

A REVIEW ARTICLE: UNDERSTANDING ACHARANA YONIVYAPADA THROUGH
AYURVEDIC AND CONTEMPORARY PERSPECTIVES¹Dr. Akanksha Shukla, ²Dr. Richa Jaiswal¹Post Graduate Scholar, Department of Prasuti Tantra and Stri Roga, Chandra Shekhar Singh Ayurvedic Sansthan, Kaushambi, Uttar Pradesh, India.²Assistant Professor, Department of Prasuti Tantra and Stri Roga, Chandra Shekhar Singh Ayurvedic Sansthan, Kaushambi, Uttar Pradesh, India.***Corresponding Author: Dr. Akanksha Shukla**Post Graduate Scholar, Department of Prasuti Tantra and Stri Roga, Chandra Shekhar Singh Ayurvedic Sansthan, Kaushambi, Uttar Pradesh, India. DOI: <https://doi.org/10.5281/zenodo.20963367>**How to cite this Article:** ¹Dr. Akanksha Shukla, ²Dr. Richa Jaiswal (2026). A Review Article: Understanding Acharana Yonivyapada Through Ayurvedic And Contemporary Perspectives. World Journal of Pharmaceutical and Medical Research, 12(7), 113-116.

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ABSTRACT

Yoni Shuddhata, referring to the cleanliness and physiological integrity of the female reproductive system, is regarded in Ayurveda as a crucial factor for ensuring healthy progeny. Classical Ayurvedic literature describes twenty distinct types of Yoni Vyapad, which broadly encompass various gynecological disorders affecting women. These conditions have a significant impact on physical comfort, psychological well-being, and overall quality of life. Among these disorders, YonivyapadAcharana holds particular clinical importance due to its close resemblance to the modern condition known as pruritus vulvae, characterized by itching of the vulvar region. Epidemiological observations suggest that approximately 10% of women visiting gynecological out patient departments report symptoms of vulvar itching. Conventional management of pruritus vulvae typically includes the use of antibiotics, antifungal agents, and corticosteroids. However, prolonged or inappropriate use of these therapies may lead to adverse effects, including disruption of the normal vaginal microbiota and alteration of the physiological environment of the vagina. In Ayurvedic perspective, AcharanaYonivyapad is primarily attributed to improper hygiene practices, leading to the vitiation of Vata and KaphaDosha. This imbalance creates a favorable environment for the proliferation of Krimi (microorganisms). The condition manifests with symptoms such as yoni kandu (itching), yoni srava (discharge), yoni daurgandhya (foul odor), yoni shoola (pain), yoni shotha (inflammation), and mutrakrichra (dysuria). Therefore, therapeutic approaches aimed at pacifying vitiated Vata and Kapha, along with agents possessing Kandughna (anti-pruritic) and Krimighna (antimicrobial) properties, are considered effective in the management of this condition.

KEYWORDS: Yoni Shuddhata, Acharana Yonivyapada, Pruritus Vulvae, Kandughna, Krimighna.**INTRODUCTION**

AcharanaYonivyapad is described in classical Ayurvedic literature as an important gynecological disorder, though its interpretation varies among different Acharyas. AcharyaCharaka has classified it under VatajaYonivyapad. However, its predominant clinical manifestation—kandu (itching)—is typically associated with KaphaDosha. This indicates a combined involvement of Vata and Kapha, along with a significant contribution of Krimi (microbial factors) in its pathogenesis.

The term Acharana is derived from the root word “Charana,” which denotes conduct or activity, particularly sexual activity (maithuna). The prefix “A” implies negation, suggesting absence of sexual desire. Interestingly, this literal meaning contradicts the clinical presentation, where patients often exhibit atyadhikamaithunechha (increased sexual desire). This paradox highlights the complexity of the condition.

AcharyaVagbhata describes a similar condition under the term Vipluta, meaning disturbed, agitated, or excited. This terminology appears more clinically appropriate, as the disorder is associated with irritation, restlessness, and

abnormal sensations in the genital region, often resulting from unhygienic practices. Both Charaka and Vagbhata emphasize excessive itching as a key symptom.

In contrast, Acharya Sushruta presents a different viewpoint, associating the condition with sexual incompatibility, particularly discordance in the timing of climax between partners. This may interfere with proper fertilization and potentially contribute to infertility. Dalhana further elaborates that excessive excitation or persistent itching during coitus may hinder sperm retention, thereby affecting conception.

