Karnini Yonivyapad (Cervical Erosion): A Review

Sonam¹, V. Asokan¹*, Babita Roy¹ and Karishma U. Pathan¹

¹Department of Prasuti Tantra and Stree Roga, Parul Institute of Ayurved, Vadodara, Gujarat, India.

Authors’ contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

Article Information

DOI: 10.9734/JPRI/2021/v33i36A31925

Editors:
(1) Dr. Rafik Karaman, Al-Quds University, Palestine.

Reviewers:
(1) Virgiliu-Mihail Prunoiu, Bucharest Carol Davila University of Medicine, Romania.
(2) Nihad Abdul-Lateef Al Kadhim, AL-Qasim Green University, Iraq.
(3) Wijayanti, Universitas Kusuma Husada Surakarta, Indonesia.

Complete Peer review History: http://www.sdiarticle4.com/review-history/70712

Received 27 April 2021
Accepted 03 July 2021
Published 08 July 2021

ABSTRACT

Health status of women is essential for healthy society. In today’s fast and competitive world, there is change in the lifestyle of women which leads to their physical and mental stress, women mostly get affected by this environment and are prone to gynaecological problems. Common health problem or gynaecological problem in women is white discharge, foul smell discharge, itching at vulvar region, burning micturition. Cervical erosion is a condition seen in the age group of 20-40 years with more of Kapha dominance. Kandu, Yoni Srava and other features of Kapha Pittadushti are seen in cervical erosion. It is seen as red circular granular surface surrounding the cervical os bathed in discharges. On the study of etiological factors, sign and symptoms the disease is found to be caused by Kapha – Pittadosha Prokopa affecting Yoni and Garbhasayamukha leading to Samprapti which manifests as cervical erosion. Based on symptomatology, cervical erosion can be correlated with Karnini Yonivyapad. Karnini is an abnormal proliferation of cervical epithelium which may produce abnormal discharge, alter the vaginal pH and cervical mucus plug. Chikitsa of Karnini Yonivyapad is Yoni Prakshalana, Yoni Pichu Dharana, Yoni Varti Dharana, Agni Karma and Kshara Karma. Kaphahara line of treatment should be done. Diet also plays an important role in cervical erosion so proper Pathya Apathyta are to be followed.

Keywords: Ayurveda; Cervical erosion; Sthanika Chikitsa; Yoni Prakshalana; Yoni Pichu; Yoni Varti; Agni Karma; Kshara Karma.

*Corresponding author: E-mail: drasokan24@gmail.com;
1. INTRODUCTION

Due to straining during labour in the absence of labour pains means Akalavahana, the Vayu obstructed by fetus, with holding Kapha and getting mixed with Rakta produces Karnika in Yoni, which obstructs the passage of Raja. Due to presence of Karnika this condition is termed as Karnini. A different type of pathogenesis of Karnini is that vitiated Kapha along with Rakta produces Karnika in the Yoni [1-4]. Due to premature ejaculation of fluid by women brought about by untimely straining leads to vitiation of Vata, aggravated Vata with holding Kapha and Rakta produces ‘Karnika’ on ‘Garbhashaya Dwaramukha’ which obstructs the passage of Raja. Karnika can be correlated to the erosion on cervix which may be slightly raised above the level of squamous epithelium of vaginal portion of the cervix and granular in appearance and when touched gives a grating sensation. Cervical erosion refers to denudation of superficial epithelium and it is described as the “interplay between two epithelia” [5-7]. It is the development of a reddened area on the portio vaginalis around the external os of the cervix. The squamous covering of the vaginal part of the cervix is replaced by columnar epithelium, which is continuous with that lining of the endocervix. Erosion is never ulcerated unless or until it is malignant [8-10]. Cervical erosion is the replacement of squamous epithelium of the ectocervix by the columnar epithelium of the endocervix which is more prone to infection. Due to this the chances of infection increases which plays important role in increases the chances of malignancy.

2. INCIDENCE

The incidence of cervical erosion is between 50-85% in females of child bearing age.

