



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

# Sthanika Chikitsa in the geriatric women suffering from Dyspareunia – A Case Study

Shravani P.<sup>1</sup>, Savita S. Patil<sup>2</sup>

<sup>1</sup>First Year Post Graduate Scholar, Department of Prasuti Tantra & Stree Roga, Sri Sri College of Ayurvedic Science and Research Institution, Bengaluru, Karnataka, India.

<sup>2</sup>Professor, Head of the Department, Department of Prasuti Tantra & Stree Roga, Sri Sri College of Ayurvedic Science and Research Institution, Bengaluru, Karnataka, India.

## ABSTRACT

The etiological factor of *Yoni Vyapat* are mainly due to the vitiation of *Doshas*, among which *Paripluta Yoni Vyapat* is due to the vitiation of *Vata Dosha*, which can be correlated to Dyspareunia. Dyspareunia means the coital act is difficult and or painful. There is different etiology depending upon the site of pain, out of which Vagina Atrophy prevalence of 67.5% associated with vaginal dryness – 62%, itching 40%. For the better and fruitful result *Sthanika Chikitsa* (local therapies) has been enumerated as an important part of *Yoni Vyapat Chikitsa*, which includes *Yoni Parisheka* (cleansing of vagina), *Yoni Abhyanga* (massaging of vagina with medicated oil), *Yoni Pralepa* (semisolid drug applied on the vaginal wall), *Yoni Pichudharana* (medicated soaked tampon place in vagina). **Case Study:** A female aged 49 years, approached OPD complaining of painful coitus along with dryness and itching of vagina, which increased after her menopause. The condition was treated with *Sthanika Chikitsa* followed by internal medications.

**Key words:** *Paripluta, Dyspareunia, Vaginal Atrophy, Sthanika Chikitsa, Ayurveda, Case Report.*

## INTRODUCTION

Dyspareunia means that the coital act is difficult and or painful. It is the most common sexual dysfunction.<sup>[1]</sup> Based on the clinical symptom of excessive external and internal pain during intercourse, this condition can be co-related to *Paripluta Yoni Vyapat*.<sup>[2]</sup> As *Yoni* is considered as the *Sthana* of *Apana Vayu*, *Sthanika Chikitsa* helps in relieving the symptoms.

*Acharya Sushruta, Acharya Madhava* and *Acharya Bhava Prakasha* has explained *Paripluta Yoni Vyapat* under *Vataja Yoni Vyapat*. The cardinal feature includes *Graamy-Dharma Ruja* (Pain during intercourse) & *Bahyabhyantara Vata Vedana* (excessive external and internal pain).<sup>[2]</sup> Similarly in the contemporary science, etiological causes of Dyspareunia depend upon the site of pain.<sup>[1]</sup>

### Address for correspondence:

Dr. Shravani P.

First Year Post Graduate Scholar, Department of Prasuti Tantra & Stree Roga, Sri Sri College of Ayurvedic Science and Research Institution, Bengaluru, Karnataka, India.

E-mail: shravani.rao96@gmail.com

Submission Date: 05/01/2022 Accepted Date: 12/02/2023

### Access this article online

Quick Response Code



Website: [www.jaims.in](http://www.jaims.in)

DOI: 10.21760/jaims.8.3.27

Superficial	Vaginal	Deep
Narrow introits	Vaginitis	Endometriosis
Tough hymen	Vaginal septum	Chronic cervicitis
Bartholin's gland cysts	Tender scar	Chronic PID
Tender perineal scar	Secondary vaginal atresia	Retroverted uterus
Vulvar infection	Tumor	Prolapsed ovary in POD
Urethral pathology	<b>Vaginal Atrophy (Menopause)</b>	

Menopause is a natural transition from reproductive phase to non-reproductive phase in a women's life. It occurs with stoppage of menstruation (amenorrhea) for twelve consecutive months. It sets the stage for aging and accelerates the process of non-communicable diseases. Worldwide the age of menopause is in between 45 and 55 years. Due to increased life expectancy, especially in affluent society, about one-third of life span will be spent during the period of estrogen deficiency stage with long term symptomatic and metabolic complications.<sup>[3]</sup>

### Management

Treatment depends upon the cause. In the Infective lesions it has to be treated with antibiotics, in Tender scar it has to be excised, similarly in Vaginal Atrophy in post-menopausal condition HRT is extremely effective option. Side effect of HRT<sup>[4]</sup>

- Estrogen related: Vaginal bleeding, Increased cervical mucus, Vomiting, Fluid retention, Weight gain.
- Progesterone related: Symptoms like PMS, Anxiety, Irritability, Depression, Sleep disturbances.
- Others: Itching, Headache etc.

