Comparative study between *Patrangasava* and *Pradararipu Rasa* in the treatment of Leucorrhoea

Animesh Maiti
HOD & Professor, Department of Prasuti Tantra & Stri Roga, Belley Sankarpur Rajib Gandhi Memorial Ayurvedic College and Hospital, Belley Sankarpur, Kushdanga, West Bengal, India.

**ABSTRACT**

Leucorrhoea is a common and significant issue that affects women, particularly during their reproductive years, often experiencing it at least once. It manifests as a discharge of white fluid from the vagina. In this study, we evaluated the comparative efficacy of *Patrangasava* and *Pradararipu Rasa* in treating Leucorrhoea. Sixty patients with clinical symptoms including white vaginal discharge, vulva itching, vaginal burning pain, low back pain, and general weakness were selected and divided into two equal groups: Group A and Group B. Group A received treatment with *Patrangasava* for 3 months, while Group B received treatment with *Pradararipu Rasa* for the same duration. This prospective, comparative, observational study aimed to assess the effectiveness of these treatments in both groups. The study observed a significant reduction in mean scores of clinical symptoms, particularly white vaginal discharge, in both groups. Overall compliance with the treatment was good in both groups, with a highly significant p-value of < 0.001.

**Key words:** Leucorrhoea, Patrangasava, Pradararipu Rasa.

**INTRODUCTION**

*Leucorrhoea* is a common and major problem in each woman who suffers at least one time specially in her reproductive age. Leucorrhoea is a combination of 2 words i.e., Leuco & Rhhoea. Leuco means White and Rhhoea means vaginal discharge. So, leucorrhoea means excessive white vaginal discharge. It is also known as Leukorrhoea or lukoria or likoria or leu.kor.rhea. In this study Gr-A was treated with *Patrangasava* and Gr-B was treated with *Pradararipu Rasa*.

**AIM AND OBJECTIVES**

To evaluate the role of both drugs that were *Patrangasava* and *Pradararipu Rasa* in the treatment of Leucorrhoea.

**MATERIALS AND METHODS**

The study was conducted in the department of Prasuti Tantra and Stri Roga, B.S.R.G.M.A.C & Hospital, West Bengal, in which 60 patients were selected and were divided in two equal groups. 30 patients were taken in Group-A and other 30 Patients were taken in Group-B.

**Study design**

Prospective and comparative and observational.

**Selection criteria**

60 female patients were selected with some parameters that were white vaginal discharge, itching of vulva, burning pain in vagina, low back pain and general weakness of women specially during reproductive age.

**Exclusion criteria**

Patients who were suffering from Cervical Erosion, Genital Prolapse, Pregnancy, CA cervix, Uterine...
Tumour, positive VDRL, carcinoma, positive pap smear, presence of other infective organism were excluded from the study.

**Selection and preparation of the drug**

A compound medicine ‘Patrangasava’ has been mentioned in *Bhaisajyaratnavali Pradara Roga Chikitsa Prakaranam Adhyaya*, was selected for the study in Group-A. The ingredients of the *Patrangasava*[^3] are -

1. *Patranga* (vakam) - 46 gm
2. *Khadirakastha* - 46 gm
3. Bark of *Adusa* plant - 46 gm
4. Flowers of silk cotton tree - 46 gm
5. Root of *Bala* - 46 gm
6. Purified *Bhallatak* - 46 gm
7. White and black varieties *Sariva* - 46 gm
8. Buds of *Japakusuma* plants - 46 gm
9. Stone of mango - 46 gm
10. *Daruharidra* - 46 gm
11. *Kiratatikta* - 46 gm
12. Opium fruits - 46 gm
13. Cumin seed - 46 gm
14. *Lauha Bhasma* - 46 gm
15. *Rasanjana* - 46 gm
16. Pulp of unripe *Bilwa* fruits - 46 gm
17. *Bhringaraj* - 46 gm
18. Cinnamon bark - 46 gm
19. Saffron - 46
20. Clove - 46 gm
21. *Kalka* of raisin fruit - 950 gm
22. Powder of *Dhataki* flowers - 750 gm
23. Water - 25 litres
24. Raw sugar - 4670 gm
25. Honey - 2340 gm

Dissolve all of these drugs into water and add sugar & honey. Put the preparation into an earthen pot coated inside with ghee and fomented. Keep the pot beneath the earth for one month. Remove it thereafter and strain the drug into glass containers.

Another compound medicine *Pradararipu Rasa* has been mentioned in *Bhaisajyaratnavali Pradara Roga Chikitsa Prakaranam Adhyaya* was selected for the study in Group-B. The ingredients of the *Pradararipu Rasa*[^4] are -

1. Purified mercury - 1 part
2. Purified sulphur - 1 part
3. *Sisak Bhasma* - 1 part
4. *Rasanjana* - 3 parts
5. *Lodhra* - 6 parts
6. Decoction or juice of *Adusa*

First of all, prepare *Kajjali* out of the mercury and sulphur. Mix rest of the drugs into the *Kajjali* and process the preparation through a hand mortar along with the decoction or juice of *Adusa* for one day. Prepare pill measuring 250 mg each. At the end the pills are stored in an air tight container.