3. TYPES

Cervical erosion is of two types: Congenital, Acquired

3.1 Congenital Cervical Erosion

At birth 1/3rd of all female new born the columnar epithelium of the endocervix extends beyond the external os and covers the portio-vaginalis of the cervix due to influence of maternal estrogen. As the estrogen level in neonate falls, the condition reverts and erosion disappears. This condition persists only a few days after birth until the level of oestrogen from mother falls and congenital erosion heals spontaneously.

3.2 Acquired Cervical Erosion (Histopathological Classification)

i. Simple flat erosion: During early stage of established cervicitis desquamation and shedding out of the epithelium around the external os occurs due to loosing of the epithelium presenting as red glistening area which is flat erosion. It is with smooth surface and a very few glands open on its surface. Microscopically it shows the tissue beneath the raw area that are infiltrated with round and plasma cells [11-13].

ii. Papillary erosion: Due to proliferation of cervical erosion it gets folded and forms papillary projections on granulation tissue base of chronic cervicitis. The papillary effect is mainly the result of local proliferation which can be easily infected.

iii. Follicular/Cystic erosion: During its healing stage the endocervicitis and chronic discharge subsides, the squamous epithelium regrows towards the external os replacing the columnar epithelium which heals and disappears. As the mouth of the glands may be blocked may produce retention cyst like elevations on the surface of the portio vaginalis and these are called Nabothian follicles [14-16].

3.3 Symptoms

1. Abnormal vaginal bleeding (not associated with a menstrual period) -after sexual intercourse (post coital) -between menstrual period

2. Discharge (clear or yellowish mucus) -may have an odour if associated with vaginal infection.

3.3 Signs

Fig. 1. Chronic cervicitis, with cervical erosion
During pelvic examination an area on the cervix appears raw red and inflamed.

4. AYURVEDIC REVIEW

4.1 Karnini Yoni Vyapad

The word Karnini refers to the seed capsule of the lotus flower. The minute protuberance at the Garbhasaya Dwara due to morbidity of the Pitta and Rakta resembling the Padma Karnika or pericarp of the lotus is known as Karnini Yoni Vyapad.

An elevated lesion at the Garbhasaya Greeva characterises the Karnini Yoni Vyapad. The lesion is said to simulate the pericarp of lotus flower in appearance.

Karnini can be compared with cervical erosion. In cervical erosion the cervix becomes somewhat hypertrophied, congested and covered with small red projection resembling sprouts this erosion is often associated with nabothian cysts which are small pea sized smooth nodular structures, thus due to presence of small sprouts the cervix assumes the shape of barbed wire or small brush and when associated with nabothian cysts then assumes to the pericarp of lotus.

4.2 Nidana (Etiology) of Karnini Yonivyapad

Nidana of Karnini Yonivyapad describe under two headings as –

1. Samanya Nidana
2. Vishista Nidana.

- Samanya Nidana

It comprises all the Nidana those are responsible for all Yonivyapad including Karnini Yonivyapad. Vata Dosha is essentially involved in all Yonivyapad [17]. It means all the factors which causes vitiation of Vata are directly or indirectly are causative factor for Yonivyapad. Samanya Nidana of Yonivyapad as abnormal diets and abnormal mode of life, abnormal Artava, abnormalities of Bija (sperm and ovum) and Daiva are the factor leading to various Yonivyapad [17]. Excessive coitus done by a woman having Sushka body or else a weak woman or at an early age with a man having big sized penis is also responsible for Yonivyapad due to vitiation of Vata. [18] Accepting the abnormalities of Artava and Bija as well as Daiva as causative factors, the abnormal diet, having coitus in abnormal body postures, excessive coitus and use of any foreign body or substance for sexual pleasure are also responsible for the disease of reproductive tract i.e. Yonivyapad [19].

- Vishista Nidana

Acharya Charaka and Vagabhata have mentioned the specific Nidana (etiology) i.e., Akalavahanaya or 'Akalavahana' responsible for Karnini yonivyapad. So we can summarize etiological factor for Karnini yonivyapad as, 1. Mithyachara 2. Pradushta Artava 3. Bijadosha 4. Daiva 5. Akalevahanaya or Akalavahana. Samprapti (Pathogenesis) of Yonivyapad does not occur without vitiation of Vata, Vata and Kapha in Samprapti of Karnini Yonivyapad, vitiated Kapha along with Rakta produces Karnika in Yoni are the different presentations. Thus from the above discussion it is clear that the causative Doshas in Karnini yonivyapada are vitiated Vata and Kapha and Dushya is Rakta dhatu.

