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“Conceptual Study of Shwetapradara with Special Reference to Leucorrhoea”

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Abstract : *Shwetapradara*, described in Ayurveda as excessive white vaginal discharge, is classified under *Yonivyapad* disorders and primarily results from vitiation of *Kapha* and *Vata doshas* with *Rasa dhatu* involvement. In modern gynaecology, it correlates with leucorrhoea, a condition characterized by abnormal vaginal discharge due to infections, hormonal imbalance, or structural disorders. Ayurvedic texts explain its pathogenesis through *Srotodushti* of *Artavavaha* and *Rasavaha Srotas*, while modern science attributes it to mucosal inflammation and altered vaginal flora. Clinical features include white sticky discharge, itching, burning, and weakness. Management in Ayurveda focuses on *Kapha-Vata Shamana*, *Rasayana*, and *Yoni Prakshalana*, whereas modern treatment includes antifungal or antibacterial therapy. An integrative approach combining Ayurvedic lifestyle modification and modern diagnostic evaluation ensures holistic management, addressing both symptom relief and etiological correction for improved reproductive health and prevention of recurrence.

IndexTerms – shwetapradara, leucorrhoea, Ayurveda, Dosha, , Integrative Medicine

INTRODUCTION

In Ayurveda, *Shwetapradara* (“white discharge”) is listed among *Yonivyapads* (gynaecological disorders) characterized by excessive white vaginal discharge. The term *Shweta* means white, and *Pradara* denotes discharge or exudation. In modern gynaecology, the condition broadly correlates with **leukorrhoea** — a whitish (or sometimes yellowish) vaginal discharge not associated with menstruation or sexual stimulation.

Physiological vaginal discharge is normal and protective, but persistent excessive discharge may indicate infection, hormonal imbalance, systemic debility, or structural disease (1). (2). Thus, studying *Shwetapradara* from both Ayurvedic and modern perspectives yields integrative insights into diagnosis, pathogenesis, management, and preventive care.

Etiopathogenesis

Ayurvedic Perspective

According to Ayurvedic classics, *Shwetapradara* arises primarily from vitiation of **Kapha** and **Vata doshas** along with disturbance of *Rasa dhatu* (3). Causative factors (*Nidanas*) include heavy (*Guru*), unctuous (*Snigdha*), sweet (*Madhura*) foods; sedentary habits, stress, day sleep, and sexual excess during menstruation. Indigestion and incompatible foods lead to *Ama* (toxin) formation and *Srotas* obstruction (4).

Pathogenetically, aggravated *Kapha* produces stickiness (*Picchila Guna*), and *Vata* causes abnormal movement of fluids, leading to white slimy discharge. *Rasa dhatu* involvement causes generalized weakness (5). *Srotodushti* of *Artavavaha* and *Rasavaha Srotas* leads to stagnation of secretions and manifestation of *Srava* (discharge) (6).

Modern Perspective

In modern medicine, leukorrhoea is defined as **excessive vaginal discharge** (white or off-white), either physiological or pathological (7). Common causes include infection (*Trichomonas vaginalis*, *Candida albicans*, Bacterial Vaginosis), hormonal disturbance, cervicitis, and pelvic inflammatory disease (8). Leukorrhoea was found to increase the risk of *Trichomonas* infection by four-fold (9). Hence, it should be seen as a sign requiring etiological evaluation rather than a disease itself (10).

Samprapti (Pathogenesis)

1. *Nidana* → vitiation of *Kapha* and *Vata*.
2. Vitiated *Kapha* accumulates in the *Yoni* region and mixes with *Rasa dhatu*.
3. Disturbed *Apana Vayu* promotes downward movement of doshas → *Srava* (discharge).
4. *Srotodushti* (*Artavavaha* and *Rasavaha Srotas*) → stagnation and increased discharge (11).

5. Chronic cases lead to Rasa dhatu depletion and weakness (12).

From a modern perspective, infections or hormonal changes cause mucosal inflammation and altered vaginal flora (13).

