

INTERNATIONAL JOURNAL OF MULTIDISCIPLINARY HEALTH SCIENCES

ISSN: 2394 9406

"ROLE OF STHANIK CHIKITSA IN PRASRAMSINI YONIVYAPADWITH SPECIALREFERENCE TO POP PEVLIC ORGAN PROLAPSE ($1^{\rm ST}$ AND $2^{\rm ND}$ DEGREE UTERINE PROLAPSE) – A CONCEPTUAL STUDY"

Dr. Gauri Shivaji Thokal¹ Dr.Sachin Patil² Dr.Hemalata Kongi³

L.R.P. Ayurvedic Medical College, P.G. Institute And Research Center , Islampur ,Tal-Walwa, Dist –Sangli ,Maharashtra

Corresponding Author's Mail ID:- gaurithokal1996@gmail.com

ABSTRACT:-

In the present era, uterine prolapse is one of the most common clinical condition, which is observed in day to day gynaecological practice.

Prolapse or POP (Pelvic Organ Prolapse) as a whole includes descent of the vaginal wall and the uterus, i.e. Herniation of pelvic organ from their normal site of attachment.

Pelvic organ prolapse maybe develop due to following conditions:-

After child birth, Progression of age, Injury to the muscles and organs situated in the pelvis The main reason for pelvic organ prolapse is increase pressure in the abdomen^[1]

In ayurveda all genital organs conditions comes under different types of *yonivyapads* among all the conditions –*Prasramsini Yonivyapad* can be suitably correlated with uterine prolapse, to be specific 1st and 2nd degree uterine prolapse^[2].

According to *Ayurveda*, *Sthanik chikitsa* (local therapies) that is applied directly on genital to treat any diseased conditions, it plays an important in *Prasramsini yonivyapad* and also in uterine prolapse. These alternative procedures help in prevention of the advancement of the condition.

Keywords:- Prasramsini yonivyapad, Pelvic organ prolapse, Sthanik chikitsa.

¹ P.G Sholar, Department of *Striroga* and *Prasutitantra*

² Professor, Department of *Striroga* and *Prasutitantra*

³ HOD And Professor, Department of Striroga and Prasutitantra

INTRODUCTION:-

Prasramsini yonivyapad is one among the 20 yonivyapads described by our acharya in ancient texts.

Studies have estimated that 50% of parous women have some degree of urogenital prolapse and of this condition 10-20% of are symptomatic.^[3]

Initial degrees of uterine prolapse can be correlated toprasramsini yoninarrated in Ayurv

Sthanika chikitsa which can be tried in this condition of prasramsini are as follow,

- Yoni prakshalan vaginal douching.
- Yoni pichu medicated tempon placed in vagina.
- Yonipuran vaginal packing.
- Yonilepa drug application in the vaginal wall.
- Yonidhoopan -vaginal fumigation.
- *Uttarbasti* medicated *taila/ghrita*pushed into uterine cavity.

Our acharya have very well known knowledge of pelvic organ prolapse, conservative management and the mode of action of *sthanik chikitsa* and describe the specific *sthanik chikitsa* according to different *yonivyapad* and vitiated *doshas*^[4]. *Sthanik chikitsa*helps to give strength to pelvic organs and remove *shaithilya*which is the basic defect in prolapse.

Ayurvedic review:-

Prasramsini yonivyapadis caused by vitiated pitta dosha.

Prasramsini yonivyapad comes under dushtaprajata roga (caused by due to asamyak prasav) as explained in kashyap samhita.

MadhavNidan, bhavaprakash, vangsen and yogratnakar described similar to sushruta samhita. The word yoni refers to vaginal canal and uterus, prasramsana- means displacement of vaginal canal from its original place

Pathogensis:-

Prasramsini yonivyapad caused due to vitiated pitta dosha.

