

Research Article

www.ijrap.net



A CLINICAL EVALUATION OF THE EFFICACY OF MADHUKADI CHOORNA IN SHWETA PRADARA

Poonam Bhojak 1*, Suvrna.P 2, J.G. Mitti 3, M.C. Patil 4

¹PGscholar, Department of Rasashastra and Bhaishajya Kalpana, DGMAMC, Gadag, Karnataka, India
²Reader, Department of Rasashastra and Bhaishajya Kalpana, DGMAMC, Gadag, Karnataka, India
³Assistant Professor, Department of Rasashastra and Bhaishajya Kalpana, DGMAMC, Gadag, Karnataka, India
⁴HOD, Department of Rasashastra and Bhaishajya Kalpana, DGMAMC, Gadag, Karnataka, India

Received on: 11/08/15 Revised on: 14/09/15 Accepted on: 12/10/15

*Corresponding author

E-mail: poo88sonu@gmail.com

DOI: 10.7897/2277-4343.0718

ABSTRACT

The global popularity of Ayurveda is enhancing due to the increased flow of clinical research works irrespective of the subject. One such work added to the basket is the administration of Madhukadi Choorna in Shweta Pradara (leucorrhoea). A very common gynecological problem faced by almost 75% of the women is Shweta pradara. It can be correlated with leucorrohea. It is caused due to the increase in the kapha dosha and is characterized by a discharge from the genital tract of the female reproductive system. It is often associated with some organisms, metabolic and hormonal disturbances which are responsible for the disease. Madhukadi yoga (containing VANGA bhasma) is classically mentioned for the treatment of pradara. It acts on the Artavaha srotas (blood channels) of females & is shleshmahara in guna (property to reduce the kapha dosha). Aim of the study was to evaluate the clinical efficacy of herbo-mineral compound Madhukadi Choorna in Shweta pradara (leucorrohea). The study is a random clinical study which is conducted on 20 patients (each who has completed the treatment all along the study period). The patients were selected from the Out Patient department of Shri Danappa Gurusidappa Melmalagi Ayurveda Medical College, Hospital and Research Centre (DGMAMCH &RC), Gadag, Karnataka for respective clinical trial. Based on the subjective and objective parameters like Yoni srava (vaginal discharge), Yoni Vedana (pain per vagina), Yoni Kandu (vaginal itch), Vaginal smear, Vaginal pH etc. the criteria of assessment are set aside. The result of the clinical trial clearly depicts that the herbo mineral compound Madhukadi Choorna responded well to the treatment. Based on the mode of action of the individual constituent of the compound formulation the conclusion is drawn.

Key words: Shweta pradara, Artavaha srotas, leucorrohea, shleshmahara, Madhukadi Choorna.

INTRODUCTION

Shweta pradara is a condition characterized with white vaginal discharge may or may not be associated with pain, burning sensation and discomfort, thus it seems to be description of leucorrhoea¹. Leucorrhoea a white discharge from the vagina may be physiological or pathological. It may also be noticed without any disease. Acharya Sushruta has described physiological discharge of women secreted during sexual act². In the narration of infertility, it is quoted that some specific types of infertile women may have different variety of continuous watery vaginal discharge³. Certain organisms can cause injury to the uterus through vagina. Infective organism produced in the vaginal area causes injury to the uterus. While describing about good conducts / treatment regimen, it is said that it cures the vaginal disease created by infective organisms. There are references that organisms may reach the uterus, vagina and the foetus4. Several disease entities are found with white discharge as a clinical feature.

In Vedas⁵ there is a mention of krimi (microbes), which cause the injury to the uterus via Vagina. No reference is available regarding Swetapradara from the Atharvaveda, the authentic source of Ayurveda. In Ayurvedic literature, regarding the Shwetapradara, there is no separate chapter allotted in Brihatrayee, but all Acharyas of Brihatrayee have described Shwetapradara in term of Yoni Srava(vaginal discharge) as a symptom in many Yoni Rogas^{6, 7, 8}. Commentator Chakrapani has explained the word Pandura-Asrigdara (Pale vaginal

discharge) as Shweta pradara (leucorrhoea) in his commentary. Acharya Sharangadhara¹⁰, Bhavaprakasha¹¹, Yogaratnakara¹² have used the word Swetapradara (leucorrhoea) for white vaginal discharge. Due to excessive indulgence of dietetic and behavioral regimen capable of vitiating Vata (propulsive principle), Pitta (thermogenetic principle) and Kapha (cohesive principle), a woman may suffer from specific gynecological disorders having vaginal discharge as a symptom along with other symptoms like itching vulva. Due to consumption of congenial and non-congenial tastes together, all the three doshas situated in reproductive system get vitiated and produce their specific symptoms. Sometimes discharge becomes profuse, not pure white, but is grey white, yellow or green, brown or rusty in color and an itching vulva follows, which found in various gynecological disorders as per ancient classics.

