

A COMPREHENSIVE REVIEW ON ŚVETAPRADARA: ETIOLOGY, SYMPTOMS, AND AYURVEDIC MANAGEMENT

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ABSTRACT

Śvetapradara (white vaginal discharge) may occur as an independent pathological condition or as a symptom secondary to systemic disorders. The whitish discharge, often accompanied by unpleasant odor, causes discomfort and affects social participation and personal well-being. If untreated, a seemingly minor disturbance may progress to complications such as infertility. Although modern medicine offers therapeutic options, they are frequently associated with side effects and recurrence. Hence, exploring Ayurvedic interventions becomes essential to provide safe, sustainable, and holistic management without disturbing other physiological systems. The present study aims to elucidate the *nidāna* (etiological factors), *samprāpti* (pathogenesis), and *samprāpti-vighatana* (therapeutic interruption of the disease process) of

Śvetapradara, thereby supporting the development of an effective Ayurvedic management strategy. This may provide an improved therapeutic alternative for women suffering from this condition.

KEYWORDS: Śvetapradara, white discharge, Ayurvedic management.

INTRODUCTION

In the present era of stressful living, Śvetapradara (white vaginal discharge) has become a major health concern among women. Its prevalence is increasing due to factors such as poor nutrition, infectious diseases including AIDS and STDs, excessive use of contraceptive

medications, psychological stress, and anxiety. The condition is also commonly observed during pregnancy, at menarche, and after menopause. Psychosocial stress, altered dietary habits, occupational exposures, and environmental changes disrupt the natural vaginal ecosystem and collectively contribute to the rising incidence of Śvetapradara. The condition is largely a symptom rather than a distinct disease entity and frequently accompanies disorders of the female reproductive system.

According to Ayurveda, Śvetapradara arises predominantly due to *kapha-doṣa* aggravation:

"पाण्डुरे प्रदरे इति श्वेत प्रदर"—*Cakrapāṇi*

The habitual intake of heavy (*guru*) and *kapha*-promoting foods and lifestyle practices leads to *kapha* vitiation, resulting in the manifestation of *pradara-roga*. Patients typically present with thick, sticky, foul-smelling, whitish vaginal discharge. Although the condition is generally not life-threatening, it can be effectively managed through dietary and lifestyle modifications combined with appropriate Ayurvedic therapies. Early intervention prevents weakness, infections, and further complications.

AIMS AND OBJECTIVES

1. To understand the Ayurvedic concept of Śvetapradara.
2. To study the *nidāna* and Pūrvārūpa (Prodromal Symptoms) of Śvetapradara according to Ayurvedic principles.
3. To review Ayurvedic management approaches for Śvetapradara.

MATERIALS AND METHODS

Data for this review were collected from classical Ayurvedic texts (*saṃhitā*), contemporary journals, published research papers, and relevant articles accessed through electronic databases. Classical descriptions were critically analyzed in relation to modern gynecological understanding to present a comprehensive review of Śvetapradara.

Etiological Factors (*Nidāna*)

According to Ayurveda, excessive consumption of *kapha*- and *rakta-prakopaka āhāra*—such as refined sugar, excess salt, tea, coffee, and heavily spiced foods—disturbs the *doṣa* balance, particularly *kapha* and *pitta*. These disturbances vitiate *rakta-dhātu* and obstruct the *yonisrotas*, leading to pathological discharge.

Psychological factors such as chronic stress and anxiety further aggravate *vāta-doṣa*, weakening regulatory mechanisms of the reproductive system. Modern science similarly acknowledges stress as a factor altering hormonal function and local immunity. Nutritional deficiencies—especially low calcium and essential vitamins—lead to *dhātu-kṣaya*, compromising local immunity and predisposing the reproductive tract to infections. Sexually transmitted infections such as HIV/AIDS, *Chlamydia*, syphilis, gonorrhea, genital herpes, genital warts, hepatitis B, and trichomoniasis induce inflammation and disturb the vaginal microbiome. Their impact parallels the Ayurvedic concept of *āgantuka* (externally induced) causes. Repeated pregnancies or habitual abortions (*garbhāsrava*) may cause chronic inflammation of the uterus (*garbhāśaya-śoṭha*), a finding acknowledged in both Ayurveda and modern gynecology. Excessive and unsupervised use of contraceptive pills disrupts hormonal regulation, comparable to *agni* derangement and *doṣa* imbalance described in Ayurveda.

Pūrvārūpa (Prodromal Symptoms)

According to the classical definition

"पूर्वरूपं प्रागुत्पत्ति लक्षणं व्याधेः"^[1]

Pūrvārūpa refers to subtle symptoms preceding the full manifestation of disease, arising when vitiated *doṣas* localize in specific *dhātus* and initiate early *doṣa-duṣya sammūrechanā*.

Although texts do not explicitly describe the *pūrvārūpa* of *pradara/āsrṅdāra* or *śleṣmalā yonivyāpada*, probable early indicators include

- *Aṅgamarda* (generalized malaise)
- *Kaṭigraha* (stiffness of the lower back)
- *Kaṭiśūla* (lumbago)
- *Yonipatha-śūla* (pain in the genital tract)

If ignored, these may progress into full-blown *pradara* or other gynecological disorders.

Rupa (specific Symptoms)

उत्पन्नव्याधिबोधकम् एव लिङ्गं रूपम्" (Ma. Ni. 1/7)

Symptoms of Śvetapradara

1. Pratyātmā-lakṣaṇa

- Excessive whitish or pale vaginal discharge resembling *pāṇḍu-varṇa*.

