

**REVIEW OF CLINICAL STUDIES CONDUCTED ON UPAPLUTA YONIVYAPAD
(VULVOVAGINITIS DURING PREGNANCY) CONDUCTED AT IPGT & RA,
JAMNAGAR**

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ABSTRACT

Vulvovaginitis is the most common condition seen by the practitioners rendering primary care to the pregnant women. Any infection in the birth canal may cause premature rupture of the membrane and preterm labour which further harms the foetus. In *Ayurveda* under the Umbrella of *Yonivyapad*, *Upapluta Yonivyapad* is described by various *Acharyas* can be compared to Vulvovaginitis during pregnancy. *Upapluta Yonivyapad* is caused by vitiation of *Vata* and *Kapha* and it is characterised by yellowish vaginal discharge associated with pain in vagina. On *Upapluta Yonivyapad* (Vulvovaginitis during pregnancy) total three works in PG level has been completed out at Institute for Post graduate Teaching & Research in Ayurveda (IPGT & RA), Gujarat Ayurveda University, Jamnagar. Out of three research works, one work on *Panchavalkaladi Varti*, one work on *Panchavalkaladi Varti* and *Panchavalkaladi* ointment and one work on *Dhatakyadi Varti* have been done. All works are carried out as local drug therapy and they are quite beneficial to treat *Upapluta Yonivyapad* without producing any side effects. From these studies conclusion can be drawn that *Ayurvedic Yonivarti* (Vaginal Suppositories) will be a better alternative for management of Vulvovaginitis during pregnancy in future.

Keywords: *Upapluta Yonivyapad*, Vulvovaginitis during Pregnancy, *Panchavalkaladi Varti*,

INTRODUCTION

The desire to have a healthy progeny is innate & very intense in every living being. The hectic life and tremendous stress in today's world has made the conception & continuation of pregnancy to term very difficult. During Pregnancy bacterial and fungal infections of the genital track are increased due to increase in cell glycogen and reduced pH under influence of higher blood level estrogen. The major causes for this are said to be Lactobacillus species¹, Bacterial vaginosis with prevalence of 10-30%, and Vulvovaginal candidiasis with prevalence of 20%² and *Trichomonas vaginitis* with prevalence of 25%.³ *Upapluta Yonivyapad* is described by *Acharya Charaka*⁴, *Sharangadhara*⁵ and both *Vagbhata*^{6,7} can be compared to Vulvovaginitis during pregnancy. *Upapluta Yonivyapad* is caused by vitiation of *Vata* and *Kapha*. If pregnant woman habitual for taking *Kaphavardhaka Ahara-Vihara* and suppresses the *Chhardi-Nishswasa Vegas* causes *Upapluta Yonivyapad*⁸. *Upapluta* in *Garbhini* as described by our *Acharya* presents with symptoms like *Panduvarnasrava*, *Sweta* or *Kaphayukta Srava* associated with *Toda*. Both *Vagbhata*s have almost given the same description but have not restricted it to pregnancy only. On the contrary, *Charaka* has clearly mentioned that it is only a disease of the pregnant woman. Now-a-days, when human life is very fast, we should be ready to make necessary changes in our science according to the need of hour. These all three Clinical studies on *Upapluta Yonivyapad* were aimed to find out a method of treatment, which will impart a permanent, easy, effective cure and is with no or minimal side effect, which can be easily administered and accepted by the patient.

AIMS & OBJECTIVE

- To review research works on *Upapluta Yonivyapad* carried out at Institute for Post graduate Teaching & Research in Ayurveda, Jamnagar.
- To provide the guidelines for further research works in the area of *Upapluta Yonivyapad*.

MATERIALS AND METHOD

All the theses were collected from Department of Streeroga & Prasootitantra at Institute for Post graduate Teaching & Research in Ayurveda and Ayurvedic research database.⁹

Method: Hand search.

OBSERVATION

On *Upapluta Yonivyapad* (Vulvovaginitis during pregnancy) total 3 works in PG level has been completed out at Institute for Post graduate Teaching and Research in Ayurveda (IPGT & RA), Gujarat Ayurveda University, Jamnagar. Out of 3 research works, 1 work on *Panchavalkaladi Varti*, 1 work on *Panchvalkaladi Varti* and *Panchvalkaladi* ointment and 1 work on *Dhatakyadi Varti* have been done. The details of clinical trials are mentioning below.

