

## WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.084

Volume 10, Issue 9, 813-821.

Research Article

ISSN 2277-7105

# ROLE OF KSHARA KARMA IN THE MANAGEMENT OF KARNINI YONIVYAPAD W.S.R. TO CERVICAL EROSION

\*1Dr. Anjali Jain, <sup>2</sup>Dr. Narendra Kumar Meena and <sup>3</sup>Dr. Diksha Khathuria

<sup>1</sup>(PG Scholar), <sup>2,3</sup>(Lecturer) M. M. M. Govt. Ayurved College, Udaipur.

Article Received on 25 May 2021,

Revised on 14 June 2021, Accepted on 3 July 2021

DOI: 10.20959/wjpr20219-20956

\*Corresponding Author Dr. Anjali Jain

(PG Scholar), M. M. M. Govt. Ayurved College, Udaipur.

## **ABSTRACT**

Cervical erosion is a benign condition however it left untreated may additionally leads as much as infertility. It is a common condition seen in most women of reproductive age groups. Its prevalence ranges from 17% - 50%. A cardinal symptom of this disease is white discharge in keeping with Vaginum which may be very not unusual in girls. Different signs are backache, Dyspareunia, infertility, post coital bleeding and it in the end results in mental issues. In *Ayurvedic* texts it will become obvious that most of the gynaecological issues are blanketed in *Yonivyapada*. Direct reference of cervical

erosion is not found in *Ayurveda* classics, but clinical Features resemble with *Karnini Yonivyapada*, on the basis of symptoms and the *Sadhyata Asadhyata* of cervical erosion. In this case cervical erosion is treated with *Kshara karma*.

KEYWORDS: Karnini, Cervical Erosion, Kshara karma, Kshara.

## INTRODUCTION

A Women's health directly reflects the health of children, families and ultimately the society. They are subject to many risks. Its require timely awakening and treatment. The most prevailing problem related to reproductive system such as Cervical Erosion. Cervical erosion is a condition in which the Squamous epithelium of the Ectocervix is replaced by the columnar epithelium which is continuous with that lining the Endocervix.<sup>[1]</sup>

As per *Ayurveda* Classics *Acharya Charaka* says that *Karnini Yonivyapada* is due to vitiation of *Vata& Kapha dosha* even as *Acharya Sushruta* said it's far because of vitiation of *Kapha dosha. Karnini* disease can be as compared with disease of cervix i.e. Cervical Erosion. In Cervical Erosion the cervix turns into hypertrophied, congested and covered with

small red projection akin to sprouts. The erosion related to Nabothian cysts than assumes to be the pericarp of lotus. [2] The concept of Ayurvedic treatment is to established the Ayurvedic therapies similar to modern procedure.

In which electric cauterization and cryosurgery are used to destroy the columnar epithelium and enable new healthy stratified Squamous epithelium to develop in its place. However, there are a number of negative side effects.

According to the pathogenesis and clinical features of Karnini yonivyapada the affected doshas are Vata and Kapha and affected dhatu is rakta. So the treatment is aimed at Vata-Kaphashamaka and Raktashodhaka. Ayurvedic treatment having properties like Lekhana, Shodhana, Ropana and Kaphaghana properties can cure this ailment. Ayurvedic Kshara karma is well suitable for this condition. The current clinical study was carried out in light of this fact.

## **Aims & Objectives**

- To study the role of *Apamarga Kshara karma* in the management of Cervical Erosion.
- To study any side effects related to drugs.
- To establish the need for an *Ayurvedic* treatment for cervical erosion.

#### MATERIAL AND METHOD

### **Selection of cases**

Total 25 clinically diagnosed and confirmed cases of cervical erosion were selected for this study, from Deptt. of Prasuti Tantra & Stri roga O.P.D. of M.M.M. Govt. Ayurveda College, Udaipur after taking informed consent.

## **Clinical Study**

#### **Inclusion criteria**

- Willing patients.
- Patients of age group b/w 20-45 years.
- Clinically diagnosed and confirmed patients of cervical erosion.

## **Exclusion criteria**

- Patient with Pregnancy.
- Patient below the age of 20 and above 45 years.

Any benign and malignant growth in genital tract.

