



A Comparative Study of Effectiveness of Cynodon Dactylon Mother Tincture Along with Homoeopathic Indicated Medicine and Homoeopathic Indicated Medicine Alone in Cases of Menorrhagia in the Age Group of 15-55 Years

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ABSTRACT

Menorrhagia comes under Abnormal Uterine Bleeding(AUB). AUB means any deviation in normal uterine cycle refers to abnormally heavy or prolonged menstrual bleeding that exceeds the typical flow more than 80ml and duration. It can lead to severe discomfort, disruption of daily activities. Menorrhagia is one of the major/main cause why women of different age group attend gynecological consultant. It affects women living in developed as well as developing countries. It is not only life threatening but also have huge effect on personal, social, family and work life of women and reduce quality of life. So here it is attempt to study effectiveness of Cynodon dactylon in treating menorrhagia along with homoeopathic indicated remedy. To study the difference in effectiveness of Cynodon dactylon mother tincture along with homoeopathic indicated medicine and homoeopathic indicated medicine alone in cases of menorrhagia in the age group of 15-55 years. To compare effectiveness of Cynodon dact. Mother tincture along with homoeopathic indicated medicine and homoeopathic indicated medicine alone in cases of female suffering from complaints of menorrhagia in the age group of 15-55 years. To improve quality life of female of age group of 15-55 years suffering from complaint of menorrhagia. 46 patients enrolled in the study with the help of menorrhagia assessment scale and clinical diagnosis. Detailed case taking of 2 groups were done. Group 1-received Cynodon mother tincture along with homoeopathic indicated medicine and Group 2-received homoeopathic indicated remedy alone. Quality of life scale was also used before the commencement of treatment. 6 follow ups were taken after medication. Menorrhagia assessment scale score was obtained along with quality of life scale at the end. There is difference in effectiveness of Homoeopathic medicine Cynodon dactylon Mother tincture along with homoeopathic indicated medicine and homoeopathic indicated medicine alone in reducing the complaint of menorrhagia in female in age group of 15-55 years. After studying 23 cases of Group 1, 19 cases improved and 4 cases not improved. After Studying 23 case of group 2, 18 cases improved and 5 cases not improved. According to the study it demonstrates that the combination of Homoeopathic medicine Cynodon Dactylon mother tincture along with homeopathically indicated medicines is more effective in treating menorrhagia than the use of homeopathically indicated medicine alone. This suggests that Cynodon Dactylon mother tincture may have a synergistic effect, enhancing the overall therapeutic outcome when used in conjunction with other homeopathic treatments. The presence of Cynodon Dactylon. As an adjunct therapy potentially contributes additional benefits, supporting its role in improving the patient's condition effectively. This combination approach could lead to better symptom management and overall improvement in patient health, highlighting the importance of treatment strategies in homeopathy.

INTRODUCTION

Menorrhagia which comes under the topic of Abnormal Uterine Bleeding (AUB), AUB is one of the most common problem female suffer, which brings them to visit OPD. Average cycle last between the range of 23-29 days with bleeding episodes lasting 2-7 days. AUB is name given to describe any deviation from the normal menstrual cycle. It is synonymously called as hypermenorrhoea. It is cyclic bleeding at normal intervals, the bleeding is either excessive in amount >80 ml or duration of >7 days or both. The term monetizes is often been used to denote prolonged bleeding. It can be most of the time symptom of some underlying pathological condition. Most common causes being fibroid of uterus, endometriosis, chronic tubo-ovarian mass, retroverted uterus, Polyp, malignancy, PCOS, IUD other condition which can lead to it are severe Hypertension CCF, Hypo or hyperthyroidism, platelet deficiency, von Wille brand disease, leukemia. Disturbed hypothalami-pituitary ovarian endometrial axis. Usually diagnosis is made on the basis of duration of flow, passage of big clots, sanitary pads, pallor, low HB level depends upon cause. Studies have reported varying prevalence rates depending on the criteria used to define menorrhagia and the population under study. Prevalence estimates range from 9-31% among women of reproductive age^[1,2]. The incidence of menorrhagia refers to the number of new cases that occur within a specific time period. Unfortunately, reliable incidence data for menorrhagia are limited. It commonly affects women during their reproductive years, with a peak incidence occurring in the 30s and 40s. However, menorrhagia can also be observed in adolescents and perimenopausal women.

