

ROLE OF STAHANIK CHIKITHSKA (YONI PRAKSHALANA AND YONI PICHU) IN THE MANAGEMENT OF SWETA PRADAR: A CASE STUDY

¹*Dr. Mofidul Islam and ²Dr. Yanbeni Humtsoe

¹PG Scholar, Dept. of Prasuti Tantra and Stree Roga, Govt. Ayurvedic College and Hospital, Guwahati -14.

²Prof. & HOD, Dept. of Prasuti Tantra and Stree Roga, Govt. Ayurvedic College and Hospital, Guwahati -14.

Article Received on
01 June 2025,

Revised on 22 July 2025,
Accepted on 11 August 2025

DOI: 10.20959/wjpr202516-37887



*Corresponding Author

Dr. Mofidul Islam

PG Scholar, Dept. of Prasuti
Tantra and Stree Roga,
Govt. Ayurvedic College
and Hospital, Guwahati -14.

ABSTRACT

Shweta Pradar is one of the most common issues faced by women in their daily lives. A small amount of vaginal discharge is a natural process that helps maintain vaginal moisture and hygiene. However, when the discharge becomes excessive, foul-smelling, or is accompanied by itching, it can cause significant discomfort. Recurrent episodes are often difficult to manage with oral medications alone. In such cases, Sthanik Chikitsa and Ayurvedic medications have proven effective. These approaches not only treat the local pathology but also support overall health and wellness. This case report discusses a female patient who presented with complaints of constipation, lower back pain, burning micturition, thick white vaginal discharge, and burning sensation in the vaginal region. She was advised to undergo Sthanik Chikitsa. After obtaining informed consent, she was treated with Yoni Prakshalana with Triphala Kashaya and Yoni Pichu soaked

in Guduchyadi Taila for seven days following the end of her menstrual cycle. This treatment was continued for three consecutive cycles. The patient reported noticeable improvement in her symptoms from the first cycle itself. This case emphasizes the significance of Sthanik Chikitsa in the management of Stri Roga (gynecological disorders) and highlights the potential role of traditional Ayurvedic therapies in complementing modern medical treatments.

KEYWORDS: Shweta pradar, Sweta Pradar, Yoni pichu, Sthanik chikitsa, yoni prakshalana, Triphala Kashaya, Guduchyadi Taila.

INTRODUCTION

A minimal amount of vaginal secretion is normally sufficient to maintain moisture on the vaginal surface. Physiologically, the discharge may slightly increase around mid-cycle, just before menstruation, during pregnancy, or in response to sexual arousal. Various factors such as mental stress, nutritional status, emotional disturbances, pregnancy, and certain medications can influence the quantity and nature of this discharge.^[1] However, when the discharge becomes excessive or pathological, it can interfere with a woman's daily activities and overall well-being.

Pathological vaginal discharge often presents as profuse, thick, white secretions accompanied by a foul odor, vulvovaginal itching, pain, irritation, low backache, and general weakness. These symptoms can significantly impact a woman's quality of life, hindering her ability to focus on personal, familial, and professional responsibilities. Many women seek gynecological consultation for relief from such symptoms. In cases where long-term relief is not achieved, hysterectomy is sometimes suggested, which may compromise future fertility.

Therefore, it is essential to seek long-lasting treatment options that effectively manage the condition without adversely affecting reproductive potential. This includes exploring holistic approaches such as lifestyle modifications and alternative therapies. In this context, a case report is presented where a patient with Shweta Pradar was successfully managed using Yoni Prakshalana with Triphala Kashaya and Yoni Pichu with Guduchyadi Taila a form of Sthanik Chikitsa as described by our ancient Acharyas.^[3,4] This case highlights the effectiveness of Sthanik Chikitsa in managing such gynecological conditions.

CASE REPORT

A female patient of 29 yrs. age attended the OPD of Department of Prasuti Tantra & Stri Roga, Govt. Ayurvedic College & Hospital, Guwahati, Assam with the complaint of thick white discharge P/V from 2 yrs. She was also having complaints of burning in vaginal area, burning micturition, low back ache & constipation.

History of present illness

The patient had been experiencing persistent white vaginal discharge for the past two years. The discharge was thick in consistency and continued throughout the month without relief. Along with this, she reported burning sensation in the vaginal region and burning micturition for the past five to six months. She also complained of constipation and lower back pain. Despite undergoing multiple treatments over time, she did not achieve complete relief. Frustrated with the lack of long-term improvement, she opted to pursue Ayurvedic treatment.

