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Contribution of Yoni Pichu Chikitsa with Ancient Ayurved Formulation in the Management of Karnini Yonivyapada with Special Reference to Cervical Erosion: A Case Report

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Abstract---Cervical erosion is a very frequent gynaecological condition. Because of its chronicity and recurring nature, this benign lesion can be quite bothersome at times. In this condition, the ectocervix's squamous epithelium is replaced by columnar epithelium that is continuous with the endocervix. According to the treatment and some clinical aspects, it is more similar to the Karnini Yonivyapada in Ayurveda. A 30-year-old woman presented to the OPD with a complaint of white discharge from the vaginal area for the past 7-8 months, which was accompanied by pain. Based on the symptoms and tests, the patient was diagnosed with Cervical Erosion. Cryosurgery and diathermy are used in Western medicine Ayurvedic medicine to kill the columnar epithelium and encourage the creation of new healthy stratified squamous epithelium, similar things are done in Ayurveda based on its basic principles. However, other side effects such as prolonged mucoid discharge from the vaginal canal, cervical stenosis, bleeding, and sickness recurrence are conceivable. As a result, Ayurvedic treatment looks to be more practical, effective, cost-effective, non-surgical, and with less side effects than conventional treatments.

Keywords---Ayurved formulation, cervical erosion, Karnini yonivyapad, special reference.

Introduction

Cervical ectopy is another name for cervical erosion. It is the most frequent gynaecological ailment found in OPDs and is a benign lesion. During the reproductive age range, it is the most prevalent finding on routine pelvic examination. The squamous covering of the vaginal side of the cervix, which is normally continuous with that lining the endo-cervix, is replaced by columnar epithelium [1]. Because of the underlying vascularity, the erosion appears brilliant red. It isn't a fixed situation. The demarcation line between the two epithelial layers goes from the exterior os to the inside os. When the erosion reaches the os, it is said to be healed. During this process, ducts get obstructed, resulting in nabothian cysts. In comparison to squamous epithelium, columnar epithelium is more susceptible to infection [2].

There is no clear mention of the *Karnini Yonivyapad* in the text, despite its likeness to cervical erosion. Cervical erosion has a similar etiopathogenesis, clinical features, and therapy strategy [3]. The symptoms of cervical erosion, such as discharge and erosion (as in *Karnika*), as well as the Ayurvedic treatment, might be linked to the *Karnini Yonivyapad*. We may deduce from the aetiology that *Karnini* is primarily a disease of reproductive age (Charak Samhita Chikitsa 30/27, 28) [4] and is more usually found in sexually active women. Only *Karnini Yonivyapada* is linked to cell pathology among all *Yonivyapada*. The *vata* is vitiated by *Nidana sevan (apana vayu)*. Because *kha-vaigunya* is present in the *artavaha srotas*, the vitiated *vata* mixes with the *kapha Dosha* and the *rakta dhatu*, completing the *dosha dushya sammurchana*. This ailment can be efficiently treated with Ayurvedic treatments such as *lekhana, sodhana, ropana, stambhana, kaphaghna, Vranaropaka, vranashodhaka, and kaphapittashamak. Shodhan, Shaman*, and local therapy are used to treat *Karnini Yonivyapada*. [5]

Etiology

Erosion may be congenital or acquired:

- CONGENITAL- The columnar epithelium of the endocervix spreads beyond the external os in around one-third of instances at birth. This state lasts only a few days before the level of estrogen produced by the mother drops. As a result, the congenital ectopy recovers on its own.
- ACQUIRED-
 - Hormonal: The squamocolumnar junction is not static, and oestrogen influences its inward or outward migration. When estrogen levels are high, the columnar epithelium expands and replaces the squamous epithelium on the vaginal region of the cervix. This happens frequently during pregnancy and in 'pill users.' Three months after delivery, the squamocolumnar junction returns to its normal position, and a little sooner when the 'pill' is removed.

- Infection: Ectopy is no longer assumed to be caused by infection. Chronic cervicitis may be linked to an ectopy, or the infection may supervene on an ectopy, due to the delicate columnar epithelium, which is more susceptible to damage and infection.[6]

Clinical features

- SYMPTOMS- The lesion may be asymptomatic. The following symptoms, however, may be present:
 - Vaginal discharge: It's possible that the discharge is overly mucoid. In the presence of infection, it may be mucopurulent, unpleasant, and irritating; it may even be blood-stained due to premenstrual congestion.
 - Contact bleeding, especially during pregnancy, and the usage of 'pills,' either after coitus or after defecation, may be linked.
 - Backache, pelvic pain, and infertility are all symptoms of cervicitis.
- SIGNS- Internal examination reveals:
Per speculum— In the ectocervix, there is a brilliant red region that surrounds and extends beyond the external os. The boundary between the inside and outside is well defined. It's possible that the lesion is smooth or has minor papillary folds. It isn't painful or bleeding when touched. Multiple seeping patches may appear while rubbing with a gauze piece (sharp bleeding in isolated spots in carcinoma). The texture is soft and grainy, creating a grating effect [7].

Material and Methods

The current case study was conducted using excellent clinical practice recommendations, cervical erosion research, and Ayurvedic literary references. Before beginning treatment, the patient gave written informed consent.

