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Management of *Upapluta Yonivyapad* (Vulvovaginitis) during Pregnancy - A Case Study

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ABSTRACT

Pregnant women commonly develop increased vaginal discharge, which in many instances is not pathological. Pregnancy is associated with specific anatomical, physiological and immunological changes that can predispose to infection and also alter the response to the disease process. Infections in pregnancy demands prompt adequate and careful management. Vulvovaginitis during pregnancy may be considered under the umbrella of *Upapluta Yonivyapad*. Pregnant women are more prone to vulvovaginitis which is a great challenge for obstetricians today. In Ayurveda, *Upapluta Yonivyapad* described by *Acharaya Charaka*, *Sharangadhara* and both *Vagbhata* can be compared to vulvovaginitis during pregnancy. Here *Panchawalkala Kwatha Prakshalna* followed by *Jatyadi Taila Pichu* externally and Tab Leukol internally has been used to correct *Garbhini Upapluta*.

Key words: Upapluta Yonivyapad, Pregnancy, Panchawalkala Kwatha, Jatyadi Taila, Leukol.

Introduction

Acharya Charaka says that if pregnant woman takes excess of Kaphakaraahara Vihara and if suppresses urges of Chhardi (vomiting) and Shwasa (expiration), then Kapha and Vata gets vitiated, Vata brings Kapha to Yoni and causes Shwetasrava (white mucoid discharge), Kandu (itching), Vedana (pain) in Yoni. [1] In condition of Vulvovaginal infection in pregnancy, local route is to be better as compare to oral, because the high concentrations are attained at the desire site without exposing the rest of body. [2] Pregnant women are more vulnerable to vulvovaginal candidiasis than

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healthy women with chronic recurrent candidiasis.^[3] The increased estrogen level during pregnancy leads to the production of more glycogen in the vagina which allows for the proliferation of yeast cells on the wall of the vagina.^[4] A woman during her lifespan may have besides pathophysiological bleeding, other types of vaginal discharges. Vulva and vagina are normally moistened by secretion. Women who are over anxious, apprehensive or suffering from fear of veneral disease and cancer tend to exaggerate this into some pathological state.^[5] In this case study *Panchavalkala Yoni Prakshalna* followed by *Jatyadi Taila Pichu* and Tab Leukol has been used and proved to be effective.

CASE REPORT

A 27 years old female hindu patient, visited the OPD of Sri Kalabyraveshwara Ayurvedic Medical College and Research Centre, Department of Prasooti Tantra and Stree Roga on 2nd April 2018 with complaints of excessive *Yoni Srava* with associated complaints of *Yoni Kandu, Yoni Toda* and *Yoni Srava* and *Gandha*. The patient consulted allopathic doctor was prescribed some medication and some investigations but she was not satisfied, so she approached Sri

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CASE REPORT

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Kalabyraveshwara Ayurvedic Medical college Hospital and Research Centre for further management.

Past History

No H/o DM/HTN/Thyroid Dysfunction or any other major medical or surgical history.

Family History: Non significant.

Menstrual History

Age of Menarche: 15 years

3-4 days / 40-45 days / bleeding bright red in colour, scanty flow 1 pad/day, without foul smell, without clots / no dysmenorrhoea.

Married Life: 1 and a half year

Obstetrical / history: G1 P0 L0 A0 (Primi)

Contraceptive: Natural method

General examination

Built : Moderate

Nourishment : Moderate

Pulse : 82 bpm

BP: 120/80 mm of HG

Temperature : 98.4 F

Respiratory Rate : 18 cyc/min

Height : 162 cmWeight : 55kg

BMI: 20.9

Tongue : uncoated

 Pallor / Icterus / Cyanosis / Clubbing / Edema / Lymphadenopathy: absent

Systemic Examination

CVS : S1 S2 normal

CNS: Well oriented, conscious

RS: Normal vesicular breathing, no added sound

P/A: Uterus: 34-36 weeksFHS - Reg. 140-145 bpm

FM - present

P/V findings :

Cervix: Anterior in position, normal in size, no growth noted, OS closed, white mucoid discharge++, foul smell ++

Ashta Vidha Pareeksha

- Nadi 78/min
- Mutra 2-3 times a day
- Mala Once a day
- Jihwa Alipta
- Shabda Prakruta
- Sparsha Prakruta (Anushnasheeta)
- Druk Prakruta
- Aakruti Madhyama

Dasha Vidha Pareeksha

- Prakruti Vata-Kapha
- Vikruti Madhyama
- Sara Madhyama
- Samhanana Madhyama
- Pramana Madhyama
- Satmya Madhyama
- Satva Madhyama

Intervention

Panchavalkaladi Kwatha Yoni Prakshalna followed by Jatyadi Taila Yoni Pichu for 7 days.

