



Review Article

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A REVIEW ON INSIGHT TO ENDOMETRIOSIS AND ITS PREVENTION THROUGH AYURVEDA: THE HIDDEN SUFFERING OF MILLIONS OF WOMEN

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ABSTRACT

Endometriosis is an underdiagnosed, underreported, and under research disease often labelled as the “missed disease”. It is defined as the presence of endometrial glands and stroma outside of their intrauterine location, most commonly in dependent part of pelvis. The only confirmatory method of its diagnosis is laparoscopy which is an invasive procedure. Medical therapies to it includes use of oral contraceptive pills, GNRH analogue, etc. which induce a hormonal steady state though having various side effects. Women suffering with extreme pain are offered laparoscopic removal of the implants. But the science of Ayurveda having a different perspective to diseases through Prakriti Parikshan, Dashvidha Pariksha, Tridosha Chikitsa Dhatusamyata, etc presents some possible screening method for ruling out the women which may develop endometriosis in future. Study of pathogenesis of endometriosis is done from the modern literature. After application of Ayurvedic principles, it is found that endometriosis is disease having Vat Dosha dominancy and risk of developing this disease is more in women suffering from Arsigadar, Udavartini Yonivyapad, Soochimukhi Yonivyapad and Antarmukhi Yonivyapad. In the present article, a screening method is developed to identify the women prone to endometriosis by the application of Dashvidha Parikshan. Various Ayurvedic drugs which can be used to prevent endometriosis are also described.

Keywords: endometriosis, Vat Dosh, Yonivyapad, Dashvidha Pariksha, Prevention

INTRODUCTION

Often dismissed as “women’s troubles” endometriosis affects one woman in ten of reproductive age yet a lack of research means sufferers can live in severe pain, unable to work, or socialise. It affects an estimated 176 million women around the globe and its extraordinary neglect causes many to suffer a life of pain, debilitation and infertility¹

It is defined as presence of functioning uterine glands and stroma in any site outside the uterus. It has a unique proliferative growth process with a tendency to invade the surrounding normal tissue. It occurs in about 7.15% of women in reproductive age group. Its prevalence in women with infertility is 25%-30 % and in women with pelvic pain is 40%-70%. In fact, 20-40% of infertile women have endometriosis and 40-50% of women with endometriosis suffer from infertility.

The exact cause of endometriosis is not clear. Combination of genetic, biological and environmental factors work together to trigger the initial process and subsequent reseeding and spreading of the endometrial implants. Various theories regarding the aetiology of endometriosis are proposed such as:

- Retrograde menstruation
- Immunological factors resulting in non-removal of menstrual debris and thus their implantation in pelvic organs.
- Induction of undifferentiated peritoneal cells to endometrial tissue by endogenous biochemical factors.
- Spreading of menstrual fragments to other sites in pelvic cavity through haematogenous and lymphatic spread.

- Metaplasia of peritoneum by some stimulus into endometrium etc.

Among all the proposed theories the theory of retrograde menstruation is most accepted one.

Retrograde menstruation occurs during a woman’s period when menstrual tissues flows backwards through fallopian tubes rather than out through the vagina. Women with obstructive genital tract disease, long duration of periods and short menstrual length are predisposed to establishment of ectopic endometrium. It is estimated that more than 90 per cent of women have reverse menstruation thus it cannot be considered as the only factor for endometriosis. Other factors such as hormonal imbalance, immunological responses may also plays some part in the implantation of the endometrium in the sites mainly in the lower pelvis frequently in ovaries, cul de sac, uterine ligaments, pelvic peritoneum, episiotomy scar, hernia sites etc. The patients can be asymptomatic and if symptomatic presents as:

- Progressively increasing secondary dysmenorrhea.
- Abnormal menstruation such as menorrhagia, polymenorrhagia, or premenstrual spotting, etc.
- Dyspareunia.
- Chronic pelvic pain due to inflammation in peritoneal implants.