- Samprapti Ghataka

  - Dosha - Vata (Apana), Kapha
  - Dushya – Rasa, Rakta, Mamsa Dhatu
  - Adhisthana - Garbhashaya Mukha (CervixUteri)
  - Srotas - Artavavaha Srotas.
  - Srotodushti - Sanga
  - Vyadhi swabhava - Chirakari
  - Sadhyaasadhya – Krichasadhya

4.3 Symptoms of Karnini Yonivyapad

The disease is the resultant of localized vitiation of Vata and Kapha in the region of Yoni, so the symptoms produced due to these Doshas will be found in this disease.

Acharya sushruta has clearly mentioned that the 'Shleshmala’ features will also be found associated in ‘Karnini Yonivyapad'
4.4 Symptoms due to Vitiated Kapha

a) Pandu Varna-Palour in Vaginal canal
b) Pichhila Yoni means excessive mucoid discharge per vagina
c) Kandu Yukta i.e. Pruritis Vulvae
d) Sheetala Yoni means wetness and numbness of vagina

4.5 Symptoms due to Vitiation of Vata

I. Backache
II. Pain in lower abdomen
III. Aayasa i.e. sickness feeling are also found in this disease

5. MANAGEMENT OF KARNINI YONIVYAPAD

5.1 Yoni Prakshalana

It is a procedure in which the discharges of Yoni is washed out using the Kwatha prepared out of respective drugs for Doshas.

- Yoni Prakshalana should be done with Nyagrodhadi Kwatha mixed with Ghrita, milk, and sugar.
- Aragwadhadi Kashaya is also effective in Kaphaja Yonivyapad for Prakshalana.
- Kasisa, Triphala, Kankshi, Amra, Jambu Beeja. Dhataki with honey is useful in Kaphaja Yonivyapad for Prakshalana.
- The action of these drugs which are used have Shulaghna, Sravaghna and Dourgandhyahara properties.

5.2 Yoni Pichu

Yoni Pichu means packing the vagina with tampon (gauze strip, cotton wool). Yoni Pichu which is routinely practiced is Taila Pichu.

Yoni Pichu is the application of sterile swab soaked in medicated oil or decoction etc. in the vagina.

Yoni Pichu with Jataydi Taila: which is having the properties of healing, pain relief, reduces burning sensation, especially in Pitta Dosha.

5.3 Yoni Varti (pessary):

Varti is long in size and can be used effectively in infections and dealing with their recurrence. E.g: Pessary prepared with powdered Yava (barley) and Masa (a type of bean) is used in Kaphaja Yonivyapad.

- Indications:
  - Yoni Paicchilya, Kaphaja Yonivyapad, Vipluta Yonivyapad, Karnini Yonivyapad, Anartava.

- Yoni Purana:
  - Powder of Palasha, Dhataki, Jambu, Samanga, Mocharas and Sarjaras in equal amount is used as Yoni Purana. This is very effective treatment in vaginal discharge.

- Kshara Karma:

Kshara Karma is said to be superior to any other surgical or parasurgical measures due to its function like Chedana, Bhedana, Lekhana and Patana Karma. Kshara acts as a corrosive or caustic agent and generates healthy base for healing. Application of Kshara in case of cervical erosion is an effective form of herbal cauterization (incision and excision). This therapy clears the erosion with minimal recurrence and complications.

5.4 Agni Karma / electro-cauterization

Electrocautery is the burning of diseased tissue by a red hot electric cautery. The basic principle behind the application of Agni karma is the latent heat rate of the material used.
Superficial cauterization can be done without anaesthesia as an outdoor procedure, if extensive area to be cauterized it can be done under general anaesthesia.

5.4.1 Probable mode of action

Agni Karma pacifies Vata and Kapha Dosha as it is Ushna, Tikshna, Sukshma, Asukariguna.

The heat transferred acts by removing the obstruction in the Srotas and increases the blood circulation to the affected site, hence the cellular activity and metabolism increases.

In Dagdha vrana, rakta agitated by fire and gets aggrevated. Pitta dosha also get aggrevated due to similar properties in virya and rasa.

