



ISSN 2456-3110

Vol 8 · Issue 3

March 2023

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Maharshi Charaka
Ayurveda

Indexed

Review of management of Cervical Ectropion using Traditional *Ayurvedic* Interventions

Mahi Mishra¹, Tanmay Bagade²

¹Reader, Department of Prasuti Tantra and Stri Roga, Government Autonomous Ayurveda College and Hospital, F-1, Govt. Ayurveda College Campus, Near Mandre Mata Mandir, Kampoo, Lashkar, Gwalior. Madhya Pradesh, India.

²Lecturer (Medical education, Global Health), Centre of Women's Health Research, the University of Newcastle, School of Medicine and Public health, Callaghan Drive, New South Wales, Australia.

ABSTRACT

Cervical ectropion or cervical erosion is a highly prevalent condition among females of reproductive age. Although self-limiting and benign this disease can progress to chronic condition and or cause unpleasant and distressing symptoms that significantly impacting women's quality of life. Modern therapies are limited to local ablative therapies and can temporarily relieve mild symptoms. However, there is a need to have a tailored approach to this condition based on the range of symptoms and stages of the disease. Also, this approach should depend on the understanding of the body temperament, daily dietary habits, routine occupational hazards, and the climacteric changes where the patient is residing. *Ayurveda's* holistic healing approach holds an answer to the issue of chronicity and recurrent occurrence of cervical ectropion. *Ayurveda's* disease management focuses on assessment of the history, signs and symptoms and its correlation with *Prakriti* and the vitiated *Doshas*. The treatment modality and the drug of choice are selected according to these assessments. Therefore, our study aims to review the current literature and clinical procedures mentioned in *Ayurveda* and synthesize the evidence associated with the medicinal drugs and combinations used to treat cervical ectropion.

Key words: Cervical ectropion, cervical erosion, Ayurveda

INTRODUCTION

Cervical ectropion (also known as cervical erosion) is a common, but benign condition in women of reproductive age. Usually diagnosed during routine pelvic examination or pap screening, the prevalence of cervical ectropion is estimated to be between 17 to 50 percent globally.^[1] In adolescents, the prevalence of

cervical ectropion can be as high as 80%.^[1] Swaminathan *et al.* in a multi-centric cross-sectional study in southern India, indicated a prevalence of 33%.^[2] It occurs when cervical epithelium is exposed to increased levels of oestrogen causing eversion of squamous, columnar junction, as well as the columnar epithelium of the endocervix onto the ectocervix.^[1] The eversion of squamocolumnar junction exposes the immunologically weaker cells to the acidic pH of the vagina.^[4,3] Although benign, cervical ectropion can cause a range of symptoms including excessive vaginal discharge, intermenstrual and post-coital bleeding, pelvic pain, dyspareunia, and severe symptoms such as recurrent cervicitis and susceptibility to sexually transmitted infections, especially Human Papilloma Virus (HPV), Neisseria gonorrhoeae, and Chlamydia trachomatis.^[4,3-7] Both, HPV and Chlamydia trachomatis are known to cause cervical cancers,^[8] while chronic cervicitis is attributed to pelvic inflammatory diseases and infertility.^[6] Therefore, it is

Address for correspondence:

Dr. Mahi Mishra

Reader, Department of Prasuti Tantra and Stri Roga, Government Autonomous Ayurveda College and Hospital, F-1, Govt. Ayurveda College Campus, Near Mandre Mata Mandir, Kampoo, Lashkar, Gwalior. Madhya Pradesh, India.

E-mail: drmahimishra@gmail.com

Submission Date: 08/01/2022 Accepted Date: 17/02/2023

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: [10.21760/jaims.8.3.10](https://doi.org/10.21760/jaims.8.3.10)

crucial to treat symptomatic cervical ectropion earlier to prevent future complications.

Current treatment approach

Current treatment approaches to symptomatic cervical ectropion include ablative treatments such as cryotherapy, electrocautery, laser therapy, focused ultrasonography, and local application of boric acid and other drugs.^[1,4] Although these treatments are effective, there is a high rate of recurrence due to various causes such as change in vaginal micro-biota, pregnancy or hormonal imbalances in women.^[9] Godha *et al.* have highlighted that the vaginal pH and microbiota has significant relation to women's reproductive health.^[10] In a review, Garcia-Velasco explained that disturbed vaginal microbiota is associated with risk of infertility, spontaneous abortions and preterm births.^[11] Therefore, treatment of cervical ectropion should be holistically approached to alleviate symptoms, as well as protect the patients from future adverse reproductive health outcomes. However, the current treatment approach to cervical ectropion is restrictedly focused on local ablative therapies, rather than enhancing efforts to improve vaginal pH and micro-biota for a sustainable relief of symptoms. Alternate therapies exist but have not been studied in detail. Therefore, there is a need to review the current literature to identify alternate therapies, especially the Indian system of medicine, i.e., approach of *Ayurveda* towards management of cervical ectropion.

