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An Ayurvedic Perspective on Menopausal Syndrome (Rajonivritti): Pathophysiology and Therapeutic Review

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Abstract

Menopause is a critical physiological transition in a woman's life characterized by the permanent cessation of reproductive capability and ovarian function. Modern medicine views menopause primarily through the lens of endocrine deficiency (specifically hypoestrogenism) resulting from ovarian follicular depletion. In contrast, Ayurveda conceptualizes this transition as '*Rajonivritti*', classifying it as a '*Swabhavika Vyadhi'*. This is naturally occurring condition associated with '*Jara-pakva Avastha*' (the degenerative stage of aging). While not inherently considered a pathological state, the physiological shift from '*Pitta'* dominance to '*Vata*' dominance, coupled with progressive '*Sapta Dhatu Kshaya*' (tissue depletion) and '*Agni Vaishamya*' (metabolic variance), often precipitates a constellation of psychosomatic and vasomotor symptoms termed '*Rajonivrittijanya Lakshana*' (Menopausal Syndrome). This review provides an integrative evaluation of the Ayurvedic etiopathogenesis ('*Samprapti'*), clinical typologies based on '*Tridosha'* imbalance, and comprehensive therapeutic protocols including '*Shamana'* (palliative), '*Shodhana'* (bio-purificatory), '*Rasayana'* (rejuvenative), and '*Ahara-Vihara'* (dietary and lifestyle) interventions.

Keywords: '*Rajonivritti'*, Menopausal Syndrome, '*Swabhavika Vyadhi*', '*Rasayana Chikitsa*', 'Artava Kshaya'.

Introduction

Menopause marks the permanent cessation of menses resulting from the loss of ovarian follicular activity. An outcome of Global study indicates, the average age of natural menopause ranges between 45 and 55 years (median ~51 years).[9,11] The associated physiological changes extend far beyond the reproductive axis, impacting cardiovascular, skeletal, neurological, and metabolic health.[11]

Hormone Replacement Therapy (HRT) remains the conventional gold standard for vasomotor and genitourinary symptoms; however the concerns regarding long-term risks-such as breast malignancy, thromboembolism, and stroke-have expanded interest in holistic and alternative frameworks.[9,11] An Ayurveda, the traditional system of Indian medicine, offers a nuanced approach to female reproductive health. [10,11]

1. Rajonivritti Niruktti:

- Classical texts view menopause not as an endocrine failure, but as a natural phase of life ('Swabhavika Kala') termed ''Rajonivritti''.[1,6] The word is derived from two Sanskrit roots:
- 'Raja (or Artava):' Menstrual blood / female reproductive fluid (considered an 'Upadhatu' or secondary tissue derived from 'Rasa Dhatu'). [2,6]
- 'Nivritti:' Cessation, termination, or retirement.
- Classical scholars such as 'Acharya Sushruta' ('Sushruta Samhita, Sharira Sthana 3/9') explicitly state that the natural age for 'Rajonivritti' is approximately 50 years ('*Tasaam Quinquasadasadvarshasi Ksheena Artava...*'), coinciding with the onset of '*Vardhakya'* (senility/aging). [1,7]

2. Etiology and Classification ('Nidana & Bheda of *Rajonivritti*')

Etiology and Classification of *Rajonivritti* as below :

Etiology of *Rajonivritti :*

- Because '*Rajonivritti'* is a natural transition, classical treatises do not describe specific exogenous pathogens or toxins ('*Agantuja Nidana*') as its cause.[1,6] Instead, its etiology is tied to endogenous physiological drivers ('*Nijabhava'*):
  i. ***Kala*** (Time/Ageing): Chronological progression into the '*Vata'*-dominant phase of life. [7,8]
  ii. ***Svabhava*** (Natural Disposition): The intrinsic lifespan dynamics of cellular tissue ('*Jara'*). [3,7]

iii. ***Vata Vriddhi***: The gradual accumulation and exaggeration of '*Vata Dosha'*, causing dryness ('*Rukshata'*) and degeneration ('*Kshaya'*). [2,7]

iv. ***Dhatukshaya***: Natural degradation of metabolic tissues ('*Dhatus'*), specifically beginning with '*Rasa Dhatu*'. [2,6]