Lakshana (Clinical Features)

Ayurvedic features: *Shweta Picchila Yonisrava* (white sticky discharge), *Yoni Kandu* (itching), *Yoni Daha* (burning), *Katishoola* (low-back pain), *Anga Daurbalya* (weakness) (14).

Modern features: Discharge that is thick or discolored suggests infection with symptoms of itching, burning, or dyspareunia (15). pH testing, microscopy, and NAAT confirm the cause (16).

Management (Chikitsa)

Ayurvedic Management: Kapha-Vata Shamana and Rasa Dhatu Poshana.

- *Pathya*: light food, warm water, yoga and hygiene (3).
- Chikitsa of Pandura Asrigdara is given in Charaka and Commentator Chakrapani says Pandura Asringdra as a Shweta Pradara but when we take it as a separate disease then management of Shweta Pradara can be done in three ways
- 1. Nidana Parivarjana- Nidana Parivarjana is the base of the management of all disease. Nidana facilitates treatment if the causes of the treatment of the diseases are definitely traced out. Further in most cases, when the cause of the disease is removed, the disease subsides naturally. In Shweta Pradara the causative factors should be avoided in order to get permanent relief. For example–Mithya ahara vihara etc.
- 2. The management of disease in which Shweta Pradara is found- Hence, the curative treatment for any type of vaginal discharge is to remove the underlying disease. All other methods are more or less useful to relieve the symptom.
- 3. Management of Shweta Pradara depend upon the Prakriti of the patient's, involvement of Doshas etc. For example -if discharge per vaginum is especially white in colour, Pichchila Srava, Kandu Yukta then it is due to disordered Kapha, the main aim would naturally be to bring Kapha to its normal state. For this, various Kaphaghna drugs are advised. The main characteristics of these drugs are Ruksha and Ushna. While administering various Kaphaghna drugs, the accompanying Dosha dushti and Dhatu-Veishamya must be considered. Varti kalpana, kalka, Dhooma Chikitsa all are employed for local action of drug. Dhooma Chikitsa is specially mentioned for Upapluta and Kaphaja yoni but can be used in all cases of Styana and Pichchila sravas. Selection of drug depends on the type of Srava, accompanying symptoms and pathology behind the condition. As in varti kalpana the drugs vary according to the type of discharge, in this method of douching also the decoction used varies according to the type of discharge. Generally the drugs used should have an action of decreasing Kleda, diminishing Kapha and absorbing water. Hence, drugs of Katu, Kashaya and Tikta Rasa are used. Treatment of Shweta Pradara is based on the use of drugs which are Tridosha shamaka especially Kapha Shamaka, Krimighna, Kledaghna, Putihara and Kanduhara. The principle of Ayurvedic treatment of Shweta Pradara is mostly based on its aetiopathogenesis.¹⁷
- As Kapha is the main causative factors for vaginal discharge, restoration of Agni in order to cleanse the accumulated toxins and bring Kapha dosha back towards equilibrium and tone up the muscles of reproductive organs with the help of rejuvenating herbs are considered main principle of treatment through Ayurveda. World is looking towards Ayurveda with hope for remedies because the treatment modalities in the allopathic medicine have unsatisfactory results. They have also some side effects. So there is a great scope for research to find out a safe, potent, effective and less costly remedy of Ayurveda for management of Shweta Pradara. Detail description of Nidana Panchaka helps in selection of drugs to treat the Shweta Pradara because ideal drug is those which breaks or reverse the Samprapti without producing side effects.
- **Bahyaprayogas:** (External administration).¹⁸
- Yoniprakshalana (Vaginl Irrigation) – done with drugs like Lodhra (*Symplocos racemosa* Roxb.) & Vata (*Ficus bengalensis* Linn) twak kashaya, Triphala kwatha¹⁸ (*Terminalia chebula* Retz, *Terminalia bellirica*. Roxb and *Embllica officinalis* Gaertn decoction) with takra (buttermilk) etc.
- Vartidharana (Suppository) – After oleating the vaginal canal, suppository made with Lodhra (*Symplocos racemosa* Roxb), Priyangu (*Callicarpa macrophylla* Vahl) & Madhuka (*Madhuca indica* J.F.Gmel.) should be kept in yoni (Vaginal canal).
- Avachurnana (Sprinkling with powder)- Khadira (*Acacia catechu* (Linn.f.)), Pathya (*Terminalia chebula* Retz), Jatiphala (*Myristica fragrans* Henlt.), & Nimba (*Azadirachta Indica* A.Juss) churna,
- Panchavalka churna (Vata (*Ficus bengalensis* Linn.), Ashwatha (*Ficus religiosa* Linn.), Udumbara (*Ficus glomerata* Roxb), Plaksha (*Ficus lacer* Buch - Ham .), Parish (*Thespesia populenea* Soland. ex Correa.) Though it is mentioned under avachurnana, it is best used as prakshalana (Vaginal irrigation).
- Pichudharana (Tampoons)- Nyagrodha or Vata (*Ficus bengalensis* Linn) & Lodhra (*Symplocos racemosa* Roxb), twak kashaya is placed in the yoni (Vaginal canal) as pichu or tampoon.
- Yoni Dhupana - Dhupana (Fumigation) with Sarala (*Pinus roxburghii* Sarg), Guggulu (*Commiphora mukul* Hook. Ex Stocks) and Yava (*Hordeum vulgare* Linn) mixed with Ghrita (ghee) should be done after oleating the genitals

