women who are dominant or provoked in pitta who usually experience the most extreme symptoms of cyclic changes, whether it be menopausal or menstrual, and who run the greatest risk of morning sickness and miscarriage dur-

ing pregnancy. The greatest need for herbal intervention in cyclical disorders usually occurs in these cases. Perhaps it is for this reason that so many of the female-specific Ayurvedic herbs are either tridosha or anti-pitta in their effects.

One of these, shatavari (*Asparagus racemose*), is possibly the most widely used Ayurvedic herb for maintaining women's health. It is a pitta-decreasing, kapha-increasing rejuvenative which also specifically acts on rasa and artava dhatus. It is indicated in PMS, excessive menstrual bleeding, and is routinely given to menopausal and postmenopausal women in order to maintain quality kapha and ojas, playing much the same role as HRT in allopathic medicine. Administered during pregnancy, it ameliorates morning sickness, promotes milk development, and nourishes the developing fetus. It is diuretic and heavy to digest, and is contraindicated when ama is present. Ashoka (*Sarika indica*) is said to generally treat a great many disorders of the female reproductive tract, and is indicated in the treatment of all types of abnormal vaginal discharge and irritation. Energetically, it increases vata and decreases pitta. Women in India often buy an over the counter product called ashokarist, a herbal ferment whose main ingredient is ashoka. Nag Keshar (*Mesua ferrea*, Linn) is an astringent substance which is said to stop development of further problems in the genital organs as well as being effective in stopping excess bleeding. Padma, lotus root, (*Nelumbo nucifera*, Nymphaeaceae) is astringent, sweet and cooling. It is often given to control excess sexual desire, excess bleeding, leukorrhea, menorrhagia, and as treatment in some venereal diseases. Dashmula is a tridosha mixture of "ten roots" and is a combination of "five small roots:" shalparni, prishnipari, kantakari, brihati, gokshura, and the "five large roots:" bael, goubhari, patala, shyonaka, and agnimantha. Its action is specifically on apana prana. Dashmula decoction can be used in vasti (enema), for the treatment of premenstrual cramps, and as a tea to be taken by new mothers for the first 21 days after giving birth. Since several of these herbs are diuretic, a little

nutmeg or shankapushpi can be added to the formula where needed to prevent dehydration.

CAUSES AND GENERAL TREATMENT THEORY FOR GYNECOLOGICAL ILLNESSES

Illness, whether its initial cause is internal (ignoring our inner wisdom, association with sensory world in unhealthy ways, or *samskara*) or external (infectious organisms, change in seasons or adverse weather conditions, poor diet or inadequate living conditions, injuries or traumas), often takes root in the physical body through one of three avenues: through disorders of *agni* (digestive capacity), through blockage of *srotas* (the physical channels through which substances move), or through imbalance of the *doshas*. *Doshic* provocation usually begins in the major seats of the *doshas* in the gastrointestinal tract, and, if its energetics are not reversed, it develops through a series of stages called *kriya kala* until a disease with identifiable symptomatology emerges somewhere in the body. All of these three factors are important to an Ayurvedic understanding of gynecological disorders.

Ama, or digestive disturbance, is regarded in Ayurvedic medicine as the ultimate cause of an enormous number of ailments, including various cancers and other autoimmune disorders. It is the task of the *agni*, or digestive fire, to separate in the gastrointestinal tract what should be absorbed from what should be excreted. When digestion is poor this process becomes confused; nutrients are excreted and toxins are absorbed into the body's tissues, thus weakening the body, confusing the immune system, and lowering vitality. Even healthy menstruation has a detrimental component, in that some amount of *ojas*, or vital energy, is lost during bleeding. But in healthy women, this disadvantage is offset by the beneficial effects of menstruation. Menstruation is regarded in Ayurveda as a special opportunity enjoyed by women for monthly cleansing of excess *doshas*; it is this monthly cleansing which accounts for female longevity. *Pancha*

karma treatments, and often herbal treatments as well, are suspended during this time so that the woman's body can concentrate only upon its natural *rakta moksha*.

