

A Randomized Open- Labelled Controlled Clinical Study to Evaluate the Efficacy of *Jeevanyadi Yamaka Matra Basti* in the Management of *Artava Kshaya* with Special Reference to Oligomenorrhea

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Abstract

Background: *Artava Kshaya* (menstrual irregularities including oligomenorrhea) is increasingly prevalent due to modern lifestyle factors and has significant impact on women's reproductive health. Conventional hormonal therapies have side effects, highlighting the need for alternative treatments. Ayurvedic intervention using *Jeevanyadi Yamaka Matra Basti* may offer a safer, effective option by addressing the condition's root cause.

Aim: To clinically evaluate the efficacy of *Jeevanyadi Yamaka Matra Basti* in the management of *Artava Kshaya* w.s.r. to Oligomenorrhea.

Materials and methods: A randomized open-labelled controlled clinical study with 30 patients diagnosed with *Artava Kshaya* was conducted. Patients were equally divided into two groups receiving *Jeevanyadi Yamaka Matra Basti* or *Phalakalyana Ghrita Matra Basti* once daily for 7 days per menstrual cycle, over 2 months. Assessments pre- and post-intervention included duration of menstrual bleeding, interval between two cycles, amount of menstrual bleeding, intensity of pain during menstrual bleeding, assessment of pain- grading by VMS. Statistical analysis used non-parametric tests.

Result: Within the Group: Group A (*Jeevanyadi Yamaka*) showed significant improvement in interval between two cycles ($p=0.009$), duration of menstrual bleeding ($p=0.002$), amount of menstrual bleeding ($p=0.003$), and intensity of pain during menstrual cycle ($p=0.016$). Group B showed significant improvement only in amount of menstrual bleeding ($p=0.046$) and intensity of pain during menstrual cycle ($p=0.015$).

Between the Group: *Jeevanyadi Yamaka Matra Basti* demonstrated superior efficacy compared to *Phalakalyana Ghrita Matra Basti* in regulating menstrual cycle interval and bleeding duration.

Interpretation & conclusion: *Jeevanyadi Yamaka Matra Basti* is an effective and safe Ayurvedic treatment for *Artava Kshaya*, addressing hormonal and systemic imbalances responsible for oligomenorrhea. Its dual lipid base enhances drug absorption and tissue nourishment, leading to improved menstrual parameters and symptom relief. This therapy can be considered a promising alternative to conventional hormonal treatments with fewer side effects.

Keywords: *Artava Kshaya*; Oligomenorrhea; *Jeevanyadi Yamaka*; *Phalakalyana Ghrita*; *Matra Basti*

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1. Introduction

In the current era, emphasizing the significance of women's health is crucial but women are entangled in demanding routines and may not allocate sufficient time to ensure their health and well-being. Menstruation is a vital sign of a women's reproductive and overall health; menstrual irregularities can signal underlying medical conditions. The word *Artava* encompasses menstruation, menstrual blood, as well as ovum and ovarian hormones¹. *Artava* is regarded as an *Upadhatu* of the *Rasa*² or *Rakta Dhatu*³. *Artava Vyapat* has become increasingly prevalent in the modern era due to unhealthy dietary patterns, sedentary lifestyles, heightened stress levels, and other contributing factors. *Acharya Sushruta* described a condition called *Artava Kshaya* in the context of *Upadhatu Kshaya*,⁴ characterized by the absence of menstruation at the expected time (delayed) with scanty flow⁵. Oligomenorrhea is the term used to describe Menstrual bleeding occurring more than 35 days apart and which remains constant at that frequency⁶. In the modern medical approach, hormonal therapy is often employed as a treatment, but it can potentially lead to adverse effects on the body, including issues such as obesity, nausea, vomiting, as well as an increased risk of endometrial cancer and breast cancer. *Basti Karma* is one of the effective treatments that can be employed in the treatment of *Artava Kshaya* as it helps in *Shodhana of Srotas*⁷. In the contemporary perspective, it is acknowledged that administering a drug through the rectal route can stimulate the Enteric Nervous System (ENS) and trigger sensory signals for the Central Nervous System (CNS)⁸. *Matra Basti* is a type of *Anuvasana Basti* in which the low dose of *Sneha* is administered with no major contraindication⁹. In order to treat *Rajo Dosha, Jeevanyadi Yamaka*¹⁰ is considered, as the drugs in the formulation have properties to enhance the *Rasa Dhatu* which in turn acts on its *Upadhatu - Artava*. Hence *Matra Basti* with *Jeevanyadi Yamaka* is opted as the treatment of choice in *Artava Kshaya* aiming to eradicate the disease at its core.