**Study procedure**

Total patients were equally divided in to two groups i.e. Group-A & Group- B.

**Group-A** - This group was treated with ‘*Patrangasava*’ - 15 ml with equal quantity of warm water twice daily for 3 months.

**Group-B** - This group was treated with ‘*Pradararipu Rasa*’ - 1 pill (250 mg) with honey thrice daily for 3 months.

All groups were similar with regard to the demographic data and baseline parameters. Total score was based on white vaginal discharge, itching of vulva, burning pain in vagina, low back pain and general weakness, in the same parameters.

**Observations and Results**

Comparative study of the effectiveness between the Group-A and Group-B in same parameters with
laboratory investigation before and after treatment (Table no. 1 and 2).

Table 1: Result of the treatment in Group - A

<table>
<thead>
<tr>
<th>Sign &amp; symptoms</th>
<th>Mean ± S.D</th>
<th>df</th>
<th>‘t’</th>
<th>P value</th>
<th>Effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>White vaginal discharge</td>
<td>2.35 ± 0.5</td>
<td>24</td>
<td>9.35</td>
<td>&lt;0.001</td>
<td>87.56</td>
</tr>
<tr>
<td>Itching of vulva</td>
<td>2.1 ± 0.7</td>
<td>24</td>
<td>11.85</td>
<td>&lt;0.001</td>
<td>75.00</td>
</tr>
<tr>
<td>Burning pain in vagina</td>
<td>1.10 ± 0.3</td>
<td>14</td>
<td>2.88</td>
<td>&lt;0.05</td>
<td>57.06</td>
</tr>
<tr>
<td>Low back pain</td>
<td>1.33 ± 0.5</td>
<td>15</td>
<td>10.06</td>
<td>&lt;0.001</td>
<td>62.62</td>
</tr>
<tr>
<td>General weakness</td>
<td>2.65 ± 0.3</td>
<td>14</td>
<td>6.76</td>
<td>&lt;0.001</td>
<td>65.00</td>
</tr>
</tbody>
</table>

Table 2: Result of the treatment in Group - B

<table>
<thead>
<tr>
<th>Sign &amp; symptoms</th>
<th>Mean ± S.D</th>
<th>df</th>
<th>‘t’</th>
<th>P value</th>
<th>Effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>White vaginal discharge</td>
<td>2.23 ± 0.5</td>
<td>24</td>
<td>9.12</td>
<td>&lt;0.001</td>
<td>85.95</td>
</tr>
<tr>
<td>Itching of vulva</td>
<td>2.2 ± 0.5</td>
<td>24</td>
<td>11.80</td>
<td>&lt;0.001</td>
<td>77.15</td>
</tr>
<tr>
<td>Burning pain in vagina</td>
<td>1.19 ± 0.1</td>
<td>14</td>
<td>5.89</td>
<td>&lt;0.001</td>
<td>68.59</td>
</tr>
<tr>
<td>Low back pain</td>
<td>1.33 ± 0.4</td>
<td>15</td>
<td>10.01</td>
<td>&lt;0.001</td>
<td>63.15</td>
</tr>
<tr>
<td>General weakness</td>
<td>2.55 ± 0.35</td>
<td>14</td>
<td>10.60</td>
<td>&lt;0.001</td>
<td>64.00</td>
</tr>
</tbody>
</table>

From the statistical point of view it was observed that out of 30 patients in Group-A, 20 (66.66 %) patients were cured, 6 (19.8 %) patients were maximum improved, 3 (9.9 %) patients were moderately improved, 1 (3.3 %) patients were mildly improved and out of 30 patients in Group-B, 19 (62.7 %) patients were cured, 6 (19.8 %) patients were maximum improved, 3 (9.9 %) patients were moderately improved, 2 (6.6 %) patients were mildly improved (Table no. 3).

Table 3: Overall clinical assessment of the treatment.

<table>
<thead>
<tr>
<th>Result</th>
<th>Group - A</th>
<th>Group - B</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of pt</td>
<td>% of pt</td>
<td>No. of pt</td>
</tr>
<tr>
<td>Cured</td>
<td>20</td>
<td>66.66 %</td>
</tr>
<tr>
<td>Maximum improved</td>
<td>6</td>
<td>19.8 %</td>
</tr>
<tr>
<td>Moderately improved</td>
<td>3</td>
<td>9.9 %</td>
</tr>
<tr>
<td>Mildly improved</td>
<td>1</td>
<td>3.3 %</td>
</tr>
</tbody>
</table>

**CONCLUSION**

The study observed a highly significant reduction in the mean of white vaginal discharge and significant reduction in the mean of itching of vulva, burning pain in vagina, low back pain and general weakness. The overall compliance to the treatment was excellent in both group and the p value of <0.001 was considered highly significant. Hence, it can be concluded that the both drugs more or less are having same effect. So, we can recommend any one of the drugs for satisfactory management of *Leucorrhoea*.

**REFERENCES**


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