

EFFICACY OF GUDUCHYADI KWATHA YONI PRAKSHALANA ON UPAPLUTA YONIVYAPAD – A CASE REPORT**Dr. Kowsalya R. G.*¹, Dr. Reena Rohilla², Dr. Ramesh M.³**^{1,2}PG Scholar, Sri Kalabyreshwara Swamy Ayurvedic Medical College and Hospital, Research Centre, Vijayanagar, Bangalore-560104.³Professor, Dept of PTSR, Sri Kalabyreshwara Swamy Ayurvedic Medical College and Hospital, Research Centre, Vijayanagar, Bangalore-560104.***Corresponding Author: Dr. Kowsalya R. G.**

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ABSTRACT

Pregnant woman and the fetus are very susceptible to many infections, which contribute significantly to perinatal complication. Other than maternal problems, these infections may cause fetal loss, miscarriage and premature labour. Infections in pregnancy demands prompt adequate and careful management. Vulvovaginitis is become common problem of the pregnant woman that challenges the obstetrician today. The infection is difficult to eradicate and recurrence is also frequent. The disease process as well as the treatment protocol may have profound effects on the outcome of pregnancy. So considering the prevalence of this disease in pregnancy, we have planned this study and selected *Guduchyadi kwatha yoni prakshalana* as *sthanika chikitsa*.

KEYWORDS: Pregnancy, Vulvovaginitis, *Guduchyadi kwatha yoni prakshalana*.**INTRODUCTION**

Microbial infections of the vagina (vaginosis and vaginitis) among pregnant women are serious problems because they can lead to serious medical complications such as preterm labor, amniotic fluid infection, premature rupture of the fetal membranes, and low birth weight of the neonate. However, proper identification and treatment will reduce the risk of preterm birth and its consequences. The vagina could be infected by a variety of pathogens including bacteria, fungi, viruses, and parasites.^[1,2] Bacterial vaginosis is the most frequent vaginal infection, characterized by the replacement of Lactobacillus species of normal vaginal flora by the excessive growth of a mixture of microorganisms including Gardnerella vaginalis, Bacteroides species, genital mycoplasma and fastidious anaerobic bacteria.^[3]

During Pregnancy bacterial and fungal infections of the genital track are increased due to increase in cell glycogen and reduced pH under influence of higher blood level estrogen. In Ayurveda classics, the physiological and pathological aspects of female reproductive system are explained under various prakaranas like yoni vyapat, artavadusti, garbhavakrantiya, garbhini vijnana and sutikopakramaniya adhyaya. Upapluta Yonivyapad is described by Acharya Charaka,^[4] Sharangadhara,^[5] and both Vagbhatas.^[6,7] can be compared to Vulvovaginitis.^[8] during pregnancy based on its signs and symptoms.

Upapluta Yonivyapad is caused by vitiation of Vata and Kapha. According to Acharya Charaka the occurrences of upapluta yonivyapad is limited to pregnant women. If pregnant woman consumes Kaphavardhaka Aahara-Vihaara and suppresses the Chhardi-Nishswasa Vegas causes Upapluta Yonivyapad and presents with symptoms like Pandu, Sweta varna or Kaphayukta Srava associated with yoni toda. Ayurveda gives prime importance to vata dosha, because all twenty types of yoni vyapada cannot occur without vitiation vata dosha. In Upapluta yonivyapada, kapha and vata dosha play main role so kaphaghna and vataghna line of treatment is required.

CASE REPORT

A 20-year-old married woman visited the OPD of Prasooti Tantra And Stree Roga, SKAMCH & RC, on 2nd April 2018 with the History of 8 months of amenorrhea and complaining of severe white discharge, lower abdomen pain and itching in vulval region since 1 week.

Past history: No H/O DM/HTN/Thyroid dysfunction or any other medical or surgical history.**Family history:** No history of similar problem in any of the family members.

