

**Menstrual Disorder And Homoeopathy****Faridi Amin**

Tantia University Sri Ganganagar

Abstract

Menstrual disorders are disorders which are related to a woman's normal menstrual cycle. It may happen at any stage start from menarche to menopause. This is considered to be the common reasons for a woman to visit their gynaecologist. Menstrual disorder haunts her and makes life miserable. Sometimes it causes hindrance to become pregnant. Anirregularity can occur in the cycle, either in the duration or amount of blood flow or interval between two cycles. Different schools of medicine have already done the many work on the menstrual disorder and they have shown many significant effect for the treatment of the same. Here the focus has been turned towards homoeopathic medicine. The present review will give the detail idea about the action of homoeopathic medicine with the help of materia medica and repertory.

Key word- Metrorrhagia, Menorrhagia, Hypomenorrhoea, Oligomenorrhoea, Polymenorrhoea, Menometrorrhagia, Amenorrhea, Post-menopausal bleeding, Homoeopathy.

Corresponding Author* : Dr. Faridi Amin, Tantia University, Sri Ganganagar, Rajasthan

Received – 08/2/2020**Revised – 25/2/2020****Accepted – 10/3/2020****INTRODUCTION**

Menstrual cycle is the physiological event of every female individual during her reproductive phase of life. It involves the series of events coordinated by the hypothalamic-pituitary-ovarian axis and it is influenced by physiological and pathological changes occurring during the reproductive lifespan. The process of preparation of uterine lining of epithelial tissues over the

endometrium for the pregnancy and followed by the degeneration and removal of the same after not getting embedded with fertilized ovum. This whole process is occurring in the regular interval, known as menstrual cycle.

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Menstrual Cycle -Whole menstrual cycle is consists of two cycles namely ovarian cycle (*follicular phase, ovulation, and luteal phase*) and endometrial cycle (*proliferative phase, secretory phase, and menstruation*).

- A. **Follicular phase:** This is considered as 1st phase of ovarian cycle. It starts on the very first day of the cycle and lasts up to 13th day. From pituitary gland FSH and LH secretion increases which accelerate the growth of follicles. It takes 13 days to mature. In these days while follicle matures and hormone secreted from the follicle helps to develop the epithelial lining of endometrium.
- B. **Ovulation phase:** In this phase a matured egg cell is released from ovary and transferred to fallopian tube with the help of fimbriae.
- C. **Luteal phase:** This phase is the final phase of ovarian cycle, begins at the 15th day of the cycle and last up to 28th day. There is a change of granulosa and theca interna into the corpus luteum which secretes oestrogen and progesterone resulting inhibition of FSH and LH, that causes involution of corpus luteum and formation of corpus albicans. As a result of this menstruation triggers and next stage starts.

D. **Menstrual phase:** This is the first phase of the uterine cycle in which shedding of tissues and blood vessels, exit through vagina. It lasts till the 5th day of cycle. In normal condition about 20 to 80 ml of blood loss occurs.

- E. **Proliferative phase:** This is the 2nd phase of uterine cycle when oestrogen causes lining of uterus to grow. In this phase there is secretion of oestradiol and oestrogen which helps to the formation of new layer of endometrium known as proliferative endometrium.
- F. **Secretory phase:** it is the final phase of uterine cycle which corresponds to the luteal phase of ovarian cycle. During this phase corpus luteum secretes progesterone which helps to the formation of endometrium.

Menstrual Disorder - Menstrual disorder can be define as abnormal and irregular menses either presence or absence of any pathological cause. It variety ranging from heavy bleeding to absence of bleeding, profuse to scanty bleeding, more frequently to the absence of bleeding. The menstrual disorders are mentioned below.

Irregular Menses – Types			
Types	Duration	Interval	Amount
Metrorrhagia	Prolonged	Irregular	Normal
Menorrhagia	Prolonged	Regular	Excessive
Hypomenorrhoea	Less than normal	Regular	Less
Oligomenorrhoea	Variable	Irregular	Scanty

Polymenorrhoea	Normal	Regular	Excessive
Menometrorrhagia	Prolonged	Irregular	Excessive
Amenorrhoea	Absent for consecutive three months	Absent	Absent
Premenstrual syndrome	Normal or less	Seldom or often during late 20s and late 40s	Normal or less

Metrorrhagia: It is defined as irregular, excessive, and acyclic bleeding from uterus.

Menorrhagia: It is defined as cyclic bleeding at normal interval; bleeding is either excessive in amount (>80ml) or duration (>7 days).

Hypomenorrhoea: When the menstrual bleeding is unduly scanty and last for less than 2 days. It is called hypomenorrhoea.