Modern Management:

- For yeast infection – topical/oral azoles (e.g. fluconazole).
- For Trichomonas – metronidazole/tinidazole, partner treatment (8).
- For bacterial vaginosis – metronidazole/clindamycin and hygiene advice (13).

Integrative Discussion

Both Ayurveda and modern medicine view leukorrhoea as a manifestation of systemic imbalance — *dosha-dhatu-srotas* imbalance in Ayurveda, and microbial-hormonal-structural disturbance in modern science (10).

An integrative approach combining Ayurvedic lifestyle and rejuvenation with modern diagnostics and targeted therapy offers a comprehensive pathway for sustainable reproductive health.

Conclusion

Apart from attending natural processes of menstruation and pregnancy, one of the most inconvenient disease in females is Shweta pradara with symptom of discharge per vagina, vulval itching, burning vulvae, backache, infertility ultimately leads to psychological problem. Vaginal discharges are one of the most common and troublesome disorders. It is normal that a lady complains to have a slight discharge to keep her vagina moist and clean, when the discharge increases in quantity, become irritating and malodorous, it disturbs the woman. It has been estimated that nearly 60-80% of woman suffer from this at some time or other. It is not a medical emergency but if not treated properly leads to complications like malignancy, infertility and others. In day to day practice, Shweta Pradara is one of the most common disorders. A change in life style, due to rapid urbanization, faulty dietary habits, excessive work load etc. and individual habits like negligence, shame, hesitation to submit to doctor etc. all contribute towards high incidence. Shweta pradara or white vaginal discharge afflicts women of all age groups but particularly those belonging to reproductive age group. The word leukorrhoea is very often used in relation to white vaginal discharge but this is often a misnomer. There is considerable difference of opinion in the use of word leukorrhoea. According to some authors, the word Leucorrhoea indicates a simple physiological increase in vaginal secretion and is not pathological, whereas the word Shweta pradara indicates abnormal form of vaginal discharge. To be classified as white discharge, the discharge should be white in colour, non-irritating, non- odorous should never contain blood and should be constantly present throughout the cycle irrespective of the phase of the cycle. However, many other authors used the word in a more flexible manner to include all types of abnormal vaginal discharges which are whitish in color. Shweta pradara is not a disease, but a symptom of so many diseases, however sometimes this symptom is so severe that it overshadows symptom of actual disease and woman come for the treatment of only this symptom. Leucorrhoea may also be noticed without any evident disease. Probably due to these reasons Charaka and Vagbhata etc. have prescribed only symptomatic treatment.

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