

## A REVIEW OF PARIPLUTA YONIVYAPAD W.S.R. PELVIC INFLAMMATORY DISEASE ( P.I.D)

Ruby Gupta<sup>1</sup>, Jaya Srivastava<sup>2</sup>, Shashi Sharma<sup>3</sup>

1. PG scholar, Department of *Prasuti Tantra* and *Stri Roga*, State *Ayurvedic* College and Hospital *Lucknow* Uttar Pradesh
2. Lecturer, Department of *Prasuti Tantra* and *Stri Roga*, State *Ayurvedic* college and hospital *Lucknow* Uttar Pradesh
3. Professor & HOD, Department of *Prasuti Tantra* and *Stri Roga*, State *Ayurvedic* college and hospital *Lucknow* Uttar Pradesh

Corresponding Author: [deepmaladev01@gmail.com](mailto:deepmaladev01@gmail.com)

<https://doi.org/10.46607/iamj08p8032024>

(Published Online: March 2024)

Open Access

© International *Ayurvedic* Medical Journal, India 2024

Article Received: 08/02/2023 - Peer Reviewed: 05/03/2024 - Accepted for Publication: 20/03/2024.



### ABSTRACT

Twenty types of *Yonivyapad* have been described in all the *Ayurveda* Texts. All *Yonivyapad* are the significant causes of hampering the normalcy of the female reproductive system. *Paripluta Yonivyapad*" is one of the twenty *Yonivyapad*, and in these, *Vata & Pitta Dosha* is considered the primary cause. *Paripluta Yonivyapad* can be correlated with pelvic inflammatory disease. PID is a disease of the upper genital tract. Most of the women ignore their health-related problems due to unawareness and lack of knowledge of their reproductive and sexual health. PID is a public health issue. Delayed management of PID may result in higher rates of miscarriage, chronic pelvic pain, STD, progressive organ damage and long-term reproductive disability due to its recurrence. Evaluation of proper disease management not only to cure but to reduce recurrence rate through *Ayurvedic* management without any side effects.

**Key words:** *Yonivyapad*, *Paripluta Yonivyapad*, PID, *Shodhan Shaman* and *Sthanik Chikitsa*

## INTRODUCTION

Women play a vital role in the family and in society, so their health is essential in all aspects of life. Creating good offspring depends on women's health, as seeds will grow only in a prosperous and satisfactory environment. In *Ayurvedic Samhitas*, most gynaecological disorders have been described under "Yonivyapad." *Paripluta* is one of the twenty *Yoni Vyapads*. *Pitta* and *Vatadusti* are considered the primary causes of this disease. *Acharya Charaka* and *Vagbhatta* consider it a *Vata-Pittaja Vyadhi*, while *Sushruta* has mentioned it as a *Vataja Vyadhi*.

### Definition of *Paripluta Yonivyapad*

According to *Acharya Charaka*:

पित्तलाया नृसंवासे क्षवथूद्गारधारणात् पित्तसंमूर्च्छितो वायुर्योनिं दूषयति स्त्रियाः ॥  
शूना स्पर्शाक्षमा सार्तिनीलपीतमसृक् स्रवेत् । श्रोणिबंधनपृष्ठार्तिज्वरार्तायाः परिप्लुता ॥  
(च० सं० चि० ३०/२३, २४)

According to *Acharya Charaka*, it is characterised by *Shun* (swelling or inflammation), *Sparsha Akshama* (tenderness), *Arti* (unbearable pain) *Shroni Vankshana Vedna* (pain in the lower abdomen), *Prishta vedna*

(low back pain), *Jwar* (fever), and *Neel Peeta Asruk Sravat* ( blood with a blue or yellow colour flows out).

According to *Acharya Sushruta*

परिप्लुतायां भवति ग्राम्यधर्मे रुजाभृशम् ॥१०॥ (सु० सं० उ० ३८/१० व ११)

*Maharshi Sushruta* says that the condition is characterised by severe dyspareunia and other pain and aches. Both the *Vagbhatta* have followed *Charaka*; however, they have included heaviness in the bladder and lower abdomen, *Atisar* (diarrhoea), *Arochaka* (anorexia), etc. Also, in the list of symptoms, *MadhavaNidana*, *Bhavprakasha*, *Yogaratanakara*, etc., have followed *Sushruta*.

