

A COMPARATIVE CLINICAL STUDY OF GUDUCHIDANTYADI VATI & UDUCHIDANTYADI MALAHARA IN PRURITUS VULVAE

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ABSTRACT

Nowadays pruritus vulvae is very common problem in opd. 10-20% women visiting gynae opd are suffering from this disease. In Ayurveda text such condition is described as *Acharana yonivyapada* where due to unhygienic condition along with vitiated vata & kapha doshas provide suitable environment for the krimis to develop causing yoni kandu. In classics local therapies in the form of yoni Dhawan, yoni pichu, yoni varti, yoni puran, yoni basti & yoni dhoopana is suggested for management of yoni kandu. acharaya Yogratnakar has suggested guduchi, triphala, danti kwath for yoni prakshalana. As modification is the need of time so in order to increase the efficacy & for easy mode of

administration malahara & vati form of this yoga is selected for the treatment. **Methodology:** This research work was a randomized comparative parallel open clinical study of 40 patients suffering from the symptoms of yoni kandu. Patients were randomly divided into 2 groups of 20 patients each. Group A was treated with Guduchidantyadi vati and group B was treated with Guduchidantyadi malahara for 21 days (3 consecutive weeks) with trial drug and further one cycle was drug free follow up). **Result:** Clinical parameters were assessed statistically. Both the groups showed statistically significant results. Statistically there was no significant difference between the groups in parameter of yoni strava, yoni daurgandha, yoni vedana, mutra daha but statistically significant difference was observed in the symptom of yoni kandu. **Interpretation and Conclusion:** Thus group B (Guduchi dantyadi Malahara) showed higher response as compared to Group A (Guduchi dantyadi vati) in the management of Pruritus vulvae (yoni kandu).

KEYWORDS: Malahara, acharana yonivyapada, yoni kandu.

INTRODUCTION

Ayurveda classics is enriched and has all answers to the present day problems being faced by the patients, one such problem is pruritus vulva that if ignored can worsen the quality life of female. Such problem arise due lack of knowledge to maintain hygiene some are over washing where as some are simply not giving attention to hygiene. Use of chemicals as soap & genital washes have effected the pH & in turn has effected the flora which has increased the incidence of the disease by effecting the immunity & giving the environment for the pathogens to grow. In Ayurveda text such condition is described as *Acharana yonivyapada* where due to unhygienic condition along with vitiated *vata & kapha doshas* providesuitable environment for the *krimis* to develop causing *yoni kandu*.

Ayurveda classics suggest local therapies for the management of such cases. Some research article haveproved *shaman chikitsa* i.e oral therapy to be useful in controlling such symptom. Previous research articles have proved local therapy such as *malahara* application very beneficial due to additional *kanduhara* property.

Acharaya Yogratnakar has suggested *guduchi, triphala, danti kwath prakshalana* in cases of *yoni kandu*. This yoga has *vatakapha shamaka, kanduhara & krimihara* property. We have selected the malahara & oral form of this yoga for the management of pruritus vulvae as the malahara has additional property of toxin removing & healing property.

OBJECTIVES OF STUDY

To compare the clinical efficacy of oral administration of *Guduchidantyadi vati* with the efficacy of *Guduchidantyadi malahar* in management of Pruritus Vulvae (*yoni kandu*).

MATERIALS AND METHODS

Patients with Classical features of yoni kandu were selected from OPD/IPD of Prasuti tantra & Stri Rogadepartment of State Ayurvedic College and Hospital, Lucknow.

Raw drugs were purchased from Ayurvedic drug market of Lucknow and authenticated by the Departmentof Dravyaguna of State Ayurvedic College and Hospital, Lucknow.

Preparation of drug

The trial drug was prepared in the pharmacy of State Ayurvedic College Lucknow by concerned experts and under the supervision of Department of Rasashashtra and Bhaishajyakalpna. Therefore, all the necessary measures regarding the preparation of trial

drug had taken by experts.

CLINICAL STUDY

Sample Source- All the patients have been selected from the OPD and IPD of PG department of Prasuti Tanta & Stri Roga. State Ayurvedic College & Hospital, Lucknow, UP who fulfilled the criteria of inclusion irrespective of their desh, jati, vaya, prakriti, satva.

