JETIR.ORG

ISSN: 2349-5162 | ESTD Year : 2014 | Monthly Issue



JOURNAL OF EMERGING TECHNOLOGIES AND INNOVATIVE RESEARCH (JETIR)

An International Scholarly Open Access, Peer-reviewed, Refereed Journal

"A CLINICAL STUDY TO EVALUATE THE EFFECT OF ARKADI YONI VARTI IN THE MANAGEMENT OF KAPHAJA YONI VYAPATH."

Dr Pawar Bhagyashri Giridhar¹ Dr Ramadevi G² Dr Arpana Jain³

¹PG Scholar, ²HOD And Professor, ³Assistant Professor Department of Prasuti tantra and Streeroga, Sri Dharmasthala Manjunatheshwara College of Ayurveda and Hospital, Kuthpady, Udupi, 574118

ABSTRACT

Objectives of the study: To evaluate the effect of Arkadi Yoni Varti in the management of Kaphaja Yoni Vyapath. To evaluate the effect of Triphala Kashaya Yoni Prakshalana in the management of Kaphaja Yoni Vyapath. To compare the effect of Arkadi Yoni Varti and Triphala Kashaya Yoni Prakshalana. Methodology: Two groups of 15 patients suffering from Kaphaja Yonivyapath attending the OPD and IPD of PTSR Department, S.D.M.A Hospital, Udupi were taken for study. Study Group -15 patients- Arkadi Varti kept deep in vagina for specific time once/day for 7 days. Control Group -15 patients – Triphala Kashaya Prakshalana given once/day for 7 days. Follow up once/week for 2 weeks. Subjective & objective criteria were assessed before and after treatment, after 1st and 2nd follow up. Statistical tests- Wilcoxon signed-rank test, Mann Whitney test, paired and unpaired t test were used. Result and Interpretation: There was statistically highly-significant result obtained for Srava, Kandu, Katishoola, vaginal pH and tenderness on per-vaginal examination in both groups and Durgandha, and microbial-load was highly-significant in control group. In study group, significant result was obtained for Durgandha and microbial-loading further for Mutradaha, Maithunasahishnuta and Infective-organism non-significant result was obtained. Significant result was obtained for Mutradaha, Maithunasahishnuta and infective-organism in control group. Conclusion: Triphala Kashaya Yoni-Prakshalana was more effective than Arkadi Yoni-Varti, further Arkadi Yoni-Varti had moderate effect on Kaphaja Yonivyapath.

Key Words: Kaphaja Yonivyapath, Arkadi Yoni-Varti, Triphala Kashaya Yoni-Prakshalana.

INTRODUCTION

The health of women is of utmost importance as it signifies their ability to conceive and deliver a healthy baby, which in turn contributes to the well-being of the family. A healthy reproductive tract plays a vital role in conception, and the vagina possesses natural defense mechanisms such as its acidic pH, narrow cervix, endometrial lining, and downward-directed cervical canal. These mechanisms help prevent the ascending spread of non-motile organisms into the uterus¹. Abnormal discharge can be caused by factors such as nutritional status, emotional stress, genital infections, hormonal imbalance, use of oral contraceptive pills, or sexual arousal. These conditions create favorable conditions for pathogenic organisms to enter the vagina, leading to abnormal vaginal discharge. In India, the estimated prevalence of vaginal discharge is around 30%. Abnormal white discharge from the vagina can be attributed to pathologies affecting the upper or lower genital tract. On the other hand, infections of the upper genital tract can spread from the vagina and cervix to the endometrium, fallopian tubes, ovaries, and even the peritoneum, leading to conditions such as pelvic inflammatory disease and acute salpingitis.