Aim

To clinically evaluate the efficacy of *Jeevanyadi Yamaka Matra Basti* in the management of *Artava Kshaya* w.s.r. to Oligomenorrhea.

Primary objectives

- To clinically evaluate the efficacy of *Jeevanyadi Yamaka Matra Basti* in the management of *Artava Kshaya* w.s.r to Oligomenorrhea on the basis of disease related subjective parameters in the clinical setting of the institution.
- To clinically re-evaluate the efficacy of *Phalakalyana Ghrita Matra Basti* in the management of *Artava Kshaya* w.s.r to Oligomenorrhea on the basis of disease related subjective parameters in the clinical setting of the institution.
- To compare the efficacy of *Jeevanyadi Yamaka Matra Basti* with *Phalakalyana Ghrita Matra Basti* in the management of *Artava Kshaya* w.s.r to Oligomenorrhea on the basis of subjective parameters.

Secondary objectives

- To study the detailed literary review of *Artava Kshaya* and Oligomenorrhea.
- To study the detailed literary review of drugs, present in *Jeevanyadi Yamaka* and *Phalakalyana Ghrita*.
- To study the detailed literary review of *Matra Basti*.

2. Materials and Methods

30 subjects fulfilling the Inclusion Criteria for *Artava Kshaya* were selected from the OPD and IPD of Sri Sri College of Ayurvedic Science and Research Hospital, Bengaluru, Karnataka, India and with the help of simple randomization technique (Lottery method) divided into two equal groups: Group A (Trial Group) 15 subjects received *Jeevanyadi Yamaka Matra Basti*, and Group B (Control Group) 15 subjects received *Phalakalyana Ghrita Matra Basti*. The raw drug was procured from authentic source properly identified by the Department of *Dravya Guna* and preparation of *Jeevanyadi Yamaka* was done in the department of *Rasa Shastra* and *Bhaishajya Kalpana* of Sri Sri College of Ayurvedic Science and Research Hospital, Bengaluru. *Phalakalyana Ghritha* was procured from GMP certified pharmacy (*Baidyanath*). An Informed and Written Consent along with specially designed detailed Case proforma for the study was prepared. An Ethical clearance for conduction of the clinical trial involving human subjects was taken from the Institutional Ethics Committee (IEC) before the commencement of study (Protocol No: SSIEC/263/2023), dated 16/10/2023, and the trial was registered prospectively with CTRI (Registration No: CTRI/2024/07/070060).

2.1. Inclusion criteria

- Subjects between the age group of 20-40 years.
- Subjects irrespective of marital status and parity.

- Subjects presenting the classical symptoms of *Artava Kshaya*.
- Subjects with symptoms of Oligomenorrhea.
- Subjects suffering from *Artava Kshaya* for more than 2 cycles.
- Subjects with Spotting/ bleeding less than two days.
- Subjects with or without pain during menstruation.
- Subjects after 3 months of withdrawal of oral contraceptive pills and removal of intra uterine contraceptive device.
- Subjects willing to sign the consent form.

2.2. Exclusion criteria

- Subjects who are pregnant and lactating mothers.
- Subjects with haemoglobin less than 10 g%.
- Subjects with congenital malformation of uterus.
- Subjects with known case of hemorrhoids, fistula, fissures.
- Subjects with known case of chronic systemic illness and malignancy.

2.3. Diagnostic criteria:

- Criteria mentioned in ICD 10 [N 91.4] (International Statistical Classification of Diseases and related health problems) is adopted.
- Based on classical symptoms of *Artava Kshaya*.
- Based on the signs and symptoms of Oligomenorrhea.

