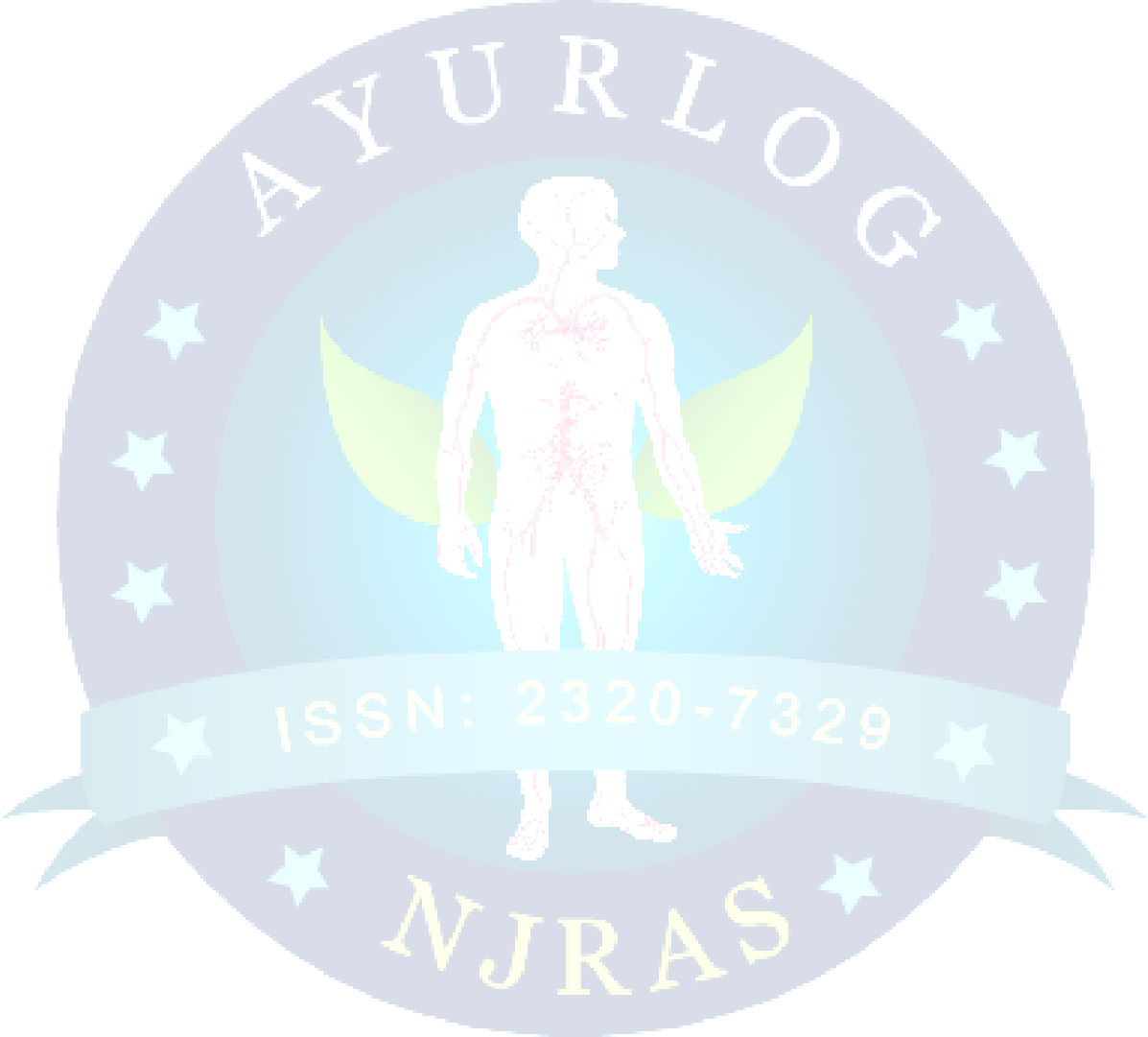
To study the efficacy of Shrungataka Churna and it’s comparison with Vidarikanda Churna in Stanyakshaya