Hence the following clinical work is undertaken to study the efficacy of Madhukadi Choorna in Shweta Pradara (leucorrhoea).

Aims & Objectives

Evaluation of efficacy of Madhukadi choorna in selected cases of Shweta Pradara (leucorrhoea).

Preparation of trial drug^{13, 14}

The ingredients present in the formulation Madhukadi Choorna

Yashtimadhu Choorna (powder of *Glycirrhiza glabra*): 48parts Haridra Choorna (powder of *Curcuma longa*): 48parts Vanga Bhasma (incinerated tin-oxide): 1 part

MATERIAL AND METHODS

Clinical Study

The present clinical study aims at the assessment of the efficacy of the formulation Madhukadi choorna administered along with arka patra swarasa (Juice of leaves of *Calotropis procera*) as anupana considering its efficacy in Shweta pradara and is understood by the method explained in Table 1.

Assessment of overall effect of the treatment

- 1. Well Responded = Relieved by all symptoms (Srava, Vedana and Kandu)
- 2. Moderately Responded = Relieved by any of the two among three symptoms.
- 3. Poor response = Relieved by any one among three symptoms.
- 4. Not Responded = Not relieved by any of the symptoms.

RESULT

Based on the degree of each subjective and objective parameter like Yoni srava, Yoni vrana, Yoni Sheetatwa, Yoni Dourgandhya, Yoni Kandu and Vaginal smear, vaginal pH the overall assessment was carried before and after the treatment. From the analysis, except in the parameter "Vrana" (wound) all other parameters shows highly significant (as p<0.05). The parameters yoni srava (discharge), yoni kandu (itching), yoni vedna (pain per vagina), vaginal pH and vaginal smear shows more highly significant than the other parameters (as p<0.001). The parameters voni durganda (foul odour) and voni sheetatwa (coldness) shows less highly significant (as p>0.001). The percentage of improvement in the parameters are Yoni srava (discharge) with 90.625%, yoni durganda (foul odour) with 62.5 %, yoni kandu (itching) with 56.41%, yoni vedana (pain per vagina) with 52.17%, yoni sheetawa (coldness) with 60.0 %, vrana (wound) with 75 %, vaginal pH with 28.41 % and vaginal smear with 53.84% from the study.

The study revealed to be satisfactorily affective.

Table 1: Study design, Assessment criteria including the Subjective & Objective Parameters of the clinical trial:

	Data source	20 Patients of Shweta pradara with confirmed diagnosis were taken randomly for a
Patient		group trial from the OPD & IPD of DGMAMC & Hospital, Gadag
selection	Criteria of inclusion	1) Age between 20-50 yrs
		2) Chronic lecorrhoea (> 2 months)
	Criteria of exclusion	1) Pregnancy and lactation.
		2) Pelvic inflammatory disease.
		3) Abnormal pap smear.
		4) Abnormal uterine bleeding.
		5) Local gynecological causes like ovarian cyst, prolapse, fibromyoma polyps.
		6) Systemic disease, including severe anemia and HIV.
		7) Patients with STD's.
		8) Use of hormones or Intra uterine devices
Clinical Study	Study Duration	30 days with specific follow up.
Design	Mode of administration	Oral administration
	Dosage & Anupana	5gms (TID) Madhukadi choorna with arka patra swarasa.
	Follow up study	7 th , 14 th , 21 st and 30 th day.
	Investigations	Blood –Hb%, TC, DC, ESR.
		Urine – Albumin, Sugar, Microscopic.
		Vaginal smear, Vaginal pH, if required
	Yoni srava	Gr-O No discharge
Assessment	(Vaginal Discharge)	Gr-1 Mild- Persistent moistness of Vulva
Criteria		Gr-2 Moderate- Need to change the undergarments frequently
		Gr-3 Severe-Need to use an extra cloth or pad
	Yoni Dourgandhya (Foul	Gr-O No smelling
	odour from vaginal)	Gr-1 Mild-Smell felt at the time of changing garments
		Gr-2 Moderate- Smells slight out side
		Gr-3 Severe- Occasionally fouls smelling
		Gr-4 Extreme-Persistent foul smelling
	Yoni Kandu	Gr-O No itching
	(itching in Vagina)	Gr-1 Occasionally itching
		Gr-2 Mild itching
		Gr-3 Moderate – present but did not affect day-to-day work
		Gr-4 Severe – Continuous itch, which affects day-to-day work
	Yoni Vedana (pain)	Gr-O No pain
		Gr-1 Mild pain – no medicinal requirement
		Gr-2 Moderate – Persistent pain
		Gr-3 Severe – continuous pain – requires Medicine
	** 1.01	G-4 Extreme – pain continuous with abdominal cramps
	Yoni Sheetatwa (Coldness)	Gr-O Coldness not felt
		Gr-1 Coldness felt
		Gr-2 Romaharsham
	V GT (Gr-3 Ushna Kamitwam
	Vrana (Ulcerations)	Gr-O No Ulcerations
		Gr-1 Mild-Petechial Ulcerations
		Gr-2 Moderate- Indurate Ulcers
	V : 10	Gr-3 Severe- Ulcers with discharge
	Vaginal Smear	Gr-O Negative (No abnormal findings)
		Gr-1 Inflammatory smear
		Gr-2 Inflammatory smear with monaliasis

Table 2: Distribution of the patients by chief complaints

SL.No	Chief complaints	Patients	Percentage
1	Yoni Srava	20	100%
2	Yoni Dourgandhya	12	60%
3	Yoni Kandu	20	100%
4	Yoni Vedana	17	85%
5	Yoni Sheetatwa	12	60%
6	Vrana	4	20%

Table 4: Distribution of the patients by degree of Yoni srava before and after treatment

SL.No	Degree of Yoni Srava	BT	%	AT	%
1	Grade – 0	0	0	17	85
2	Grade – 1	12	60	3	15
3	Grade – 2	4	20	0	0
4	Grade – 3	4	20	0	0

Table 6: Distribution of the patients by degree of Yoni kandu before and after treatment

SL.No	Degree of Yoni Kandu	BT	%	AT	%
1	Grade – 0	0	0	9	45
2	Grade – 1	7	35	7	35
3	Grade – 2	8	40	2	10
4	Grade – 3	4	20	2	10
5	Grade – 4	1	5	0	0

Table 8: Distribution of the patients by degree of Yoni sheetatwa before and after treatment

SL.No	Degree of Yoni Sheetatwa	BT	%	AT	%
1	Grade – 0	10	50	16	80
2	Grade – 1	10	50	4	20
3	Grade – 2	0	0	0	0
4	Grade – 3	0	0	0	0

Table 10: Distribution of the patients by degree of vaginal pH before and after treatment

SL.No	Degree of Vaginal pH	BT	%	AT	%
1	3 – 4	0	0	5	25
2	4 – 5	3	15	11	55
3	5 – 6	4	20	3	15
4	6 – 7	8	40	1	5
5	7 – 8	5	25	0	0

Table 3: Distribution of the patients by Associate complaints

SL.No	Associate complaints	Patients	Percentage
1	Kalishoola	14	70 %
2	Jwara	7	35%
3	Anga marda	9	45%
4	Udara shola	6	30%
5	Dourbalya	17	85%
6	Yoni daha	5	25%

Table 5: Distribution of the patients by degree of Yoni dourgandhya before and after treatment

SL.No	Degree of Yoni	BT	%	AT	%
	Dourgandhya				
1	Grade – 0	8	40	12	60
2	Grade – 1	6	30	7	35
3	Grade – 2	3	15	1	5
4	Grade – 3	0	0	0	0
5	Grade – 4	3	15	0	0

Table 7: Distribution of the patients by degree of Yoni vedana before and after treatment