2. *Sthānika-lakṣaṇa*

- *Yoni-kaṇḍu* (itching)
- *Yoni-toda* (pricking pain)
- *Yoni-śītalatā* (cold sensation)
- *Yoni-picchilatā* (stickiness)
- *Yoni-dāha* (burning).

3. *Śrava-janita-lakṣaṇa*

Discharge characteristics

- *Picchila* (mucoid)
- *Śīta* (cold)
- *Mandarujākara* (mildly painful)
- *Durgandhi* (foul-smelling)
- *Tanu* (thin)
- *Snigdha* (unctuous)
- *Ghana* (thick)
- *Pītavarṇa* (yellowish)
- *Avilāntula* (turbid, with particles).

4. *Sarvadehika-lakṣaṇa*

- *Śārīrika-rukṣatā* (dryness)
- *Kaṭi-śūla* (backache)
- *Udarādhaḥ-vedanā* (lower abdominal pain)
- *Jaṅghā-vedanā/gurutā* (pain and heaviness in thighs)
- *Ajīrṇa* and *aruci*
- Frequent micturition
- *Raktālpata* (anemia)
- *Hasta-pāda-dāha*
- *Śirahśūla*
- *Utsāhahāni, dourbalya*.

5. *Mānasika-lakṣaṇa*

- *Mānasika-aśānti*
- *Chid-chidāpanā* (irritability)

MANAGEMENT

Patients should receive counseling, stress-reduction guidance, and advice on genital hygiene. Excessive use of oral contraceptive pills should be avoided. Diet should emphasize *kapha-śāmaka* foods such as garlic, coriander, ginger, honey, *jāmbū*, and radish.

Specific Ayurvedic Therapeutic Measures

1. *Yoni-prakṣāḷana* (Vaginal irrigation)

- Decoction of neem bark with alum
- *Triphalā-kaṣāya* with *takra*, *gomūtra*, or vinegar
- Decoctions of *vaṭ*, *arka*, *lodhra*, and *jāmbū* bark^[2]

2. *Yoni-pūraṇa* (Tampon therapy)

- *Udumbarādi Taila*, *Dhātakyādi Taila*
- Bolus of *plakṣa-cūrṇa* with honey
- Sterile cloth soaked in *vaṭa-kaṣāya*.^[3]

3. *Yoni-varti* (Medicated suppositories)

- *Arkādi-varti*
- *Picchilyādi-varti* containing *pippalī*, *māṣa*, *urad*, *saindhava*.

4. *Yoni-dhūpana* (Fumigation)^[4]

- Mixture of *śarai*, *guggulu*, barley, and ghee
- Smoke from oil poured over dried fish (*sidhārī machli*).

General Formulations

- *Āmalakī* juice/powder with honey.^[5]
- Boiled okra decoction
- *Māṇḍa* (rice gruel)
- *Ber* fruit powder with jaggery/raw banana and milk
- *Rohitaka* root bark paste
- *Pippalī* with milk
- Crushed *tulasī* leaves with honey-water

Classical Ayurvedic Formulations

Rasauśadhi

- *Pradarāntaka Rasa*

- *Pradarādi Rasa*
- *Pradaśāntaka Lauha*
- *Pravāla Piṣṭi*
- *Kukkutāṇḍatvaka Bhasma.*

Cūrṇa

- *Puṣyānuga Cūrṇa*
- *Aśvagandhā Cūrṇa*
- *Nāgakeśara Cūrṇa.*

Ariṣṭa

- *Lodhrāsava*
- *Aśokāriṣṭa*
- *Patrāṅgāsava*
- *Lakṣmaṇāriṣṭa.*

Taila

- *Priyaṅvādi Taila*
- *Udumbarādi Taila*
- *Dhātakyādi Taila.*

Vaṭi

- *Pradarāntaka Vaṭi*
- *Candraprabha Vaṭi*
- *Śilājatu Vaṭi.*

Ghṛta

- *Aśoka-ghṛta*
- *Nyagrodhādi-ghṛta*
- *Śālmālī-ghṛta.*

Other Treatments

Āsanās

Ujjāyī, Bhastrikā, Mūlabandha, Prāṇāyāma, Halāsana, Sarvāṅgāsana.

Therapies

Hip bath, spinal bath, sunbath, abdominal mud-pack, and enema.

Pāthya (Wholesome diet)

Garlic, coriander, mango, *jāmbū*, honey, ginger, *gomūtra*, *tulasī*.

Apāthya (Unwholesome diet)

Sugar, excess salt, spicy foods, tea, coffee, etc.

CONCLUSION

Although often regarded as a minor complaint, Śvetapradara can significantly impact physical, mental, and reproductive health if left untreated. It is a multifactorial condition arising from nutritional deficiencies, hormonal fluctuations, infections, poor hygiene, psychological stress, and lifestyle errors. Ayurveda attributes it primarily to *kapha-doṣa* vitiation and local tissue weakness, whereas modern medicine emphasizes infections and hormonal imbalance.

An integrated approach is essential. Ayurvedic modalities—such as *yoni-prakṣāḷana*, *yoni-pūraṇa*, *yoni-varti*, *yoni-dhūpana*, and formulations like *Lodhrāsava*, *Aśokāriṣṭa*, *Puṣyānuga Cūrṇa*, and *Pradarāntaka Rasa*—provide significant therapeutic benefits by addressing both the root causes and local pathology. Complementary practices such as yoga, *prāṇāyāma*, hydrotherapy, and dietary modification enhance systemic strength, improve immunity, and prevent recurrence.

Appropriate diet, hygiene, stress management, lifestyle regulation, and guided Ayurvedic treatment together ensure effective symptom reduction and promote long-term reproductive health. Early recognition and timely intervention prevent complications and support holistic well-being.

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