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CLINICAL EVALUATION OF EFFICACY OF KUTAJGHAN VATI IN THE MANAGEMENT OF ACHARANA YONIVYAPADA W.S.R. TO PRURITUS VULVAE

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ABSTRACT

In the modern era, the changing life style, food habits, increased stress, strain and restlessness have resultantly expanded the spread of gynaecological disorders. Twenty types of Yonivyapada mentioned in the classics are a major cause in hampering the normalcy of the female reproductive tract. Among these Acharana Yonivyapada is also prevalent. Acharana Yonivyapada present main symptom as Yoni Kandu so it is correlated with pruritus vulvae. Pruritus vulvae are a symptom which is experienced by 10% of women attending gynecological clinics. It presents as a clinical problem of unusual difficulty because it has many possible causes and unless the cause is found, the treatment is unsatisfactory. The sufferer from intractable pruritus is in worse plight than one who experiences pain because itching is not relieved by the simple expedient of giving analgesics. There is no complaint which deserves more conscientious and sympathetic study. So to deal with such an intractable problem the present study has been planned. In this present research work 10 patients of Acharana Yonivyapada (Pruritus vulvae) were treated by *Kutajghan Vati*. The duration of the treatment was 21 days with weekly evaluation of the patients. The analysis based on subjective and objective indices which provided effective improvement in Yonisrav & Yonidaurgandhya.

Key words: - Acharana Yonivyapada, Pruritus vulvae, Kutajghan Vati

INTRODUCTION

The health of nation mainly depends on the health of woman because the healthy and happy woman plays the first step of a prosperous nation. In today's era, horizons of the *Ayurvedic* treatment in regard to *Stri Roga* have increased tremendously. For almost all Gynecological problems, patients are turning to the *Ayurvedic* treatment modality. Irregularities of menstrual cycles, infertility & white discharge such other complaints can be

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tried to solve efficiently by this medical science.

In Ayurvedic classics most of the gynecological disorders are described under the heading of "Yonivyapada". The word "Yoni" denotes female genital tract as a whole vaginal canal and uterus etc. The word " Vyapad" means disorders. Thus, the disease of the genital tract as a whole, • vagina and uterus ought to be taken from the word "Yonivyapada". The diseases • interfering with normal marital life, pregnancy, defective development of female genitalia, different types of abnormal vaginal infections, hormonal abnormalities, displacement etc. are included under Yonivyapada. Total 20 types of Yonivyapada have been described in all the Ayurvedic texts which are caused by Mithyachara (Mithya Ahara and Mithya Vihara), Artavadosha, Beeja Dosha and Daiva Prakopa.

The symptoms of Acharana Yonivyapada and pruritus vulvae are quite similar. In modern medicine, antibiotics, antifungal & steroids are treatment for pruritus vulvae, but excessive & inadequate use of these drugs may lead to produce micro-organisms resistant. Due to this problem, we should think about some alternative methods to treat this disease. Since antimicrobials may destroy normal vaginal flora & hence disturb the normal physiology of vagina, they (systemic antibiotics) also cause GIT disturbances like nausea. vomiting, diarrhoea (i.e. pseudo diarrhoea because they destroy the normal intestinal flora). But while using Ayurvedic drugs, these are free from these side effects. These drugs mainly restore the normal physiology of vagina so that pathogenic organisms do not grow further. So, it is an effort to search effective *Ayurvedic* treatment for this disease. The study was planned considering the above said aspects with following aims and objectives.

AIMS & OBJECTIVES –

- Conceptual & clinical studies on *Acharana Yonivyapada* w.s.r. to Pruritus vulvae.
- Clinical evaluation of the efficacy of *Kutajghan Vati* in the management of Pruritus vulvae (*Yoni Kandu*).

MATERIALS & METHODS- 10 patients were treated with *Kutajghan Vati* 2-2 *Vati* thrice a day orally (for twenty one days).

Criteria for selection of Drug: - In the present study Kutajghan Vati was selected for the oral administration as referred from Siddhayogasangraha. Most of ingredients in Kutajghana Vati had Kashaya Rasa, RukshaGuna and Kapha Dosha Nashaka. Kandughna, Krimighna, Vranashodhana, Vranaropana, Shothahara properties. They have been reported to exert astringent, analgesic, antiinflammatory, antimicrobial, antiprotozoal and antifungal properties etc.

