

KARNINI YONIVYAPAD W.S.R TO CERVICAL EROSION - A CASE STUDY

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ABSTRACT

Karnini Yonivyapad is compared with cervical erosion because of its clinical appearance. It is described with its pathogenesis and treatment in classical text. In present circumstances, cervical cancer is the main issue worldwide. An ideal and complete treatment of pathological erosion should be that which destroys the ectopic columnar epithelium and make a healthy cell environment so that regression of erosion will take place properly. In the present study, a patient with *Karnini Yonivyapad* is treated with *Sthanik* and *Shaman Chikitsa*. *Yoni Prakshalana* with *Triphla Kwath* and *Yoni pichu* with *Jatyadi Oil* is selected for *Sthanik Chikitsa* and *Pradrantak Loha*, *Triphla Gugglu*, *Shatavari Vati*, *Punarnava Mandoor* is selected for *Shaman Chikitsa*, which is seen to be very much effective.

Keywords: Cervical Erosion, *Karnini Yonivyapad*, *Shaman Chikitsa*, *Sthanik Chikitsa*

INTRODUCTION

Females are one of the important pillars of family and society and are the most important part of the fulfilment of the biological cycle, that's why *Nari* is said to *Apatyamula*.^[1] The word *Karnini* is derived from

'*karnin*' which means having ears, finger-like projections, barbed wire, and furnished with knots. According to *Astang Sangraha*, the disease got its name due to development of '*Karnika*' on *Gharbashaya dwar*

mukha.^[2] *Karnika* means ‘round protuberance’ ‘pericarp of lotus’ ‘small brush’ and ‘tip of an animal trunk’ In classics, *Karnika* is described as a singular growth of *Mansa* and several *Mansankur*-like pericarp of lotus. In modern science, it is the most prevalent gynaecological disorder and the most common cause of the vaginal discharge. Its prevalence is between 50-85% of all gynaecological conditions.^[3] *Karnini Yonivyapad* is one among twenty *Yonivyapad* mentioned in our classics.^[4] It can be compared with cervical erosion due to its clinical appearance. *Karnini Yonivyapad* is related to cell pathology. In cervical erosion the cervix becomes somewhat hypertrophied, congested, and covered with small red projection resembling sprouts (described by *Indu*), this erosion is often associated with Nabothian cysts which are small pea-sized smooth nodules structures, thus due to the presence of small sprouts the cervix assumes the shape of barbed wire or small brush and when associated with Nabothian cysts then assumes to the pericarp of lotus.

ETIOLOGY

According to Ayurveda texts, Due to straining during parturition in the absence of labour pains, *vayu* obstructed by the foetus, getting mixed with *Shleshma* and *Rakta* produce *Karnika* (pericarp of lotus) in *Yoni*, which obstructs the passage of *raja*. *Sushruta* is of the opinion that sleeping in the daytime, sedentary habits, salty, sour, and cold things, excessive use of liquids, and beverages, and the food stuff producing *Abhishyandi* effects are factors responsible for vitiating *Kapha*. According to Acharya *Vagbhata*, sweetish food stuff, cold environment, *Madhura*, *Amla*, and *Lavana rasa*-containing diets also play an important role

in the vitiation of *Kapha dosha*. However, if other predisposing factors of *dosha* – *dushya samurchana* at genital organs i.e excessive coitus, coitus during menstruation, multi parity, etc are present, the disease of the genital organ may occur.^[5]

COMPLICATIONS

• **INFERTILITY:**

Due to the presence of cervical erosion, there will be more mucous secretion that obstructs the cervical canal (*rajomarga*) with a thick mucus plug. It can also change the pH of the vagina and cervix. So, in these abnormal circumstances, the sperm can't reach or enter the uterus. Thus, it may lead to infertility in this way.

BLEEDING PER VAGINA:

Ulcerated erosion may cause intermenstrual bleeding. Ectopy may render the cervix more susceptible to infection with *N. Gonorrhoeae*, *C. Trachomatis*, or HIV.^[6]

AIM AND OBJECTIVES

To assess the Ayurvedic management in cervical erosion (*Karnini yonivyapada*) through *Shamana* and *Sthanik Chikitsa*.