In *Ayurveda*, diseases related to the female reproductive system are mainly explained under the concept of *Yoni Vyapath*^{2,3,4}. Abnormal vaginal discharges, are enlightened under *Kaphaja*, *Pittaja*, *Paripluta* and

*Upapluta Yoni*vyapaths in *Ayurvedic* texts. Various treatment modalities are described for *Yoni Roga*, emphasizing treatments like *Yoni Pichu*, *Yoni Prakshalana*, *Yoni Lepa*, and *Yoni Varti*^{5,6} etc., along with different formulations are cited in our classics.

Arkadi Yoni Varti mentioned by Acharya Charaka⁵, composed of Arka Ksheera, Saindhava lavana and Yavachurna. The drugs possess qualities like Tikta, Kashaya Rasa, Ushna Virya, Ruksha, Laghu, Sukshma, Tikshna, Lekhana Guna, Shodhaka and Kaphaghna. After wards Yoni Prakshalana was done with Sukoshna jala with the help of the nozzle attached to douche can to remove the sediments of Varti.

Yoni Prakshalana, a cleansing procedure, may help remove excessive secretions from the vagina. Although several studies have been conducted on the effectiveness of Yoni Prakshalana in vaginal discharge. Triphala Kashaya Yoni Prakshalana is one among them. Triphala, known for its Tridosahara, Kledahara, Shodhana, Ropana and Rasayana properties, has proven antimicrobial activity and is expected to be effective in treating vaginal infections. Triphala is also readily available, safe to use, cost-effective, and less likely to be adulterated. Therefore, in this study Triphala Kashaya Yoni Prakshalana taken as a standard treatment [control group] that provides a permanent and effective cure, which can be easily administered and accepted by patients without any side effects, for the female reproductive tract infection.

OBJECTIVES

- To evaluate the effect of Arkadi Yoni Varti in the management of Kaphaja Yoni Vyapath.
- To evaluate the effect of *Triphala Kashaya Yoni Prakshalana* in the management of *Kaphaja Yoni Vyapath*.
- To compare the effect of Arkadi Yoni Varti and Triphala Kashaya Yoni Prakshalana.

METHODOLOGY

Two groups of 15 patients suffering from *Kaphaja Yonivyapath* attending the OPD and IPD of PTSR Department, S.D.M.A Hospital, Udupi were taken for study.

Study Group -15 patients- *Arkadi Varti* kept deep in vagina for specific time once/day for 7 days. Follow up once a week for 2 weeks.

Control Group -15 patients – *Triphala Kashaya Prakshalana* given once/day for 7 days. Follow up once/week for 2 weeks.

Subjective & objective criteria were assessed before and after treatment, after 1st and 2nd follow up. Statistical tests-Wilcoxon signed-rank test, Mann Whitney test, paired and unpaired t test were used.

Materials and Methods

Source of data

30 patients diagnosed as *Kaphaja Yoni Vyapath*, who attending the OPD and IPD of *Prasuti Tantra* and *Stree Roga* dept, SDM Ayurveda Hospital, Udupi were taken for study.

Method of collection

Patients fulfilling the inclusion criteria were taken for study. A special proforma was prepared with all the points of history taking and written consent form.

Diagnosis criteria

Patients suffering from Kaphaja Yoni Vyapath presenting with Lakshanas Like Pichhilata, Sheeta, Alpa Vedana in Yoni and Pandu Picchila Srava.

Inclusion criteria

- ♦ Subjects fulfilling the diagnostic criteria
- ♦ Age group 18-45 years
- Married women

Exclusion criteria

- ♦ Menstruating women
- ♦ Pregnancy
- Malignant conditions

Intervention

In study group- subjects were treated with *Arkadi Yoni Varti* kept deep in the vagina followed by *Koshnajala Prakshalana* once in a day for 7 days after the cessation of menstruation. Follow up once in a week for 2 weeks. In control group- subjects were treated with *Triphala Kashaya Yoni Prakshalana* once a day for 7 days after the cessation of menstrual cycle. Follow up once in a week for 2 weeks.

Duration of study

- ♦ Duration of the treatment 7 days
- ♦ Follow up- once in a week for 2 weeks.