Lab Investigations

Mrs. Leena k MICROBIOLOGIST

MICROBIOLOGY REPORT VAGINAL SMEAR FOR TRICHOMONAS, CANDIDA *VAGINAL SMEAR FOR Epithelial cells : Plenty TRICHOMONAS, CANDIDA Polymorphs : Plenty Yeast like cells : Few Trichomonas : Negative Clue cells : Not seen

OBSERVATIONS AND RESULTS

Date	Complaints / Observations
2 nd April 2018	C/O Excessive Yoni Srava associated c/o Yoni Kandu, Yoni Toda, Yoni Daha and Yoni Sravagandha.
	Vaginal smear before treatment showed budding yeast cells and hyphae plenty suggestive of candida
6 th April 2018	Yoni Srava, Yoni Kandu, Yoni Toda, Yoni Daha and Yoni Sravagandha got reduced.
10 th April 2018	Symptoms completely got relieved Vaginal smear after treatment showed budding yeast cells few and clue cells not seen.

DISCUSSION

The vulva is usually resistant to common infection. But the defence is lost following constant irritation by the vaginal discharge or urine (urinary incontinence). All these infections are encouraged by changes in the normal acidity or the hormonal imbalance in the vagina. In *Upapluta Yonivyapad* we can consider Vulvitis occurring due to vaginal discharge. From

Vedic period the Indian physicians were well aware of the presence of the microorganisms but they gave prime importance to soil and not to seed. Here the seed (microorganism) is omni present and its entry in the body cannot be checked. [6] Acharya Chakrapani has also said that in body Sahaja and Vaikarika Krimis are present.^[7] In bacteriology many microorganisms are described as normal flora of the body. These microorganisms remain present in various parts of the body but produce disease only when the resistance of body (soil) breaks down. So it can be concluded that ancient Acharyas had very deep knowledge of microorganisms. There is normally lowering of immunity in pregnancy, which leads to over growth of microorganisms like Candida albicans, bacterial parasites, T. vaginalis etc. in vagina. [8] Panchavalkala Kwatha according to Guna Karma, Nyagrodha (Ficus bengalensis Linn.) have properties of Varnya, Visarpadaahagna, Yonidoshhruta, Vyanga Naashanama, Raktapittavinashana. Udumbara (Ficus glomerata Roxb.) have properties of Vranashodhana, Ropana, Raktapittaghna. Ashvathha (Ficus religiosa Linn.) possess properties of Varnya, Yonivishodhana, Raktadaaha Shamana. Plaksha (ficus lacor Buch-ham.) and Parisha (Thespesia populnea Soland. Ex Correa) shows properties of Vrana Yoniqadaapaha, Raktapittahruta, Raktadoshahara, Murcha Pralaapa Bhramanaashana. In classical terms, it can be explained that Katu, Tikta, Kashaya Rasa, Laghu, Ruksha, Teekshna Guna, Ushna Veerya, Katu Vipaka and Kaphapittaghna properties of drugs are responsible to break the Samprapti of diseases. As compared with modern view, Panchavalkala Kwatha phytochemically dominant in phenolic group components like tannins, flavonoids which are mainly responsible for its excellent activities antiseptic, antiimmunomodulatory, inflammatory, antioxidant, antibacterial, antimicrobial and wound purifying as well as healing, astringent properties. Most of the ingredients used in Jatyadi Taila are Shothahara, Vedanasthapana and Ropaka. The ingredients like Neem, Haridra, Daruharidra, Abhaya, Lodhra have antimicrobial activity. Manjistha, Sariva, Karanja ingredients are having Vruna Shodhana (wound cleansing) property. Naktahva and Abhaya have

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antioxidant and wound healing properties. *Katuka* improves re-epithelialization, neo-vascularization and migration of endothelial cells, dermal myofibroblasts and fibroblasts into the wound bed. *Jati, Patola* and *Sikta* have *Vrunaropana* (Wound healing) action *Kushta* has anti-inflammatory action. *Madhuka* has soothing and healing action on skin lesions topically. *Nymphaea stellata* has astringent and antiseptic properties. *Tuttha* i.e. copper sulphate induces vascular endothelial growth factor (VEGF) expression in the wound.

CONCLUSION

From this study it can be concluded that *Panchavalkala Kwatha* along with *Jatyadi Taila Yoni Pichu* is an effective local treatment in the management of the *Pariplutha Yonivyapad* in *Garbhini*.

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