CASE REPORT

A 32-year-old female patient, with marital life of 11 years came in OPD of Prasuti Tantra Evum Stri Roga of PAH, Parul University, Vadodara on 29th July 2022 with complaints of White Discharge per vagina, Itching and Burning Sensation on the vagina since 1 month associated with backache.

History of past illness: Not significant

Personal History: Diet- Vegetarian, Appetite- Good, Bowel- Constipated, Micturation- 4 to 5 times /day.

Table no 1: Menstrual History:

Menarche at	13 years of age
Menstrual cycle	3-4 days, Regular
Character	Dark Red colour
Consistency	Clots present
Dysmenorrhoea	Cramp like pain
Intermittent sites	Lower abdominal, low backache, legs.

LMP was on 29th June 2022

Obstetrical History: P2L2A0D0

L1: female child of 7 years with FTND

L2: male child of 5 years, LSCS

Table no 2: Ashtavidha Pareeksha

Nadi	76 bpm
Mutra	5-6 times /day, Burning
Mala	Constipated
Jivha	Saam
Shabda	Spashta
Sparsha	Anushna Sheeta
Druk	Prakruta
Akruti	Madhyama

Table no 3: Dashavidha Pareeksha

Prakruti	Vatapradhan pitta
Vikriti	Kapha
Sara	Madhyama
Samhanana	Madhyama
Pramana	Madhyama
Satmya	Madhyama
Satva	Madhyama
Ahara Shakti	Madhyama
Vyayam Shakti	Hin
Vaya	Madhyama

Table no 4: General Examination

Built	Moderate
Nourishment	Moderate
Temperature	98.3 F
RR	20/min
Pulse Rate	74/min
Blood Pressure	110/70mmhg
Height	149cm
Weight	53kg

Table no 5: Systemic Examination

RS	No obvious deformity, AEBE clear
CVS	S1 S2 audible, no murmur
CNS	Well-oriented to person, place, and time
P/A	Soft

Local Examination:

Per Speculum: Cervix – hypertrophied with erosion around cervical OS and anterior lip covering 80% of the lesion, posterior lip with 60%. Thick Curdy White discharge +++, vaginal congestion +.

Per Vagina: Anteverted, not so bulky, no tenderness on deep touch, no cervical motion tenderness, fornices free.

Investigations:

Hb – 12.6 g/dl
 Random Blood Sugar – 120.8mg/dl
 Blood Group – “A” positive
 HIV: Non-Reactive
 HBsAg test: Negative
 VDRL Test: Negative
 Urine examination- Urine sugar /albumin/bile salts/ bile pigment: Absent

Microscopic examination- pus cells: 1-2 /HPF, epithelial cells: 2-3 /HPF

Pap Smear – Negative

A smear from the cervix was taken and sent to the pathologist, to rule out any dysplasia or carcinoma. The patient was advised not to douche or have intercourse one day before taking of smear. All the precautions mentioned in the texts for preparation of pap smear were followed strictly.

Treatment Plan

In this patient, *Yoni Prakshalana* with *Triphla Kwath* and *Yoni pichu* with *Jatyadi Oil* was done one time daily for 7 days after periods, then monthly repeated for 3 sittings. *Pradrantak Loha* 500mg BD, *Triphla Gugglu* 500mg BD, *Shatavari Vati* 500mgBD, *Punar-nava Mandoor* 500mg BD for Shamana Chikitsa for

Table no 6: PASCHAT KARMA: Oral medications continue.

SYMPTOMS	BT	AFTER 7 DAYS	AFTER 30 DAYS
WHITE DISCHARGE	++++	+++	-
ITCHING	++++	++	-
ULCERATION ON CERVIX	++++	+++	+
BACKACHE	+++	++	-
GENERAL WEAKNESS	+++	++	+
PAIN IN THE LOWER ABDOMEN	++	+	-

Follow-up Study: After Completion of the course, the patient was advised to report every 7 days, which was carried out for one month. During the follow-up study

15 days. **Probable mode of action of *Yonidhavan* and *Yoni Pichu*:** *Yonidhavan* and *Yoni pichu* works as antiseptic and anti-inflammatory and wound healing action.