Method of Preparation of Kutajghan Vati: Manufacturing of the drug was completed in the pharmacy of National institute of Ayurveda as per guidance and in presence of Research scholar with the help of Rasashastra and Bhaishajya Kalpana Deptt. Kutaj was taken in below mentioned quantity to make Kwath & from Kwath, we prepared Ghan, after making Ghan, powder form of Ativisha was added and Vati was made. (Each Vati of 250 mg).

| Sr.No. | Useful Part | Quantity required |
|--------|---------------|-------------------|
| 1 | Kutaja Bark | 30kg |
| 2 | Ativisha Root | 250gm |

• Criteria of selection of patients

Patients were selected from O.P.D. /I.P.D. of NIA Hospital, Jaipur, irrespective of caste and religion.

❖ Inclusion criteria:

- ➤ Adult female who were in age group 18-40 years.
- ➤ Patients having pruritus vulvae as a cardinal symptom with or without vaginal discharge.
- ➤ Pathogens present in wet slide study and vaginal swab culture.

Exclusion criteria:

- 1. Patients age <18 year and >40 year.
- 2. Patients after menopause.
- 3. Patients of uterine prolapsed & Ca cervix,
- 4. VDRL, HBsAg, HIV positive patients.
- 5. Patients having other systemic illness like—Anemia, Diabetes mellitus, tuberculosis, severe HT, Jaundice etc.

Laboratory Investigations

Before Treatment -

1. **General investigations:** Routine hematological examination- Hb%, ESR, RBS, VDRL, Pap smear. Routine and microscopic examination of urine

2. Specific investigations:

- Vaginal pH
- Wet slide study of vaginal smear.
- Vaginal swab culture (if needed).

After Treatment

- ❖ Vaginal pH
- ❖ Wet slide study of vaginal smear.
- ❖ Vaginal swab culture (if needed).

Subjective diagnostic parameters-

- Yoni kandu (Itching vulva):
- Yoni Srava (White discharge per vagina
- *Yoni Daurgandhya*(Malodours)
- Yoni Vedana (Pain)
- Atinarakankshini (Increase libido)
- *Mathuna krichhta* (Dyspareunia)
- *Mutra Daha*(Burning micturition)

• Vulvitis(Inflammation of vulvae

Objective diagnostic parameters- Hb% (Hemoglobin), ESR (Erythrocyte sedimentation rate), VDRL (Venereal disease & research laboratory), RBS (Random blood sugar), Routine & microscopic urine examination. Wet mount study, vaginal swab culture, Pap smear, vaginal pH etc.

Grading of the Symptoms- The efficacy of the drug were judged on the basis of the scoring pattern described as below. A special Scoring Pattern were applied in symptoms

Scoring pattern

0 – Nil, 1- Mild, 2- Moderate, 3- Severe

Assessment of the result

- ❖ Marked improvement- more than 75% relief
- ❖ Moderate improvement- 51 to 75% relief
- ❖ Mild improvement- 25 to 50% relief
- ❖ No improvement- < 25% relief Statistical Analysis: Data were analyzed by using appropriate statistical test. Wilcoxon matched pairs test was used for non- parametric data and paired't' test used for parametric data.

Observations & Results:

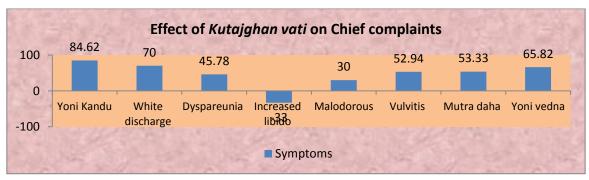
- Maximum incidence of Acharana Yonivyapada in age lies between 20-30 yrs age comprising 53.33% among 30 registered patients showing that this disease is a common problem of active reproductive life.
- Chronicity of their chief complaints shows that the majority of the patients i.e. 43.33% had been suffering for more than 2 month.
 - Among the chief complaints, maximum70% of the patients had been