6. PATHYA- APATHYA

- Meals prepared with Yava, Sidhu, Taila, Abhayarishita should be used every day.
- Pippali, Lauhabhasma, and Haritaki all in equal amount should be taken with honey.
- Diet rich in meat and milk is most beneficial in Karnini Yonivyapad.
- Manda is contraindicated to the women suffering from Yonivyapad.

7. PREVIOUS WORKS DONE

i. Tomar Pravesh, Garg Saloni, A pilot study Ayurvedic management of cervical erosion through Yoni Prakshalana and Jatyaadi Taila pichu, Dept. Of Prasuti Tantra & Stri Roga, Rishikul Campus, Haridwar, Uttarakhand Ayurveda University, Harrawala, Dehradun, India. A total 10 patients were administered Yoniprakshalana with 250 ml Panchvalkala Kwatha and Pichu with Jatyaadi Taila for 7 days in three consecutive cycles. The contents of Panchvalkala are Kaphapittashamaka, Dahanashamana, Stamthana, Yonidoshahara, Yonishodhaka, Shothahara, Rakpittashamaka. It decreased amount of vaginal discharge, foul smell and itching per vaginum by its Stamthanaa, Kapha Doshahara, Yonidoshahara Gunas. The effect on local inflammatory symptoms may have occurred due to Shothara, and Pitta Doshahara properties. It may have reduced hyperaemia of cervix by its Rakt Pittanshamaka Guna and prevents rapid growth of squamous epithelium by its Kapha Dosha Shamaka Guna. Jatyaadi Taila, Haridra, Daruharidra, Nimba Patra, and Jati Patra present in it have antibacterial, antifungal and anti-inflammatory effects. Kasisa (copper sulphate) is highly toxic to microbes even at low concentrations. Haridra also showed analgesic properties thus working on pain induced by inflammation. Highly significant effects were obtained on cervical tenderness (75 % relief) and they can be understood by anti-inflammatory and analgesic effect of the contents of the drugs used in the therapy [20-23]. Researches showed that Manjishta when applied externally increases peripheral circulation and detoxifies blood thus it reduced hyperaemia of the local cervical tissue. Reduction in dischargesnoer vagina by the grahi and astrigant property of lodhra. Results: Highly significant results (p<0.0001) were obtained on amount of discharges (75%), color of erosion (72%) and cervical tenderness (72%). Area covered by erosion decreased (68%) significantly after treatment. Overall effect of the therapy includes marked improved in 50 % of the patients.

Conclusion: The therapy proved to be an effective measure in the management of cervical erosion.

ii. Jasmine Gujarathi, Management of Cervical Erosion by Agnikarma, Dept. of Prasuti Tantra & Stri roga, G. J. Patel Institute of Ayurvedic Studies & Research, New V. V. Nagar, Anand Total 11 patients attending diagnosed with cervical erosion were registered for the study. Drug – Agnikarma Shalaka was prepared in pharmacy of GJAC of length 5-6 cm and breadth ½ cm. Ingredients - Haridra, Yashtimadhu, Karanja, Nimba, Amalaki, Guggulu and Ghrita. Result: All the patients subjected to Agnikarma were observed for relief in symptoms and changes in cervix. Vaginal discharge was increased for first 10 days after Agnikarma because of shedding of burnt epithelium of cervix. After 10 days, patient’s symptoms like backache, white discharge got decreased. Cervix was examined for
healing after 15 days. The area of erosion decreased and proper healing was noted in all patients. In subsequent follow ups patients found relief in all the symptoms including vaginal discharge. When the cervix was again examined after 3 months, the cervix was found totally healed with new epithelium and no discharge.