SL.No	Degree of	BT	%	AT	%
	Yoni Vedana				
1	Grade – 0	3	15	10	50
2	Grade – 1	12	60	9	45
3	Grade – 2	4	20	1	5
4	Grade – 3	1	5	0	0
5	Grade – 4	0	0	0	0

Table 9: Distribution of the patients by degree of Vrana before and after treatment

SL.No	Degree of Vrana	BT	%	AT	%
1	Grade – 0	16	80	19	95
2	Grade – 1	4	20	1	5
3	Grade – 2	0	0	0	0
4	Grade – 3	0	0	0	0

Table 11: Distribution of the patients by degree of Vaginal Smear before and after treatment

SL.No	Degree of Vaginal Smear	BT	%	AT	%
1	Grade – 0	3	15	14	70
2	Grade – 1	8	40	0	0
3	Grade – 2	9	45	6	30

Table 12: Result of Madhukadi Choorna in Shweta Pradara

SL.No	Result	No of Patients	Percentage
1	Good Response	4	20
2	Moderate Response	9	45
3	Poor Response	5	25
4	No Response	2	10
5	Total	20	100

Table 13: Statistical analysis of the subjective and objective parameters

Parameter	Mean	SD	SE	t-value	p-value
Yoni srava	1.45	0.887041	0.198354	7.310145	< 0.001
Yoni dhurganda	0.789474	1.084176	0.242437	3.256413	< 0.005
Yoni kandu	1.1	0.788069	0.176223	6.242094	< 0.001
Yoni vedana	0.6	0.598243	0.133775	4.485134	< 0.001
Yoni seetatwa	0.3	0.470162	0.105135	2.853482	< 0.025
Vrana	0.15	0.366348	0.08192	1.831048	>0.05
Vaginal pH	1.955	0.772879	0.172826	11.31194	< 0.001
Vaginal smear	0.9	0.788069	0.17622	5.107167	< 0.001

Table 14: Pharmacological properties of the constituents in Madhukadi Choorna

Drugs	Probable mode of action				
Yastimadhu	kaphashamaka (decreases the kapha) and vranaropaka (wound healing) 15,16				
Haridra	Kaphaghna (reduces the kapha), Vranahara (wound healing), Krimihara (anti-microbial) and is indicated in pradara (leucorrhoea) 17,18				
Vanga Bhasma	Katu, Tikta, Kashaya Rasa(pungent, bitter and astringent in taste) with Ruksha, Laghu, Ushna, Tikshna guna(rough, light, hot and fast acting properties) is Kaphahara(reduces kapha) and is indicated in pradara roga (leucorrhoea) 20,21				
Arka	As anupana (vehicle) ushna guna and is kaphanisaraka ¹⁹				

DISCUSSION

Madhukadi yoga is a reference from Rasatantra sarasangraha, Pradarachikitsa adhyaya. It consists Choorna of Haridra, Yashtimadhu, Vanga Bhasma along with Arka patra swarasa. Each drug utilized in the preparation of the compound formulation Madhukadi Choorna holds good action for Kaphahara (reduces kapha dosha), kanduhara (reduces itching), Ushna guna (hot in potency) and anti-exudative property. Therefore, together Madhukadi choorna proves to be effective in subsiding the disease.

CONCLUSION

Shweta pradara is characterized by a discharge from the female genital tract. It is often associated with some organisms, metabolic and hormonal disturbances which are responsible for the disease. The vitiation of kapha dosha is the main causative factor of the disease. The trial drug utility is based on the fact that it directly acts on Kapha dosha & the female reproductive system. All the drugs individually possess the qualities to curb the respective disease when used in a compound formulation. Undoubtedly the drug efficacy over the disease could be inferred.