Cynodon Dactylon^[3-5]: In India, almost 95% of the prescriptions are plant based in the traditional Ayurveda, Unani, Siddha and Homoeopathy systems. Among the plants, Cynodon dactylon, a perennial grass of Poaceae family, native to the warm temperate and tropical regions, is an important one. It is reported to have important properties such as anabolic, antiseptic, astringent, cyanogenetic, demulcent, depurative, laxative, diuretic and emollient. It is used by traditional healers for purifying blood, anuria, biliousness, conjunctivitis, diarrhoea, gonorrhoea, itches and stomachache. The plant is a rich source of β sitosterols, flavonoids, alkaloids, glycosides and triterpenoids. Some of the identified flavonoids are quercetin, kaempferol, catechin and myricetin. Of the carotenoid, β -carotene, lutein, violaxanthin and zeaxanthin are important. Ethnopharmacobotanical studies investigating indigenous knowledge of medicinal plants among village people and tribal minorities reported Cynodon dactylon as one of the most frequently used medicinal plants. The juice of the plant is externally as

first aid to fresh cuts and wounds. The plant is a folk remedy for catarrhal ophthalmia, hysteria, epilepsy, insanity, chronic diarrhea, anasarca, calculus, carbuncles, cough, hypertension, snake bites, gout and rheumatic affections. It is bitter and sharp hot in taste, has good odor, works as laxative, brain and heart tonic, aphrodisiac, expectorant, carminative and is useful against grippe in children and for pains, inflammations and toothache. Numerous in vivo and in vitro activities and traditional uses have been noted., for example, anti-inflammatory, antimicrobial and antipyretic, cardioprotective, hepatoprotective, anti diabetic, hypolipidemic, anti-arrhythmic, broncho dilatory, anti cancer and chemo preventive, antioxidant, immunomodulatory and DNA protective, angiogenesis, protection from ionizing radiation-induced cytogenetic damage, nephrolithiasis, urinary problems, prostatitis and diuretic, wound and ulcer healing, stress-induced infertility, scorpion bite, mosquito larvicidal activity, anti helminthic, various gastrointestinal disorders and anti convulsant. It was also used to improve growth, immune activity and survival of tilapia fish in fishery sciences and as anthelmintic in veterinary sciences. Agrohomoepathic use was recorded in terms of its mother tincture having significant effect on radial growth of edible fungus. Cynodon dactylon was identified as one of the useful weeds in preparing homoeopathic drugs at Chhattisgarh, Madhya Pradesh, India. Regulatory standard of this drug has been mentioned as monograph in the 2nd volume of Homoeopathic Pharmacopoeia of India, 1974. This plant was identified as one of the potential sources of homoeopathic medicine. The drug was standardized by the Central Council for Research in Homoeopathy (CCRH) at its units in Hyderabad, Ghaziabad and Lucknow for pharmacognostic, physicochemical and pharmacological aspects. First homoeopathic proving of this drug was conducted by Dr. Jugal Kishore in 6X, 200X and mother tincture and later by CCRH in mother tincture, 30C and 200C potencies. Following that, clinical verifications were carried out by the CCRH and individual practitioners. Enough information about the drug along with its significance, though not evaporative, is given in some of the Homoeopathic Materia Medica.

Symptoms: [Information taken from-VERMEULEN F synoptic material medica 2; Liga medicorum homoeopathic internationalism LMHI; CHATTERJEE T. P., My random notes on some homoeo-remedies., MURPHY R., Homoeopathic remedy guide].

Head: Vertigo and trembling, worse with exertion, motion, or reading., better lying down with eyes closed. Right-sided bursting headache, occipital and nape pain., throbbing in frontal and occipital regions, worse with exertion., relieved by lying down, pressure, or sleep.

Respiratory: Thick yellow coryza, dryness and sore throat., frequent sneezing, watery nasal discharge, nasal crusts. Dry cough, worse in cold air., ameliorated by warmth and hot drinks. Epistaxis, bright red, worsened by sun heat.