Jyoti Banderwar, Ayurvedic Management Of Cervical Erosion Through Panchavalkala Ghrita Pichu, Dept. of Prasuti avum Stri Roga, LKR Ayurveda Mahavidyalaya, Gad Hinglaj, Dist.Kolhapur, INDIA International Journal of Innovative Pharmaceutical Sciences and Research www.ijipsr.com Jyoti et.al / IJIPSR / 6 (10), 2018,40-48 ISSN (online) 2347-2154. A total 10 patients were selected based on diagnostic, exclusion and inclusion criteria for administration of Panchavalkala Ghritapichu. 50 % relief was found in amount of discharges and 80 % relie was found in the complaint of foul smell within 7 days of first cycle of trial. Effect of trial on dyspareunia was found to be 80% after completion. Highly significant effects were obtained on cervical tenderness (75 % relief) by anti-inflammatory and analgesic effect of the contents of the drugs used in the therapy. PanchavalkalaGhrita possess Shothhara (anti-inflammatory) and Krimighna (anti-microbial) properties apart from Rakta Shodhaka, Vranahara, Kapha Pitta Doshanashamaka Gunas. Panchvalkalaghrita.

iii. Poornima Hopp, Various research drugs and procedures on cervical erosion carried out at Institute for Post Graduate Teaching & Research in Ayurveda, Jamnagar,1977 In this study 20 patients were treated with first Brihat Jatyadi kwatha Yoni-Dhavana and later Pichu of Brihat Jatyadi Taila was kept on Vrana for 7-30 days depending upon condition of cervical erosion. The study showed 65% patients cured, 25% patients got symptomatic relief while no relief in 10% of patients. Along with local application if oral drugs were given then results were hopeful.

iv. Mukta P. Makani (1981): Efficacy of Indrayanamoola was tested on 20 patients. Indrayanamoola mixed with water and applied locally with the help of a glass rod. Treatment was given once daily for 3 days. The drugs shown good effect on erosion as out of 20 patients 14 (70%) patients showed complete relief from this condition.

v. Ramveer Sharma (1988): In this study 37 patients were treated in 3 groups. In Group A (n-12) Agnikarma with galvanocautery done. In Group B (n-6) same treatment as group A and in addition Clusterol ointment (contained-Udumbaradi Taila [24], Ashwatha, Udumbara, Khadira, Raktachandana, Tuttha) applies on eroded area and Pradantaka Vati [Pradantaka Rasa [25], Ashoka, Amalaki, Yastimadhu, Lodhara, Shatavari, Dhakta, Nagakesara, Shuddha Rasajana, Kukkutanda Bhasma] orally in the dosage of 1gm 3times a day for 60 days. In Group C (n19) local application of Clusterol ointment and Pradantaka Vati orally were administered. The significant result was found in all the groups in healing the erosion; hence the Pradantaka Vati and Clusterol ointment may be alternatively used in place of cauterization. In group A Katishula (50%) Yonishula (50%) White discharge (66.7%) Cervical Erosion (75%) reduced. In group B Katishula (75%) Yonishula (75%) White discharge (100%) Cervical Erosion (100%) reduced. In group C Katishula (66.6%) Yonishula (57.4%) White discharge (84.2%) Cervical Erosion (73.7%) reduced.

vi. Sangita Karlekar (1998): In this work 35 patients were treated into 3 groups. In group A (n-15) with Panchavalkala Kwatha Prakshalana followed by Nishadi Churna (Haridra, Chandana, Yastimadhu) Avachurnana in the dusting mode once/day for 15 days. In Group B (n12) the treatment was same as in group A and in addition oral tablets G-[26] Shilajita, Bangabhasma, Kasisabhasma, Bibhitaka, Amlaki, Yastimadhu, Kutaja, Amramajja,Madayantika] 500mg thrice a day with Ushna Jala for 1 month. In Group C (n-8) Agnikarma with the help of Galvanometric cautery machine point. The study concluded that for 1st degree erosion and sized (26-50%) only local
treatment was adequate. For 2nd degree and medium sized erosion (51-74%) both local & oral i.e. combined therapy was required and for 3rd degree and large sized (75-100%) erosion Agnikarma was helpful. In group A, P/V discharge (94.71%) Low backache (24.81%) Itching vulvae (52.83%) Cervical erosion- Size (43.37%) reduced. In group B, P/V discharge (96.42%) Low backache (63.15%) Itching vulvae (100%) Cervical erosion- Size (85.71%) reduced. In group C, P/V discharge (83.97%) Low backache (66.66%) Itching vulvae (91.66%) Cervical erosion- Size (66.71%) reduced.

