A CLINICAL STUDY TO EVALUATE THE EFFICACY OF PIPPALYADI CHURNA IN THE MANAGEMENT OF KAPHAJA YONI VYAPAD (NON SPECIFIC VULVO VAGINITIS)

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ABSTRACT
A healthy woman is a promise of a healthy family. In different phases of a woman’s life, from puberty to menopause, the concept of healthy yoni has been mentioned in Ayurveda as well as in modern. Infection related to yoni is a burning problem irrespective of their age or socioeconomic status. Due to infection, there may be sign and symptoms like vaginal discharge, itching, coldness. In Ayurveda, these types of sign and symptoms are found in Kaphaja yoni vyapad and some of symptoms are similar with Non specific vulvovaginitis. Gynaecological disorders have found its immense importance in the field of medicine due to fact that women have a unique function of giving birth. In Ayurveda, women health care is related in separate section, where the term yoni vyapad includes majority of gynaecological disorders.

Keywords: Ayurveda, kaphaja yoni vyapad, yoni

INTRODUCTION
A specific group of the diseases of women i.e. yonivyapad has been mentioned in ayurvedic classics, which disrupts the women hood in various ways. Kaphaja yoni vyapad is one of those diseases. Vaginal discharge means yoni srava is seen as a symptom in case of this disease.

In classics lakshanas of kaphaja yoni vyapad is mentioned. Lakshanas of Sleshmaja yoni vyapad are given below:

<table>
<thead>
<tr>
<th></th>
<th>Charaka¹</th>
<th>Sushruta²</th>
<th>Vagbhata³</th>
<th>Madhav Nidan⁴</th>
<th>Bha. Prakash⁵</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yoni picchilata</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Shitalata</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Kandu</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Alpavedana yoni</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Avedana yoni</td>
<td>+</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Pandu varna srava</td>
<td>+</td>
<td>-</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
</tbody>
</table>
Lakshanas of Other 4 types of kaphaja yoni vyapad are given below:

<table>
<thead>
<tr>
<th></th>
<th>Atyananda</th>
<th>Aticharana</th>
<th>Acharana</th>
<th>Karmini</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sushruta</strong></td>
<td>Woman suffers from this disease does not satisfied with coitus.</td>
<td>It is caused by excessive sexual act. Woman does not achieve conception.</td>
<td>Woman gets excited before coitus as well as much earlier than her husband.</td>
<td>Kapha and Rakta produces karnika in yoni</td>
</tr>
<tr>
<td><strong>Charaka</strong></td>
<td>Not mentioned</td>
<td>sopha (inflammation), supti (numbness) &amp; pain occur.</td>
<td>Non cleanliness of vagina produces krimi which produces itching in yoni and due to this Woman feels excessive sexual desire.</td>
<td>Due to straining before starting of labour pain, vayu is obstructed by foetus, along with kapha and rakta produces karnika in yoni.</td>
</tr>
<tr>
<td><strong>Vagbhata</strong></td>
<td>Followed charaka</td>
<td>Followed charaka</td>
<td>Followed charaka</td>
<td>Followed charaka</td>
</tr>
<tr>
<td><strong>Madhav nidan</strong></td>
<td>Followed sushruta</td>
<td>Followed sushruta</td>
<td>Followed sushruta</td>
<td>Followed sushruta</td>
</tr>
<tr>
<td><strong>B.P. &amp; Y.R.</strong></td>
<td>Followed sushruta</td>
<td>Followed sushruta</td>
<td>Followed sushruta</td>
<td>Followed sushruta</td>
</tr>
</tbody>
</table>

**Aim and Objective:**
- To review Ayurvedic and related modern literature regarding kaphaja yoni vyapad.
- To study the etiopathogenesis of kaphaja yoni vyapad with related modern aspect.
- To assess the efficacy of pippalyadi churna in the management of kaphaja yoni vyapad.

**Materials and Methods:**
The study comprised of 50 patients suffering from kaphaja yoni vyapad. The patients were selected from OPD and IPD of Dept of Prasuti Tantra and Stree Roga of Govt. Ayurvedic College, Jalukbari, and Guwahati-14. These patients were selected randomly on the basis of inclusion and exclusion criteria.