Procedure

Varti administration-

- ♦ Patient was instructed to empty the bladder and lie in lithotomy position.
- External part was cleaned with antiseptic solution.
- With all aseptic precautions *Varti* covered with gauze piece was administrated deep in vagina for 5 min., the tail of gauze piece kept out side.
- After 5mnts *Varti* was removed, by pulling the tail of gauze piece.
- ♦ After wards *Yoni Prakshalana* was done with *Sukoshna jala* with the help of the nozzle attached to douche can and removed the sediments of *Varti*.

Vaginal douche procedure-

- ♦ The patient was advised to empty her bladder and lie in the lithotomy position.
- ♦ Place a bed pan beneath the buttocks and then pour lukewarm *Triphala Kashaya* or *Koshna Jala* into the douche can. Gently inserted the nozzle into the vaginal canal.
- ♦ Hang the douche can on an iron stand positioned above the level of the bed.
- ♦ Allow the fluid to flow slowly by gravity for approximately 5-10 minutes, while gently rotating the nozzle within the vagina to ensure the medication/ water reaches the cervix and all the fornices.
- ♦ Upon completion of the procedure, ask the patient to cough or strain while in a seated position to facilitate the removal of any remaining Kashaya from the vagina.

Criteria For Assessment

Subjective Parameters

♦ *Yoni Srava* (No discharge/mild/ moderate/severe)

No discharge -0

Mild (sensation of wetness) -1

Moderate (wetting of undergarments) -2

Severe (profuse staining may need pads)-3

♦ *Yoni Kandu* (present/ absent)

Absent- 0

Mild (occasionally subsides by itself) - 1

Moderate (subsides by local treatment, do not affect daily life)-2

Severe (Needs treatment, affects daily routine)-3

♦ *Katishoola* (present/absent)

Absent -0

Mild (subsides by itself)-1

Moderate (needs mild analgesic, not affecting daily routine)-2

Severe (Needs strong analgesic, affects daily routine) -3

♦ Mutradaha

Absent-0

Present-1

♦ Durgandha

Absent-0

Present-1

♦ Maithunasahishnuta

Absent-0

Present- 1

Objective Parameters

- ♦ Vaginal pH
- ♦ Vaginal swab
- ♦ Vaginal swab infective Organism –

Absent-0

Gram positive -1

Gram negative - 2

Mixed/ others- 3

Vaginal swab microbial load-

Absent - 0

Less than 100 - 1

100-200 - 2

200-300 -3

More than 300 - 4

♦ Statistical Analysis

Quantitative data were assessed with the help of paired t-test and unpaired t test for comparison with in the group and in between the group. Qualitative data were assessed by Wilcoxon Signed Rank test for comparison within the group and Mann-Whitney test used for comparison in between group.

RESULT

♦ Effect on Yoni Srava

In *Arkadi Yoni Varti* group, the average score for the symptom of *Yoni Srava* was 2.40 which decreased to 0.66 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of *Yoni Srava* was 2.60 which decreased to 0.00 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

Between the group analysis of before treatment and After study shows that group B had better effect (mean rank: 10.20, p value: 0.000) which is statistically highly significant

♦ Effect on Yoni Kandu

In *Arkadi Yoni Varti* group, the average score for the symptom of *Yoni Kandu* was 2.00 which decreased to 0.33 after study. The observed change with the treatment is a highly significant statistical change [p-0.001].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of *Yoni Kandu* was 2.20 which decreased to 0.00 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

Between the group analysis of before treatment and After study shows that group B had better effect (mean rank: 12.20, p value: 0.019) which is statistically significant.

♦ Effect on *Katishoola*

In *Arkadi Yoni Varti* group, the average score for the symptom of *Katishoola* was 1.93 which decreased to 0.80 after study. The observed change with the treatment is a highly significant statistical change [p-0.001].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of *Katishoola* was 2.26 which decreased to 0.06 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

Between the group analysis of before treatment and After study shows that group B had better effect (mean rank: 10.00, p value: 0.000) which is statistically highly significant.

