

AN AYURVEDIC APPROACH TO THE MANAGEMENT OF VULVOVAGINAL CANDIDIASIS, WITH SPECIAL REFERENCE TO KAPHAJA YONI VYAPAD - A CASE STUDY

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ABSTRACT

Vulvovaginal Candidiasis is one of the most common gynaecological disorders. In Ayurveda, the symptoms of VVC can be correlated to *Kaphaja Yoni Vyapad*, as explained by the *Acharyas - Charaka, Sushruta and Vagbhata* in their treatises. A 42-year-old female patient reported to our OPD with complaints of *Yoni Kandu* and *Yoni Srava* intermittently for 6 months. Urine culture revealed the presence of *Candida albicans* and *Escherichia coli* and microscopy revealed the presence of Pus cells in urine. Vaginal inspection and bi-manual examination revealed the presence of excessive curdy white discharge. The patient was treated with *Rohitaka Twak Churna* with *Madhu* orally, *Plaksha Twak Churna* and *Madhu Yoni Varti* along with *Yoni Prakshalana* with *Trpahala Kashaya* and *Tankana Bhasma* for 45 days. The patient found complete relief from *Yoni Kandu* and *Yoni Srava*.

KEYWORDS: Case Study, Kaphaja Yoni Vyapad, Ekamoolika Prayoga, Ayurveda, Plaksha, Rohitaka.

INTRODUCTION

Women experience health differently than men from childhood to old age, her health is important for her family because it contributes to her overall well-being and can affect many aspects of society. Any discharge per vagina causes a varying amount of discomfort in her life. One such is white discharge per vagina with itching which is seen due to changes in lifestyle, food habits, hygiene in their day-to-day life. Vulvovaginal candidiasis (VVC) is the

second most common cause of vaginitis after bacterial vaginosis.^[1] Incidence of Vulvovaginal candidiasis (VVC) presently exist as About 75% of women will experience at least one episode of VVC in their lifetime. About 40%–45% of women will experience two or more episodes of VVC in their lifetime About 10%–20% of women will experience complicated VVC, which requires special treatment.^[2] Recurrent vulvovaginal candidiasis is a debilitating, long-term condition that can severely affect the quality of life of affected women.

Among twenty *Yonivyapad* enlisted by acharyas *Kaphaja Yonivyad* is one among them. In this disease the person suffers from *Kandu* (itching in vulval region), *Sheeta* (without warmth discharge), *Picchila* (slimy discharge per vagina), *Avedana* (no pain) and *Alpa Vedana* (mild pain), where *Kaphaja Dosha* is aggravated due to *Snighda*, *Picchilaadi* *Abhishyandi Ahara*, the vitiated kapha reach to *Yoni Pradesha* and enters *Arthavavaha Srotas* leads to *Kaphaja Yoniroga*.

According to our classics *Kaphaja Yoni Vyapath* is similar to clinical features of vulvovaginal candidiasis.^[3]

Vulvovaginal candidiasis (VVC)

Clinical features of VVC are Vaginal discharge, pruritus, erythema, fissures, satellite lesions, excoriation, and vulvar oedema. Vulvar pruritus is one of the dominating symptoms in VVC. Vaginal discharge is the important symptom of VVC. But not all discharges are because of VVC. Common aetiology include Candidiasis, Trichomoniasis, Bacterial Vaginosis, Gonorrhoea, Chlamydia, and Herpes simplex. Vaginal discharge can be little or no discharge at times. If the discharge is present, curd-like without or with minimal odour. Discharge can also be loose, watery, homogenous, and indistinguishable from other causes of discharge.^[4]

HISTORY

A 42-year-old female patient reported to the OPD of Sri Sri College of Ayurvedic Science and Research Hospital, Bengaluru with complaints of severe itching sensation in the vulva associated with excessive white discharge from the vagina for 6 months recurrently. The patient was diagnosed with Vulvovaginal candidiasis and was treated by a conventional medicine practitioner. The patient did not find any relief as the condition recurred soon after the course of medications. Hence, the patient came to our hospital for further treatment.

Treatment history

1. CLINGEN FORTE VAGINAL CAPSULE - one capsule at bedtime X 7 days
2. VDM KIT (FLUCONAZOLE, AZITHROMYCIN and SECNIDAZOLE) for patient and spouse X 7 DAYS
3. TAB AF150 once a week X 8 weeks
4. TAB CIFRAN 500 twice daily X 5 days

Dashavidha Pariksha

1. *Prakruti - Pitta-Vata*
2. *Vikruti - Kapha*
3. *Sara - Madhyama*
4. *Samhanana - Madhyama*
5. *Pramana - Madhyama*
6. *Satmya - Madhyama*
7. *Satva - Madhyama*
8. *Ahara Shakti - Avara - Mandagni*
9. *Vyayama Shakti - Madhyama*
10. *Vaya - Madhyama*

LOCAL EXAMINATION

Examination of the Vulva

Inspection - no anatomical anomalies

thick curdy white discharge ++

Bi-manual examination of Vagina - Thick curdy white discharge ++++
congestion ++

DIAGNOSIS

KAPHAJA YONI VYAPAD

(VULVO-VAGINAL CANDIDIASIS)

