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“Efficacy of Triphala Lodhra Kwath Yonidhawan and Yastimadhusiddha Ghrita Pichu Dharana in Swetapradara (with special reference to leucorrhoea).

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Abstract:

Background: Woman - (The foundation not only of progeny but also of the family life.) Maharashi Kashyap. Any excessive discharge from vagina is called as Pradar. Reproductive system of Female is very active, cyclical in nature, undergoing constant changes, have tremendous impact on life – physical, Physiological, Psychologies & Social too. In day-to-day gynae practice, we come across many patients of Shwetpradara including yonigata shwetsrava in various yonivyapadas, so I decided to study efficacy of Triphalalodhra kwath yonidhawan and Yastimadhusiddha ghrita pichudharana in shwetpradar. **Method :** Total 60 no. of patients visiting OPD & IPD of LK Ayurved hospital Yavatmal are studied and they are divided into two groups. Group A having 30 patients are treated with Triphala Lodhra kwath Yonidhawan and Yastimadhusiddha ghrita pichudharan with conservative treatment. Group B having 30 patients are treated only with conservative treatment. Conservative treatment given as Ashok & Lodhra Churna in Samapraman 5 gm twice daily for 7days. **Conclusion:** Sthanik Chikitsa of Triphalalodhra yonidhavan & Yastimadhusiddha ghrita pichudharana in shwetapradara is very effective than conservative treatment. **Key-words:** Shwetpradara, Yonivyapada, Triphalalodhrakwath-yonidhawan, Yastimadhusidha pichudharana.

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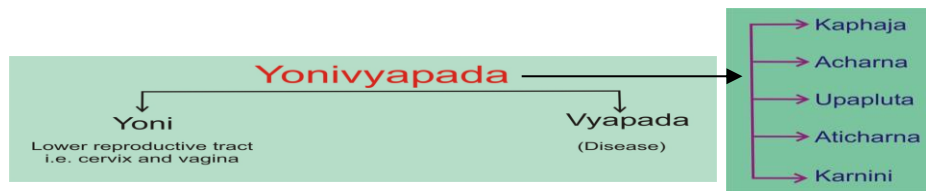
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INTRODUCTION:

Woman - (The foundation not only of progeny but also of the family life.) Maharashi Kashyap. Any excessive discharge from vagina is called as Pradar. Reproductive system of Female is very active, cyclical in nature, undergoing constant changes, have tremendous impact on life – physical, Physiological, Psychologies & Social too. All clinical entities or diseases afflicting the reproductive tract in female are grouped as Yonivyapada.



Etiology & Pathology

Kapha & Vata are predominant factors in all these disorder -

Kapha & Vata are predominant factors in all these disorder – Kapha prakopa Occurs at

- i) Kapha kalas
 - a) In hemant and vasanta rutu
 - b) early in morning and early in evening
 - c) Immediately after taking for
 - d) in later half of rutukala
 - e) Garbhini awastha
 - f) At time of transformation from bala to Taruni epoch
- ii) Excessive in take of Carbohydrate and fats i.e. obesity.
- iii) Rasa disorders.

Leucorrhoea

An excessive normal vaginal discharge. Normal Vaginal Fluid is watery, white in color, non-odorous with PH around 4.0 Microscopically it contains squamous epithelial cells & few bacteria. Doderlein bacilli, few gram –ve bacteria & anarobes are present without any white or red blood cells.

Pathophysiology:

The excessive secretion is due to-

- 1) Physiological excess conditions – estrogen level become high.
 - a) During puberty
 - b) During menstrual cycle

- c) Pregnancy
 d) During Sexual excitement – Bartholin’s gland secretions
 2) Cervical Cause – Cervical ectopy, chronic cervicitis, Mucosal polyp & ectropion
 3) Vaginal Cause – Prolapse, Use of Pills, ill health with excessive exfoliation of superficial cells.

Even today the cases of leucorrhoea are classified in 4 main categories, according to causation namely Trichomonal, Monolial or fungal, bacterial vaginosis & chronic cervicitis.