Case report

A female patient of 30 years came to Out Patient Department of *Prasuti Tantra & Streeroga*, MGACH & RC, Salod(H), WARDHA on 1 Aug. 2020 with the complaint of white discharge per vaginally since 7-8 months associated with backache and symptoms affecting her day-to-day life, her menstrual history was normal. Patient has taken treatment at different modern government hospitals, got mild relief but reoccurrence occur. So, for further treatment she approached to MGACH&RC Hospital. Patient is from a middle socioeconomic class and eats a variety of foods. Her appetite was good, and she had regular bowel and urine habits. Patient presenting with history or complaint of vaginal discharges were examined by per speculum examination. Both cervix lips were eroded on speculum inspection, thick white discharge was visible, vaginal wall was normal, and blood seeping was present upon rubbing with gauze piece. The case was initially diagnosed as cervical erosion, and a series of tests were performed.

Investigations

- Blood: Haemoglobin, DLC, TLC, ESR, RBS, HIV, VDRL.
- Urine: Routine & Microscopic examination= Normal.

- Pap's smear for cervical cytology= negative for intraepithelial malignancy.
- USG: Normal

Now she was diagnosed as a case of Cervical Erosion after evaluation of all investigations reports and the symptoms which she told.

Treatment

Udumbaradi Taila

After taking written informed consent from the patient application of drug can be done. On the third day of menstruation patient was called for application of Udumbaradi taila. The lithotomic position can be given to the patient & all aseptic precautions can be done. Now the Cusco's speculum inserted through vagina to exposed the cervix and cleaned properly. A gauze piece soaked with Udumbaradi taila can be taken and kept in contact with cervix. For 4 to 6 hours, pichu soaked in taila was held inside the vagina. It was held in the cervix in such a way that some thread remained outside the vaginal opening. The patient was given clear instructions on how to remove the pichu by grasping this thread. This technique can be repeated again for a total of 14 days. To see the symptomatic relief, after completion of the treatment patient called weekly [8].

Yashtimadhu Ghrita

Among all the unique formulations mentioned in Ayurveda having properties of *Vranaropaka* and *Vranashodhaka* one of them is *Yashtimadhu Ghrita*, which gives best result in cervical erosion. *Pichudharana* is the specific procedure in all *vrana* specially in *Yonigat roga*. Before administering the *pichu*, patient was asked to empty the bladder and to lie in lithotomy position on the examination table. With antiseptic solutions under aseptic precautions vulval & vaginal parts were cleaned. Now the pichu (sterile cotton boll) which is covered with sterile gauze piece was soaked in *yashtimadhu ghrita* and inserted in vagina for 1 hour or till she has a sensation of micturition. Tail was made by using a gauze piece so that patient can removed it by herself at the end of procedure after sitting in squatting position [9].

Table 1
Yashtimadhu pichudharana done for consecutive 2 weeks for two menstrual cycles.

SR.NO.	FOLLOW UP DAYS	APPEARANCE OF CERVIX
1.	7th	Red in color
2.	15th	Pink in color
3.	30th	Whitish pink color 65%
4.	45th	Whitish pink color 80%
5.	60th	Normal appearance 100% healed

Discussion

As a result of frequent births, cervical erosion is more common in the reproductive age period, i.e., 20-35 years; there is local damage in the Cervix, which can induce erosion. Various symptoms such as vaginal discharge, contact bleeding, back pain, pelvic discomfort, and others are produced as a result of cervical gland hyperplasia, which are disruptive factors in the everyday life style of the patient. In this situation, the vaginal discharge had vanished earlier. The usage of the *Udumbaradi tail* is thought to avoid congestion or hyperemia, and therefore the regeneration of surface columnar cells. The majority of the drugs in *Udumbaradi tail* have anti-inflammatory, anti-septic, and anti-microbial properties, which protect the eroding region from infection and may also help to reduce vaginal discharge [10].

Vrana is a disorder that causes discolouration, and *Yashtimadhu* is the best treatment for *Vranaropan* (wound healing). Glycyrrhizin & Saponine is commonly used as an inflammatory agent, and it comprises glycyrrhizin and asparagines as active components. Asparagines are a type of amino acid that has analgesic and anti-inflammatory properties. In *Vrana*, it also acts as *Vatahara*, *Pittashamak*, *Ropak*, *Dahashamak*, and *Stambak*. *Ghrita* also lowers *Rukshata* and has a relaxing effect. *Goghrit* also contains Vitamins A, D, E, and K, which function as antioxidants and aid in the prevention of oxidative injury to the body. Linoic acid aids in granulation, and vitamin K maintains epithelial tissue of the body intact, which is beneficial in the healing of wounds such as cervical erosion [11]. Related studies reflecting on this issues were reviewed [12-18].

Conclusion

As a result of this study, we can say that cervical erosion is well treated with this ayurvedic regimen. As a result, we can conclude that in this case, *bahirparimarjan chikitsa* in the form of *Udumbaradi tail* is particularly effective in dissolving the pathophysiology of *Karnini yonivyapad* (cervical erosion). There are no side effects or complications associated with this medication. This procedure is safe, inexpensive, non-surgical, and very effective for treating cervical erosion. *Yashtimadhu ghrita* is one of the rare Ayurvedic formulations with *Vranaropaka* and *Vranashodhak* characteristics. As a result, *Yashtimadhu ghrita* tamponing may be a superior option for treating cervical erosion.

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