Personal History: Diet – non-vegetarian.
Appetite- Good
Bowel- Once / day.
Micturition – 5-6times/day 1-2times/Night.
Sleep – Sound

Menstrual history

Age of Menarche- 12 yrs
Menstrual cycle – 3-5 days / 28-32 days
L.M.P – 27/06/2017

Obstetric history – G₁P₀A₀L₀

Married life – 1 year

Ashta Sthana Pareeksha

Nadi – 74 bpm
Mootra- 5-6times/day 1-2times/Night.
Mala – Once a day.
Jihwa- Alipta
Shabda – Avisesha
Sparsha – Anushna sheeta
Druk – Avishesha
Aakruti – Madhyama

Dashavidha Pareeksha

Prakruti – Vata-Kapha
Vikruti - Madhyama
Sara – Madhyama
Samhanana – Madhyama
Pramana – Dhaigyaa – 150 cms Dehabhara – 56 kg
Satmya – Madhyama
Satva- Madhyama
Aahara Shakti - Abhyavaharana Shakti – Madhyama

Jarana Shakti – Madhyama
Vyayama Shakti – Madhyama
Vaya –Madhayama

General examination

- Built – Moderate
- Nourishment - Moderate
- Temperature – 98.F
- Respiratory rate -18/min
- Pulse rate – 74 bpm
- B.P – 110/80 mm of hg
- Height – 150 cms
- Weight – 56 Kg
- Tongue: Uncoated

Systemic examination

CVS: S1 S2 Normal.
CNS: Well oriented, conscious.
RS: normal vesicular breathing, no added sounds.
P/A: uterus corresponds to 36weeks

Fetal movement – present
Contraction- nil
P/AUS- FHR – 138 bpm
P/V Cervix status – Os closed
Thick mucoid white discharge ++
Foul smell – Mild

Intervention

Guduchyadi kwatha yoni prakshalana once a day,
Morning, for 7 days.

OBSERVATION AND RESULTS

Table 1: Changes in signs and symptoms before and after treatment.

Signs and symptoms	Before treatment On 2/4/18	After treatment On 10/4/18
Yoni srava Sweta varna (Thick mucoid white discharge)	Present	Absent
Yoni kandu	Present	Absent
Lower abdomen pain	On and off	Absent
Foul smell	Present	Absent
Pap smear	Suggestive of candida albicans	No pathogens detected
Report	Plenty of budding yeast cells	

DISCUSSION

According to *Acharya's*, *vata* is the main *doṣha* responsible in causation of all *yoni roga*, especially because of the *vata sthana* of reproductive system. So *chikitsa sutra* of any *yoni vyapad* should be associated with *vata shamana* therapies. Hence, here *snehana*, *svedana* along with *mrdu sodhana* should be followed, as *teekshna sodhana* is contraindicated in *bala*, *garbhini*, *vridha* and *sukumara*. Then *sthanika chikitsa* in *yoni* like *parisheka*, *pichu*, *pralepana*, *abhyanga*, *uttaravasthi* are indicated on the basis of involvement of *doṣhas*. Hence *Guduchyadi Kwatha yoni prakshalana*⁹ was selected for this case. *Guduchyadi Kwatha* (*Guduchi*, *Triphala*,

Danti), the drug *Guduchi* has *Tikta Kashaya Rasa*, *Guru Snigdha Guna*, *Ushna Veerya*, *Madhura Vipaka* and having properties like *Tridoshaara*, *balya*, *Stambhana*, *Kandughna*, *Yonisodhana*, *Vedanasthapana*, *Shothahara*, *Dahaprashamana*, *Vranashodana*, and *Vranaropana*. The drug *danti* has *katu rasa*, *guru*, *tikshna guna*, *ushna virya*, *katu Vipaka*, *kaphavatahara*, property. The drugs in *Triphala* has *tridosahara*, *rasayanam*, *bhedana*, *anulomana* property. *Stambhana* property of *Guduchyadi Kwatha yoni prakshalana* helps to reduce *yonisrava*. Due to *Ushna veerya* of drugs pacifies *vata dosha* and relive *yonitoda*. Due to *krimi* or *jantughna* property of drugs, *yonikandu* got reduced.

CONCLUSION

Though several efficacious remedies have been mentioned for various gynecological disorders in Ayurveda at present, most of them are still lacking systemic clinical and biological studies with the best parameters making them rational. Vulvovaginitis is most common bacterial, fungal infection seen during pregnancy. Pregnancy induced changes may predisposes to the development of lower genital tract infection and it will cause maternal and fetal problems. From this case study the drug Guduchyadi Kwatha yoni prakshalana found effective in upapluta yonivyapad due to Tridosha Nashaka, Sravahara, Kanduhara, Shothahara, Dahaprashamana, Vranashodana, Krimighana, immunomodulatory, antimicrobial and anti-inflammatory properties.

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