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## **EVALUATION OF KARANJA CHURNA IN THE MANAGEMENT OF** SHWETAPRADAR W.S.R. TO LEUCORRHOEA - A CLINICAL TRIAL

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## **ABSTRACT**

## **Background And Aims:-**

Shwetapradar (Leucorrhoea) is one of the most common of all gynecological complaints. In our text Shwetapradar is described directly or indirectly in many Yonirogas as a symptom. In the present study we have used Karanja Churna for oral route with the aim to validate the directives of classics on parameters of a systematic and scientific research work. Karanja Churna is having Kaphavatashamak, Yonidoshahrita Krimighna, Kandughna, Kushthaghna, Shothahara, Vedanasthapana, Vranasodhana, Vranaropana, Raktaprasadana, Deepana, Pachana, Yakriduttejaka property which lead to Samprapti Vighatana and successfully control & cure Shwetapradar.

The aim of the study is to evaluate of the effects of *Karanja Churna* in the management of *Shwetapradar*.

## **Material And Method:-**

The method adopted in present study is clinical, open study. This study was done on 15 patients selected from O.P.D. having complaints of leucorrhoea and who fits in inclusion criteria. Patients were given Karanja Churna orally as per decided protocol. All the patients' results were assessed subjectively and objectively.

#### **Conclusion:-**

This can be made out from the study that Karanja Churna is effective in management of shwetpradar and associated symptoms.

**Keywords:** Shwetapradar, Leucorrhoea, Karanja Churna, Kaphavatashamak Yonidoshahrita, Krimighna, Kandughna.

#### INTRODUCTION

Females are one of the important pillars of family and society. The specific body structure and specific deviation of metabolism of females makes them more prone for infections in reproductive age as childbearing period and they are the workforce in a family, bearing burden of other family members health too. Shwetapradar (Leucorrhoea) is an irritating and disturbing complaint in reproductive age group females in now-a-days. Shwetapradar (Leucorrhoea) is a condition characterized by excessive white vaginal discharge. In our classical text direct explanation or chapter regarding Shwetapradar is not mentioned. It is described as a symptom of various diseases. Commentator Chakrapani has explained Pandura-Asrigdara(1) as Shwetapradar & Indu explains it as shukla asrigdara. In the present study Karanja Churna has been selected for the oral route.

Shwetapradar is one of the most common gynecological complaints. The prevalence of leucorrhoea in India is estimated to be 27.47%<sup>(2)(3)</sup>. Abnormal vaginal discharge also predisposes significant morbidity in the form of pelvic inflammatory diseases, infertility, endometriosis, urethral syndrome, pregnancy loss, preterm labour etc. It could be embarrassing, painful and may cause a lot of discomfort, stress and even affect sexual preferences and libido. Conventional medical treatments may help to relieve symptoms of leucorrhoea, but they do not address the root of the problem. So, in contemporary era it is very important to provide *Ayurvedic* remedies for particular treatment of *Shwetapradar* (Leucorrhoea).

The aim of the study is to assess the clinical efficacy of *Karanja Churna* in the management of *Shwetaprada*.

#### Material and methods:

#### Selection of cases-

A total of 15 clinically diagnosed and confirmed cases of *Shwetapradar* were registered for the clinical trial. The cases were selected from the O.P.D. of P.G. Department of *Prasuti & Striroga*, National Institute

of Ayurveda (N.I.A.) Hospital, Jaipur.

## Criteria for Selection of patients-

#### A. Inclusion criteria:

- Patients complaining of *Shwetsrava* per vagina as a cardinal symptom.
- Reproductive age group patients between 18 to 45 years.

## B. Exclusion criteria:

- Female less than 18 yrs and more than 45 years of age.
- Menopausal women, Pregnant women, Unmarried girls.
- Patients suffering from any type of malignancy/ systemic disease/ cervical polyp/ hepatic disorders.
- Patients suffering from positive VDRL, HIV, HBsAg.