# Prerana Bhim Gaikwad\*1, Chetana J. Kulkarni2, Sachin k. More3

1. P.G. Scholar of Streerog Prasutitantra.
2. H.O.D. , Dept of streerog prasutitantra.



1. Guide.

S.v.n.h.t’s Ayurved Mahavidyalaya, Rahuri factory, Dist. Ahamadnagar

**Corresponding Author:** [+919503954637;dr.preranagaikwad@gmail.com](mailto:%2B919503954637%3Bdr.preranagaikwad@gmail.com)

# Abstract

Breast milk provides the primary source of nutrition for newborns and it is ideal form of feeding in neonate. *Stanya Kshaya* is common problem noticed in mothers. Due to adaptation of western culture women gets exposed to stress and strain. The present study entitled “To Study the efficacy of *Shrungataka Churna* And It’s Comparision With *Vidarikanda Churna* in *Stanyakshaya*.” The clinical study was conducted on 60 patients which selected randomly and divided in 2 groups 1st is trial group treated with *Shrungataka Churna* with *godugdha.* 2nd group is control treated with *Vidarikanda churna* with *godugdha*.The clinical assessment was done on the basis of grading criteria with specific symptomologyof mata like stana mlanata,

stanya *praman and mal pariksha, upachaya, nidra, rodana in balaka*. According to observations and results conclusion has been done.It can be conclude that patients taken treatment *Vidarikand Churna* is slightly better for this disease *Stanyakshaya t*han *Shrungataka Churna*.

# Keywords:

*Shrungataka Churna , Vidarikanda Churna, Stanya Kshaya*

# Introduction

Woman is the main stem of the family. Stree has a divine role to play in Utpatti, Dharana and Poshana of Garbha, after that nourishment of baby and bringing