Ayurveda's approach

Ayurveda's approach is to holistically eliminate the root causes of diseases, rather than treating the symptoms. *Ayurveda's* exclusive concept of '*Prakriti*' believes that the human body is made up of five elements known as the *Panchtatva*, which include Sky (*Aakash*), Wind (*Vayu*), Fire (*Agni*), Water (*Jal*), and Earth (*Prithvi*). These components further form the three principal energies (*Doshas*) of our body, known as the *Vata*, *Pitta*, and the *Kapha*. The variation in the levels of *Vata*, *Pitta*, and *Kapha*, results in a variety of body types. There are seven combinations of these *Doshas* that result in seven principal temperaments,

known as the seven *Prakriti*. Due to these variations the same diseases are presented with different signs and symptoms and severity. Hence understanding the temperament and understanding the dominant vitiated *Dosha* depending on the clinical presentation is of prime importance and treating the subject accordingly becomes the necessity. The seven *Prakritis* are: *Vata*, *Pitta*, *Kapha*, *Vata-Pitta*, *Vata-Kapha*, *Pitta-Kapha*, and *Vata-Pitta-Kapha* (*Samdoshaj*). Each of these *Prakritis* results in different psychosomatic characteristics in a person. Hence, for an *Ayurvedic* practitioner, the clinical assessment has a different approach. It begins as soon as a patient walks through the door. For example, if two people of the same age, sex, from the same place, and with the same disease, have a high possibility of being prescribed different medications.

An *Ayurvedic* practitioner shall ask them both, a series of questions related to their lifestyle habits, food and digestion, temperament, assessment of psychological state to understand their *Prakriti*, and then the management is decided. This approach of history taking ensures that medications are tailored according to the person's *Prakriti* and not according to the clinical diagnosis. Chatterjee *et al.* have reiterated that *Prakriti*-based medicine provides personalised treatment to chronic diseases and has potential to offer solutions to challenges in modern medicine such as adverse drug reactions, drug withdrawals, and economic disparities.^[57]

Localised treatment in Ayurveda

In *Ayurveda*, local treatment is known as *Sthanik Chikitsa*. It is derived from various references of *Bruhatrayis* or the three 3 main books of *Ayurveda*; namely *Charak Samhita*, *Sushrut Samhita* and *Vagbhatt Samhita*. The local treatment depends on the signs and symptoms given and presented by the patients. The various permutations and combinations are practically applied depending upon the *Prakriti* of the patient, the dietetics and the seasonal changes. In this rapid review, we aim to identify *Ayurvedic* procedures, therapies and medications that are currently used to treat cervical ectropion.

Following are the common *Sthanik Chikitsa* used to treat cervical ectropion and their descriptions:

1) Yoni Pichu

Yoni means vagina and *Pichu* means a tampon made up of sterile cotton and gauze as per the size of the vaginal opening and parity of the patient. This tampon is soaked in any one of the following depending upon the symptoms and the involvement of the *Doshas* example medicated oil (*Jatyadi Tail*), decoction (*Kashaya*), *Churna* mixed with oil (*Gairik Churna* mixed with *Jatyadi* oil). The drug administered through *Pichu* stays for a longer time on the affected area facilitating better absorption. It moistens and softens dry vagina. The medications restore the pH of vaginal flora thereby reducing vaginal infections. *Taila* or *Sneha* alleviates *Vata Dosha*. *Pichu* can be round shaped or elongated for shallow and deep insertion inside vagina respectively.^[43]

2) Yoni Dhavana

Yoni means vagina and *Dhavana* or *Prakshalana* means cleansing of vagina.^[44] It includes the douching of the vaginal canal. It is one among sixty types of *Vrana Chikitsa*. It is used in various conditions where the discharge is sticky, mucoid, unctuous, curdy, watery and offensive. Decoctions (*Kwatha*) of various plants can be used in different patients depending on the *Lakshana* (signs) *Poorvaroop* and *Roop* (symptoms) example: *Triphala Kwatha*, *Panchavalkala Kwath*.^[45]

