



Research Article

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A CLINICAL STUDY TO EVALUATE THE EFFICACY OF UDUMBARA KASHAYA YONI PRAKSHALANA IN SHWETA PRADARA WITH SPECIAL REFERENCE TO VAGINITIS

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ABSTRACT

Introduction: Shweta Pradara, is a condition that correlated with Vaginitis, affects approximately 75% of women. It is characterized by abnormal vaginal discharge, itching, burning micturition, foul smell, backache etc. For this condition, Sthanika Chikitsa (Yoni Prakshalana) with the drug Udumbara Kashaya was explored for its efficacy. This technique helps to restores vaginal flora, reduces inflammation, clears the debris, discharge and promotes tissue healing with Kashaya Rasa, Ruksha and Guru Guna of Udumbara, hence Udumbara Kashaya Yoni Prakshalana is hypothesized to be effective in Shweta Pradara. **Methods:** A randomized, open-labelled controlled clinical study was conducted on 30 patients diagnosed with Shweta Pradara (Vaginitis). Patients were equally divided into two groups: Group A (Trial Group) received Udumbara Kashaya Yoni Prakshalana, and Group B (Control Group) received Triphala Kashaya Yoni Prakshalana. Efficacy was evaluated based on Subjective and Objective parameters before and after treatment. **Results:** Group A demonstrated superior outcomes in subjective and objective parameters compared to Group B in reducing the symptoms of Shweta Pradara. **Discussion:** Udumbara Kashaya acts as anti-inflammatory, antimicrobial, antibacterial, antiprotozoal, antioxidant and clears debris, clears unhealthy tissue, reduces foul smell, itching, inhibits harmful bacterial growth and corrects the abnormal vaginal discharge. Additionally, it promotes mucosal healing, restores vaginal flora, and maintains optimal vaginal pH. **Conclusion:** Udumbara Kashaya Yoni Prakshalana significantly alleviated symptoms of Shweta Pradara compared to Triphala Kashaya. Analytical and phytochemical studies of Udumbara Phala validated its therapeutic properties, which confirm that Udumbara Kashaya is more effective.

Keywords: Shweta Pradara, Vaginitis, Udumbara Kashaya, Triphala Kashaya, Yoni Prakshalana.

INTRODUCTION

Women's health is shaped not only by their individual biology but also by the socio-cultural, economic, and physical environments in which they live. These factors exert significant influence over both the duration and quality of a woman's life, impacting her overall well-being in profound ways. As women endeavour to access reproductive health care and other medical services, they frequently encounter fragmentation within the healthcare system. This fragmentation can contribute to the development of various health disorders with Vaginitis standing as one prominent example among them. Addressing these systemic challenges, a woman during her life span may have different types of discharges per vagina. Normal vaginal flora (lactobacilli) colonizes the vaginal epithelium and may have role in defense against infection.¹ The result of physiological process involving secretions from Cervical and Bartholin's gland and the desquamation become abnormal with about prevalence of 75 out of 100 which means 75% of women that experience vaginal discharge have some type of vaginitis.²

Pradara is defined as a condition having excessive vaginal discharge according to Shabdakalpadhruma. In Brhatrayi, Pradara is referred to the context of Rakta Pradara, whereas Chakrapani, Shrangadhara, Bhavapraksha, Yogaratnakara have mentioned clearly the term Shweta Pradara.³ Shweta Pradara is a Kaphaja disorder in region of Apana Vayu, as a type of Srava

which is resulted from Kapha Dosh. It is a symptom and disease itself of Stree Rogas that occur due to vitiation of Kapha.

