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An Approach to Manage Shweta Pradar – A Case Study

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ABSTRACT:

Acharya Manu has said that happiness of human needs proper care and respect of woman. So, to keep our society happy and healthy, proper care of woman is the most important thing. Shweta Pradar is one of the most common problems faced by woman in her day-to-day life. Slight discharges through vagina occur physiologically to keep the vagina moist but if discharges increase in amount or it comes with foul smell or with itching, it causes discomfort to the patient. Medications which are being used to treat Leucorrhea are unable in controlling its reoccurrence. Ayurvedic medications and localized procedures (Sthanik Chikitsa) have been proved like a boon in this field. Here, a case report of a female patient having complaints of thick white discharge P/V, burning in vaginal area, burning micturition, low back ache and constipation has been presented. She was advised for sthanik chikitsa. After taking patient's consent, Yoni Prakshalana (vaginal wash) with Udumbaradi Kashaya and Yoni Pichu (vaginal tampon) with *Udumbaradi Taila* was done for 7 days after the cessation of menstrual flow. The procedure was done for the 3 consecutive cycles & the patient started feeling relief in symptoms from the very first cycle. Thus, through this study, the efforts have been done to through light on the importance of shtanik chiktsa in the field of Stri Roga (gynecological disorders).

Keywords – Shweta pradar, yoni Prakshalana, Yoni pichu, Sthanik chikitsa

INTRODUCTION

Woman are building blocks for any country. They are the key to make a family happy and healthy. According to a report of United Nations, women constitute 50% of human resources, the greatest human resource next only to man having great potentiality. In present era, woman is also in a rush for making career and money. In that manner, she is avoiding her own health. Her altered life style, food habits, sleep pattern all these are contributing to her ill health.

Shweta Pradar, i.e. white discharge per vaginum is also an outcome of her advanced life style. The Vaginal secretion in very small amount sufficient is to make the surface moist¹. Normally, it may be little excess in mid menstrual or just prior to menstruation, during pregnancy and during sexual excitement². The discharge is also affected by mental stress, nutritional status, emotional status, pregnancy and few medications. But when it becomes pathological or excess in amount, it disturbs her day-to-day



life. It may present with excessive thick white discharge from vagina associated with foul smell, vulvo – vaginal itching, vulvo – vaginal pain, irritation, low back ache, generalized weakness etc. It also makes woman unable to concentrate on her family and work. Many times, it happens that patient attend to a Gynecologist for the treatment of her Leucorrhoea & when she doesn't get permanent cure, she is advised to go for Hysterectomy. So, it is the need of hour that we find permanent cure for the patient with no or minimal adverse effects on her reproductive life. Here, a case study of a patient of *Shweta pradar* (white discharge) treated with *Udumbaradi Kashaya Yoni Prakshalana* (vaginal wash) followed by *Udumbaradi Taila Yoni Pichu*³ has been presented to show effects of *Sthanik Chikitsa* explained by our acharyas.

CASE REPORT

A female patient of 32 yrs. age attended the OPD of Department of Prasuti Tantra & Stri Roga, Govt. Ayurvedic College, Varanasi with the complaint of thick white discharge P/V from 1.5 yrs. She was also having complaints of burning in vaginal area, burning micturition, low back ache & constipation.

History of present illness – According to patient, she was suffering from white discharge P/V from 1.5 yrs. The discharge was thick in consistency and remain for whole month. Along with discharge, she was also having complaints of burning in vaginal area with burning micturition from 5-6 months. Also, she is having complaint of constipation and low back ache. She had taken medication several times but did not get complete cure. That's why she decided to take ayurvedic treatment.

History of past illness – Patient does not have history of major illness.

Surgical history – No history of surgery.

Medical history – Patient does not have any medical history.

Family history – No family history of DM / HTN / TB / Thyroid dysfunction.

Contraceptive history – Patient is not taking any OCP or not having any IUCD inserted.

Personal history – Patient does not have any history of hospitalization or blood transfusion. Patient does not have any history of allergy with any substance or any drug. Patient is not addicted to tea or coffee or cigarette or alcohol.