Classification of *Rajonivritti* :

Ayurvedic literature broadly categorizes '*Rajonivritti'* into two types:

i. ''***Kalaja Rajonivritti*** (Timely/Physiological):'' Occurs naturally at the expected age (~45–55 years) due to age-related tissue depletion('*Kala-krita Dhatukshaya*'). [1,6]

ii. ''***Akalaja Rajonivritti*** (Premature/Pathological):'' Occurs prematurely prior to the expected age due to severe dietary errors ('*Ahara Dosha'*), trauma ('*Abhighata'*), excessive physical strain, severe disease states ('*Pushpaghni Jataharini*'), or surgical intervention (equivalent to surgical menopause). [4,6]

3. Pathophysiology ('Samprapti') :

The '*Samprapti'* (etiopathogenesis) of menopausal syndrome revolves around the interplay of '*Tridosha'*, 'Agni', '*Dhatus'*, and '*Srotas'* (micro-channels). [2,7,11]

[*Kala* (Ageing) & Natural *Svabhava*]
↓
Progression into *Vardhakya*
↓
Diminution of Agni (Agni *Vaishamya*/*Mandya*)
↓
Impaired *Rasa Dhatu* Formation
↓
Artava Kshaya (Cessation of Menstruation via Rasa *Upadhatu* depletion)
↓
Systemic *Dhatukshaya (Asthi, Majja, Sukra) & Vata Prakopa*
↓
Rajonivrittijanya Lakshana (Menopausal Syndrome)

Detailed Biological Dynamics:

A. ''**Shift in Dosha Dominance**:''

Life is divided into three major '*Dosha'* phases: '*Kapha'* (childhood/growth), 'Pitta' (adulthood/reproductive years), and 'Vata' (old age/degeneration). [7,8] The menopausal transition corresponds to the shift from 'Pitta' to 'Vata'. Residual 'Pitta' lingering in a 'Vata'-dominant environment generates erratic metabolic and thermal regulation (e.g., hot flushes).[10,11]

B. "*Rasa* and *Artava* Depletion:"

'*Artava'* (menstrual fluid) is the secondary tissue ('Upadhatu') of 'Rasa Dhatu' (plasma/nutritive fluid). [2,6] As 'Agni' (digestive and tissue fire) weakens with age, '*Rasa Dhatu'* quality deteriorates, leading to 'Artava Kshaya' and eventual '*Rajonivritti'*.

C. "Cascade of Dhatukshaya:"

"Rasa Kshaya:" Causes fatigue, dryness of skin/mucosa, vaginal atrophy, and anxiety. [2,11]

"Rakta Kshaya:" Causes pallor and body aches. [2]

"Mamsa/Medo Kshaya:" Leads to loss of muscle tone, alterations in fat distribution, and metabolic slows. [2,11]

"Asthi Kshaya:" Directly correlates with bone mineral density loss and postmenopausal osteoporosis ('Asthi-Saushirya'). [2,10,11]

''**Majja/Sukra Kshaya:"** Affects neurological stability, memory, sleep architecture, and libido. [2,11,13]

4. Clinical Manifestations ('Rajonivrittijanya Lakshana')

Although '*Rajonivritti'* itself is physiological, the resulting 'Doshic' imbalance presents as a multi-system syndrome.[10,11] These symptoms map closely to modern clinical categories:

Table 1 : Showing Rajonivritti lakshana in Mordrn and Ayurvedic view

Biological Domain	Modern Symptom	Primary Ayurvedic Correlation	Dominant Dosha
Vasomotor	Hot flushes, night sweats, palpitations	*'Daha', 'Sveda-adhikya', 'Hrid-drava'* [10,11]	*Pitta-Vata*
Psychosomatic	Anxiety, insomnia, mood swings, depression	*Anidra', 'Chitta-udvega', 'Brama', 'Vishada'* [10,13]	*Vata-Manasa*
Genitourinary	Vaginal dryness, dyspareunia, frequency/urgency	*'Yoni-Shushkata', 'Mutra-krichhra'* [4,10]	*'Vata'*
Musculoskeletal	Joint stiffness, osteopenia/osteoporosis, sarcopenia	*'Sandhi-shoola', 'Asthi-Saushirya'* [2,12]	*Vata-Asthi*
Metabolic/Skin	Weight gain, dry skin, loss of skin elasticity	*'Medo-vriddhi', 'Tvak-rukshata'* [2,11]	*'Vata-Kapha'*

5. Comprehensive Therapeutic Management ('Chikitsa Siddhanta'):

Ayurvedic therapeutics for menopausal syndrome do not seek to restart menstruation artificially, but rather to restore '*Tridosha'* equilibrium, nourish '*Dhatus'*, pacify '*Vata'*, and support mental well-being ('*Satvavajaya'*). [3,10,11]

5.1. Dietary Management ('*Ahara'*)

- ''*Vata-Pitta* Pacifying Diet:'' Consumption of warm, freshly cooked, unctuous ('*Snigdha'*), and mildly spiced foods. [7,11]
- ''Phytoestrogenic Foods:'' Inclusion of sesame seeds ('Tila'), flaxseeds, soybeans, chickpeas, and pomegranate ('*Dadima'*), which naturalize estrogenic activity. [9]

- "Nutritional Supports:" Milk boiled with almond, saffron, or nutmeg; cow's ghee ('Go-Ghrita') to lubricate tissues and nourish 'Majja Dhatu'. [3]

5.2. Pharmacological & Herbal Therapies ('Shamana Chikitsa'):

Specific single herbs ('Dravya') and compound formulations are indicated based on symptom profiles: [10,12]

Primary Phytoestrogenic & Rejuvenative Herbs:

- "***Shatavari*** ('Asparagus racemosus'):" Rich in steroidal saponins (shatavarins); acts as a potent phytoestrogen, pacifies 'Vata-Pitta', and alleviates vaginal dryness and hot flushes. [9,10]
- "***Ashwagandha*** ('Withania somnifera'):" Adaptogenic, GABA-mimetic, and anxiolytic; reduces 'Vata', mitigates sleep disturbances, and improves bone density. [10,12]
- "***Guduchi*** ('Tinospora cordifolia'):" 'Rasayana' and immunomodulator; balances 'Pitta', reduces internal heat ('Daha'), and purifies 'Rasa-Rakta'. [3,11]
- "***Yashtimadhu*** ('Glycyrrhiza glabra'):" Softens mucosal tissues, provides phytoestrogenic support, and mitigates 'Pitta' inflammation. [9,11]
- "***Brahmi*** ('Bacopa monnieri') & Shankhapushpi ('Convolvulus pluricaulis'):" 'Medhya Rasayanas' that improve cognitive performance, reduce anxiety, and stabilize mood swings. [3,13]

Classical Polyherbal Formulations:

- "***Phala Ghrita***:" Medicated ghee indicated for female reproductive health and hormonal balance. [4]
- "***Ashokarishta***:" Tones the uterine/pelvic vascular bed and regulates perimenopausal bleeding irregularities. [12]
- "***Lakshadi Guggulu / Yograj Guggulu:***" Targets 'Asthi-Majja Dhatu Kshaya', strengthening bones and relieving joint pain ('Sandhi-shoola'). [2,12]
- "***Mukta Pishti / Praval Pishti***:" Calcium-rich natural compounds that pacify '*Pitta'*, cool vasomotor heat, and protect bone density. [11,12]

5.3. Purification Therapies ('Shodhana Chikitsa / Panchakarma') :

When symptoms are severe, internal purificatory protocols are deployed under physician oversight: [5,13]