Shweta Pradara occurs due to Kaphakara Ahara Vihara like Diwaswapna, Avyayama, Madhura, Amla, Lavana, Sheeta, Snigdha, Guru, Pichilla, Abhishyandi Ahara, Masha, Tilapista, Dadhi, Dugdha etc. It is characterized by subjects showing classical symptom of Shweta Pradara with or without pruritus, foul smell, associated with problems like low back pain, lower abdomen pain, mental stress, sexual anxiety and local discomfort.⁴

The term Vaginitis is the diagnosis given to women who complain of abnormal vaginal discharge with vulvar burning, irritation, or itching.⁵ Treatment modalities mentioned in contemporary science includes antibiotics, antifungals, analgesics, anti-inflammatory which has acute complications like bloating, nausea, diarrhoea and long-term disadvantages like tuberculosis, malignancy, depleted cervical mucosa etc.

Medicines prescribed in Ayurveda by various Acharya's in Shwetha Pradara has Kashaya Rasa, Ruksha and Guru Guna, Sheeta Virya, Katu Vipaka, which possess Sthambana action and thus acts directly on eradicating the Kaphaja disorders.⁶ Amongst these medicines, Udumbara which has been described in Kaiyadeva Nighantu, Sharangadhara Samhita is one such drug. Yoni Prakshalana is a cleansing procedure which helps in removing the excessive and abnormal vaginal discharges along

with harmful micro-organisms, by promoting new tissue growth, thus heals unhealthy vaginal mucosa, reduces the inflammation and congestion in order to maintain the normal vaginal flora. Hence Yoni Prakshalana with Udumbara Kashaya is intended to give beneficial results in Shweta Pradara.

Aim: Study to ascertain if Udumbara Kashaya Yoni Prakshalana has better effect in the management of Shweta Pradara with special reference to Vaginitis.

Objectives

Primary Objectives

- To evaluate the efficacy of Udumbara Kashaya Yoni Prakshalana in the management of Shweta Pradara with special reference to Vaginitis on the basis of improvement in both subjective and objective parameters.
- To re-evaluate the efficacy of Triphala Kashaya Yoni Prakshalana in the management of Shweta Pradara with special reference to Vaginitis on the basis of improvement in both subjective and objective parameters.
- To compare the efficacy of Udumbara Kashaya Yoni Prakshalana with Triphala Kashaya Yoni Prakshalana in the management of Shweta Pradara with special reference to Vaginitis on the basis of improvement in both subjective and objective parameters.

Secondary Objectives

- Analytical and Phytochemical study of Udumbara Phala (Unripe) was done.
- Literary review of Shweta Pradara, Vaginitis, Yoni Prakshalana and drug such as Udumbara and Triphala was done.

MATERIALS AND METHODS

30 subjects fulfilling the Inclusion Criteria for Shweta Pradara (Vaginitis) were selected from the OPD and IPD of Sri Sri College of Ayurvedic Science and Research Hospital, Bengaluru, Karnataka, India and with the help of simple randomization technique (Lottery method) divided into two equal groups: Group A (Trial Group) 15 subjects received Udumbara Kashaya Yoni Prakshalana, and Group B (Control Group) 15 subjects received Triphala Kashaya Yoni Prakshalana. Triphala Kwatha Churna was procured from a GMP-certified pharmacy. Udumbara Phala raw drug was collected from authentic sources and identified and approved by the Department of Dravyaguna and preparation of Kwatha Churna was done in Pharmacy of Rasa Shastra and Bhaisajya Kalpana of Sri Sri college of Ayurvedic Science and Research, Bengaluru. An Informed and Written Consent along with specially designed detailed Case proforma for the study was

prepared. An Ethical clearance for conduction of the clinical trial involving human subjects was taken from the Institutional Ethics Committee (IEC) before the commencement of study (Protocol No: SSIEC/237/2022), dated 18/10/2022, and the trial was registered prospectively with CTRI (Registration No: CTRI/2023/07/055880).

Inclusion Criteria

- Subjects between the age group of 20-40 years.
- Subjects willing for Per-Speculum and Per-Vaginal examination.
- Married woman.
- Subjects presenting classical symptoms of Shweta Pradara.
- Subjects with the classical symptoms of Vaginitis.
- Subjects willing to sign the consent form.

