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Management of Vulvovaginal Candidiasis by Ayurvedic Medicament: A Case Report

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ABSTRACT

According to sexually transmitted guidelines 2015, estimated 75% of women will have at least one episode of vulvovaginal candidiasis and 40%–45% will have two or more episodes. So there is a scope to find out better treatment for vulvovaginal candidiasis in alternative medicines. A 45 years old married female patient came with complaint of excessive curdy white discharge per vaginum and occasionally itching vulva since last 8 months. The culture of vaginal discharge was done on 20/4/2017 and it was positive for candida albicans. *Nimbadi Yonivarti*, 3gms was given once a day per vaginally for 10 days on 20/4/2017. But patient got mild relief. *Kumariadi Kalka Yonipotli* (medicated tampon) was started on 8/5/2017 for 15 days. Symptomatic relief was found within 7 days of *Yonipotli* treatment. Candida albicans was negative on 25/7/2017 and there is no recurrence till date. Thus, it is proved that Ayurvedic medicines helpful in the management of vulvovaginal candidiasis.

KEYWORDS

Candida Albicans, White Discharge, Yonipotli



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INTRODUCTION

Swetapradaris the most common complaint among gynecological disorders, of the women of reproductive age group having cardinal features i.e., white creamy, yellowish, greenish discharge from vagina. Complaint of vaginal discharge is very much dependent upon woman's own perception, power of observation and tolerance or has great individual variation¹.

Candida albicans is the most common candida species found in vaginal yeast infections. Candidiasis occurs when the normal vaginal flora changes in acidic medium. Recurrences of vulvovaginal candidiasis are common in a higher percentage of women immediately after cessation of the 6 month regimen². Thus, Ayurvedic medicines may useful to avoid recurrence.

CASE STUDY

A female patient of 45 years attended the OPD of Prasuti-Tantra and Striroga at I.P.G.T. and R.A. Hospital, Jamnagar with the complaint of curdy white discharge per vaginum since 8 months on 18/4/2017. Associated complaints were itching vulva, pain and burning in vagina, Backache, lower abdominal pain and burning on micturition. She had normal menstrual history. Her obstetric history was G4p2A2

with 22 years marriage life and had two normal deliveries at hospital.

She was prescribed Clingen Forte vaginal suppository for 7 days for curdy vaginal discharge with pruritus vulvae in October 2016. She and her husband had also taken tablet Fluconazole (150mg) once in a week for 3 months. Again she was suffering from vaginal infection so; she came to IPGT & RA, hospital, Jamnagar hospital for the treatment.

On examination:

On per speculum examination, mild vulvitis, moderate profuse thick, curdy white discharge and cervicitis were present and on bimanual examination, anteverted, anteflexed, mobile, normal sized uterus was found and suprapubic tenderness was also present. Odour of vaginal discharge was normal.

RESULTS

Nimbadi Yonivarti, 3gms was given once a day per vaginally for 10 days on 20/4/2017 but with mild relief for patient. *Yoni Prakshalana* and *Potli* were started on 8/5/2017 for 15 days. Symptomatic relief was obtained within 7 days of treatment. Treatment was continued for complete cure of white discharge and to avoid recurrence. After 15 days course of



Yonipotli, patient was advised to take *RasayanaChurna* combination to avoid *ChandaprabhaVati* and recurrence for 1 month.

Table 1 Investigations done before treatment on 24/4/2017

Blood investigation	
Total WBC	6300/ cumm
Heamoglobin	14 gms %
ESR(westergreen)	10mm/hr
RBS	89mg/dl
Urine examination	
Albumin	Trace
Pus cells	28-30/HPF
RBC	6-8/HPF
Epithelial cells	Many
Microbiological investigations of vaginal discharge	
Wet mount	8-10 pus cells/ HPF
10% KOH preparation	Dimorphic yeast seen
Gram's stain	Absence of microorganisms
Aerobic culture	No growth
Fungal culture	Candida albicans

Table 2 Treatment protocol

Treatment protocol	Duration
<i>NimbadiYonivarti</i> per vaginally	10 days
<i>Yoniprakshalana</i> with <i>TriphalaKwatha</i> and <i>PanchvalkalaKwatha</i>	15 days
<i>KumariadiKalkaYonipotli</i> <i>KumariSwarasa</i> 10ml <i>Lodra</i> 1gm <i>Khadira</i> 1gm <i>Haritaki</i> 1gm <i>Amalaki</i> 1gm <i>Yashtimadhu</i> 1gm	15 days
<i>ChandraprabhaVati</i> 250mg 2 tablet twice a day with water	1 month
<i>RasayanaChurna</i> 3gm twice a day with honey <i>Vidanga</i> 1gm <i>Haridra</i> 1gm <i>Chopchini</i> 1gm	1 month

After treatment, on per speculum examination, no vulvitis and minimal discharge was present, cervix was normal and no tenderness was seen during bimanual examination. Fungal culture was repeated on 25/7/2017 and observation was negative for *Candida albicans*. Till date patient had no recurrence.

DISCUSSION

Probable mode of actions:

NimbadiYonivarti contains *Nimba*, *Triphala*, *Sphatika*, gelatin and honey. *Nimbadiyonivarti* is already effective in abnormal vaginal discharge^{3,4}. *Nimba* has *Tikta*, *KashayaRasa* and *SheetaVirya* and *PittaKaphaSamaka* properties which may be helpful to decrease vaginitis and abnormal white discharge. *Triphala*⁵ has Anti oxidant, antimicrobial, anti-inflammatory, anti candida activity⁶ so it may be helpful to decrease vaginitis, vulvitis and also helpful in yeast infections. *Sphatika* has *Kashaya*, *Amla Rasa* which is helpful to decrease discharge. Honey has an anti fungal effect against candida species⁷. Thus *Nimbadi Varti* may be helpful in vaginal yeast infection.



Douche of *Panchavalka Kwatha*⁸ and *Triphala Kwatha* has *Kashaya* property which helps to decrease curdy vaginal discharge. *Kumari Swarasa*^{9,10} has Anti fungal activity against candida, anti oxidant activity, immune system restoration, Anti inflammatory action. (add full stop) *Lodra*, *Haritaki*, *Amalaki*, *Yashtimadhu* and *Khadira* combination act as *Stambhak*, *Sothahara* and *Vednasthapak* so, it may be helpful for restoration of normal vaginal flora and may helpful to increase the growth of lactobacillus bacteria.

Chandraprabha Vati is mentioned for *Streeroga* in *Sharngadhara Samhita*. It is having *Tridoshahara*, *Rasayana*, *Balya*, *Vrushya* properties does the restoration of all *Dhatu*s and it will helpful to avoid recurrence of disease. *Chandraprabha Vati*¹¹ has proven anti inflammatory activity. *Rasayana Churnadi* combination acts as *Vatakapha Samaka*, *Balya*, *Shothahara*, *Mutrajanana*, so helpful to control recurrence of genitourinary tract infections.

CONCLUSION

From the above case, it is concluded that *Triphala* and *Panchavalka Kwatha Prakshalana* along with *Kumariadi Kalka Yonipotli* is effective in the management of vaginal candidiasis. It is also helpful in

recurrent vaginal discharge with other Ayurvedic oral medicines because no recurrence is found in this case till date of publication. Further clinical study is required to draw final conclusion and to understand mode of actions of all the drugs.



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