- "Basti (Medicated Enema):" Considered the ultimate therapy for 'Vata' disorders. [5,13]
- 'Anuvasana Basti' (Oil enema using 'Tila Taila' or 'Kshirabala Taila'): Lubricates systemic tissue micro-channels. [5]
- 'Niruha Basti' (Decoction enema with 'Dashamoola'): Clears vitiated 'Vata' from the colon ('Pakvashaya', the chief site of Vata). [5,13]
- "Shirodhara:" Continuous pouring of warm medicated oil ('Kshirabala' or 'Jatamansi' oil) or medicated buttermilk ('Takradhara') on the forehead. Effectively resets the hypothalamic-pituitary-adrenal (HPA) axis, relieving severe insomnia, anxiety, and hot flushes. [13]
- "Abhyanga & Swedana:" Full-body oil massage with 'Bala Taila' followed by mild steam to reduce musculoskeletal stiffness and lower cortisol. [7,13]

5.4. Lifestyle & Mind-Body Interventions ('Vihara & Satvavajaya') :

- ***"Yoga Asanas***:" Gentle postures such as 'Supta Baddha Konasana', 'Setu *Bandhasana'*, and '*Viparita Karani'* improve pelvic circulation and balance autonomic output. [11]
- "***Pranayama***:" Cooling breathing techniques such as 'Shitali', 'Sitkari', and calming 'Anulom Vilom' help control core body temperature spikes and reduce sympathetic surge. [11]

- ‘‘Dhyana (Meditation):’’ Directly enhances psychoneuroendocrine resilience. [11,13]

Material and Method:

This narrative review was conducted using a dual approach involving classical Ayurvedic literature and modern biomedical databases. Primary study is classical Ayurvedic *samhita* like *charak, sushrut, vagbahata, Sarangadhara* and some texts books.The electronic databases including PubMed, ScienceDirect, Google Scholar, DHARA (Digital Helpline for Ayurveda Research Articles), and AYUSH Portal up to 2026.

Discussion:

Modern pharmacology treats menopausal syndrome as a state of chemical deficiency requiring exogenous hormone replacement. [9,11] While effective, HRT carries well-documented contraindications and risk profiles for long-term safety.

Ayurveda provides a complementary framework: [10,11]

1. **“Systemic Adaptation vs. Replacement:”**

Rather than substituting hormones, Ayurvedic therapies aim to enhance tissue receptivity (‘*Srotoshodhana’*) and optimize endogenous steroidogenesis (via adrenal pathways supported by ‘*Rasayana’* herbs). [3,10,11]

2. ‘‘**Mechanisms of Action:**’’

Phytochemicals in herbs like ‘Asparagus racemosus’ and ‘Withania somnifera’ interact with estrogen receptors (ER-alpha and ER-beta) selectively (acting akin to natural SERMs) while regulating neurotransmitters such as serotonin, GABA, and dopamine. [9,10]

3. **“Preventive Bone & Cardiovascular Care:”**

Formulations combining ‘*Guggulu’*, calcium-rich ‘Pishtis’, and ‘Rasayanas’ inhibit osteoclastogenesis and combat lipid peroxidation without the risks associated with synthetic hormones. [10,12]

Conclusion:

‘*Rajonivritti’* is a natural biological threshold marking the transition into *‘Jara-pakva Avastha*’.[1,7] When accompanied by distressing symptoms (‘Menopausal Syndrome’), the condition reflects an underlying disturbance in ‘*Tridosha’* homeostasis—predominantly ‘Vata Prakopa’ overlaid on ‘*Dhatukshaya’* and variable ‘*Pitta’* activation. [2,10,11] Ayurvedic management offers an individualized, holistic strategy through diet modification, ‘*Rasayana’* herbal therapy, ‘*Panchakarma’* (particularly ‘*Basti’* and ‘*Shirodhara’*), and mind-body practices. Clinical integration of these traditional principles provides a promising, safe, and effective approach to promoting midlife health and quality of life in women. [10,11]

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