wjpmr, 2023, 9(12), 60-63

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WORLD JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.wjpmr.com

SJIF Impact Factor: 5.922

<u>Review Article</u> ISSN 2455-3301 WJPMR

A REVIEW ON PRASRAMSINI YONIVYAPAD

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Article Received on 27/09/2023

Article Revised on 18/10/2023

Article Accepted on 08/11/2023

ABSTRACT

The health of women's reproductive organs is essential for a healthy life. Even though pregnancy and childbirth is a wonderful process of life, a female body is subjected to both wear and tear during this and it takes a long time to revert back to normal state. Due to negligence or lack of awareness, a female suffers with many gynaecological diseases throughout her life cycle out of which prolapse of reproductive organ is one of them especially seen among parous women. *Prasramsini* is one of the twenty *Yonivyapad* mentioned in *Ayurvedic* classics. It was first explained by *Acharya Sushrut* and placed under *Pittaja Yonivyapad* but as no *Yonivyapad* can occur without the involvement of *Vata dosha* so it can be considered as *Vata anubandhi Pittaja Yonivyapad*. It is a condition in which there is displacement of *Yoni* from its place occurs along with vaginal discharge and difficulty in labour due to abnormality of birth passage. It may be co-related with first and second degree utero-vaginal prolapse. *Nidana, samprapti, purvarupa, rupa, vibhedak nidana, upadrava, sadhya-asadhyata, chikitsa* and *pathya-apathya* of *Prasramsini Yonivyapad* is described in detail in this article.

KEYWORDS: Prasramsini Yonivyapad, utero-vaginal prolapse.

INTRODUCTION

Prasramsini is one of the twenty *yonivyapad* which was first described by *Acharya Sushrut* under *pittaja yonivyapad*. Description of *Prasramsini yonivyapad* is found in *Sushrut Samhita*, *Madhav Nidan*, *Bhava Prakash* and *Yogaratnakar*.

ETYMOLOGY

Prasramsini is derived from the word "*sransi*" which means to fall down from its place or hanging down or being loosened.

DEFINITION

As per *Acharya Sushrut*, any irritation causes excessive vaginal discharge or displacement and labour is difficult or abnormal along with that features of *pitta* vitiation are present.^[1]

Dalhana explained that, *syandate* means *sravati* (vaginal discharge), *kshobhita* means *sanchalita* (irritation or displacement), *duhprasuscha* means *dukhena prasuyate* (difficult labour) and lakshana of pitta vitiation.^[2]

Madhav Nidan^[3], *Bhava Prakash*^[4] and *Yoga Ratnakar*^[5] explained that when there is displacement, excessive discharge, difficult labour and *pitta* vitiation features.

In *Madhukosa* commentary, it is explained that *sransana* means displaced from its own place or protrudes outwards and *kshobhana* means compression or irritation which means after compression the *yoni* is prolapsed or displaced.^[6]

SAMANYA NIDAN

As per *Acharya Charak*, abnormal dietetics and mode of life, abnormalities of *artava* and *beeja* and curses or anger of god are the causative factors of all *yonivyapad*.^[7]

Chakrapani explained that *mithyachara* includes both abnormal diet and regimen, *beeja dosha* means *stri beeja dusti* and *daiva* means misdeeds of previous and present life.^[8]

Acharya Sushrut corroborating the views of Charak added that when a woman having *ruksha* (dry) body or else a weak or very young woman does excessive coitus with a man having big size penis, then her *vayu* gets aggravated. This *vayu* withholding *pitta* and *kapha* already vitiated due to their specific causes, reaches the region of *yoni* and produces various disorders.^[9]

Acharya Vagbhattas have added that abnormal diet, having coitus in abnormal posture of body, excessive

coitus and use of objects for sexual pleasure are also causes of diosrders of *yoni*.^[10,11]

The description of general aetiology in *Madhav Nidan* is same as that of *Charak*. *Madhukosa* elaborated that *pradusta artava* means *artava* or *raja* vitiated by *vatadi* dosha and *beeja dosha* means abnormalities of both male and female gametes.^[12]

Bhava Prakash and Yogaratnakar given the same description as Charak.

1. Mithyachara (abnormal diet and habit)

• *Mithya ahara* like inadequate and improper diet, *pittala* and *vatala ahara* (*katu, amla, lavana, kshara, vidahi, ruksha annapana*)

Improper diet may result in weakness in body and a weak body is more liable to any disease. Improper diet results in deficiency of various essential nutrients in body like minerals and vitamins which are essential for collagen tissue repair and for maintaining natural tone of ligaments and muscles supporting genital organs at place. Thus their deficiency is an important factor for utero-vaginal prolapse.

• *Mithya vihara* like lifting heavy weights, excessive physical works, multiparity, coitus in abnormal positions, abnormal labour.

All these factors mentioned above may cause direct injury to the genital organs further resulting in weakness of the supporting ligaments and muscles of the genital organs leading to utero-vaginal prolapse.