### NIDAN

मिथ्याचारेण ताः स्त्रीणां प्रदुष्टेनातिवेन च | जायन्ते बीजदोषाच्च दैवाच्च शृणु ताः पृथक् ॥  
(च०सं०चच०३० / ७, ८)

- *Mithyahara* (include abnormal diet and abnormal mode of life), Excessive indulgence in coitus,
- *Pradushta Artava* (hormonal disorders),
- *Bija Dosha* (abnormalities of sperm and ova),
- *Daiva Prakopa* (idiopathic),

***Vikaraprikriti and Adhistanantarani of Paripluta Yonivyapad are compiled as Table.***

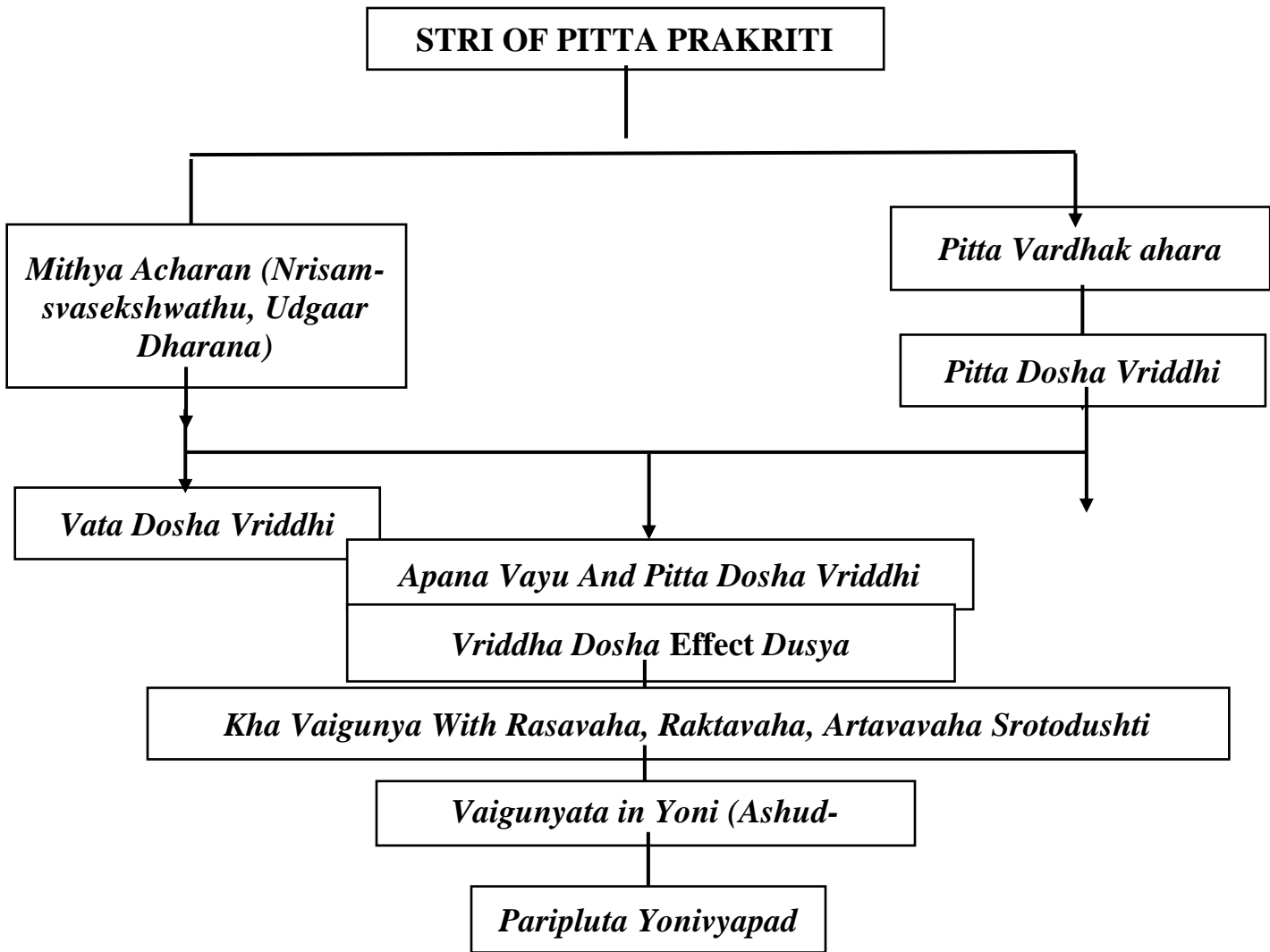
### ***Vikaraprakriti***

|                        |                         |
|------------------------|-------------------------|
| Primary <i>Dosha</i>   | <i>Vata (Apan Vata)</i> |
| Secondary <i>Dosha</i> | <i>Pitta and Kapha</i>  |

### ***Adhistanantarani***

|                    |   |
|--------------------|---|
| <i>Dhatu</i>       | <i>Rasa</i>                             |
| <i>Updhatu</i>     | <i>Artava</i>                           |
| <i>Agnimandya</i>  | <i>Jatharagnimandhya, Rasadhatvagni</i> |
| <i>Srotas</i>      | <i>Rasavaha and Artavaha</i>            |
| <i>Srotodushti</i> | <i>Sanga and Vimargagam</i>             |