Mittyachara leads to pitta parkop which further leads in – rasa, mamsadushti leading to sthan sanshray in yoni/Garbhashaya causing symptoms like discharge, descent, difficulty in labour which leads to prasramsini yonivyapad^[5].

Samprapti ghatak^[6]:-

Dosha – pitta vata.

Dushya – rasa, rakta, and mamsa.

Srothas- rasavha, raktavha , mamsavaha, and arthavavaha srothas.

Vyakthasthana- yoni.

Udbhavasthana- Garbhashaya.

Sancharsthan- Garbhashaya, arthavavaha srothas Adhisthana- Garbhashaya and yonirogamarga'

Rupa^[7]:-

Features of pitta vitiationi.e. burning	Etiology ^[9] :-		
sensation, suppuration, fever can be see	Anatomical	Predisposin	Aggravating
Along with irritation, excessive vaginal	factors	g factors	factors
discharge, displacement and			
Difficulty in labour	Gravitationa	Acquired	Post
Modern review ^[8] :-	1 stress	Trauma of	menopausal
Pelvic organ prolapse (POP) includes	Anterior	vaginal	atrophy
descent of the vaginal wall and,or the	inclination	deliveryca	Poor
uterus.	of pelvis	using	collagen
The prolapse occurs due to weakness of	Stress of	injury to -	tissue repair
structures supporting the organs in the	parturition	ligaments,	with age
position,	(internal	Endopelvi	Increased
The supporting structure to the pelvic	rotation)	c fascia,	intra
organs are divided into 3 tier	Urogenital	levator	abdominal
1. Upper tier: Endopelvic fascia covering	hiatus	muscle ,	pressure
the uterus Round ligament Broad	Inherent	perineal	COPD
ligament with intervening pelvic	weakness	body,	Occupation
cellular tissues .		nerves (Athenia
2. Middle tier: Strongest support	40	pudendal)	Obesity,
Pericervical ring, cardinal ligament,			smoking
uterosarcal ligament, rectovaginal			Multiparty
septum posteriorlty, pelvic cellular		Congenital	
tissues.		Genetic (
3.Inferior tier: gives indirect support of		connective	4
the uterus.		tissue	
PELVIC ORGAN PROLAPSE POP	JOURNA	disorder)	
(According To Compartment Defects)	HEALTH	Women	ES
ANTERIOR MIDDLE POSTERIOR	5 1 hot 2 5 hot 2 5 1	with	
Bladder. Uterus Pouch of		Marfan and	
Douglas		Ehlers-	
Urethra Vaginal vault Rectum		Danilos	
Paravaginal. Perineum		Syndrome	

Spina	
bifida	

DEGREES OF UTERINE PROLAPSE (CLINICAL)^[10]:-

- Normal External os Lies at the ischial spines. No prolapse next line.
- First degree— The Uterus descends down from it's normal anatomical position but the external os still remains above the introitus.
- Second degree -The extern os protrudes outside the vaginal introitus but the uterine body still rema inside the vagina.
- Third degree –The uterine cervix and body and the fundus descends to lie outside the introitus.
- Procidentia Involves prolapse of the uterus with eversion of the entire vagina

CLINICAL FEATURES[11]:-

- Vaginal:- Feeling of something coming down per vaginam, sensation of Pelvic pressure of vaginal bulge.
- Pain:- Backache or dragging pain in the pelvis.
- Sexual:- Dyspareunia, loss of sexual activity.
- Urinary symptoms (in presence of Cystocele)Difficulty in passage of urine, more of strenuous effort, the less effective

is the evacuation. Incomplete evacuation main lead to frequent desire to pass urine.

Urine and frequency of maturation also may be due to cystitis

Painful maturation due to infection

Stress incontinence usually associated with urethrocele

Retention of urine may rarely occur.

Bowel symptoms(presence of rectocele)
 Difficulty in passage of stool, Constipation and straining.

STHANIK CHIKITSA OF PRASRAMSINI YONIVYAPAD:-

Sthanik chikitsa means a form of treatment to be applied locally in or on the reproductive organ to recover from any disease.

