

EVOLUTION OF KARANJA CHURNA CAPSULE AND OINTMENT IN THE MANAGEMENT OF KAPHAJA YONIVYAPAD AND CANDIDIASIS

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ABSTRACT

The study was conducted in 30 clinically diagnosed patients of *kaphaja yonivyapad* and candidiasis with an objective of clinical evaluation of the efficacy of *karanja churna* capsule and *karanja* ointment in the management of *kaphaja yonivyapad* and candidiasis.

These patients were randomly divided into two groups of 15 patients each. It was also observed that the trial drug has its effect on not only *kaphajyonivyapad* but also on *kaphajyonivyapad* arising out of *candida albicans* indicating its fungicidal activity against *candida albicans*.

Keywords: *Kaphajayonivyapad*, candidiasis, *karanja*

INTRODUCTION

In routine Gynecology practice number of patients present with white discharge per vaginally, itching of vagina and low backache or dull pain in lower abdomen and vagina which are main symptoms of *Kaphaja Yonivyapada*. Annually 20 lakh women suffer from this disease out of which 30% are infected by *candida albicans*.

Due to lack and negligence of personal hygiene fungal infection of *candida albicans* occurs. Most of these symptoms of *Kaphaja Yonivyapada* are similar to candidiasis in modern science. So we have taken it for clinical study with *Kaphaja Yonivyapada*.

All these symptoms causes' great discomfort to woman and hamper their normal activities. Now a day's female possess a fear that it can cause dangerous disease like Carcinoma (CA). It may cause systemic and psychological disorder hence required treatment.

Kaphaja Yonivyapada is one of the disease in which *yonigata shweta picchilsrav* (vaginal white discharge) is in excess. This affects women's health and her daily activity. Hence holistic approach is required to cure this disease.

NEED OF THE STUDY

Need has always been felt to develop certain Ayurvedic treatment modalities for the management of *Kaphaja Yonivyapada* and candidiasis which could be safe, effective, readily available, cost effective without any side effects. In comparison to the therapeutic procedures of different systems of medicine, Ayurveda has a potent approach towards the treatment of *Kaphaja Yonivyapada* and candidiasis by both internal and external medications. With these backgrounds an effort is made to evaluate the efficacy of *karanja churna capsule and karanja ointment* in a series of patients suffering from *Kaphaja*

Yonivyapada and candidiasis

AIMS AND OBJECTIVES:

- Conceptual and clinical studies on *Kaphaj yonivyapad with and without Candidiasis* and its management with time tested Ayurvedic principles.
- To evaluate *Karanja* in a series of patients suffering from *Kaphaj yonivyapad* with and without Candidiasis on various scientific parameters.

To compare the efficacy of *Karanja churna* capsule and ointment on patients of *Kaphaj yonivyapad* with and without Candidiasis.

MATERIAL AND METHODS:

SELECTION OF CASES

The study recruited a population of 30 clinically diagnosed patients of selected from O.P.D. / I.P.D. unit of P.G. Department of Streeroga Prasuti Tantra, Bharati Medical Foundation's Ayurved Hospital. A regular record of the assessment of all patients was maintained according to performa prepared for the purpose. Following inclusion and exclusion criterias were used for registration of the patients for present clinical trial.

INCLUSION CRITERIA

- Females between the age group of 16 to 60 years having *kaphaja yonivyapad* with or without Candidiasis were included for the present study.

EXCLUSION CRITERIA

- Patients below 16 years and above 60 years of age. Patients having genital malignancies, Pregnancy. *Kaphajarajodushti* and in menstrual cycle.

SELECTION OF DRUGS

Taking the symptoms and the Samprapti of *Kaphaja Yonivyapada* into consideration, a proposed drug formulation namely " *karanja churna* capsule and ointment " was selected. The drug selected for the study were mainly

having Tikta, Katu, Kashaya Rasa, Laghu Guna and Tikshna., Ushna Virya (except Jatamamsi), Katu Vipaka Kaphashna and Pittakara properties.

METHOD OF PREPARATION OF CAPSULE AND OINTMENT

Karanja Beeja Churna capsules containing 1gm. of *churna* were prepared. *Karanja* tail was prepared by classical method. Sodium Corboxy Methyl Cellulose Gel was prepared by soaking 5% Na CMC in 100ml distilled water overnight. Sterile *Karanja* Oil (15%) was added to performed ointment and stirred uniformly. Prepared formulation was filled in the Collapsible Aluminium Tubs with sterile precautions. *Karanja* Ointment was prepared in Bharati Vidyapeeth Poona College of Pharmacy

DOSE AND ANUPANA

Dose of *Karanja Churna* Capsules was 1 tab (each of 1gm) in the morning after breakfast and night after the dinner with luke warm milk and *Karanja* tail as local ointment for 7 days.

PRE TREATMENT OBSERVATIONS:

All the patients have been studied along with the registration by noting down their demographic profile including their age, sex, address, occupation, education, socio economic status, marital status, life style, addictions, dietary habits etc. After preliminary registration, patients were subjected to detailed case history taking, physical, general and systemic examinations. In history and examination importance was given to mental status examination. During this all other relevant informations like *Ashtavidha Pariksha* and *Dashavidha pariksha* including assessment of *Sharirika Prakriti* and *Manasika Prakriti* (based on the features described in classical texts) etc. were noted.

ADMINISTRATION OF DRUG & TREATMENT SCHEDULE

Total 30 registered, clinically diagnosed and confirmed patients of *Kaphaja Yonivyapada* (candidiasis) were selected for the present clinical trial and randomly divided into following three groups of 15 patients, each patients of *Kaphaja Yonivyapada* with candidiasis. Receiving *karanja* capsule orally and *karanja* tail ointment locally.