up is done by Stree.**[1]**

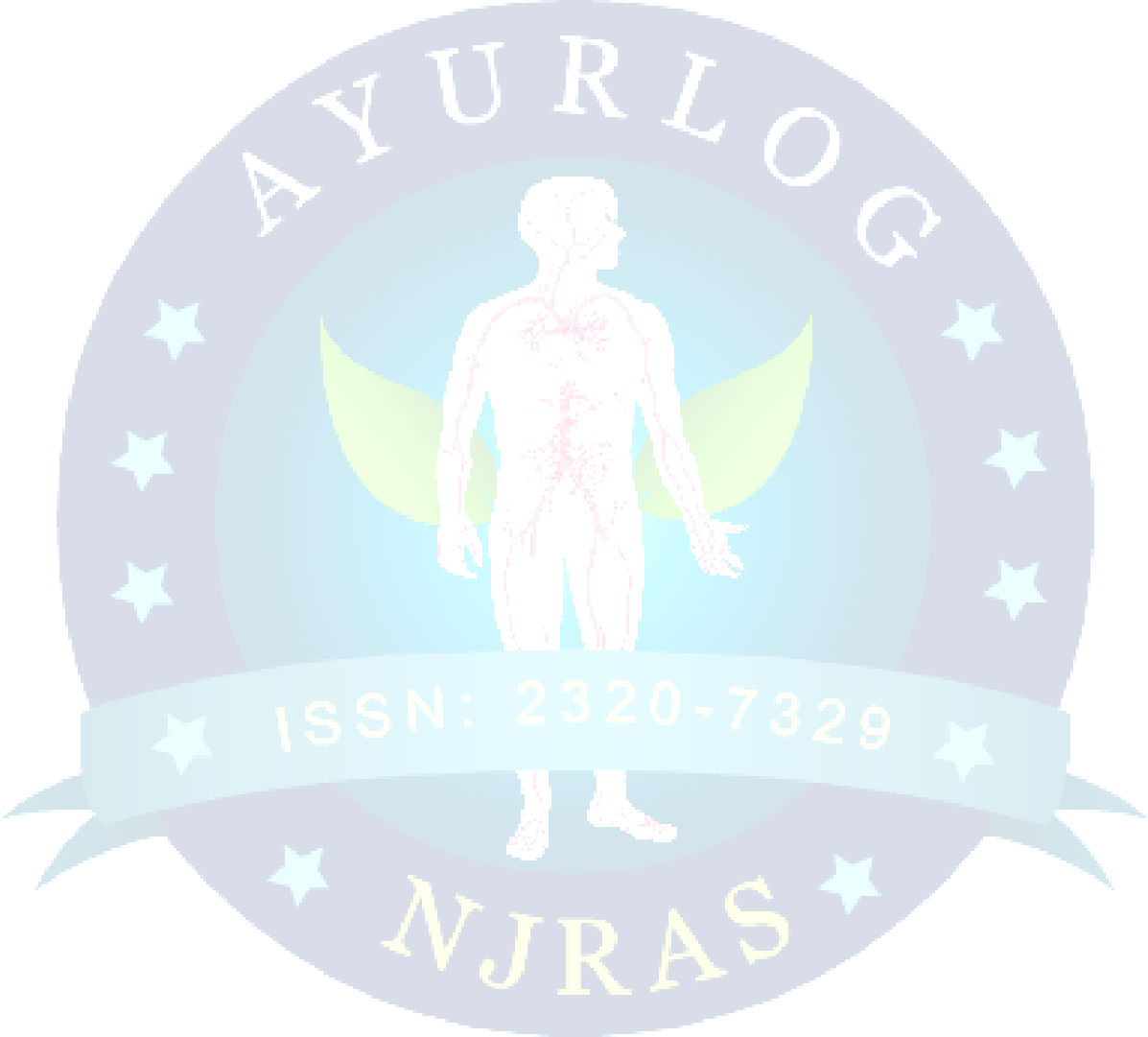
Breast milk provides the primary source of nutrition for new born and it is the ideal form of feeding in neonate. Breast milk is composed of immunoglobulin IgA, Fat, Proteins, Carbohydrates, Minerals, Digestive enzyme, Antibodies. So breast milk is the best than any other type of feeding.

Due to adaptation of western life style and more exposed towards the stress and strain the women are facing many problems. Among these Stanyakshaya is major one, which seems to be very simple condition but pertaining to children’s it is a major problem. Stanyakshaya is a common problem noticed in about 40% patients in clinical practice, so I have decided to work on this subject.

# Aims & Objective

* To Study the detailed etiopathology of Stanyakshaya according to Ayurveda and Modern Science.
* To study the efficacy of *Shrungataka Churna* in *Stanyakshaya.*
* To study the efficacy of *Vidarikanda Churna* in *Stanyakshaya.*
* Comparative study of *Shrungataka Churna* with *Vidarikanda churna* in Stanyakshaya.

# Text Reference :[2]

**Drug Introduction:** Table no.1

|  |  |  |
| --- | --- | --- |
| **Dravya** | **Shrungataka** | **Vidarikanda** |
| Family | Onagraceae. | Leguminosae. |
| Latin Name | Trapa bispinosa  . | Pueraria  tuberosa. |
| *Rasa* | Madhura, Kashaya. | *Madhura.* |
| *Virya* | *Shita .* | *Shita.* |
| *Vipak* | *Madhura.* | *Madhura.* |
| *Guna* | *Guru, Vrishya.* | *Guru,Snigdha.* |
| *Doshaghnata* | *Vatshamak, Pittashamak.* | *Vatshamak, Pittashamak.* |

