



Case Study

EFFECT OF DASAPAKA BALA TAILA YONIPOORANAM IN ATROPHIC VAGINITIS - A CASE REPORT

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ABSTRACT

Atrophic vaginitis is a common condition that occurs in post menopause due to the deficiency of estrogen. The condition Atrophic vaginitis is defined as atrophy of the vaginal epithelium due to decreased estrogen levels. This common menopausal condition which is often underreported and under diagnosed is caused by estrogen related changes to the vaginal epithelium and can adversely affect quality of life. Atrophic vaginitis is a common condition in postmenopausal women experience due to estrogen deficiency that causes involution of the vaginal tissue, leading to vaginal dryness, burning sensation in vagina and dyspareunia, the atrophy of the vulvovaginal structures occurs due to estrogen deficiency. Among them *Sushka yoniroga* can be most suitably correlated with Atrophic vaginitis. The management principle of Atrophic vaginitis includes *Vathika yoniroga chikitsa*, along with *Sthanika chikitsa*. Treatment mainly aims at *Vatapittasamana*, *Brimhana*, *Balya* and natural supplementation of estrogen containing drugs. *Sthanika chikitsa* like *Yonipooranam*, *Pichu dharanam*, etc can be done in Atrophic vaginitis. *Sthanika chikitsa* which is of prime importance in the management of *Streeroga* facilitates absorption of drugs through the vagina as the walls and adjacent tissues are highly vascular, where the medicines are administered intra vaginally. In the present case, *Yonipoorana* as *Sthanika chikitsa* as tried. A 54 year old lady was presented with complaints of burning sensation in vagina and pain during sexual intercourse. The vaginal examination was painful and the walls are found inflamed, she was diagnosed with Atrophic vaginitis. She was sent to cytological screening. The reports revealed high grade parabasal cells and low grade superficial cells. The maturation index was found 60/25/5 vaginal pH was 5.3. Pap smear was done which was negative for intraepithelial lesion or malignancy. *Dasapaka Bala tailam* was administered intravaginally for 7 days in 3 consecutive months. During follow up she was relieved from the symptoms like burning sensation in vagina and pain during sexual intercourse. From this case report, it shows that *Yonipoorana* with *Dasapaka Bala tailam* is effective for the management of Atrophic vaginitis.

INTRODUCTION

Vaginitis in postmenopausal women is termed as Atrophic vaginitis.^[1] The term is preferable to senile vaginitis.^[2] There is atrophy of the vulvovaginal structures due to estrogen deficiency, where vaginal defence is lost.

Vaginal mucosa become thin and is more susceptible to infection. The symptoms include vaginal dryness, burning sensation in vagina and pain during sexual intercourse. The progressive changes in vaginal tissue, including atrophy of the estrogen-responsive epithelium, depletion of vaginal glycogen, alteration in vaginal flora, and the resulting rise in vaginal pH, develop over months or years. Atrophic changes generally occur later than other menopausal symptoms because relatively lower levels of estrogen are required to maintain healthy urogenital tissues than are required to prevent other estrogen-related symptoms, because endogenous estrogen levels are markedly lower than those required to stimulate

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endometrial proliferation at this stage of menopause, a therapeutic window exists during which estrogen can be administered at lower than commonly prescribed doses for the effective treatment of Atrophic vaginitis. In modern medicine the management of Atrophic vaginitis aims improvement of general health and treatment of present infection, along with systemic estrogen therapy. Acharya Vagbhata described about the *Sushka yonivyapath* like the symptoms *Sushkatha* and *Athivedana* resemblance with Atrophic vaginitis.^[3] Sarangadhara samhita mentions *Nashtarhava* (absence of menstruation) as a clinical feature of *Sushka yonivyapath*.^[4] Arunadatta added *Yonidware Dravabhavam* can also correlated with it.^[5]

Treatment of Atrophic vaginitis focus on *Vatapittahara* along with *Sushka yonivyapath chikitsa*. Both general and local treatment can be adopted for Atrophic vaginitis. Prime importance should be given for *Sthanika chikitsa*.^[6] In *Yonipoorana* medicines are administered intravaginally, in which medicines can be retained for a long time. The walls and adjacent tissues of vagina are highly vascular this facilitates absorption of drugs through the vagina. Hence *Sthanika chikitsa* like *Yonipoorana* with *Dasapaka Bala Tailam* can be useful in the management of Atrophic vaginitis.

