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## Successful management of Cervical Erosion through Kshara Karma - A Case Report

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### ABSTRACT

Cervical erosion is a common gynecological condition seen in OPD. About 85% of woman suffers from cervical erosion which is a benign condition of female genital tract during Reproductive life time. Though it's not a fatal one yet the long-term association with the disease and the number of symptoms both related to genito-urinary system as well as psychological imbalance in patient needs attention. The complications encountered by diathermy, cauterization, laser therapy, etc. like local operations on the cervix causes menstrual disturbances, reactionary hemorrhages, cervical stenosis, sepsis, perforation of cervix, troublesome vaginal discharge and effect on subsequent pregnancy and child birth. Cervical erosion can be considered as Gabhashayaqrivaqata Vrana, as it shows the features of Vrana. By considering the Lakshana and Chikitsa of Karnini Yonivyapath, Kshara Karma having better result in treating Cervical Erosion.

Key words: Karnini Yonivyapath, Kshara Karma, Cervical Erosion, Garbhashayagrivagata Vrana

#### INTRODUCTION

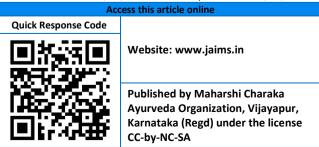
Cervical Erosion is a condition in which the cells from the "inside" of the cervical canal, known as glandular cells (or columnar epithelium), are present on the "outside" of the vaginal portion of the cervix. The cells on the "outside" of the cervix are typically squamous epithelial cells. It is one of the most common gynecological conditions seen in OPD. About 85% of

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women suffer from cervical erosion which is a benign condition of female genital tract during Reproductive life time. Though it's not a fatal one yet the long-term association with the disease and the number of symptoms both related to genito-urinary system as well as psychological imbalance in patient needs attention. The complications encountered bv diathermy, cauterization, laser therapy, etc., like local operations the cervix causes menstrual on disturbances, reactionary hemorrhages, cervical stenosis, sepsis, perforation of cervix, troublesome vaginal discharge and effect on subsequent pregnancy and child birth.<sup>[1]</sup>

As we go through the etimology and features of cervical erosion, it can be corelated to Karnini Yoni Vyapata. And the main treatment for Karnini Yoni Vyapata is mentioned as Sthanik Shodhana. Going through the Kshara Gunas<sup>[2]</sup> i.e.Ushna Virya, Tikshna Guna, Vrana Shotha Pachaka, Sroto Shodhaka, Klinnata Shoshaka, Raktatisrava Stambhaka, Ropaka, Kathin Unnata Mamsadi Lekhaka. Comparing the line

#### Nanda KO et al. Successful management of Cervical Erosion through Kshara Karma

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#### CASE REPORT Nov-Dec 2021

of treatment and the *Kshara Gunas*, it is observed that *Kshara* can be used in the treatment of cervical erosion. And also the side effects of cauterisation, specially cervical stenosis and discharge may be overcome by the use of *Kshara*.

Keeping in view, the above-mentioned symptomatology and problems in treating them, so *Kshara Karma* acts as an alternative, safe and cost-effective management in treating *Karnini Yonivyapath*.

#### **CASE REPORT**

A patient aged 44 years; c/o thick white discharge PV associated with severe itching since 1 year. She had shown to local clinic and treated for the same, but after completion of medication often starts with the same complaints and it is interfering and disturbing her daily routine and also there is increase in white discharge PV along with itching since 3 months.

#### **On Examination**

#### **General Examination**

Moderately Built and Nourished, Height - 164cms, Weight - 64 kgs

PR: 82/min, BP: 120/80 mmHg; Pallor ++

P/A - Soft, NAD

#### **Local Examination**

External Genitalia - Vulva - Scratch wound present

P/S – Cervix – Erosion ++++, White Discharge +++, Congestion ++, Inflamed +

Vagina – White Discharge ++

P/V- Anteverted & Anteflexed Uterus/ Mild Bulky/ Fornices tenderness ++

#### **OBG History**

Married Life - 22 years; Non consanguineous marriage

Menarche: 14<sup>th</sup> year; MC – Regular; 4-5 days /30 days; LMP - 05-04-2020, Moderate Flow

P2L2 – P1 L1 Male 18 years; P2 L2 Female 16 years – both Full term Normal Delivery followed by LTO 18 years back Coital History: Weekly twice