♦ Effect on *Mutradaha*

In Arkadi Yoni Varti group, the average score for the symptom of Mutradaha was 1.00 which decreased to 0.00 after study. The observed change with the treatment is a not significant statistical change [p-0.46].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of *Mutradaha* was 1.00 which decreased to 0.00 after study. The observed change with the treatment is a significant statistical change [p-0.025].

Between the group analysis of before treatment and After study shows that both groups had same effect (mean rank: 5.00, p value: 1.000) which is statistically not significant.

♦ Effect on *Durgandha*

In Arkadi Yoni Varti group, the average score for the symptom of Durgandha was 1.00 which decreased to 0.11 after study. The observed change with the treatment is a significant statistical change [p-0.005].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of *Durgandha* was 1.00 which decreased to 0.00 after study. The observed change with the treatment is a highly significant statistical change [p-0.001].

Between the group analysis of before treatment and After study shows that group B had better effect (mean rank: 10.00, p value: 0.269) which is statistically not significant.

♦ Effect on Maithuna asahishnuta

In *Arkadi Yoni Varti* group, the average score for the symptom of maithunasahishnuta was 1.00 which decreased to 0.00 after study. Only one patient was having maithunasahishnuta, as most of patient will avoid the intercourse due to excessive white discharge and smell.

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of maithunasahishnuta was 1.00 which decreased to 0.00 after study. The observed change with the treatment is a significant statistical change [p-0.014].

Between the group analysis of before treatment and After study shows that both groups had same effect (mean rank: 4.00, p value: 1.000) which is statistically not significant.

♦ Effect on tenderness on per vaginal examination

In *Arkadi Yoni Varti* group, the average score for the symptom of tenderness on per vaginal examination was 2.00 which decreased to 0.33 after study. The observed change with the treatment is a highly significant statistical change [p-0.001].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of tenderness on per vaginal examination was 2.20 which decreased to 0.00 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

Between the group analysis of before treatment and After study shows that group B had better effect (mean rank: 12.20, p value: 0.019) which is statistically significant.

♦ Effect on vaginal pH

In *Arkadi Yoni Varti* group, the average score for the symptom of vaginal pH was 6.93 which decreased to 4.40 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the symptom of vaginal pH was 6.86 which decreased to 4.13 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

Between the group analysis of before treatment and After study shows that both groups had almost equal effect (mean rank: 2.53 & 2.73, p value: 0.33) which is statistically not significant.

♦ Effect on vaginal swab infective organism

In Arkadi Yoni Varti group, the average score for the infective organism was 1.40 which decreased to 1.13 after study. The observed change with the treatment is a not significant statistical change [p-0.102].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the Infective organism was 1.13 which decreased to 0.46 after study. The observed change with the treatment is a significant statistical change [p-0.004].

Between the group analysis of before treatment and After study shows that group B had better effect (mean rank: 13.13, p value: 0.099) which is statistically not significant.

♦ Effect on vaginal swab microbial load

In *Arkadi Yoni Varti* group, the average score for the microbial load was 2.73 which decreased to 1.53 after study. The observed change with the treatment is a significant statistical change [p-0.057].

In *Triphala Kashaya Yoni Prakshalana* group the average score for the microbial load was 3.2 which decreased to 0.46 after study. The observed change with the treatment is a highly significant statistical change [p-0.000].

Between the group analysis of before treatment and After study shows that group B had better effect (mean rank: 10.20, p value: 0.000) which is statistically highly significant.

f361

DISCUSSION

Women play a crucial role in creating and nurturing families; it is vital for them to prioritize their own health. There are four key factors that contribute to the health of future generations, namely *Rutu* (season), *Kshetra* (reproductive system), *Ambu* (nutrition), and *Beeja* (genetic material). In this context, *Kshetra* specifically refers to the reproductive tract or system.

