

CASE REPORT

PRATISARANIYA KSHARA KARMA IN GARHASHAYA GREEVA MUKHAGATA VRANA : A CASE REPORT

Rashmi^{1*} Anupama V²

¹Postgraduate scholar, ² Professor and Head, Department of Prasuti Tantra and Stree Roga, Sri Kalabyraveswara Ayurvedic Medical College, Hospital and Research Centre, Bengaluru – 560104, Karnataka, India

*Corresponding author: Email address: rashmic.456@gmail.com

ABSTRACT

The entity where vrana manifests at the cervical os is called Garbhashaya Greeva Mukhagata Vrana (Garbhashaya Greeva Mukha). Vrana is described as discontinuity in the tissues and failure to retain their natural composition. As a result, the impacted tissues stop functioning normally, which causes additional pathological alterations. One such clinical disease that affects the area where columnar epithelium replaces normal squamous epithelium is cervical erosion. Moreover, this qualifies as garbhashaya greeva mukhagata vrana. In the modern medical system, intrusive treatments like electric cauterization and cryosurgery are frequently used to cure cervical erosion. Kshara Karma, which is based on ayurvedic parasurgical techniques, aids in the destruction of the ectopic columnar epithelium and the subsequent regeneration of normal squamous cells.

Keywords: Garbhashaya greeva mukhagata vrana, Apamarga Pratisaraniya kshara, Cervical erosion.

Submitted date - 10.07.2025

Revised Date – 15.08.2025

Accepted Date – 28.09.2025

INTRODUCTION

In daily clinical practice, the most frequent finding is garbhashaya greeva mukhagata vrana. This could be nija/agantuja, where dosha vitiation affects dushyas around the cervical os, such as rasa rakta and mamsa (Garbhashaya greeva mukha). Although Ashtanga Sangraha has defined Garbhashaya greevamukhagata Vrana in connection to Yoni Vranekshana Yantra¹, which supports the presence of yoni vrana, there is no clear account of this practice found in Ayurvedic texts. Ayurvedic remedies that are prescribed based on the dosha involved can effectively control symptoms such as swetha picchila yoni srava, Vedana, kati shola, and others that are usually caused by the presence of garbhashayagreeva mukhagata vrana.

Based on the symptoms, garbhashaya greeva mukhagata vrana can be associated with cervical erosion. It is a situation in which columnar epithelium covers the ectocervix, implying that columnar epithelium eventually replaces the native squamous epithelium². Cervical erosion affects between 17 percent and 50 percent of women. Parity raises the prevalence, but ages 35 and older cause it to decline³. Clinically, it manifests as irregular spotting P/V in a

chronic stage, low back ache, white discharge per vagina, and local irritation. Invasive treatments for cervical erosion often involve electric cauterization, cryosurgery, and other procedures. Additionally, with a few topical uses in the modern medical system. However, in certain situations, repeated application of these therapies may be required.

Ksharakarma is a parasurgical procedure having Chedyā (excision), Bhedyā (Incision) and Lekhya (Scarification) properties. It does both Shodhana (Cleansing/ Debridement) as well as Ropana (wound healing) Karma⁴. Thus Kshara karma works like cauterization and is minimal invasive in nature and without much complications.

CASE REPORT

A housewife of 36 years, who has been married for 16 years, came to the Prasuti Tantra & Stri Roga OPD of the Shri Kalabyraveswara Ayurveda Medical College, Hospital and Research Centre in Bengaluru on April 6, 2023, complaining of a white discharge coming from her vagina for the past two years, which she said was caused by itching in the vaginal area.

History of Present illness: Patient N/K/C/O DM, HTN, thyroid dysfunction asthma or epilepsy was

apparently healthy 2 years ago then she gradually noticed white discharge per vagina along with itching. She had taken treatment at different allopathic hospitals, but found no relief. For further management she approached to Prasuti Tantra and Stri Roga OPD of SKAMC And RC Bengaluru.

History of Past illness: Nothing significant.