ETIOLOGICAL FACTORS (NIDANA)

Lack of health awareness, poor hygiene, and illiteracy are major predisposing factors for *AcharanaYonivyapad*. Maintenance of genital hygiene plays a crucial role in preventing this condition. Regular bathing and proper cleansing and drying of the external genitalia after urination and defecation are essential preventive measures.

The vulvar region, including the mons pubis, is prone to sweating, which creates a moist environment conducive to the growth of *SwedajaKrimi* (organisms thriving in sweat). Such conditions facilitate the proliferation of microorganisms, including bacteria and parasites like *pediculosis*, leading to itching and inflammation.

Additionally, the use of irritants such as vaginal deodorants, contraceptive creams, pessaries and douches may disrupt the natural vaginal flora and secretions. This disturbance creates a favorable environment for pathogenic microorganisms, including fungi and bacteria, thereby aggravating the condition.

PATHOGENESIS (SAMPRAPTI)

In *AcharanaYonivyapad*, unhygienic practices lead to vitiation of *Vata* and *KaphaDosh*. This imbalance creates a suitable environment for the growth and proliferation of *Krimi*. It is important to note that without *DoshaDushti*, *Krimi* alone cannot manifest disease.

The vitiated *Vata* and *Kapha* facilitate microbial colonization, which in turn affects the *Dhatus*—primarily *Twak* (skin), *Rakta* (blood), and *Mamsa* (muscle tissue). This results in structural and functional disturbances, manifesting as itching, discharge, and inflammation.

SAMPRAPTI GHATAKA

Dosha: Vata, Kapha

Dushya: Rasa, Rakta, Mamsa, Twak

Adhithana: Yoni

Srotas Involved: Rasa, Rakta, ArtavavahaSrotas

Srotodushti: Atipravritti

Rogamarga: Abhyantara

Sihanamashraya: Yoni region

PratyatmaLakshana: Kandu (itching), Kleda (moistness), Shotha (inflammation).

Although classical texts outline these components of pathogenesis, the exact sequence of pathological events remains difficult to observe directly, making the understanding of disease progression largely inferential.

CLINICAL FEATURES

The two principal symptoms of *AcharanaYonivyapad* are.

Yoni Kandu

An intense and persistent itching sensation affecting the vulva and vaginal mucosa, often leading to scratching and irritation.

Atyadhika Maithunechha (Excessive sexual desire)

The itching sensation stimulates the clitoral region, temporarily relieved by friction, thereby increasing sexual urge.

Associated Symptoms

Yoni Shotha (inflammation)

Yoni Srava (discharge)

Daha or burning sensation during micturition

Dyspareunia (painful intercourse)

AYURVEDIC MANAGEMENT

AcharanaYonivyapada is primarily attributed to improper hygienic practices, which lead to the vitiation of *Vata* and *Kaphadoshas*. This altered internal milieu creates a favorable environment for the proliferation of *Krimi* (microorganisms), ultimately resulting in the manifestation of disease. One of the clinical features is *Yoni Kandu* (pruritus vulvae), often associated with *Yoni Shrava* (vaginal discharge), *Yoni Daurgandhya* (foul odor), *Yoni Shoola* (pain), *Yoni Shotha* (inflammation), and *Mutrakrichha* (dysuria).

The line of management is fundamentally based on the principle of *SampraptiVighatana* (breaking the pathogenesis). Therapeutic interventions that pacify aggravated *Vata* and *Kaphadoshas*, along with possessing *Kandughna* (anti-pruritic) and *Krimighna* (antimicrobial) properties, are considered highly effective in the management of this condition.

From a pharmacological perspective, drugs are selected based on their ability to alleviate *Vata* and *Kapha* imbalance and to exhibit *Krimighna* and *Kandughna* actions. Classical texts such as *Yogaratanakara* recommend *Yoni Prakshalana* (local vaginal cleansing) using decoctions like *Guduchi*, *Triphala*, and *Danti Kwatha* for effective management of *Yoni Kandu*.

The drug selected for the clinical trial is *UdumbaradiTaila*, which contains ingredients such as *Panchavalkala*, *Jati*, *Patola*, *Nimba*, *Laksha*, *Shalmali*, *Palasha*, and *Dhataki*. These drugs are collectively known for their *Kashaya rasa*, *Krimighna* (antimicrobial), *Kandughna* (anti-pruritic), *Shothahara* (anti-inflammatory), and *Ropana* (healing) properties.

The formulation is administered in the form of *Yoni Pichu* (intravaginal medicated tampon), which allows prolonged local contact and enhances therapeutic efficacy at the site of pathology.