Diagnosis :

In all these conditions, darshan, sparshan and prashna are the main diagnostic tools

- 1) Prashan (History) - Menstrual, obstetric, sexual history & Symptoms
 2) Sparshan (Physical exam) - Bimanual exam to cote contour etc.
 3) Darshan - Visualization of cervix & vagina with Yonivranekshan Yantra (Cusco’s Speculum)

Types of Discharge -

- 1) Tanu (Thin) - Acharna
 2) Picchil (Mucoid) - Kaphaja
 3) Styana (Thick curdy) Pandu (pale milky) - Upapluta
 4) Avil tantul (mucopurulent) - Aticharana

Sign & Symptoms :

Yonivyapad	Kaphaja (Bacterial Vaginitis)	Acharana (Trichomonal)	Upapluta (Monolial)	Aticharana (Chronic cervicitis with erosions) Karnini
Vagina	Cool, Slippery	Inflammation, germs	Pale	Shopa, manasotsedha karnika
Dicharge	Pale, Slimmy	Thin frothy	Profuse Pale milky or white mucoid	Mild pale or profuse mucopurulent
Symptoms	Mild pruritis, pain may be or may not be	Pruritis ++, swelling, Atinarkanksha Irritation	Numbness Backache	Numbness, Backache, Impaired fertility

Treatment – 1) Ayurvedic 2) Modern

Clinical Study :**Aims & objects**

- 1) To study efficacy of Triphala lodhara Kashaya yonidhavan & Yastimadhusiddha ghrita pichudharan in swetpradara.
- 2) To rule our efficacy of this Sthanik Chikitsa which is most effective out of these 4 yonivyapad entities.
- 3) Time duration effectivity
- 4) To see adverse effect if any

Selection Criteria :

- 1) Patients age group selected from 18 yrs till 45 yrs. i.e. Nulliparous married women. Post childbirth period, parous women during child bearing period.
- 2) Self made drug (as easily available drugs) Kashaya & Siddha ghrita is used per vaginum in Rutukal only.
- 3) Only diagnosed, above four yonivyapad entities are selected. Patients with any allergic vaginal epithelial disorder are excluded.

Material & Method :**Drugs Review**

- 1) Material drugs – a) Triphala lodhra kashaya b) Yastimadhusiddha ghrita

Sr.No.	Drug	Rasa	Virya	Vipaka	Guna
1	Triphala	Madhur	Shita	Madhur	Ruksha, Kaphapitta nashak
2	Lodhra	Kashaya	Shita	Katu	Laghu Ruksha

Yastimadhusiddha ghrita –Mode of action :

Yastimadhusiddhaghrita is made as per Snehakalpana, Sharagdhara samhita, Madhyam Khanda Addhya no. nine) Yastimadhu has madhura rasa, sheeta virya, madhura vipaka and is vatapitta shamaka, vranashodhan, vranaropaka properties.

Mode of action :**1) Triphalalodhra decoction Yonidhavan :**

Mode of administration – Prathamavarta

Matra 80 – 100 ml.

Treatment duration – 8 days in Rutukala

Time – 1 – 1.5 min.

2) Yastimadhusiddha ghrita pichudharana:

Tampoon of Yastimadhusiddha ghrita is use for 8 days in rutukal - Kaphaghna, pungent,

Astringent taste

These drugs act as shodhan, shophaghna, vishada & Vranya, Dahaghna.

Method :

Total 60 no. of patients visiting OPD & IPD of LK Ayurved hospital Yavatmal are studied and they are divided into two groups.

Group A – 30 patients are treated with Triphala Lodhra kwath Yonidhawan & Yastimadhusiddha ghrita pichudharan with conservative treatment.

Group B – 30 patients are treated only with conservative treatment.

Follow up – For two months

Conservative treatment – Ashok & Lodhra Churna in Samapraman 5gm twice daily for 8 days for both groups.

Observations & Results :**General Observation**

1) Sex wise – Shwetpradara is feminine disorder, so all patients in both group were naturally females.

2) Age wise –

Age group	Group A		Group B	
	No. of Pts.	%	No. Pts.	%
18-20	04	33.00%	04	33.00%
20-30	13	52.00%	12	48.00%
30-45	13	56.52%	10	43.47%

Shwetpradara mostly occurs between 20-30 yrs. Age group as it is most fertile period of female.

3) Economy status –

Economy	Group A		Group B	
	No. of Pts.	%	No. Pts.	%
Class				

Poor	13	50.00%	13	50.00%
Middle	10	43.47%	13	56.20%
Rich	07	31.00%	04	33.00%

4) Occupation wise –

Occupation	Group A		Group B	
	No. of Pts.	%	No. Pts.	%
Working women	08	36.36%	14	63.63%
House wives	22	57.89%	16	42.10%

Leucorrhoea occurs mostly in Housewives than the working women.

5) Prakriti wise –

Prakriti	Group A		Group B	
	No. of Pts.	%	No. Pts.	%
Vatapittaja	09	75.00%	03	25.00%
Pittakaphaja	05	45.45%	06	54.54%
Vatakaphaja	10	55.55%	08	44.44%
Pittavataja	02	50.00%	02	50.00%
Kapha Pittaja	03	27.27%	08	72.72%
Kaphavataja	01	25.00%	03	75.00%

Leucorrhoea occurs mostly in Vatakaphaja Prakriti than other dwandaj parakritis.