**Plan of study:**
- Sample size: 50
- Number of group: 1
- Type of study: randomized open trial.
- Duration of study: 1 month
- Follow up: after 15 days
- Informed consent form duly filled up by every patient was taken at the beginning of the study.
- A proforma was prepared showing all the criteria for the selection of the cases, clinical features, treatment duration, improvement etc and was strictly followed.

**Drug and Doses:**
**Pippalyadi churna** (ch/chi/30/84)
- **Pippali**
- **Haritaki**
- **Louha bhasma**
- **Anupan:** honey
- **Dose:** 3 gm BD

**Inclusion criteria:**
- Women having sign and symptoms of kaphaja yoni vyapad.
- Age group: 12-50 years

**Exclusion criteria:**
- Age less than 12 years and more than 50 years.
- Pregnant lady
- HIV, HCV, Hb, Ag, STD,VDRL
- Fungal infection
- DUB
- Systemic disease
- Metabolic disease
- Ovarian cyst, Uterine fibroid

**Laboratory tests:**
- Blood routine examination
- Hb%
• RBS, Sr. creatinine
• Sr. Bilirubin (T, D, I)
• Viral profile
• PAP smear
• Vaginal pH
• Vaginal swab culture
• USG (to know pelvic pathology)

Assessment Criteria:
The assessment of the trial drug was done on the basis of the following parameter:
• Subjective parameter: was done on the basis of improvement of signs and symptoms.
• Objective parameter: was done on the basis of laboratory results.

Observation:
A total of 50 patients were registered. The observation was done on 50 patients in which maximum number of patients i.e. 42% were between the age group of 21-30 years. It was seen from the present study that among the 50 patients 78% were Hindus. Among those 50 patients, 80% were housewives. If we see the socio economic condition, maximum patients were lower middle class i.e. 56%. From the study it was seen that married patients were maximum in amount i.e. 88%. In my study among all the symptoms of kaphaja yoni vyapad, patients came mainly with symptoms yoni srava and yoni kandu. 96 % patients were come with yoni srava and 40 % patients were come with yoni kandu. So, in my study these 2 symptoms were considered for parameter.

Statistical Review:
Qualitative as well as quantitative data were noted down before treatment and after treatment and were assessed on the basis of scoring given to them. Statistical analysis of all these symptoms has been explained as below:

Qualitative assessment:

Table 1: Showing effect of the trial drug on yonisrava on 1st follow up (after 15 days of treatment)

<table>
<thead>
<tr>
<th>X_BT</th>
<th>X_15D</th>
<th>SD_BT</th>
<th>SD_15D</th>
<th>SE</th>
<th>Z</th>
<th>P</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.51</td>
<td>1.31</td>
<td>0.51</td>
<td>0.514</td>
<td>0.11</td>
<td>1.83</td>
<td>&gt;0.05</td>
<td>NS</td>
</tr>
</tbody>
</table>

Interpretation: After 15 days of treatment Z = 1.83, P > 0.05, Hence the effect of the trial drug is insignificant.

Table 2: Showing effect of the trial drug on yonisrava on 2nd follow up (after 1 month of treatment)

<table>
<thead>
<tr>
<th>X_BT</th>
<th>X_1M</th>
<th>SD_BT</th>
<th>SD_1M</th>
<th>SE</th>
<th>Z</th>
<th>P</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.51</td>
<td>1.17</td>
<td>0.51</td>
<td>0.85</td>
<td>0.144</td>
<td>2.36</td>
<td>&lt; 0.02</td>
<td>S</td>
</tr>
</tbody>
</table>

Interpretation: After 1 month of treatment Z = 2.36, P > 0.02, hence the effect of the trial drug is significant at 2% level of significance.

Table 3: Showing effect of the trial drug on yonikandu on 1st follow up (after 15 days of treatment)

<table>
<thead>
<tr>
<th>X_BT</th>
<th>X_15D</th>
<th>X_BT-AT</th>
<th>SD_15D</th>
<th>SE</th>
<th>t_19</th>
<th>P</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.2</td>
<td>1.05</td>
<td>0.15</td>
<td>0.36</td>
<td>0.08</td>
<td>1.87</td>
<td>&gt;0.05</td>
<td>NS</td>
</tr>
</tbody>
</table>

Interpretation: After 15 days of treatment t_19 = 1.87, P > 0.05, hence the effect of the trial drug is in significant.