Maternal well-being is closely linked to reproductive health, which encompasses the overall health of the genital region. A healthy reproductive tract is essential for successful conception, implantation, the development of a healthy foetus, and the delivery of the baby through an infection-free pathway, specifically a healthy vaginal tract.

When the reproductive tract maintains a balance of *Doshas*, it helps preserve the normal vaginal flora, vaginal epithelium, and the acidic pH of the vagina. Any alterations in these factors can lead to infections caused by various microorganisms, resulting in pathological conditions of the genitalia. These infections can cause physical discomfort and have psychological impacts on women. Neglecting reproductive tract infections can exacerbate the problem if left untreated. Many individuals tend to ignore these issues due to embarrassment or a busy lifestyle until they significantly disrupt daily routines, leading to delayed medical intervention. Changes in lifestyle, including modern food habits such as fast food and junk food, often prevent them from following the guidelines of *Dinacharya* (daily regimen), *Rutucharya* (seasonal regimen), *Rajaswalacharya* (menstrual cycle regimen), *Rutumaticharya*, and *Sutikaparicharya* (postnatal care), which have been explained by the ancient scholars (*Acharyas*) for women's health.

In Ayurveda, Yoni Vyapath represents most of the gynaecological disorders. Kaphaja Yoni Vyapath^{7,8,9,10} is one among the 20 Yoni Vyapaths explained by all the Acharyas. The Kaphaja Yoni Vyapath by cardinal features, can be compared to pelvic infections and one of the common symptoms of this is discharge per vagina, encountered by most of the women in their active reproductive period.

Abhishyandi Ahara leads to a qualitative aggravation of Kapha Dosha, while Srotomalinya kara Ahara (systemic pollutants) contributes to an increase in Kapha Dosha. Mithyachara encompasses both Mithya Ahara (abnormal diet) - excessive, incompatible, unwholesome, unhygienic, and incompatible food intake - and Mithya Vihara (abnormal lifestyle) - engaging in sexual activities in abnormal body postures, leading a stressful life, which also results in Vata Dosha imbalance. Vata Dosha is primarily responsible for the manifestation of diseases related to the female reproductive organs.¹¹

In Kaphaja Yoni Vyapath, the consumption of Abhishyandi ahara resulting into Shrotomalinyatwa, in turns of Agnimandya, which causes improper formation of Rasa Dhatu. Consequently, the abnormal qualities of Kapha Dosha, such as Snigdha, Guru, and Pichhila, along with the Chala Guna of Vata Dosha, result in the manifestation of Kaphaja Yoni Vyapath. This is characterized by symptoms like Snigdha, Sheeta, Pichhila Srava, Kandu, and other related symptoms in the Yoni. If Kapha Dosha is associated with Vata Dosha, there will be additional symptoms such as Alpavedana, Katishoola, and when it is associated with Pitta Dosha, there will be Durgandha, Daha, Paka, and Jwara etc.,

The symptoms of *Kaphaja Yoni Vyapath* are *Yoni Srava*, *Pichhilata*, *Kandu*, *Sheeta*ta of *Yoni*, observed in other diseases. To diagnose the condition of *Kaphaja Yoni Vyapath* it needs to be definitely diagnosed from other *Yoni Vyapath* like *Paripluta*, *Upapluta*, *Sannipataja Yoni Vyapath*, *Karnini*, *Vipluta*, and *Acharana Yoni Vyapath*.

As in *Kaphaja Yoni Vyapath* main symptoms are white discharge per vagina, itching etc., which is also cardinal feature of pelvic inflammatory disease which mainly caused by ascending infection from lower reproductive tract organs like vagina and cervix, hence we can broadly corelate the *Kaphaja Yoni Vyapath* with pelvic inflammatory disease.