## **Investigations**

- **Blood** Complete blood count with ESR, R.B.S, HIV, VDRL, and HBsAg.
- **Urine** Routine & microscopic examination.
- Pap's smear for cervical cytology.

## **Duration of trial**

Duration of trial was 90 days (3 consecutive cycles).

## Follow Up:-

Six follow-ups with the interval of 15 days.

## **Assessment Criteria**

## Subjective criteria

## Table no.1:

Symptoms	Grade	
Amount of vaginal discharge	0	Absent
	1	Scanty
	2	Persistent staining of undergarments.
	3	Heavy and needs applying of vulval pads
Lower abdominal pain & backache	0	Absent
	1	Mild
	2	Moderate
	3	Severe
Vaginal bleeding	0	Absent
	1	Mild
	2	Moderate
	3	Severe

## Objective criteria

## Table no.2:

Sign	Grade	
	0	Watery discharge
1.Consistency of vaginal discharge	1	Mucoid
	2	Creamy
	3	Milky
	0	Whitish
2 Color of discharge	1	Yellowish
2.Color of discharge	2	Greenish
	3	Brownish/

		Blood stained
3.Area of erosion-	0	0-25%
Actual size of erosion was measured, with the help of % scale.	1	26-50%
The area of cervix is divided into four halves each considered as	2	51-75%
25%.	3	76-100%
	0	Normal Color
4.Appearance of Erosion		Pink to red
		color
	2	Red color
	3	Deep red color

Overall effect of therapy – Cured -More than 75% relief in the signs and symptoms, Markedly Improved -51-75% relief in the signs and symptoms, Moderately improved- 26-50% relief in the signs and symptoms, Unchanged -Less than 25% change in the signs and symptoms.

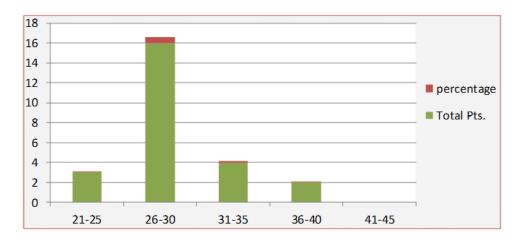
Statistical Analysis of Data - The obtained results were interpreted as Insignificant - p > 0.05, Significant - p < 0.05, Highly significant - p < 0.001.

## **OBSERVATIONS**

In the clinical study, total 25 patients were registered. The detailed observations of the study are as follows.

Table no. 3: Incidence of age.

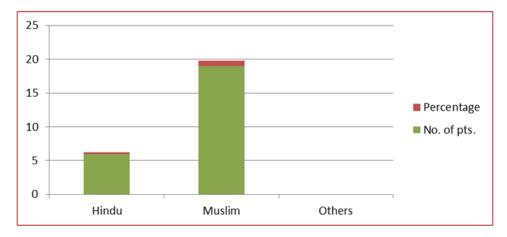
Age group	No.of Pts.	Percentage
21-25	3	12%
26-30	16	64%
31-35	4	16%
36-40	2	8%
41-45	0	0%



Maximum numbers of patients were in 26-30 years age group with 64%. This incidence of age manifest that the disease mainly affects the reproductive age group.

Table no. 4: Incidence of religion.

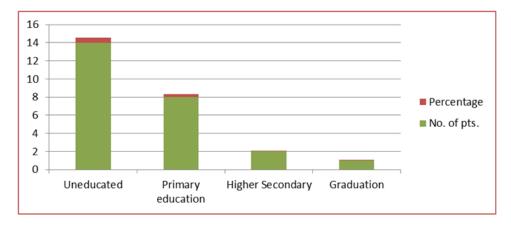
Religion	No. of Pts.	Percentage		
Hindu	6	24%		
Muslim	19	76%		
Other	00	00%		



Majority of patients were Belong to Muslim religion with 76% and Hindus were 24% noticed.

Table no.5: Incidence of Education status.