Exclusion Criteria

- Unmarried women.
- Women below 20 years and above 60 years.
- Pregnant woman.
- Subject with known case of Benign and Malignant tumors.
- Subject with known case of PID.
- Subject with known case of Cervicitis.
- Subject with known case of Systemic disorders.
- Subject with known case of STD's (Syphilis, Chlamydia, Gonorrhea).

Diagnostic Criteria

- Diagnosis will be done based on findings of Per-Speculum and Per-Vaginal examination.
- Diagnosis will be done on the basis of local signs and symptoms of Shweta Pradara⁷ and Vaginitis.⁸

Investigations

- Urine routine and microscopy
- Hb%
- RBS
- Wet mount vaginal swab (microscopic view)
- Pap Smear (if needed)
- HIV, VDRL, HBsAg

Preparation of the drug: Udumbara Phala (Unripe fruit) was collected, properly cleaned and dried in the shade. The above said ingredient was collected and made into Kwatha Churna. Then 1 part of Kwatha Churna is added to 16 parts of water and then boiled and reduced it to the 1/8th part. Then the obtained part of Kashaya was filtered and used for Yoni Prakshalana under aseptic precautions.⁹

Intervention

Table 1: Intervention in both the groups

	Group A	Group B
Procedure	Yoni Prakshalana	Yoni Prakshalana
Medication	Udumbara Kashaya	Triphala Kashaya
Study duration	7 consecutive days	7 consecutive days
Dosage	2 liters	2 liters
Study Duration	15 days	15 days
Follow up	Pre assessment – 0 th day 1 st assessment – 7 th day Follow up – 15 th day	Pre assessment – 0 th day 1 st assessment – 7 th day Follow up – 15 th day

Assessment Criteria

- Assessment was done based on Subjective and Objective Parameters Before and After Treatment.
- Based on Per-Speculum examination.

Subjective Parameters

Table 2: Subjective Parameters for Shweta Pradara (Vaginitis)

Parameters	Grade 0	Grade 1	Grade 2	Grade 3
Kandu	No itching	Occasional itching	Moderate itching	Constant itching
Srava	No vaginal discharge	Occasionally wetting the undergarments/slight discharge, vulva moistness	Moderate discharge, wetting under garments	Heavy or profuse discharge, which needs pads
Gandha	Absent	Present		
Vedana in Yoni	Absent	Present		
Vedana in Kati Pradesha	Absent	Present		
Maithuna Asahatwa	Absent	Present		
Shopha	Absent	Present		
Mutra Daha	Absent	Present		

Objective Parameters

Table 3 : Objective Parameters for Shweta Pradara (Vaginitis)

Parameters	Grade 0	Grade 1	Grade 2	Grade 3
Vaginal discharge	Normal	Scanty	Moderate, that mattes the hair	Profuse discharge
Discharge on Per Speculum Examination	-	0 - 1/4 th of Speculum blade	1/4 th - 1/2 nd of Speculum blade	1/2 nd – full of Speculum blade
Appearance of External Genitalia and Vagina	No evidence of pruritus	Reddish discoloration	Edematous	Rashes, and edematous of vulva, vagina and in thighs
Foul smell	Absent	Present		
Krimi	Absent	Present		

Phytochemical Tests

Table 4: Phytochemical Tests for Udumbara Phala

Constituents	Tests	Result
Protein	Millon's Test	+
Triterpenoids and steroids	Salkowski Test	+
Flavonoids	Concentrated H ₂ SO ₄ Test	-
Alkaloids	Mayer's Test	-
Carbohydrate	Molisch's Test	+
Phenols	Lead Acetate Test	+
Saponins	Foam Test	+
Taninns	Gelatin Test	+
Fixed oil	Stain Test	-

OBSERVATIONS

A total number of 30 patients fulfilling the inclusion criteria were registered for the study.