Various *Kashaya* used for this purpose in accordance to *Doshas* or characteristics of discharge are as follows: in *Vata Dosha* involvement - *Triphala*, *Guduchi Kashaya* or *Mudgaparni Kashaya* can be used; in *Pitta Dosha* involvement - *Panchvalkala* or *Panchtikta Kashaya* can be used; in *Kapha Dosha* involvement - *Aragwadhadi* or *Nimbadi Kashaya* can be used; in thin, slimy discharge - *Triphala Kashaya* In thick, unctuous white discharge - *Dashmula* or *Triphala Kashaya*, and in offensive, mucopurulent discharge - *Chandana* or *Lodhradi Kashaya*.

3) Yoni Dhoopan

Yoni Dhoopan means vaginal fumigation.^[46] It is done by strewing *Dravyas* in *Dhoopana Yantra* on *Nirdhuma*

Agni after *Yoni Dhavana*. *Dhoopan* causes medicinal smoke which might act minutely on the mucosal lining of the introitus causing *Srotoshodhana*. *Dhoom* causes *Swedana* of *Yoni* which opens up minute or tiny pores thereby cleansing the *Yoni*. *Dhoopana Karma* reduces the sticky discharge from the vagina and keeps the vulva and introitus dry. *Dhoopana* is also considered as *Rakshoghna* (bacterial and antiseptic). Commonly used drugs in *Dhoopana karma* are *Guggulu*, *Dhatra Patra*, *Kushta*, *Agaru*, *Haridra*, *Shatapushpa*. Care has to be taken about the temperature and the distance of the patient from the *Dhoopana Patra* (container). Allergies to smoke if any is also to be considered.

4) Yoni Varti

Varti means vaginal suppository. A medicated suppository which can be kept in the vagina depending on the intensity of vaginitis.^[47] A vaginal suppository is a drug delivery system where it dissolves and gets absorbed in deeper tissues.^[48] It is made using *Shodhana Dravyas* like *Triphala*, *Ashoka Twak*, *Udumbar Lodhra*, *Jiraka*, *Kanjika*, *Kshara*, *Saindhava*, *Lavana*. These drugs are astringent, hygroscopic, and possess wound healing properties. The size or thickness of this *Varti* should be like that of the thumb or forefinger. Just like selection of drugs in *Prakshalana* (douche) various types of *Varti's* can be prepared and used. If the cervical erosion is along with the involvement of vaginitis and its congestion then this *Varti* can be used.

5) Yoni Purana

Yoni Purana means filling the *Yoni* or retaining *Dravyas* in the vaginal canal.^[49] The *Dravyas* may be in the form of oil, *Churna*, *Kalka*, *Veshvara*, *Pinda*, bolus etc. made into compact mass and inserted into the *Yoni*. The active principles are absorbed through vaginal or cervical epithelium thereby producing the necessary action. Oils and poured in vagina and sealed with tampon. Symptomatic relief in dyspareunia and dryness of vagina due to oestrogen deficiency is obtained by this procedure.

6) Yoni Lepana

Fresh paste or dry powder mixed with various oils are used as an ointment or *lepa* in *Yoni*, and is termed *Yoni*

Lepana. Acharya Sushruta mentions that just as water extinguishes fire instantly likewise *Lepana* cures *Vrana Shula*, cleanses wound or infection, reduces swelling or inflammation and quickens suppuration.^[50] The drug gets absorbed through glands and capillaries and vessels. *Pralepa*-thin paste is applied.^[51,52]

7) Kshara Karma

Ksharana means destruction of vitiated unhealthy tissues hence it is termed as *Kshara* the diseased tissue is scrapped out or removed by this *Kshara*.^[53] It is both *Soumya* (action) and *Tikshna* (*Prabhava*) and can be used even on *Marma Sthana*. *Kshara* is made from several drugs depending on its potency. The potency here refers to the Ph value hence it alleviates *Tridoshas*. It is white in colour and though *Soumya* in nature it performs *Dahana*, *Pachana*, *Darana* due to its *Agneya Guna*. *Kshara* is *Katurasa*, *Ushna Virya*, *Tikshna Guna*, *Vrana Sthotha Pachaka*, cures *Dushta Vrana*, suppured *Shuddha Vrana*, dries up an oozing *Vrana*, arrests *Rakta Srava*, *Lekhana* of firm muscular growth.^[54] *Kshara* when used externally works on the concept of coagulative necrosis causes coagulation of proteins, disintegration of blackish brown discharge, sloughing and re-epithelization. The selection of *Kshara* depends on the site where it has to be used hence on the cervical tissue the *Kshara* of lower Ph is required. *Kshara* can be prepared in 5-10 days depending on the climacteric changes. *Kshara* must be applied for 60-90 seconds on the cervix and later washed off carefully with diluted lemon juice or *Kanji*. After which a medicated tampon is kept which helps in the healing process. *Kshara Karma* can be done once in three days.