The condition may be associated with endocrinopathies such as corpus luteal deficiency, luteinized unruptured follicle, anovulation, hyperprolactinemia, and thus causing infertility. Rupture and infection of the chocolate cyst resulting from

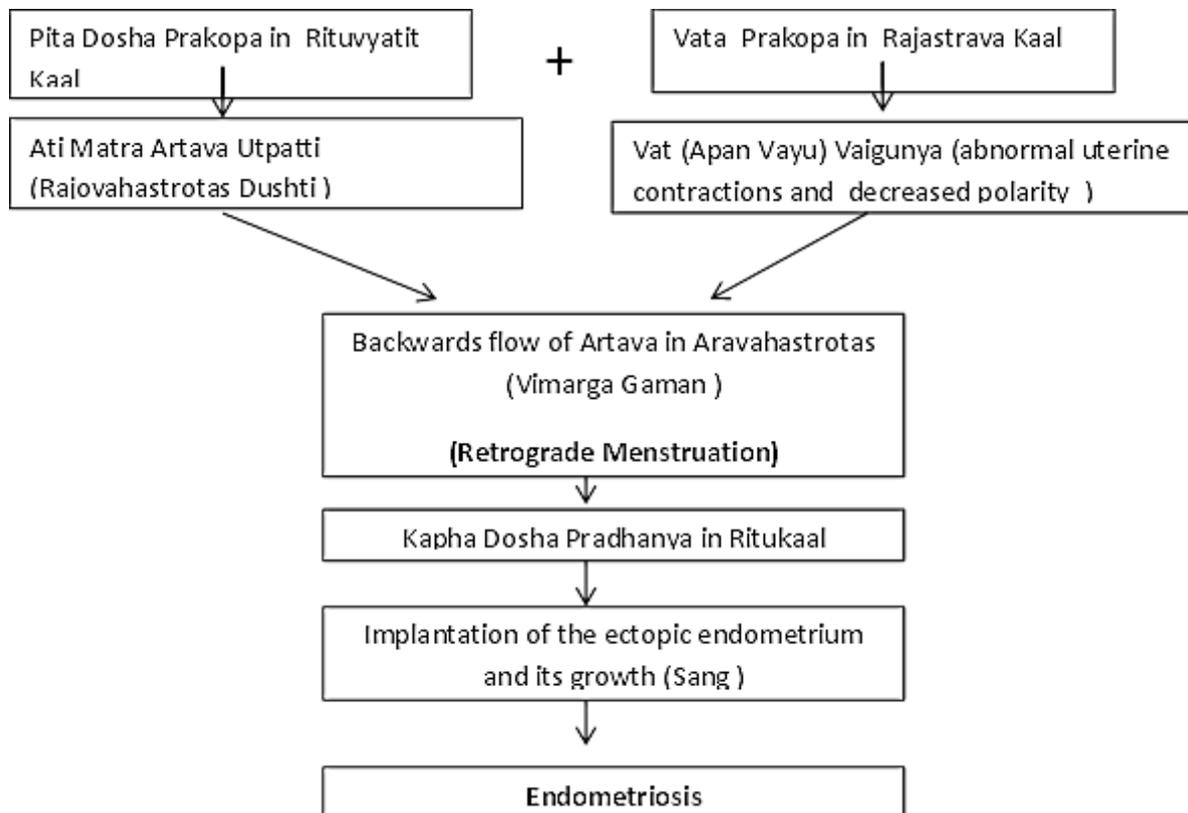
significant ovarian involvement is another complication of endometriosis.

Endometriosis in Ayurveda

Ancient Acharyas of Ayurveda has their unique system of understanding Rogas and managing them on the basis of Doshas and Dushyas. Peculiar description of endometriosis is not found in Ayurveda as one single disease. Acharya Charaka said that there can be infinite types of Rogas and it is not possible to name each disease definitely but the disease which are described in the texts can give a clue to those unnamed entities. The disease of the female reproductive system is described under Yonivyapads. There are total twenty Yonivyapadas mentioned by our Ancient Acharyas. Endometriosis can be explained on the basis of Doshas and certain gynaecological disorders mentioned by our ancient Acharyas.