Menstrual history -

LMP - 14.09.2021

Duration -3-4 days

Interval – 26-28 days

Amount of blood loss - Moderate

Obstetric history -

 $G_3 P_2 A_1$

P₁ - 17 yrs. male child, FTND

P₂ - 15 yrs. male child, FTND

A₁ - 3 yrs. Ago, 2 months GA, D & C was performed

(Table 1) Ashtavidha Pariksha4

(Table 2) Dashvidha Pariksha5-

O/E-

Per abdomen examination - NAD

Ex. Genitalia – Thick discharges present on vulva

Per speculum examination – Cervix hypertrophied with congestion,

Thick white discharge

present on external os of cervix

Per vaginal examination – Anteverted parous size uterus, fornices are clear

Investigations – (Table 3)

Assessment criteria -

Subjective Parameters –

1. Srava (vaginal discharge) – Slight discharge (occasionally wetting the undergarment) – 1

Moderate discharge (wetting the undergarments) – 2

Heavy discharge, may need pads -3

2. Consistency – Watery – 1

$$Thin-2\\$$

Thick
$$-3$$

3. **Edema** – Reddish discoloration - 1

Reddish discoloration with edema of vulva & vagina -2 Rashes & edematous vulva, vagina & thighs -3

4. Kati shool (Low back ache) - Mild - 1

Moderate-2

Severe-3

5. *Vibandha* (constipation) – Mild - 1

Moderate - 2

Severe - 3

Objective Parameters -

1. *Kandu* (Vaginal itching) – Mild – 1

Moderate - 2

Severe -3

2. **Vaginal pH** -5 - 6 - 1

$$6 - 7 - 2$$

$$>7 - 3$$

Treatment protocol –(Table 4)

Advice – 1. To avoid intercourse during treatment.

- 2. To avoid spicy food, over eating, fried food, bakery items, fermented items.
 - 3. To avoid mental stress.
- 4. To take green leafy vegetables & simple food & to maintain adequate amount of fluid intake.

RESULT

After the completion of drug trial for 7 days each cycle for 3 cycles, the patient got relief from vaginal discharge. The improvement was significant from the very first cycle. The investigations after the trial also show the improvement (Table 5)

Thus, we see a change in vaginal pH which was 7 (alkaline) before the treatment. After the 15 days of 3rd cycle, the pH was checked & it was 5, i.e., acidic pH which is very important to maintain the vaginal flora.

DISCUSSION

In Ayurveda, all the gynecological disorders have been summed up under the heading of Yoni Vyapada (Disease of gyne) 6. Shweta Pradara (vaginal discharge) is a symptom present in all *yoni vyapad* arising due to vitiation of Kapha and Vatakapha⁷, i.e., Atyananda, Karnini, Acharana, Aticharana, Shleshmala, Prasramsini. For white discharge P/V the term Shweta Pradara has been used in Sharangdhar Samhita, Bhav Prakash, Yoga Ratnakara8. Here, the patient has complaints of thick white discharge P/V with burning in vagina & burning micturition. So, there is vitiation of Kapha & Pitta mainly. Kapha is responsible for excessive thick discharges and the Pitta is responsible for burning sensation in vagina and urine. Along with these, it is also said by Acharya Charaka that no yoni roga is possible without the vitiation of Vaat and yoni Pradesh is the area of Apana vaat.

Why Udumbaradi Kashaya & Udumbaradi Taila -

The drug used for this case is *Udumbaradi Kahasya* & *Udumbaradi Taila* quoted by Acharya Charak in *Yonivyapad chikitsa adhyaya*⁹. The drug has *Udumbara* as the main content. The other contents are – *Panchavalkal* (*Vata, Udumbar, Ashwattha, Paareesh, Plaksh*), *Kulak, Malti, Nimba, Laksha, Dhavapushpa, Palaash niryaas. Udumbara* (*ficus glomerulata*) is *Ruksha* (dry) & *Guru guna Pradhan* (heavy), having *Katu vipaak* & *sheet veerya*. It is *Kashaya rasa Pradhan* (astringent). *Kashaya*