GIT: Increased appetite. Abdominal distension with offensive flatus. Constipation with heaviness., diarrhea watery and offensive. Burning in anus after stool.

Rectum: Bleeding, swollen piles., dry, hard stool. Watery diarrhea with frequent, burning stools.

Female Complaints: Profuse, bright red, or clotted menses., menorrhagia during menopause. Painful menses, worse bending forward. Leucorrhea reddish. Weakness and numbness in extremities.

Urine: Hematuria, with or without pain., associated with trauma to the urinary tract.

Mind: Irritable, anxious, quarrelsome and melancholic. Confused, forgetful, or talkative. Prefers solitude but desires company. Weak memory, restlessness, lethargy.

Generals: Thermally ambithermal. Desires warm, spicy, and oily food. Aversion to sour, milk and fried food. Bleeds easily., right-sided affections. Tongue varied-coated, dry, or clean.

MATERIALS AND METHODS

Study type was Randomized control trials 46 female patient suffering from menorrhagia were selected on the basis of menorrhagia assessment scale and clinical observation done by the physician were divided in 2 groups. Group 1(odd group) were receiving Cynodon dactylon. mother tincture along with homoeopathic indicated medicine and Group 2(even group) were receiving homoeopathic indicated remedy alone based on totality of symptoms and then both the groups were compared to note the improvement.

Inclusion Criteria:

- Female Patient suffering from menorrhagia with or without underlying pathology.
- Female patient of age group 15-55 years of age.
- Patients who are willing to give consent.

Exclusion Criteria:

- Lactating females.
- Patient with malignant disorder.

Participants: 46 enrollment of female patients of age group 15-55 years was done by using pictorial blood assessment chart and on basis of clinical observation Group 1-23 cases Treated with Cynodon dactylon

mother tincture along with homoeopathic indicated medicine. Group 2-23 cases treated with homoeopathic indicated medicine alone. Follow up and Comparison of improvement of both the group. Positive result when menorrhagia complaint is reduced in patient. Negative result when there is no change in menorrhagia complaint.

Treatment: Group 1(odd)-Cynodon dact. mother tincture along with homoeopathic indicated remedy. Follow up was taken every 15 days or 1 month according to patient's symptom severity and accordingly repetition and prescription was done. Group 2-homoeopathic indicated medicine alone. Follow up was taken every 15 days or 1 month acc. to patients symptom severity and according to that prescription was done.

RESULTS AND DISCUSSIONS

Homoeopathic Medicine Cynodon D. Mother tincture along with homoeopathic indicated medicine is more effective in reducing the intensity of symptoms of menorrhagia age group of 15-55 yrs. of age than homoeopathic indicated medicine alone. Group 1 Cynodon Dactylon mother tincture along with homoeopathic indicated medicine: Improved-19 (83%)., not improved-4 (17%)Group 2 homoeopathic indicated medicine alone: Improved-18 (78%): Not improved-5 (22%). With the help of QOL i.e. Quality of life scale by WHO, after calculating it is seen that before treatment the mean percentage range was from 29.19-72.71% and after 6 follow ups the mean percentage range is from 40.43-79.57%. So we interpret the quality of life of female is average before as well as after the treatment^[6-12].

Table 1: Case Result-Homoeopathic Indicated Medicine Alone

Result	Patients	Percentage
Improved	18	78%
Not Improved	5	22%

Table 2: Case Result-Homoeopathic Medicine Cynodon D. Mother Tincture Along with Homoeopathic Indicated Medicine

Result	Patients	Percentage
Improved	19	83%
Not Improved	4	17%

Menorrhagia which comes under the topic of abnormal uterine bleeding, is one of the most common problem female suffer. It is cyclic bleeding at normal intervals, the bleeding is either excessive in amount >80 ml or of >7 days or both. Most common causes being fibroid of uterus, endometriosis, chronic tubo-ovarian mass, retroverted uterus, Polyp, malignancy, PCOS, IUD other condition which can lead to it. Usually diagnosis is made on the basis of duration of flow, passage of big clots, number of sanitary pads used, pallor, low hemoglobin level. Menorrhagia can lead to severe discomfort, disruption of daily activities and even anemia due to excessive blood loss.