Case Report

A 54- year- old lady approached our OPD with complaints of burning sensation in vagina and pain during sexual intercourse on 12/07/2020. She was examined, on examination per speculum was painful and the walls are found inflamed, and also she felt burning sensation in vagina. For further evaluation, she was sent for cytological screening. The reports revealed high grade parabasal cells and low grade superficial cells. The maturation index was found 60/25/5 and vaginal pH was 5.3. Pap smear was done which was negative for intraepithelial lesion or malignancy. Patient was managed with *Dasapaka Bala tailam yonipooranam* for 7 days in 3 consecutive

Management

Date	Procedure	Duration
06/08/2020 to 12/08/2020	<i>Dasapaka Bala taila yonipooranam</i> 1 st cycle	7 days
10/09/2020 to 16/09/2020	<i>Dasapaka Bala taila yonipooranam</i> 2 nd cycle	7 days
18/10/2020 to 24/10/2020	<i>Dasapaka Bala taila yonipooranam</i> 3 rd cycle	7 days

Grading of symptoms

Symptoms	B/T	A/T	A/F
Vaginal dryness	Grade 3	Grade 0	Grade 0
Burning sensation in vagina	Grade 3	Grade 0	Grade 0
Dyspareunia	Grade 3	Grade 0	Grade 0

Maturation index scale

	B/T	A/T	A/F
Parabasal cells	60%	60%	60%
Intermediate cells	25%	25%	25%
Superficial cells	5%	5%	5%

months. *Dasapaka Bala taila yonipooranam* was done following strict aseptic precautions and medicine was retained for 10 minutes. On follow up after one month without treatment, symptoms like vaginal dryness, burning sensation in vagina and pain during sexual intercourse were reduced.

Personal History

Diet – Mixed
Bowel – Constipated
Appetite – Good
Micturition – Normal
Sleep - Disturbed due to pain and burning sensation in genital area.
Allergy – Nil
Addiction – Nil

Menstrual History

Attained menopause at the age of 47 years.

Obstetric History

P₂L₂A₀, Normal (both)

LCB – 21 years

P/S Examination (12/07/2020)

O/E

Inspection:

Discharge– Absent, vaginal walls were inflamed and reddish in colour.

P/S

Cervix: Unhealthy

Discharge: Absent

4 – Point Scale

- Vaginal dryness if present
None-0, Mild-1, Moderate-2, Severe-3
 - Burning sensation in vagina if present
None-0, Mild-1, Moderate-2, Severe-3
 - Dyspareunia if present
None-0, Mild-1, Moderate-2, Severe-3
- Vaginal dryness – 3
Burning sensation in vagina – 3
Dyspareunia - 3

Vaginal pH

	B/T	A/T	A/F
Vaginal pH	5.3	5.3	5.3

DISCUSSION

Atrophic vaginitis is defined as atrophy of the vaginal epithelium due to decreased oestrogen levels.^[2] Loss of oestrogen levels in postmenopausal women that adversely affect the vagina causes vulvovaginal atrophy. Up to 40% of postmenopausal women have symptoms of atrophic vaginitis. Throughout a women's life cycle, the vaginal epithelium undergoes changes in response to the level of circulating oestrogen. The decrease in oestrogen level causes vaginal epithelial thinning, which leads to increasingly fragile vaginal mucosa characterized by, decreased elasticity decreased rugae and pallor. Due to diminished vaginal blood flow, cervical and vaginal secretions get decreased resulting in diminished lubrication, along with this vaginal shortening and narrowing occurs, which leads to vaginal dryness, burning sensation in vagina and dyspareunia.