1. A Clinical Study on *Upapluta Yonivyapad* w.s.r. to Vulvovaginitis during pregnancy & its management with *Panchavalkaladi Varti*

Scholar- Sunita Chaudhari, 2011.

A clinical study on 52 patients of *Upapluta Yonivyapad* (Vulvovaginitis during pregnancy) was carried out. All patients were registered and randomly divided into two Groups. In Group-A (n=27) 1 tablet of *Panchavalkala-*

*di Varti*¹⁰ (each of **1 gram**) was inserted locally in Vagina twice a daily and In Group-B (n=25) one tablet of Trida (Clotrimazole-200mg, Tinidazole-500mg Lactic-acid bacillus-150 million spores) standard control was inserted locally in Vagina once daily for 7 days. Among registered patients all completed the course of treatment except 1 in Group B. The effects of therapy in both the groups were assessed on the basis of relief in signs and symptoms for which special scoring pattern was made depending upon their severity. Both drugs had shown almost equal and highly significant response in the cardinal features. However, better symptomatic relief was observed in *Panchavalkaladi Varti*.

2. Further study on *Upapluta Yonivyapad* w.s.r. to Vulvovaginitis during pregnancy & its management by *Panchavalkaladi Yoga*

Scholar- Dr. Priti Singh Verma, 2013.

Total 44 diagnosed Vulvovaginitis patients were registered among them 39 patients were completed the course of treatment, for the clinical trial total patients were divided into three groups, In Group-A (n=14) 1 tablet of *Panchavalkaladi Varti* (each of **1 gram**) was inserted locally in Vagina twice a daily, in Group-B (n=15) *Panchavalkaladi* ointment (5gram) was inserted locally in Vagina twice a daily for 14 days and in Group-C (n=15) Clingen vaginal suppository 1 tablet was inserted locally in vagina once daily for 14 days with follow up of 30 days. In Group-A complete remission was observed in 25% of cases, Moderate improvement was observed in 33.33% of cases while 8.33% of cases remained unchanged. In Group-B, 33.33% of

patients got moderate improvement, 50% got mild improvement and 16.66% of cases remained unchanged. In Group-C 6.66% of patients had complete remission, 60% had marked improvement, 26.66% had moderate improvement and 6.66% had mild improvement. This study suggests that Group-A shows better effect than Group-B and Group-C.

3. A CLINICAL STUDY ON *UPAPLUTA YONIVYAPAD* W.S.R. TO VULVOVAGINITIS DURING PREGNANCY & ITS MANAGEMENT WITH *DHATAKYADI VARTI*"