TREATMENT PLANNED

1. *ROHITAKA TWAK CHURNA* 5gm twice daily with *MADHU* (honey) - (after food)
2. *PLAKSHA TWAK CHURNA* with *MADHU YONI VARTI* insertion once daily after bath till the patient feels the urge to urinate

3. TRIPHALA KASHAYA (1 litre) with 1 PINCH SHUDDHA TANKANA BHASMA for YONI PRAKSHALANA twice daily for 45 DAYS.

The drugs were procured from the herbal garden of Sri Sri College of Ayurvedic Science and Research and were processed in the *Dravyaguna* Laboratory. *Shuddha Tankana Bhasma* was obtained from the pharmacy of Sri Sri College of Ayurvedic Science and Research Hospital

RESULT

Table 1

	Day 0	Day 7	Day 14	Day 21	Day 28	Day 45
Pruritus Vulvae	+++	++	+	+	nil	nil
Curdy white discharge	+++	+++	++	+	+	
Odour	++	+	nil	Nil	nil	
Dyspareunia	+	Nil	nil	Nil	nil	

Table 2

Observation	Criteria	Grade	Grading : Before	After
Amount of Vaginal secretion	No Minimal discharge, vulval moistness \wetting of undergarments occasionally Moderate discharge with wetting of undergarments Heavy discharge, which needs pads	0 1 2 3	3	0
Consistency	No discharge Mucoidal discharge Mucopurulent discharge Milky discharge	0 1 2 3	3	0
Itching	No itching Occasional itching Itching with partial disturbance in work Itching disturbs daily routine and sleep	0 1 2 3	3	0
Odour	Absent Present	0 1	1	0
Dyspareunia	Painless coitus Pain during coitus, but able to complete the intercourse Pain during intercourse requiring interruption of act Pain during intercourse, preventing the sexual act	0 1 2	1	0
Burning micturition	No burning Sometimes mild bearable by the patient Moderate Severe (patients avoid the micturition)	0 1 2	1	0

DISCUSSION

Rohitaka Twak Churna (*Amoora rohituka* Roxb.) possesses antifungal, antibacterial, antimicrobial, and anti-oxidant activities due to the presence of B Sitosterol, flavonoids, phenols, and lapachol which help reduce excessive white discharge, prevent and destroy fungal infections causing vaginitis.^[5]

While *Rohitaka Moola* is mentioned in *Charaka Samhita Chikitsa Sthana Yoni Vyapad Adhyaya* as the manager of *Sweta Pradara*, *Twak* can be substituted if *Moola* is unavailable.

Rohitaka possess *Tikta*, *Kashaya* and *Katu Rasa*. *Tikta Rasa* possesses *Krimighna*, *Kandughna*, *Lekhana*, *Kleda-Lasika-Puya-Pitta-Sleshma Upashoshana Karma*, *Kashaya Rasa* has *Ropana*, *Shoshana*, *Shleshma-Rakta-Pitta Prashamana* and *Kleda Shoshana Karma*. *Katu Rasa* exhibits *Kandu Vinashana*, *Shwayathuhara*, *Vrana Avasadana*, *Krimighna*, *Margavivarana* and *Shleshma Shamana Karma* which effectively work against excessive curdy white discharge, pruritus and inflammation.^[6]

Plaksha Twak Churna has been advised to be made into a *Pinda* form along with *Madhu* and used for *Yoni Purana* to treat *Yoni Srava* in *Charaka Samhita Chikitsa Sthana Yoni Vyapad Adhyaya*. *Plaksha Twak* (*Ficus microcarpa* Linn.) due to *Lekhana* and *Ropana* properties does *Kapha-Piita Shamana* and reduces *Yoni Srava* and also possesses *Laghu* and *Ruksha Guna*. *Lekhana Karma* is attributed to the reduction of *Srava* and *Ruksha Guna* is attributed to drying up of the *Srava*. *Plaksha* is rich in coumarin, catechin, flavonoids, hydroxybenzoate and lactones and shows anti-bacterial activity against *Escherichia coli*, thus reducing itchiness and possessing antioxidant activity. the anti-inflammatory effects help reduce congestion of the cervix as well.^[7,8]

Triphala Kashaya along with *ShuddhaTankana Bhasma* is the drug of choice for *Yoni Prakshalana* in the case of *Kaphaja Yoni Vyapat* due to its immediate anti-pruritic effect due to its anti-microbial, anti-fungal and anti-bacterial effect.^[9] *Shuddha Tankana Bhasma* (Sodium Tetraborate) also does *Kapha Vishleshana* (mucolytic) which helps in *Yoni Shodhana*.^[10]

CONCLUSION

Vulvovaginal candidiasis can be correlated to *Kaphaja Yoni Vyapad* and the Ayurveda line of management was done by administering *Rohitaka Twak Churna* internally with honey,

Plaksha Twak Churna with Honey as *Yoni Varti* and *Triphala Kashaya* with *Tankana Bhasma* for *Yoni Prakshalana* yielded significant results as opposed to when the patient was treated with conventional line of management by antibiotic and antifungal agents. Ayurveda management is an effective, reliable, sustainable and safe approach to Vulvovaginal candidiasis.

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