However, when *ama* is present in the system, menstruation can become toxic, and the smoothness of the entire monthly cycle can be disrupted. *Sushruta*¹ describes unhealthy menstrual blood as being thick and clotted, yellowish, malodorous, or excessive. Treatment is to remove the digestive and systemic *ama* as well as using herbs like turmeric which specifically act to cleanse the *rakta dhatu*. In cases of vaginal infection, both internal, anti-infective *dosha*-specific herbal formulas and *uttar vasti*, medicinal douches,^{1,3} can be used. This is even more important than it might initially appear; both *Sushruta*¹ and *Bagvat*² imply that if the menstrual blood flow is unhealthy, it will be difficult to conceive and carry a healthy, vital child.

A second major cause of common gynecological complaints is blockage of *srotas*, or channels of the physical body. Theoretically, excess *doshas* are not a problem if they can escape from the body. However, where the body's normal pathways of transport or elimination are blocked, the *doshas* and their corresponding physical substances accumulate in inappropriate places. The *doshas* will seek to escape the body through inappropriate channels, or will be blocked altogether and cause pain, infection, or abnormal growths. Fibroid tumors, ovarian cysts, and fibrocystic breast disease, as well as some types of infertility are examples of diseases which arise due to blockage of *srotases*. In such cases, various of the *purva-* or *pancha-karmas*, or Ayurvedic cleansing practices, may be indicated, as well as inclusion of various herbs which act to open blocked channels, liquefy mucous, decrease inflammation, or remove excess benign tissues, such as *guggulu* preparations, *myrrh*, *trifala*, *amla*, castor oil, honey, turmeric, licorice root, *mahasudarshan*, etc. Moderate daily exercise and *yoga asanas*, as well as the avoidance of heavy or sticky foods, such as meat, yogurt, and fried foods are also important.

Occasionally, women with excess menstrual bleeding also have chronic constipation; the body's excess *pitta*, which should be eliminated through the gastrointestinal tract, seeks an alternate route through the reproductive tract. In such situations, the proper treatment response is to open the digestive *srotas* by treating daily, except during menstruation, with medicines having laxative properties such as *trifala*, *ishapgol*, or laxative oils, and in some cases, herbs which stimulate *agni* in the gastrointestinal tract without provoking *pitta* elsewhere, such as *pippali*. If still needed, astringent and anti-*pitta* herbs such as turmeric and lotus root can also be used. The opposite situation occurs in women who have severe pain accompanied by diarrhea during the first few days of menstruation. The presence of diarrhea with menstrual cramping indicates that the *pitta* cannot exit easily from the uterus, and thus is seeking the alternate route of the gastrointestinal tract. In this case, inflammation caused by excess *pitta* is usually the problem, and a small ice pack on the abdomen over the area of the uterus and one over the lower back can do much to quickly relieve pain. Anti-inflammatory, anti-*pitta* herbs such as turmeric, *shatavari*, and sandalwood can also be effective, and *brahmi*, *jatamansi*, or various of the *angelicas* can be used as relaxants.

Directly related to the problem of blockage of *srotases* in the treatment of gynecological disorders is the relative strength or weakness of what is variously referred to as *apana prana*, *apana vayu*, or *apana vata*, complications of which are discussed in depth by *Lonsdorf*, *Butler*, and *Brown*.⁴ *Apana prana*, a subsidiary seat of *vata dosha*, functions below the naval. It is the downward-moving energy which carries out of the body the newborn infant as well as the substances of feces, urine, and menstrual blood. When *apana* is weak, as it often is in *vata*-dominant individuals, childbirth can be difficult, and proper elimination of toxins during menstruation becomes problematic. Toxins either become stuck, or they tend to rise upward instead of going down. A variety of gynecological dis-

orders, such as premenstrual cramps which are relieved by the onset of bleeding, vomiting or headaches during menstruation, and endometriosis, when tissue which should be propelled downward instead moves up, can occur. One of the simplest and most effective methods is daily practice (except during the first three days of menstruation) of the yoga technique ashvini mudra, as well as various yoga asanas, such as forward bends, which put pressure on the colon area, the primary seat of vata dosha. A combination of purgation and vasti (medicated enema) is usually effective in such cases. Triphala or triphala water can be taken daily before bed, and in cases of vata or kapha, 1 tsp. castor oil with 1 cup of warm ginger tea can be taken three times per month: after bleeding, around the time of ovulation, and several days before menstruation begins. Warm sesame oil vastis can be followed by clearing enemas of warm dashmula decoction. Patients should be advised that restraining natural urges, such as prolonged holding in of urine, gas, and feces is detrimental to the proper functioning of apana prana. Diet is important, and should be assigned on the basis of the main dosha of provocation. I have found varisaurdhauti, a yogic method of virechan, to be an effective treatment for pitta-provoked patients who experience menstrual vomiting; and Berberis (either Oregon grape or barberry) works well in appropriate combination with other herbs for cases where provoked pitta is carried upward, causing red eyes and headaches.