2.4. Investigations planned:

- Hb%.
- TSH.
- USG Pelvis.

Table 1 The study design of the study.

	Group A	Group B
Medicine	<i>Jeevanyadi Yamaka</i>	<i>Phalakalyana Ghritha</i>
Procedure	<i>Matra Basti</i>	<i>Matra Basti</i>
Dose	1 ½ Pala (72ml)	1 ½ Pala (72ml)
Time of administration	After Food	After Food
Duration	7 days for 1 cycle	7 days for 1 cycle
Treatment Period	After complete cessation of menstrual bleeding.	After complete cessation of menstrual bleeding.
Duration of Study Period	2 months	2 months

2.5. Assessment criteria

- Amount of menstrual blood loss.
- Duration of menstrual cycle.
- Interval between two cycles.
- Pain during menstruation (*Yoni Vedana*).

Table 2 Assessment of amount of menstrual bleeding loss.

Amount Of Menstrual Bleeding Loss	
3 pads/ day	0
2 pads/ day	1
1 pad/ day	2
Spotting	3

Table 3 Assessment of interval between two cycles.

Interval Between Two Cycles	
28-35 days	0
36-45 days	1
46- 60 days	2
> 60 days	3

Table 4 Assessment of duration of menstrual flow.

Duration Of Menstrual Flow	
4 days	0
3 days	1
2 days	2
1 day	3
Spotting	4

Table 5 Assessment of Intensity of Pain During Menstruation.

Intensity Of Pain During Menstruation	
Absent	0
Mild	1
Moderate	2
Severe	3

Table 6 Assessment of Pain - Grading by VMS.

Assessment of Pain - Grading by VMS	
GRADING	PAIN
0	No pain
1	Present, no analgesic required.

2	Analgesics required
3	Daily activity affected, analgesics required but poor effect

2.6. Follow up

Table 7 Follow up.

Pre assessment	0 th day
1 st assessment	1 st cycle after treatment
Follow up	2 nd cycle without treatment

2.7. Organoleptic study

Table 8 Organoleptic Study.

Sl no	Organoleptic Character	Observation
1	Colour	Dark Yellow
2	Odour	Characteristic of <i>Kalka Dravya</i>
3	Taste	<i>Madhura</i> and <i>Kashaya</i>
4	Consistency	Semi solid
5	Appearance	Oily
6	Clarity	Opaque

2.8. Physiochemical study

Table 9 Physiochemical study.

Specific Gravity	0.91 g/cm ³
Viscosity	52.10 cP
Refractive Index	1.39

2.9. Observation

A total number of 30 patients fulfilling the inclusion criteria were registered for the study

- Total number of patients screened – 33
- Number of patients registered for the study – 30.
- Number of Patient completed the study – 30.

Among 30 subjects, 47% subjects belonged to the age group of 20-26 years; 50% belonged to 27-33 years, 3% belonged to 34-40 years.

2.10. Overall assessment

Table 10 Overall assessment within the group

PARAMETERS	GROUP A (BT-AT)	GROUP A (AT-FU)	GROUP A (BT-FU)	GROUP B (BT-AT)	GROUP B (AT-FU)	GROUP B (BT-FU)
Duration of menstrual bleeding	0.001 (HS)	0.004 (S)	0.002 (S)	0.157 (NS)	0.317 (NS)	0.083 (NS)
Interval between cycles	0.001 (HS)	0.002 (S)	0.001 (HS)	0.025 (S)	0.007 (S)	0.004 (S)
Amount of menstrual bleeding	0.008 (S)	0.025 (S)	0.003 (S)	0.157 (NS)	0.157 (NS)	0.046 (S)
Intensity of Pain during cycle	0.011 (S)	0.046 (S)	0.016 (S)	0.046 (S)	0.008 (S)	0.015 (S)
Assessment of pain - VMS	0.020 (S)	0.025 (S)	0.010 (S)	0.157 (NS)	0.014 (S)	0.023 (S)
Overall grading of Artavakshaya	0.001 (HS)	0.014 (S)	0.001 (HS)	0.083 (NS)	0.025 (S)	0.023 (S)