ABBREVIATIONS

BT: Before Treatment AT: After Treatment

REFERENCES

- 1. Site at: http://www.ayurpharm.com
- Sushruta. Sushruta Samhita (Hindi Commentary). Shastri KA, editor, tenth edition, Varansi: Chaukhambha Bharti Academy 1996, Sharira Sthana, 2/39. p 16.
- Sharma RJ. Vandhya kalpadruma. seconnd edition, Mumbai: Shri Venkateshwar Press; 1987. 4/46-50. p112.
- PV Sharma. Ayurveda Ka Vaigyanika Itihas. Second edition, Varansi, Chukhamba Orientalia; 1981 p18.
- 5. Atharvaveda 44/3.
- Kashinath Shastri, Charaka Samhita of Agnivesha of Chakrapani Datta, Part 2, eighth Edition 2004. Choukhamba Sanskrit Sansthan, Varnasi., Chikitsa Sthana, 30/119, p767.
- kaviraj Ambika dutta shastri, Sushruta Samhita,By, Part 2, Choukhamba Sanskrit Sansthan,Varnasi, Uttara sthana 38th Chapter, p 156.
- Vagbhatta. Ashtanga Samgraha (Hindi), Vol 2. Edited by Gupta AK, Sharma NK, second edition, Chaukhambha Sanskrit Series, Varanasi, 2005, Uttara Sthana, 39/73. P 339.

- Kashinath Shastri, Charaka Samhita of Agnivesha of Chakrapani Datta, Part 2, eighth Edition 2004. Choukhamba Sanskrit Sansthan, Varnasi., Chikitsa Sthana, 30/209, p769.
- Sharangadhara Samhita, translated by K.R Srikantamoorthy. Chaukambha Sanskrit Sansthan, Varanasi, Third edition .1997, Prathama Khanda, Chapter 7, p-45
- 11. Yogaratnakara, Commented by Vaidya Laxmipathy Shastri, Edited by Bhishagratna Shribhahmananda, Choukhamba Sanskrit Sansthan, Delhi, Streerogadhikara, p 397.
- 12. Bhavaprakasha of Bhavamishra, Translated by Prof. Srikantha Murthy, Krishnadas Academy, Varanasi, Streerogadhikara, p773-774.
- Dr. Parimi & Dr. Vinaya, Rasendra SaraSangraha of Sri Gopal Krishna Bhat, Choukambha Publications, first edition, 2007, Delhi, Chapter Pradara Chikitsa, p 921
- 14. Professor Gopaldas, Rasatantra Sarasangraha and Siddhaprayoga Sangraha, Prathma Khanda, Krishna gopal Ayurveda Bhavana, eleventh edition, Ajmer, Bhasmaprakarana p 123.
- J.L.N.Shastry, Dravyaguna Vignana, Vol II, Choukamba Orientalia, first edition, 2004, Varanasi, Chapter 27, p156
- Bhavamishra, Bhavaprakasha Nighantu, Commented by Dr. Chunekar, Edited by Dr.G. Pandey, Chapter Haritakyadi Varga, Choukambha Bharati Academy, sixth edition, 1982, Varanasi, p 66., p 115
- 17. J.L.N.Shastry, Dravyaguna Vignana, Vol II, Choukamba Orientalia, first edition , 2004, Varanasi, Chapter 112 p 518
- Arun Bhaskaran et al. Clinical evaluation of amragandha haridra (*Curcuma amada* Roxb) in pratisyaya w.s.r to allergic rhinitis: a folklore claim. Int. J. Res. Ayurveda Pharm. 2012;3(1):85-89
- Bhavamishra, Bhavaprakasha Nighantu, Commented by Dr. Chunekar, Edited by Dr.G. Pandey, Chapter Guduchyadi Varga, Choukambha Bharatiya Academy, sixth edition 1982, Varanasi, pg.no. 66., pp. no. - 305
- Sri Sadananda Sharma, Rasatarangini, Taranga 11, Shloka-5, Vidyadhar vidhyalankar editor, first edition, Motilal Banarsidas, Delhi, 2007 p147.
- Chandrabhushan Jha, Ayurvediya Rasashastra, Choukambha Publications, first edition, 2013, Varanasi, Louhadi Dhatu-Upadhatu Prakarana, p 366

Cite this article as:

Poonam Bhojak, Suvrna.P, J.G. Mitti, M.C. Patil. A clinical evaluation of the efficacy of madhukadi choorna in shweta pradara. Int. J. Res. Ayurveda Pharm. 2016;7(1):41-44 http://dx.doi.org/10.7897/2277-4343.0718

Source of support: Nil, Conflict of interest: None Declared

Disclaimer: IJRAP is solely owned by Moksha Publishing House - A non-profit publishing house, dedicated to publish quality research, while every effort has been taken to verify the accuracy of the content published in our Journal. IJRAP cannot accept any responsibility or liability for the site content and articles published. The views expressed in articles by our contributing authors are not necessarily those of IJRAP editor or editorial board members.