

"A COMPARATIVE CLINICAL STUDY OF *KAKAJAMBU MULA CHURNA* AND *KARPASA MULA CHURNA* IN *SHWETA PRADARA*"

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ABSTRACT

Many of the gynaecological disorders present *Shweta pradara* as the major complaint. If it is neglected, it may lead to impairment of general health and disturbing the woman psychologically. *Shweta pradara* can be a symptoms of many diseases as well as an independent entity. Considering the prevalence of *Shweta pradara* in present era and properties of trial drugs like *tridosha shamaka*, *kakajambu mula churna* was selected to evaluate its effect in the management of *Shweta pradara*.

Objective of study :-

1.To evaluate the efficacy of *kakajambu mula churna* and *karpasa mula churna* in *Shweta pradara*.2. To compare the efficacy of *kakajambu mula churna* and *karpasa mula churna* in *Shweta pradara*. Materials and methods :- A randomized comparative clinical study of two groups consisting 20 patients in each group suffering from *Shweta pradara* were taken. Group A :-*Kakajambu mula churna* 3gms with *Tandulodak* BD.

Group B:-*Karpasa mula churna* 3gms with *Tandulodak* BD, both after food for 4 weeks.Results and interpretation :-clinical parameters were assessed statistically and results were concluded. Conclusion :-*Kakajambu mula churna* and *Karpasa mula churna* both are equally effective in *Shweta pradara*.

Keywords :- *Shweta pradara* , leucorrhoea , *kakajambu mula churna* & *karpasa mula churna*.

Introduction

Reproductive health of an individual is a state of complete physical, mental and social well-being and not merely the absence of disease or illness, in all matters relating to the reproductive system and to its functions and processes. Reproductive tract infections form one of the major burdens of disease in developing countries, and include infections caused due to any (or combination) of the three factors: iatrogenic, endogenous, and sexually transmitted. While there are many symptoms that define the disease, the most commonly reported among the women is that of *Shwetapradara* (abnormal vaginal discharge or Leukorrhoea). *Shwetapradara* is one of the most common & burning problem faced by the women at all ages all around the globe from menarche to menopause. *Shwetapradara* is not a

disease as it is the symptoms. Among adult women, it may be either physiological or pathological. Physiological conditions doesn't need treatment but pathological conditions requires treatment. *Shwetapradara* which causes physical and mental discomfort due to this *Yonigata Shwetavrava* and patients needs a quick relief from such discomfort. ¹*Shwetapradara* symptom is also present in *Kaphadhikya vyadhi* and is also associated with *Pittadhikya*. and without involvement of *Vata dosha* , any *dosha* can not move from one place to another place. So aim of treatment is to bring *Kapha*, *Vata* and *Pitta* in normal level. keeping this into consideration and as per the treatment principles of *Shweta pradara*, *Kakajambu mula churna* mentioned in *Gadanigara*² as *Shweta pradara chikitsa* was selected

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as a trial drug based on its properties like *vata ,pitta, kapha shamaka*.

Materials and methods :- 40 patients suffering from Shweta pradara were selected and divided into 20 patients in each group randomly irrespective of their caste , creed, religion , income and occupation from OPD of prasuti tantra and Stree roga Department, Alva's Ayurveda Hospital, Moodbidri, Mangalore (D.K.)

Study design : A randomised comparative clinical study.

Collection and preparation of Drug

: Drug was prepared in Rasashatra Department of Alva's Ayurveda Medical College, moodbidri. . Root part of kakajambu mula were taken and washed with water cleanly ,Well dried drugs were cut into pieces and subjected to crushing by hammering and then by grinding ,fine powder was made. This powder was then filtered

with the help sieved through wire mesh no. 80 . this churna was then mixed well and colleted in plastic air tight container.

Diagnostic criteria³ : Patients fulfilling the following diagnostic criteria will be selected for the study, irrespective of associated symptoms

- 1) Thin watery and white vaginal discharge with or without foul smell.
- 2) Thick, curdy white vaginal discharge.
- 3) Itching

Inclusion criteria

- 1) Age between 21 to 40 years married patients.
- 2) Thin watery and white vaginal discharge with foul smell.
- 3) Thick, curdy white vaginal discharge.

Exclusion criteria

Per vaginal white discharge due to other pathological conditions like-

1. Cervical erosions
2. Systemic diseases like Anemia, DM.
3. Cervical polyp

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4. Malignant condition
5. Infections like Syphilis ,Gonorrhoea, Trichomoniasis & STD Per vaginal discharge during physiological states -
6. Menopausal Women
7. Pregnancy
8. Puerperium

Investigations : (if necessary)

- 1) Examination of blood = Hb%, total count, differential count.
- 2) Blood sugar
- 3) Urine examination = Microscopic
- 4) USG (Abdomen & Pelvis)
- 5) Wet Mount Test

Drug intervention :

Patients fulfilling the criteria for inclusion were randomly assigned into 2 groups each comprising of 20

patients. Group A: kakajambu mula churna (trial) Dose : 3gms BD after food with tandulodak. Group B: karpasa mula churna⁴ (control) Dose : 3 gms BD after food with tandulodak , Duration of treatment : 4 weeks

Follow up period : 7th day,14th day and 21st day.