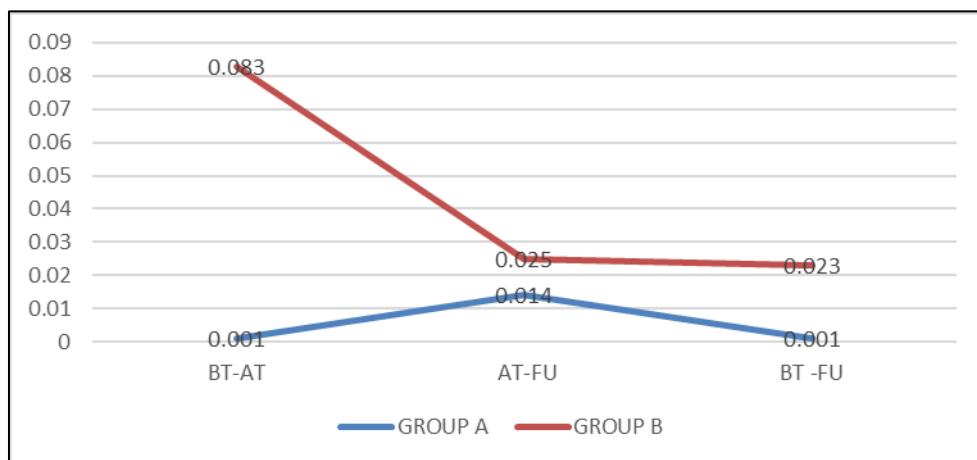


Figure 1 Overall grading of Artavakshaya within the group

Table 11 Overall assessment between the groups

Parameters	Mann Whitney p-value (BT, AT, FU)	Inference
Duration of menstrual bleeding	0.016(BT), 0.539 (AT), 0.116 (FU)	Significant difference at baseline; non-significant after treatment and follow-up, showing convergence between groups
Interval between cycles	0.367(BT), 0.137 (AT), 0.005 (FU)	Statistically non-significant results across BT-AT, AT-FU and significant at BT- FU, indicating that intervention produced meaningful difference between groups for this symptom at follow up.
Amount of menstrual bleeding	0.217(BT), 0.026 (AT), 0.005 (FU)	Significant differences after treatment and at follow-up, indicating better reduction of bleeding volume in one group.
Intensity of Pain during cycle	0.967(BT), 0.512 (AT), 0.595 (FU)	Not significant at any time point, showing comparable pain relief across groups.

Assessment of pain - VMS	0.935(BT), 0.436 (AT), 0.217 (FU)	Not significant at all points, indicating similar pain assessment outcomes.
Overall grading of Artavakshaya	0.202(BT), 0.061 (AT), 0.029 (FU)	Borderline significance after treatment with significance at follow-up, showing superior improvement in one group.

Table 12 Significance between the groups

	GROUP A	GROUP B	B/W GROUP
HS	27%	0%	0%
S	73%	62%	66.6%
NS	0%	38%	33.3%

In the present study, the enrolled participants were divided into two equal groups as trial and control groups with two different formulations for the management of *Artavakshaya*. In Current review, *Jeevanyadi Yamaka Matra Basti* was given in trial group whereas *Phalakalyana Ghrita Matra Basti* was given in control group. On evaluation of results, it was observed that *Jeevanyadi Yamaka Matra Basti* gave positive outcome in both subjective parameters of *Artava Kshaya*. On comparing the results between the groups statistical analysis showed non-significant results in majority of subjective in control group, it can be inferred that the efficacy of *Jeevanyadi Yamaka Matra Basti* with special reference to *Artava Kshaya* showed highly significant results in trial group. Thus, the current study can be concluded that all the parameters were achieved Significant and highly significant results in trial group. Consequently, alternate hypothesis is accepted that is *Jeevanyadi Yamaka Matra Basti* is more effective than *Phalakalyana Ghrita Matra Basti* in the management of *Artava Kshaya* w.s.r to Oligomenorrhea.