8) Agnikarma

The literal meaning of *Dahana* is to burn or cauterize.^[55] According to *Ayurveda*, *Agnikarma* is *Anushastra Karma*. The diseased tissue is treated by inflicting burns on the tissue surface directly by using different materials called *Dahana Upkarana*. Various *Dravyas* used in *Agnikarma* are *Jamboshtha*, *Needle*, *Ghee*, *Guda*, *Madhu Taila*, *Shalaka* prepared by gold, copper, iron, silver can be used.^[56] Nowadays electric thermal cautery machine has taken the place of *Shalaka*. The heat transferred acts by removing the obstruction in the *Srotas* and increases the blood circulation to the affected site thereby increasing the cellular activity and metabolism. However, it is postulated by some authors that afferent nerves stimulated by heat has an analgesic effect.

Ayurvedic medications

The success of each procedure depends on patient selection according to their *Prakruti*, and the extent of the symptoms. Chronic or recurrent cervical ectropion needs multiple procedures that can usually include combination of local and vaginal applications along with oral medications over a period to improve clinical outcomes. The various combinations of procedures and medications have a cumulative effect on treating cervical ectropion, especially if it is associated with severe symptoms. The medications mentioned in the above procedures contain medicinal herbs and minerals described in the *Ayurvedic* texts.

Table 1 is a summary of the medications used in different procedures and their evidence.

Table 1: Medications used in Ayurvedic procedures and their evidence-based effects specific to cervical ectropion

SN	Latin Name/Mineral name	Sanskrit Name	Procedure/s where drug is used	Drug formulation mentioned in Ayurvedic texts	Effects
1.	<i>Azadirachta indica</i>	<i>Neemb</i>	<i>Prakshalan Dhoopan</i>	<i>Nimbadiichurna</i>	Anti-inflammatory, inhibitor of abnormal cell growth ^[12]
2.	<i>Jasminum officinale</i>	<i>Jatipushpam</i>	<i>Prakshalan</i>	<i>Jatyadi Tail</i>	Anti-inflammatory ^[13]