# Anupana:- Godugdha[3] Material and Methods Materials (Drugs)

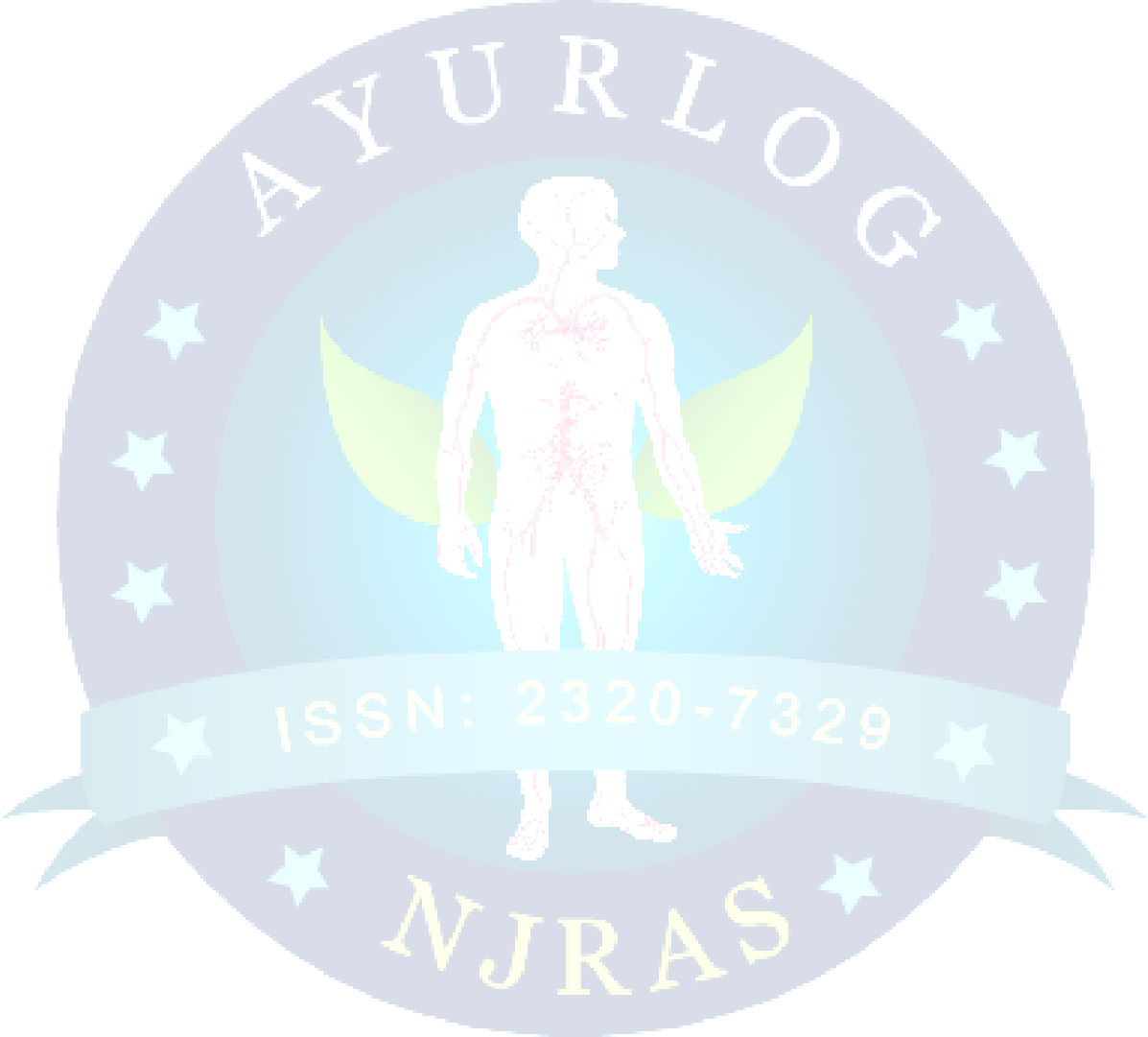
* Shrungataka Churna.
* Vidarikanda Churna .
* Anupana (Godugdha).