**Samprapti of Paripluta Yonivyapad**



*Paripluta* seems to be the closest condition resembling Pelvic inflammatory disease (PID), so it can be correlated with Pelvic inflammatory disease described in modern literature. PID is infection & inflammation of the upper part of the female reproductive system. Pelvic inflammatory disease is a disease which starts with the vagina but later involves the uterus, fallopian tubes & ovaries along with the pelvic cavity. In today's era, PID is rising alarmingly and causes significant problems to the reproductive health of young women. Every year, more than 1 million women are exposed to pelvic infection. The incidence varies from 1-2% per year among sexually active women and in sexually active women during their reproductive age, having 85% spontaneous infection, and the remaining 15%

follow procedures which favour the organisms to ascend. The leading cause of PID is through a sexually transmitted disease (STD) such as gonorrhoea, Chlamydia trachomatis or mycoplasma genitalium. These bacteria are usually acquired during unprotected sex.

**Signs and symptoms of PID**

- Symptoms usually appear at the time and immediately after the menstruation.
- Bilateral lower abdominal and pelvic pain, which is dull.
- Abnormal vaginal discharge
- Irregular and excessive vaginal bleeding is usually due to associated endometritis
- Nausea and vomiting
- Dyspareunia

- The temperature is elevated to beyond 38.3°C.
- Abdominal palpation reveals tenderness on both quadrants of the lower abdomen. The liver may be enlarged and tender (perihepatitis).

Clinical examination reveals:

Abnormal vaginal discharge, which may be purulent.

Speculum examination shows a congested cervix with purulent discharge from the canal.

Bimanual examination reveals bilateral tenderness on fornix palpation, which increases more with the movement of the cervix (cervical motion tenderness)

Modern medicine provides local symptomatic treatment, which sometimes does not completely cure the condition. Modern medicine many drugs, such as antimicrobials, analgesics, and NSAIDs, are used to treat Pelvic inflammatory disease. This medicine can cause side effects like gastric irritation, stomach ulcer, gastrointestinal disturbance, dizziness, etc.

#### Treatment protocol

*Paripluta Yonivyapad* is caused by the vitiation of *Vata - Pitta*. Both *Doshas* together, a mixed treatment prescribed by *Yoniroga* as caused by individual *Doshas* should be done.

*Shodhana Chikitsa: Virechana Karma* and *Basti Karma*. *Basti Karma* should be given as *Yoga Basti* follows: *Anuvasana Basti* with *Sacharadi Taila*, then *Niruha Basti* with *Dashmooladi Niruha* the next morning. It will help to pacify *Dosha*.

*Shaman Chikitsa:*

*Pushyanug Churna* - 10 g twice daily *Tandulodaka* (rice-washed water) and honey. It is *Vrana Ropana*, *Krimighna*, *Raktshodhak*, *Pittaghna*, *AartvaJanana*, *Shothaghna*, *Pachana*, *Vednasthapan*, *Rasayana*, *Garbhasaya Shodhaka*, *Pradarahara*, *Balya*, *Deepana*, *Jwarahara*.

▪ *Chandra Prabha Vati* - 2 tablets bd with lukewarm water. It is *Balya*, *Vrushya*, *Sarwa Rogpranashini*, *Tridosha Nashak*.

▪ *Kanchnar Guggul* - 2 tablets BD with lukewarm water. It is *Shothhar*, *Vrana Ropana*.

*Sthanika Chikitsa*

*Yoniprakashalan* - Started after the cessation of menses given with a *Kwath* of 500 ml for 2 -3 minutes.

1. *Dashmoola Kwath* -The main aim of the treatment is *Vata Pitta Shamana*, *Vedana Sthapana*, *Yonishodhana* and *Vrana Ropana*.
2. *Panchvalkal Kwath* - It is *Kapha Shamaka*, *Sthambhaka* and has properties like *Kashaya Rasa* (astringent), antiseptic and wound healing. Because of these properties, it helps increase local cell immunity and prevents the recurrence of symptoms in patients. In *Panchvalkal Kwath*, most of the drugs are of *Kasaya Rasa*. *Kashaya Rasa* with the *Shoshana*, *Stambhana*, *Kaphapittahar* and *Kledahara Guna* acts to reduce the *Strava*.
3. *Yoni Pichu*—This started after the cessation of menses, and patients were instructed to retain the *Pichu* for 3 hours or until the urge to micturition. Patients were instructed to abstain for at least seven days and later compulsorily use the barrier method for 1 month.
4. *Panchvalkaladi Tail* - Drugs of this formulation possess *Rasa* like *Kashaya Rasa*, *Madhura Rasa*, *Tikta Rasa*, *Ruksha*, *Guru*, *Laghu Guna*, *Sheeta Virya*, *Katu Vipaka*. *Guru Guna* causes *Vata-Shamana*, *Brimhana*, having the predominance of *Prithavi* and *Jala Mahabhuta*, and *Sheeta Virya* causes *Pittashamana*, *Stambhana*, *Balya* having the predominance of *Prithavi* and *Jala Mahabhuta*. It pacifies mainly *Pitta Dosha's* dominance.
5. *Dashmoola Tail* - It has *Shothaghna*, *Jwaraghna*, *Shula Prashamana*, *Mutrala*, *Vrana Ropana*, and *Vatashamaka Guna* acts in reducing the *Strava* and Antibacterial Anti-pyretic, Spasmolytic, Uterine Stimulant properties of the drugs efficiently reduced the tenderness and helped in relieving other symptoms.