Scholar- Dr. Nilofar Shaikh

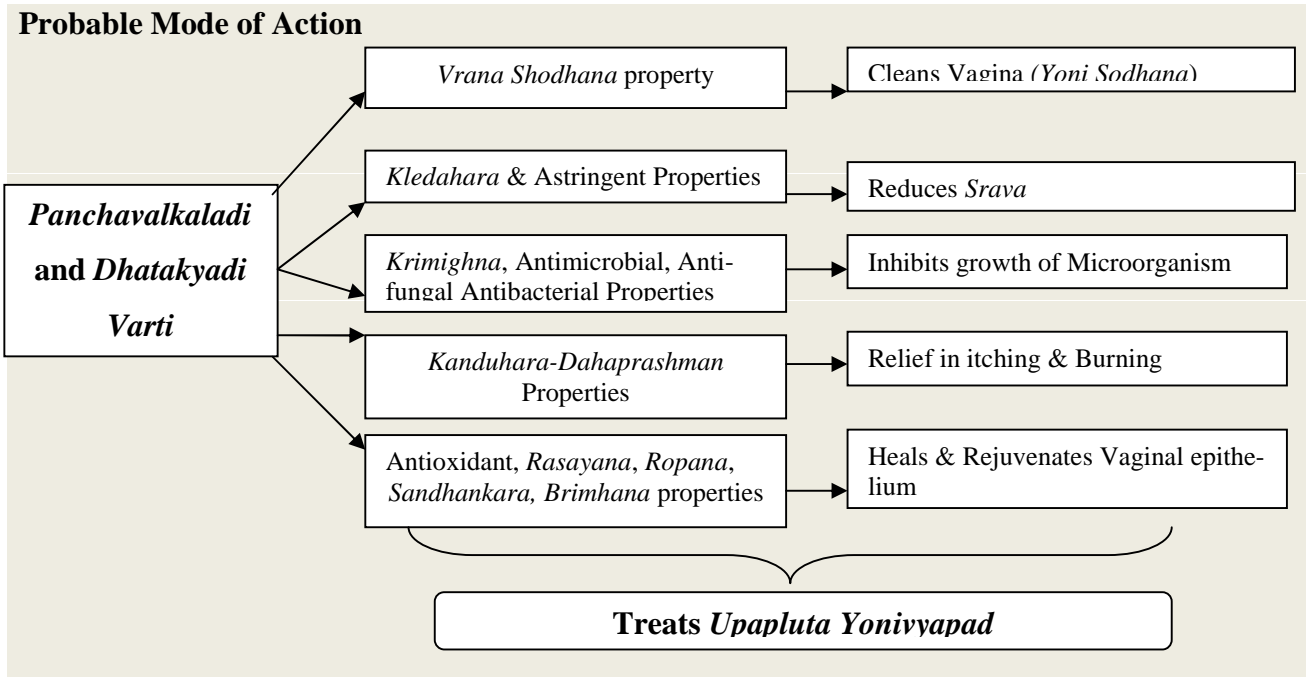
The study was planned in two phases i.e. survey & clinical both. Survey study carried out on 200 pregnant women. Clinical study was aimed to evaluate efficacy of *Dhatakyadi Varti*¹¹ in management of *Upapluta Yonivyapad*. Total 80 patients in the age group of 19-40 years were registered and randomly divided into two Groups. In Group-A (n=43) *Dhatakyadi Varti* each of 3 gm and in Group-B (n=30) one tablet of Clingen vaginal suppository was inserted intra vaginally once at bed time for 14 days. 3 patients from group A & 4 patients from group B dropped out study. The effect of therapy was assessed on the basis of relief in subjective & objective criteria (wet vaginal smear). In Group-A, 34.88% got complete remission, 34.88% marked improvement while 18.60% were found moderate improvement, 9.30% were found mild improvement and 2.32% remained unchanged. In the Group-B, 33.33% got complete remission, 10% were found marked improvement. While 10% were found moderate improvement,

26.66 % were found mild improvement and 20% remained unchanged. Survey questionnaire showed clinical features of *Upapluta Yonivyapad* in maximum no. of patients i.e. 56.5% among the 200 cases of *Garbhini*. Clinical study is concluded that the *Dhatakyadi Varti* is highly effective in reducing subjective & objective variables of *Upapluta Yonivyapad* & will also help in deriving new conclusion and axioms in management of vaginal discharge during pregnancy.

DISCUSSION

In first clinical study excellent result was found in *Panchavalkaladi Varti* to treat *Upapluta Yonivyapad* but in classics, *Panchavalkaladi Yoga* was mentioned in *Taila* form. So, to assess the efficacy of this *Yoga* in oil base *Panchavalkaladi* ointment was added in 2nd clinical study. *Panchavalkaladi Yoga* was described by *Acharya Vagbhatta* while *Dhatakyadi Yoga* was described by *Acharya Charaka*

for management of *Upapluta Yonivyapad*. Though both *Acharyas* have given same description of *Upapluta Yonivyapad* but only *Acharya Charaka* clearly stated that it is the disease of pregnant woman. So, in 3rd clinical study *Dhatakyadi Yoga* referred from *Charaka Samhita* was taken up for study. Dose of the *Varti* was increased (**3gram**) & Survey study was also added to elicit etiopathogenesis, complications & prevalence of *Upapluta Yonivyapad*. Most of the drugs of these *Yogas* have *Kashaya Rasa*, *Ruksha Guna* and *Kapha Dosha Shamaka* properties. They have been reported as *Stambhaka*, *Garbhashayashothahara*, *Kandughna*, *Twagdosahara*, *Krimighna*, *Dahaprashmana*. They have Pharmacological activities like analgesic, anti inflammatory, antimicrobial, antiprotozoal, hypoglycaemic, antiviral and antifungal properties. So, both the *Yoga* can be safely used during pregnancy to treat *Upapluta Yonivyapad* (Vulvovaginitis during pregnancy).



CONCLUSION

On reviewing all three clinical studies concrete conclusion can be drawn that *Panchavalkaladi Varti* and *Dhatakyadi Varti* are drugs of choice to treats *Upapluta Yonivyapad* (Vulvovaginitis during pregnancy). These are Herbomineral combinations which impart a permanent, easy, effective cure with no side effects and which can be easily administered and accepted by the patients.

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