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Application of Arkakshara & Durvadi Taila Yoni Pichu in Cervical Erosion (Garbhashaya Grivamukhgata Vrana) - A Case Report

¹Rashmi Sharma, P.G., Department of Prasuti Tantra and Stri Roga, PGIA, Dr. S.R. Rajasthan Ayurved University Jodhpur, Rajasthan.

²Rajesh Gupta, P.G., Department of Shalya Tantra, PGIA, Dr. S.R. Rajasthan Ayurved University Jodhpur, Rajasthan.

Corresponding Author: Rashmi Sharma, P.G., Department of Prasuti Tantra and Stri Roga, PGIA, Dr. S.R. Rajasthan Ayurved University Jodhpur, Rajasthan.

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Abstract

Background: The original passage discusses cervical erosion, a common cause of vaginal discharge in women. It explains that in this condition, the ectocervix (the outer part of the cervix) is covered by columnar epithelium instead of the typical squamous epithelium. This change results in the appearance of what's described as Garbhashaya Grivamukhgata Vrana, depending on how long the condition has been present. Traditionally, contemporary medicine treats cervical erosion using invasive techniques such as electric cauterization or cryosurgery. However, the text highlights an alternative, less invasive treatment called Kshara Karma with Yoni Pichu. Thisapproach aims to remove the ectopic columnar epithelium.

Case presentation: In the present study, a 37-year-old woman diagnosed with cervical erosion(Garbhashaya Grivamukhgata Vrana) was treated with Arkakshara (Pratisarainiya Kshara-external/local application) for seven sittings each on alternate days for two cycles, started after 2days of cessation of menstruation and Durvadi Taila Yoni Pichu for continuous 14 days for 2 consecutive cycles. After treatment significant reduction in the extent of cervical erosion was observed and the patient got relief in associated complaints.

Conclusion: From this case report, it can be concluded that Kshara Karma with Arkakshara and Durvadi Taila Yoni Pichu may be used as a safe, holistic, painless and economical option for treating the cervical erosion.

Keywords: Cervical Erosion, Garbhashaya Grivamukhgata Vrana, Kshara Karma, Yoni Pichu

Introduction

Women often prioritize the well-being of their families and children, often postponing their own self-care. With the increasing number of women joining the workforce in this competitive era, there's a growing trend of neglecting their own health. Additionally, women in rural areas might be hesitant to undergo vaginal examinations, which can lead to missing any abnormal cervical changes. This underscores the importance of women maintaining their overall reproductive health. These health issues can be quite distressing. Cervical ectropion which is also called cervical ectopy or erosion occurs when eversion of the endocervix exposes columnar epithelium to the vaginal milieu. Cervical erosion is one of the most common gynecological problems found in approximately 15 % of women. Besides dealing with natural processes like

menstruation and pregnancy, women may also face the inconvenience of cervical erosion which presents symptoms such as vaginal discharge, vulval itching, vulval burning, backache, infertility, and the potential for malignancy in the chronic stage. In the context of Ayurvedic medicine, cervical erosion can be likened to Garbhashaya Grivamukhgata Vrana due to its resemblance to the features of Vrana as described in the ancient texts. Although there is no direct description of Garbhashaya Grivamukhgata Vrana in Ayurvedic classics, Ashtang hruday references it in the context of Yonivranayekshana Yantra. From the characteristics of cervical erosion, it can be inferred that it typically manifests as a Nija/Agantuj, Khapha -Pittaj, Twaka Mamsa type of Vrana located in the Griva of Garbhashaya (Cervix). Acharya Sushruta, an important figure in Ayurveda, dedicated a special chapter to the management of Vrana and explained how to address Doshaja Vrana from its initial stages, including Vrana Shotha.

Case presentation

A housewife, a 37-year-old woman with a 19-year-long marriage, visited the OPD of P.G. department of Prasuti Tantra & Stri Roga at the Sanjivini Hospital, PGIA, Dr. S.R. Rajasthan Ayurved University, Jodhpur on August 8, 2023. She complained of experiencing white vaginal discharge for 12 years, coupled with backache for one month and pelvic pain (on and off) since 12 years.

History of Present illness

The individual received treatment from various allopathic government hospitals, experiencing slight relief but facing recurring issues. To seek additional treatment, she visited the OPD of P.G. department of Prasuti Tantra and Stri Roga.

History of Past illness: Nothing significant.

Personal history

Diet – Vegetarian, Appetite -moderate, Bowel habit – Regular, Micturition: Normal

Menstrual history: Has regular menstruation with duration of 3-4 days with the interval of 28-30 days.

Obstetrical history: She had one live child (female, 4-year-old, normal vaginal delivery) and one spontaneous abortion, one year back (7 to 8 wks of gestation). (G2P1A1L1)

Ashtavidha Pariksha: Nadi: 80/min, Mutra, Mala, Jihwa, Shabda, Sparsha, Drik & Akriti were normal.

Dashavidha Pariksha: Prakriti – Vata Kapha, Vikriti - Prakriti Samsamavaya, Sara- Meda, Pramana - Madhyama,

Satmya - Sarvarasa, Satva - Madhyama, Ahara Shakti - Madhyama, Vyayama Shakti -

Madhyama, Vaya – Madhyam.

