



CRITICAL ANALYSIS OF VAGINAL INFECTIONS IN AYURVEDA

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ABSTRACT

Nowadays, due to life style modification, altered dietary habits like junk foods, untimely foods, stress, sedentary life, women's are facing multiple health problems from menarche to menopause. Among them the commonest problem which is observed in present era is vaginal infections such as bacterial infections, fungal infections, etc. vaginal infections are identified primarily in sexual active women. In India BV is the most prevalent infection (48.5%) followed by VVC (31%) and mixed infections (20.5%). Candida albicans was found to be the most prevalent species. Out of non-albicans Candida (NAC) species, C. tropicalis was found to be the most prevalent species. Overall distribution of C. albicans and NAC species indicated marginally high prevalence of NAC species (53%) than C. albicans (47%)¹. Specific screening measures like Pap smear and wet vaginal swab when employed appropriately revealed the cervical pathology. In Ayurveda, *acharyas* explained about *yoni vyapat*, among twenty types of *yoni vyapats*, *kaphaja yoni vyapat*, *vipluta*, *aticharna*, *acharna*, *upapluta yoni vyapat* can be correlated with vaginal infections.

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INTRODUCTION

Vaginal infections are the one of the commonest gynecological complaint among the women in their active reproductive life. Due to the daily routine, women habituated to modern dietary habits leading to sedentary and stressful life style, this manifests in the female reproductive system with clinical features of unctuousness, itching, burning, curdy white discharge and dull pain in the vagina². BV and VVC involve disturbance in normal vaginal flora which is the main cause of both infections. As the candidiasis is the second commonest cause of vulvo vaginitis³ caused by excessive growth of Candida species which is normally present in small number and is harmless if left untreated the vaginal pH will get altered to lower acidic range or higher alkaline range and this leads to alteration and replacement of the columnar epithelium of ectocervix with that of squamous epithelium at squamo-columnar junction resulting in immature unstable cells (dysplastic) which may turn to metaplastic changes⁴.

The pH of vagina is varies during different phase of life and menstrual cycle and it is acidic that is 4.5 average. The causative organism of the media is Doderlein's bacilli. This bacilli converting glycogen in lactic acid to maintain vaginal pH. The process of carcinogenesis starts from transformation zone this is a dynamic zone. The process of replacement of endocervical columnar epithelium by squamous epithelium

involves two mechanism that is by squamous metaplasia of subcolumnar reverse cell and by squamous epidermidisation by in growth of squamous epithelium of ectocervix under the columnar epithelium. Risk factors for vaginal infection are hormonal changes such as associated with pregnancy, birth control pills or menopause. Apart from that increasing age leads to the oestrogen deficiency which is more favorable for the infectious agent⁵.

In *Ayurveda*, *acharyas* explained about *yoni vyapat*, among twenty types of *yoni vyapat*, *kaphaja yoni vyapat*, *vipluta*, *aticharna*, *acharna*, *upapluta yoni vyapat* can be correlated with vaginal infections.

In *kaphaja yoni vyapat* "*kandugrasatamalpavedanam*¹⁰" is the itching sensation of vagina. In *acharana yoni vyapat* "*yonyamadhavanat kandum jatah kurvanti jantavah*¹¹" indicates the infection. In *aticharna yoni vyapat* "*pavanoativyavayen shophsuptirujah striyah*¹²" means inflammation, numbness and pain of reproductive organ because of excessive sexual act indicates the cause of vaginal infection.