## Methods of administration & dose of drug:

- 15 patients were selected for clinical trial from opd.
- Patients were given karanj churna orally according to decided protocol.

Dose: 3 gm BD daily (Started after cessation of menses up to 3 weeks)

## **Subjective Parameters:**

- 1. Shwetsrava per vagina
- a) Amount
- b) Color
- c) Consistency
- 2. Vulval itching.
- 3. Foul smell
- 4. Backache
- 5. Pain in lower abdomen
- 6. Local tenderness
- 7. General weakness

## **Objective criteria:**

 Routine blood investigation: - CBC, ESR, HIV, HBsAg, VDRL, MT, RBS, TSH were advised to all the patients before and CBC, ESR after the

- completion of trial.
- 2. Complete urine examination- It was advised to all the patients to rule out any urinary tract infection.
- 3. Vaginal swab for wet mount and culture.
- 4. Pap smear.
- 5. USG of uterus and adnexa- To rule out any pelvic pathology.

## **Observations:**

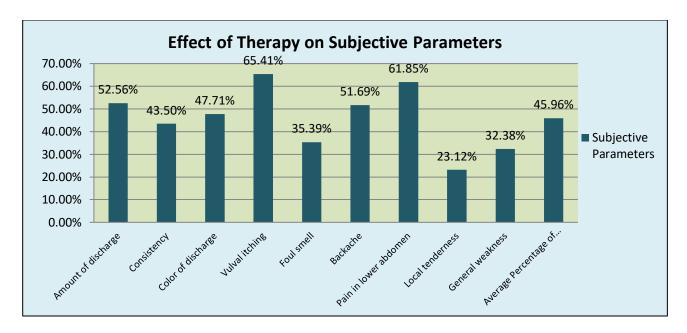
In maximum 40.00% patients, charater of vaginal discharge was mucopurulent while vaginal discharge was mucoid in 31.11% and in 20.00% patients had watery discharge. Only 8.89% patients had curdy white discharge. In the present study, data shows that 66.67% patients were having vulval itching, 66.67%

were having foul smell discharge, 82.22% patients were having backache, 64.44% patients were complaining of pain in lower abdomen, 71.11% patients were having local tenderness, and 88.89% patients were having general weakness.

In cervical examination, cervix was found to be healthy in 62.22% of patients, cervical erosion was found in 20.00% of patients while cervix was found to be hypertrophied in 17.78% of patients. In the present study, 33.33% patients had physiological discharge, 40.00% patients were of E.coli infection, 17.18% patients had pus cell contain discharge and 8.89% patients were of candida albicans infection.

Results: Table No 1: Shows the % improvement of subjective parameters:

S.No.	subjective parameters	BT	AT	Diff.	% Imp.	SD	SE	P value	Sig
1.	Shwetsrava per vaginum								
	Amount	2.53	1.20	1.33	52.56%	0.89	0.23	0.001	ES
	Consistency	2.00	1.13	0.87	43.50%	0.83	0.21	0.003	VS
	Colour	1.53	0.80	0.73	47.71%	0.70	0.18	0.003	VS
2.	Vulval itching	1.33	0.47	0.87	65.41%	0.83	0.21	0.004	VS
3.	Foul smell	1.13	0.73	0.40	35.39%	0.51	0.13	0.0313	S
4.	Backache	2.07	1.00	1.07	51.69%	0.79	0.21	0.001	ES
5.	Pain in lower abdomen	1.73	0.67	1.07	61.85%	0.79	0.20	0.001	ES
6.	Local tenderness	1.73	1.33	0.40	23.12%	0.63	0.16	0.0625	NS
7.	General weakness	2.47	1.67	0.80	32.38%	0.68	0.17	0.002	VS