Pelvic inflammatory disease¹² (PID) is characterized as inflammation occurring in the upper genital tract caused by an ascending infection that spreads from the lower genital tract. The primary cause of PID is usually a sexually transmitted infection. Diagnosis of PID relies primarily on clinical assessments and should be suspected in women who exhibit symptoms such as lower abdominal or pelvic pain and tenderness in the genital tract with discharge per vagina. The diagnosis of pelvic inflammatory disease is primarily based on clinical findings, which may include lower genital tract inflammation such as cervical discharge, an increased number of white blood cells observed on a wet prep, or cervical friability. The short-term complications of PID include the formation of

f362

tubo-ovarian or pelvic abscesses, while long-term complications involve infertility, chronic pelvic pain, and the occurrence of ectopic pregnancies. Timely diagnosis and treatment can potentially prevent these complications from arising.

The current standard treatment in modern medicine typically involves the use of systemic or topical antifungal, antiprotozoal, and antibacterial agents. While these medications temporarily reduce the infection, they often disrupt the normal vaginal flora, leading to recurrent infections.

In Ayurveda treatment principle include *Shodhana*¹³, *Shamana Chikitsa*, *Sthanika Chikitsa* and *Rasa*yana *Chikitsa*. *Sthanika Chikitsa* include, *Yoni Pichu*, *Yoni Prakshalana*, *Yoni Lepa*, *Yoni Dhupana*, *Yoni Varti* etc., Various local measures along with the oral medicine are available in our classics. ¹⁴

Arkadi Yoni Varti mentioned by Acharya Charaka, composed of Arka Ksheera¹⁵, Saindhava Lavana¹⁶ and Yavachurna¹⁷. The drugs possess qualities like Tikta, Kashaya Rasa, Ushna Virya, Ruksha, Laghu, Sukshma, Tikshna Guna, Shodhaka and Kaphaghna. Yoni Varti probably acts by absorbing water-soluble active principle by vaginal epithelium. The drugs used may help in restoring acidic pH, enhance growth of natural vaginal flora and simultaneously strengthen the vagina. It also acts as Vrana Shodhana, Ropana, Kandu Krimighna, Sneha-Kleda Nashaka.

Even though *Arka Ksheera* has been associated with toxicity and various fatal effects it is also recognized for its beneficial qualities such as analgesic, antitumor, anthelmintic, antioxidant, hepatoprotective, antidiarrheal, anticonvulsant, antimicrobial, estrogenic, antinociceptive, and antimalarial activities. *Arka Ksheera* possesses properties like *Tikta*, *Katu*, *Lavana Rasa*, *Snigdha*, *Laghu*, *Sara* and *Tikshna Guna*, *Ushna Virya*, and *Katu Vipaka* which exhibits *Shothahara*, *Vranahara*, *Kandughna*, *Kushtaghna*, *Krimihara*, *Gulmahara*, *Kapha Rogahara*, *Twak Doshahara* and *Rakta Vikara hara* effects. *Arka Ksheera* mainly acts as *Virechana* and *Vamana kara*. The pharmacological actions of *Ksheera* include anticancer, anti-implantation, antimicrobial, nematocidal, high fibrinolytic, anticoagulant, vermicidal, anthelmintic, stimulant, spasmogenic, and mild diuretic effects. Previous studies have shown that the aqueous extract of *Arka Ksheera* possesses a significant amount of antimicrobial and antifungal activity against a wide range of microorganisms.

Saindhava Lavana having Lavana and Madhura Rasa, Laghu Snigdha Guna, Tri Doshahara and Kapha Chedhaka Karma. Sodium chloride is the major ingredient making up to 98%.

Yava mainly having scraping effect. It is having Kashaya, Madhura Rasa, Katu Vipaka, Sheeta Virya and Guru, Lekhana [scraping effect], Mrudu, Ruksha, Sara, Pichila Guna. It also having Medha Vardhan, Agni Vardhan, Anabhishyandi, Bala Kara properties. Kashaya Rasa act as Sthambaka for Yoni Srava, Lekhana, Ruksha Guna help in Kapha Chedana. Barley contains vitamin B which act on cellular immunity.

