CLINICAL STUDY OF PARIPLUTA YONIVYAPAD WITH YASHTIMADHU GHRETA YONI PICHU w.s.r TO PELVIC INFLAMMATORY DISEASE

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**ABSTRACT**

_Paripluta_ is one among the twenty _Yoni Vyapads_ mentioned in the classics. In this disease _pitta_ and _vatadusti_ are considered as primary cause. It can be correlated to pelvic inflammatory disease due its resemblance of clinical features. PID is of public health issue, especially in developing countries because of its high prevalence, economic and social implication. Delayed management of PID may result in higher rates of miscarriage, chronic pelvic pain, STD, progressive organ damage and long term reproductive disability due to its recurrence. The present clinical trial was designed to evaluate the role of _yashtimadhu ghrata yoni pichu_ in _Pariplutayonivyapad_ giving due consideration to its _doshic vitiation_ and _chikithsasiddhanta_.

**Keywords:** _Paripluta_, Pelvic Inflammatory Disease, _Yashtimadhu ghrata, yoni pichu_

**INTRODUCTION**

_Paripluta yonivyapad_ is disease seen in women of reproductive age group. Many women have silent clinical features of _Paripluta_ which has effect on her personal, interpersonal relationship between husband and wife. It is characterized by _gramya dharmaruja, shotha, sparshaakshamatwa_, painful menstruation & _vedana in sroni, vankhshana, prusta, kati_. Aggravated _pitta_ associated with _vata_ reaches _yoni_ and causes _sopha_ in _yoni_ & there is similar manifestation seen in pelvic inflammatory disease so it can be correlated with PID.

In the developing countries Pelvic Inflammatory Disease is clinical presentation frequently encountered in women of reproductive age. Every year more than 1 million women are exposed to pelvic infection. Many women have clinically silent spread of infection to the upper genital tract which results in subclinical Pelvic Inflammatory Disease affecting her...
health & productivity resulting in economic burden over family and thereby on the nation. The incidence varies from 1-2 % per year among sexually active women. About 85% are spontaneous infection in sexually active females of reproductive age. Recurrent chances of Pelvic Inflammatory Disease in the duration of 84 months is 21.3%. Pelvic Inflammatory Disease is defined as ascending, often recurring infections of female genital tract, which involves uterus & adnexae. In the normal conditions the vagina has a pH of 3.8-4.4 & is colonized by bacteria which may have a role in defence against infection. Any factor which upsets the vaginal pH including feminine hygiene products, repeated douching, IUCD, & frequent change of sexual partners which altered the vaginal defense mechanism & leading to over growth of pathogens causing upper genital tract infection. Delayed care of PID has a risk factor for impaired fertility, ectopic pregnancy, repeated abortions, chronic pelvic pain, STD and there are chances of recurrence.

In Pariputzoyonivyapad there is vitiation of vata-pitta, hence on the basis of dosahara & vedanastapaka, sothahara, dahaprashamna property of the drug Yashtimadhughrita has been selected for this study. This attempt is to evaluate the role of Yashtimadhughrita yoni pichu in Pariputzoyonivyapad w.s.r to Pelvic Inflammatory Disease

OBJECTIVES OF THE STUDY

- To study the detailed aetiopathogenesis of disease.
- To study the prevalence of the disease in specific age group.
- To study the effect of Yashtimadhughrita Yoni Pichu on Pariputzoyonivyapad.
- To develop a standardized proforma.

DETAILS OF THE DRUG

**Yashtimadhhu**

Rasa – Madhura

Guna – Guru, snigdha

Virya – Sita

Vipaka – Madhura

Karma – Vata pitta hara, Raktaprasadana, Balya, Varnya, Vrsya, Caksusya

Actions: Anti-Inflammatory, Anti-Biotic, Anti-Viral, Anti-Ulcer, Estrogenic, Anti-Oxidant.

**Ghrita**

Rasa – Madhura

Guna – Guru, snigdha

Veera- Sheeta

Vipaka – Madhura

Doshagnita – Vata, pitta, kaphahara

Karma: Medhakaram, smritikaram, chashushyam, Agni karam

Sopha haram, Vata pitta hara, vishaunmada, jwara, vrana

ACTIVE PRINCIPLE OF CHEMICAL CONSTITUENTS

**Glabridin, Glycyrrhitinic Acid, Sterols**

**GLABRIDIN:** Glabridin has effect in melanogenesis and inflammation by inhibiting the tyrosinase activity of melanocytes. Glycyrrhinic acid exhibits anti-inflammatory and antibacterial activity by inhibiting glucocorticoid metabolism.