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Table 1

Sr	Type of Infection	Organisms	Symptoms	Signs	Other Risks	Treatment
1	Bacterial vaginosis	Prevotella, mobiluncus, Gardnerella vaginalis, ureaplasma, mycoplasma	Fish like smell, discharge per vagina, sometimes pelvic discomfort	No inflammation	Increase risk of HIV, gonorrhoea, herpes, chlamydia	Metronidazole 400mg TID for 5 days. Clindamycin 300mg BD for 7 days. Metronidazole gel (0.75%) 5gm BD intravaginally or clindamycin intravaginal cream 2%- 5gram OD ⁶
2	Vulvovaginal candidiasis	Candida albicans	Thick, cheesy or curdy white discharge, itching or/and burning at vulval site, usually odor absent	Redness and edema in vulva	-	Fuconazole 150mg for 1 day or Ketoconazole 100-200mg BD for 5 days, etc ⁷
3	Trichomoniasis	Trichomonas vaginalis	Yellowish/greenish frothy discharge, foul odor present, pain in vaginal region	Strawberry cervix, inflammation	Increased risk of HIV and preterm labor	Prevention of spread by condom. As medication metronidazole 2 grams in a single dose or 400mg Bd for 7 days for both partners. Tinidazole or Secnidazole 2 grams single dose ⁸
4	Atrophic vaginitis	Estrogen deficiency	Vaginal dryness, thin clear discharge, dyspareunia, itching	Inflammation, thin friable vaginal mucosa	-	Ethinyl estradiol 0.01mg daily for 21 days. oestrogen vaginal cream (conjugated estrogen cream 1.25mg) ⁹
5	Allergic vaginitis	Allergic reactions	Burning, soreness	Vulvar redness	-	
6	Inflammatory vaginitis	Possibly autoimmune	Purulent vaginal discharge, burning, dyspareunia	Vaginal atrophy and inflammation	Associated with low estrogen levels	

Table 2

Yoni Vyapat	Dosha Dominance	Lakshana	Chikitsa Sutra	Chikitsa
Kaphaja	Kapha	Pichhila Sheeta Kandu (itching) Alpa vedna Pandu varna shareera	Ruksha and usna chikitsa	Trivrit kalka dharana in yoni ¹⁵
Acharna	Vata	Kandu Atinarakanshini (excessive sexual desire)	Uttarbasti of oil treated with jeevaniya gana	Jeevaka, rishibhaka, kakoli, ksheerkakoli, meda, mahameda. Etc ¹⁶
Aticharana	Vata	Shotha Shunyata Vedana	Anuvasana basti and asthapana basti with vata hara dravyas and shatpaka taila ¹⁷	Kulattha, sharpunkha
Upapluta	Vata kaphaja	Toda (pricking pain) Pandu srava	Vata hara chikitsa	Dhatkyadi taila pichu ¹⁸
Vipluta	Vata	Nitya vedana (continuous pain) in yoni	Vata nashaka ahara and sneha pichu dharana	Dhatkyadi taila pichu ¹⁹

Upapluta yoni vyapat lakshanas "pandum satodamasravam shwetam sravati va kapham"¹³ means painful white discharge shows the discharge per vagina. Vipluta yoni vyapat "viplutam nityavedanam"¹⁴ indicates the regular pain in pelvic organs such as vagina. These all causes and symptoms are related to the vaginal infections.

DISCUSSION

Mostly yoni vyapats are described which are having infection like features are having vata and kapha dominance, in which snigdha, srava, vedana etc symptoms are arising. To subsiding these symptoms the treatment should be apposite guna. Ruksha dravyas will subside its snigdha lakshanas, ushna dravyas reduces the sheeta lakshans. Jeevaniya gana or any other medications which are having vata hara properties that will cure disease arising from vata dosha. Pichu, Uttarabasti, asthapana and anuvasana basti are sthanika chikitsa, it can be more effective in comparison of oral administration of drugs because of acting direct to the vaginal mucosa and nearby area. So one should be very careful about the aggravating and reliving factors of the symptoms of vaginal infections. Strictly avoidance of use of common toilets, use of wet undergarments etc. habit of washing genitalia have to adopt, proper hygiene should be maintain, dry the undergarments in the sun light.

CONCLUSION

Ayurveda, being a life science offers holistic approaches any ailment. Sthanika chikithsa explained in the classics along with or without oral medications render cure from possible ways without affecting much the vaginal flora. The proper aahara vihara followed will be much useful in the prevention and treatment of the vaginal conditions.

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