When the prolapse is mild, Ayurvedic treatment works most effectively and gives mental relief to the patient from the fear of surgery^[12].

1. YONIPURAN :-

The main sthanik chikitsa in Prasramsini yonivyapad according to Acharya Charaka, Sushruta, Vagbhata, Bhavprakasha, Yogaratnakaraisvehsawar pinda^[13]

Veshawar = minced meat or solidoleo mixed with certain drugs

Pinda= ball Veshwaraconsisting of shunthi, maricha, krishna dhanyaka, ajaji,

dadima and pippalimulaetc. drugs should be used .

Preparation of veshwara pinda^[14]

- A boiled pinda of medicine is wrapped in a cloth and placed in the vagina.
- Location Prathamavarta.
- Equipment Steel vessels, knife, spoon,
 vastra/manjarpat(cloth), gas cylinder.
- Ingredients- Meat devoid of bone 1 part, water 2 parts, *churna* of *maricha*, *krshna*
- Dhanyaka, ajaji, dadima, pippalimula in equal quantity.
- Methods of preparation- Take the meat devoid of bone, chopped well, steamed, and smashed.
- To this add *churna* of all dravyas mentioned above. The mixture is boiled well again for a while to obtain *veshawar*
- After cooking, wrap it in sterile cloth and tie a rope. This formed *pinda* is then placed inyoni.
- The *pinda* should be removed when the patient has desire or feeling of micturition or after 2 hours.

Procedure of veshwara pinda^[15]

- After anointing the *Prasrashta Yoni* with *ghee* and then applying sudation with milk, it should be inserted inside the vaginal canal with hand.
- Now a ball of *Veshwara* (minced meat or solidoleo mixed with certain drugs)

- should be inserted in the canal and a bandage should be applied.
- The bandage should be removed when the patient has a desire or feeling of micturition.

2.YONILEPAN^[16]:-

Drug application in the vaginal wall.

Oleation with *Traivrutasneha Ghruta*(clarified butter), *Taila*

3.UTTARBASTI^[17]:-

Medicated *Taila*/ghrita pushed into cavity.

In uterovaginal prolapse or disorders arising due to uterovaginal prolapse, after two or three

Asthapan bastis, medicated Uttarbasti is beneficial.

Uttarbastiwith Traivruta snehashould be given.

Uttarbasti with sukumara, bala or shirisatail should be given

Local douching, irrigation, anointment, massage and tampons prepared with the drugs either having cooling properties or capable of *Pitta shaman*

DISCUSSION[18]:-

Laxity of vaginal musculature and fibromuscular ligaments supporting the uterus and to certainextent vagina is main cause of displacement of vagina and/or uterus.

The role of *Apan vayu* is to regulate the process of excretion mainly all the pelvic organs of

excretion depend on the quality of Apan vayu, if this dosha is vitiated It may exert downward force and can dislodge the organ gradually. Saman vayu controls and the process of digestion aids metabolism and helps in releasing the pressure and stress on the pelvic floor muscles in its normal state but if vitiated it may increase pressure and heaviness in pelvic region. In other words uterovaginal displacement occurs due to abnormality or kşhaya (loss) of mamsa dhatu of these structures. Mamsa dhatu consists mainly of prithvi mahabhuta. Goat meat is slightly guru, snigdha and sheeta potency, tridoshahar, nutritious andanabhishyandi due to its similarity to human flesh. Samanya vishesh siddhanant plays significant role. Balya, bruhana properties provide strength and stability to muscles due to guru snigdha guna, it helps in vata shaman. The mamsa gives bala and does bruhanato the uterine supports thereby reduces the laxity of the muscles.