**STEROLS:** Sterols also known as steroid alcohol, they are sub group of steroids & an important classic of organic molecules. Steroid hormones are glucocorticoids, mineralocorticoids, androgens, oestrogen, prosta glandins. Steroids hormones help to control the metabolism, inflammation & also immune function.
This drug possesses karma like shothahara (anti-inflammatory) & ropana (healing). Its having sheetaveerya, vata-pitta hara property which helps to reduce Shoona, Sparsha-asahatwa, mutradaha & gramyadharmeruja, vedana in shroni, vamkshana, prushta, kati.

METHOD OF PREPARATION
Here classical method of preparation followed for preparing yastimadhu ghrita

a. Go ghrita - 1 part,
   b. yashtimadhukalka - 1/6th,
   c. Yastimadhukwatha 1/8th part

1. Yastimadhukashaya & kalka prepared as mentioned in Sharangadharaasamhita. Go ghrita was collected in specified amount and was heated in copper vessel and then it was allowed to cool. After cooling, kalka was added & thoroughly mixed. Then kasaya was added.
2. Heating was done on mandagni till all the snehasiddhilakshanas are obtained. It was then filtered & stored in air tight container.
3. Kalka & kasaya has taken together to increase the potency of the trial drug.

MATERIALS AND METHODS
Minimum 20 patients attending OPD & IPD sections of department of Prasootitantra and Streeroga, SDM Ayurveda Hospital, Udupi, fulfilling the Inclusion and Exclusion criteria of disease were selected for study.

INCLUSION CRITERIA:
• Married women in between the age group of 18–45 yrs
• Patients presenting with symptomssshunatva of yoni, vedana in srioni, vankhshana, prushta (pain in pelvic, inguinal & lower back region, bilateral lower abdomen )
• Sparsha-asahatva (Adnexal tenderness, abdominal tenderness, cervical motion tenderness).
• Gramyadharmavedana (deep seated dyspareunia, post coital pain or discomfort)
• Abnormal cervical or vaginal discharges
• Pelvic Inflammatory Disease with diarrhea, nausea, anorexia.
• Irregular menstruation and spotting due to Pelvic Inflammatory Disease.

EXCLUSION CRITERIA:
• Pregnant women
• Acute Pelvic Inflammatory Disease and peritonitis, Tubo-ovarian abscess, reproductive malignancies
• P.I.D associated with prolapsed uterus
• P.I.D associated with infections like actinomycosis, tubercular, HIV etc.
• Endometriosis/chocolate cyst, pelvic abscess
• Severe or chronic ill health conditions

ASSESESSMENT CRITERIA:
Assessment is based on scoring method

Subjective parameters
• Gramyadharmavedana/ Maithunaasahisnutha
• Sparsha-asahatva/Fornices and cervical motion tenderness
• Vedana in sroni, vankhshana ,prushta, Kati
• Yoni srava
• Mutradaha

Objective parameters
• Inflammatory changes of vagina
• Inflammatory changes of cervix
Vaginal discharge

INTERVENTION
Patient fulfilling above criteria are selected and assigned in a group for administration of Yastimadhughrityoni pichu. Duration of the Study: 7 days & Follow up – after 15 days.

PROCEDURE
On day 1st, all the investigations needed for the diagnosis were carried out and repeated on the 8th day after completion of the procedure. Changes were noted before & after treatment.

- Purva karma
  a) Using pH paper, vaginal pH noted with help of pH paper before and after treatment
  b) Patient was made to empty the bladder
  c) Patient was made to lie down in lithotomy position & both the legs covered with leggings
  d) Vulva region was cleaned with antiseptic solutions

- Pradhana karma
  a) With gloved hands, vagina exposed and pichu dipped in yastimadhughrity and inserted into vaginal canal

- Paschat karma
  a) Patients were instructed to retain the pichu for 3 hours or till the urge to micturition.
  b) Patients were instructed abstinence for at least 7 days & later compulsorily use of barrier method for period of 1 month