In our Classics, there is no direct reference for the management of *Paripluta Yoni Vyapat*, but as it is explained under *Vataja Yoni Vyapat*, the same line of management can be adopted in treating the condition<sup>[5]</sup>

वातार्तायाः पिचुं दद्याद्योनौ च प्रणयेत्ततः। वातार्तानां च योनीनां  
सेकाभ्यङ्गपिचुक्रियाः।। उष्णाःस्निग्धाः प्रकर्तव्यास्तैलानि  
स्नेहनानि च। हिंसाकल्कं तु वातार्ता कोष्णमभ्यज्य धारये।।  
(C.Chi. 30/61 -62)

Here, while explaining the *Sutra* they have given importance of *Sthanika Chikitsa* such as *Picchu*, *Seka*, *Abhyanga*, *Kalka Dharana*.

### *Sthanika Chikitsa*<sup>[6]</sup>

सर्वतः सुविशुद्धायाः शेषं कर्म विधीयते।  
बस्त्यभ्यङ्गपरिषेकप्रलेपपिचुधारणम्॥ (A.S.U 39/53)

*Sthanika Chikitsa* has been enumerated as an important part of *Yoni Vyapat Chikitsa*, such as *Basti* (inserting the medicated oil inside the uterus), *Parisheka* (cleansing of vagina), *Abhyanga* (massaging of vagina with medicated oil), *Pralepa* (semisolid drug applied on the vaginal wall), *Picchudharana* (medicated soaked tampon placed in vagina).

### Benefits of *Sthanika Chikitsa*<sup>[7]</sup>

- Avoidance of hepatic first pass effect, thus prevention of hepatic toxicity.
- Easy to administer and possible self-insertion and removal.
- Fast acting on the local region and on reproductive system.
- Protection of drug against gastrointestinal enzymes.

### Probable Mode of Action<sup>[7]</sup>

- The post Fornix has rich blood supply so actively absorption of drug.
- In oral rout some medicine's active ingredient metabolized in liver and degrades as a result the Effect of drug reduced.
- The presence of dense network of blood vessels has made the vagina an excellent route of drug delivery for both systemic and local effects.
- Blood leaving the vagina enters the peripheral circulation via a rich venous plexus, which empties primarily into the internal iliac veins.
- Vaginal permeability is much greater to lipophilic drug than to hydrophilic drug. However, it is generally accepted that low molecular weight lipophilic drugs are likely to be absorbed more than large molecular weight lipophilic or hydrophilic drugs.

## CASE REPORT

### Patient details

A Female aged 49years, from Chitradurga. Occupation: House-wife, Religion: Hindu, Socio-economic status: Middle class, Marital status: Married.

**Case history**

Complaints of painful coitus along with dryness and itching of vagina since 3-4 years, which increased since 2 years after attaining menopause. Also, complaints of blackish flakes on scratching since 3 months.

**Menstrual history**

Menarche: 15years.

Menstrual history: 4-5days.

(Before menopause) 26-28days (Regular)

Menopause - 47years (Attained naturally).

**Obstetric history**

Married life: 27 years - P1L2A1DO

L2- LSCS - Twin pregnancy (1998),

A1 - MTP (7Week of pregnancy) (2005)

Coital history: Once in 3-4 months, Dyspareunia - Severe Pain (++)

**Examination****General Examination**

Temp - 97.2°F

Pulse - 86bpm

BP - 130/80 mmHg

Weight - 76kg.

**Systemic Examination**

CNS - Well oriented to time, place & person. CVS- S1, S2 heard, No murmurs.

RS - NVBS+, No added sound.