Triphala^{18,19,20} Kashaya Yoni Prakshalana taken as a standard procedure for Kaphaja Yoni Vyapath, and to compare with the effect of Arkadi Yoni Varti. Triphala extract demonstrates potent local effects in controlling infections, potentially attributed to its antibacterial, antifungal, and antiprotozoal (Krimihara) properties, as well as its anti-inflammatory (Shothahara, Kledahara) characteristics. With its Sarva Dosha Shamana, Sodhana, Ropana, and Rasayana attributes, Triphala extract may effectively enhance local immunity and promote the regeneration of healthy cells. Haritaki having Anulomana quality, coupled with the predominance of Madhura Rasa in all components, contributes to its Vata pacifying nature. Moreover, its Laghu Guna and Ushna Virya properties make it beneficial for balancing Kapha, and its predominant Kashaya Rasa helps alleviate Pitta Dosha as well.

All Prakshalana drug have Tikta Kashaya Rasa, Laghu Ruksha Guna; so, their action is Vrana Shodhana, Ropana, Srava Kleda Shoshana, Shothahara, Vedana hara, Kandughna, Krimighna. It is clear that the main action of Prakshalana is bactericidal and anti-inflammatory. They remove the debris and unhealthy tissue and promote new tissue growth. So, they heal unhealthy vaginal mucosa, maintain normal vaginal flora, remove harmful bacterial growth, maintain normal vaginal pH.

Conclusion

There was statistically highly-significant result obtained for *Srava*, *Kandu*, *Katishoola*, vaginal pH and tenderness on per-vaginal examination in both the groups. *Durgandha*, and microbial-load was highly-significant in control group. In study group, significant result was obtained for *Durgandha* and microbial-loading. In study group, *in*

f363

Mutradaha, Maithunasahishnuta and Infective-organism non-significant result was obtained, whereas in the control group Significant result was obtained for the same. Based on the findings, the study demonstrates the more effectiveness of Triphala Kashaya Yoni Prakshalana in treating Kaphaja Yoni Vyapath compare to Arkadi Yoni Varti. Arkadi Yoni Varti was also moderately effective in Kaphaja Yoni Vyapath.