Classical references from CharakaSamhita indicate the use of these drugs in the management of conditions such as Pichila Yoni, Vivrita Yoni, and Daruna Yoni, where abnormal vaginal discharge (Yoni Srava) is acinical feature. The astringent and antimicrobial actions of the ingredients help in reducing excessive discharge, controlling infection, alleviating itching, and restoring the normal vaginal environment.

DISCUSSION

AcharanaYonivyapada, as described in classical Ayurvedic texts, represents a multifactorial gynecological disorder in which *AhitaAcharana* (improper conduct), especially poor genital hygiene, plays a central etiological role. The condition closely correlates with *pruritus vulvae* in contemporary gynecology, where persistent vulvar itching is often associated with infection, irritation, or altered local environment.

From the Ayurvedic standpoint, the pathogenesis involves predominant vitiation of *Vata* and *KaphaDosh*, along with the secondary involvement of *Krimi*. *Kapha* contributes to *Kleda* (moisture), *PicchilaGuna* (stickiness), and excessive discharge, creating a suitable medium for microbial proliferation. Simultaneously, *Vata* is responsible for *Kandu* (itching), *Toda* (pricking sensation), and discomfort. This dual Dosh involvement explains the persistence and recurrence of symptoms such as itching, discharge, inflammation, and foul odor.

The concept of *Yoni Kandu* (genital pruritus) can also be understood through the stimulation of *KandughnaNadi* (itch perception pathways), where continuous irritation leads to a vicious cycle of itching and scratching. This further damages local tissues (*TwakDushti*) and predisposes to secondary infections. The classical descriptions of *AtyadhikaMaithunechha* may be interpreted as a reflex response to persistent local stimulation and irritation.

Management in Ayurveda is centered on the principle of **SampraptiVighatana**, aiming to break the pathological sequence at multiple levels—Dosh, Dushya, and Srotas. In this context, local therapies play a crucial role due to the accessibility of the site (*Yoni* as Adhithana).

The use of **Udumbaradi Taila** in the form of *Yoni Pichu* provides sustained local drug delivery. The ingredients such as *Panchavalkala*, *Nimba*, *Jati*, *Patola*, *Palasha*, *Shalmali*, and *Dhataki* possess predominantly *Kashaya Rasa*, which is effective in *KledaShoshana* (reducing moisture) and controlling excessive discharge. Their *Krimighna* (antimicrobial), *Shothahara* (anti-

inflammatory), and *Ropana* (healing) properties contribute to restoration of local tissue integrity and reduction of symptoms.

In addition, the application of **Guduchidantyadi Malahara** enhances therapeutic outcomes. **Guduchi** is known for its immunomodulatory and anti-inflammatory actions, which help in reducing tissue hypersensitivity and promoting healing. **Danti** exhibits *Krimighna* and detoxifying properties, aiding in the control of microbial growth. The topical application of this malahara provides immediate relief from itching and irritation, thereby interrupting the itch–scratch cycle.

The combined use of **UdumbaradiTaila** (as *Yoni Pichu*) and **GuduchidantyadiMalahara** offers a **comprehensive and synergistic approach**. While the taila acts internally at the mucosal level by correcting *Dosha* imbalance and promoting healing, the *malahara* acts externally to provide symptomatic relief. This dual mechanism aligns well with both classical Ayurvedic principles and modern therapeutic needs.

Compared to conventional treatments such as antifungals and corticosteroids, Ayurvedic interventions offer the advantage of minimal side effects and better suitability for long-term management, especially in recurrent cases. Furthermore, they help restore the natural vaginal environment rather than merely suppress symptoms.

CONCLUSION

AcharanaYonivyapada is a significant gynecological disorder characterized predominantly by *Yoni Kandu*, arising due to improper hygiene practices and the vitiation of *Vata* and *KaphaDosh*. The involvement of *Krimi* further aggravates the condition, leading to symptoms such as discharge, itching, inflammation, and discomfort.

The Ayurvedic approach, based on **SampraptiVighatana**, provides a rational and holistic framework for management. The use of **UdumbaradiTaila** in the form of *Yoni Pichu* and **GuduchidantyadiMalahara** as a topical application demonstrates effective control over both the root cause and clinical manifestations of the disease. These formulations, owing to their *Kandughna*, *Krimighna*, *Shothahara*, and *Ropana* properties, help in alleviating itching, reducing discharge, controlling infection, and restoring *Yoni Shuddhata*.

Thus, this integrative therapeutic approach not only offers symptomatic relief but also improves local tissue health and reduces recurrence, making it a promising and sustainable option in the management of *AcharanaYonivyapada* (pruritus vulvae).

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CONFLICT OF INTEREST

The authors declare no conflict of interest.

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