



CLINICAL STUDY OF *GODANTI BHASMA* ON *SHWETA PRADARA* WITH *ANUPANA BHEDA*

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ABSTRACT

Shweta Pradara is common burning problem faced by women all around the globe. In modern science, lots of treatments are available for leucorrhoea, but recurrence is quite common. Today's stressful modern life styles, food habits, social status and occupation affect the local environment which leads to higher incidences of leucorrhoea. Recent surveys on this regard, shows a clear picture that about 50% of women are suffering from vaginitis. Since ancient times, medicines from nature are in use, many efforts have been made to assess their efficacy particularly in cases of vaginitis, and many local and oral treatments have been explained and have shown good results. Oral medication is better than any procedure as these can be used in both married & unmarried patients. *Godanti* is specially indicated in *Shweta Pradara*. In present study 30 patients of *Shweta Pradara* were selected from OPD and IPD of Desh Bhagat Ayurvedic College & Hospital Mandi Gobindgarh out of which 46% were in the age group of 19-28 years, 99.6 % were married, 66% belongs to lower middle class, 46.67% were house wives 56.6% were vegetarian. Selected patients were divided into 2 groups each groups consist of 15 patients. In group A *Godanti Bhasma* was given 1gm. BD with *Madhu* for 30 days. In group B *Godanti Bhasma* was given same as in group A with *Godugdha*. Statistically significant results were observed in both groups. There was no statistically significant difference between both groups. It means that *Godanti Bhasma* with *Madhu* and *Godanti Bhasma* with *Godugdha* have similar effect in *Shweta Pradara*.

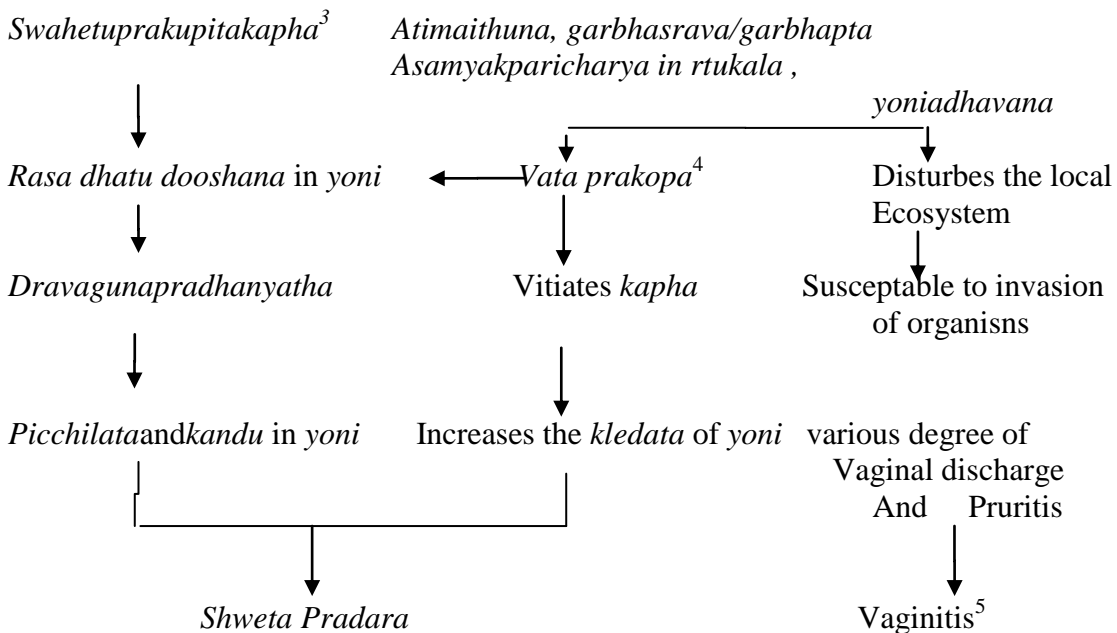
Keywords: *Shweta Pradara*, *Godanti Bhasma*, *Madhu*, *Godugdha* (Cow milk)

Introduction:

Shweta Pradara is one of the most common of all gynaecological complaints and no women are an exception to this illness. Female genitals are very much prone to infections since they are moist, sweeter. Recent surveys on this regard, shows a clear picture that about 50% of women are suffering from vaginitis. Female undergoing different physical and psychological changes as she reaches different stages in her life which includes puberty, reproductivity, pregnancy, labour, puerperium, menopause and her responsibilities still go on. During these stages, there will be many physiological changes like secretions in vagina termed as