Internal use of *sneha* increases the strength of not only body as well as increase the tone of supports (ligaments and muscles), it also reaches to smallest elements of

Conclusion^[19]:-

body. External use of *ghrita* by doing *yoni abhyanga* it decreases the hardness of displaced organ, firmness of soft tissues to facilitate correction of organ. It also enhances the

strength of local muscles and ligaments by mobilization of organ. Sedana karma with ksheera provides bala to the uterine muscles and relieve pain. Pichu dharana with veshawara pinda helps in prolapsed condition by giving strength to the vaginal muscles and dhatu, subsides the vitiated doshas, cures pain and heals the damage occurred to the pelvic tissues and also prevents from further fungal and yeast infection.

REFERENCES:-

- 1. www.wjpr.net
- A Review of veshawar pinda in prasramsini yonivyapad ,World journal of Pharmaceutical research,volume -13,issue 7,ISSN-2277-7105.
- **2.** A Critical review of prasramsini yonivyapad, World journal of Pharmaceutical research, volume -11, issue 9, ISSN-2277-7105.
- **3.** Raafat S Barsoom, MD; Chief Editor: Bruce M Lo, MD, MBA, CPE, RDMS, FACEP,

FAAEM, FACHE Uterine Prolapse in Emergency Medicine, Aug 15, 2018.

- **4.** Mode of Action of Sthanik chikitsa in commonly used in Streerog, AYUSHDHARA, An International journal of research in Ayush and Allied system, sept-oct 2020, volume 7,ISSN-2393-7583(P).
- **5.** A Comprehensive treatise on striroga gynaecology written and Illustred by Dr. HemalathaKapoorchand, Chaukhambha vishyabharti academy, 2018; 282: 283.
- **6.** A Review of veshawar pinda in prasramsini yonivyapad ,World journal of Pharmaceutical research,volume -13,issue 7 ,ISSN-2277-7105
- **7.** A Review of veshawar pinda in prasramsini yonivyapad ,World journal of Pharmaceutical research,volume -13,issue 7 .ISSN-2277-7105
- **8.** DC Dutta's Textbook of Gynaecology ,8th edition,chapter 16th, Displacement of the uterus.
- 9.DC Dutta's Textbook of Gynaecology ,8th edition,chapter 16th, Displacement of the uterus.
- **10.** DC Dutta's Textbook of Gynaecology ,8th edition,chapter 16th, Displacement of the uterus.
- **11.** DC Dutta's Textbook of Gynaecology ,8th edition,chapter 16th, Displacement of the uterus.
- **12.** A Review of veshawar pinda in prasramsini yonivyapad ,World journal of

- Pharmaceutical research, volume -13, issue 7, ISSN-2277-7105.
- **13.** Agnivesha, Charaka Samhita revised by Charaka & Dridhabala, with Ayurveda Dipika
- commentary by Chakrapani Dutta, edited by Acharya Yadavji Trikamji, Varanasi: Choukhamba Surabharathi prakashana, Varanasi, 2011.
- **14.** A Review of veshawar pinda in prasramsini yonivyapad ,World journal of Pharmaceutical research,volume -13,issue 7 ,ISSN-2277-7105.
- **15.** A Critical review of prasramsini yonivyapad, World journal of Pharmaceutical research, volume -11, issue 9, ISSN-2277-7105.
- 16. Sushruta, Sushruta Samhita, with theNibandh Sangraha commentary of SriDalhanacharya, edited by Vaidya YadavjiTrikamji Acharya, ChaukambhaSurbharati
- **17.** Agnivesha, Charaka Samhita revised by Charaka & Dridhabala, with Ayurveda Dipika

Prakashana, Varanasi, Reprint, 2010.

- commentary by Chakrapani Dutta, edited by Acharya Yadavji Trikamji, Varanasi.
- Choukhamba Surabharathi Prakashana, Varanasi, edition, 2011.
- **18.** A Review of veshawar pinda in prasramsini yonivyapad ,World journal of

Pharmaceutical research, volume -13, issue 7, ISSN-2277-7105.

19. A Review of veshawar pinda in prasramsini yonivyapad ,World journal of