Vata Dosha is the main responsible Dosha for removal of menstrual debris out of the vagina. There are three phases of

menstrual cycle mediated by normalcy of three Doshas Viz, Vata, Pitta, Kapha in each phase. Other factors such as Rasa, Rakta play the role of medium for action of Doshas on Rajawaha and Artavavaha Strotas. As soon as the Rajastarava Kaal (bleeding phase) starts the Pitta Dosha increased during Rituvyatitkaal (secretory phase) starts decreasing and Vata Dosha starts increasing. Vata dosha works by stimulating Garbhashaya Sankoch (proper uterine contractions) during Rajastrava Kaal (bleeding phase) to expel the menstrual blood outside the uterus towards vagina. There is also the beginning of Kaphachaya side by side due to Pittshaman. The disturbance of Vata Dosha hinders the flow of menstrual blood through vagina due to Vata Vaigunya (improper uterine contractions) and the menstrual blood if increased in amount due to Pitprakop in Rituvyatit Kaal (secretory phase) and Raja Dushti flows backwards in Artavavahastrotas towards fallopian tube to other pelvic organs. The endometrial tissues in the menstrual blood thus get implantated on the other pelvic sites by the action of Kapha Dosha whose one of the main functions is Vridhi (growth).



Some of the conditions mentioned in Ayurveda which aids to the pathogenesis of endometriosis are:

Arsigdar: It is the condition associated with excessive and prolonged bleeding during menstruation. Due to the consumption of Amla, Lavana, Vidaahi food, Vayu gets aggravated and this aggravated Vayu causing Rakta Dushti increase the quantity of Rakta and Raja resulting in excessive bleeding.²

Paripuluta: it is characterised by excessive pain during coitus along with other pains related to Vayu. Dyspareunia is also one of the presenting features of endometriosis.³

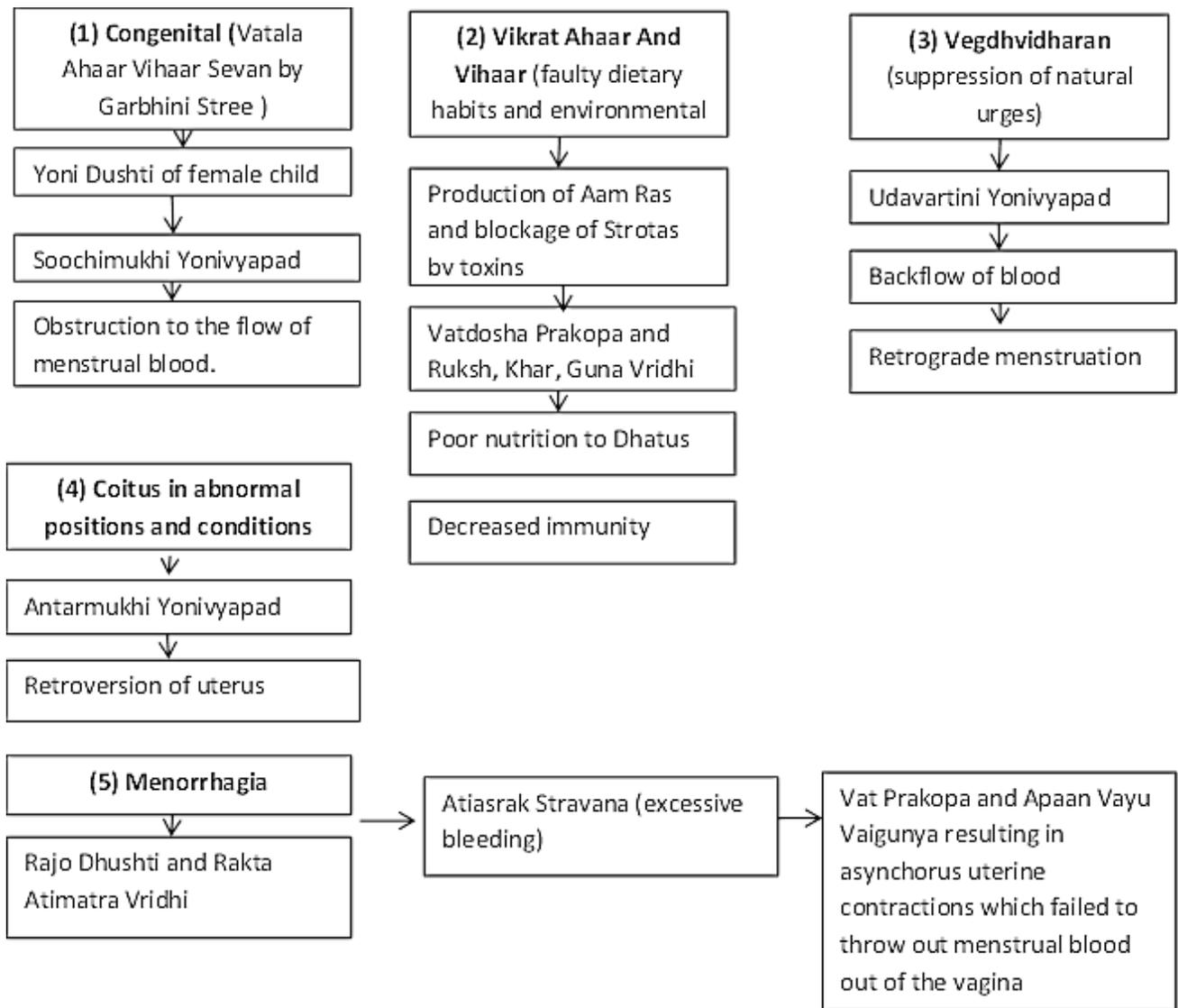
Udavartini: Suppression of natural urges results in aggravation of Apan Vayu which flows in reverse direction and pushes the