Medical and Surgical History

- ❖ Past Illness: No history of major illness.
- ❖ Surgical History: No history of any surgical procedures.
- ❖ Medical History: No known history of chronic medical conditions.
- ❖ Family History: No family history of Diabetes Mellitus, Hypertension, Tuberculosis, or Thyroid disorders.

Gynecological and Contraceptive History

- ✓ Contraceptive Use: The patient is not using any oral contraceptive pills (OCP) and has no intrauterine contraceptive device (IUCD) inserted.

Personal History

- ❖ Occupation: Housewife
- ❖ Lifestyle: Sedentary
- ❖ Food Habits: Irregular
- ❖ Diet: Non-Vegetarian
- ❖ Appetite: Moderate
- ❖ Bowel Movements: Unsatisfactory; patient reports constipation
- ❖ Micturition: 7–8 times per day
- ❖ Sleep: Disturbed
- ❖ Habits: Consumes tea 4–5 times daily
- ❖ Exercise: None

Menstrual history

- LMP – 24/10/24
- Duration – 4-5days
- Interval – 28-30 days

- Amount of blood loss - Moderate
- Regularity- Regular

Obstetric history

G₂P₂ A₀

P₁ - 10 yrs. male child, FTND

P₂ - 8 yrs. female child, FTND

Table No. 1: Asta vidha pariksha.

1	Nadi	Kapha pitta
2	Mutra	Prakrita
3	Mala	Nirama
4	Sabda	Prakrita
5	Sparsha	Prakrita
6	Jivha	Sheets usna
7	Drik	Pandora
8	Akriti	Sthool

Table No. 2: Dasavidha Pareeksha.

1	Prakriti	Kapha pradhana vata anubandhi
2	Vikriti	Kapha
3	Sara	Madhyama
4	Samhanan	Madhyama
5	Satmya	Madhyama
6	Satwa	Ahara
7	Pramana	Madhyam
8	Ahara Abhyavaharana Shakti Jaranashakti	Madhyam
9	Vyayam shakti	Madhyam
10	Vayah	Youvana

Systemic examination

- A. Respiratory System: Bilateral chest clear, air entry bilaterally equal, no added sounds.
- B. Cardiovascular System: S1 and S2 heart sounds audible, no murmurs detected.
- C. Central Nervous System (CNS): Patient is conscious, alert, and well-oriented to time, place, and person; all superficial reflexes are intact.
- D. Gastrointestinal System (GIT): Abdomen soft and non-tender, bowel sounds audible, no abnormalities detected.

Local Examination

- A. **Per Abdomen Examination:** No abnormality detected (NAD).
- B. **External Genitalia:** Thick vaginal discharge observed on the vulva.

C. Per Speculum Examination: Cervix appears hypertrophied and congested. Thick white discharge is present at the external os of the cervix along with mild cervical erosion.

D. Per Vaginal Examination: Uterus is anteverted and of parous size, fornices are clear and non-tender.

Assessment criteria

1. Shweta Srava (Vaginal White Discharge)

0 - No vaginal discharge

1 - Mild - Occasionally wetting undergarments /slight discharge, vulva moistness

2 - Moderate discharge, wetting of undergarments

3 - Severe - Heavy discharge which needs Vulva pads

2. Katishoola (Backache)

0 - No pain

1 - Mild - Can withstand pain & can manage routine work.

2 - Moderate – Cannot manage routine work & need to take rest.

3 - Severe - Cannot withstand pain & bed ridden.

3. Yoni Kandu (Itching of vulva)

0 - No itching

1 - Mild – Slight rub.

2 - Moderate – Instant rub causing redness.

3 - Severe – Continuous rub causing redness.

4. Yoni Daha (Burning of vulva)

0 - No burning

1 - Mild – occasional burning.

2 - Moderate – frequent burning.

3 - Severe – Continuous burning.

5. Durgandha (Odour)

0 - Absent

1 – Mild

2 – Moderate

3 - Severe

INVESTIGATION

1. CBC - Within normal limits (Hb- 11 gm %)
2. RBS- 90mg/dl
3. Viral Profile (HIV, VDRL, HCV, Hbs Ag) - Non reactive
4. Urine R/E & C/S- Within normal limit
5. Vaginal pH- 7
6. USG (lower Abdomen)- Bulky Uterus with mild cervicitis
7. Pap Smear- Inflammatory Smears