Sushka yonivyapath is mentioned under *Vimsathi yoniroga* in Ashtanga Hridaya and Charaka samhita. The symptoms *Yonimuka sosham* and *Athivedana* is described by Vagbhatacharya, Acharya Charaka also describes the same symptoms *Yonimuka sosham* while describing *Sushka*.^[3] In addition to this Arunadatta in commentary of Ashtanga Hrithaya, *Yonisosham* is explained as *Dravabhavam*. Hence these symptoms of *Sushka yonivyapath* seem to coincide with Atrophic vaginitis. Loss of estrogen that occurs in menopause is the leading cause for atrophic vaginitis. In Ayurveda menopause it is a phase of *Jaravastha*, *Jaravastha* is a progressive state of *Dhathukshaya*. *Dathukshaya* is a main cause for *Vata vridhi*. *Kapha kshaya* and *Pitta prakopa* also manifest along with it. Vitiated *Vata dosha* along with its *Rooksha* and *Khara gunas* increases which may be the reason for dryness in vagina. *Pitta prakopa* along with its *Ushna* and *Theekshna guna* increases which may cause burning sensation in vagina. *Kapha kshaya* along with its *Snigdha* and *Slakshna gunas* decreases. Due to the decrease of *Snigdha* and *Slakshna gunas* along with the above described factors which may be the reason for dyspareunia.

Atrophic vaginitis is a common condition associated with menopause, is caused by oestrogen related changes to the vaginal epithelium and can adversely affect quality of life. An accurate diagnosis of atrophic vaginitis and its severity is important in choosing the appropriate treatment. *Yonivyapath* does not occur without the involvement of *Vata*. *Vata vridhi* - *Pitta prakopa* and *Kapha kshaya* is seen in *Sushka yoniroga*, hence *Vata* should be treated first and only after it normalizes treatment for other *Doshas* should be done. General *Vatahara* measures described

Vamanadi panchakaram can be adopted followed by *Sneha* and *Sweda*. *Sthanika chikitsa* is adopted to get relief from this distressing symptom as well as improves general health of vagina. Here *Dasapaka Bala Tailam* was taken, it is mentioned in Chakradatta Intra-vaginal administration (*Yonipooranam*) of *Dasapakabala taila* helpful for reducing the distressing vaginal symptoms. *Dasapaka Bala Tailam* is indicated in *Vatarakta*, *Vatapitta*, *Rajodosham*, *Yonidosham* and *Vata vikaram* etc. The yoga constitutes *Bala*, *Tila taila* and *Go-ksheera*. The primary cause for the vaginal dryness is *Vata*, burning sensation in vagina is due to *Pitta*, and dyspareunia is due to *Vata* and *Pitta*. *Dasapakabala taila* is said to have pacifying effects on all conditions of *Vata* origin. *Dasapakabala tailam* as such is *Vata*, *Pitta* and *Rakthahara* property helps to relieving the symptoms. The drug *Bala* contains ethyl acetate and methanol extracts possesses anti-inflammatory and analgesic property helps for this condition. *Pichila*, *Snigdha*, *Guru guna* and *Madhura vipaka* of *Bala* also pacifies *Vata dosha*. *Bala* is *Seetha veerya*, *Madhura tikta rasa*, *Snigdha guna*, *Raktaprasadaka*, *Vrana ropana*, *Rakthapittagna* which helps to pacify the vitiated *Vata* and *Pitta* and thus reduces the vaginal symptoms.

The *Ushna veerya* of *Tila taila* alleviate *Vata*, since it has undergone processing by *Seetha veerya* drugs like *Bala* and *Ksheera*, its *Ushnatwa* may get altered. Thus *Ushna guna* of *Dasapakabala tailam* acts without vitiating *Pitta*. The *Tila taila* also possesses *Sulaprashamana* property which helps to alleviate dyspareunia.

The *Madhura rasa* and *Madhura vipaka* and *Snigdha guna* of all the three drugs can acts therapeutically as *Brimhana* and *Snehana* which can corrects *Vata* by systemic action. The *Bala* and *Tila taila* possesses phytoestrogens can acts systemically and help to reduce vulvo-vaginal symptoms. The micronutrients and protein present in all the three drugs can acts non- hormonally.

The drugs in the *Yoga bala* and *Tila taila* possesses pharmacological activities like anti- oxidant, analgesic and anti-inflammatory activity which may be reduce the condition. After the treatment period of 3 months, there was considerable change in the symptoms of Atrophic vaginitis like vaginal dryness, burning sensation in vagina, dyspareunia and significant improvement in superficial cells, significant reduction in parabasal cells and intermediate cells.