Raja upwards causing severe dysmenorrhea. 50% of women suffering with endometriosis have severe dysmenorrhea.⁴

Antarmukhi Yonivyapad: includes obliquity of of Yoni due to indulgence in coitus in abnormal positions after consumption of food. The condition probably includes retroflexion/retroversion which is one of the factors associated with development of endometriosis.⁵

Suchimukhi Yonivyapad: it involves excessive narrowing of the Yoni Mukha (cervical os) along with pain all three Doshas. Narrow orifice causes obstruction to the normal downwards flow of menstrual blood and this it flows back in reverse direction.⁶

Thus the predisposing factors to endometriosis in Ayurveda can be summarized as:



Screening of Endometriosis through Ayurveda

Ayurveda has its own clinical methods for assessment of pathological conditions known as Dashvidh Pariksha (tenfold examination). According to Acharya Charak patient should be examined in respect of Prakriti (constitution of body), Vikruti (pathological examination), Sara (perfectness of the body tissue / excellence of Dhatus), Samhana (examination of compactness of body), Pramana (proportion may referred to as BMI), Satmya (suitability), Satva (examination of psychic constitution), Aaharashakti based on Jaran Shakti and Abhyavaharan Shakti (digestive power), Vyayamashakti (strength by exercise) and Vaya (age of patient).

Based on following criteria of assessment screening method of women to rule out endometriosis is developed. Among from them main emphasis is given on Prakriti. Prakriti is the basic constitution of an individual which is fixed at the time of fertilisation depending on the predominance of the Doshas and generally remain constant throughout the life. Among the seven types of Prakriti mentioned only the three main types viz, Vat, Pit Kapha are taken for examination. Endometriosis is the condition associated with vat dosh predominance. All the factors predominating to endometriosis such as retrograde menstruation and its presenting features like dysmenorrhea, infertility, etc. are the manifestation of Vata Dosha. The following criteria for screening of endometriosis have been developed.

