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Comparative Study between *Yoni Dhavan*, Oral Medicine and both therapy in the treatment of *Swetapradara*

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ABSTRACT

Swetapradara is a common and major problem in our country of female especially reproductive age. Total patients (60) were divided into three group i.e. Gr-A, Gr- B and Gr- C with clinical features of white vaginal discharge, itching of vulva, burning pain in vagina, low back pain, general weakness. Gr- A was treated with *Yoni Dhavan* (Vaginal irrigation) by a compound decoction. Gr- B was treated with oral medicine by *Pusyanuga Churan*. Gr- C was treated with both therapies i.e., *Yoni Dhavan* & Oral medicine. This comparative clinical trial was conducted to evaluate the efficacy of Gr-C which were confirmed that the effectiveness was better than other groups in the management of *Swetapradara*. This study observe a highly significant reduction in mean scores of clinical feature and overall compliance to the treatment was excellent in the Gr-C and p value of < 0.001 was considered highly significant.

Key words: *Swetapradara*, *Yoni Dhavan*, *Pusyanuga Churna*

INTRODUCTION

Swetapradara is a common problem in women specially during reproductive age. It is two combination word that is *Sweta* and *Pradara*. *Sweta* means white and *Pradara* means discharge. So, *Swetapradara* means white vaginal discharge. The word *Swetapradara* has not mentioned in *Brihatroyi* i.e., *Caraka*, *Susruta* and *Vagbhata Samhitas*. *Swetasrava* and *Yonirava* words have been used in case of white vaginal discharge in *Brihatroyi*. But later commentator *Cakrapani*, *Sarangadhar*, *Bhavaprakas* and *Yogaratanakara* have used the word *Swetapradara* for white vaginal discharge. In this study *Yoni Dhavan* in

Gr-A, Oral medicine in Gr-B and both therapy in Gr-C were selected for the treatment of *Swetapradara*.

AIMS AND OBJECTIVES

1. To evaluate the role of *Yoni Dhavan* (vaginal irrigation) by a compound decoction.
2. To evaluate the role of oral medicine.
3. To evaluate the efficacy of both therapy in the treatment of *Swetapradara*.

Study design - Prospective and comparative

Case history

MATERIALS AND METHODS

The study was conducted in the department of Prasuti Tantra and Stri Roga, B.S.R.G.M.A.C & Hospital, West Bengal, in which 60 patients were selected and were divided in three equal group i.e., Gr-A (20 Patients), Gr- B (20 Patients) and Gr-C (20 Patients).

Selection criteria

Patients were white vaginal discharge, itching of vulva, burning pain in vagina, low back pain and general weakness of women specially during reproductive age.

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Exclusion criteria

Patients who were suffering from positive VDRL, carcinoma, positive pap smear, presence of other infective organism, were excluded from the study.

Selection and preparation of the drug

A compound decoction mentioned in *Astanga Samgraha* (Utt.39/97)^[1] was selected for the study in Gr-A. The ingredients of the compound decoction are - stem bark of *Lodhra* (*Symplocos racemosa*) and *Vata* (*Ficus benghalensis*). Above two drugs were taken in equal parts and were made into a decoction. Another drug was *Pusyanuga Churna* mentioned in *Bhaisajya Ratnavali* (*Stri Rogadhikar* 66/25-31)^[2] was selected for the study in Gr-B. The ingredients of the *Pusyanuga Churan*^[3] are

1. *Patha* (Rt) - 1 Part
2. *Jambu* (*Bija Majja*) (Enm) - 1 Part
3. *Amra* (*Bija Majja*)(Enm) - 1 Part
4. *Pasanbhed* (Rz) - 1 Part
5. *Rasanjana* - 1 Part
6. *Ambasthaki* (Rt) - 1 Part
7. *Mocarasa* (Exd) - 1 Part
8. *Manjistha* (St) - 1 Part
9. *Padma Kesara* (Adr) - 1 Part
10. *Kumkum* (Stg) - 1 Part
11. *Ativisa* (Rt) - 1 Part
12. *Musta* (Rz) - 1 Part
13. *Bilva* (St.Bk) - 1 Part
14. *Lodhra* (St.Bk) -1 Part
15. *Gairika* - 1 Part
16. *Katphala* (Fr) - 1 Part
17. *Maricha* (Fr) - 1 Part
18. *Sunthi* (Rz) - 1 Part
19. *Mrdvika* (Dr.Fr) - 1 Part
20. *Raktachandan*(Ht.Wd)-1Part

21. *Katvanga* (St.Bk) - 1 Part

22. *Kutaja* (St.Bk) - 1 Part

23. *Ananta* (Rt) - 1 Part

24. *Dhataki*(Fl) - 1 Part

25. *Yasti Madhu* (Rt) - 1 Part

26. *Arjun* (St.Bk) - 1 Part

All the above drugs were taken in equal parts and made into a fine powder form.