3.	<i>Trichosanthes dioica</i>	<i>Patol</i>	<i>Prakshalan, Pichu, Lepa</i>	<i>Patoladi Kwatha</i>	Anti-inflammatory, Antinociceptive, immunomodulatory, wound healing ^[14]
4.	<i>Pongamia pinnata</i>	<i>Karanj</i>	<i>Dhoopana</i>	<i>Karanjadi Tail</i>	Anti-inflammatory, anti-ulcerative, antisecretory ^[15]
5.	<i>Glycyrrhiza glabra</i>	<i>Yashtimadhu</i>	<i>Lepa, Prakshalan, Dhoopana</i>	<i>Mulethi Churna</i>	Antibacterial, anti-ulcerative, antiviral, anticarcinogenic, antimutagenic, estrogenic, neuroprotective, immunomodulatory ^[16,17]
6.	<i>Saussurea lappa</i>	<i>Kushta</i>	<i>Lepa, Prakshalan, Pichu</i>	<i>Chyawanprash</i>	Anti-inflammatory, anticarcinogenic, anti-ulcerative, antimicrobial, antiviral ^[18]
7.	<i>Curcuma longa</i>	<i>Haridra</i>	<i>Lepa, Prakshalan Pichu,</i>	<i>Haridra Khand</i>	Anti-inflammatory, antimicrobial ^[19-21]
8.	<i>Berberis aristata</i>	<i>Daruharidra</i>	<i>Lepa, Prakshalan Pichu,</i>	<i>Chyawanprash</i>	Antimicrobial, antioxidant, anticarcinogenic ^[22-24]
9.	<i>Picrorhiza kurroa</i>	<i>Kutki</i>	<i>Pichu, Prakshalan, Dhoopana</i>	<i>Arogyavardhini Vati</i>	Anticarcinogenic, antioxidant, antimicrobial ^[25-27]
10.	<i>Rubia cordifolia</i>	<i>Manjistha</i>	<i>Prakshalan, Lapan, Pichu</i>	<i>Mahamanjishtadi Kwatha</i>	Analgesic, anti-inflammatory, antimicrobial, antithrombotic ^[27,28]
11.	<i>Symplocos racemosa</i>	<i>Lodhra</i>	<i>Post Angnikarma</i>	<i>Lodhrasav</i>	Anti-inflammatory, antimicrobial, antiproliferative ^[29-31]
12.	<i>Terminalia chebula</i>	<i>Haritaki</i>	<i>Lepan, Prakshalan, Pichu, Post Ksharakarma</i>	<i>Triphala Churna, Shiva Gutika</i>	Antioxidant, antimicrobial, antiviral, anti-inflammatory, cytoprotective, immunomodulatory, inhibits bacterial triggers, ^[32-34]
13.	<i>Nymphaea stellata</i>	<i>Neel Kamal</i>	<i>Pichu, Lepa</i>	<i>Arvindasav</i>	Antimicrobial, antioxidant, ^[35,36]
14.	<i>Copper sulphate</i>	<i>Tutha</i>	<i>Agnikarma, Pichu</i>	<i>Jatyadi Tail</i>	Wound-healing (local effect), chelating effect (locally) ^[37,38]
15.	<i>Hemidesmus indicus</i>	<i>Sariva</i>	<i>Prakshalan, Lepa, Post Agnikarma</i>	<i>Sarivadyasav</i>	Antimicrobial, anti-inflammatory, antioxidant, anti-boifilm ^[39,40]

16.	<i>Prunus cerasoides</i>	<i>Padhmakhya</i>	<i>Lepa, Pichu</i>	<i>Kalyanak Ghrita</i>	Estrogenic, antibacterial, antioxidant ^[41,42]
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DISCUSSION

Table 1 highlights the different groups of medications and the current published literature on their effects. Although the exact mode of action of various formulations mentioned in *Ayurvedic* texts needs to be analysed in a separate study, the mode of action of different herbs and minerals mentioned in Table 1 can give a brief idea of their effect on cervical ectropion. As shown in the Table 1, Most of the drugs are anti-inflammatory, antimicrobial, and antioxidant, while *Hemedesmus indicus* has anti-biofilm effect. These properties together can reduce inflammation and infection associated with cervicitis, an important symptom of cervical ectropion. *Rubia cordifolia* has shown antithrombin effect and is mainly used to reduce symptoms such as post-coital bleeding in patients suffering from cervical ectropion. Several of the herbs described in Table 1 that have shown anticarcinogenic effect or inhibit abnormal cell growth, making them potentially useful to prevent further progression of disease and future dysplasia.

Vaginal wall being a mucosal layer has fast absorption. The vaginal wall is very well suited for the absorption of drugs since it contains a vast network of blood vessels. Moreover, the anatomically backward position of the vagina may help itself retain the drug thereby holding it in situ for a longer duration. The drugs used for *Sthanika Chikitsa* acts by exerting its antiseptic, antimicrobial, antifungal, anti-inflammatory and analgesic actions. Hence proper *Sthanika Chikitsa* with proper drugs gives potentially good results in gynecological disorders.

CONCLUSION

The review highlights that there are several different treatment options available in *Ayurveda* and further clinical trials should be conducted to better understand their effects on different types of patients. Alternative therapies can address chronic ectropion and reduce associated symptoms. *Ayurvedic* is focused on a holistic

approach to treatment by alleviating the root causes, rather than the disease. *Praktiti* and *Dosha* assessment is an ancient holistic approach that should be an important step towards personalised and tailored medicine that has potential to treat the root causes of chronic conditions.