# Methods

Total 60 patients will be selected for clinical trials (2 groups of 30 each)

**Group A-** (Trial Group) = 30 patients will be given Shrungataka Churna with Godugdha.

**Group B-** (Control group)= 30 patients will be given a proven drug Vidarikanda churna with Godugdha.

* Patients will be selected by inclusion and exclusion criteria.
* Authentification and standardization will be done in standard laboratory.
* Lakshanas of Stanyakshaya will be categorized in grade I,II,III.
* Data will be collected with the help of observations and assessment criteria.

# SELECTION CRITERIA OF PATIENTS

**Inclusive criteria**

* Age group of patients in between 18 to 35 years
* Breast feeding frequency less than 4- 5 times per day.
* Patients irrespective of primigravida or multigravida will be selected.

# Exclusive Criteria

* Patients with Congenital anomalies, Breast atrophy, Cancers, Mastitis, Puerperal Psychosis, Breast abscess,hypothyroidism, insulin dependent diabetes,infectious disease such as AIDS, Tuberculosis, etc.

# Informed Consent:-

An informed written consent will be obtained from every patient before including trial.

**Dose**:-Group A Shrungataka Churna 5gm.twice a day with 100 ml godughdha.Group B vidarikanda churna 5 gm.twice a day with 100 ml godugdha or 28 days.

# Follow up

On 7th, 14th, 21st ,28th day assessment will be done.

# Observations

**Criteria of assessment**

Following criteria of scoring will be adopted for the assessment of signs and symptoms,

I - Prakrut .

II - Alpa. III- Adhik.