Table 1: Vaiyaktika Vrutanta

Parameter	Finding
Diet	Mixed
Appetite	Reduced
Bowel	Twice a day, Regular
Micturition	5-6 times/day
Sleep	Sound
Habits	Nil

Table 2: Rajo Vrutanta

Parameter	Finding
Age of Menarche	12 years
Nature	Regular
Bleeding Duration	4-5 days
Interval	28-30 days
Dysmenorrhoea	Absent
Colour	Reddish
Clots	Absent
Foul Smell	Absent
D1	2-4 pads, fully soaked
D2	2-3 pads, fully soaked
D3	1-2 pads, partially soaked
D4	1 pad
D5	Spotting
LMP	16/03/2023

Table 3: Obstetric History: P2L2A0D0

OH	Age	Gender	Mode of Delivery
P1L1	10 years Female	FTND	
P2L2	8 years	Female	LSCS

Table 4: Ashtavidha Pariksha

Parameter	Finding
Nadi	72/min,
Mutra	
Mala	
Jihwa	
Shabda	Normal
Sparsha	
Drik	
Akriti	

Table 5: Dashavidha Pareeksha

Parameter	Finding
Prakruti	Pitta Kapha
Vikruti	Kapha Pradhana Vata
Dosha	Kapha Pradhana Vata
Dushya	Rasa, Rakta, Arthava
Desha	Sadharana
Bala	Madhyama
Sara	Madhyama
Samhanana	Madhyama
Pramana	Madhyama
Satmya	Vyamishra
Satva	Madhyama
(Ahara Shakti)	
Abhyavarana Shakti	Avara
Jarana Shakti	Madhyama
Vyayama Shakti	Madhyama
Vaya	Madhyama

Table 6: General Examination

Parameter	Finding
Built	Moderate
Nourishment	Well
Pallor	Absent
Oedema	Absent
Clubbing	Absent
Cyanosis	Absent
Icterus	Absent
Lymphadenopathy	Absent
Height	5.4ft
Weight	65kg
BMI	25.2 kg/m ²
Pulse Rate	78 beats/minute
BP	120/70 mm Hg
Respiratory Rate	18/minute
Heart Rate	72 bpm
Temperature	98°F
Tongue	Coated

Table 7: Athura Bhoomi Desha Pariksha

Parameter	Finding
Jatataha	Sadharana
Samvrddhataha	Sadharana
Vyadhitaha –	Sadharana

Table 8: Systemic Examination

Respiratory System	
Inspection	Shape of the chest - Bilaterally Symmetrical, Chest movements – Symmetrical, RR - 18/min
Palpation	Trachea – Centrally placed
Percussion	Resonant over the lung field except cardiac dullness.
Auscultation	Bilateral NVBS heard
Cardiovascular System	
Inspection	No distended vessels over neck or chest.
Percussion	Cardiac dullness present on left side.
Auscultation	S1 S2 heard, No murmurs heard.
Central Nervous System	
Patient is conscious, well oriented to time, place, and person.	
Per Abdomen Examination	
Inspection	Contour – Round Umbilicus – Centrally placed, Inverted
Palpation	Soft, Tenderness in supra pubic region, No organomegaly observed
Percussion	NAD
Auscultation	Normal Bowel sounds heard
Gynaecological Examination	
Breast Examination	NAD
Examination of Vulva	

Inspection	Pubic Hair – Normal Clitoris – Normal Labia – Normal Discharge – White discharge ++, thick in consistency
Palpation	No palpable mass observed
Per Vaginal Examination	Cx – Posterior Multiparous os, fornices are free, no cervical motion tenderness.
P/S	Cx – Unhealthy with 70% of erosion and inflammatory changes.

Table 9: Investigations:

Parameter	Finding
Hb	12 g%
Urine Examination (Routine & Microscopic)	NAD (No Abnormality Detected)
Pap-smear	Inflammatory smear, Negative for Intraepithelial Lesion or Malignancy

Roga Pareeksha Nidana

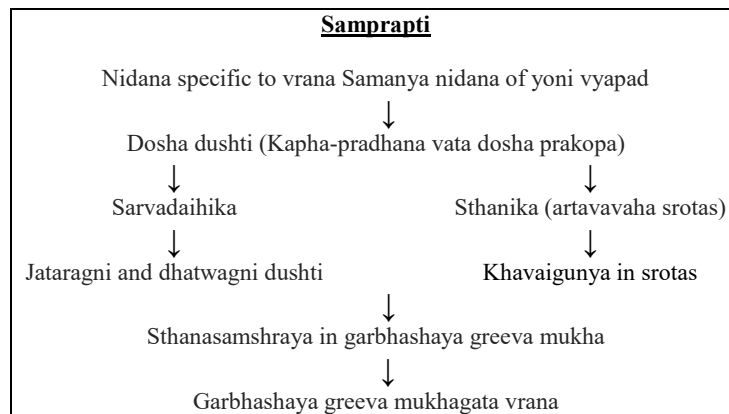
- Ahara– mithya ahara, vishama bhojana , dadhi , abhishyandi ahara
- Viharaja – ati chintana, diwaswapna

Roopa-

- Shweta and pandura srava P/V

Upashaya-

- Kashaya rasa pradhana ahara and aushadha.