Table 4: Showing effect of the trial drug on yoni kandu on 2nd follow up (after 1 month of treatment)

<table>
<thead>
<tr>
<th>X_BT</th>
<th>X_1M</th>
<th>X_BT-AT</th>
<th>SD_1M</th>
<th>SE</th>
<th>t_19</th>
<th>P</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.2</td>
<td>0.95</td>
<td>0.25</td>
<td>0.43</td>
<td>0.09</td>
<td>2.7</td>
<td>&lt;0.02</td>
<td>S</td>
</tr>
</tbody>
</table>

Interpretation: after 1 month of treatment t_19 = 2.7, P < 0.02, hence the effect of the trial drug is statistically significant.
Quantitative assessment:

Table 5: Showing effect of the trial drug on Hb% after 1 month

<table>
<thead>
<tr>
<th>X_{BT}</th>
<th>X_{1M}</th>
<th>SD_{BT}</th>
<th>SD_{1M}</th>
<th>SE</th>
<th>Z</th>
<th>P</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.24</td>
<td>10.21</td>
<td>2.13</td>
<td>1.92</td>
<td>0.4</td>
<td>0.075</td>
<td>&gt;0.05</td>
<td>NS</td>
</tr>
</tbody>
</table>

Interpretation: after 1 month of treatment $Z = 0.075$, $P > 0.05$, hence the effect of the trial drug is statistically insignificant.

Table 6: Showing effect of the drug on vaginal $p^H$ after 1 month

<table>
<thead>
<tr>
<th>X_{BT}</th>
<th>X_{1M}</th>
<th>SD_{BT}</th>
<th>SD_{1M}</th>
<th>SE</th>
<th>Z</th>
<th>P</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.32</td>
<td>4.31</td>
<td>0.36</td>
<td>0.37</td>
<td>0.06</td>
<td>0.16</td>
<td>&gt;0.05</td>
<td>NS</td>
</tr>
</tbody>
</table>

Interpretation: after 1 month of treatment $Z = 0.16$, $P > 0.05$, hence the effect of the trial drug is statistically insignificant.

DISCUSSION

In the study of my trial drug pippalyadi churna is used in the management of kaphaja yoni vyapad. In this study, it is observed that use of Pippalyadi churna has an effect on yoni srava and yoni kandu. In case of yoni srava it showed no result at first follow up i.e. at 15 days but it was significant at the level of 2% at 1 month of treatment. In case of yoni kandu it showed no result at first follow up i.e. at 15 days but it was significant at the level of 2% at 1 month of treatment. But in laboratory test (Hb%, vaginal $p^H$) it showed no effect. After completion of 1 month of treatment, in case of Hb% and vaginal $p^H$ the effect of the trial drug is statistically insignificant.

Probable mode of action of the trial drug on Kaphaja yoni vyapad:

As all the yonirogas occur due to vitiation of vata so to treat lakshana of kaphaja yoni vyapad, we have to treat kapha as well as vata. Pippalyadi churna contains haritaki, pippali, louha bhasma.

By Karma haritaki it is tridosahara and due to ruksha guna it is Kapha samak. Due to Prabhav of pippali it becomes vatakaphashamaka.

Due to tikta, kasay rasa and ruksha guna of louha bhasma it subsides kapha by karma louha bhasma is tridoshamak.

By going through each ingredient's rasa, guna, virya, vipak, prabhava and karma, we came to know that each and every ingredient has the property of vata and kapha saman individually. That is why I consider this formulation for my trial.

CONCLUSION

From the present study, it is concluded that pippalyadi churna orally has not given result in yonisrava and yoni kandu after 15 days of treatment but has given result in yoni srava and yoni kandu after 1 month of treatment. From the study it is also observed that Pippalyadi churna orally has no effect on Hb% and vaginal $p^H$. But the present study was carried out on a small number of patients for a shorter duration, hence need to evaluate on a large number of patients and should be carried out for a longer duration.

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9. Brahmananda Tripathi, Madhav Nidan, yoni vyapad nidanam adhyay.


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