

Perspective Study Of Gynaecological Lifestyle Related Disorders

Dr. Snehal Ram Rathod,

Associate Professor,
Streeroga-Prasutitantra Department
Ayurved Mahavidyalaya, Pusa

Abstract-

Gynaecological diseases are the disease of the female genital organs . Their diagnosis and treatment is an important aspects of quality of life of women and their reproductive health. Because these diseases are public health and social problem and is very important to deal with them at the level of primary health care. First of all it is important to promote healthy lifestyle and conscious entering the sexual activity by young girls. In addition to primary prevention and screening it is important to emphasize education of patients about the importance of healthy life style and explaining hygienic and diet measures for certain diseases^[1]. Here will specify the definition and aetiology of most frequent gynaecological lifestyle disorders like- infertility , polycystic ovarian syndrome and cervical cancer .Also some Ayurvedicdiseases like asrugdaraand shwetapradar.Prevention of disease in gynaecology can be improved by better understanding of health promotion and management of disease. Now a days it is seen that most of the gynaecological disorders are due to faulty lifestyle. So all the health programmes should emphasize on weight loss and exercise for overweight women. This will improve menstrual irregularity, reduce infertility and prepare woman for less hazardous pregnancy^[2].This research article is mainly focusing on gynaecological lifestyle disorders and modification of lifestyle will help in prevention of these diseases . Regular physical exercise is essential to health . The pursuit of physical exercise may be of curative as well as prophylactive value in the treatment of certain cases of dysmenorrhoea, premenstrual syndrome and other disorders with background of introspection and over anxiety. It disciplines the mind as well as the body and satisfy the self^[3].

Keywords- Gynaecological lifestyle related diseases, infertility, polycystic ovarian syndrome, Shwetapradara ,Asrugdara, Cervical cancer.

Introduction-

The incidence of gynaecological life style disorders is high on rise .Also there are some Ayurvedicgynaecological disorders which are mainly due to faulty life style. Abnormal dietetics and mode of life ,abnormalities of *artava and bija* and curses or anger of god are the causative factors of all these twenty disorders of *yonivyapada*is the opinion of *charaka*^[4]. Coitus in abnormal body posture ,with weak or young woman by men possessing good size penis ,use of artificial organ for sexual orgasm etc. comes under this group. These may produce local ulceration ,hyperaemia and infection etc, responsible for various gynaecological disorders. Besides these also reflect psychology of individual.These psychosomatic abnormalities are cause of gynaecological disorders. Abnormality in diet refers to excessive ,mal or inadequate diet along with non congenial ,unhygienic and incompatible food. Overeating may cause various gynaecological disorders by producing over body weight ,obesity etc

while inadequate or mal intake may cause nutritional deficiency like weakness and emaciation resulting in *toarajska* or *lohitakshayayonivyapada*etc.The diet influences *dosas* and *dusyas*of body which are the main cause of all the disorders^[5]. *Kashaypa* says that use of *atiushnaannapana* are causes menstrual irregularity^[6]. Basically a particular lifestyle of person is a cumulative product of her capacity to co-ordinate with psychological functioning ,displayed in the forms of habits behaviour , dietary and living pattern based on his own training sought from childhood and mimics he gained from his immediate companions including parents , sibling, peers, etc. Thus it involves a pure psychological and innate control the physical and sensory activities. When this initiation control and co-ordination are disturbed it leads to the derangements of lifestyle and results in any lifestyle disorders^[7].

Aim and objective-

1. To identify the lifestyle factor associated with gynaecological disorders.
- 2.Lifestyle Gynaecological disorders includes-

Infertility-

Infertility is defined as the inability of a couple to achieve conception after one year of unprotected coitus. Approximately 10-15% of couples are impacted by infertility^[8]. Lifestyle factors such as late marriages, malnutrition, excessive weight, psychological stress, strain, environmental pollution and occupational exposures have substantial effect on fertility. *Charaka* also describes the cause of *vandhyatva* in which *manasoabhitapa*, *ahardosha* and *viharadosha* are one of the cause of *vandhyatva*^[9]. Malnutrition and heavy smoking reduces spermatogenesis. Alcohol inhibits spermatogenesis either by suppressing Leydig cell synthesis of testosterone or possibly by suppressing gonadotrophin levels. Use of lubricants during intercourse may be spermicidal. It is commonly believed that a nervous temperament particularly extreme anxiety to conceive, lowers fertility^[10]. Eating disorders, being underweight and having extremely low amounts of body fats are associated with ovarian dysfunction and infertility^[11]. Additionally, the risk of ovular dysfunction increases in women with a BMI below 17^[12]. A decreased ongoing pregnancy rate of 38.3% per cycle was also found in women who were overweight in comparison to the 45.5% in non-overweight women^[13].