Table 1: Screening Criteria For endometriosis

Dash Vidh Pariksha Bhav	High risk	Average risk	Low risk
1.Prakriti (genetic constitution)	Vat Pradhan prakrititi Vat pitaj	Vat pitaj Vat kaphaj Pit Kaphaj	Samprakriti
2.Vikrati (strength of pathogenic factors responsible for disease manifestation)	Ras Dhatu And Rakta Dhatu Dushti and Raja Dushti	Ras dhatu dushti only not involving successive Dhatus.	Samdhatu (no Dhatu Dushti present at all)

3.Saar (essence of dhatus)	Rakta and Ras Sar Stree.	Madhyama Saar (Saarta of all seven Dhatus present in moderate quantity)	Sarva Saar \Pravar Saar Stree
4.Samhanan (compactness of the body)	Avar Samhanan	Madhyama Samhanan	Pravar Samhanan
5.Praman (anthropometry)	Pravar Praman	Madhyam Praman	Avar Praman
6. Satmya (suitability)	Avar Satmya women consuming Katu Amla Lavana Ahaar.	Having combination of mixed diet and Single Ras Pradhan Ahaar on and off	Patient having diet mixed of all six Ras and having suitability to Ghee, Dugdha Mamsa Ras and Madhur Ras
7.Satva (psychological examination)	Pravar Satva Women having good tolerating power and not visiting for check ups in case of dysmenorrhea, menorrhagia etc problems occurs to them	Madhyama Satva Women who are not conscious earlier but now responding to the counselling done to them.	Avar Satva Women who are very much conscious for their symptoms such as menorrhagia, dysmenorrhea and giving regular follow ups.
8. Ahaar Shakti (food intake and digestive capacity)	Vishamaagni stree with Avar Jaran Shakti (digestive capacity) susceptible to aam ras formation and vaat prakopa	Tikshaagni Stree with madhyama jaran shakti susceptible to pit dosha prakopa	Samaagni Stree with Pravar Jaran Shakti (digestive capacity)
9.Vyayam Shakti (capability to do exercise)	Having Avar vyayam Shakti but doing more exercise and sternous work leading to vat dosha prakopa	Madhyama Vyayam Shakti and doing her routine activities and physical work.	Pravar Vyayam Shakti doing exercises according to their stamina.
10. Vaya (age)	Fertile period (20-30 years of age) Adolescent premenopausal	30 years-40 years	Pre puberty Post-menopausal

Prevention of Endometriosis

Ayurveda offers many drugs for prevention of endometriosis which works by their Balya, Deepan, Pachan, Vatanuloman, Shoolharan, Grahi, Strosdhak, etc properties. These drugs work possibly by correcting immune response, preventing excessive growth of endometrium and menorrhagia and maintaining hormonal level, stimulating proper uterine contractions for downwards flow of blood and preventing inflammatory reactions.

Bala

Latin name-*Sida cordifolia*

Family-Malvaceae

Properties:

Ras- Madhura, Guna – Laghu, Snigdha, pichila Veerya – Sheeta, Vipaka – Madhura, Doshagnata – Vatpittahara ,Karma – Vaatvyadhi, raktapitta, Prameha nashak .⁷

The root of the drug is known as good tonic and immunomodulator.

Ashwagandha

Latin name- *Withania somnifera*

Family-Solanaceae

Properties:

Ras- Katu, Tikta, Kahaya Guna – Laghu, Snigdha, Veerya – Ushna, Vipaka – Katu, Doshagnata – Vatkaphahar ,Karma – Balya, Rasayan, Shukrala⁸

The roots of Ashwagandha shows significant antiinflammatory and immunomodulatory activity⁹

Madhuyashti

Latin name-*Glycyrrhiza glabra*

Family-Fabaceae

Properties:

Ras- Madhura Guna –Guru, Snigdha, Veerya – Sheeta, Vipak, – Madhura, Doshagnata –Tridoshahara , Karma – Rasayana, Vrishya, Chakshushaya.¹⁰

Glycyrrhetic acid in it shows anti-inflammatory activity similar to hydrocorticosterone¹¹

Ashoka

Latin name-*Saraca asoka*,

Family-Caesalpinaceae

Properties:

Ras- Kashaya, Tikta, Guna – Laghu, ruksha, Veerya – Sheeta, Vipaka – Katu, Doshagnata – Kaphapittahara ,Karma – Vedanasthapan, Garbhashaya Uttejaka, Garbhashaya Sankochaka, Grahi.¹²

It is having styptic property and it exhibits potent oxytocin like activity.¹³

Ashoka stimulates proper uterine contractions to expel the menstrual debris out of the vagina. It checks excess bleeding per vaginum preventing menorrhagia which is one of the predisposing factor to endometriosis. It also cures dysmenorrhea.