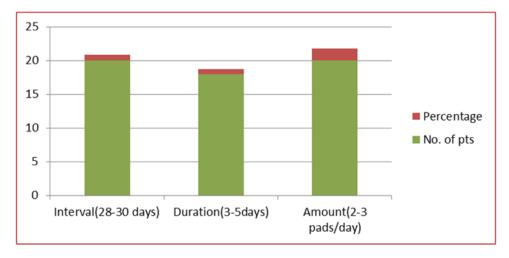
<b>Education status</b>	No .of Pts.	Percentage
Uneducated	14	56%
Primary education	8	32%
Higher secondary	2	8%
Graduation	1	4%



56 % patients were uneducated which was the maximum number.

Table no.6: According to Menstrual history.

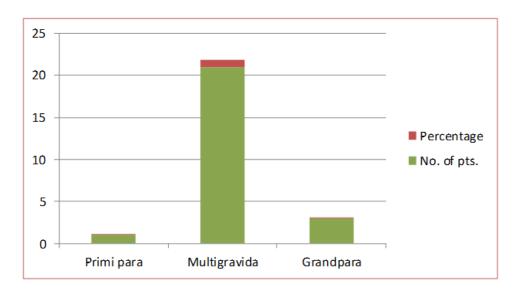
Menstrual history	No. of Pts.	Percentage
Interval (28-30days)	20	80%
Duration (3-5days)	18	72%
Amount (2-3pads/day)	20	80%



From menstrual history it is observe that, Majority of Patients i.e. 80% were having regular menstruation and had normal amount of blood loss. 40% patients had the complaint of dysmenorrhea. 80% of patients were having 30 days of interval of menstrual cycle and 72% of patients were having 3-5 days of duration of menses.

Table no.7: According to obstetric history.

Parity	No. of pts.	Percentage
Primipara	1	4%
Multi Gravida	21	84%
Grand Para	3	12%



The highest occurrence of Cervical Erosion was observed in the multigravida patients i.e. 84% As a result of repeated deliveries and abortions due to repeated pregnancy strain, anaemia and chronic infections.

RESULTS

Table no.8: Effect of therapy on "Subjective parameters" of cervical erosion.

Sno	Signs	Mean		Diff	% of	SD	SE	Т	P	Results
S no.	Signs	BT	AT	DIII	change	SD	SE	1	r	Kesuits
1.	Amount of vaginal discharge	1.863	0.318	1.545	82.93%	0.85	0.181	8.53	<0.001	HS
2.	Lower abdominal pain & backache	1.4	0.4	1.0	71.42%	0.64	0.144	6.94	<0.001	HS
3.	Vaginal bleeding	1.23	0.470	0.76	61.78%	0.74	0.179	4.27	< 0.001	HS

Table no.9: Effect of therapy on "Objective parameters" of cervical erosion.

S no.	Cymptoms	Mean		Diff	%of	SD	SE	Т	P	Results
5 110.	Symptoms	BT	AT	DIII	change	SD	SE	1	Г	Results
	Consistency									
1.	of vaginal	1.909	0.363	1.546	80.98%	0.50	0.108	14.30	< 0.001	HS
	discharge									
2.	Colour of	1.590	0.318	1.272	80%	0.76	0.16	7.95	< 0.001	HS
	discharge	1.390	0.518	1.2/2	80%	0.76	0.10	1.93	<0.001	пъ
3.	Area of	2.318	0.136	2.182	94.13%	0.5	0.106	20.58	< 0.001	HS
3.	erosion	2.318	0.130	2.162	94.13%	0.3	0.100	20.38	<0.001	пэ
	Appearance									
4.	of Erosion	1.818	0.181	1.637	90.04%	1.13	0.24	6.81	< 0.001	HS

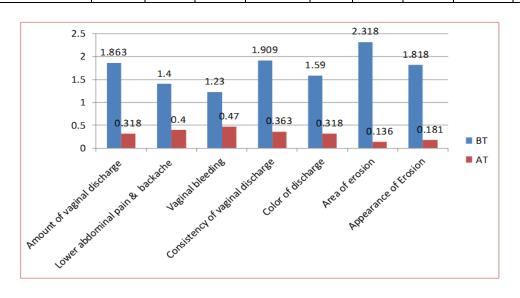
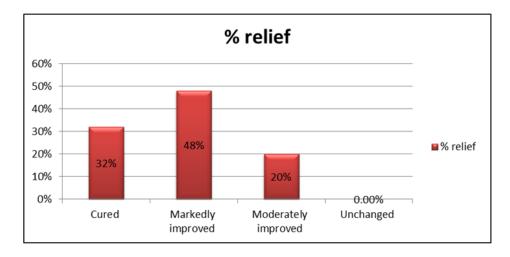


Table no.10: Overall Effect of Therapy.