TREATMENT PROTOCOL**Sthanik chikitsa**

Sl.No	Medicine	Procedure name	Duration
1	Triphala Kashaya	Yoni Prakshalana	21 days (For 7 days after end of each menstrual cycle)
2	Guduchyadi Tail	Pichu	21 days (For 7 days after end of each menstrual cycle)

Abhyantar Chikitsa

Sl. No	Medicine	Dose and dosage	Duration
1	Chandraprabha Vati	2 pills twice daily After food	1 month
2	Pushyanung Churna	2tsf twice daily with Tandulodaka (rice water)	1 month
3	Triphala Churna	1tsf with Luke warm water at bed time	1month
4	Tablet Trikatu	2tab twice daily after food	1month

Pathya-Apathya (Recommended Diet and Lifestyle Modifications)

- ❖ The patient was advised to follow specific Āhāra (dietary) and Vihāra (lifestyle) guidelines as part of her treatment protocol:

Ahara (Dietary Recommendations)

- Consume plenty of water to maintain hydration.
- Include a high-fiber diet with fresh fruits and green leafy vegetables.
- Intake of garlic, meat soup (māmsa rasa), and rice water (kanji) was encouraged for nourishment and digestive support.

Vihar (Lifestyle Recommendations)

- Keep the genital area clean and dry at all times.
- Maintain proper personal hygiene.

- Wash undergarments separately using boiled water and antiseptic solution such as Dettol to prevent reinfection.

SL No	Assessment Criteria	Graduations of parameters at follow up			
		BT (Day 1)	FU1 (Day 30)	FU2 (Day 60)	AT (Day 90)
1	Sweta Srava	3	2	1	0
2	katisula	3	3	2	0
3	Yoni Kanda	3	2	2	0
4	Yoni Dana	3	3	1	0
5	Daurgandha	3	2	1	0

(BT: Before treatment, FU1: first follow up, FU2: first follow up, FU3: first follow up)

RESULT

The patient experienced significant relief from vaginal discharge following the completion of the **three-cycle, seven-days** treatment regimen. Notable improvement was observed as early as the first cycle, with continued progress throughout the therapy. Post-treatment investigations further supported the clinical improvement. One key finding was the change in **vaginal pH**—initially recorded as **7 (alkaline)** prior to treatment, it shifted to **5 (acidic)** after 10 days following the third cycle. This restoration of acidic pH is essential for maintaining a healthy vaginal flora and protecting against recurrent infections.

DISCUSSION

In Ayurveda, all gynecological disorders are collectively described under the term Yoni Vyapad. Shweta Pradara is considered a symptom commonly present in various Yoni Vyapads, particularly those arising due to the vitiation of Kapha and Vata-Kapha doshas.^[3] Conditions such as Atyananda, Karnini, Acharana, Aticharana, Shleshmala, Upapluta, and Prasamsini are associated with this symptom.^[3,10,11]

The term Shweta Pradara, specifically used to denote pathological white vaginal discharge, is referenced in classical Ayurvedic texts including Sharangdhara Samhita, Bhavaprakasha, and Yoga Ratnakara. In the present case, the patient exhibited complaints of thick white vaginal discharge, along with burning sensation in the vaginal area and burning micturition. This clinical picture suggests predominant involvement of Kapha and Pitta doshas.

Here, Kapha dosha is primarily responsible for the excessive, thick, and mucoid discharge, whereas Pitta dosha contributes to the burning sensations experienced in the vagina and

urinary tract. Additionally, as stated by Acharya Charaka, no Yoni Vyapad can manifest without the involvement of Vata dosha, particularly Apana Vata, which governs the pelvic region. Thus, the pathogenesis involves Tridoshic imbalance with a predominance of Kapha and Pitta, and underlying disturbance of Vata.

The drug used for this case is Triphala Kashaya reference Bhaisajya Ratnawali shotha roga dhikar and Guduchyadi Taila reference in Charak Chikitsa stana 30th chapter Yoni vyapad chikitsa adhyaya.^[3]

Triphala Kashaya having Laghu (light), Ruksha (dry) properties Rasa is mainly Kashaya (astringent), Amla, Madhura, Tikta, Ushna (heating) in virya, Balances Tridosha, especially Kapha and Pitta dosha.^[12]

The ingredients of **Guduchyadi Taila** are – Gudachi, mālāti, rāsna, bala, madhuka, Citraka, nidigdhikā, devadāru, and yūthika each one karṣa (paste of each), Tila Taila one prastha, Gomutra and Godugdha each two prastha should be mixed together.^[3]

The **pharmacodynamic properties of Guduchyadi Taila** can be explained as;