6) Diet wise–

Diet	Group A		Group B	
	No. of Pts.	%	No. Pts.	%
Vegetarian	08	36.36%	13	50.00%
Mixed	22	57.89%	15	50.00%

Shwetapadara occurs mostly in mixed diet group.

7) Yonivyapada wise –

Yonivyapada	Group A		Group B	
	No. of Pts.	%	No. Pts.	%
Kaphaja	06	60.00%	08	55.00%
Acharna	06	63.00%	04	60.00%
Atichama & karnini	13	80.00%	12	65.00%
Upapluta	05	70.00%	06	60.00%

Group Observations:

Observations	Before Treatment							After treatment
	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th
	Day	Day	Day	Day	Day	Day	Day	Day
A) Darshana								
1. Stravavarna								
2. Strava Matra								
3. Lesion Varna								
B) Sparshana								
4. Inflammation								

C) Prashna								
5. Kandu								
6. Pain								
7. Numbness								
8. Backache								

Here to measure the symptoms severity 4-point scale was used i.e. Severe, moderate, mild, Nil

- 1) Severity was marked as +++ & measured by value 3
- 2) Moderate was marked as ++ & measured by value 2
- 3) Mildness was marked as + & measured by value 1
- 4) Nil is marked as -- & measured by value 0

To test that Sthanik chikitsa with conservative treatment is shwetpradara is effective than only conservative treatment. We simple take mean in (%) after treatment values of each symptoms grouped together such as -

Sr. No.	Symptoms	Group A (%)	Group B (%)
1	Strava varna	80	50
2	Strava matra	90	60
3	Lesion varna	70	50
4	Inflammation	75	60
5	Kandu	90	60
6	Pain	80	60
7	Backache & Numbness	60	50

Discussion :

In 20-30 yrs. Age group patients, swetapadara most common & showed factor improvement as compared to other age group. Poor class patients in study showing little one improvement were more prone to leucorrhoea because of unhygienic conditions, and still there were only 11 rich class patients shows mild improvement because of causative factors as lack of exercise, obesity, their lifestyle as compared to poor & middle class group. Housewives are mostly affected than working woman due

to above mentioned similar causative factors. Clinical features of leucorrhoea mostly occurred in vatakaphaja Prakriti than other dwandaja prakriti. Varna of lesions & stravamatra showed very fast improvement in trial group A within 7 days. Group A showed more results than Group B patients specially in stravaswarupa, matra, varna, inflammation symptoms. Group A patients, 7 days sthanik chikitsa with conservative treatment does not show any side effect within 2 month follow up. Disadvantage of this sthanik chikitsa is that Daily fresh kashaya has to use & Patient has to visit hospital daily for procedure. by above analysis, efficacy of Triphalalodhra kwath & Yastimadhusiddha ghrita pichudharana in shwetpradar is more as compared to the conservative treatment only. As kaphaprapakopaka Aahar, Ativyavaya, lack of exercise are causative factors for increasing shwetapradara lakshanas. In present study, vegetarian ladies got more improvement than non-vegetarian patients for shwetapradara treatment.

Action of Triphalalodhra kwath yonidhawan and Yastimadhusiddha ghrita pichudharana on shwetpradara :

Triphala madur, Kashaya rasa which is kaphapittanasaka decreases kledadhikaya, diminishing kapha & absorbing water, so rasadhatu dusti get suppressed while laghu, ruskha guna of lodhra & triphala is suppressed by snehana karma of yastimadhusiddha ghrita. In shwetpradara, Aapmahabhutadhikya distrubs Rasadusti proportion at female lower reproductive tract i.e. cervix & vagina get normalised due to tridoshnashak triphala & astringent lodhra. So, sthanvaigunya normelises & aapmahabhutadhikya get suppressed due to kaphavatashamak, karma of triphala & snigdhtwa & vranropakatwa shophaghna Vishada, varnya karma of Yastimadhusiddha ghrita pichu. As per Ayurvedic and modern view by observation obtained from 60 patients clinical study within my limit. As, in Brihatrayi, there is no reference about the word Pradara/ Shwetpradara.

Conclusion :

Sthanik Chikitsa of Triphalalodhra yonidhavan & Yastimadhusiddha ghrita pichudharana in shwetapradara is very effective than conservative treatment. Following auxiliary mode of treatment becomes supportive to improve results. This treatment does not show any adverse effect during two months follow up. This treatment is most effective in Cervical erosion (Aticharana & Karnini Yonivyapada).

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