Group-I: Total 15 patients of *Kaphaja Yonivyapada* with candidiasis were recommended *karanjachurna* capsule orally and *karanja* tail ointment locally in the dose of for a period of 30 days.

Group-II: Total 15 patients of *Kaphaja Yonivyapada* without candidiasis were recommended *karanja churna* capsule orally and *karanja* tail ointment locally in the dose of for a period of 30 days.

All the patients were advised to undergo following laboratory investigations before starting the trial to rule out any other illness if present and to exclude them from the trial.

- Blood - Hb%, BSL (R) HIVVDRL
- Urine - Routine and Microscopic examination
- Vaginal swab culture.
- USG SOS

Patients were followed up after 4th day and 7th day and changes, improvements, deterioration and any other effects produced after the therapy were noted down.

CRITERIA OF ASSESSMENT

Both subjective and clinical improvements were employed for assessment of the impact of the therapy. Subjective criteria of evaluation included the observations of both patients and assessment of the physician.

SUBJECTIVE IMPROVEMENT

All the patients registered for the trial were specially asked for any changes or im-

provement in their growing feeling of well being if any and either physical or mental fitness produced by the therapy during the trial.

CLINICAL IMPROVEMENT

All symptoms taken for the assessment of clinical improvements were thoroughly examined and the severity of each symptom was rated before and after the trial for clinical assessment. Efforts were made to give numerical values to all symptoms depending upon their severity before and after the treatment. *Yonigat shwetastrav* (white discharge), *Yoni Kandu* (vaginal itching) symptoms of *Kaphaja Yonivyapada* were assessed before and after the therapy

OBSERVATIONS AND RESULTS

Subjective improvement: After the completion of therapeutic trial there was marked improvement in the feeling of well being, physical and mental fitness in both the groups. The incidence of improvement was higher in Group II. Significant improvement was observed in Group II treated without Candidiasis and in the patients of Ist Group treated Candidiasis with also.

Clinical Improvement:

Both the symptoms taken for the assessment of clinical improvements were thoroughly examined and the severity of each symptom and points were rated before and after the trial for clinical assessment. Efforts were made to give numerical values to all symptoms depending upon their severity before and after the treatment.

DISCUSSION

The clinical study of 30 patients carried out in the present series revealed that majority of these cases were of age between 31-40 years and 21-30 years. This incidence shows that the complaints of *Kaphaja Yonivyapada* due

to *prasava* and *maithun* (coitus). In this period, *artavaha srotas* and *tryavarta yoni* is functioning organs. So in this age group *sthanvaigunya* can easily occurs due to above factors which can cause *sthandushtee*. *Kaphapradhan vata* and *vata pradhan kapha prakruti* were dominant in producing *shweta strav*. As *Kaphadosha* is important factor in producing *kaphaja yonivyapada*.

In *Bahuprasava*, *garbhashay daurballya* and *dhatushithilya* may be the affecting factors for *kaphaja yonivyapada*. Because in *Bahuprasava* above factors can easily cause *sthanvaigunya* in *tryavarta yoni dushti* which can be produce *kaphaja yonivyapada*.

After completion of clinical trial it was observed that there was considerable improvement in the feeling of well being in all the patients of both the groups.

Regarding overall improvement in clinical features of *Kaphaja Yonivyapada* (candidiasis).the results were highly significant in symptoms *Yonigata Strava* ($p<0.001$), *Kandu* ($p<0.001$) showed highly significant results.

All the above findings strongly suggest that ***Karanj Churna Capsule and ointment*** have potent effect on the management of *Kaphaja yonivyapad*. Various scientific parameters in the current study confirmed this observation which showed significant and highly significant improvement respectively.

PROBABLE MODE OF ACTION OF KARANJ CHURNA CAPSULE AND OINTMENT

Karanja has *Kashaya rasa* which act for *Stambhan* Of *Shweta Strav*(white discharge), *Katu*, *Tikta* rasa has *Kandughna*(fungicidal) & *Lekhan* properties. Which reduces *Strava* & *Shoshan*, It has *Ushna Veerya* which does *Pachana* Of *Strava* & *Vilayana* Of *Strava Tikta* rasa & *Ushna*

veerya does *Shoshana* Of *Strava* All these *rasa veerya vipaka* reduces *Vata Alpa Vedana*, *Guna Laghu*-does *Lekhan Karma*, *Kapha Nashaka*, ultimately *Anuloman* Of *Vata* & reduces symptoms, which cures *kaphaja Yonivyapad* and Vaginal candidiasis.

CONCLUSION:

On the basis of the clinical manifestations and the symptoms produced, *Kaphaja yonivyapad* may be correlated with candidiasis. Chronic *Kaphaja Yonivyapada* if not treated leads to candidal infection .From above observation one can conclude that only symptoms are same in both *Kaphaja Yonivyapada* and candidiasis but we cannot say that *Kaphaja Yonivyapada* is candidiasis because both have different etiology. patients showed improvement in all symptoms in both the diseases. There was good response with *karanja* in *Kaphaja Yonivyapada* and candidiasis. A proposed herbal formulation is safe, without any adverse effects, economical and effective remedy for the management of *Kaphaja Yonivyapada* and candidiasis.

Therefore it can be concluded that *Karanja Churna* Capsules and Ointment are very safe and effective treatment modalities and can be used effectively in the management of candidiasis

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