



MENORRHAGIA AND ITS MANAGEMENT A CASE STUDY

Dr Shahnaz Akhter Qazi

Associate professor, social and preventive medicine (HOD) Kashmir Tibya College, Shilvat Sumbal, J&K

ABSTRACT Menorrhagia is a very common complaint among women in recent years. However menorrhagia causes a lot of discomfort, inconvenience and can also disrupt a normal healthy life style. According to a unani concept the cause of Kasrat-e-tams (menorrhagia) is dystemperament of the uterus and imbalance of the body humours. There is an excessive safra (due to its hararat and hiddat) in the humours is responsible for heavy menstrual bleeding. Menorrhagia is considered one of the most common gynaecological disorder that interferes with the women's physical, social, emotional life.

KEYWORDS : Menorrhagia, Unani, Kasrat- E- Tamas

(A) UTERINE VASCULATURE

- (a) ulcers in diseases
- (b) Uterus
Polyp or uterine Fibroid uterus change in uterine temperament.
- (C) uterine rupture. Rupture of uterine vessels.

(B) CHANGE IN BLOOD

Increase in quantity of blood. Increase in fluidity of blood.(6) According to Al-majoosi, (7) Zakaria Razi (8) Abul hasan Tabri (9) and Hakeem Mohd Azam khan(10) the causes of menorrhagia are:

Weakness of retaining power (Quwwate maseka) of the uterus. Increase in the amount of blood or any humour and decrease in its weight Increase in fluidity of blood. Rupture of uterine vessels. Quantity of body fluid increases leading to weakness in power of retention leads to menorrhagia. Dominant humours i.e., khilte balgham, khilte safra, khilte sauda. Fibroid uterus and uterine polyps.

According to Akber Arzani (11) menorrhagia occur when, Quantity of blood increases (imtela-ud-dam) in body and tabiyat want to get rid of it.

Fluidity of wounds and ulcers. Weakness of uterus after difficult labour leads to rupture of weakened vessels and rupture of hymen.

A CASE REPORT

A 43 Years old female patient, namely kouser R/0 Manasbal visited the OPD Of Kashmir Tibbia college and Research centre shilvath on 22/12/2018 with coplains of excessive p/v bleeding during menstruation. Prolonged bleeding for 7-8 days with an interval of 18-20days, with minimal clots, changes 4- 5pads/day with lower abdominal pain and low backache. Patient was said to be apparently healthy 2 years back .she suddenly noticed excessive bleeding p/v during menstruation, which an interval of 18-20 days. Moderate bleeding lasted for 7-8days with minimal clots, changes 4-5pads/day with lower abdominal pain and low backache. For the same, she approached a modern clinic and was prescribed with oral medicines. Patient got relief from the symptoms for a period of 6 months with continuation of medication, she had bleeding of 7-8days, which was heavy with passage of big clots associated with pain in lower abdomen and low backache was gradual, spasmodic and intermittent in nature. Associated with fatigue of mild work was found and patient was not able to do her normal activities. she approached. KTC & RC Shilvath on 22/12/2018 for further management.

Past History: No H/o DM/HTN/Hypothyroidism or any other major medical or surgical history.

Family History: No History of the same illness in any of the family members.

Menarche: 12 years.

Married life:
O/H: P2A0.(NVD)

Contraceptive history: No any medication, Not ligated.

GENERAL EXAMINATION

BUILD: Moderate.
Nourishment: Moderate.
Pulse: 82b/min.
BP: 130/80mmHg.
Temp: 98.4F°.
Respiratory Rate: 18cycles/min.
Height: 155cms.
Weight: 75kgs.
Tongue: uncoated.

Pallor/icterus/cynosis/clubbing/Edema/Lymphadenopathy;
Absent.

SYSTEMIC EXAMINATION.

CVS: S1 S2 Normal
CNS: Well oriented, conscious.

RS: Normal Vesicular breathing, No added Sounds.**P/A:** Soft, tenderness absent, No Organomegaly.

Diagnosis: Menorrhagia.LAB INVESTIGATION: Hb 7.5gm%.

USG ABDOMEN AND PELVIS

IMPRESSION: Bulky Uterus

Treatment.

Date.	Treatment Given
22/12/2018	Safoofi-habis 5gms in morning with 250 ml Milk Sharbat faulad 2 tsf BD Poost Anar, Mazu sabz, Anjibaar. Sitz bath. Cap Eve-care 1cap BD. X 1 month.

MODE OF ACTION OF DRUGS

- **SAFOOFI HABIS:** It regulates the menstrual cycle.
- **CAPEVE CARE:** It is a uterine tonic. It helps in uterine bleeding.
- **SHARBAT FAULAD:** It helps in increasing haemoglobin.
- **MAZOO SABIZ, POOST ANAR AND ANJIBAAR** are habis-ul-dam adviya. It is rich in gallic acid and tannic acid and has significant astringent action. It checks the bleeding and constrict tissues.

After one month the patient again visits. The patient was alright. Then i also prescribed cupping (dry cupping) below the breasts as the vessel from the uterus reaches here. There by cause Imalae Mawad (shunting of morbid humours (blood) from the uterus. After doing said treatment the patient was alright.

CONCLUSION:

Menorrhagia is a common gynaecological problem that most of the females have to face in their lives. unani drugs have long history of effectiveness in treatment of kasrat-ul-tamas (Menorrhagia) without causing any side effect on the human body. The case study focuses on

various causes of menorrhagia and management of treatment. In my opinion, the unani medicines will become a boon to treat the menorrhagia patients and its complications also.

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