REFERENCES

- Aggarwal, P. & Ben Amor, A. in *StatPearls* (StatPearls Publishing, 2022).
- Swaminathan, J. et al. Prevalence of Cervical Dysplasia and Cervicitis in South India Comparing Standard Cytology and Mobile Colposcopy. *Pan 2*, 110-117 (2019).
- Monroy, O. L. et al. Prevalence of human papillomavirus genotypes, and mucosal IgA anti-viral responses in women with cervical ectopy. *J Clin Virol* 47, 43-48, doi:10.1016/j.jcv.2009.10.008 (2010).
- Guptha, S. C. Evaluation of cervical erosion in symptomatic women. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology* 9, 2035+ (2020).
- Iqbal, U. & Wills, C. in *StatPearls* (StatPearls Publishing, 2022).
- Hillis, S. D. et al. Delayed care of pelvic inflammatory disease as a risk factor for impaired fertility. *Am J Obstet Gynecol* 168, 1503-1509, doi:10.1016/s0002-9378(11)90790-x (1993).
- Venkatesh, K. K. & Cu-Uvin, S. Assessing the relationship between cervical ectopy and HIV susceptibility: implications for HIV prevention in women. *Am J Reprod Immunol* 69 Suppl 1, 68-73, doi:10.1111/aji.12029 (2013).
- Zhu, H., Shen, Z., Luo, H., Zhang, W. & Zhu, X. Chlamydia Trachomatis Infection-Associated Risk of Cervical Cancer: A Meta-Analysis. *Medicine (Baltimore)* 95, e3077, doi:10.1097/md.0000000000003077 (2016).
- Mazur, Y. & Pyrohova, V. Analysis of complicated cervical ectopy clinical course and recurrence. *EUREKA: Health Sciences*, 17-26 (2018).
- Godha, K., Tucker, K. M., Biehl, C., Archer, D. F. & Mirkin, S. Human vaginal pH and microbiota: an update. *Gynecological Endocrinology* 34, 451-455, doi:10.1080/09513590.2017.1407753 (2018).
- García-Velasco, J. A., Menabrito, M. & Catalán, I. B. What fertility specialists should know about the vaginal microbiome: a review. *Reproductive BioMedicine Online* 35, 103-112, doi:https://doi.org/10.1016/j.rbmo.2017.04.005 (2017).
- Islas, J. F. et al. An overview of Neem (*Azadirachta indica*) and its potential impact on health. *Journal of Functional Foods* 74,