# Observation (In Mata)

1.Stana mlanata - Prakrut, Alpa , Adhik 2.Stanya Praman- Prakrut,, Alpa

**Observation (In Blalaka):- 1.**Mal Pariksha

- Parkrut, Malbaddhata, Drav-malPravrutti 2.Upachaya Prakrut,Hras,Vriddhi

1. Nidra- Prakrut, Alpa, Adhikya 4.Rodan - Prakrut, Alpa, Adhikya

# Table 2

**Effect of therapy according to relief in Symptoms’ score**

Relieved score and % relief in Symptoms’ score in both Groups

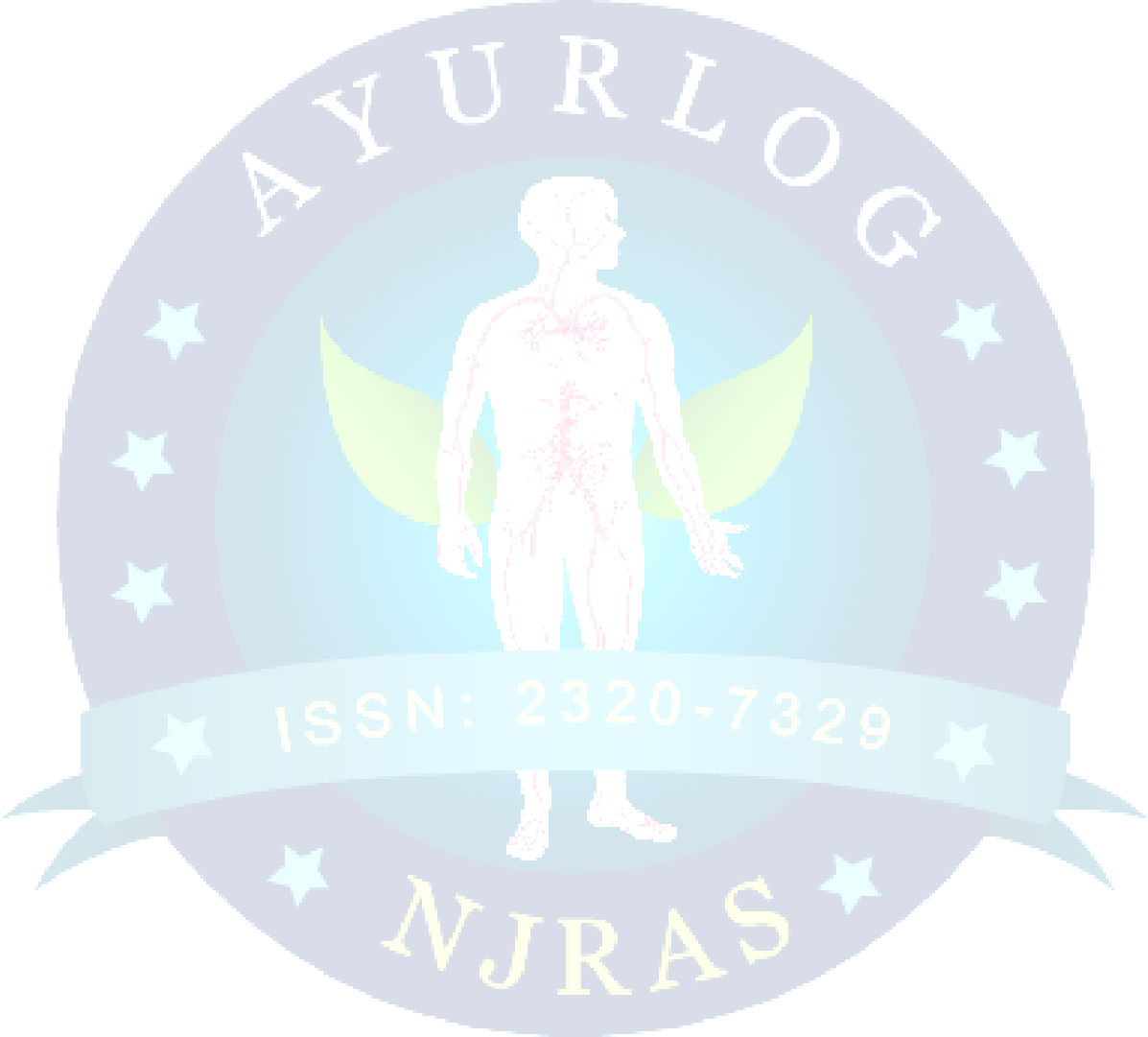
|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sr.**  **No.** | **Symptom** | **Trial Group** | | | | **Control Group** | | | |
| **BT** | **AT** | **Relie**  **ved** | **%**  **Relief** | **BT** | **AT** | **Relie**  **ved** | **%**  **Relief** |
| 1 | Stanmlanata | 45 | 3 | 42 | 93.33 | 51 | 1 | 50 | 98.03 |
| 2 | Stanyapravartana | 1 | 50 | 49 | 98.00 | 1 | 53 | 52 | 98.11 |
| 3 | Balak- Sharir  bhar-vruddhi | 0 | 45 | 45 | 100 | 0 | 50 | 50 | 100 |
| 4 | Nidra | 12 | 55 | 43 | 78.18 | 12 | 56 | 44 | 78.57 |
| 5 | Rodan | 45 | 2 | 43 | 95.55 | 48 | 2 | 46 | 95.83 |
| 6 | Mutrapravrutti | 5 | 48 | 43 | 89.58 | 2 | 51 | 49 | 96.07 |
| 7 | Malapravrutti | 16 | 31 | 15 | 93.75 | 16 | 31 | 15 | 93.75 |