Leucorrhoea¹ or *Shweta Pradara*. *Shweta Pradara* is not mentioned as a separate disease, but it is present as a symptom in many diseases. *Shweta* means white or anything of white colour. The term *Pradara* means *Pradeerana* or excessive flow. Hence the combined term *Shweta Pradara* means excess white discharge per vagina. *Shweta Pradara* develops due to vitiation of *kapha* and *vata*. Consumption of *kaphakara Ahara* and *vihar* along with *vata* vitiating factors creates symptoms like *picchilata, srava, kandu* etc in *yonis*, these symptoms are much similar to leucorrhoea explained in the modern texts.²

Samprapti of Shweta Pradara -



There are many treatment protocols who advocate the use of metronidazole or synthetic hormone preparations. Though curative, they are not free from side effects. Since ancient times, medicines from nature are in use, many efforts have been made to assess their efficacy particularly in cases of vaginitis, and many local and oral treatments have been explained and have shown good results. Oral medication is better than any

procedure as these can be used in both married & unmarried patients. The Godanti is considered as one among the *Sudhavarga*. It is introduced in *Rasa-literature* in 20th century in *Rasa Tarangini Grantha* under *Sudha varga*.⁶⁻⁷ It is specially indicated in *Shweta Pradara*.⁸⁻⁹⁻¹⁰ Hence this drug was selected in patients of *Shweta Pradara*.

Material and Method:

30 patients of *Sweta Pradara* were selected from OPD and IPD of *prasootitantra* and *strirogadeptt*. DeshBhagat Ayurvedic College Mandi Gobindgarh to find out effect of *Godanti Bhasma* on *Shweta Pradara* with *Anupana Bheda*.

Inclusion criteria:-

- (i) Patients willing to participate in the trial.
- (ii) Patients aged: 18 to 50 years of Female Patient.
- (iii) Patients having complaints of *YonisgatSrava*.

Exclusion criteria:-

- (i) Patients suffering from Tuberculosis, Sexually Transmitted Diseases.
- (ii) Patients suffering from Cervical Polyp or Erosion.
- (iii) Cervical or Uterine Malignancy.
- (iv) Having hormonal disorders like diabetes mellitus.
- (v) Pregnant and lactating women.

Sample Size:-

The patients selected for the study were divided into two groups i.e. Group A and Group B. Each group consists of 15 patients. A special Performa was prepared with all points of history taking, physical signs and lab investigations if necessary. The parameters of signs and symptoms were scored on the basis of standard method of statistical analysis

Grouping of Patients: selected patients were divided into two groups randomly

Group A - 15 patients of *Shweta Pradara* will be given drug "*Godanti Bhasma*" in the dose of 1gm two times a day with *Madhu* along with *Pathya Ahara- vihar* for 30 days.

Duration of Trial - 30 days .Follow up - 10 days

Group B – 15 patients will be given '*Godanti Bhasma*' same as in first group with *go-dugdhdh* along with *Pathya Ahara-vihar* for 30 days.

Duration of Trial - 30 days ,Follow up - 10 days.

Criteria of Assessment:-

a) Subjective Parameter –

i. *Srava*

- No srava - 0
- Occasionally wetting the under garments- 1
- Wetting the under garments- 2
- Need pads- 3

ii. *Katishool*

- No pain – 0
- Mild – 1
- Moderate – 2
- Severe - 3

iii. *Kandu*

- No Itching- 0
- Mild – 1
- Moderate – 2
- Severe - 3

b) Objective parameter -

i. *Yonipaka*- Present / Absent

ii. *Sravavarna*- Curdy white / Greenish yellow / Grey or clear

iii. *Gandh* - Offensive / no offensive

iv. *Saghanta*- Thin mucoid / thick curdy/ frothy

(h) Investigations Required:-

- a. **Blood** – Hb gm%, T.L.C., D.L.C., E.S.R., F.B.S., LFT, RFT.
- b. **Urine Examination** – Routine and Microscopic examination of urine.
- c. **Pap Smear** (if necessary)

Present clinical study revealed that majority of patients were in age group of 19-28 years (46.6%), married (96.6%), secondary educated (36.6%), housewives (46.6%), of lower middle class (60%), out of 30 patients 17 patients were (56.6%) on vegetarian diet, 14 patients were having 1 child.