Method of Application

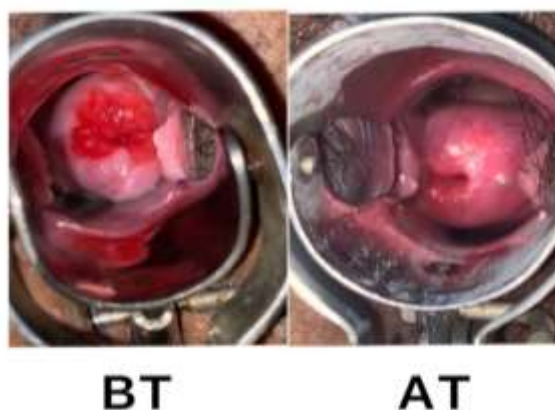
PURVA KARMA: Proper shave and part preparation were done and cleaned with distilled water.

PRADHAN KARMA

A] *Yonidhavan*: Prepare a decoction of *triphal* as mentioned in the Ayurveda text. Take it in a sterile container and rinse on the cervix exposed in the lithotomy position by using cusco’s speculum.

B] *Yoni pichu*: Prepare a tampon using a sterile cotton and gauze. Dip it in lukewarm *jatyadi taila*. Insert it into the vaginal canal in the posterior fornix of the cervix for 3-4 hours.

changes in the signs and symptoms were recorded and required investigations were repeated. After one-month cervical erosion was completely eradicated.



DISCUSSION

- *Triphla gugglu* has *Dahasamana*, *Vedanahara*, *Vrana Shodhana*, and *Ropana* properties, so was

helpful in the proper healing of erosion, It is also found to have anti- inflammatory and wound healing properties.^[7]

- **Probable mode of action of Jatyadi Oil**

Jatyadi has Anti-bacterial properties, Wound healing activity, anti-inflammatory activity, Cancer chemopreventive activity, Anti-viral activity, Anti-oxidant activity, Anti-microbial activity, Anti-Allergic activity, Anti-parasitic Activity.

It is having *Vishada, Sukshma, Sara, Vyavayi, Vikasi Guna, Ushna Virya, Vatakapha Nashaka, Vrananashaka, Lekhana, Vatavikara nashaka karma* so it was helpful in scraping of columnar epithelium and prevent from infections and promotes healing.

- **Pradrantak Loha** balances *kapha*, and *srava* due to the property of *Kapha*, It eliminates the excessive accumulation of *kapha* and reduces *Srava*[discharges]. As it contains Iron calx [*Bhasma*], it is used as a source of Iron. It has anti-anaemic properties also.
- Hormones play an important role in cervical erosion. **Shatavari** worked at the root level and bring deviations of the hormonal system back to normalcy. The presence of estrogenic compound or phytoestrogen in *Shatavari* effectively balances estrogen levels and stops bleeding. It is anti-inflammatory and antioxidant.
- In *Ayurveda*, all the diseases get manifested as a result of *Mandagni*.^[8] The modern lifestyle of the women leads to *Ama* and *Mandagni*, *Shatavari* helps in *Deepana* and *Pachana* and has a direct effect on *Agnisthana* [hampered Agni is one of the initiating factors of Vitiation of *Aartava*].

CONCLUSION

Karnini Yonivyapad is a disease having its impact on the body as well as on the mind. Ayurvedic line of management aims to give significant relief by removing the vitiated Dosha and preventing further complications. This study provided important information regarding the effectiveness of *Yoni Prakshalan* by *Triphla Kwath* and *Yoni pichu* by *Jatyadi Taila* along

with oral *Pradrantak Loha, Triphla Gugglu, Shatavari Vati, Punarnava Mandoor* proved to be effective in the management of *Karnini Yonivyapad*. Hence it may be concluded that *yonidhavan* and *yonipichu* were found to be cost-effective, curative, safe, and easy to implement.^[9]

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