Table 3: Most Frequently Repeated Medicines

Homeopathic medicines	Natrum Mur	Phosphorus	Sulphur	Pulsatilla	Calcarea Carb	Nux Vomica	Staphysagria
Frequency of repetition	11	6	6	4	2	2	2

Recognizing the signs and symptoms of menorrhagia is crucial for early detection and appropriate treatment. The conventional treatment in modern medicine is Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, can help alleviate pain and reduce bleeding. Hormonal therapies, including oral contraceptives, hormonal IUDs, or progestin medications, may be prescribed to regulate the menstrual cycle and reduce excessive bleeding. In cases where medications do not provide sufficient relief, surgical options such as endometrial ablation, myomectomy (removal of fibroids), or hysterectomy may be considered, depending on the severity of the condition and the patient's preferences. Certain lifestyle changes can complement medical interventions^[13]. These include maintaining a healthy diet rich in iron and other essential nutrients, managing stress levels, regular exercise and using high-absorbency menstrual product'. Homoeopathic treatment of Menorrhagia is based on symptom similarity and constitution. A thorough case taking and finding the similimum from the patients totality is done. The usually prescribed medicines are Phosphorus, Natrum Muriaticum, Pulsatilla, Sulphur. There is a lack of research on homoeopathic medicine Cynodon dactylon in general as well as in menstrual complaints. So to observe and note the efficacy of homoeopathic medicine Cynodon dactylon mother tincture in females suffering from menorrhagia. So we have undertaken research with aim of finding out comparison between the effectiveness of specific Homoeopathic Medicine Cynodon dactylon (In Mother tincture form) Along with indicated Homoeopathic Medicine and Homoeopathic indicated Medicine alone in cases of menorrhagia in age group 15-55.

Scales that were Used by us in this Study were:

- Pictorial Blood Assessment chart^[14].
- Quality of life by WHO^[15].

So we took patients from MHMC OPD, Health Camps and Private Homoeopathic clinic. To conduct this study we enrolled 46 cases. Group 1 of 23 cases are the one who are treated with Cynodon dact. Mother tincture along with Homoeopathic indicated Medicine [odd]. Group 2 of 23 cases are the one who are treated with Homoeopathic indicated Medicine alone [even]. With the help of Both Scale, clinical observation and case record forming Data of cases were collected. The QOL i.e. Quality of life scale by WHO comprises of 26 questionnaires with 4 Domains in them [Physical Health, Psychological Health, Social Relationship and Environment]. This scale doesn't Have any kind of cut off value to define which obtained score means what

Quality of life an individual have. So by self analysis The decided Range was Value around '0' means POOR quality of life; Value around '50' means average or moderate quality of life and value near '100' means good quality of life. And the 2nd Scale which is made for assessment of Blood loss during menstrual cycle is calculated with the summation of score obtained from adding points for Pad used. Based on the totality of symptoms the Homoeopathic similimum was prescribed to Group 1 and Group 2 both., with Cynodon dact. Mother tincture to group 1. After studying 23 cases of Group 1 ie. Cynodon dactylon and indicated we observed 19 cases were improved and 4 cases were Not improved. After Studying 23 case of group 2 i.e. Indicated Medicine alone 18 cases were improved and 5 cases were Not improved. And in group 1 i.e. in Cynodon along with indicated Medicine group, patient require less repetition and change of indicated remedy. While other group have more remedy repetition i.e. Group 2. According to data collected, Statistical analysis was done using unpaired t-test. Using unpaired t-test, calculated t value was-0.12 which is smaller than table value so we rejected Null Hypothesis and accepted alternative hypothesis, so that Homoeopathic medicine Cynodon dact. Mother tincture along with homoeopathic indicated medicine group, it is more effective than homoeopathic indicated medicine alone.

The Limitations we Faces in Our Study was that:

- The study was conducted on small sample size.
- The duration of study was not sufficient to observe major changes in cases of Menorrhagia.
- In few cases the individualized homoeopathic medicine had to be changed because of no improvement seen in subsequent follow ups. Thus, we need to rediscover the individualized homoeopathic medicine if no improvement is seen.