Total number of patients screened - 45

Number of patients registered for the study – 30

Number of Patient completed the study - 30

Among 30 patients, 43.33% belong to the age group of 36 to 40 years, 30% belong to age group of 26 to 30 years, 23.33% belong to 31 to 35 years of age group and 3.33% belong to the age group of 20 to 25 years, 60% of subjects had complaints of thin white discharge and 40% of subjects had complaints of thick white discharge. Itching was present in 56.66% of subjects and 43.33% have no complaint of itching. Burning micturition was present in 33.33% subjects and 66.66% had no complaint of burning micturition. Foul smell was present in 86.66% subjects and 10% have no complaint of foul smell. Backache was present in 76.66% subjects and 23.33% have no complaint of backache. Vaginal pain was present in 86.66% subjects and 13.33% have no vaginal pain. In 93.33% subjects Krimis was absent and in 6.66% Krimis was present.

RESULTS

The observations, results as well as statistical analysis of the present study are elaborated. The data regarding the subjects were collected based on grading given to both Subjective and Objective parameters specified in assessment criteria. Both parameters were assessed on 0th day, 7th day and 15th day.

The results have been divided under the following sub points:

1. Comparing the parameters within the groups.
2. Comparing the parameters between the groups.

Statistical Analysis

Sigma Stat 3.1 was used for analysis. For subjective data Wilcoxon signed rank sum test for within group analysis and Fisher's test for between the groups, Chi square for overall assessment was employed. After the statistical analysis, interpretation of the results was done based on the p value and was interpreted as: Non-significant: >0.05, Significant: <0.05, Highly significant: <0.001. Analysing the result categorially Fisher's test was carried out to find out whether statistically significant difference is there between the group or not. Chi Square test was used to analyse the overall assessment. Clinical Effect size was calculated by using the formula $r = |z|$ within the group.

Table 5: Overall assessment within the group

Parameters	Group A			Group B		
	0 th to 7 th day	7 th day to 15 th day	0 th day to 15 th day	0 th to 7 th day	7 th day to 15 th day	0 th day to 15 th day
Kandu	HS <0.001	NS 1.000	HS <0.001	NS 0.302	NS 1.000	NS 0.302
Srava	HS <0.001	HS <0.001	HS <0.001	HS <0.001	HS <0.001	HS <0.001
Gandha	HS 0.002	NS 1.000	HS 0.002	NS 1.000	NS 1.000	NS 0.607
Yoni Vedana	HS 0.006	NS 1.000	HS 0.006	NS 1.000	NS 0.607	NS 0.607
Shopha	HS <0.001	NS 1.000	HS <0.001	HS 0.035	NS 1.000	HS 0.007
Mutra Daha	HS 0.007	NS 1.000	HS 0.007	NS 0.118	NS 1.000	NS 0.118
Maithuna Asahatwa	NS 0.302	NS 1.000	NS 0.302	NS 1.000	NS 0.607	NS 0.607
Vedana in Kati Pradesha	NS 0.302	NS 1.000	NS 0.118	NS 0.970	NS 1.000	NS 0.607
Appearance on external genitalia and vagina	HS <0.001	HS <0.001	HS <0.001	S 0.050	S 0.050	S 0.050
Krimis	-	-	-	NS 1.000	NS 1.000	NS 1.000
Foul smell	HS 0.002	NS 1.000	HS 0.002	NS 1.000	NS 1.000	NS 0.607
Vaginal discharge	HS <0.001	NS 1.000	HS <0.001	HS <0.001	NS 1.000	HS <0.001
Discharge per speculum	HS <0.001	NS 1.000	HS <0.001	S 0.035	NS 1.000	S 0.035