- suffering from Pruritus vulvae with sever white discharge.
- Severe itching was present in maximum number i.e. 53.33% of patients and moderate itching was present in 30% of patients.
- Etiology given in our classics is very much justified with present etiology, *Mithyachara* i.e. *Yoni adhavan* (unhygienic mode of living) is important factor, in vulvovaginal infections which leads to pruritus vulvae, as also mentioned in modern sciences.
- 70% patients were having pruritus vulvae with severe white discharge, 26.67% patients were having pruritus vulvae with mild white discharge. Only 3% patients were having pruritus vulvae without white discharge.
- Relation of Coital frequency to Pruritus vulvae (*Kandavataya Atinarakankshini*)

- was found in only 23.33% of patients and 43.33% of patients were complained of decreased coital frequency due to local soreness.
- Relation of Orgasm (hyper excitement) to Pruritus vulvae (*Poorvampurushad atti* richyate) was not found in any patient; rather 70% Patients were in different about orgasm.
- On wet vaginal smear study fungal hyphae were present in 46.66% cases & T. vaginalis in only 13.33% patients. Pus cells in 60% followed by 40% with normal vaginal smear.
- Considering local Pathology during P /S examination 80% patient's shows vulvitis & 60% were with vaginitis.
- In the present study 46.66%% patients were having pH of 4.5 to 5 (pH of reproductive age group) 40% patients were having pH <4.

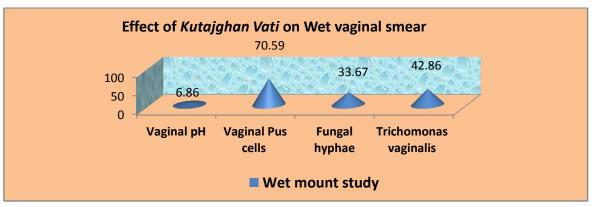
RESULTS Effect of Kutajghan Vati on Chief complaints

| SYMPTOMS | N | Mean | | Dif. | % of | SD | SE | P | Sig. |
|------------------|----|------|------|------|--------|------|------|--------|------|
| STWII TOMS | 11 | BT | AT | DII. | Change | SD | SE | r | Sig. |
| Yoni Kandu | 10 | 2.60 | 0.40 | 2.20 | 84.62 | 0.79 | 0.25 | 0.0020 | VS |
| White discharge | 10 | 2.00 | 0.60 | 1.40 | 70.00 | 0.51 | 0.16 | 0.0020 | VS |
| Dyspareunia | 10 | 0.90 | 0.50 | 0.40 | 45.78 | 0.51 | 0.16 | 0.1250 | NS |
| Increased libido | 10 | 0.30 | 0.40 | 0.10 | -33.00 | 0.32 | 0.10 | 0.9999 | NS |
| Malodorous | 10 | 1.00 | 0.70 | 0.30 | 30.00 | 0.48 | 0.15 | 0.2500 | NS |
| Vulvitis | 10 | 1.70 | 0.80 | 0.90 | 52.94 | 0.32 | 0.10 | 0.0039 | VS |
| Mutra Daha | 10 | 1.50 | 0.70 | 0.80 | 53.33 | 0.42 | 0.13 | 0.0078 | VS |
| Yoni Vedana | 10 | 1.70 | 0.60 | 1.10 | 65.82 | 0.87 | 0.27 | 0.0137 | S |



Effect of Kutajghan Vati on Wet vaginal smear

| SYMPTOMS | N | Mean | | Dif. | % of | SD | SE | P | Sig |
|-----------------------|----|------|------|------|--------|------|------|--------|------|
| STMITIONIS | | BT | AT | DII. | Change | SD | SE | I | Sig. |
| Vaginal pH | 10 | 5.10 | 4.75 | 0.35 | 06.86 | 0.67 | 0.21 | 0.1323 | NS |
| Vaginal Pus cells | 10 | 1.70 | 0.50 | 1.20 | 70.59 | 0.79 | 0.25 | 0.0039 | VS |
| Fungal hyphae | 10 | 0.30 | 0.20 | 0.10 | 33.67 | 0.32 | 0.10 | 0.9999 | NS |
| Trichomonas vaginalis | 10 | 0.70 | 0.40 | 0.30 | 42.86 | 0.48 | 0.15 | 0.2500 | NS |



Effect of therapy

There was great relief found in all the symptoms in all the patients after the study.