rasa is stambhaka (obstructive) in nature. All these properties make it Kapha - Pitta shamak, Stambhaka, Vrana shodhaka (wound cleaner), Vedanasthapak Vranaropaka, (wound healer) (analgesic), Raktadoshahara (blood purifier)10. It also has Anti protozoal & anti - inflammatory action¹¹. An ointment prepared from its stem bark has been proved effective against Candida albicans12. Other constituents like Panchvalakal, Kulak, Malti, Nimba etc. enhances its stambhaka property. Malti (Jati) with its snigdha guna (slimy) normalizes the pitta vigunta of artavavaha srotas¹³. Nimba & Jati has anti - inflammatory & anti - microbial effect which suppress the growth of micro organisms¹⁴. Also, the drugs have properties like sukshma & vyavayi which allows the easy absorption through epithelium & mucosa¹⁵. The base of drug is Tila Taila for which Acharya Sushrut has described that it is Yonishoolshamak and garbhashayashodhak in nature16.

Why Yoni Prakshalana & Yoni Pichu -

As the name *Prakshalana* suggests washing, through *Prakshalana*, secretions & discharges from vagina are washed out. The action is mainly by the drugs used in the preparation of the *Kwatha*. Same case is with *Yoni Pichu*. Yoni Pichu is the application of sterile cotton swab soaked with medicated oil or ghee in the vagina. Pichu helps the medicine to remain at the site for a longer period for better action. Pichu is placed in vagina as it is rich in blood supply hence provides better absorption of drug. Vaginal mucosa favors absorption of *lipophilic drug* hence the medicine is preferred to be used in the form of *taila* or *ghrit*¹⁷.

CONCLUSION

Shweta pradara being the most common complaint of reproductive age group, is one of the major problems encountered in day-to-day practice. It affects the health of female completely & she may suffer from mental trauma also. Hence, a definite approach is necessary for the management of the disease. The above-mentioned treatment protocol may be taken into consideration for the management of Shweta pradara, i.e, white discharge P/V.

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Table 1 Shows ASHTAVIDHA PARIKSHA⁴ –

Nadi	Mala	Mutra	Jihva	Shabda	Sparsha	Drika	Akriti
Kapha – Pitta	Niram	White	Prakrita	Prakrita	sheetoshna	Pandura	Sthool

Table 2 Shows DASHVIDHA PARIKSHA5-

Prakriti	Vikriti	Saar	Samha- nana	Pramana	Satmya	Satva	Ahara shakti	Vyayam shakti	Vaya
Vata – Pitta	Atisrava	Madhyam	Madhyam	Madhyama	Madhyama	Madhy ama	Madhyama	Madhy- ama	Praudha

Table 3 Shows investigations

CBC	RBS	HIV	HBsAg	HCV	VDRL	URINE	Vaginal	USG	Pap Smear
						(R/M)	pН		
within	90 mg /	NR	NR	NR	NR	Within	7	Bulky uterus	Inflammatory
normal	dl					normal		with mild	smears
limits						limits		hypertrophied	
(Hb –								cervix with	
11.5 gm								minimal free	
%)								fluid in Cul – de	
								- sac	

Table 4 Shows Treatment protocol –

Complaints	Treatment given	Duration	Outcome	
First cycle - Thick white	Udumbaradi kashay yoni	For 7 days after the	Mild relief in white	
discharge P/V,	prakshalana (vaginal	cessation of menses	discharge P/V	
Burning in vulvo -	douche) followed by		Vaginal pH - 7	
vaginal region,	udumbaradi taila yoni			
Burning micturition,	pichu (vaginal tampoon)			
Low back ache,				
constipation	Chandraprabha vati 2	For 10 days	Got relief in Burning	
	BD, triphala churna 3		micturition &	
	gms BD with luke warm		constipation	
	water for associated			
	complaints			

Second cycle -Thick	Udumbaradi Kashaya	For 7 days after the	Got moderate relief in
white discharge P/V &	yoni prakshalan &	cessation of menses	discharge & burning of
mild burning in vulvo -	udumbaradi taila yoni		vagina
vaginal region	pichu		Vaginal pH – 6.5
Third cycle – thick white	Udumbaradi Kashaya	For 7 days after the	Got relief from discharge
discharge P/V on & off	yoni prakshalana &	cessation of menses	P/V
	udumbaradi taila yoni		Vaginal pH - 5
	pichu		
	-		

Table 5 shows Results

USG	PAP SMEAR	VAGINAL pH
Uterus is normal in shape & size. No free fluid in cul – de - sac.	Negative for inflammatory cells	5