Table 6: Overall assessment between the group

Parameters	Fisher's exact test between the group	Inference
Kandu	P - 0.002 (7 th and 15 th day)	The reduction of symptom Kandu in Group A is more significant than Group B.
Srava	P - <0.001 (7 th and 15 th day)	The reduction of symptom Srava in Group A is more significant than Group B.
Gandha	P - 0.330 (7 th day) P - 0.229 (15 th day)	Group A was found to be small improvement in the clinical status of Gandha compared Group B.
Yoni Vedana	P - 0.169 (7 th day) P - 0.224 (15 th day)	Group A was found to be small improvement in the clinical status of Yoni Vedana compared Group B.
Shopha	P - 0.080 (7 th day) P - 0.169 (15 th day)	Group A was found to be medium improvement in the clinical status of Shopha compared Group B.
Mutra Daha	P - 0.224 (7 th and 15 th day)	Group A was found to be small improvement in the clinical status of Mutra Daha compared Group B.
Maithuna Asahatwa	P - 0.100 (7 th day) P - 0.483 (15 th day)	Group A was found to be small improvement in the clinical status of Maithuna Asahatwa compared Group B.
Vedana in Kati Pradesha	P - 0.224 (7 th day) P - 0.483	Group A was found to be small improvement in the clinical status of Vedana in Kati Pradesha compared Group B.
Appearance of external genitalia and vagina	P - 0.002 (7 th and 15 th day)	Group A was found to be small improvement in the clinical status of Appearance of external genitalia and vagina compared Group B.
Krimis	P - 0.100 (7 th day)	No group is significant
Foul smell	P - 0.330 (7 th day) P - 0.229 (15 th day)	Group A was found to be small improvement in the clinical status of Foul smell compared Group B.
Vaginal discharge	P - <0.001 (7 th and 15 th day)	Group A is more significant than Group B in clinical status of Vaginal discharge.
Discharge on per speculum examination	P - 0.042 (7 th day) P - 0.100 (15 th day)	Group A was found to be medium improvement in the clinical status of Discharge on per speculum examination compared Group B.

Table 7: Significance between the group

	Group A	Group B	B/W Group
HS/S	75%	58.33%	91.66%
NS	25%	41.66%	8.33%

In Current study, Udumbara Kashaya Yoni Prakshalana was given in Trial group whereas Triphala Kashaya Yoni Prakshalana was given in Control group. On evaluation of results, it was observed that Yoni Prakshalana with Udumbara Kashaya gave positive outcome in both Subjective and Objective Parameters of

Shweta Pradara (Vaginitis). Thus, the current study can be concluded that all the parameters were achieved Highly Significant results in Trial group. Consequently, Alternate Hypothesis is accepted that is the efficacy of Udumbara Kashaya Yoni Prakshalana in Shweta Pradara w.s.r to Vaginitis.

