

ROLE OF *STHANIK CHIKITSA* IN *YONIBHRAMSHA*: A CASE STUDYDr. Shivani Katna*¹, Dr. Seema Shukla² and Dr. Meena Parmar³

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ABSTRACT

Yonibhramsha or pelvic organ prolapse is one of the commonest complaints among women of menopausal age group. Pelvic organ prolapse develops from weakening of the pelvic muscles and supportive tissues. Ayurveda explained this condition as *Yonibhramsha*.^[1,2] *Yonibhramsha* refers to any displacement of pelvic organ from its anatomical position. A 60 years old female patient suffering from incontinence of urine, increased frequency of urine, and feeling of something coming out of vagina off and on since two years with aggravation of symptoms from two weeks presented to *Prasuti Tantra Evam Stree Roga* OPD. It was associated with *Katishool*. On enquiry, it was found that she was menopausal since 18 years. She had given birth to four children, all at home through normal spontaneous vaginal delivery during her reproductive years. She had no history of any hypertension, diabetes or thyroid disorder. She also gave no

history of any prolonged illness or any surgical history. On local examination it was found that she was suffering from 2nd degree cystocele and 1st degree uterine prolapse.^[3] Thus line of management was planned to control her symptoms by prescribing Ayurvedic drugs along with *Sthanik Chikitsa* and yogic exercises and treated her with *Yonilepam*^[4] of *Madhuyashti Churan*, *Madanphala Churan* and *Karpura Churana* followed by *Yonidhawana* with *Triphla Kashaya* along with practice of *Moolbandha* and *Ashwini Mudra*^[5] for 7 days. She had followed the schedule of *Sthanik Chikitsa*, oral medicines and *Pathya-Apathya* properly. It

was observed that, symptoms were started to reduce gradually which has been depicted by documentation of symptoms and local examination in this case study.

KEYWORDS: Yonibhramsha pelvic organ prolapse, Sthanik Chikitsa, Yoni, Yonilepam, Yonidhawana, Moolbandha, Ashwinimudra.

INTRODUCTION

Yonibhramsha is made by two words *Yoni* & *Bhramsha*. Here the word *Yoni* refers to the entire female reproductive system and the word *Bhramsha* means displacement of any pelvic organ from its original position. *Acharya Sushruta* has also mentioned in *Mahayonivyapad* the word *Vivrita ati* that denotes excessive dilatation or widening of vagina that can be due to laxity of vagina. *Yogratnakar* also seconds *Shushruta's* vision. Description of *Yoni-Bhramshaha* given by *Acharyas* in details under the heading of different *Yonivyapad* in *Ayurveda* texts such as – *Phalini Yonivyapad*, *Andini Yonivyapad*, *Vatika Yonivyapad*, *Prasramsini Yonivyapad*, *Maha Yoni* and under the heading of *Dushprajata Roga* (due to *Asamyak Prasava*) by *Acharya Kashyap* in *Khila Sthan Sutikopakramaniya*. *Yoni-Bhramsha* can be correlated with Pelvic Organ Prolapse in modern science based on its clinical features. Correlation of different *Yoni-Vyapad* which comes under the *Yoni-Bhramsha* like *Phalini Yonivyapad*, *Mahayoni*, *Visramsani* etc.

CASE REPORT

A 60 years female patient suffering from feeling of something coming out of vagina (*Yonibhramsha*) since two years was presented to *Prasuti Tantra evum Stree Roga* OPD. On enquiry, she also gave history of other associated features like, *Katishool*, *Mootrakricha*, incontinence of urine since two years. She was menopausal since 18years.

History of Past Illness: no history of DM II, HTN, Thyroid disorder.

History of Surgery: no Surgical History

Family History: Nothing Significant.

Clinical Examination

Pulse	80/min
BP	132/86mm of Hg
Temp.	98.4degree F
RR	18/min
<i>Agni</i>	<i>Vishama</i>
<i>Koshtha</i>	<i>Maadhyama</i>

<i>Prakriti</i>	<i>Vata Pradhan</i>
<i>Sara</i>	<i>Maassar</i>
<i>Mutra</i>	<i>Vivanadha,</i>
<i>Mala</i>	<i>Samanaya</i>

Obstetrics History

G -4, P-4, L-4, A-0

LCB- Male child delivered by NSVD at home 40yrs back

Per Abdomen: No Abnormality Detected.