Lodhra

Symplocos racemosa

Family: Symplocaceae

Rasa: Kashaya, Guna: Laghu, Ruksha ,Virya: Shita Vipaka: Katu ,Garbhashaya srava-nashak Grahi, Kushtaghna, Raktstambhan.

lodhra is useful in inflammation of uterus due to its anti-inflammatory effects. Lodhra helps in maintaining the ratio of estrogen and progesterone in the female body thus preventing menstrual irregularity.¹⁴

Eshwari

Latin name - *Aristolochia indica*

Family - Aristolochiaceae

Properties:

Rasa – Katu, Tikta, Kashaya, Guna – laghu, ruksha, Veerya – Ushna, Vipaka – katu ,Doshagnata –Kaphavatahara, Karma – Shothahara, Vedanasthapan, Nadiuttejana, Deepana, Anulomana, Shoolaprashamana, , Raktashodhaka.¹⁵

Aristolochic acid in it exhibited antiestrogenic activity as shown by the prevention of estrogen induced weight increase and epithelial growth in the mouse uterus.¹⁶

It is one of the Garbhashaya Sankochak mentioned by Acharya Priyavarta Sharma. Apan Vayu Vigunata can result in improper and in coordinate uterine contractions in patients with Udavartini Yonivyapad. Eshwari can be used in such persons to direct downward flow of menstrual blood.

Latakaranja

Latin name – *Caesalpinia bonducella*

Family –Caesalpinaceae

Properties: Rasa – Katu, Tikta, Guna – Laghu, Ruksha, Teekshna, Veerya – Ushna, Vipaka – Katu, Doshagnata – Kaphavatahara, Karma – Garbhanirodhana, Sramsana, Bhedana, Shothagna, Vedanasthapana.¹⁷

Anti-estrogenic activity - Alcohol seed extract of the *Caesalpinia bonducella* has anti estrogenic property.¹⁸

Oestrogen influence is essential to development and continued activity of endometrium in women. Latakaranja may hinder the activity of ectopic endometrium probably by its anti-oestrogenic activities.

Ulatkambal

Latin name – *Abroma augusta*

Family: Sterculiaceae

Rasa: Katu, Guna : Laghu, Rooksha, Virya : Ushna, Veepak: Katu

Kaphavatshamak, Garbhashayauttejak, Artavajanan, Vednashtapan¹⁹

The ethanolic extraction of leaves and stems of *Abroma augusta* Linn f. shows contractile action on the uterus. The aqueous extract of the roots showed oxytocic action.²⁰

Upakunchika

Latin name – *Nigella sativa*,

Family- Ranunculaceae

Ayurvedic Properties: Rasa: Tikta, Katu, Guna – Laghu, Ruksha, Teekshna, Veerya – Ushna, Vipaka – Katu, Doshagnata – Kaphavatahara²¹

The volatile oil of *N. sativa* inhibits the spontaneous movement of rats and guinea pig uterine smooth muscles and also the contraction induced by oxytocin stimulation.

It stimulates menstrual periods²².

Jeeraka

Latin name – *Cuminum cyminum*

Family- Apiaceae

Rasa – Katu, Tikta, Guna – Laghu, Ruksha, Veerya – Ushna, Vipaka – Katu, Doshagnata – Kaphavatahara, Karma– Deepana, Grahi, Pittakaraka, Medya, Pachaka, Balya, Ruchya, Garbhashaya

Shodhaka, Vrishya.²³

Jeerak and Upkunchika works as a Garbhashodhak clearing the endometrial debris properly during bleeding phase. Pacify alleviated Vat by their Vatanulomak properties and prevent formation of Aam Ras by their Deepan Pachaka Guna and thus helps in formation of Shudh Ras Dhatu and Raja.