Finally, imbalance of the doshas is responsible for most of the discomforts which so many women experience during pregnancy, the menstrual cycle, and menopause. Sometimes, the dosha at fault is vata, often accompanied by depletion of ojas, such as in amenorrhea, some types of infertility, vaginal dryness, and premenstrual symptoms which begin at ovulation, rather than later. Vata is pacified somewhat differently in these different cases, but proper opening of channels and rejuvenation with ojas-increasing substances are usually indicated. Kapha can cause obstruction, edema,

fibrocystic breasts, and other benign growths, which can be treated with channel-openers and anti-kapha medicines such as those discussed above. According to Ayurvedic theory, malignant cancers appear only when there is provocation of all three doshas; and my teacher, the late Professor R.P. Trivedi, routinely included the four fragrances (cinnamon, cardamom, bay leaf, and nag keshar) as a preventative in the formulas he gave to patients with a family history of cancer.

Much of the time, however, the major culprit in gynecological disorders, not surprisingly since it is responsible for metabolism, is pitta. Pitta is responsible for most PMS, excessive blood flow both during menstruation and at menopause, severe menstrual cramps which are strongest when bleeding is heaviest, vomiting during menstruation, infertility due to vaginal acidity, morning sickness, spotting which leads to miscarriage, and hot flashes. Anti-pitta herbs and substances such as shatavari, rose, sandalwood, Berberis, lotus root, guduchi, shanka basma, peacock feather basma, laghu sutsekar, cardamom, coriander, aloe vera juice, licorice root, fennel, and turmeric are all helpful; however, the latter four are contraindicated during pregnancy. Furthermore, if pitta increases excessively, it can also begin to exert pressure on the seats of other doshas as well, thus symptoms of other doshas can appear in conjunction with the symptoms of pitta. For example, the increase in pitta during the premenstrual time is responsible for the emotions of irritability, frustration, and lack of mental clarity; but if vata also becomes aggravated, anxiety, chills, tremors, craving for oils and salt, spaciness, and gaseous bloating of the abdomen can also appear. If pitta pushes kapha, water retention, sadness, lack of motivation, and weeping can present. Where two doshas are aggravated, it is often quite helpful for the woman to eat an anti-pitta diet from ovulation through menstruation, the "hot" time of the month, and observe an anti-vata or anti-kapha diet during the cooler part of the month. The daily herbal formula should also contain some herbs for the secondary dosha, so

that the desired reduction of pitta does not aggravate vata or kapha.

PREVENTION

Since it would be absurd to try to halt the continual process of change in the universe, which manifests both internally and externally, Ayurveda teaches the art of keeping one's boat afloat amid the waves. Women, whose lives are so governed by cycles, can benefit enormously through practicing preventative Ayurvedic medicine. In an ideal world, where everyone would have some basic grasp of Ayurvedic concepts, this means that as soon as the perception arises in the mind that "I don't feel right," the person should attempt to discover which of the doshas is the cause of the feeling. Measures can then be taken, whether they be dietary, herbal, or behavioral, to bring that dosha back into alignment with the innate pattern of the organism and thus avert illness. Because of the intelligence encoded into the body process, this sometimes happens automatically. For example, as pregnant and menstruating women can often attest, the body will attempt to balance itself through creating food cravings, based generally on the six tastes (sweet, salty, sour, pungent, bitter, and astringent) and textural perceptions such as oily vs. dry, cold vs. hot, etc. However, if an unhealthy item is chosen to satisfy the craving, rather than a healthy one, as often happens in modern society, the healing potential of the natural process is aborted.