Study procedure

The patients were equally divided into three groups. Each group was 20 patients.

Group A - This group was treated with *Yoni Dhavan* (vaginal irrigation) by decoction of *Lodhra* and *Vata*, morning and evening for 15 days.

Group B - This group was treated with *Pusyanuga Churna* - 3 gm orally twice daily with honey for 15 days.

Group C - This group was treated with both therapy i.e., *Yoni Dhavan* (vaginal irrigation) by decoction of *Lodhra* & *Vata* and Oral medicine by *Pusyanuga Churan* in the same dose for 15 days.

All groups were similar with regard to the demographic data and baseline parameters. Total score was based on white vaginal discharge, itching of vulva, burning pain in vagina, low back pain, general weakness, in the same parameters.

DISCUSSION

Statistical analysis - Comparative study of the effectiveness between the Gr-A, Gr-B and Gr-C in different signs and symptoms before and after treatment (Table no. 1, 2 and 3).

Table 1: Result of the treatment in Group - A

Sign & Symptoms	Mean ± S.D		df	't' value	p value	Effectiveness
	BT	AT				
White vaginal discharge	2.5 3 ± 0.6	0.9 0 ± 0.7	2 4	9.25	<0.001	75.56

Itching of vulva	2.2 ± 0.6	0.6 6 ± 0.5	2 4	11.9 5	<0.00 1	80.00
Burning pain in vagina	1.1 1 ± 0.2	0.6 ± 0.1 3	1 4	3.30	<0.05	47.06
Low back pain	1.4 3 ± 0.5	0.4 4 ± 0.1	1 5	10.0 6	<0.00 1	72.62
General weakness	2.5 5 ± 0.4	1.2 ± 0.4	1 4	6.86	<0.00 1	65.00

Table 2: Result of the treatment in Group - B

Sign & Symptom s	Mean ± S.D		df	't' value	P value	Effectiveness
	BT	AT				
White vaginal discharge	2.1 3 ± 0.5	0.8 0 ± 0.5	2 4	9.12	<0.00 1	86.51
Itching of vulva	2.1 ± 0.5	0.4 0 ± 0.6	2 4	11.8 0	<0.00 1	90.15
Burning pain in vagina	1.0 9 ± 0.1	0.3 3 ± 0.1 1	1 4	5.89	<0.00 1	70.59
Low back pain	1.2 3 ± 0.4	0.4 2 ± 0.1 2	1 5	10.0 1	<0.00 1	73.15
General weakness	2.5 0 ± 0.3 5	0.4 6 ± 0.4 2	1 4	10.6 0	<0.00 1	78.00

Table 3: Result of the treatment in Group - C

Sign & Symptom s	Mean ± S.D		df	't' value	P value	Effectiveness
	BT	AT				
White vaginal discharge	2.0 1 ± 0.4	0.3 0 ± 0.4	2 4	9.15	<0.00 1	96.5
Itching of vulva	2.1 ± 0.3	0.3 1 ± 0.5	2 4	9.00	<0.00 1	95.50

Burning pain in vagina	1.1 0 ± 0.3	0.1 3 ± 0.9 0	1 4	709	<0.00 1	86.00
Low back pain	1.1 1 ± 0.3	0.3 0 ± 0.1	1 5	10.1 1	<0.00 1	80.50
General weakness	2.6 1 ± 0.1 2	0.2 5 ± 0.2	1 4	10.2	<0.00 1	85.00

RESULT

From the statistical point of view it was observed that out of 20 patients in Gr- A, 10 (50%) patients were cured, 2 (10%) patients were maximum improved, 3 (15%) patients were moderately improved, 5 (25%) patients were mildly improved and out of 20 patients in Gr- B, 15 (75%) patients were cured, 2 (10%) patients were maximum improved, 2 (10%) patients were moderately improved, 1 (5%) patients were mildly improved, whereas in the Gr- C, out of 20 patients, 18 (90%) patients were cured, 2 (10%) patients were maximum improved (Table no. 4).

Table 4: Overall clinical assessment of the treatment.

Result	Group - A		Group - B		Group - C	
	No. of pt	% of pt	No. of pt	% of pt	No. of pt	% of pt
Cured	10	50 %	15	75 %	18	90 %
Maximum improved	2	10 %	2	10 %	2	10 %
Moderately improved	3	15 %	2	10 %	0	0
Mildly improved	5	25 %	1	5 %	0	0

CONCLUSION

The study observed a highly significant reduction in the mean of white vaginal discharge, itching of vulva, burning pain in vagina, low back pain and general weakness. The overall compliance to the treatment was excellent in Gr-C than others group and the p value

of <0.001 was considered highly significant. Hence, it can be concluded that the both therapies i.e., *Yoni Dhavan* and Oral medicine in Gr-C can be recommended for satisfactory management of *Swetapradara*.

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