Shatavari

Latin name – *Asparagus racemosus*

Family - Lilliaceae

Properties: Rasa – Madhura, Tikta, Guna – Guru, Snigdha, Veerya – Sheeta, Vipaka – Madhura, Doshagnata – Vatapittahara, Karma – Shothahara, Rasayana, Netrya, Stanyavardhaka, Balya.²⁴ It is usually found that translocated endometrial cells get implanted only in women with altered cell mediated immunity. Shatavari may work in prevention of endometriosis by modulating various immune responses by its antioxidant activity.

Pacifies alleviated vat dosha and pita dosha which are the main dosha involved in pathogenesis of endometriosis.

Kumari

Latin name – *Aloe vera*

Family: Lilliaceae

Properties:

Rasa – Tikta, Madhura, Guna – Guru, Snigdha, Veerya – Sheeta, Vipaka – Katu, Doshagnata – Kaphapittahara, Karma –

Shothahara, Vedanasthapana, Deepana, Pachana, Rasayana, Balya, Artavajanan, Grabhasravakar.²⁵

The aloe sterol includes campesterol, β -sitosterol, lupeol, and cholesterol which are anti-inflammatory in nature, helps in reducing the inflammation pain and act as a natural analgesic. Other aspirin-like compound present in Aloe is responsible for anti-inflammatory and antimicrobial properties.²⁶

RESULT AND DISCUSSION

Definitive causative factors, diagnosis and treatment of endometriosis is unexplained till now. Ayurveda categorises disease on the basis of Dosha involvement. Here also the risk factors and pathogenesis of endometriosis is tried to explain on the basis of Dosha dominance and their prakopa in different phases of menstrual cycles.

The risk factors of endometriosis discovered by various researches which can lead to implantation of ectopic endometrium can be explained on the basis of aetiology of various Stree Rogas described by ancient Acharyas associated with Sang and Vimargaman in Artavavahastrotas leading to Rajovaigunya. E.g. Family history to endometriosis can be understood as Beej Dushti leading to Suchimukhi Yonivyapad (obstruction in expulsion of menstrual blood).

Menorrhagia causing retrograde menstruation is best understood as Raktaadhikaya and increase Raja Matra leading to Appan Vayu Vignunata and Rajovaigunya.

There are no screening criteria developed till now for endometriosis. Patient presenting with menorrhagia (arsigdar), dysmenorrhea (Udavartini Yonivyapad), cryptomenorrhea, retroversion (antarmukhi yonivyapad) and infertility must go through Dashvidh Pariskha for knowing their susceptibility of developing endometriosis in future. Prevention of endometriosis in these patients can be done by the use of Ayurvedic Drugs according to their Doshkarma and other properties in different phases of menstrual cycle. Drugs which are having Vatkaphashamak properties and are antioestrogenic can be used in bleeding phase and proliferative phase to prevent proliferation of ectopic endometrial tissues. VatKaphashamak drugs such as Ashoka and Lodhra also prevents menorrhagia due to increased endometrial thickness by preventing excessive growth of uterine endometrium. Drugs which are Artavpravartak, Garbhashayashodhak and Garbhashayasankochak such as Jeerak, Upkunchika, Ulatkambal, Ishwari, Karanj, etc. can be used in bleeding phase to pacify Vat Dosha. Lodhra and Shatavari work on reproductive hormones and can be used in patients presenting with infertility. Aloe vera and Shatavari works on altered immune response. Aloe vera also prevent inflammatory reactions at the site of endometrial implants. Bala, Ashwagandha, Madhuyashti, etc drugs can be used whole cycle to prevent inflammatory reactions and to receive better immune response to environmental toxins.

CONCLUSION

Detail study and review of literature reveals that though the direct description of endometriosis is not given in Ayurveda but there are different pathological conditions given by our acharyas which involves the features of endometriosis. The diagnostic criteria of our acharyas dashvidha Parikshan can help in screening of women who are susceptible to suffer from endometriosis and its prevention can be done by using various Ayurveda drugs after considering Dosha predominance in different phases of menstrual cycle.

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