vii. Asha Rout (2002): Specific line of treatment was tested in this study on 24 patients in 2 groups. In Group A (n-12) Agnikarma by Vrana-Ropaka Shalaka (Prepared by Haridra, Yastimadhu, Nimba & Amalaki) and then local application of Udumbara Taila as Pichudharana (for 15 days) were performed. In Group B (n-12) Snuhikshara was applied and pichudharana (15days) were used. The study concluded that Vrana-Ropaka Shalaka along with Udumbara Taila Yonipichudharana causes reduction of erosion along with complete symptomatic relief. In total Agnikarma and Ksharkarma can be better alternative of effective treatment in cervical erosion especially Agnikarma. In group A, Yonigata Srava (68.92%) Katishula (64.51%) Yonikandu (75.18%) Cervical Erosion (83.45%) Cervical Tenderness (86.96%) reduced. In group B, Yonigaha Srava (73.49%) Katishula (64.51%) Yonikandu (66.66%) Cervical Erosion (71.61%) Cervical Tenderness (66.66%) reduced.

viii. Meena Bhayal (2003): In this study Agnikarma (Cauterization) [Group A] and Avachurnana (sprinkling of Powder) [Group B] modality in one sitting were tested on the patients of cervical erosion (n-50). For Agnikarma, a Shalaka was prepared out of Haridra, Yastimadhu, Nimba, Karanja & Amalaki. For Avachurnana Dhatrinishadi Churna was used. Before the both procedures Nimba Patra Kwatha Prakshalana (Douche) was done in both groups. Agnikarma therapy showed better relief in signs of Garbhasaya Grivagata Vrana. Hence in symptoms better result observed in Avachurnana Group then Agnikarma. Yoni srava. In group A Yonigata Srava (72.27%) Katishula (67.74%) Yonikandu (66.67%) and Cervical Erosion appearance (66.67%) reduced. In group B Yonigata Srava (72.02%), Katishula (65.14%), Yonikandu (83.82%) and Cervical Erosion appearance (53.76%) reduced.

ix. Jasmin Kazi (2005): Agnikarma and cauterization were occupied for the treatment of Garbhashaya Grivamukhagata Vrana in 33 patients. The patients were studied into 3 groups. Shalaka prepared from Haridra, Yastimadhu, Nimba, Karanja & Amalaki used for agni karma then Jatyadi Taila Pichu was applied for 7 days per vagina (once a day), in Group C (n-11) with electric cauterization and in Group P (n-8) with placebo. Conclusion of the study is that Agnikarma therapy showed better result rather than Electric cauterization and also get better results was obtained in 1st and 2nd degree of cervical erosion. In group A, Yonigata Srava (81.63%), Katishula (78.72%) Yonikandu (91.25%) Cervical Erosion appearance (90%) reduced. In group C, Yonigata Srava (7.14%), Katishula (40.81%) Yonikandu (30%) Cervical Erosion appearance (39%) reduced. In group P Yonigata Srava (-22.12%) Katishula (25%) Yonikandu (50%) Cervical Erosion appearance (15.34%) reduced.

x. Hemalata Chimte (2012): Total 31 patients of cervical erosion were registered and divided into 2 groups. In Group A (n-16) Agnikarma with Swarna Shalaka done and After that Yastimadhu powder mixed with Ghrita (QS), was applied over the wound once a day for a week. In Group B (n-15) Agnikarma with Karanjadi Shalaka done and after that Yastimadhu powder mixed with Ghrita as required was applied over the wound once a day for a week. Conclusion of the study was that agnikarma shalaka of both Swarna Shalaka and Karanjadi had very encouraging results on Cervical erosion because of better and early healing, Swarna Shalaka is better for
Agnikarma in case of Garbhashaya Grivamukhagata Vrana (Cervical erosion). In group A, Yonigata Srava (74.36%) Katishula(82.86%) Yonikandu (89.29%) percentage area of erosion (97.30%) reduced. In group B, Yonigata Srava (55.88%) Katishula(56.25%) Yonikandu (61.29%) percentage area of erosion (77.14%) reduced.