On Examination	Vaginal mucosa congested, 2nd degree cystocele
P/S	Cervix hypertrophied, regular, congestion on os present, thin white discharge present
P/V	Cervix Hypertrophied, regular, firm, mobile, no motion tenderness, cervix was descended about 1cm below its normal position
Uterus.	AV, atrophied, mobile, non-tender,
Fornix	B/L clear, non-tender

POP Q GRID

Aa-0.5cm	Ba-3cm	C-4cm
Gh4cm	pB3.5cm	TVL6cm
Ap-1.5cm	Bp-3cm	D-6cm

INVESTIGATIONS

(22/02/23)

RBC – 4.98X 100000/ μ l
Hb – 13.2 gm/dl
HCT- 39.9%
MCV – 80.1/Lt
MCH – 25.3 pg
MCHC – 31.6 gm/dl
PLT – 242X 1000 μ l
M% - 12.4%
N% - 56.6%
ESR – 15mm/hr
B.Urea – 26mg/dl
S. Cholesterol -203 mg/dl
RBS -126mg/dl
URINE- NAD
HIV-NR
VDRL-NR
USG - Revealed no significant abnormality

SAMPRAPTI- *Vatvardhak Ahara Vihaara, Duprasava, Jara* all leads to vitiation of *Vata* normal *Vata* is important for *Dharan* of all body organs. *Vitiated Vata* cause *Chyuti* of *Yoni* from its original position hence cause *Yonibhramsha*.

Samprapti Ghatak

<i>Dosha</i>	<i>Vata</i>
<i>Dushya</i>	<i>Mamsa</i>
<i>Strotsa</i>	<i>Rasvaha, Masvah, Mutravah, Aartavvaha Strotas</i>
<i>Marag</i>	<i>Bhahya, Abhyantara</i>
<i>Mahabhuta-</i>	<i>Prithvi, Jala, Vayu</i>

PLAN OF TREATMENT

Yonilepam was done with *Madanphal, Madhuyashti* and *Karpur Churan* for 7 days.

Yonidhawan was done after 2hrs of *Yonilepam* with *Triphla Kashaya*.

Practice of *Moolbandham* and *Ashwini mudra* three times a day, all for three consecutive cycles.

Ayurvedic Management

Drug	Dose	Ingredients	Mode of Administration
<i>Chandraprabha Vati</i> ^[6]	125 mg BD	<i>Guggul, Shilajit, Karpur, Haridra, Ativisha, Vidanga, Devdaru, Guduchi, Shunthi, Marich, Pippali, Chitraka bark, etc.</i>	ORAL

Sthanik Chikitsa

Yonilepam with *Madhuyashti, Kapur, Madanphal Churan* with honey.

Yoni Prakshalan with Decoction of *Triphla* –*Aamlaki* (*Embilica officinalis*), *Haritki* (*Terminalia chebula*), *Bibhitaki* (*Terminalia bellerica*).

METHOD OF YONILEPAM

Lepa was made fresh twice a day with fine powder of *Madanphal, Madhuyashti, Karpur* (about 5gm each) and honey. It was applied as *Aalepa* over whole *Yoni* and left for two hours. Patient was kept in lithotomy position after evacuation of bladder and *Lepa* was applied under all aseptic conditions.



METHOD OF YONI PRAKSHALAN

Decoction of *Triphla Churan*^[7,8,9] was used for *Yoni Prakshalan*. Decoction was prepared as *Kwatha Kalpana*. *Triphla* was taken in quantity of 100gms. 2000ml water added & boiled till it remained one fourth i.e. 500ml. After passing urine lithotomy position is given to patient. Simple rubber catheter attached to enema pot containing *Triphla Kwath*. Then *Yoni Prakshalan* was done.

Oral Drug Administration

Patient was treated with *Chandraprabha Vati* 125mg twice a day, for 10 days in each cycle.

ASSESSMENT CRITERIA

1. Something coming out of vagina

- No feeling of something coming out per vagina: 0
- Feeling of heaviness per vaginum: 1
- Something coming out per vagina occasionally: 2
- Something coming out per vagina while urination/defecation: 3
- Something coming out of vagina persistently: 4

2. Low back pain and pelvic pain

- No pain: 0
- Mild pain: 1
- Moderate pain: 2
- Severe pain: 3
- Very severe pain: 4

3. Vaginal discharges

- No vaginal discharge – 0
- Mild discharge - 1 (vulva moistness)
- Moderate discharge – 2 (wetting of undergarments)
- Profuse vaginal discharges– 3 (heavy discharge)
- Highly profuse vaginal discharges: 4

4. Symptoms related to voiding of urine

- No difficulty in voiding urine: 0
- Occasional difficulty in voiding of urine: 1
- Continuous difficulty in voiding of urine: 2
- Digitation to initiate voiding of urine: 3
- Positional change to initiate voiding: 4

5. Bladder symptoms

- No bladder symptoms: 0
- Painful micturition: 1
- Frequency urgency/nocturia: 2
- Stress incontinence: 3
- Retention of urine: 4

6. Bowel symptoms

- No difficulty in passing stool: 0
- Difficulty in passing stool
- Constipation and straining: 2
- Digital decompression required for evacuation: 3
- Fecal incontinence: 4

7. Vaginal flatus

- Absent: 0
- Present: 1

Pathya Apathya

She was advised to follow *Ahara –Vihar Pathya* as follows: *Shashtik Shali* Rice, *Sathi* Rice, milk, *Ghee*, *Takra* with *Ajmoda*, *Jiraka*, *Curry* leaves, *Ginger* and *Turmeric*, *Peya* with *Panchkola Churan*, *Palandu*, *Methi* etc.

Apathya: *Vaatvardhak Ahaar*, *Vidahi*, extreme sour acid, heavy food items, stale food, junk food.