2.11. Special observation

- 5 subjects with severe dysmenorrhea had significant results.
- 2 subjects with history of chronic Acne issues, noted significant reduction.
- Also helped regularize bowel in 3 subjects and increased appetite in 11 subjects.

3. Discussion

Modern lifestyles, marked by high stress, irregular eating habits, and less physical activity, have contributed to an increase in menstrual problems. Since menstruation is a key sign of a woman's overall and reproductive health, any change in its regular pattern requires clinical attention. *Artava Kshaya* is the Ayurvedic equivalent of what modern gynecology calls Oligomenorrhea and Hypomenorrhea. The classical Ayurvedic scholar, *Acharya Sushruta*, described its main symptoms as *Yathochita Kala Adarshanam* (delay in the expected time of menstruation), *Alpata* (scantiness of menstrual flow), and *Yoni Vedana*. This ancient description perfectly matches the modern definition of oligomenorrhea, where menstrual cycles last longer than 35 days.

Limitations of current treatments- Hormonal therapy, the standard modern approach, can be effective but often comes with side effects.

Side effects and systemic impact- These can include metabolic issues like weight gain and nausea, and even long-term risks such as a higher chance of developing endometrial and breast cancers.

This highlights the need for a safer, more holistic treatment. Ayurvedic therapies, especially procedures like *Basti Karma*, offer a promising alternative. They aim to correct the underlying imbalance of the body's humors (*Doshas*) and systemic issues, treating the disease at its source.

This clinical study evaluates the efficacy of *Jeevanyadi Yamaka* administered via *Matra Basti* for the management of *Artava Kshaya*.

Jeevanyadi Yamaka is a unique formulation referenced in the *Charaka Samhita, Siddhi Sthana*, in the chapter on managing complications of oleation therapy (*Sneha Vyapath Siddhi Adhyaya*). A *Yamaka* preparation is a combination of two different types of fats, in this case, *Tila Taila* (sesame oil) and *Go Ghrita* (cow's ghee), processed with a decoction

of herbs. This formulation is classically indicated for its *Brimhana* (nourishing), *Balya* (strength-promoting), and *Vata-Pitta Shamaka* (pacifying *Vata* and *Pitta*) properties.