Observation and results

Showing distribution *Srava* (Vaginal discharge) in Group A

| S.No | Grading | BT | %age | AT | %age | FU | %age |
|------|---------|----|-------|----|------|----|------|
| 01. | 0 | 0 | 0 | 9 | 60 | 9 | 60 |
| 02. | 1 | 0 | 0 | 6 | 40 | 6 | 40 |
| 03. | 2 | 7 | 46.66 | 0 | 0 | 0 | 0 |
| 04 | 3 | 8 | 53.33 | 0 | 0 | 0 | 0 |

Showing distribution *Srava* (Vaginal discharge) in Group B

| S.No | Grading | BT | %age | AT | %age | FU | %age |
|------|---------|----|-------|----|-------|----|-------|
| 01. | 0 | 0 | 0 | 1 | 6.67 | 1 | 6.67 |
| 02. | 1 | 0 | 0 | 3 | 20 | 3 | 20 |
| 03. | 2 | 7 | 46.66 | 8 | 53.33 | 8 | 53.33 |
| 04 | 3 | 8 | 53.33 | 3 | 20 | 3 | 20 |

Showing distribution by *katishoola* in group A

| S.No | Katishoola | BT | %age | AT | %age | FU | %age |
|------|------------|----|------|----|-------|----|-------|
| 01. | Present | 6 | 40 | 1 | 6.67 | 1 | 6.67 |
| 02. | Absent | 9 | 60 | 14 | 93.33 | 14 | 93.33 |

Showing distribution by *katishoola* in group B

| S.No | Katishoola | BT | %age | AT | %age | FU | %age |
|------|------------|----|-------|----|------|----|------|
| 01. | Present | 8 | 53.33 | 3 | 20 | 3 | 20 |
| 02. | Absent | 7 | 46.66 | 12 | 80 | 12 | 80 |

Showing distribution by *Kandu* (itching) in Group A

| S.No | Grading | BT | %age | AT | %age | FU | %age |
|------|---------|----|-------|----|-------|----|-------|
| 01. | 0 | 0 | 0 | 9 | 60 | 9 | 60 |
| 02. | 1 | 2 | 13.33 | 5 | 33.33 | 5 | 33.33 |
| 03. | 2 | 6 | 40 | 1 | 6.67 | 1 | 6.67 |
| 04 | 3 | 7 | 46.67 | 0 | 0 | 0 | 0 |

Showing distribution by *Kandu* (itching) in Group B

| S.No | Grading | BT | %age | AT | %age | FU | %age |
|------|---------|----|------|----|-------|----|-------|
| 01. | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 02. | 1 | 0 | 0 | 11 | 73.33 | 11 | 73.33 |
| 03. | 2 | 6 | 40 | 4 | 26.67 | 4 | 26.67 |
| 04. | 3 | 9 | 60 | 0 | 0 | 0 | 0 |

Statistical analysis for group A

| Sl. | Parameter | Mean | S.D. | S.E. | t-value | p-value | Remarks |
|-----|------------|------|------|------|---------|---------|---------|
| 01. | Srava | 2.13 | .63 | .16 | 13.31 | <0.001 | H.S. |
| 02. | katishoola | 1.6 | .75 | .19 | 8.42 | < 0.001 | H.S. |
| 03. | Kandu | 1.86 | .73 | .18 | 10.33 | <0.001 | H.S. |

Statistical analysis for group B

| Sl. | Parameter | Mean | S.D. | S.E. | t-value | p-value | Remarks |
|-----|------------|------|------|------|---------|---------|---------|
| 01. | Srava | .66 | .61 | .15 | 4.4 | <0.01 | S. |
| 02. | Katishoola | .66 | .48 | .12 | 5.5 | < 0.01 | S. |
| 03. | Kandu | 1.33 | .47 | .12 | 11.08 | <0.001 | H.S. |

Objective parameter**Showing distribution by *Yonipaka* in group A**

| S.No | Yonipaka | BT | %age | AT | %age | FU | %age |
|------|----------|----|-------|----|------|----|------|
| 01. | Present | 13 | 86.66 | 0 | 0 | 0 | 0 |
| 02. | Absent | 2 | 13.33 | 15 | 100 | 15 | 100 |

Showing distribution by *Yonipaka* in group B

| S.No | Yonipaka | BT | %age | AT | %age | FU | %age |
|------|----------|----|------|----|------|----|------|
| 01. | Present | 12 | 80 | 0 | 0 | 0 | 0 |
| 02. | Absent | 3 | 20 | 15 | 100 | 15 | 100 |

Showing distribution by *Varna* (Colour of discharge) in group A.

| S.No | Varna | BT | %age | AT | %age | FU | %age |
|------|-----------------|----|-------|----|------|----|------|
| 01. | Curdy white | 5 | 33.33 | 0 | 0 | 0 | 0 |
| 02. | Greenish yellow | 7 | 46.67 | 0 | 0 | 0 | 0 |
| 03. | Gray/clear | 3 | 20 | 3 | 20 | 3 | 20 |
| 04. | No discharge | 0 | 0 | 12 | 80 | 12 | 80 |