- Rasa – Madhura, Katu, Tikta
- Guna – Laghu, Snigdha, Pichhola
- Vipak – Madhura, Katu
- Veerya – Ushna, Shweta
- Karma – Vedanasthapan, Sothahara

Action of Guduchyadi Taila as Yonipichu

- Sneha contains Sukshma guna, so it reaches deep into the srotas and causes Srotasodhan. At cellular level Sneha begins action upon Dosha, Dushya, Agni.
- Pichu helps the medicine to remain in the site for a longer period for better action.
- Another function of Sneha is to perform Snehan karma (Lubrication) of Garbhashaya.
- In this Guduchyadi Taila used as yonipichu is helpful in removing all type of pain in women. Guduchyadi Taila has vata kapha prashamak properties by virtue of its madhura, tikta, katu, kasaya rasas due to dravya gunaprabhava and Ushna Virya. It is therefore very suitable for the treatment of Vata Yonivyapat in order to pacify aggravated vata.

What is Yoni Prakshalana & Yoni Pichu

The term Prakshalana denotes the act of cleansing. In this procedure, vaginal discharges and secretions are eliminated primarily due to the therapeutic properties of the herbal decoction (Kwatha) employed. A similar principle underlies the use of Yoni Pichu. Yoni Pichu involves the insertion of a sterile cotton swab soaked in medicated oil or ghee into the vaginal canal. This method ensures prolonged contact of the medicament with the local tissues, thereby enhancing its efficacy. The vagina, being richly vascularized, supports efficient absorption of drugs. Moreover, the vaginal mucosa favors the uptake of lipophilic substances, making medicated oils (Taila) or clarified butter (Ghrita) ideal carriers for therapeutic application.

CONCLUSION

Shweta Pradara, or white vaginal discharge, is a frequently observed complaint among women of reproductive age and represents a significant concern in routine clinical practice. It not only impacts the physical health of affected individuals but can also lead to psychological distress. Therefore, a systematic and well-structured treatment strategy is essential for its effective management. The mentioned therapeutic measures may be considered appropriate in addressing Shweta Pradara. The drugs gives optimistic results to the patient. Vaginal discharges along with other associated symptoms also subsided. During the study, it was observed that there were no side effects of the drugs and the patient feel happy, relaxed and energetic with improvement in symptoms which gave an add-on boost to the study.

REFERENCES

1. D.C Dutta's Text book of Gynaecology including contraception, Edited by Hiralal Konar, Edition-6, New central book agency, Kolkata, Reprinted –2010.
2. Konar H, D. C. Dutta Textbook of Gynecology 6th edition, P.D Publishers Delhi, 2009.
3. Shastri K, Charak Samhita Vidyotini teeka Chikitsa Sthan 30 / 73-77 Published by chaukhambha Bharti academy Revised edition, 2013.
4. Sharma S. Astanga Samgraha of Vrddha Vagbhata with shashilekha Commentary by Indu. Uttarasthana, 39/96. 1st Edition. Varanasi; Chaukabha Sanskrit Series Office; 2008; 839p.
5. Mishra S, Yoga Ratnakar Siddhiprada Hindi Teeka1/36 Published by Chaukhmbha Orientalia, Delhi, 2006.
6. Shastri K, Charak Samhita Vidyotini teeka Viman Sthan 8/94 Published by chaukhambha Bharti academy Revised edition, 2013.

7. Shastri K, Charak Samhita Vidyotini teeka Chikitsa Sthan 30 / 7 Published by chaukhambha Bharti academy Revised edition, 2013.
8. Tiwari P.V Ayurvedic Prasuti Tantra evam Stri Roga chaukhambha Bharti academy Revised edition, 2019.
9. Tiwari P.V Ayurvedic Prasuti Tantra evam Stri Roga chaukhambha Bharti academy Revised edition, 2019.
10. Sushruta Samhita, Ayurved tatva sandipika by Dr. Ambikadatta Shastri, published by chaukhambha sanskrit sansthan, Varanasi, reprinted in 2020, sharir sthan, chapter- 2, sloka- 13. (Dalhan tika).
11. Sushruta Samhita, Ayurved tatva sandipika by Dr. Ambikadatta Shastri, published by chaukhambha sanskrit sansthan, Varanasi, reprinted in 2020, Uttartantra, chapter- 37, sloka- 27, (Dalhan tika).
12. 'Bhaishajya Ratnavali of Govind Das Sen with Bhasha Tika and Hindi Trans. by Vaidya Shankar Lal 1942 - Khemraj', shotha rogadhikar.