Table 13 Mode of action of phytoconstituents of *Jeevanyadi Yamaka*

Dravya (Ingredient)	Major Phytoconstituents	Mode of Action
<i>Jeevanthi</i> <i>Leptidinia reticulata</i> Retz.	Triterpenoids (α -amyrin, β -amyrin), β -sitosterol, flavonoids	Adaptogen that enhances resistance to stress affecting menstrual cycle. Anti-inflammatory and immunomodulatory properties reduce uterine inflammation and promote tissue repair ¹¹ .
<i>Madana</i> <i>Randia dumetorum</i> Lam.	Iridoid glycosides, triterpenoids	Anti-inflammatory and analgesic effects relieve uterine pain; uterine toning improves menstrual regulation ¹² .
<i>Shatavari</i> <i>Asparagus racemosus</i> Wild.	Steroidal saponins, phytoestrogens	Phytoestrogens modulate estrogen receptors and the HPO axis, normalizing hormonal imbalance. Protects reproductive tissue via antioxidant activity ¹³ .
<i>Shravani</i> <i>Sphaeranthus indicus</i> Linn.	Sesquiterpene lactones, flavonoids	Neuroprotective and anti-inflammatory effects relieve stress-induced menstrual irregularities and maintain uterine health ¹⁴ .
<i>Madhuka</i> <i>Glycyrrhiza glabra</i> Linn.	Glycyrrhizin, glabridin, flavonoids	Mimics estrogenic effects, reduces uterine inflammation, and supports adrenal function lowering cortisol affecting cycles ¹⁵ .
<i>Bala</i> <i>Sida cordifolia cordifolia</i> Forsk.	Ephedrine, phytosterols, alkaloids	CNS stimulant and nervine tonic, improves neuroendocrine control reducing fatigue-related cycle irregularities ¹⁶ .
<i>Shatahwā</i> <i>Anethum graveolens</i> Linn.	Essential oils (anethole), flavonoids	Carminative and anti-inflammatory, eases uterine cramping and improves circulation ¹⁷ .
<i>Vidarikanda</i> <i>Pueraria tuberosa</i> Roxb ex Willd.	Isoflavones (tuberisin), pterocarpans	Phytoestrogenic activity fosters uterine tissue nourishment and metabolic balance ¹⁸ .
<i>Pippali</i> <i>Piper longum</i> Linn.	Piperine, alkaloids	Enhances bioavailability of compounds, anti-inflammatory, digestive stimulant improving reproductive health ¹⁹ .
<i>Kakanasa</i> <i>Martynia diandra</i> Gloc.	Glycosides, tannins, flavonoids	Anti-inflammatory and diuretic, reduces metabolic toxins that affect menstruation ²⁰ .
<i>Swagupta</i> <i>Mucuna pruriens</i> Hook.	L-Dopa, mucunine, alkaloids	Dopaminergic effect stabilizes hypothalamic hormone regulation improving ovulation and cycle control ²¹ .
<i>Ashwagandha</i> <i>Withania somnifera</i> (L.) Dunal.	Withanolides, alkaloids	Adaptogenic, reduces cortisol, modulates thyroid and adrenal health to stabilize cycles ²² .
<i>Karkatakhya</i> <i>Pistacia chinensis</i> Bunge.	Terpenoids, flavonoids, phenolics	Antioxidant and anti-inflammatory, protects uterine tissue from oxidative damage ²³ .
<i>Shati</i> <i>Hedychium spicatum</i> Buch Ham.	Essential oils, curcuminoids	Anti-spasmodic and analgesic, relieves uterine cramps and improves microcirculation ²⁴ .
<i>Vacha</i> <i>Acorus calamus</i> Linn.	Asarone, volatile oils	Tonic to nervous system, reduces anxiety-related menstrual issues, relieves pelvic discomfort ²⁵ .
<i>Tila Taila</i> <i>Sesamum indicum</i> Linn.	Linoleic acid, oleic acid, sesamin	Pacifies <i>Vata Dosha</i> , anti-inflammatory, supports lipid metabolism and improves tissue repair ²⁶ .
<i>Go Ghrita</i>	Essential fatty acids, fat-soluble vitamins	Enhances bioavailability of actives, supports CNS and endocrine function, anti-inflammatory ²⁷ .

Go Ksheera	Proteins, calcium, vitamins (A, D, B complex)	Nutritional and immunomodulatory support essential for reproductive tissue repair ²⁸ .
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4. Discussion on *Phalakalyana Ghrita*²⁹

Properties of *Phalakalyana Ghrita*:

- *Rasa: Madhura, Tikta.*
- *Guna: Guru, Snigdha, Sukshma.*
- *Virya: Ushna.*
- *Vipaka: Madhura.*
- *Doshaghnata: Tridoshashamaka, specially Vata shamaka.*
- *Karma- Artavajjanana, Vatanulomaka, Garbhashaya Uttejaka, Vedanasthapana, Garbhashaya Shothahara, Deepana, Pachana, Rasayana, Shulaprashamana, Balya.* Chemical Constituents: - It mainly contains phytoestrogenic drugs (*Shatavari, Bala, Haridra* etc.).

Phalakalyana Ghrita has *Madhura, Tikta Rasa* and *Madhura Vipaka* which nourishes and give strength to *Rasa Dhatu* (Ch. Su. 26/42). *Madhura Rasa* contains carbohydrates in abundance and less protein which is very important constituent of endometrium. It increases formation, secretions and decreases degeneration of endometrium. *Tikta Rasa* has *Deepana* and *Pachana* properties thus help in proper function of *Agni* and *Samayak Ahara Pachana Kriya*, proper *Utpatti* of *Rasadi Dhatu* facilitates *Uttarotara Dhatu Utpatti* properly (*Rakta, Mamsa, Meda* etc) and *Upadhatu Artava*. "*Phalakalyana Ghrita*" mainly contains *Ghrita*, which is considered as *Hitakara* for *Rasa Dhatu* (Ch. Su. 13/14). *Rasayana* and *Balya* properties also increase the *Rasa Dhatu* which is directly responsible for "*Artava Utpatti*".