Showing distribution by *Varna* (Colour of discharge) in group B.

| S.No | Varna | BT | %age | AT | %age | FU | %age |
|------|-----------------|----|-------|----|-------|----|-------|
| 01. | Curdy white | 6 | 40 | 0 | 0 | 0 | 0 |
| 02. | Greenish yellow | 4 | 26.67 | 1 | 6.67 | 1 | 6.67 |
| 03. | Gray/clear | 5 | 33.33 | 3 | 20 | 3 | 20 |
| 04. | No discharge | 0 | 0 | 11 | 73.33 | 11 | 73.33 |

Showing distribution by Gandha(odour) in group A

| S.No | Gandha | BT | %age | AT | %age | FU | %age |
|------|---------------|----|------|----|------|----|------|
| 01. | Offensive | 15 | 100 | 0 | 0 | 0 | 0 |
| 02. | Non offensive | 0 | 0 | 15 | 100 | 15 | 100 |

Showing distribution by Gandha(odour) in group B

| S.No | Gandha | BT | %age | AT | %age | FU | %age |
|------|---------------|----|------|----|------|----|------|
| 01. | Offensive | 15 | 100 | 0 | 0 | 0 | 0 |
| 02. | Non offensive | 0 | 0 | 15 | 100 | 15 | 100 |

Showing distribution by Sganhta(consistency) in group A

| S.No | Sganhta | BT | %age | AT | %age | FU | %age |
|------|-------------|----|-------|----|-------|----|-------|
| 01. | Thin muciod | 6 | 40 | 2 | 13.33 | 2 | 13.33 |
| 02. | Thick curdy | 5 | 33.33 | 0 | 0 | 0 | 0 |
| 03 | Froathy | 4 | 26.67 | 0 | 0 | 0 | 0 |
| 04 | No sgantha | 0 | 0 | 13 | 86.67 | 13 | 86.67 |

Showing distribution by Sganhta(consistency) in group B

| S.No | Sganhta | BT | %age | AT | %age | FU | %age |
|------|-------------|----|-------|----|-------|----|-------|
| 01. | Thin muciod | 7 | 46.67 | 0 | 0 | 0 | 0 |
| 02. | Thick curdy | 5 | 33.33 | 0 | 0 | 0 | 0 |
| 03 | Froathy | 3 | 20 | 1 | 6.67 | 1 | 6.67 |
| 04 | No sgantha | 0 | 0 | 14 | 93.33 | 14 | 93.33 |

Discussion

Shweta Pradara is one of the most common of all gynaecological complaints and no women are an exception to this illness. *Shweta Pradara* develops due to vitiation of *kapha* and *vata*. In ayurvedic texts, various conditions giving rise to *Shweta Pradara* are *sleshmala yoni vyapat*, *karnini*, *atyananda*, *acharana*, *aticharana*, *upapluta*, *sannipatikietcyoni vyapads*. Many of the gynaecological disorders present *shwetapradara* as the major complaints.

Effect within the groups**Srava (Vaginal discharge) in Group A**

It was observed that before treatment, 8 patients (53.33%) were in grade 3, and 7 patients (46.66%) were in grade 2. After the treatment 9 patients (60%) are in grade 0 and 6 patients (40%)

are in grade 1. And same was observed during follow up. Statistically, it is highly significant, where p value is <0.001.

Srava (Vaginal discharge) in Group B

It was observed that before treatment 8 patients (53.33%) were in grade 3, and 7 patients (46.66%) were in grade 2. After the treatment 1 patient (6.67%) was in grade 0 and 3 patients (20%) are in grade 1, 8 patients (53.33%) were in grade 2 and 3 patients (20%) are in grade 3. And same was observed during follow up. Statistically it is significant, where p value is <0.01

Effect between the groups for Srava (Vaginal discharge)

t value obtained is 2.29 and the table p value >.01, that means there is no statistically significant difference between the two groups.

Katishoola (backache) in Group A

It was observed that 6 patients (40%) were having *katishoola* and 9 patients (60%) were not having *katishoola* before treatment. After the treatment only 1 (6.67%) patient have the *katishoola* and in 14 patients (93.33%) it was absent. Same was observed in the follow up.

Katishoola (backache) in Group B

It was observed that 8 patients (53.33%) were having *katishoola* and 7 patients (46.66%) were not having *katishoola* before treatment. After the treatment 3 (20%) patients have the *katishoola* and in 12 patients (80%) it was absent. Same was observed in the follow up.