**Table No 2: Shows the % improvement of objective Parameters:** 

S.No.	objective Parameters	BT	AT	Diff.	% Imp.	SD	SE	T	P value	Sig
1.	Hb (gm%)	11.69	12.09	0.40	3.42%	15	0.59	0.15	2.60	0.020
2.	ESR	17.47	12.27	5.20	29.78%	15	6.9	1.78	2.91	0.011
3.	TLC	8180.0	7746.7	433.33	5.29%	15	1051	271.45	1.596	0.132
4.	Neutrophill	60.0	57.27	2.73	4.55%	15	5.24	1.35	2.02	0.063
5.	Eiosinophill	3.00	2.93	0.06	2.00%	15	1.66	0.43	0.15	0.879
6.	Monocytes	3.67	3.13	0.53	14.72%	15	0.91	0.23	2.26	0.04

Abbreviations used in the tables- BT=Before Treatment, AT=After treatment, S=Significant, NS=Not significant, VS=Very significant, ES=Extremely significant

## **DISCUSSION**

Leucorrhoea is a condition characterized by excessive white vaginal discharge. It may be thick or viscid and foul smell if it is caused by some infections. Most common cause of symptomatic vaginal discharge is bacterial vaginosis (33-47%) followed by candidiasis (20-40%) and trichomoniasis (8-10%) Multiple infections can also coexist.

## Probable mode of action

- *Yonidoshahrita* Elliminate all doshas of yoni clean the vagina.
- Restrain Srava -Tikta, Kashaya & Katu Rasa, Ruksha, Tikshna Guna property.
- Vyadhipratyanik- Kaphavatashamak, Kaphaghna, Shwetapradarhar - vatashaman
- Krimighna-Inhibit the growth of microorganism, reduce foul smell.
- Kandughna, Kushthaghna –Reduce vulval itching.

- *Shothahara* –Anti-inflammatory property- Reduce local tenderness.
- *Vedanasthapana*—Reduce lower abdominal pain & backache.
- *Vranasodhana*, *Vranaropana* Rejuvenate the epithelium.
- Deepana, Pachana, Yakriduttejaka- Amadoshapachana
- Raktashodhana- probably to maintain and rectify the hormonal imbalance as well as cleanse the inflammatory tissues and environment.

## CONCLUSION

From this study we can markeout that karanja churna is effective in relieving the symptoms of *shwetpradar* i.e. Amount of discharge, Consistency, Color of discharge, Vulval itching, Foul smell, Backache, Pain in lower abdomen, Local tenderness, General weakness.

We conclude from the study that oral use of *karanja churna* is very effective in management of *shwetpra-dar* and can be used for the same.

## **REFERENCES**

- Agnivesha, Charaka Samhita, Chikitsa Sthana,30/116 revised by Charaka and Dridhabala with introduction by Vaidhya-Samrata Sri Satya Narayana Sastri with elaborated Vidyotini Hindi Commentary by Pt. Kashinatha Sastri and Dr. Gorakha Natha Chaturvedi, publisher: Chaukhambha Bharti Academy, Varansai Reprint – 2011, p.-858.
- 2. Thulkar, J., Kriplani, A., Aggarwal, N., Vishnubhatla, S., Indian J Med Res 2010, 131, 83-87.
- 3. www.ncbi.nlm.nih.gov/pubmed/16479906 by RN Kul-

karni

- Vagbhatta, Ashtanga Samgraha with Hindi Commentary Vol.2, Uttara Sthana 38/32, with Hindi Commentary by Kaviraj Atrideva Gupta foreword by Rajvaidya Pandit Sri Nandakishor Sharma BhishagAcharya, Chaukhambha Sanskrit Series, Reprinted 2005 Krishnadas Academy, Varansi, p.-331.
- Vagbhatta, Astanga Hridaya with English Translation, Notes, Appendix and indices, Vol.3, Uttara Sthana 33/32, Translated by Prof. K. R. Srikantha Murthy, publisher-Chaukhambha Krishnadas Academy, Reprinted 2008, Chaukhambha press Varansi;p.- 305 pp311.

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