- 104171, doi:<https://doi.org/10.1016/j.jff.2020.104171> (2020).
13. Lu, Y. et al. Four new sesquiterpenoids with anti-inflammatory activity from the stems of *Jasminum officinale*. *Fitoterapia* 135, 22-26, doi:<https://doi.org/10.1016/j.fitote.2019.03.029> (2019).
 14. Khandaker, M., Akter, S. & Imam, M. Z. *Trichosanthes dioica* Roxb.: A vegetable with diverse pharmacological properties. *Food Science and Human Wellness* 7, 34-48, doi:<https://doi.org/10.1016/j.fshw.2017.12.005> (2018).
 15. Prakash, P., Prasad, K., Nitin, M. & Sreenivasa, R. Anti-ulcer and anti-secretory properties of the *Pongamia pinnata* root extract with relation to antioxidant studies. *Research Journal of Pharmaceutical Biological and Chemical Sciences* 1, 235-244 (2010).
 16. Pastorino, G., Cornara, L., Soares, S., Rodrigues, F. & Oliveira, M. B. P. P. Liquorice (*Glycyrrhiza glabra*): A phytochemical and pharmacological review. *Phytotherapy Research* 32, 2323-2339, doi:<https://doi.org/10.1002/ptr.6178> (2018).
 17. Gupta, V. K. et al. Antimicrobial potential of *Glycyrrhiza glabra* roots. *Journal of Ethnopharmacology* 116, 377-380, doi:<https://doi.org/10.1016/j.jep.2007.11.037> (2008).
 18. Kamil, M. in *Herbal Medicine in India: Indigenous Knowledge, Practice, Innovation and its Value* (eds Saikat Sen & Raja Chakraborty) 215-221 (Springer Singapore, 2020).
 19. Joshi, J. V. et al. Integrated non-invasive management of cervical low-grade squamous intraepithelial lesions observed in papanicolaou smears with antimicrobials followed by oral curcuma longa extract. *Asian Pacific Journal of Cancer Biology* 5, 89-97 (2020).
 20. Zeng, L., Yu, G., Hao, W., Yang, K. & Chen, H. The efficacy and safety of *Curcuma longa* extract and curcumin supplements on osteoarthritis: a systematic review and meta-analysis. *Bioscience Reports* 41, doi:[10.1042/bsr20210817](https://doi.org/10.1042/bsr20210817) (2021).
 21. Paradkar, P. H. et al. In vitro and in vivo evaluation of a standardized *Curcuma longa* Linn formulation in cervical cancer. *Journal of Ayurveda and Integrative Medicine* 12, 616-622, doi:<https://doi.org/10.1016/j.jaim.2021.06.002> (2021).
 22. Thakur, M. et al. Phytochemicals, antimicrobial and antioxidant potential of methanolic extract of *berberis aristata* roots. *Research Journal of Pharmacy and Technology* 13, 5763-5767 (2020).
 23. Sood, H., Kumar, Y., Gupta, V. K. & Arora, D. S. Scientific validation of the antimicrobial and antiproliferative potential of *Berberis aristata* DC root bark, its phytoconstituents and their biosafety. *AMB Express* 9, 1-16 (2019).
 24. Rokade, M., Vichare, V., Neve, T., Parande, B. & Dhole, S. A review on anticancer potential of *Berberis aristata* and berberine with focus on quantitative methods. *Journal of Preventive, Diagnostic and Treatment Strategies in Medicine* 1, 67 (2022).
 25. Soni, D. & Grover, A. "Picrosides" from *Picrorhiza kurroa* as potential anti-carcinogenic agents. *Biomedicine & Pharmacotherapy* 109, 1680-1687 (2019).
 26. Thakur, S. et al. Evaluating Peptides of *Picrorhiza kurroa* and Their Inhibitory Potential against ACE, DPP-IV, and Oxidative Stress. *Journal of Proteome Research* 20, 3798-3813 (2021).
 27. Chandra, H., Kumari, P., Prasad, R., Gupta, S. C. & Yadav, S. Antioxidant and antimicrobial activity displayed by a fungal endophyte *Alternaria alternata* isolated from *Picrorhiza kurroa* from Garhwal Himalayas, India. *Biocatalysis and Agricultural Biotechnology* 33, 101955 (2021).
 28. Chen, Y. et al. Anti-thrombotic and pro-angiogenic effects of *Rubia cordifolia* extract in zebrafish. *Journal of ethnopharmacology* 219, 152-160 (2018).
 29. Sood, H., Kumar, Y., Gupta, V. K. & Arora, D. S. Bioprospecting the antimicrobial, antibiofilm and antiproliferative activity of *Symplocos racemosa* Roxb. Bark phytoconstituents along with their biosafety evaluation and detection of antimicrobial components by GC-MS. *BMC Pharmacology and Toxicology* 21, 1-20 (2020).
 30. Janani, K., V Geetha, R. & Rajeshkumar, S. In vitro Evaluation of Anti-Inflammatory Activity of *Symplocos racemosa* Using Protein Denaturation Assay. (2021).
 31. Kar, D., Panda, M. K. & Pattnaik, P. K. Analysis of Antimicrobial activities of different parts of *Symplocos racemosa*: an Endangered medicinal plant of Eastern Ghats of India. *Iranian Journal of Science and Technology, Transactions A: Science* 42, 1077-1085 (2018).
 32. Jeong, H. K., Lee, D., Kim, H. P. & Baek, S.-H. Structure analysis and antioxidant activities of an amylopectin-type polysaccharide isolated from dried fruits of *Terminalia chebula*. *Carbohydrate Polymers* 211, 100-108, doi:<https://doi.org/10.1016/j.carbpol.2019.01.097> (2019).
 33. Mandeville, A. & Cock, I. E. *Terminalia chebula* Retz. fruit extracts inhibit bacterial triggers of some autoimmune diseases and potentiate the activity of tetracycline. *Indian Journal of Microbiology* 58, 496-506 (2018).
 34. Nigam, M. et al. Fruits of *Terminalia chebula* Retz.: A review on traditional uses, bioactive chemical constituents and pharmacological activities. *Phytotherapy Research* 34, 2518-2533, doi:<https://doi.org/10.1002/ptr.6702> (2020).
 35. Supaphon, P., Keawpiboon, C., Preedanon, S., Phongpaichit, S. & Rukachaisirikul, V. Isolation and antimicrobial activities of fungi derived from *Nymphaea lotus* and *Nymphaea stellata*. *Mycoscience* 59, 415-423 (2018).
 36. Singh, M. & Jain, A. P. Qualitative and quantitative determination of secondary metabolites and antioxidant potential of *Nymphaea nouchali* flowers. *Journal of Drug Delivery and Therapeutics* 8, 111-115 (2018).