Yogasan

Ashwini Mudra, *Moolbandha*.

RESULTS**GRADATIONS OF PARAMETERS**

S.No.	Assessment Criteria	BT	AT
1.	Something Coming Out of Vagina	2	1
2.	Low Back Pain	2	1
3.	Vaginal Discharges	0	0
4.	Bladder Symptoms	2	0
5.	Bowel Symptoms	0	0
6.	Vaginal Flatus	1	0

DISCUSSION

After the treatment we observed reduction in symptoms as compared to before treatment. She has followed schedule of *Yoni Lepam*, *Yoni Dhawan*, medications and *Pathya Apathya* and *Yogic Exercises* properly.

Madanphala is *Kashaya*, *Madhur*, *Rasa Pradhan* hence astringent properties.

Madhuyashti is *Sheet*, *Madhur Rasa*, *Guru*. *Karpur* is *Tikt*, *Katu* and *Madhur* and *Sheetveerya* hence *Tridosha Shamak*.

Honey has *Madhur Rasa*, *Kashaya Anurasa*, *Laghu*, *Vishada*, *Rooksha* properties and also it is *Yogvahi Moolbandham* and *Ashwinimudra* strengthens the perineal muscles hence helps in correction of pelvic organ prolapse.

Triphala is *Kashaya Rasa Pradhan* and has *Stambhan* property. It is a broad-spectrum antimicrobial, antioxidant, and anti-inflammatory. It fastens the healing process.

Chandraprabha Vati – have properties like *Tikta*, *Katu*, *Kashaya*, *Lavan Kshar Rasa Pradhan*, *Laghu Ruksha*, *Vishada*, *Sukshma*, *Sitoshna*, *Kaphahara*, *Jantughna*, *Mutral*, It has multidimension action and effective for acute and chronic cases. It is broad spectrum antibiotic, tonic for urogenital system, anti- inflammatory, immunomodulator.

CONCLUSION

- ◆ *Yonibhramsha* is a condition which hampers day to day activities of menopausal women. From the above data it can be concluded that management of *Yonibhramsha* can be achieved by following proper dietary habits and lifestyle changes along with *Sthanik* interventions upto certain extent.
- ◆ Symptomatic relief can be achieved by *Sthanik Chikitsa* along with yogic exercises in mild and moderate degree of pelvic organ prolapse.
- ◆ The drugs which are having predominance of *Kashaya Rasa*, *Vaat Shamak* and *Stambhaka* property should be used in treatment of *Yonibhramsha*.

REFERENCES

1. Sushruta, Sushruta Samhita, with the Nibandh sangraha commentary of Sri Dalhanacharya, edited by Vaidya Yadavji Trikamji Acharya, Chaukambha Surbharati Prakashana, Varanasi, Reprint, 2010; 38(13).
2. Agnivesha, Charaka Samhita revised by Charaka & Dridhabala, with Ayurveda Dipika commentary by Chakrapani Dutta, edited by Acharya Yadavji Trikamji, Varanasi: Choukhamba Surabharathi prakashana, Varanasi, edition, 2011.
3. Ayurvediya prasuti tantra evum streeroga, prof. P.V. Tiwari, Chaukhambha Orientalia, Edition, 2012; 2: 57, 58, 88.
4. Kumar P, Malhotra N. Jeffcotts Principle of Gynaecology, 7th edition, New Delhi; (India) Jaypee brother's medical publishers (p) ltd. 2008; 275 Konar H. DC Dutta's textbook of gynecology. 6th Ed. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd., 2013; 85.
5. Bhaishajya Ratnavali, Kaviraj govinddas sen, English commentary, Dr. Ravindra Angadi, Part-2, Chaukhambha surbharti prakashan, Varanasi, first published, 2018; 1633-1634(67/22)
6. Shri gherand samhita, Brahmlena rashtraguru shri1008shri swamiji maharaj.3/14 and 3/82.

7. Sharangdhara, Sharangdhara Samhita, Shrikanth Murthy Editor, 2006, Varanasi, Chaukhambha Sanskrit Samsthan, 200, 6726. Shastry JLN Dravya Guna Vijnana II second edition Varanasi: Chaukhambha Orientalia, Varanasi, Uttar Pradesh, 708.
8. Bhavprakash Nighantu of Sri Bhavamisra, commentary by Padmshri K.C. Chuneekar, Chaukhamba Bharati Academy, Varanasi, 2015, Haritkyadi Varga, 12.
9. John Anne – American Chronicle, Triphala and Benefits of Triphala Herb, 2007. (<http://www.americancharonicle.com/articles/view/28433> accessed on 14.12.12)
10. Acharya Vagbhata – Ashtanga Hridya sarvanga Sundara Commentary of Arundatta & Ayurved Rasayan of Hemadri, collated by Dr. Anna Moreshwar Kunte & Krishna Ramchandra Sastri Navre, Edited by Pandit Harisastri Paradkar Vaidya. Sutrasthan 6/159, Chaukhamba Sanskrit Series, Edition 1st, 1995; 118.