• Effect of *Kutajghan Vati* on Chief complaints of group A shows maximum effect i.e. (84.62%) in *Yonikandu*, (70%) in white discharge, & (70.59%) in decreasing the no. of vaginal pus cells.

DISCUSSION- Showing pharmacological properties of ingredients of Kutajghan Vati:

| Name | Rasa | Guna | Virya | Vipaka | Parts used | Dosha karma |
|----------|-------------------|--------|--------|--------|---------------|------------------------------------|
| Kutaja | Kashaya, Tikta | Ruksha | Sheeta | Katu | Bark | Kaphapittashamaka |
| Ativisha | Tikta, Katu | Ruksha | Ushna | Katu | Root | Tridoshahara (Kaphapittashamaka |

PROBABLE MODE OF ACTION OF KUTAJ GHAN VATI

It is very necessary to know how the drug performs their action. Acharya Charaka has mentioned that all drugs do their actions due to their five properties viz. Rasa, Guna, Vipaka Virya, and Karma. Kutajghan Vati possesses Katu. Tikta. Kashaya as predominant Rasa, as well as Laghu and Ruksha Guna, Ushna & Sheeta Virya in equal percent and *Katu Vipaka*. *Kutaj* have *Kandughna* property too.

On the basis of Rasa: Maximum contents of Kutajghan Vati have Tikta and Kashaya Rasa. If the action of these Rasas is considered individually, so far the relationship with the Doshas is concerned, Katu, Tikta and Kashaya Rasa are said to be Kapha Shamaka. As such the gross action of Kutajghan Vati on the Dosha should be definitely

Kapha Shamaka as Yoni Kandu is Kaphaj Vyadhi.

On the basis of *Guna*: When an analysis of *Guna* of individual ingredients is carried out, both have *Ruksha Guna* & *Ruksha Guna* having *Kapha Shamaka* and *Shoshana* property which helps in *Kleda Shoshna* and *Kaphanashak*.

On the basis of *Virya*: So far *Virya* is concerned, *Ushna & Sheet Virya* both are present, *Ushna Virya* pacifying the *Kapha* and *Sheeta Virya* will give soothing effect.

On the basis of *Vipaka*: Regarding *Vipaka*, both the contents have *Katu Vipaka*. *Katu Vipaka* is said to be *Kapha Shamaka* and so *Kanduhar*.

On the basis of *Karma*: In *Kutajghan Vati* both ingredients possess *Kapha Pitta Shamak* property. *Pitta Shamak* property will give cooling effect in burning sensation due to *Yoni Kandu*.

CONCLUSION:

The result of the study has proved that this medicine *-Kutajghan Vati* were found to be effective in treating *Acharana Yonivyapad*.

Suggestions

- Further studies should be planned with diagnosed cases of Candidiasis & Trichomoniasis.
- ❖ The mode of therapy should also be assessed against control group.
- Skin biopsy& Patch tests should be done in patients not responding to

- therapy, to see whether any contact allergy is present.
- ❖ Effect of this drug should be studied on white discharge.

REFERENCES

- Charaka Samhita, Comm. Shri Satyanarayan Shastri with vidyotini hindi commentary by Pt.Kashinath Shastri & Dr.Gorakhnath Chaturvedi , Published by Chaukhamba Bharti Academy, Varanasi.
- 2. Ayurvediya Prasuti tantra evum Stree Roga (Part-II), Prof. Premvati Tiwari, Published by Chaukhamba Orientalia, Varanasi.
- 3. Sushruta Samhita with Ayurvedtatvasandeepika commentary,edited by Kaviraj Ambikadutta Shastri,Purvardha, Published by Chaukhamba Sanskrit Sansthan,Varanasi.
- Howkins & Bourne Shaw's Textbook of Gynaecology, 14th edition, edited by V.G.Padubidri, Shirish N Daftary, published by Elsevier India Pvt. Ltd., Noida.
- Gynaecology third edition, edited by Robert W.Shaw, W.Patrik Soutter, Stuart L. Stanton, Printed by Churchill Livingstone, an imprint of Elsevier Science limited.
- 6. Infectious diseases in Obstetrics and Gynaecology, 5th edition, Gilles R.G.Monif & David A.Baker, Acute Salpingitis, Parthenon Publishing.

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