## DISCUSSION

*Paripluta Yonivyapad* (PID) is a most common female genital organ disorder which may lead to infertility. *Ayurveda* drugs have a promising role in the treatment of *Paripluta Yonivyapad* (PID). The review has successfully narrated all detailed information regarding

the treatment of Paripluta Yonivyapad (PID) and the prevention of infertility and any other complications.

## CONCLUSION

*Paripluta Yonivyapad* is a *Vata-Pittaja* disorder. Aggravated *Pitta* associated with *Vata* reaches *Yoni* and leads to *Paripluta Yonivyapad*. Pelvic Inflammatory Disease presents with bilateral lower abdomen pain associated with tenderness, dyspareunia, vaginal discharge which is mucoid or mucopurulent in nature & menstrual irregularities. A similar clinical presentation can be seen in *Paripluta Yonivyapad*. The management is based on the *Doshic* vitiation i.e., *Vata-Pitta Shamaka* and *Shothaghna* and *Ropana* property. It can be managed in *Ayurveda* by following an extensive treatment protocol by oral and local therapy, thereby its complications and recurrence can be curbed effectively.

## REFERENCES

1. D.C. Dutta. Textbook of Gynaecology including contraception. 8th edition. Kolkata: New Central Book Agency p.105
2. Aacharya Sushruta. Sushruta Samhitha with the Nibandhasangraha commentary of Sri Dalhanacharya edited by Vaidya Yadavji Trikamji Acharya and Narayan Ram Acharya Kavaytirtha. Varanasi: Chaukhamba Sanskrit Sansthan.; 2010.p.668.
3. Premavati Tewari. Ayurveda Prasuti Tantra evam Stri Roga. 2n edition. Part 1. Varanasi. Chaukhamba Orientalia; 2009.p.7.
4. Maria Trent, Debra Bass, Catherine Haggerty. Recurrent PID, Subsequent STI, and reproductive health outcomes: findings from the PID evaluation and clinical health (PEACH) study. Sex Transm Dis.2015; 38(9):879-81.
5. J Stanley, J Robboy, C Malcolm. Pathology of Female Reproductive Tract. N Engl J Med 2003; 348:2267-8.
6. Agnivesha. Charaka Samhitha with Ayurvedadipika commentary. chikitsasthana. Reprint edition. Varanasi: Chaukhamba Prakashan; 2013.p.634.
7. Aacharya Vagbhata. Ashtanga Sangraha with Sasilekha commentary by Acharya Indu, edited by Shivaprasad Sharma. 2<sup>nd</sup> edition. Varanasi: Chaukhamba Sanskrit Adhishthan; 2008.p.830.
8. Premavati Tewari. Ayurveda Prasuti Tantra evam Stri Roga. 2n edition. Part 1. Varanasi. Chaukhamba Orientalia; 2009.p.7.
9. Sri Madhavakara. Madhavanidanam edited by Vaidya Jadavji Tricumji Acharya. 6th edition. Varanasi: Choukhamba Sanskrit Sansthaan; 2001.p.382.
10. L Barbara, Hoffman. Williams Gynaecology. 2nd edition. USA: McGraw Hill Companies Inc; 2012.p.97, 55.
11. J.L.N Sastry. Dravyaguna Vijnana. 3rd edition. Vol 2nd. Varanasi: Choukhamba Visvabharati; 2008.p.152.
12. The Ayurvedic Pharmacopoeia of India. 1st edition. Vol. I. New Delhi: Government of India; 2001.p.127-8.
13. Article: Malika Choudhary, Rashmi Sharma. Ayurvedic management of Paripluta Yonivyapad - A Review

**Source of Support: Nil**

**Conflict of Interest: None Declared**

How to cite this URL: Ruby Gupta et al: A review of paripluta yonivyapad w.s.r. pelvic inflammatory disease ( p.i.d). International Ayurvedic Medical Journal {online} 2024 {cited March 2024} Available from: [http://www.iamj.in/posts/images/upload/242\\_246.pdf](http://www.iamj.in/posts/images/upload/242_246.pdf)