4.1. Discussion on procedure

Basti has been selected for this study due to its numerous advantages.

The route of drug administration, known as *Aushadha Sevana Marga*, refers to the pathway through which medicines are introduced into the body to treat various diseases, as described in classical Ayurvedic texts. The choice of administration route significantly influences the bioavailability and therapeutic efficacy of the drug.

Ayurvedic classics mention various routes of administration, each selected based on the predominant *Dosha* involved in the pathogenesis of the disease. For this study, the rectal route, termed *Guda*, has been chosen.

Basti is recognized as the prime treatment for aggravated *Vata Dosha* and is referred to as *Ardha Chikitsa* by *Acharya Charaka*. The procedure involves administering medicated *Kashaya, Taila*, or *Ghrita* into the rectum. In this context, *Matrabasti* with medicated *Sneha* has been employed.

Acharya Charaka elucidates that *Basti* introduced into the colon exerts systemic effects across the entire body and aids in the elimination of toxins. It is also considered an *Amrita* (rejuvenative) therapy.

Anuvasana Basti is a subtype of *Sneha Basti*, and *Matra Basti* is a form of *Anuvasana Basti*. It is easily administered without restrictions during treatment, is free of complications, and is routinely recommended for those afflicted with *Vata Vikara*. Further, the classics affirm that *Basti* does not cause harm even if retained in the body for an extended duration.

4.2. Discussion based on the result

4.2.1. Mode of action

Jeevanyadi Yamaka is distinct in its use of a combined lipid base comprising *Tila Taila* (sesame oil), *Go Ghrita* (cow's ghee), and *Go Ksheera* (cow's milk). This unique combination in *Jeevanyadi Yamaka* creates a synergistic effect that enhances its therapeutic potency and pharmaceutical profile beyond that of *Phalakalyana Ghrita*.

Both formulations share several common herbs like *Shatavari* (*Asparagus racemosus*), *Ashwagandha* (*Withania somnifera*), and *Yashtimadhu* (*Glycyrrhiza glabra*), which are known for their rejuvenative, adaptogenic, and *Dosha* balancing properties. However, despite these common ingredients, *Jeevanyadi Yamaka* demonstrates superior efficacy, likely owing to its complex Tri lipid base.

Go Ghrita provides nourishing, cooling, and soothing effects, which support *Pitta* pacification and tissue rejuvenation.

The addition of *Go Ksheera* enriches the formulation with nutritive and *Madhura* qualities, promoting deeper nourishment of the *Dhatus* as well *Srotas* within the body.

The inclusion of *Tila Taila* imparts deep tissue penetration and *Ushna* properties, beneficial in balancing *Vata Dosha* and mobilizing toxins from tissues.

In contrast, *Phalakalyana Ghrita*, while potent as a medicated ghee formulation, lacks the deep tissue penetration advantages contributed by *Tila Taila*.

Due to its formulation, *Jeevanyadi Yamaka* demonstrates better drug absorption, more balanced *Dosha* correction, and stronger restorative effects than *Phalakalyana Ghrita*, making it well suited for complex conditions like *Artava Kshaya* demand both *Shodhana* and *Brimhana*.

Since *Basti* directly influences the functioning of *Apana Vata* which governs the pelvic region including the *Garbhashaya* this therapeutic intervention is particularly effective in gynecological disorders.

5. Conclusion

The results from this randomized, open-label controlled trial demonstrate that *Jeevanyadi Yamaka Matra Basti* significantly alleviates the symptoms of *Artava Kshaya*.

The intervention group showed a marked improvement in clinical symptoms compared to the control group, suggesting that *Jeevanyadi Yamaka Matra Basti* is effective in reducing the symptoms of *Artava Kshaya*.

Additionally, the treatment was well-tolerated, with no significant adverse effects reported, underscoring its safety and potential as an alternative or complementary therapy in the management of *Artavakshaya*.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

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