Study Design- Randomized comparative parallel open clinical trial. Sample size- Minimum 40 patients out of which 20 in each group.

GROUP ALLOCATION

Total 40 patients were registered randomly from OPD and IPD of Prasuti Tanta & Stri Roga Department. of State Ayurvedic College & Hospital Lucknow. Screened female were randomly divided into two groups.

Group A- Guduchidantyadi Vati, 2 vati thrice a day for 21 days was given to the patients.

Group B –Guduchidantyadi Malahar 3gm thrice a day as local application for 21 days was advised to the patients.

Dose- Vati-3gm/day (500mg each vati.) Malhar-3gm (thrice) local application.

Duration of trial - Trial was conducted for maximum one month (21 days with medicine & 7 days without medicine). Patient will be followed once a week during treatment. Follow up after treatment-7 days (without drug) after the treatment is completed.

DIAGNOSTIC CRITERIA

Diagnosis of each case was made with the help of detailed history in respect to disease, family history, previous similar episode, physical and systemic examination as well as the investigation.

1. SUBJECTIVE CRITERIA: Cardinal symptom of acharana yonivyapad yoni kandu (itching) with or without yoni srava (white discharge).

Associated symptoms- yoni daurgandhya, yoni vedana, maithunakrichhta, ati narakankshini (increased libido) mutra dah, yoni shoth.

2. OBJECTIVE CRITERIA

- Change in vaginal pH
- Vaginal wet smear LABORATORY INVESTIGATIONS

General Investigations-(done to rule out exclusion criteria)

1. Estimation of Hb%, TLC, DLC, ESR.
2. RBS
3. HIV, HBsAg, VDRL.
4. Urine examination (routine & microscopic)
5. Vaginal pH
6. Wet vaginal smear for the presence of pathogen (clue cells/T. vaginalis s/ fungal hyphae).
7. Vaginal swab culture (if needed)

Specific Investigations-
INCLUSION CRITERIA: -

- Adult female who are in age group of 18-45 years.
- Only married patient.
- Patients having pruritus vulvae as a cardinal symptom with or without vaginal discharge.

EXCLUSION CRITERIA

- Patients below 18yrs and above 45yrs.
- Patients after menopause.
- Patients who are willing to conceive.
- Patient of uterine prolapse & Ca-cervix.
- Patient on oral contraceptives, or using intrauterine contraceptive devices.
- Patients with diabetes mellitus, tuberculosis, jaundice, severe HT.
- Patients with extensive chronic cervicitis, fibroid and malignancy.
- VDRL, HIV, HBsAg positive patient.

SUBJECTIVE DIAGNOSTIC PARAMETERS

- Yoni kandu (itching in vulva)
- Yoni srava (white discharge per vagina)
- Yoni Daurgandhay (malodor)
- Yoni vedana (pain)
- Atinarakanshini (increased libido)
- Maithuna krichhta (dyspareunia)
- Mutra dah (burning micturition)
- Yoni shoth (inflammation of vulva)

STATISTICAL ANALYSIS

Parameters	Group A				Group B			
	Bt	At	Relief %	P Value	Bt	At	Relief %	P Value
Yoni Kandu	1.85	0.40	78.38	<0.0001	2.00	0.25	87.5	<0.0001
Yoni Srava	1.70	0.70	58.82	<0.001	1.45	0.15	89.66	<0.001
Yoni Daurgandh ya	0.85	0.25	70.59	0.0020	0.85	0.10	88.24	<0.0001
Yoni Vedena	0.25	0.05	80.00	0.1250	0.70	0.10	85.71	.0078
Mutra daha	0.85	0.15	82.35	0.0005	0.80	0.00	100	.0039
Yoni shotha	0.25	0.00	80.00	0.1250	0.40	0.05	87.50	.0001
Maithunkri chta	0.75	0.20	73.33	0.0020	.80	0.15	81.25	.0313
Vaginal pH	1.00	0.45	52.63	0.0020	0.90	0.15	88.89	.0010

OVERALL EFFECT OF THERAPY

S.no	Criteria	Improvementgrade	Gr A No of patient	Gr B No of patients	Gr A Relief %	Gr B Relief %
1	76-100%	marked	7	16	35.00	80.00
2	51-75%	moderate	12	04	60.00	20.00
3	26%-50%	mild	01	00	5.00	0.00
4	00-25%	unchanged	00	00	00	0.00

DISCUSSION

Acharana yonivayapada is one of the 20 yonivyapada caused by the *adhawana of yoni* which is characterised by itching in genital area. According to acharaya Charaka, due to non-cleanliness of yoni, the jantu (parasites /microbes develop) develops that causes itching in genital area. Due to itching woman feels excessive sexual desire.