Assessment Criteria :The effect of treatment was assessed on the basis

Of subjective and Objective parameters :

Subjective criteria:

a) Srava : (mild/moderate/severe)

b) Kandu : (mild/moderate/severe)

Objective criteria:

a) Srava varna (watery transparent /white ,curdy)

b) Gandha (absent/present)

Table no. 1: Assessment Grading system

Assesment criteria	Grade 0	Grade 1	Grade 2	Grade 3
Srava	No	Only vulval moist	Need to change undergarments (moderate)	Need to change pad(severe)
Kandu	No	Without need of scratching	Relief by scratching without excoriation	Unrelieved by scratching , with excoriation
Varna	Transparent	Watery	Curdy white	Nil
Gandha	Absent	Present	Nil	Nil

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Result

Statistical analysis : the obtained data was analysed statistically using unpaired 't' test where in both the groups $p < 0.001$ shows as highly significant.

Overall assessment :

In group A- No improvement in 20%, mild improvement in 25% of patients and moderate improvement in 45 % and marked improvement in 10 %

In group B - No improvement in 15% , mild improvement in 20%of patients and moderate improvement in 50 %and marked improvement in 15%

Table no 2: Statistic result

Charateristic	GROUP A			GROUP B			P value
	Mean score		% of relief	Mean score		% of relief	
	BT	AF		BT	AF		
Srava	2.5	0.8	70%	2.2	0.4	82.2%	<0.001
Kandu	1.9	0.45	78.9%	1.7	0.35	79.4%	<0.001
Varna	1.4	0.35	75%	1.3	0.15	92.3%	<0.001
Gandha	1	0.2	80%	0.9	0.2	77.7%	<0.001

Table no 3: overall effect of therapy

Effect of therapy	Group A	Percentage	Group B	Percentage
No change	3	20%	2	15%
Mild improvement	5	25%	3	20%
Moderate improvement	9	45%	11	50%
Marked improvement	3	10%	4	15%

Discussion based on observation :

Age:

Among the 40 patients included in this study, 22.5% of patients were in the age group of 20 -25 yrs. , 40% of patients were in the age group of 26 - 30yrs and , 22.5% of patients were in the age group of 31-35yrs , and 15 % patients were in the age group of 36-40 yrs.

It shows *Shwetapradara* can affects woman at any age. It is totally depended on *Ahara* and *Vihara* of the patient.

Religion:

In the present study, maximum of 65% of patients were Hindu, 15% patients were Muslim & 20% patients were Christian as the population in and around moodbidri were dominated by Hindu, the preponderance of Hindus in this sample only represent the distribution of the religion of the local population.

Occupation:

Of the 40 patients, 52.5% were housewife, this shows that due to stress, stress household chores women's were lack of concentration towards their health.

Socio-economic status:

In this study, 50% of patients were belonging to poor class.

Food habits:

As mentioned in *Nidankar* factor and *Samprapti ghataka* the *dosha* which is responsible for *Samprapti* is *Kapha dosha* . Among 40 patients 37.5% patients were found vegetarian., 40% patients were found non vegetarian and 22.5% were belonging to mixed diet .It shows that irrespective of food habits, *Kaphavardhaka ahara* is responsible for *Shwetapradara*.

Discussion Based on Rasa ,Guna, Virya and Vipaka⁵.

The aim of the study was to assess the efficacy of kakajambu mula churna in Shweta pradara.

kasaya rasa – it dries up kleda by virtue of *sangrahi* , *shoshana* , *stambhana* and *kapha shamaka* properties. And helps in decrease *yonisrava*.

- *Ruksha guna* – have *shoshana* action restrain *sraava*.
- *Sheeta virya* – *virya* mainly acts on *srotas*. Here *sheeta virya* acts in *srotas* & cause *stambhana* helps in decrease *sraava*.
- *Katu vipaka* is *kapha shamaka* and act as *kandughna* and *srotoshodhaka*.

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- It is *Balya, Pustikara* which enhance the immunity and general health of the body

Based on chemical composition

- Pharmacological properties of drug such as Antibacterial , Antioxidant Antifungal ,Antiviral , Hepatoprotective and Anti inflammatory property .
- Chemical constituents – Root contains Kaempferol , Myricetin ,Quercetin
- Kaempferol – have pharmacological activities, including antinflammatory, antimicrobial, anticancer, and a strong anti oxidant
- Myricetin and quercetin – is naturally occurring compound belongs to group of flavonoids.
- Flavonoids are known for the Antioxidant properties.
- Quercetin have factor alpha and interleukin -6 which reduced makers of inflammation in human cells.

Conclusion-

In the present study, an attempt is made to evaluate the efficacy of *Kakajambu mula churna* in *Shwetapradara*.

- Based on the result of present study, it was found that *Kakajambu mula churna* due to its *Kashaya rasa* acts as anti-inflammatory arrests *Srava*. Due to its

Kapha pitta shamaka action, it balances *doshas* and as it's root contains kaempferol, myricetin, quercetin which act as anti-inflammatory, anti-fungal anti-microbial, and anti-oxidant it cures infection and increase the immunity.

- As both groups have shown highly significant result in all parameters, both *Kakajambu mula churna* and *Karpasa mula churna* have significant effect in *Shwetapradara*. Student t test showed there is no significant difference between *Kakajambu mula churna* and *Karpasa mula churna* in *Shweta pradara*.

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