37. Jaganathan, S. K. & Mani, M. P. Electrospun polyurethane nanofibrous composite impregnated with metallic copper for wound-healing application. *3 Biotech* 8, 1-12 (2018).
38. Yadav, N., Parveen, S. & Banerjee, M. Potential of nano-phytochemicals in cervical cancer therapy. *Clinica Chimica Acta* 505, 60-72 (2020).
39. Kannappan, A., Santhakumari, S., Srinivasan, R., Pandian, S. K. & Ravi, A. V. Hemidesmus indicus, a traditional medicinal plant, targets the adherence of multidrug-resistant pathogens to form biofilms. *Biocatalysis and Agricultural Biotechnology* 21, 101338 (2019).
40. Das, M. K., Saxena, G. & Kumar, N. To perform phytochemical screening and study the antioxidant potential of isolated compound from Hemidesmus indicus. *Journal of Drug Delivery and Therapeutics* 9, 188-191 (2019).
41. Kim, S. D. et al. Estrogenic properties of Prunus cerasoides extract and its constituents in MCF-7 cell and evaluation in estrogen-deprived rodent models. *Phytotherapy Research* 34, 1347-1357 (2020).
42. Joseph, N., Anjum, N. & Tripathi, Y. Prunus cerasoides D. Don: a review on its ethnomedicinal uses, phytochemistry and pharmacology. *Int J Pharm Sci Rev Res* 48, 15 (2018).
43. Shirke J. Ayurvediya Streeroga vighyan, Tathagat Prakashan, Pune 2003 1st Edition, Pg.No. 164.
44. Vaidya, LS. Ashtang Samgraha of Vagbhata, Nagpur Ayurved Bhavan Limited 1981, Vol II, 2nd edition Section II Uttartantra, Chapter 39, Putrakamiya Adhyaya Shloka 5. Pg. No. 965
45. Shirke J. Ayurvediya Streeroga vighyan, Tathagat Prakashan, Pune 2003 1st Edition, Pg.No. 159.
46. Kapoorchand, H. Comprehensive treatise on streeroga Gynaecology, Chokhamba Vishwabharti, 1st Edition 2018, Pg. No. 684.
47. Kapoorchand, H. Comprehensive treatise on streeroga Gynaecology, Chokhamba Vishwabharti, 1st Edition 2018, Pg. No. 685.
48. Asokan V. et.al, Clinical Study on Efficacy of Triphaladi Yoni Varti In Slaishmiki Yoni Vyapat (Vulvo Vaginal Candidiasis), International Journal of Recent Advances in Multidisciplinary Research, 2017;4(7), ISSN: 2350- 0743.
49. Kapoorchand, H. Comprehensive treatise on streeroga Gynaecology, Chokhamba Vishwabharti, 1st Edition 2018, Pg. No. 686.
50. Sharma, A. Susruta Samhita of Maharsi Susruta volume 2, Chaukhamba surbharati Prakashan, Varanasi Edition 2008 adhyaya 1 Aaturupakramaniya adhyay.
51. Asokan, V, Manjula K. Comparative Clinical Study on Efficacy of Lomashatana Lepa in Facial Hirsutism; International Ayurvedic Medical Journal, 2017; 1(2), Pg.160-165. ISSN 2320-5091
52. Asokan V. et.al, Clinical Study on Harataladi Lepa for Lomashatana in Hirsutism, Punarnava Ayurved Journal, 2014, 2(3); ISSN 2348-1846.
53. Sharma, P. Sushrut Samhita, Sutra Sthana Adhyay 11, shloka 4, page number 45.
54. Tyagi, V. Text book of Shalya Tantra, Volume one, Chapter 9, page number 224.
55. Tyagi, V. Text book of Shalya Tantra, Volume one Chapter 10, page number 243.
56. Sharma, P. Sushrut Samhita, Sutra Sthana Adhyay 12, shloka 4, page number 51.
57. Chatterjee B, Pancholi J. Prakriti-based medicine: A step towards personalized medicine. Ayu. 2011 Apr;32(2):141-6. doi: 10.4103/0974-8520.92539.

How to cite this article: Mahi Mishra, Tanmay Bagade. Review of management of Cervical Ectropion using Traditional Ayurvedic Interventions. *J Ayurveda Integr Med Sci* 2023;03:55-62. <http://dx.doi.org/10.21760/jaims.8.3.10>

Source of Support: Nil, **Conflict of Interest:** None declared.