In a less than ideal world such as the one we live in, Ayurveda's preventative medicine system tries to assist this natural process through systematizing preventative diets and lifestyle regimens, which include proper uses of medicinal plants and foods, exercise (preferably yoga asanas), regulation of times of eating and sleeping, expression of sexuality, pancha karma practices, and meditation. Since healthy menses are deemed critical not only for the health of the woman, but also for the conception and bringing to term of a healthy infant, one of the most important points of Ayurvedic gynecology is recognition of the delicate condi-

tion of the female body during the first three days of menstruation, when ojas is lessened and a great deal of beneficial cleansing takes place. In order to facilitate this cleansing, and thus ensure the health of the entire reproductive system, it is critical that the woman rest, have a break from normal social duties, and abstain from sexual arousal and intercourse during this time. Women are also advised to refrain from strenuous activities during the first three days of menstruation (interestingly, there is some suggestion² that three days was the normal duration of menstrual flow in pre-modern societies), and eat lightly since the agni is weaker during this time. Depending on the woman, warm, lightly spiced soupy foods or sweet easily digestible fruits and warm milk, etc. are recommended; avoidance of pitta-provoking foods such as alcohol, red meat, caffeine; excessively oily, sour, and hot spices; and heavy foods such as yogurt is important. For practitioners of yoga, menstruation is a good time for meditation, but pranayama (breath) practices which employ mula bandha and uddiyana bandha, which move energy upward, are to be avoided; nadi shodhana, and sitali pranayama, which is cooling, should be practiced instead. Asana practice should be suspended or curtailed, and it is essential to avoid inverted asanas during the entire time of bleeding, in order to lower the risk of endometriosis.

Of course, all preventative measures cannot be accomplished in merely three days each month, rather, the overall lifestyle is critical to women's health. For many women, especially those with PMS tendencies, it is important to strictly avoid pitta provoking foods during the five days prior to and during menstruation. A nourishing, whole-foods, vegetarian, caffeine- and alcohol-free diet which is appropriate to balance one's doshas is recommended to nearly everyone. Menstruating and postmenopausal women alike need to guard their ojas carefully. Not only is ojas necessary for good health and motherhood, its lack is a feature of low immunity, cancer, and other degenerative diseases. The formation of healthy

ojas necessitates 1) consistent good nutrition, including adequate amounts of ghee or plant-derived oils, 2) moderate exercise and proper digestion, 3) avoidance of excessive sex, especially with a variety of uncommitted partners, and 4) avoidance of exhausting and high-pressure work schedules and continual emotional stress, all of which can act to render the normal loss of ojas during menstruation, a blow from which it is difficult to recover.

In my experience, it is quite typical for patients who have difficult periods to report that it takes them one to two weeks after menstruation to recover their energy, only to have it lost again in the next menstrual cycle. To assist the body in restoring ojas, one can take a small amount of ghee ($\frac{1}{4}$ - $\frac{1}{2}$ tsp.), mixed with a lesser amount of honey, $\frac{1}{8}$ tsp. shatavari and a pinch of pippali in the morning on an empty stomach with warm water or warm milk for five days following the cessation of menstruation. For women with no contraindicatory symptoms, purva and pancha karma should be done at least once per year in fall or spring. Oiling and sweating not only rejuvenate and condition the body tissues, they also dissolve toxins in the tissues and encourage their movement toward the gastrointestinal tract for elimination. Vaman removes excess kapha, purgation removes excess pitta, and vasti purifies and strengthens apana prana. Even nasya, nasal administration, can potentially play an important role in the regulation of the pituitary and endocrine systems of the body.

Example case studies of successful Ayurvedic interventions using easily obtainable herbs and medicines:

I. Excessive Menopausal Bleeding

Janet, age 49, a large woman of pitta-kapha prakriti had been experiencing heavy bleeding and attendant exhaustion continuously for a period of 42 days. Medical tests had revealed no pathology, but she was understandably anxious and feared she might be dying. She reported intense hot flashes and constipation, but her pulse indicated strong pitta provocation in all points, and little influence of

the other doshas. She was therefore given a powdered formula of amla (for the constipation), pitta-decreasing and astringent herbs to halt the bleeding (shatavari, Berberis, turmeric, hibiscus, raspberry leaf, lotus, cumin, and sandalwood), as well as vata-soothing herbs for the anxiety (brahmi and jatamansi) 1 tsp. 3 times a day. A vegetarian with a wholesome and nourishing diet, she was asked only to avoid hot teas, hot spices, acidic foods, oily foods, and ice water. Blood flow diminished markedly within 12 hours and halted three days later. She became constipated only once during the next month, and reported light spotting at that time. No further bleeding occurred until her next period, which was slightly heavier and longer than normal, but not seriously so. She continued to take the formula and to report that her periods had normalized and that she was free of constipation, hot flashes, and bleeding.