Flow chart : Samprapti of Vyadhi

Table 9: Samprapti Ghataka

Parameter	Finding	Sanchara sthana	Yoni pradesha
Dosha	Kapha pradhana vata		
Dushya	Rasa, Rakta, mamsa, Upadhatu - Arthava	Vyaktha sthana	Garbhashaya greeva mukha
Srothas	Rasavaha, Raktavaha, mamsavaha srotas, Artavaha srotas	Adhisthana	Yoni, Garbhashaya
Sroto dusti	Atipravrutti	Vyadhimarga	Abhyantara
Agni	Jataragni and Dhatvagni	Sadyasadhyata	Sadhya

Vyavachedaka Nidana

- Sleshmaiki yonivyapad
- Garbhashaya greevamukha gata vrana
- Garbhashaya mukhagata granthi

Vyadhi Nirnaya

- Garbhashaya greevamukha gata vrana (cervical erosion)

Treatment Given:

- Yoni prakshalana with panchavalkala Kashaya + gomutra arka for 7 days
- Yoni Kshara karma with Apamarga pratisaraniya kshara for 7 days
- Yoni pichu with jatyadi taila for 7 days

Observation

On the 3rd day of treatment significant reduction in the white discharge per vaginum was observed and by 7th day lower back pain was reduced

Results

After 7 Days of treatment, symptoms like white discharge per vagina and itching reduced significantly.

Reduction in the circumference of cervical erosion was noted from 70% to 20% after 7days of treatment

DISCUSSION

Excessive use of madhura, katu, tikta rasa, guru, snigdha, pichchhila, abhishyandi aharas, divaswapna, and ratri jagarana are nidana for the development of Garbhashaya grivamukha gata Vrana. These nidanas are explained as Vata and kaphavardhaka nidanas, and they cause corresponding dosha Vrudhi. Rasavaha sroto dushti results from the Vrudha Kapha dosha generating agnimandhya and ama, which in turn affects its upadathu causing Artavavaha sroto dushti. As the Mula of Artavavaha Srotas⁵, Garbhashaya gets engaged, and according to the Khavaigunya, there is Mamsadushana in the Garbhashaya griva, which leads to Gatra vichurnana. Ati pravrutti Srotodushti materializes, leading to Vatakaphaja Vrana lakshanas in the end. Kati Vedana is caused by Vata

due to the ruksha and khara guna. Shukla is caused by Kapha because of its snigdha, manda, and slakshna guna.

There are two main etiopathological factors causing cervical erosion, they are:

- i. hormonal change
- ii. local pathology of Infection and Inflammation.

Due to hyperestrogenic state there will be increased secretion of cervical mucous by which cervix will be exposed to continuous irritation resulting in cervicitis which when left untreated supervenes with several local infections. Chronicity of such primary pathology later leads to cervical erosion.

DISCUSSION ON MODE OF ACTION OF KSHARA

In Dvivraniya Chikitsa Adhyaya⁶, Sushruta lists Kshara Karma as one of the shashti upakrama. For long-standing ulcers with (utsanna mamsa) elevated granulation tissue, katina (hardness), kanduyukta (itching), chirothitan (chronicity), and dushita (which are difficult to cleanse), Acharya has recommended the Kshara Upakrama for purification (Shodhana).

Because kshara possesses qualities similar to those of Ushna, Teekshna, Chedana, Bhedana, Lekhana, Sodhana, and Ropana, it can be used effectively to treat cervical erosion (garbhashaya griva mukhagata vrana). The aim of current cervical erosion treatment is to destroy the enlarged columnar epithelium using local chemicals, diathermy, electrical cauterization, cryosurgery, even removal of the affected area. Similarly, substances known as kshara, when applied externally, function as corrosive or caustic agents for any growth.