REFERENCE

- Dutta DC, Konar H editor. Textbook of Gynecology. 7th ed. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd, 2016; p.105.
- 2. Acharya Y T, editor, Commentry Ayurveda Deepika of Chakrapaanidatta on Charaka Samhita of Agnivesha, Chikitsasthana; Yonivyapathchikitsa adhyaya: Chapter 30, Verse 7. Varanasi: Choukamba Surbharati Prakashani, 2020; 634.
- 3. Sharma S, editor, Commentary Shashilekha of Indu on Ashtanga Samgraha of Vriddha Vagbhata, Uttara Sthana; Guhyarogavigyaniya adhyaya: Chapter 38, Verse 32. Varanasi: Choukamba Sanskrit series office, 2016; 828.
- 4. Bhisagacharya Paradakara Harisastri, editor, (10 ed.) Commentaries Sarvangasundara and Ayurvedarasaayana of Arunadutta and Hemaadri on Astangahrdayam of Vagbhata, Uttarasthana; Guhyarogavigyaniya adhyaya: Chapter 33, Verse 27. Varanasi: Choukamba Orientalia, 2014; 895.
- 5. Acharya Y T, editor, Commentry Ayurveda Deepika of Chakrapaanidatta on Charaka Samhita of Agnivesha, Chikitsasthana; Yonivyapathchikitsa adhyaya: Chapter 30, Verse 71. Varanasi: Choukamba Surbharati Prakashani, 2020; 638.
- 6. Sharma S, editor, Commentary Shashilekha of Indu on Ashtanga Samgraha of Vriddha Vagbhata, Uttara Sthana; Guhyarogavigyaniya adhyaya: Chapter 38, Verse 45. Varanasi: Choukamba Sanskrit series office, 2016; 839.
- 7. Acharya Y T editor, Commentry Nibhandasangraha of Dalhana on Sushrutha Samhita of Sushrutha, Uttaratantra; Yonivyapathapratishedham adhyaya: Chapter 38, Verse 8. Varanasi: Choukamba Orientalia, 2021; 668.
- 8. Acharya Y T, editor, Commentry Ayurveda Deepika of Chakrapaanidatta on Charaka Samhita of Agnivesha, Chikitsasthana; Yonivyapathchikitsa adhyaya: Chapter 30, Verse 13-14. Varanasi: Choukamba Surbharati Prakashani, 2020; 635.
- 9. Bhisagacharya Paradakara Harisastri, editor, (10 ed.) Commentaries Sarvangasundara and Ayurvedarasaayana of Arunadutta and Hemaadri on Astangahrdayam of Vagbhata, Uttarasthana; Guhyarogavigyaniya adhyaya: Chapter 33, Verse 44. Varanasi: Choukamba Orientalia, 2014; 896.
- 10. Sharma S, editor, Commentary Shashilekha of Indu on Ashtanga Samgraha of Vriddha Vagbhata, Uttara Sthana; Guhyarogavigyaniya adhyaya: Chapter 38, Verse 46. Varanasi: Choukamba Sanskrit series office, 2016; 830.
- 11. Bhisagacharya Paradakara Harisastri, editor, (10 ed.) Commentaries Sarvangasundara and Ayurvedarasaayana of Arunadutta and Hemaadri on Astangahrdayam of Vagbhata, Uttarasthana; Guhyarogapratishedha adhyaya: Chapter 34, Verse 26. Varanasi: Choukamba Orientalia, 2014; 899.
- 12. Dutta DC, Konar H editor. Textbook of Gynecology. 7th ed. New Delhi: Jaypee Brothers Medical Publishers (P) Ltd, 2016; p.106-112.
- 13. Acharya Y T editor, Commentry Nibhandasangraha of Dalhana on Sushrutha Samhita of Sushrutha, Uttaratantra; Yonivyapathapratishedham adhyaya: Chapter 38, Verse 21,31-32. Varanasi: Choukamba Orientalia, 2021; 669-670.
- 14. Acharya Y T, editor, Commentry Ayurveda Deepika of Chakrapaanidatta on Charaka Samhita of Agnivesha, Chikitsasthana; Yonivyapathchikitsa adhyaya: Chapter 30, Verse 45-46. Varanasi: Choukamba Surbharati Prakashani, 2020; 636-637.
- 15. Hegde P. L, A. Harini, A textbook of Dravyaguna Vijnana, New Delhi: Chaukhambha Publications, 2020; 65-75.
- 16. Pandey. G. S, editor, Commentary by Chunekar. K. C on Bhavaprakasha Nighantu of Bhavamishra, Amraadi varga; Verse 41-42. Varanasi: Choukamba Bharathi Academy, 2010; 49.
- 17. Pandey. G. S, editor, Commentary by Chunekar. K. C on Bhavaprakasha Nighantu of Bhavamishra, Amraadi varga; Verse 41-42. Varanasi: Choukamba Bharathi Academy, 2010; 628.

- 18. Hegde P. L, A. Harini, A textbook of Dravyaguna Vijnana, New Delhi: Chaukhambha Publications, 2020; 25-32.
- 19. Hegde P. L, A. Harini, A textbook of Dravyaguna Vijnana, New Delhi: Chaukhambha Publications, 2020; 287-299.
- 20. Hegde P. L, A. Harini, A textbook of Dravyaguna Vijnana, New Delhi: Chaukhambha Publications, 2020; 137-143.

