

PREVENTIVE ASPECT FOR UTERINE PROLAPSE: A AYURVEDIC LITERARY REVIEW

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ABSTRACT

Uterovaginal prolapse greatly diminish the quality of life. Ayurveda focussed the human living habit and possess on daily routine like Dincharya, Ritucharya, Rajasvalacharya, Garbhini Paricharya and Sutika Paricharya. If women do not follow above Paricharya and neither follow the Ahar Vidhi called Mithyachara causes Rasa, Rakta, Mansa and Med Dhatu Dushti and improper form Updhatu Artava, Kandra, Sira and Snayu causes loosening of ligament, muscle leads to descent of pelvic organ from its place that is Prasramsini, Phalini and Mahayoni. Phalini Yoni can be correlated to second degree vaginal wall descent with or without first degree cervical descent and Prasramsini Yoni can be correlated to second degree uterine descent with or without vaginal wall descent. Mahayoni can be correlated to third or fourth degree uterovaginal prolapse. Keywords: Prasramsini, Phalini, Mahayoni, uterovaginal prolapse.

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INTRODUCTION

Acharya Sushruta says "Dosha-Dhatu-Mala Moolam Hi Shariram"^[1] that is root of human body; its balance called Swastya and its imbalance called Roga (Disease). Due to Mithyachara accumulates Dosha place which aggravates by specific cause and develop specific disease. In Uterovaginal prolapse due to Mithya Ahara include lack of protein rich diet and Mithya Vihara which include aggravating factor like improper bearing down effort

during vaginal delivery, multiple vaginal delivery, straining during defecation, heavy weight lifting in valsalva manoeuvre, systemic illness like chronic cough; ^[2,3] as a result Rasa, Rakta, Mansa, Meda Dhatu Dushti; causes improper nourishment of Updhatu Artava, Kandara, Sira and Snayu that is weakening of connective tissue like muscle and ligaments which leads on later stage uterovaginal prolapse. In Ayurveda features of Prasamsini, Phalini and Mahayoni can be correlated to uterovaginal prolapse.^[4]

Prasamsini, Phalini and Mahayoni In Different Ayurvedic Texts Acharya Charaka Described all gynecological disorder in Yonivyapada Chikitsa and in the reference of Mahayoni coitus in uneven bed and position causes Vishtambhit Yoni-Mukha and Asamvrat Mukha (dilatation of vaginal orifice/ uncovered cervix), Mansotsanna (mass coming out from vagina) that means cervix descend outside the vaginal orifice and there is presence of decubitus ulcer. Charaka did not described Prasamsini and Phalini Yoni separately but in the reference of Chikitsa, used word Srasta and Sarpi-Ksheer Sweda which is specific treatment for Prasamsini Yoni that is Pitta Shamaka. Charaka also described Swasthana Sthapana Chikitsa (replacement of displaced pelvic organ).^[5] Acharya Sushruta described Yoni Roga in Uttartantra and divide twenty Yoni Roga according to Dosha, and have separately described Prasamsini and explained the specific cause that is Kshobhana and difficult labour, the main feature is vaginal discharge and cervical descend clinically this type of feature appear in first and second degree uterine prolapse but difficult labour can be possible in second degree uterovaginal prolapse. Sushruta said one word "Ativivrata" for Mahayoni that means excessive dilatation of vaginal orifice causes large uterovaginal part is prolapsed which can be correlate to third or fourth degree (procidentia) degree uterine prolapse, Acharya also described separately for vaginal wall prolapse that is Phalini because it looks like a fruit. Sushruta explained the common cause for all Yoniroga that is incompatible male female sex organ and excessive coitus is a specific cause for vaginal wall prolapse.^[6]