INVESTIGATIONS
- pH of vagina, High vaginal swab for culture sensitivity
- Haemoglobin, TC, DC, ESR, RBS
- Urine examination- Routine and Microscopic
- Abdomino–pelvic USG, Pap smear, Cervical punch biopsy, Laparoscopy, if required

OBSERVATION
The observation made on 20 patients of Paripluthayoniyapad showed maximum number of women in between the age group of 26-30 years, 85% patients were hindus, 45% of werevata-pittaprakruti, 45% had complaint of dysmenorrhoea, 95% had Maithunaasahishnuta, Sparshaasahatwa, absence of katisoolaa in 70%, 100% had complain of yoni srava, 60% had mutradaha, 80% had moderate lower abdominal tenderness, 35% severe cervical motion tenderness, 55% mild uterine motion tenderness, 30% vaginal congestion & 70% cervical congestion were noticed.

RESULTS
Statistical analysis suggests that the administration of Yastimadhughrity is highly significant in treating almost all the major symptoms of gramyadharmaruja, shotha, sparshakshamatwa, vedana in sroni, vankhshana, prusta, kati. The overall result shows maximum improvement in all assessment parameters.

<table>
<thead>
<tr>
<th>Assessment criteria</th>
<th>Before treatment</th>
<th>After treatment</th>
<th>Follow up period</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maithunaasahishnutha</td>
<td>2.50</td>
<td>0.45</td>
<td>0.05</td>
<td>Extremely significant</td>
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<tr>
<td>Sparsha-asahatva</td>
<td>2.10</td>
<td>0.30</td>
<td>0.10</td>
<td>Extremely significant</td>
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<tr>
<td>Katisoolaa</td>
<td>2.90</td>
<td>1.25</td>
<td>0.50</td>
<td>Extremely significant</td>
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<tr>
<td>Mutradaha</td>
<td>0.60</td>
<td>0.05</td>
<td>0.00</td>
<td>Extremely significant</td>
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<td>---------------</td>
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</tr>
<tr>
<td>Yoni srava</td>
<td>2.0</td>
<td>1.7</td>
<td>1.7</td>
<td>Statistically significant</td>
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<tr>
<td>Vaginal congestion</td>
<td>0.45</td>
<td>0.00</td>
<td>0.00</td>
<td>Extremely significant</td>
</tr>
<tr>
<td>Cervical congestion</td>
<td>2.75</td>
<td>0.90</td>
<td>0.15</td>
<td>Extremely significant</td>
</tr>
<tr>
<td>Vaginal discharge</td>
<td>2.30</td>
<td>2.00</td>
<td>1.95</td>
<td>Statistically significant</td>
</tr>
<tr>
<td>Vaginal pH</td>
<td>7.20</td>
<td>5.85</td>
<td>-</td>
<td>Extremely significant</td>
</tr>
</tbody>
</table>

EFFECT OF TRIAL DRUG

- **Effect on Maithunaasahishnutha:** In this study effect of treatment over Maithunaa-sahishnutha is a statistically extremely-significant (P<0.0001). This is due to vata-pitta hara, shothahara & ropana property of the trial drug. Hence vata-pitta shaman was the primary aim in this study.

- **Effect on Sparsha-asahatva:** There is inflammation in the yoni which leads to severe tenderness. The trial drug is statistically extremely-significant (P<0.0001) due to its anti-inflammatory, anti-bacterial, anti-fungal activity. There is effect on pathology as well as symptomatic relief. The Rasayana and balya property of the drugs has also contributed to the better and faster healing of the tissues.

- **Katishoola:** The effect of treatment is statistically extremely significant (P<0.0001). Here vitiated vata is main factor for katishoola and the trial drug is vatashamaka, shothahara property hence there is symptomatic relief. Most of the time low back-ache is seen in chronic pelvic infection condition. The pain experienced was explained as of a dull aching & it is continuous type, by most of the patients. Pain may be because of the involvement of upper genital tract.

- **Yoni srava:** Data shows a considerable decrease in the yonigatasrava. The observed decrease was found to be statistically significant (P<0.001)

- **Mutradaha:** Statistically extremely significant (P<0.0001) decrease was observed in mutradaha. This is due to sheetavirya & snigdha-guna, pitta hara property of the trial drug.