The reduction in the symptom vaginal dryness may be attributed to *Madhura rasa*, *Madhura vipaka*

and *Snigdha* property present in *Bala* and *Ksheera*. *Tila taila* is *Madhura rasa* and *Vipaka*, *Balya* and *Rasayana* in *Karma*, it nourishes and strengthen all *Dhathus*, checks *Dhathukshaya* and thus alleviates *Vata*. *Tila taila* contains several essential fatty acids, these acids are effective moisturizers that can help the vagina as soft and hydrated. Phyto-estrogens present in both *Bala* and *Tila taila* can acts systemically which helps to pacify the distressing vaginal symptoms. *Pitta prakopa* which is the primary cause can be corrected by *Madhura rasa*, *Madhura vipaka*, *Snigdha guna* and *Seetha veerya* properties of *Bala*. *Madhura rasa* and *Madhura vipaka* pacifies the *Ushna* and *Theekshna* properties of *Pitta*, helps in relieving burning sensation in vagina. *Ksheera* having *Madhura rasa*, *Madhura vipaka snigdha guna* and *Seetha veerya* helps to pacifies *Pitta*. *Vatapitta samaka* property of *Ksheera* is helpful for alleviating the symptom. *Ksheera* contain vitamin C helps to protects cells and keeping them healthy so as to maintain healthy blood vessels thus maintaining healthy vaginal flora. Ethyl acetate is the phytochemical constituent present in *Bala* having anti-inflammatory activity helps to mitigate the symptom. *Dasapakabala taila yoga* on reducing the symptom dyspareunia is explained as follows. *Vata vridhi* and *Pitta prakopa* which is the primary cause for dyspareunia can be corrected by the *Madhura* and *Snigdha* properties of *Bala*, *Tila taila* and *Ksheera*, *Bala* having *Vata pittahara* property can helps to mitigates the symptom. The *Bala* contain methyl acetate and ethyl acetate having analgesic and anti-inflammatory activity helpful for pacifying the symptom. *Sulaprasamana* property of *Tila taila* helps to pacify pain during sexual intercourse.

There was no change in pH and maturation index after treatment. This may be attributed to the physiological changes during menopause in the above parameters, but there was significant reduction for clinical symptoms like vaginal dryness, burning sensation in vagina and dyspareunia.

Sthanika chikitsa is an important treatment in *Streeroga* where the local administration of medicines is applied directly into the vagina is refers as *Sthanika chikitsa*. As Ayurveda *Sthanika chikitsa* for gynecologic problems and it gives an excellent result in gynecologic problem. *Sthanika chikitsa* which is of prime importance in the management of *Streeroga* facilitates absorption of drugs through the vagina as the walls and adjacent tissues are highly vascular. Vagina absorbs water, electrolytes, and substances of low

molecular weight mainly in the lateral recesses of vagina. The application of *Sthanika chikitsa* helps the formation of normal epithelial cells of cervix, and in this condition which help in reducing the symptoms.

CONCLUSION

Atrophic vaginitis was managed with *Dasapaka Bala taila yonipooranam* for 7 days in 3 consecutive months. *Pathyahara vihara* was followed throughout the treatment period. *Yonipoorana* is a *Sthanika chikitsa* in which medicines are administered intra vaginally. Intravaginal administration of medicine is highly effective due to the walls and adjacent tissues of vagina are highly vascular this facilitates absorption of drugs through the vagina. Vagina absorbs water, electrolytes and substances of low molecular weight mainly in lateral recesses of vagina. The *Taila* have indication in *Vatarakta*, *Vatapitta*, *Rajodosham*, *Yonidosham* and *Vata vikaram*, which may be responsible for the relief of the symptoms. *Madhura rasa*, *Madhura vipaka* and *Snigdha* properties of drugs present in the yoga was helpful for reducing the symptoms like vaginal dryness, burning sensation in vagina and dyspareunia. Phyto- estrogens present in *Bala* and *Tila taila* helps for pacifying the condition. Methyl acetate, Ethyl acetate, sesaminol, sesamol and phyto-estrogen present in the drugs of yoga possess analgesic and anti- inflammatory action may help to relieving the symptoms. This improves the vaginal epithelium, raises glycogen content and thus reducing the symptoms of Atrophic vaginitis.

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