**Local Examination**

Breast Examination: B/L Symmetry, No tenderness, No palpable mass, No discharge from the nipple.

P/A Examination: Soft, non-tender. No organomegaly, Bowel sound - present.

P/S Examination: Cervix - Healthy, Cystocele - present.

P/V Examination: Uterus anteverted Normal size.

**Investigations**

Hb -13.1gm %

Platelets - 2.8 lakhs /cumm

RBS -108 mg/dl.

PAP Smear - Negative for intra epithelial lesion or malignancy.

Urine R & M - Pus cell- 4-5, Epi cells- 5-6.

USG - Nothing abnormal detected.

**Treatment**

**Sthanika Chikitsa:** For 14 Days

*Yoni Abhyanga* with *Ksheerabala taila*.

*Yoni Picchu* with *Guduchyadi taila*.

**Internal Medication:** For 1 month

1. Aloes Compound 2-0-2 (A/F)
2. *Dhanwantaram Vati* 2-0-2 (A/F)
3. *Dashamoolarista* 4tsp-0-4 tsp with equal water (A/F)
4. *Shatavari Kalpa* 0-0-1 tsp (Bed time)
5. *Dhatupostik Churna* 1tsp-0-0 with a glass of milk (Empty stomach)

**Follow-Up**

Previous c/o Vaginal dryness and flakes on itching reduced - 60%, Dyspareunia reduced - 50%

**DISCUSSION**

As *Yoni* is *Ashrayi* for *Apana Vayu*, and the *Paripluta* is a *Vataja Yoni Vyapat*, tackling *Vayu* is the considered as first line of treatment and thus *Sthanika Chikitsa* plays a very important role. *Pichu* provide muscle strength, Stretchability & tissues nourishment. *Yoni Abhyanga* helps in strengthen the muscles of vagina & providing nourishment to the local region.

***Ksheera Bala Taila:* (A.H.C. 22/45-46)**

बला-कषाय-कल्काभ्यां तैलं क्षीर-समं पचेत् ।

सहस्र-शत-पाकं तद् वातासृग्-वात-रोग-नुत्

रसायनं मुख्य-तमम् इन्द्रियाणां प्रसादनम् ।

जीवनं बृंहणं स्वर्यं शुक्रासृग्-दोष-नाशनम् ॥

**Guduchyadi Taila: (B.P.N Guducyadi Varga)**

गुडूची कटुका तिका स्वादुपाका रसायनी ।

संग्राहिणी कषायोष्णा लघ्वी बल्याग्निदीपनी ।

दोषत्रयामतृडाहमेहकासांश्च पाण्डुताम् ॥

कामलाकुष्ठवातास्रज्वरकृमिवमीन्हरेत् ।

प्रमेहश्वासकार्शःकृच्छ्रहृद्रोगवातनुत्

### CONCLUSION

Our *Acharyas* were very clear about the mode of action of *Sthanika Chikitsa*, and has explained different types for the management of maximum reproductive disorders, with a specific purpose i.e., strengthening, nourishing, and regenerate new tissues.

### REFERENCES

1. Dutta D C. Textbook of Gynecology. Edition 7, New Delhi: Jaypee Brothers; 2019. p.470.
2. Usha V N K. Streeroga Vignana. Delhi: Chaukambha Sanskrit pratisthana; 2016. p.201.
3. Dutta D C. Textbook of Gynecology. Edition 7, New Delhi: Jaypee Brothers; 2019.p.46.
4. <https://wjpr.s3.ap-south1.amazonaws.com/article/Issue/1456747514.pdf>
5. Usha V N K. Streeroga Vignana. Delhi: Chaukambha Sanskrit pratisthana; 2016.p.186.
6. Usha V N K. Streeroga Vignana. Delhi: Chaukambha Sanskrit pratisthana; 2016.p.585.
7. <https://ayushdhara.in/index.php/ayushdhara/article/view/576/529/>

**How to cite this article:** Shravani P., Savita S. Patil. *Sthanika Chikitsa in the geriatric women suffering from Dyspareunia – A Case Study*. J Ayurveda Integr Med Sci 2023;03:145-148. <http://dx.doi.org/10.21760/jaims.8.3.27>

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

\*\*\*\*\*