II. Menstrual Cramps with Vomiting

Diane, age 32, with Pitta-vata constitution, came for Ayurvedic treatment for extreme menstrual cramps the second day of her period, accompanied by repeated bilious vomiting and diarrhea. Her pulses indicated provoked pitta with pitta in the seats of vata. Her diet was that of a fairly typical American college student. Her stools were loose and she reported some belching and acidity. Symptoms noticeably lessened within the first month of Ayurvedic treatment: pitta-pacifying diet and an herbal formula (guduchi, turmeric, shatavari, brahmi, lotus, musta, anise, coriander, licorice root, jasmine, bala, laghu sutsekar, shanka basma, amla, and fenugreek), but did not entirely abate. She then elected to try the yogic purgation method, varisaur dhauti, after which vomiting did not reoccur, and the digestive ama appeared to have cleared. The cramps, though they never entirely disappeared, were less severe and debilitating. She was also given a cramp-relieving formula consisting of angelica, jatamansi, brahmi, Berberis, turmeric, sandalwood, and bala.

III. Infertility

Susan, age 33, vata-pitta constitution, sought treatment for infertility, medically diagnosed as due to two factors: 1) "luteal phase defect" in which hormonal elevation was inadequate to allow implantation, and 2) her vaginal secretions were killing the sperm. She was typically cold, intolerant to acidic foods, and experienced chronic gaseous bloating. Her pulses indicated that provoked vata had invaded the seats of kapha, including, presumably, the secondary seats of kapha in the brain and endocrine system. She was treated for the first month only to remove ama, and was thereafter given a formula to enhance ojas, open channels, and activate the hormonal system (shatavari, licorice root, ashoka, bala, coriander, cardamom, maha yogaraja guggulu, shilajit, and aroyavardhini) while continuing to take triphala water every evening and follow a vata-pacifying, ojas-supportive diet and avoid acidic foods. Treatment also included an oil nasya of sandalwood and vacha. After six weeks, she was retested. Tests showed normal levels of hormone production and that her vaginal secretions were now hospitable to her husband's sperm.

IV. Endometriosis

Judy, 37, pitta-vata constitution, sought treatment for endometriosis, which she had had for the last 3½ years, causing painful intercourse and frequent abdominal pain, chilliness, water retention, belching, and insomnia. Attempts at surgical correction had alleviated pain for one year, but symptoms had returned afterward. Pulses showed strong pitta

provocation, but with vata in the seats of kapha. Though she was given an herbal formula, she elected not to take it. She did, however, take triphala twice daily and strictly followed a nourishing anti-pitta diet. After a month of treatment she reported (somewhat to my surprise, since I did not expect in her case so quick or easy a resolution) no further pain, water retention, or insomnia.

V. Vaginal Yeast Infection

Kristin, 43, of vata-pitta constitution, sought treatment for vaginal yeast, and reported a history of chronic systemic candidiasis and flatulence. She was also recovering from a lower back injury from an auto accident. Pulse diagnosis indicated vata aggravation, but the appearance of the vaginal discharge was clearly kapha-like. She was treated successfully with an internal formula of ashoka, manjistha, musta, mahasudarshan, neem, fennel, and chitrak taken with meals, and a second formula of cinnamon, trifala, licorice, bala, jatamansi, and brahmi; to be taken on an empty stomach. A douche of turmeric, licorice, and neem, to be administered for ten days in succession was also recommended. The treatment was effective against the vaginal yeast, and she also reported improvement in digestion and energy level, and an overall feeling of well-being.

VI. Cervical Dysplasia

Barbara, 28, with vata-kapha constitution, sought treatment for abnormal pap smears, which had been consistent for six months, during which time she had adamantly refused a biopsy. She re-

ported low energy and showed signs of low ojas and vata provocation. She was treated internally with trifala, shatavari, bala, vidari, turmeric, manjistha, cinnamon, cardamom, nag keshar, bay leaf, ashoka, chitrak, brahmi, and jasmine; and given licorice ghee with which she massaged her cervix daily. Three months after beginning treatment, she received her first normal pap; successive tests remained normal during the next six months that we followed her progress.

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