On the basis of all clinical features and principles of treatment of Acharana Yonivyapad seems to be nearer to Pruritus vulvae. Factors that causes vitiation of kapha dosha and rasa & rakta dhatu dushti, are the etiological factors of Yonikandu. These factors includes mithyahara, mithyavihara, kalaj hetu, here adhawana of yoni that is covered under mithyavihara is specifically assumed to be the main cause of yoni kandu.

In western literature, there are many causes of Pruritus vulvae, but the most common are Vulvovaginal Candidiasis, Trichomonas vaginalis infection. All these infections are encouraged by changes in the normal acidity or the hormonal imbalance in the vagina.

Cardinal features of Pruritus vulva is itching in genital area with or without vaginal discharge. It may be associated with mal odorous discharge, pain in vulva & vagina, increased libido, dyspareunia & burning micturition.

Specific treatment of yonikandu in Acharana according to Charak and Vagbhata are :

- Uttarvasti with medicated oil
- Local application of vasti and pichhu.

Shamana chikitsa should be given according to predominance of doshas and in the other words drugs with kanduhara and krimihara can be used in such case like kutaj ghan vati has already proved to be efficacious in cases of yoni kandu done in previous research journals. (Dr Pushpa Rai Et;Al)

PROBABLE MODE OF ACTION OF DRUGS

Ayurveda holds that the action of the whole drug is often different from that of any individual constituents considered separately. It is well known that a compound drug is composed of several ingredients. Hence, it is necessary to know the cumulative effect produced by the compound. Cure of disease takes place due to Samprapti Vighatana. This can be explained by the action of Rasa, Guna, Virya, Vipaka and Prabhava of drugs in the various Srotasa and on Dosha and Dushya in human body. It is clear from the text that in Acharana yonivyapaada, aharaja, viharaja & kalaj hetu causes agnimandya which causes formation of Amarasa which leads to Dhatvagnimandya and Rasadhatu Dushti and it disturbs the formation of Poshyabhaga and Malabhaga. Excessively formed Mala (Vikrita Kapha) reaches to the Yoni and causes itching in genital area, abnormal excessive discharge, foul smelling discharge, pain, etc. leading to yonirogas. The relief of pruritus vulvae can be explained by pharmacological action of the guduchidantyadi yoga. Most of ingredients in Gududhidantyadi yoga has Kledashoshaka and Kaphaghna properties. Kashaya rasa, Katu Rasa, Ruksha Guna with Krimighna property leads to prevention of any kind of Srava and Kandu.

Mode of Action (Guduchidantyadi vati) : Acharya Charaka has mentioned that all drugs do their actions due to their five properties i.e Rasa, Guna, Virya, Vipaka and Prabhava.

Guduchdantyadi Vati possesses Katu, Tikta, Kashaya as predominant Rasa. Laghu, Ruksha Guna, Ushna Virya and Madhur Vipaka. This yoga have Kandughna property too.

Kashaya Rasa by virtue of its Gunas controls Srava. The second dominant Rasa in Gudhidantyadi yoga is Katu Rasa. It is formed by Vayu and Agni mahabhuta, having qualities opposite to Kapha, thus alleviates Srava. Katu Rasa itself has Krimighna and Kanduhara properties. Some of the ingredients possess Madhura Rasa. Balya, Poshana Karma of Madhura Rasa helps in healing by Dhatuvardhana leading to minimal inflammation.

On the basis of Guna: When an analysis of Guna of individual ingredients is carried out, most of them have Ruksha Guna which has Kapha Shamaka and Shoshana property which helps in Kleda Shoshna and Kaphanashak.

On the basis of Virya: Ushna & Sheet Virya both are present, Ushna Virya pacifying the Kapha and Sheeta Virya will give soothing effect.

On the basis of Vipaka: Regarding Vipaka, all the contents have Madhur Vipaka due to which it has a healing property.