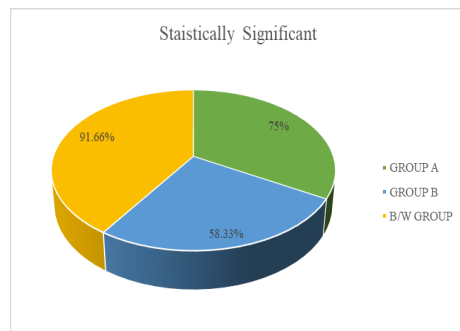


Figure 1: Statistically Significant within and between the groups

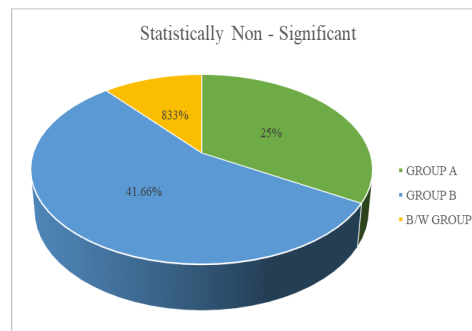


Figure 2: Statistically non-significant within and between the groups

DISCUSSION

Udumbara is extensively discussed in Vedic literature. And also, Rigveda, Atharvaveda mentions about the Udumbara plant. Charaka Samhita, Sushruta Samhita and Ashtanga Hrudaya mention the use of Udumbara in various disorders. The classical references have a marvellous relation between the Shweta Pradara associated with Lakshana and their management with Udumbara Prayoga. Udumbara has Kashaya and Madhura Rasa, Guru, Ruksha and Sheeta Guna followed by Katu Vipaka. Kashaya Rasa are effective in pacifying Pitta Dosha, while its Ruksha Guna is beneficial in controlling Kapha. These properties, contribute to the reduction of Shareeragata Kleda. This reduces the Vrana Kledata, Snigdghata and Picchilata and also supports Dhatu Sandhana (tissue repair) by promoting growth of new healthy tissue and also helps in healing. And also, Udumbara has action like Sthambana, Vedana Sthapana, Vrana Ropana, Shothahara, Garbhashayashothahara, Shoolahara, Krimikrut, Dahaprashamana which acts on the symptoms of Shweta Pradara (Vaginitis).

Probable mode of action of Udumbara on the disease Shweta Pradara on Dosha-Dhatu, at the level of Shat Kriya Kala based on its Guna

The disease manifests as a result of indulgence of Asatmya Ahara-Vihara (inappropriate diet and lifestyle), involvement of Manasika Bhavas, leading to an aggravation of Dosha in the body, which ultimately causes the accumulation of that Dosha and leads to a disease called Shweta Pradara. Management of disease varies according to its different pathophysiological stages called Shatkriyakala.¹⁰ At Sanchaya Avastha (stage of a Dosha increasing in its own location), Shweta Pradara has Snigdha, Tanu, Abhishyandi, Picchila, Chala, Kandu Guna and Udumbara has qualities like Sheeta, Guru, Ruksha and Manda which helps to reduce the symptoms of Shweta Pradara. At Prakopa Avastha (stage of a Dosha reaching the threshold), Tridosha gets Vitiated to pacify that Udumbara has Madhura Rasa, Guru Guna, Sheeta Virya, Ruksha Guna and Katu Vipaka. At Prasara Avastha (stage of a Dosha spreading beyond its own location) and Sthanasamskraya Avastha (stage of a Dosha localizing outside its location), Rasa and Rakta have Ashraya Ashrayi Bhava with Kapha and Pitta Dosha respectively and Udumbara has Kashaya Rasa - it is Kapha Pitta Shamaka.

A study on the phytochemicals present in Udumbara Phala (*Ficus racemosa*) has revealed compounds that may contribute to understanding the mechanism of action in treating Shweta Pradara (Vaginitis), providing insights for potential therapeutic applications. The presence of main phytochemicals in Udumbara such as steroids, triterpenoids, carbohydrates, phenolic compound, saponins, tannins, proteins, plays and important for reducing the symptoms in condition like Shweta Pradara and Vaginitis. The phytochemicals present in Udumbara have

properties like astringent, anti-inflammatory, anti – microbial, anti protozoal and anti – oxidant. And these properties thus prevent the inflammation and reduce the secretion of discharge, pain or tenderness, redness, swelling of vulva and vagina.¹¹

The most common features of Shweta Pradara are Vaginal discharge, itching, burning micturition, inflammation and pain in the Vaginal region. These symptoms lead to the aggravation of Doshas in the specific region. Depending upon the combination of the Doshas involved the diseases exhibit characteristic symptoms. Acharya's has mentioned Chikitsa in two parts - Abhyantara Chikitsa and Bahya (Sthanika) Chikitsa. "Sthanika Chikitsa" means specific treatment given locally which is beneficial when there is more Sthanika Apana Vayu Dosha – Dushti as it gives strength to respective Sthana. Although it is more of local treatment but their effect is systemic and capable of preventing complications of consequently to diseases.¹² Hence Yoni Prakshalana is one among the Sthanika Chikitsa where it is defined as a procedure in which the Vagina, Vaginal canal and Cervix is washed with medicated decoction or other liquids.