xi. Sireesha K.L, Asokan V (2017): Management Of Slaishmiki Yoni Vyapat (Vulvo Vaginal Candidiasis) With Mild Cervical Dysplasia: A Case Report Department of PTSR, SDMCAH, Hassan, RGUHS, Int. J. Res. Ayurveda Pharm. 8 (2), 2017. 29 years old woman with complaints of whitish discharge per vagina and itching at the vulvar region was screened and the investigations revealed LSIL with Vulvovaginal candidiasis. Intervention with Triphaladi Varti was carried out for 7 days and Prakshalana with Sukhoshna Jala and followed up for next 7 days Triphaladi varti it showed good results not only in reducing the whitish discharge per vaginally and denatured the candidial infection but also it was found effective in the management of Low Grade Squamous Intra-Epithelial Lesion of cervix. Triphaladi Varti which is the Anubhootha yoga with the ingredients of Triphala with Kaphaguna, Tridoshaguna, Haridra with Kandughna, Nimba with Krimighna, Tankana with Sleshma hara. The Triphaladi Varti consists of Rukshna guna and Ushna Veerya thus substantiating Chikitsa sutra of the Slaishmiki yoni vyapat. In this treatment Yoniprakshalana (douching) with Ushnajala (hot water) was done to drain out the whitish discharge.

8. DISCUSSION
In Ayurvedic classics, all gynecological disorders including cervical erosion come under Yonivyapad. Yonivyapad which are caused by Kapha or Vata-Kaphaja Dosha’s are main causative factors of Swetapradara. Treatment of Karnini Yonivyapad is mainly based on the use of drugs which are having predominance of Kashaya Rasa and Kapha-Shamaka property and anti-inflammatory action also. Therefore, the drugs of Katu, Tikshana & Kashaya Rasa dominance are mainly used locally as well as internally.

9. CONCLUSION
Karnini Yonivyapad can be put parallel to Cervical Erosion in modern medicine on the basis of different signs & symptoms. By improving the general health of women and increasing personal hygiene, we can prevent the incidence of cervical erosion. Sthanika Chikitsa also play important role to prevent the incidence and to treat this condition. Anti-inflammatory drugs also have important role in treatment of Karnini Yonivyapad. Agnikarma with Tamra shalaka also gives a good result in cervical erosion as the procedure is done at the most affected area and the reoccurrence of the cervical erosion is impossible. It also helps to cure the secondary infection as Tamra ions(copper ions) have antimicrobial properties.

COMPETING INTERESTS
Authors have declared that no competing interests exist.

REFERENCES
1. Kaviraja Dr. Ambikadatta Shastri, Sushruta Samhitā Sutra Sthana 38/06.
2. Acharya Charaka, Charaka Samhita with Vidyotini Hindi Commentary by Acharya Kasinath Shastri and Gorakhnath Chaturvedi, 16th Ed., Chaukambha Bharati Academy, Chikitsa Sthana. 1989:30; 71.

3. Pallavi Ashok Chandanshiv, The Role of Shata Dhauta Ghritu Pichu in the Management of Pittaj Yoni Vyapad W.S.R. to Cervical Erosion": A Case Study. 2017;4(6) ISSN 2349-638x.

4. Rashmi Sharma Role of Agnikarma in Garbhashaya Grivamukhagata Vrana (Cervical Erosion) International Journal of Ayurveda and Pharmaceutical Chemistry, 2014 Int J Ayu Pharm Chem. 2014; 1(1).

5. Susruta, Sushruta Samhita, Dalhana Commentary, Nibandha Sangraha, Edited by Dr. Yadhavji Trikambji, Acharaya,Chaukhamba Orientalia, Varanasi. Sutra Sthana; 2002.

6. Acharya Vagbhata, Ashtanga Sangraha edited by SP Sharma, Uttara Tantra 39/41, 1st edition, Chaukhambha Sanskrit Series Office, Varanasi; 2006.

7. DC Dutta, Textbook of Gynecology & Contraception, Benign Lesions of Cervix, New Central Book Agency(P)Ltd. chapter 17, 4th edition 2003.

8. 5 Ambikaduttashastri K. Susruta samhita of Susruta, Sutra sthana; Aturopakramaniya adhyaya: Chapter 35, Verse 13. Varanasi: Chaukhamba Sanskrit Samsthana; 2005:139.