Not a K/C/O DM/HTN/Thyroid Dysfunction; No similar complaints in family members

#### Investigation

Hb% - 10.5 gm%; RBS -97 mg/dl, Urine Routine - Normal

Vaginal Smear s/o Bacterial Vaginosis

Pap smear s/o Severe Nonspecific Inflammatory Changes, Severe Cervical Erosion

USG Abdomen & Pelvis s/o Bulky and Edematous Cervix – Cervicitis

REPORT	BDOMEN & PELVIS		
I TVER :	s normal in size & echotextur ire is normal. No Intrahepat	re. Surface appears smooth. tic billiary radical dilatation see	No Intrahepatic focal lesions seen. Hepatic In. Liver size: 14.5 cm.
	VEIN : is normal in caliber.		
GALL BL	ADDER : is adequately diste	ended. Wall thickness is norn	nal. Contents clear. No calculi seen within the
PANCRE	AS: is normal in size & echot	texture. No focal lesions see	n. Pancreatic duct is normal.
			n. Splenic vein is normal. Measures 7.5 cm.
is maintai	ney: is normal in size and e	een. hotexture. Pelvicalyceal sys een.	stem is normal. Corticomedullary differentiation
	Right kidney :	Length 10.1 cm	Parenchymal thickness 1.3 cm
	Left kidney :	10.6 cm	1.4 cm
			or mass lesions. Wall thickness is normal wi
UTERUS : normal, th		ize, shape & echotexture. Is measures : 7.3 x 4.8 x 4.	No focal lesions seen. Endometrial echoes a 0 cm. <b>bulky and edematous cervix, measu</b> n
3.4 cm	: both ovaries are normal	Bilateral adnexal area no	abnormality seen.
OVARIES	: both ovaries are normal ary: 2.4 x 2.1 cm,	left ovary :	2.7 x 2.5 cm.
Right ova	the second se	ral cavity.	
			tie
THODESS	ION : BULKY AND EDEM	ATOUS CERVIX - Cervici	us.
Suggester			
	d : clinical correlation.		
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#### ISSN: 2456-3110

#### CASE REPORT Nov-Dec 2021

Cytology No : 631/20		
Cylology the tar and		
1. Wet mount prepara	tion : Trichomonas Vaginalis not seen.	
2. KOH preparation	: Candida albicans not seen.	
3. GRAM STAIN :		
a) Lactobacilli	: Absent	
b) Clue cells	: Present	
c) Inflammatory cells	Present	
d) Epithelial cells	Superficial & Intermediate cells seen.	
MPRESSION	: Bacterial Vaginosis.	

#### Management

Yoniprakshalana with Panchavalkala Kwatha - 7 days Yonikshara Lepa with Apamarga Kshara - 1 day Yonipichu with Yashtimadhu Taila - 7 days

#### RESULT



#### **Mode of Action**

Yoniprakshalana with Panchavalkala Kwatha – the drug is Sheetaveerya, Kashaya Rasa Pradhana helps for Vranaropana and Shodana and also helps to reduce the Yonisrava. Panchavalkala Kwatha acts as antibacterial and anti-inflammatory property which helps

Yoniksharalepa with Apamarga Kshara – which helps for Dahana, Pacana, Darana, Vilayana, Shodana, Ropana and Shoshana of Karnika which in turn helps to relieve the symptoms. Ksharana and Kshalana Karmas of Kshara slowly transmitted into interior strata thus eradicating dysplastic cells and at the same time causing healthy re-epithelization.

*Yonipichu* with *Yashtimadhutaila* – the drug helps for *Vranaropanaas* well as *Yonivishodhana*.

#### DISCUSSION

Karnini Yonivyapath, the word Karnini is derived from Karnika which means having ears, finger like projections, barbed wire, the tip of an elephant's trunk and furnished with knots. The condition is due to the development of Karnika on Garbhashayamukha. Development of Karnika is the characteristic feature of Karniniyonivyapth.Karniniyonivyapath can also be understood as Garbhashayagreevagata Vrana and similar management of Vrana can also be adopted.

Cervical Erosion (also called as Cervical Ectopy) is a condition in which the squamous covering of the vaginal aspect of cervix is replaced by columnar epithelium which is continuous with that lining the endocervix. It is not an ulcer. It is described as " The interplay between the two epithelia." An ectpoy has a reddened appearance with a clearly defined edge, the colour being explained by the underlying tissue showing through a thin epithelium. The columnar epithelium may be arranged in a regular pattern but is sometimes proliferated and heaped up to form villous projections – a papillary ectopy. This may be congenital or acquired. The symptoms may include-persistent white discharge, backache, metrorrhagia, frequency of micturition, chronic ill health, pruritis, infertility, psychological upsets or there may be no symptom at all.<sup>[3,4,5]</sup>

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#### CASE REPORT Nov-Dec 2021

Kapha Vataghna , Sroto Shodhana and Kandu- Kleda-Shopha Hara line of treatment has been described in texts. Mainly indicates Shodhana by the topical application of medicine is the principle line of treatment. According to modern view, the main line of treatment for cervical erosion is Cauterisation, Cryosurgery. By adopting the Yoni Prakshalana, Pichu and Kshara Karma by selecting the drugs which are having Kapha Vataghna, Sroto Shodhana and Kandu-Kleda-Shopha Hara property the condition can be treated

#### **CONCLUSION**

In Present Case Report, In *Karnini Yonivyapath*, *Yoniprakshalan* followed by *Yonimukha Kshara Lepa* and *Yonipichu*, these *Sthanika Chikitsa's* having effective management in treating Cervical Erosion.

#### REFERENCES

- 1. Dutta DC, Textbook of Gynaecology including contraception, 5<sup>th</sup>edition, pg no. 257
- Kaviraja Ambikadatta Shastri, Susruta Samhita, reprint edition 2009, Chaukhamba Sanskrit Sansthana, Sutra Sthana 11<sup>th</sup> chapter /5, pg no. 45
- Dutta DC, Textbook of Gynaecology including contraception, 5<sup>th</sup>edition, pg no. 257
- 4. Streeroga Vigyana by V N K Usha. pg no 289-292
- Jeffcoate's Principles of Gynaecology, 7<sup>th</sup> international edition, edited by Pratap Kumar, Narendra Malhotra; Pg.no. 410-411

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