Polycystic Ovarian Syndrome (PCOS)-

PCOS is multifactorial and polygenic condition. Diagnosis is based on the presence of any two of the following criteria-Oligo and/or anovulation, Hyperandrogenism, Polycystic ovaries^[14]. Exercise induced amenorrhoea is cured with limitation of activity and appropriate diet. Weight reduction in obese patient is the first line of treatment. Body mass index (BMI) <25 improves, menstrual disorders, infertility, impaired glucose intolerance (insulin resistance), hyperandrogenism (hirsutism, acne) and obesity^[15]. Weight reduction (2-5%) improves the metabolic syndrome and reproductive function. Even patients who are overweight BMI >27 are associated with reduced chance of ovulation^[16].

Shwetapradara-

The word *swetapradara* has not appeared in great treatises i.e. *Charaka*, *Shusruta*, and *Vagbhata Samhitas*. For bleeding per

vaginuraktapradara, *pradara* and *asrgdara* and for white discharge *swetasrava* or *yonisravawords* have been used. Commentator *Chakrapani* and books *Sarnghadharasamhita*, *Bhavaprakasa* and *Yogaratanakara* have used the word *swetapradara* for white vaginal discharges. *Kapha*, aggravated due to its own vitiating factors, influences or vitiates *rasadhatu* of reproductive system, already influenced by excessive coitus, abortion, improper mode of life and dietetics during menstruation and *rutukala* along with non-cleanliness and then produce white and painless vaginal discharge due to dominance of its liquid property.^[17]

Asrugdar (Pradara)

Charaka says that woman who consume excessive salty, sour, heavy, *katu*, *vidahi*, meat of domestic, aquatic and fatty animal, curd, *sukta*, *mastu* and wine, her aggravated *vayu*, withholding the *rakta* vitiated due to above causes increases its amount and then reaching immediately the amount of *raja* (*artava* or menstrual blood) in other words the increase in amount of *raja* is due its mixture with increased blood. Because of increase in the amount of blood, expert of this treatise named it as *asrugdara*^[18].

Madhava Nidana, *Bhavaprakasa* and *Yogaratanakara* have mentioned that use of incompatible diet and wine, eating before the previous meal is digested, indigestion, abortion, excessive coitus, riding, walking, grief, emaciation, weight lifting, trauma and day-sleeping are the cause of *asrugdara*.^[19]

Cervical carcinoma-

Among gynaecological malignancies cervical cancer ranks second both in incidence and mortality among women in almost all developed countries, diagnosed each year. The risk of malignant transformation in the cervix increases with the presence of high risk genital HPV (Human papillomavirus) subtype. Among more than 70 so far detected HPV virus type, most probable role in oncogenesis have subtype 16, 18, 31, 33 & 35. The disease often affects persons from lower economic class, with a lower possibility of regular health care. Early onset of sexual life and a greater number of sexual partners also favours the development of the diseases. Specifically the transformation zone in the younger age is more sensitive to oncogenic

agents. Smoking is also a significant risk factor. The role of oral contraceptive to date remains controversial but opinions are divided that higher incidence of abnormal histological types of cervical cancer is observed in woman who have for a longer period of time used these contraception^[20]. Life style modification for cervical carcinoma are-Avoid smoking ,Calcium 1200-1500 ng/day preferably from dietary sources, Vitamin D 600 IU/day, Exercise specially aerobic for cardio respiratory & general fitness.

Discussion-

Career has become important for today's woman leading to late marriage and planning for today's woman leading to late marriage and planning for family which may not be at the peak reproductive age. This poses problems such as sub fertility and patients have to resort to assisted reproduction techniques for more reason than one. Age itself is a risk factor for many medical disorders of pregnancy. Women have higher rates of psychological distress , depression, and physical morbidity than men. The factors which have significantly increased stress in women are their increased work force participation, rise in divorce, single parenthood and ageing population, affects the neurohormonal-endocrinological pathways and can present with menstrual irregularities or changed reproductive behaviour. Changed dietary habits and reduced activity has already precipitated as an obesity epidemic. Polycystic ovarian syndrome when associated with obesity causes special problem like sub fertility and body image and stressed many woman who ultimately resort to difficult exercise scheduled dietary regimes and unnecessary cosmetic procedure.

Conclusion-

The changed lifestyle , which was the requirement of time, has touched all dimension s of women's health. These factors are interdependent and influence each other in multiple ways. A healthy planned lifestyle addressing above issue may act as primary prevention to many gynaecological disorders. *Ayurveda* has described *rutucharya, dincharya, rajaswalaparicharya* for the healthy lifestyle. Also *sadavrittपालan* and *acharrasayan* for

maintainance of mental health. So all these treatment have the great effect on gynaecological lifestyle disorder.

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