Effect of therapy	Result	No. of Patients	% relief
Cured	>75%	08	32%
Markedly improved	51-75%	12	48%
Moderately improved	25-50%	05	20%
Unchanged	<25%	00	0.00%



#### DISCUSSION

In Cervical erosion, *Kshara karma* can be done by using *Kshara* of *Apamarga*. There are two basic principles given by *Acharyas* for the treatment of *Karnini* which are *Kaphahara Chikitsa* and *Shodhana* property.

Kshara having Lekhana, Shodhana, Stambhana, Shoshanna, Ropana and Kapha nashaka properties. [3] Kshara because of its Ushnavirya, does the Kaphavata nirharana, which in turn reduces the pain and it also does the Pachana which accelerates the phase of paka and thus reducing inflammation in lesser time. Because of its Tikshnaguna, it does the Kapha nissarana which helps in reducing the Yonistrava and Yonikandu which are pure Kapha conditions. Due to its Stambhana, Shoshana property it was able to decrease the amount of vaginal discharge. Also it removes the vitiated doshas which enhances the healing process.

The *Apamarga Kshara* was found strongly alkaline in reaction (pH = 10.44) and hygroscopic. Strong alkaline nature of *Kshara* was responsible for the corrosive action i.e. destruction (slough off) of columnar epithelium, after destruction of this epithelium re- epithelisation of squamous epithelium occurred easily. Various clinical and experimental studies reveal that Anti-inflammatory, Wound healing Activity and Anti- microbial activities<sup>[4]</sup> were present in *Apamarga*. Anti-inflammatory, Wound healing<sup>[5]</sup> effect of the drug help in proper healing and decrease the swelling and the redness of the cervix. Antibacterial, Antifungal, Antiseptic

properties of the *Apamarga* may help in preventing the foreign organisms which prevent the regeneration of the squamous epithelium.

#### **CONCLUSION**

The Ayurvedic management of cervical erosion is effective through the Kshara karma using Apamarga. The procedure and mode of action are almost equivalent to the Allopathic surgical management. Kshara karma and the drug used to perform the procedure (Apamarga) have equal role to enhance the complete cure condition. It is due to the efficacy of Kshara karma to clear the damaged epithelial cells and the presence of components like tannins, flavonoids, antioxidants etc. in Apamarga to improve the healing process. In effect it has equivalent result as modern management, cost effective, easy and brief procedure, no or less complication, less chances for the recurrence of cervical erosion. Besides that Kshara karma seems to be safe, easy method, short procedure, cost effective, less chances for complications and re-emergence of the condition. So the controlled cauterisation by Apamarga Kshara is effective in the management of cervical erosion.

#### REFERENCES

- 1. Dutta DC. Textbook of gynecology. Hiralalkonar, editor. 6th ed. New Delhi: Jaypee brothers Medical Publishers Pvt. Ltd., 2013; 267.
- 2. Tewari PV. Ayurvediya Prasuti Evam StriRoga, Part II. 2nd ed. Varanasi: Chaukhambha Orientalia, 2007; 40.
- 3. Kaviraja Ambikadutta Shastri, Susruta Samhita Edited with Ayurveda Tattva-Sandipika Hindi Commentary, edition reprint, Sushruta Sutra (Chapter 11 verses 5), 2012.
- 4. Saravanan, P, Ramasamy V and Shivakumar T. Antimicrobial activity of leaf extracts of Achyranthesaspera L. Asian J. Chemi., 2008; 20(1): 823-825.
- 5. Fikru A, Makonnen E, Eguale T, Debella A, Mekonnen GA. Evaluation of In vivo wound healing activity of methanol extract of AchyranthesasperaL. J Ethnopharmacol 2012; 143(2): 46.
- Ramesh Londonkar, Chinnappa Reddy V and Abhay Kumar K. potential antibacterial and antifungal activity of Achyranthesaspera l. Recent Research in Science and Technology, 2011; 3(4): 53-57.