Oligomenorrhoea: When menstrual bleeding lasts more than 35 days apart and which remain constant at that frequency known as oligomenorrhoea.

Polymenorrhoea: Frequent menstrual bleeding that occurs every 21 days or less known as polymenorrhoea.

Menometrorrhagia: when the menstrual bleeding is so irregular and excessive that the menses can't be identified at all.

Amenorrhoea: It is known as absent of menstruation. It is a symptom of different physiological and pathological condition.

Premenstrual syndrome: it is a psychoneuro – endocrinal disorder of unknown etiology which is often noticed prior to menstruation during last 7 to 10 days of menstrual cycle. It occurs during the luteal phase of each ovulatory cycle.

Cause Of Menstrual Disorder

There are many factors that cause normal menstrual bleeding, in case menstrual disorder it may be intrauterine or extra uterine, systemic or general disease, hormonal or psychoneural causes. Few of them are mentioned below.

If genital pathology is the cause then there will be Leiomyoma, Endometriosis, Endocervical Polyps, Adenomyosis, Pelvic Infections, Trauma, Foreign bodies like IUD, Endometrial Hyperplasia, Endometrial Cancer, Cervical Cancer, Vaginal Cancer, Vulvar Cancer, Fallopian Tube Cancer, Ovarian Tumours, Cervical Stenosis, PID, Cervical Erosion,

If systemic pathology is the cause then there will be

Coagulative Disorder, Hormonal Imbalance, Liver Cirrhosis, Hypothyroidism,

Homeopathic Repertory For Menstrual Disorder

Synthesis repertory (medicines with 1st grade)

Female Genitalia/Sex - Menses – Copious.

APOC. ARS. BELL. BOV. CALC-P.
CHIN. COCC. CYCL. ERIG. FERR.
HELON. IP. MERC. MILL. NAT-M.
NUX-M. NUX-V. PHOS. PLAT. RAT.
RHUS-T. SABIN. SEC. SENEC.
STRAM.

Female Genitalia/Sex - Metrorrhagia

BELL. BOTH. CALC. CHIN.
CROC.CROT-H.FERR.GLON.HAM.IP.
KALI-FCY. LACH. MILL. MURX. NIT-
AC. NUX-V. PHOS. PLAT.
PSOR.PULS.RAT.SABIN. SEC. TRIL-P.
UST.VIB.

Female Genitalia/Sex - Menses – Scanty

AM-C. ARG-N. ARS-MET .CARBN-S.
CON. CYCL. DULC. GRAPH. KALI-C.
LACH. MANG. NAT-M. PHOS. PULS.
SENEC. SENEG. SEP. SULPH.

Female Genitalia/Sex - Menses – Protracted

ARS-MET. CALC. CARB-AN. CARB-V.
CUPR. FERR. KALI-C. LYC. MILL.
NAT-M. NUX-V. PLAT. PULS. RAT.
RHUS-T. SABIN. SEC. SENEC.

Female Genitalia/Sex - Menses – absent (= amenorrhea)

AUR. CARBN-S. CON. DULC. FERR.
FERR-I. GRAPH. KALI-C. LYC. PULS.
SENEC. SEP. SIL. SULPH. TUB.

Homeopathic Remedy For Menstrual Disorder

1. **Apocynum Cannabinum** -
Metrorrhagia: There is continual or

paroxysmal flow either fluid or clotted associated with nausea, vomiting, palpitation. Pulse is quick and feeble when moved. Also has vital depression, faintness when raising head from pillow. Amenorrhea especially in young girls,

2. **Arsenic Album** Menses are too profuse and too early. There is burning in ovarian region. Leucorrhoea is acrid, burning, offensive and thin in character. Pain feels as from red-hot wires which worse from least exertion that causes great fatigue and get better in warm room. Menorrhagia. There is stitching pain in pelvis that extending down to the thigh.
3. **Belladonna** Menses augmented, too early; too profuse which is bright red in colour. Menses and lochia are very offensive and hot.
4. **Bovista Lycoperdon** There is diarrhoea before and during menses. Menses are too early and profuse that worse at night. Voluptuous sensation. Traces of menses between menstruations with soreness of pubes during menses. Metrorrhagia.
5. **Calcarea Carbonica** Before menses patient has headache, colic, chilliness and leucorrhoea and during menstruation there is cutting pains in uterus. Menses are too early, too