On the basis of Karma: In Guduchidantydi Vati most of ingredients possess tridosha shamaka property. Pitta Shamak property will give cooling effect in burning sensation due to Yoni Kandu

Mode of Action (Guduchidantyadi Malhara)- Malahara is a type of Kalpana, which eliminates the mala or the impurities from the site of action. Kanduhara property of guduchidantyadi malhara is due to the drugs used in it. As most of the drugs in this malahara are of ruksha property having tikta, kashay rasa has vata, kapha shamaka property, kanduhara, krimihara, shotha hara, kledahara, dahahar, shoshaghna, shravahar property. Due to siktha & tila taila in malhara it has an additional property of kushtahara & ropana property.

After the malahara is applied on the affected part of the vulva it gets absorbed and reaches in to the circulation by its anti inflammatory and analgesic property, it reduces swelling, redness and pain. Local causative organisms like *Candida albicans*, *T vaginalis* etc. may be destroyed by Krimighna property i.e antimicrobial, antifungal and anti bacterial property and by the astringent property it reduces secretion and itching thus helps in quicker epithelisation, rejuvenates the epithelium and promotes healing area with chemical based market products which disturbs vaginal flora and cause recurrent pruritus vulva like condition.

CONCLUSION

- Unhygienic conditions was found to be the main cause of pruritus vulvae which favours the growth of parasite, bacteria and fungus.
- Kapha and vata doshas are involved in the etiopathogenesis of acharana yonivyapada.
- It is a commonly observed condition in reproductive age group.
- Patients complaint rashes and swelling in genital area, painful coitus, burning micturition, even have sleepless nights due to Pruritus Vulvae.
- If this condition is left untreated for long time then it can disturb the vaginal flora and pH and make the patient prone to recurrent infections it can further lead to ascending infections like endometritis, PID, it can cause infertility or spontaneous abortion if conceived.
- Guduchidantyadi vati and Guduchidantyadi malhara was selected for the treatment. Both the drugs have Kashaya Rasa, Ruksha Guna, Kapha Dosha nashaka, Sravahara, Kanduhara, Shothahara and Krimighana properties. They have been reported to exert astringent, analgesic, antiinflammatory, antimicrobial, antiprotozoal and antifungal properties which help to relieve the signs and symptoms of the disease. Guduchidantyadi malhara has an additional antiseptic, pain relieving and toxin removing property due to siktha and tila taila in it.
- Highest percentage of patients 60.00% were found in age group 28 to 36 years. In reproductive age group female body undergoes maximum changes, due to active sexual life, delivery and contraception methods that can disturb vaginal flora and cause infection.
- Lack of knowledge to maintaining personal hygiene was found in maximum patients. It was observed that only 5.00% patients had knowledge of good hygiene.
- Maximum i.e. 57.50% patients were using sanitary pads during menses but not changing pads at regular intervals was observed in most of the patients.
- Lower and middle economic status female were effected more due to bad sanitation and negligence towards health and hygiene.
- Lack of proper nourishment was noted in most of the patients. Due to sedentary life maximum patients i.e. 45.00% were having krura koshta and mandagni was observed in maximum i.e. 40.00% patients.
- In maximum 65.00% patients, partners were not using barrier method of contraception.
- Both the group drugs showed statistically significant result in reducing both the cardinal as well as associated sign and symptoms of the disease. In comparison of both the

therapies group B showed 12.49% more relief than group A.

- On comparing the effect between groups, group B has provided better relief than group A. Improvement in associated symptoms were also noted more in group B than in group A.
- Average percent relief was observed 69.80% in group A, while in group B it was observed 82.29%.
- Hence the Efficacy of Guduchidantyadi Malahara is more than Guduchidantyadi vati in acharana yonivyapada to reduce yoni kandu, yoni strava, increased libido, yoni daurgadhya, mutra daha, maithuna kricha, yoni vedana, yoni shotha with no recurrence rate in group B. In 10.00% patients of group A, recurrence rate of mild score was recorded.
- Improvement in wet vaginal smear and vaginal pH were observed more in group B than in group A. In the wet vaginal smear study, pathogen that is fungal hyphae, clue cells and Trichomonas vaginalis were present in 32.50% patients.
- No Adverse drug reaction (ADR) and side effects were reported in the present study.
- Results of this study are very encouraging and trial should be conducted on large sample.

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