# (BT = Before treatment, AT= After treatment

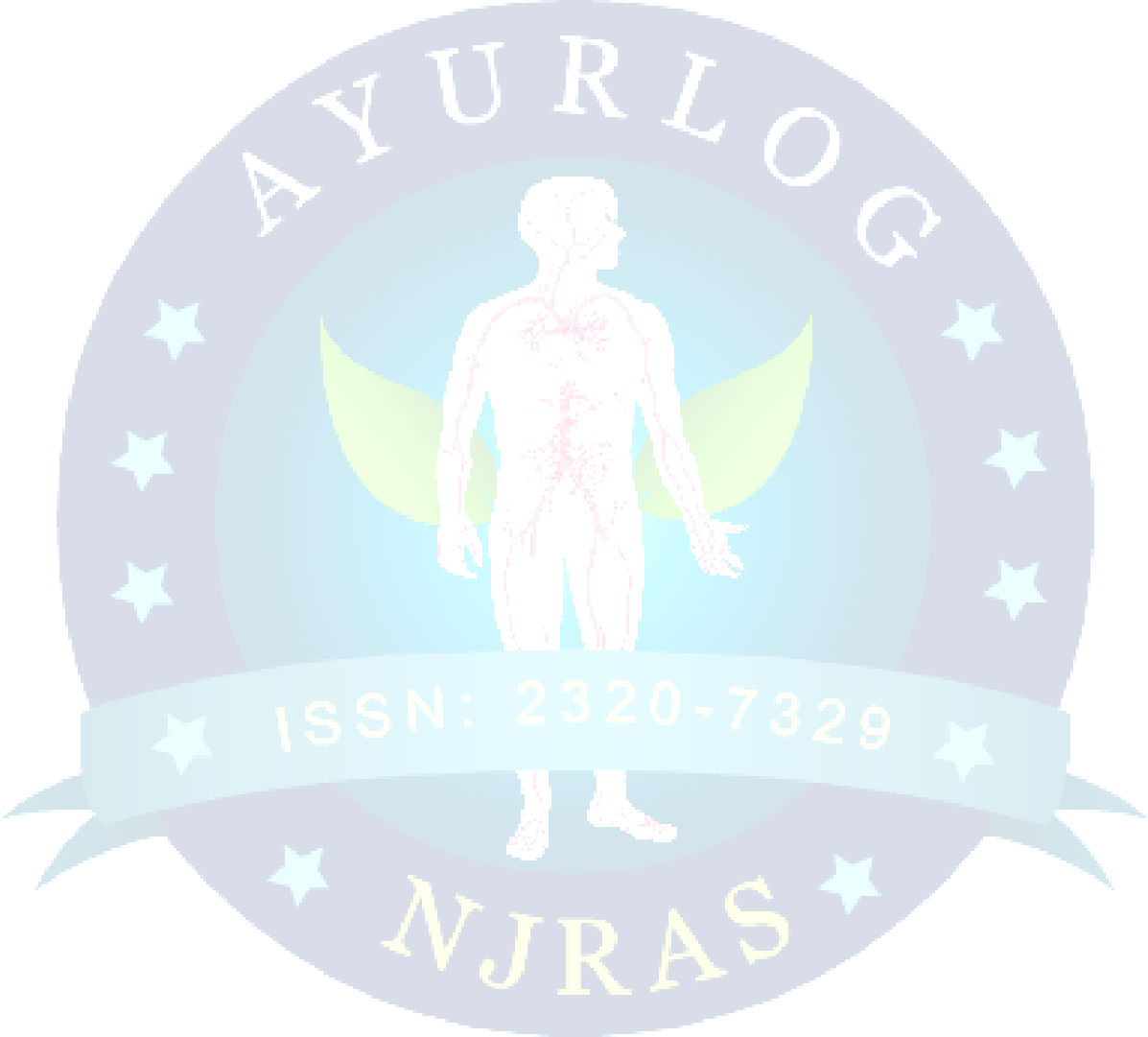
**CONCLUSION**

* + Since in all the symptoms treatment given to group B (Vidarikand Churna) shows slightly better results over treatment given to group A

(Shrungatak Churna), we can conclude that treatment **Vidarikand**

* **Churna** given to group B is slightly better for this disease Stanyakshaya.
* This treatment does not show any toxicity.
* This drug does not show any side effects durring follow up.
  + This remedy is cheaper in cost and easy to use, store, carry and can be used by poor class women also.

Results of this study are encouraging. Further research is required.



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| *Cite this article:* |
| **Prerana Bhim Gaikwad , Chetana J** |
| **“To study the efficacy of Shrungataka Churna and it’s comparison with Vidarikanda Churna in Stanyakshaya** |
| *Ayurlog: National Journal of Research in Ayurved Science-2014; 3(1): 1-5* |