- profuse, too long, with vertigo, toothache and cold, damp feet and least excitement causes their return. Burning and itching of parts before and after menstruation.
6. **Calcarea Phosphorica** Menses too early, excessive, and bright in colour but if it is late, blood is dark; sometimes, first bright, then dark, with violent backache.
 7. **China Officinalis** Menses are too early dark clots and abdominal distension with profuse painful menstruation. Bloody leucorrhoea which seemed to take the place of the usual menstrual discharge. There is Painful heaviness in pelvis.
 8. **Cocculus Indicus** Dysmenorrhoea, with profuse dark menses. Menses are too early, clotted, and with spasmodic colic. There is painful pressing in uterine region, followed by haemorrhoids. Patient is so weak during menstruation, scarcely able to stand.
 9. **Cyclamen Europaeum** Menses are profuse, black, membranous, clotted, and too early, with labour-like pain from back to pubes. Menstrual flow decreases when moving about. There are menstrual irregularities with migraine. After menses, swelling of breasts appears, with milky secretion.
 10. **Erigeron Canadense** Metrorrhagia, with violent irritation of rectum and bladder, and prolapsus uteri. Bright-red blood flow. Profuse leucorrhoea; bloody lochia returns after least motion, comes in gushes; between periods,
 11. **Ferrum Metallicum** Menses remits in a day or two and then return. Discharge of long pieces from uterus. Menses too early, too profuse which last too long and Pale, and watery in character.
 12. **Gloninum** Menses delayed, or sudden cessation with congestion to head. Climacteric flushing.
 13. **Graphites** Menses too late, with constipation; pale and scanty, with tearing pain in epigastrium, and itching before. Hoarseness, coryza, cough, sweats and morning sickness during menstruation.
 14. **Hamamelis Virginiana** Menses dark, profuse, with soreness in abdomen. Metrorrhagia, occurring midway between menstrual periods. Intermenstrual pain. Vagina very tender.
 15. **Helonias Dioica** Dragging in sacral region, Menses too frequent, too profuse. Weight and soreness in womb; conscious of womb.

16. **Ipecacuanha** Menses too early, too profuse with bright red gushing, with persistent nausea.
17. **Kalium Carbonicum** Menses early, profuse or too late, pale and scanty. Delayed menses in young girls.
18. **Lachesis Mutus** Menses too short, too feeble; pain all relieved by the flow. Acts especially well at beginning and close of menstruation.
19. **Millefolium** Menses early, profuse, protracted. Haemorrhage from uterus; bright red, fluid.
20. **Mercurius Solubilis** Menses profuse, with abdominal pains. Greenish and bloody; sensation of rawness in parts. Stinging pain in ovaries. Mammae painful and full of milk at menses.
21. **Murex Purpurea** Menses irregular, profuse, frequent, large clots. Feeling of protrusion. Prolapse; enlargement of uterus, with pelvic tenderness and sharp pains, extending toward breasts; aggravated lying down. Dysmenorrhoea and chronic endometritis,
22. **Nitricum Acidum** Uterine Haemorrhages. Menses early, profuse, like muddy water, with pain in back, hips and thighs. Stitches through vagina. Metrorrhagia after parturition.
23. **Natrium Muriaticum** Menses irregular; usually profuse. Vagina dry. Leucorrhoea acrid, watery. Bearing-down pains; worse in morning. Suppressed menses, hot during menses.
24. **Nux Vomica** Menses too early, lasts too long; always irregular, blood black with faint spells. Dysmenorrhoea, Metrorrhagia, with sensation as if bowels wanted to move.
25. **Phosphorus** Slight haemorrhage from uterus between periods. Menses too early and scanty-not profuse, but last too long. Weeps before menses. Amenorrhoea, with vicarious menstruation.
26. **Platinum Metallicum** Menses too early, too profuse, dark-clotted, with spasms and painful bearing-down, chilliness, and sensitiveness of parts.
27. **Psorinum** Dysmenorrhoea; near climaxis. Menses; early and profuse. gushing, lumpy, foetid; with violent pain in sacrum and debility.
28. **Pulsatilla Pratensis** Amenorrhoea. Suppressed menses from wet feet, nervous debility, or chlorosis. Tardy menses. Too late, scanty, thick, dark, clotted, nausea, downward pressure, painful, flow intermits. Diarrhoea during or after menses.
29. **Sabina** Menses profuse, bright. Uterine pains extend into thighs. Discharge of blood between periods,

Haemorrhage; partly clotted; worse from least motion. Atony of uterus.

CONCLUSION

During females whole life menstrual cycle is one of the crucial physiological events and earliest sign of reproductive health. But its disorder is considered as most ignored complaints. Menstrual disorder is very common among the adolescents. In the above described review we discussed about the role of homoeopathic medicine in menstrual disorders. Allopathic medicines are not much effective in treating these types of complaints and have adverse remote effects too. Here repertory as well as materia medica has so many medicines and have many proven symptoms regarding the different complaints of menstrual disorder.

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