Both Vagabhatta described Yonivyapada in the chapter of Uttar-tantra Guhyarog Vigyaniya. They Described separately Mahayoni also used word Vivrata and Srasta in Mahayoni reference and did not described separately Prasamsini Yoni but in the reference of Chikitsa also described in Astanga Sangraha Sransa, Srasta and Nistrata word used for prolapse and Ghrata Snehana, Ksheera Swedana and Vesvara Bandhana Chikitsa for Prasarsta Yoni which was described by Acharya Susruta for Prasamsini Yoni that means Vriddha Vagbhatta described Prasamsini as term of Sransa and Prasarsta. In Astanga Hrdaya Srasta, Nistrata

word used for displaced Yoni also described Swasthana Sthapana Chikitsa for Dusthapita Yoni (replacement of displaced pelvic organ) also for Nistrata, Vivrata and Sthana Apavritta Yoni.^[7] Both Vagbhatta did not described Phalini Yoni separately. Arunadatta explained meaning of Dusthita that means displacement of pelvic organ, Nistrata that is descent from its place and descent outside the introitus and Vivrata means dilatation of vaginal orifice.^[8] Madhav-Nidana, Bhava Prakasha and YogaRatnakara follow as Sushruta. Andini term used in place of Phalini. Acharya Sharangdhara described the name of twenty Yoniroga in Purvakhandha seventh chapter, did not given any detail description about them.^[9] Acharya Kashyapa did not give any description of these Yoni Roga, except the number of twenty. In Sutra Sthana chapter 28 (Lakshanadhyaya) different shape of Yoni and their effect in future life. Lamba Yoni and Vivrata can be correlate to Prolapse.^[10,11] Clinical correlation of Yonivyapada related to uterovaginal prolapse: Clinical correlation of Prasramsini Yoni In this condition any irritation causes excessive vaginal discharges and its displacement and labour is also difficult. Another feature is Pitta Vitiation. Acharya Dalhana explained Sransana is excessive vaginal discharge, Kshobhana is excessive irritation, Dukha Prasava is difficulty in labour or abnormal passage or birth canal and Pitta symptoms are Osha (burning in particular area) Chosha (throbbing pain).^[12] The condition is characterised with prolapse of reproductive organs. The word Yoni refers to vagina and uterus, thus prolapse of vaginal wall and uterus both can be considered in Prasramsini Yoni. Normally prolapse of anterior and posterior vaginal wall before delivery is commonly seen in which have a history of excessive straining during defecation or in which have congenitally weak supports. Initial degree of prolapse cannot create obstruction in labour and generally correct in late pregnancy, in second degree uterine prolapse causes non dilatation of cervix due to excessive congestion caused by compression of presenting part over the cervix due to its displacement is one of the important complication of labour. Considering above facts Prasramsini Yoni Vyapada had description of second degree uterovaginal prolapse.^[13,14,15] Clinical correlation of Phalini Yoni Acharya Susruta says that when a young woman has coitus with a man having big size of penis, then she suffers from Phalini. Dalhana giving another name as Aphalini or Apraja. Appear features of all the Doshas that is dryness and pricking pain due to Vata, burning sensation and heat due to Pitta, moistness and itching due to Kapha are also present.^[16] Usually above mentioned coital abnormality may cause initial degree of prolapse but does not cause second or third degree uterine prolapse, because in second and third degree prolapse cervix descent outside the introitus and it will not look like a fruit or egg due to presence of cervix with its Os. If we take the specific cause a man having big size of penis coitus with a Taruni (young woman)

having narrow vagina. Here Taruni means an adolescent girl which more cleared by Bhava Prakasha they used term Bala and their age match with adolescent girl which have due to deficiency of oestrogen, incomplete development of reproductive organ and have lack of glandular secretion and also have lack of collagen tissue and has less elastic capacity of supporting muscle and fascia. If a man having coitus forcefully and inappropriate position with this adolescent girl and at this time if the girl constrict the vagina due to fear or shame (vaginism) can lead to tearing of perineal or vaginal musculature, if constant practice this can lead to permanent damage or loosening of vaginal musculature as a result later on vaginal wall descent.^[17]