Kandu (itching) in Group A

It was observed that before treatment 2 patients (13.33%) were in grade 1, 6 patients (40%) were in grade 2, 7 patients (46.67%) were in grade 3. After the treatment 9 patients (60%) were in grade 0 and 5 patients (33.33%) are in grade 1, 1 patient (6.67%) was in grade 2, (6.67%) and same was observed during follow up. Statistically it is highly significant, where p value is <0.001.

Kandu (itching) in Group B

It was observed that before treatment 6 patients (40%) were in grade 2, 9 patients (60%) were in grade 3. After the treatment 11 patients (73.33%) were in grade 1 and 4 patients (26.67%) were in grade 2. And same was observed during follow up. Statistically it is highly significant, where p value is <0.001.

Effect between the groups for Kandu(itching)

t-value obtained is 0.72 and the table p value >.01, that means there is no statistically significant difference between the two groups.

Per vaginal discharge in Group A

It was observed that before treatment 1 patient (6.67%) was in grade 0, 1 patient (6.67%) was in grade 1 and 7 patients (46.66%) were in grade 2, 6 patients (40%) were in grade 3. After the treatment 8 patients (53.33%) were in grade 0 and 5 patients (33.33%) are in grade 1, 2 patients (13.33%) were in grade 2. And same was observed during follow up. Statistically it is highly significant, where p value is <0.001.

Per vaginal discharge in Group B

It was observed that before treatment 3 patients (20%) were in grade 1, 8 patients (53.33%) were in grade 2 and 4 patients (26.67%) were in grade 3. After the treatment 3 patients (20%) were in grade 0, 4 patients (26.67%) are in grade 1, 7 patients (46.67%) were in grade 2 and 1 patient (6.67%) was in grade 3. And same was observed during follow up. Statistically it is significant, where p value is <0.01.

Effect between the groups for per vaginal discharge

t value obtained is 1.25 and the table p value >.01, that means there is no statistically significant difference between the two groups

Yonipaka in group A

It was observed that before treatment 13 patients (86.66%) had *yonipaka* and 2 patients (13.33%) had no *yonipaka*. After the treatment 15 patients (100%) had no *yonipaka*. And same was observed in the follow up.

Yonipaka in group B

It was observed that before treatment 12 patients (80%) had *yonipaka* and 3 patients (20%) had no *yonipaka*. After the treatment 15 patients (100%) had no *yonipaka*. And same was observed in the follow up.

Varna (Colour of discharge) in group A.

It was observed that before treatment 5 patients (33.33%) had curdy white colour of discharge, 7 patients (46.67%) had greenish yellow, 3 patients (20%) had grey/clear colour of discharge. After the treatment 3 patients (20%) had grey/clear colour of discharge and 12 patients (80%) had no discharge. And same was observed in the follow up.

Varna (Colour of discharge) in group B

It was observed that before treatment 6 patients (40%) had curdy white colour of discharge, 4 patients (26.67%) had greenish yellow and 5 patients (33.33%) had grey/clear colour of discharge. After the treatment 3 patients (20%) had grey/clear colour of discharge, 11 patients (73.3%) had no discharge and 1 (6.67%) patient had curdy white discharge. And same was observed in the follow up.

Gandha (odour) in group A

It was observed that before treatment 15 patients (100%) had offensive *gandha*. After the treatment 15 patients (100%) had non offensive *gandha*. And same was observed in the follow up.

Gandha (odour) in group B

It was observed that before treatment 15 patients (100%) have offensive *gandha*. After the treatment 15 patients (100%) had non offensive *gandha*. And same was observed in the follow up.

Sganhta (consistency) in group A

It was observed that before treatment 6 patients (40%) had thin mucoid consistency, 5 patients (33.33%) had thick curdy consistency and 4 patients (26.67%) had frothy consistency. After the treatment 2 patients (13.33%) had thin mucoid consistency and 13 patients (86.67%) have no *sgantha*. And same was observed during the follow up.

Sganhta (consistency) in group B

It was observed that before treatment 7 patients (46.67%) had thin mucoid consistency, 5 patients (33.33%) had thick curdy consistency and 3 patients

(20%) had frothy consistency. After the treatment 1 patient (6.67%) had frothy consistency and 14 patients (93.33%) had no *sgantha*. And same was observed during the follow up.

Conclusion:

The result reveals that both groups have i.e *Godanti Bhasma* with *Madhu* and *Godanti Bhasma* with *Godugdha* have significant role in *Shweta Pradara* (*Srava*, *Katishoola* and *Kandu*). There is no statistically significant difference between the two groups. It means that *Godanti Bhasma* with *Madhu* or *Godanti Bhasma* with *Godugdha* have similar effect in *Shweta Pradara*. There was no untoward effect seen during the study.

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