2. Pradusta artava

Here *artava* can be interpreted as hormones of female body. This factor includes the estrogen deficiency following menopause which causes laxity of pelvic floor predisposing prolapse. With the advancement of age, when menopause sets in the estrogen level comes down. As estradiol is the main hormone for maintaining the elasticity and tonicity of ligaments and muscles of genital organs, its deficiency results in laxity and atrophic changes of genital organs. This post-menopausal atrophy and poor collagen tissue repair with age acts as an aggravating factor for utero-vaginal prolapse.

3. Beeja dosha (Congenital abnormality)

It is one of the most important predisposing factor and explain its occurrence in multiparous as well as nulliparous women. During conception if there is vitiation of *doshas* in both *beeja* (female and male gametes) the *matruja* and *pitruja bhava* of developing fetus get *dushita* leading to *vikruti* in *beeja* and *beeja bhaga avayava* which may lead to defective formation of organ and its supporting system. Any abnormality of development may cause congenital weakness or absence of ligaments and muscles supporting genital organs. Defective nerve innervation is also a major cause of congenitally supports of genital organs.

4. Daivaja

Unknown or idiopathic cause of utero-vaginal prolapse.

VISHESA NIDAN

Acharya Sushrut has described yoni kshobhana or sanchalana as the nidan of Prasramsini yonivyapad. Madhukosha commentary has taken the meaning of yoni kshobhana as yoni vimardana.

SAMPRAPTI

Nidana sevana (mithya ahara, vihara, kshobhana or sanchalana)

> ↓ Vata, pitta dusti

↓ Garbhasaya gata mansapeshi affected

↓ Deterioration in compactness and integrity of genital

> organ ↓

Sithilata and sramsa

 \downarrow Descent or displacement or prolapse

Samprapti Ghatak

Dosha- Vata, pitta Dushya- Rasa, rakta, mansa Srota- Rasavaha, raktavaha, mansavaha Srota dusti- Vimargagamana Agni- Jatharagni dusti Adhisthana- Yoni Roga marga- Abhyantara

PURVARUPA

In classics, *purvarupa* of *yonivyapad* are not described.

RUPA

Rupa or *lakshana* of *Prasramsini yonivyapad* are *yoni sransana* or *syandana* (prolapse or displacement of *yoni* or excessive vaginal discharges) and *duhprasuscha* (difficult labour). Along with this there may be features of *pitta* vitiation like *osha*, *chosa*.

Yonivyapad	Dosha	Nidana	Lakshana	Probable co-relation
Prasramsini	Vata, pitta	Yoni kshobhana	<i>Yoni sransana / syandana</i> <i>Duhprasuscha</i> Features of vitiated pitta	Utero-vaginal prolapse of 1^{st} and 2^{nd} degree
Mahayoni	Tridosha	Coitus in troublesome bed	Vivruta yoni Parva vakshana sula	Procidentia

			Features of three doshas	
Antarmukhi	Vata	Coitus in abnormal position after excessive intake of food	Vakra yoni Maithuna asahisnuta Features of vata vitiation	Retroversion of uterus
Andini or Phalini	Tridosha	Vaginal tear due to coital activity at a very young age	Anda samana yoni Features of three doshas	Cystocele or rectocele

UPADRAVA

Upadrava of this disease is not mentioned specifically but as a whole upadravas of yonivyapad are inability to conceive, gulma, arsa, pradara, vata roga etc.^[13]

SADHYA-ASADHYATA

All the five sannipataja yonivyapad are asadhya Sushrut^[14], (incurable) according to Maharshi Bhava Mishra and Yogaratnakar. Madhavkar. Prasramsini yonivyapad is kasta-sadhya.

CHIKITSA

Chikitsa of pittaja yoniroga^[15]

- Drugs and methods having sita property mentioned • for raktapitta should be used.
- Seka, abhyanga, pichu, prepared with drugs having cooling property or capable of suppressing pitta should be done. For snehana, either only ghrita or ghrita medicated with pittahara drugs should be used
- Basti is indicated with milk medicated with madhura drugs or madhuka.
- Local application of paste of *panchavalkala*.
- Ghrita for oral administration- Kshirasarpi prepared with jivaniya gana drugs, milk or ghee medicated with *jivaniya gana* drugs

Chikitsa of Prsramsini Yonivyapad

Oral- Meat soup of gramya, anupa and audaka animals and milk medicated with Dasamula Kwatha.^[16]

Laghu Phala Ghrita^[17]

• Local- *Snehana* with *traivrit sneha*^[18] *Swedana* with milk^[19]

Kapikachhu Mula Kwatha^[20] for yoni prakshalana

- Replacement of displaced yoni- After snehana and swedana the prolapsed mass should be gently pushed back into its original place inside vaginal canal with hand. Then a vesawara should be inserted and a light bandage should be applied and kept until the patient has the desire for micturition.^[21,22]
- Uttara basti and anuvasana basti with traivrit sneha, sneha prepared with decoction and paste of dasamula and trivrit, satapaka or sahasra paka vatahara taila, sukumara taila, bala taila, sirisha taila.^[23]

PATHYA-APATHYA^[24]

Pathva

Dugdha, mansarasa, lasuna swarasa and sura, arista, asava according to the predominant dosha

- Yavanna, abhayarista, sidhu, taila and pippali churna, louha bhasma, pathya churna with madhu.
- Bala taila, sukumara sneha and misraka sneha. •
- Lasuna

Apathya

Manda

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