Clinical correlation of Mahayoni

Acharya Charaka says that Vayu, vitiated due to coitus in an uneven place and position, causes Vishtambhana of Yoni.^[18] In this condition dry, frothy bloody discharge there is pain also. This condition having muscular protuberance in Yoni associated with pain in joints and groin region is known as Mahayoni. Acharya Susruta says that in this Yoni is excessively dilated. and appear features of all three Doshas that is dryness and pricking pain due to Vata, heat and burning sensation due to Pitta, moistness and itching due to Kapha are also present.^[18] All features of Vivrata or Maha Yoni like third or fourth degree uterine prolapse or procedentia.^[19,20] So uterovaginal prolapse can be co-related to^[21]

1. Prasramsini Yoni Vyapad - II-uterine prolapse with or without vaginal wall descent
2. Phalini/Andini - II-degree vaginal wall descent with or without I degree cervical descent.
3. Mahayoni. - III degree uterovaginal prolapse^[22]

DISCUSSION

In specific feature of Phalini Yoni that is protuberate like a fruit or an egg, clinically this entity seen in when the vaginal wall descent at least at the level of introitus that is second degree vaginal wall prolapse but on observation in many patients which have second degree vaginal wall descent also have minor degree cervical descent; so Phalini Yoni exactly correlates to second degree vaginal wall (anterior/posterior compartment) prolapse with or without first degree uterine (middle compartment) prolapse. Specific feature of Prasramsini Yoni is their cause that is h/o of Dukha Prasava or previous prolapsed condition which causes difficulty in labour, first degree uterine prolapse generally does not cause difficulty in labour, this condition is seen in second or third degree prolapse where due to excessive congestion causes non dilatation of cervix as result labour dystocia. Acharya separately mentioned third

and fourth degree prolapse in the heading of Vivrata and Mahayoni, Hence we can understand Prasamsini Yoni means second degree uterine prolapse, in clinically this condition seen along with vaginal wall descent; so here we can take second degree uterine (middle compartment) prolapse with or without vaginal wall (anterior/ posterior compartment) prolapse. In Mahayoni, having muscular protuberance in Yoni associated with pain in joints and groin region is known as Mahayoni. Acharya Susruta says that in this Yoni is excessively dilated so their clinical correlation is third or fourth degree uterovaginal (anterior/ posterior/ middle compartment) prolapse.

CONCLUSION

Ancient Acharya's concept was very clear, they defined specific causative factor and key feature of particular Yoni vyapada. We can be correlated to modern theory in some extent but not completely because the people of that time had different habit and lifestyle and body strength. To apply Ayurvedic treatment protocol and to explain Ayurvedic principles in modern era, we need to correlate it to the modern science.

Pelvic organ prolapse is explained in Ayurvedic literature. Etiology, types, symptoms, complication and treatment is being dealt in detail.

1. Yoni vyapad related to Pelvic organ prolapse are concluded as below Phalini /Andini is Cystocele/ Rectocele. Antharmukhi is Retroverted & Retroflexed Uterus. Vaatiki Yoni vyapad is I^o Uterine prolapsed / Relaxed Perineum. Prasamsini Yoni vyapad is II^o Uterine prolapse. Maha yoni / Mahati Yoni vyapad is III^o Uterine prolapse / Proctentia.
2. Preventive measures for Pelvic organ prolapsed as per ayurveda - Follow Swasthavrittha and Sadvrittha. - Maintain good Nutritional status, Proper life style management. Follow Prasava paricharya and Suthika paricharya. Avoid improper sexual habits.
3. Treatment modalities of Prolapse Sneha pana, Mamsa rasa Sevana internally. Abhynga, Swedana for sarvadaihika and sthanika shareera. Anuvasana Basti and Uttara Basti. Yoni Pinda dharana, Yoni gaadhikarana dravya lepana. Shashtra karma i e, Colporrhaphy and Hysterectomy

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