Vagina is preferred as a route for drug delivery because of its anatomical position which favours secure retention of Kashaya. The vaginal defence (i.e. epithelium, flora, immune cells and pH), microbiology and vascularity make it ideal for absorbing drugs. Volume, viscosity and pH of vaginal fluid have a considerable influence on vaginal drug absorption.¹³ Volume refers to the amount of vaginal fluid present. A higher volume of fluid can enhance the absorption of drugs that do not dissolve well in water because the larger amount of fluid can help to dissolve and distribute the drug. Viscosity refers to the thickness or stickiness of the vaginal fluid. Thicker fluid can hold the drug in place better, potentially improving the absorption. pH refers to the acidity or alkalinity of the vaginal environment. The pH level can influence how well a drug is absorbed because certain drugs are more easily absorbed in either an acidic or alkaline environment. Yoni Prakshalana was not just a topical wash, but a method of medication that clears and restores the vaginal flora. Prakshalana can prove to be an effective and easy mode of treatment. The Kashaya used in Yoni Prakshalana has low molecular weight, which improves the vaginal absorption. According to Sushruta, as water helps in extinguishing the fire, in the same manner use of Prakshalana helps in alleviating the aggravated Dosha. Thus, helps to reduce inflammation, does purification of the Yoni.

Udumbara was the drug used in Yoni Prakshalana and the mode of action can be explained in three ways.¹⁴ First action is Rasa Prabhava - On the basis Kashaya Rasa, there is involvement of Vayavia and Parthiva Mahabhuta. Vayavia has properties like Vrana Shodhana (Kledashoshaka) and Sravashoshakara (decreases white discharge per vagina). Parthiva has Ropana quality, due to its astringent action of healing. Second action is Veerya, Vipaka and Guna Prabhava Udumbara has Sheeta Veerya

acting as Sthambana, Katu Vipaka and Laghu, Ruksha Guna both these factors Kaphaghna property that leads Sravahara and Kledahara that is Lakshanaupashamana in Shweta Pradara condition. And the last action in Dravya Prabhava where Udumbara acts as a Krimighna. Considering the above factors, Yoni Prakshalana serves as a bactericidal and anti-inflammatory treatment. It clears debris and unhealthy tissue, encouraging the growth of new tissue. It also aids in healing damaged vaginal mucosa, clears the abnormal vaginal discharge, preserving normal vaginal flora, reduces foul smell and itching, inhibiting harmful bacterial growth, and maintaining a healthy vaginal pH balance.

In the discussion of this study, it was observed that Group A, which underwent Yoni Prakshalana with Udumbara Kashaya, demonstrated highly significant results in 75% of the parameters, while 25% were non-significant. On the other hand, Group B showed highly significant results in 58.33% of the parameters and non-significant results in 41.66%. Udumbara Kashaya Yoni Prakshalana in Shweta Pradara with its properties has given beneficial results in reduction of symptoms like Kandu, Srava, Gandha, Yoni Vedana, Shophya, Mutra Daha, Appearance of external genitalia and vagina, Vaginal discharge, Discharge on per speculum examination. This indicates a greater efficacy of Udumbara Kashaya Yoni Prakshalana in Group A, particularly in the treatment of Shweta Pradara with special reference to vaginitis, supporting the acceptance of the Alternate Hypothesis.

CONCLUSION

Primary objective was achieved: The results from this randomized, open-label controlled trial demonstrate that Udumbara Kashaya Yoni Prakshalana significantly alleviates the symptoms of Shweta Pradara, including abnormal vaginal discharge, itching, burning micturition, foul smell, pain in vaginal region. Secondary objective was achieved: Analytical and Phytochemical study of Udumbara Phala (Unripe) was done. Literary review of Shweta Pradara, Vaginitis, Yoni Prakshalana and drug such as Udumbara and Triphala was done. The intervention group showed a marked improvement in clinical symptoms compared to the control group, suggesting that Udumbara Kashaya is effective in reducing the severity and recurrence of Vaginitis. Additionally, the treatment was well-tolerated, with no significant adverse effects reported, underscoring its safety and potential as an alternative or complementary therapy in the management of Vaginitis. Udumbara Kashaya Yoni Prakshalana is more effective in trial group in the management of Shweta Pradara with special reference to Vaginitis.

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