As we have seen that the symptomatic treatment is the only mode of treatment in conventional or modern medicine And Homoeopathic management has shown to be effective as it not only include disease symptoms but consider individual as whole. So, our study has reinforced that individualized Homoeopathic medicine and Cynodon dactylon mother tincture shown to be significantly effective in cases of Menorrhagia. We believe that this study will be useful in future studies.

CONCLUSION

The study highlights the significant therapeutic potential of combining Cynodon dactylon mother tincture with homeopathically indicated medicines in

the treatment of menorrhagia. The findings suggest that this integrated approach is more effective than the use of homeopathically indicated medicines alone. This indicates that *Cynodon dactylon* mother tincture may exert a synergistic effect when used as an adjunct to other homeopathic remedies, enhancing their efficacy and contributing to improved clinical outcomes. This integrated therapeutic strategy may offer improved symptom management and faster recovery, promoting overall patient well-being. The findings underscore the importance of adopting combination approaches in homeopathy, where specific mother tinctures, like *Cynodon dactylon*, can augment the therapeutic impact of individualized remedies. Furthermore, the study reinforces the need to explore the potential of mother tinctures in enhancing the efficacy of conventional homeopathic treatment. By integrating complementary remedies like *Cynodon dactylon*, practitioners can optimize treatment outcomes, leading to better patient satisfaction and health improvement. This approach not only aligns with the holistic principles of homeopathy but also emphasizes the importance of evidence-based practices in modern homeopathic research and treatment strategies. Future studies should further investigate the mechanisms underlying this synergistic effect, the optimal dosing regimens, and its applicability to other conditions, thus contributing to the advancement of homeopathic therapeutics.

REFERENCES

1. Nagar G, R. Mehta and K. Saraswat. Effectiveness of combined approach of giving homeopathic constitutional remedies along with *Ferrum metallicum* 6X in management of cases of menorrhagia: A case series.
2. Kujovich JL, 2005. Von Willebrand's disease and menorrhagia: prevalence, diagnosis and management. *Am J Hematol*. 79:220-978.
3. Manchanda R, P. Chakraborty, P. Singh, P.K. Pradhan, V.G. Prasad and O. Singh, *et al.*, 2016. A multi centre, observational, homeopathic clinical verification study of *Cynodon dactylon* revealing symptom prevalence in a cohort of 340 patients. *Indian J Res Homoeopathy*. 10:225-37.
4. Das M.C, S. Shama and S Chandra, 2013. Overview of *Cynodon dactylon* (Doob grass) in modern medicine as antidiabetic herb. *J Drug Deliv Ther*. 3:117-20.
5. Roychowdhury J, S. Chaudhuri, A. Sarkar and P.K. Bisceas, 2008. A study to evaluate the aetiological factors and management of puberty menorrhagia. *Online J Health Allied Sci*. 7.
6. Andrew AC, L J, K J, O S, S M, S F, 1995. Managing menorrhagia. *Qual Health Care*. 41:215.
7. Protheroe J. And C. Chew-Graham, 2005. The role of primary care in the diagnosis and management of menorrhagia: A qualitative study of women with menorrhagia. *Prim Health Care Res Dev*. 6:217-23.
8. Shaikh M. And R. Desarda, 2021. Heavy menstrual bleeding and homeopathic management. *Int J Homoeopath Sci*. 5:898-300.
9. Siddabathina UD, 2021. Abnormal uterine bleeding and its homeopathic approach. *Int J Homoeopath Sci*. 5:86-91.
10. Dutta DC., Textbook of Gynaecology. 6th ed. New Delhi: Jaypee Brothers; p. 172.
11. Khan RL. Textbook of Gynaecology. 3rd ed. New Delhi: Elsevier; p. 172-3.
12. Shaw WF. Shaw's Textbook of Gynaecology. 12th ed. Edinburgh: Churchill Livingstone; p. 93.
13. Sharma P, C.H. Malhotra, T. Saha and R. Saha,. Problem related to menstruation among young women.
14. Wiley and Sons., Pictorial assessment chart and scoring system for assessment of menstrual blood loss.
15. World Health Organization (WHO). Quality of Life Scale-Brief.