General examination: Built -Obese, Nutrition- Average, Stature -Normal, Pallor- Absent, Icterus - Absent, Teeth,

Gums and Tonsils - Normal, Neck - Normal, Edema of legs - Absent, Weight-75 kg, Height -157

cm, Temperature-A-febrile

Systemic examination: No abnormality detected

Gynecological examination

- A) Breast examination: No abnormality detected
- B) Abdominal examination: mild tenderness present in hypogastric region.
- C) Pelvic examination:

Inspection of external genitalia: No abnormality detected

Per speculum examination:

a) Vaginal discharge: Amount -Excessive, Colour-Whitish yellow, Consistency-thick, Foul smell – present

b) Vaginal mucosa: Congestion present

c) Cervix: Size - Normal, shape - Normal, Colour- dark red, Extent of erosion - Whole cervix, Nabothian cyst- present

Per vaginal examination

a) Vaginal wall: Tenderness - Non-tender

b) Cervix: Position: Downward, Consistency: firm, Mobility: freely mobile, Tenderness: mild-tenderness present

c) Uterus: Size: Normal, Shape: Regular, Position: Retroverted and Retroflexed, Mobility: freely mobile, Tenderness:

Mild-tenderness present

d) Fornices: Mild-tenderness present in all fornices

Laboratory investigations

Complete blood count	Hb – 10.2 g%, TLC: 7560/mm3, DLC: WNL
Erythrocyte sedimentation rate	18 mm/hr
Random blood sugar	82.6mg/dl
Liver function test and Renal function test	WNL
Complete urine examination- (routine & microscopic)	WNL
Vaginal pH	5.3 (It was noted down with the help of pH indicator strips).
Pap-smear	Inflammatory smear (Grade-I), Negative for Intraepithelial
	Lesion or Malignancy
USG (Pelvis)	Uterus and ovaries normal in size and shape, Multiple
	nabothian cyst varying size largest of size (10X12mm) seen
	at junction of uterus and cervix.

Final diagnosis: Cervical erosion (Garbhashaya Grivamukhgata Vrana)

Treatment Given: Kshara Karma with Arkakshara (approx.2gm) and Durvadi Taila Yoni Pichu (10ml).

Methods of Arkakshara Application

Arkakshara was applied after two days of cessation of menstrual flow. Patient was kept in lithotomy position and cervix was exposed with the help of Cusco's bivalve speculum. The mucous of cervix was cleaned with sterile gauze piece and Arkakshara was applied over the erosion with gauze kept at the tip of sponge holder and kept in contact on eroded part of cervix for two minutes. When cauterized area became dark violet in colour then area washed with sterile water. Then luekwarm Durvadi Taila Pichu will be kept over the eroded area of the cervix. Application of Arkakshara for seven sitting, on alternate days and Durvadi Taila Pichu was kept over the eroded area of the cervix for 14 days, for two consecutive cycles.

Follow up Study

After completing the initial Kshara Karma treatment, the patient was requested to return on the fifth day of their subsequent menstrual cycle for evaluation. During this visit, an assessment was carried out, and a second round of Kshara Karma was administered. The final evaluation of subjective indicators and the extent of erosion were conducted following the subsequent menstrual cycle.

Result

In the initial cycle, there was a decrease in redness of the cervix, white discharge, albeit only slightly in the extent of erosion. After two courses of Arkakshara Karma and Durvadi taila Yonipichu, a full recovery was achieved in the volume of white discharge, complete subside of nabothian cyst and the extent of erosion. Additionally, there was a moderate alleviation in tenderness in cervix and lower back pain.



Before Treatment

After Treatment

Discussion

Kshara Karma is considered superior to other surgical or parasurgical interventions due to its functions involving Chedana, Bhedana, Lekhana, and Patana Karma. Kshara possesses properties such as Katu (pungent), Ushna (hot), Tikshna (sharp), Vilayana (liquefying), Shodhana (cleansing), Ropana (healing), Shoshana (drying), Stambhana (contracting), Lekhana (scraping), Krimighna (anti-parasitic) and Kaphanashaka (mucus-reducing). vThese properties make Kshara an ideal treatment for cervical erosion as it is capable of disintegrating the columnar epithelium (Vrana Shodhan). After Kshra Karma additional measures like Parisheka (irrigation), Lepa (ointments) and Pichu can be appliedvi for the regeneration of new squamous epithelium (Vrana Ropana).

Arkakshara is having Katu, Tikta Rasa, Ushna Virya, Kandughna, Vranashodhak, Vranaropak, Shothhar, Krimighna etc. properties.vii and its pH is 10.47 (from analytical study) by this it is strongly alkaline and hygroscopic, which might be responsible for corrosive action i.e., destruction of columnar epithelium. Durvadi Taila is having Vranashodhak, Vranaropak, Raktshodhak, Dahashamak etc. propertiesviii which helps in adding regeneration of cervical epithelial cells. Combined effect of Arkakshara & Durvadi Taila Yonipichu facilitate destruction of columnar epithelium and helps in the

re-epithelisation of healthy stratified squamous epithelium on ectocervix and may help in resolving sign and symptoms of cervical erosion.

Conclusion

Cervical erosion, if left untreated, can lead to related infections such as HPV and potentially result carcinoma of cervix in developing countries like India. Arkakshara and Durvadi Taila Yoni Pichu by their Vranashodhak, Vranaropak, Shothhar, Krimighna etc. properties may be useful for treating the cervical erosion without recurrence and any complications.

Declarations

Ethics approval consent to participate

This study was conducted with the approval of the DSRRAU, Jodhpur, Institutional Ethics Committee (Date-12/06/2022)

Consent for publication

Written informed consent was obtained from the patient for the publication of this case report and any accompanying images.

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