MODE OF ACTION OF PANCHAVALKALA KASHAYA AND GOMUTRA

Here, yoni prakshalana is performed with panchavalkala Kashaya before kshara is applied. Prakshalana is described as one of the upakrama in

shad upakrama for vrana, where acharya Sushruta has stated that the kwatha is chosen for prakshalana based on the dosha preponderance of vrana. For vranashotha⁷, Acharya Sushruta has identified pancha valkala Kashaya as ropana Kashaya. The panchavalkalas are raktapitta nashaka, yoni doshahara, yoni shodhaka, shothahara, sthambhana, kapha pithanashaka, and dahanashaka. Due to its sthambhana, kaphadosha hara, and yonidosha hara gunas, it reduces the amount of vaginal discharge and irritation per vagina. Its shothahara and pitha doshahara properties might be the cause of its anti-inflammatory effects. Gomutra being kaphahara, vrana shodhaka in Nature . It has anti-bacterial, anti-fungal property where it helps in reducing discharge as well as vaginal itching.

MODE OF ACTION OF JATYADI TAILA

This was the result of applying kshara, followed by yoni pichu and jatyadi taila. A piece of cloth soaked in medicinal oil is placed in the appropriate location on the body based on the treatment site during the pichu dharana procedure. Prana Upakrama also explains Pichu. Jatyadi taila has properties that directly aid in the healing of ulcers, including vrana shodhana, ropana, pootihara, vedanasthapana, and tridoshagna^{8,9}.

CONCLUSION

If cervical erosion is not treated, it can progress to HPV infection and other related illnesses, as well as cervical intraepithelial neoplasia. In this case study, it was discovered that Yoni prakshalana with panchavalkala Kashaya + Gomutra arka, Apamarga Pratisaraniya kshara application, and Yoni pichu

with jatyadi taila for seven days were successful in treating the related complaints and cervical erosion. Therefore, Kshara karma, which is more affordable, less complicated, and free of side effects, may take the place of traditional treatments like electrocautery.

REFERENCES

1. Vagbhatta. *Ashtanga Samgraha Vol. 1*, Sutra Sthana 34/9, with Hindi Commentary by Kaviraj Atrideva Gupta, foreword by Rajvaidya Pandit Sri Nandakishor Sharma Bhisagacharya. Reprinted. Varanasi: Chaukhambha Krishnadas Academy; 2005.
2. Padubidri, Daftary. *Howkin's & Bourne Shaw's Textbook of Gynaecology*. New Delhi: Elsevier; 2013.
3. Aggarwal P, Ben Amor A. Cervical Ectropion. [Updated 2023 May 31]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2024 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK560709/>
4. Ghanekar BG. *Sushrut Samhita*. Anuvadak Atridev, Chikitsa Sthana 1/88. Varanasi: Chaukhambha Sanskrit Bhavan; 2002.
5. Ghanekar BG. *Sushruta Samhita*. New Delhi: Meharchand Lakshman Das Publication; 2019. Sharir Sthana, Chapter 9/22.
6. Murthy KR. *Sushruta Samhita*. Varanasi: Chaukhambha Orientalia; 2012. Chikitsasthana, Chapter 1, Sloka 8, p. 6.
7. Acharya Sushruta. *Sushruta Samhita*, Dalhana, Nibandhasangraha Commentary, Edited by Jadavji Trikamji Acharya and Narayana Ram Acharya. Varanasi: Chaukhambha Sanskrit Sansthan; Reprint 2012. Sutrasthana 37/22, p. 820, p. 162.
8. Sastri VL. *Yogratnakara* with Vidyotini Hindi commentary, edited by Bhisagratna Brahmasankar Sastri. Sadyovranachikitsa.
9. Srivastava S. *Sharangdhar Samhita* of Acharya Sharngadhar, Jiwanprada Hindi commentary, Madhyam Khand, 9/169, 170, 171, 172.

Financial Support: Self financed. **Conflict of Interest :** None

How to cite:. Rashmi, Anupama V. An Analysis of the Kshara Application's Role in the Recovery of Garbhashaya Greeva Mukhagata Vrana. TAIJA – Tatwachintanam - International Journal of Ayurveda. Oct-Dec, 2025 Volume 1 Issue 1 p. 8-12.