- **Vaginal congestion & cervical congestion:** Vaginal congestion is statistically extremely significant (P<0.0001) & cervical congestion is statistically extremely significant (P<0.0001). All these symptoms have shown significant changes at these p values. This can be result of trial drug which is having sheet virya, shothahara, ropana properties of yastimadhu-gritapichu & the chemical constituents and mechanism of action of drugs possess activities like anti-inflammatory action which has healing as well as soothing effect on the tissues& helps to treat the inflammation.

- **Vaginal discharge:** Per vaginal examination revealed a considerable decrease in the muco-purulent vaginal discharge after the treatment with Yastimadhu-gritapichu which was statistically significant (P<0.001)

- **Vaginal pH:** The alkaline vaginal pH before treatment was restored to normalcy after the treatment. Which was statistically extremely significant (P<0.0001).

- **Vaginal swab:** Out of 20 patients of study group, the vaginal swab culture of one patient showed the presence of Escherichia coli bacteria & swab culture of 4 patients showed the presence of pseudomonas ae-
ruginosa gram negative bacteria. After the treatment, swab culture showed that there was no growth of E.coli & persistence of pseudomonas aeruginosa, clinically there was substantial statistical significant result.

- Haematological parameters and USG: Haematological parameters like Hb%, TC, DC ESR, urine routine, RBS and USG were normal during pre-therapy session.

**DISCUSSION**

Prevention and cure is main goal of medical science. A woman undergoes various physical & physiological changes during her life such as puberty, pregnancy, labour, puerperium and ultimately menopause having deleterious effect on the reproductive tract. During these stages the women’s reproductive tract organs become a target of multitudes of pathological process like infections, immunological and histopathological entities. Out of this PID is common in clinical practice, presenting with pelvic pain, vaginal discharge, dyspareunia, menstrual irregularities and lassitude along with pyrexia.

Pariplutayonivyapad is predominant in vata-pitta dosha. All the Nidana, laxana, samprapti and chikithsa mentioned by acharyas while discussing about vimshantiyonivyapad. A female with pitta predominance on consuming pitta vardhakaahara like atiushna-teekshna, katu, amla, lavana causes vitiation of pitta along with expose viharas like vegadharana of kshawathu-udgara during coitus, upavasa leading to vitiation of vata. This doshadusti of vata-pitta reaching the yoni produces laxans as like shoonaa, sparshakshamata, and gramyadharmeruja, vedana in bahaya & abhyantara yoni.

The drugs used in this study are yastimadhu and Go ghrita. Yastimadhu is one of the essential drugs mentioned in samhitas & go-ghrita is best drug for pitta shamaaka and tri-doshagna. This test drug possesses karma like shothahara (anti-inflammatory) & ropana action. Its having sheetaveerya & vata-pittahara property which helps to reduce shoonaa, sparsha-asahatwa, mutradaha & gramyadharme-ruja, vedana in shronivamkshana, prushta, kati. Hence the trial drug has been taken for the study.

Pelvic inflammatory disease is characterized by inflammation as well as congestion of the vagina & cervix. The chemical constituents and mechanism of action of drugs possess activities like anti-inflammatory, anti-bacterial, & anti-fungal. Therefore GLUCYRRHIZA GLABRA may have mode of action on signs & symptoms of this disease.

**CONCLUSION**

Paripultayonivyapad is a vata-pittaja disorder, characterized by gramyadharme-ruja, shotha, sparshakshamata, painful menstruation having yellowish or bluish color of menstrual blood, vedana in sroni, vankhshana, prusta, kati. Aggravated pitta associated with vata reaches yoni leads to Pariplutayonivyapad. Pelvic Inflammatory Disease presents with bilateral lower abdomen pain associated with tenderness, dyspareunia, vaginal discharge which is mucoid or muco-purulent in nature & menstrual irregularities. Similar clinical presentation can be seen in Pariplutayonivyapad. The management is based on thodoshic vitiation i.evata- pitta shamaaka and shothingna and ropana property. Based on this prelude the drug Yastimadhughrita has been selected for study. In this study trial drug has shown re-
markable results over the assessment criteria of the Pariplutayonivyapad w.s.r to Pelvic Inflammatory Disease. From this study it can be concluded that Yashtimadughritayonipichu is an effective local treatment in the management of the ParipluthaYonivyapad.

REFERENCES


Source of Support: Nil
Conflict Of Interest: None Declared