9. Waishya R. Commentary Vidhyotini of Brahshashankar Mishra on Bhavaprakasha Nighantu, Purvakhandha: Garbhaprabhakara: Chapter 3, Verses 17-20. Varanasi: Chaukhamba Sanskrit Samsthana, 2059: 22.

10. Ambikaduttashastri K. Susruta samhita of Susruta, Shareera sthana; Shareersamkhya vyakaran adhyaya: Chapter 5, Verse 8. Varanasi, 2005: 55.

11. Vijay Lakshmi Ayurvedic Approach of Cervical Erosion: Karnini Yonivyapad Human Journals, 2017;9(2). ISSN 2349-7203.

12. Sireesha KL, Asokan V .Management Of Slaishmiki Yoni Vyapat (Vulvo Vaginal Candidiasis) With Mild Cervical Dysplasia: A Case Report Department of PTSD, SDMCAH, Hassan, RGUH, Int. J. Res. Ayurveda Pharm. 2017;8(2).

13. Ambikaduttashastri K. Susruta samhita of Susruta, Sutra sthana; Aturopakramaniya adhyaya: Chapter 35, Verse 12. Varanasi: Chaukhamba Sanskrit Samsthana; 38.

14. Ambikaduttashastri K. Susruta samhita of Susruta, Shareera sthana; Shareersamkhya Vyakaran adhyaya: Chapter 5, Verse 20. Varanasi: Chaukhamba Sanskrit Samsthana, 2065:58.

15. Sharma S. Commentary Shashilekha of Indu on Ashtanga sangraha of Vagbhata, Shareera sthana; Anga vibhagam Shareeram adhyaya: Chapter 7, Verse 6. Delhi: Chaukhamba Sanskrit Pratishthana. 2007:764.

16. Acharya Charaka, Charaka Samhita with Vidyotini Hindi Commentary by Acharya Kasinath Shastri and Gorakhnath Chaturvedi, Chikitsa Sthana 30/62, 16th edition, Chaukhambha Bharati Academy; 1989.

17. Susruta Samhita Of Maharshi Sushruta,Chikita Sthana1/8 edited with Ayurveda-Tattva-Sandipika Hindi Commentary ,Scientific analysis, notes etc.by Kaviraj Ambikadutta Shastri, Reprint edition ;Chaukhambha Bharati Academy ,Varansi; 2006.

18. Sushruta Samhita,Part-1,(Ayurveda – Tatta-Sandipika,Hindi Commentary), Kaviraj Ambikadutta Shastri,Chaukhamba Sanskrit Sansthan,Varanasi, Sutra. Sthana.12/Dalhana Tika; 2012.

19. Dutta DC. A Text Book of Gynecology: Kolkata,5th Ed:1. 2008; 306. Available:www.ncbi.nlm.nih.gov.

20. Dutta DC. A Text Book of Gynecology: Kolkata,5th Ed:1. 2008; 306. Available:www.ncbi.nlm.nih.gov.

21. Available:www.ncbi.nlm.nih.gov/pmc/articles/PMC1603278.. A Review of clinical studies on cervical erosion (Garbhashaya Grivamukhagata Vrana) ,International Ayurveda Medical Journal of Pub. 2015; 3:4(4). ISSN:2320 5091.

22. Available:www.scielo.br/pdf/spmj/v126n2/a14v1262.pdf.

23. Available:www.scielo.br/pdf/spmj/v126n2/a14v1262.pdf.

24. Suresh Kumar Solanki, Sushila Sharma, Role Of Kshara Karma In The Management Of Cervical Erosion Ayurpharm Int J Ayur Alli Sci. 2016;5(6) ISSN: 2278-4772.

25. Dr Amit V Rupapara, Dr. Donga SB, Dr Dei LP, Review of clinical studies on cervical erosion (Garbhashaya Grivamukhagata Vrana) ,International Ayurveda Medical Journal of Pub. 2015; 3:4(4). ISSN:2320 5091.

26. Sonika Pal, Chandra Prakash, An International Journal of Research in
AYUSH and Allied Systems Review Article
A Critical Review On Karnini Yonivypad

W.S.R. To Cervical Erosion.

ISSN: 2393-9583 (P).

© 2021 Sonam et al.; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Peer-review history:
The peer review history for this paper can be accessed here:
http://www.sdiarticle4.com/review-history/70712