



Review Article

HEALING EFFECT OF LOCALIZED THERAPIES IN SWETHAPRADARA

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ABSTRACT

In Ayurveda, leukorrhea is a common issue faced by women of reproductive age, and it is linked to *Shweta Pradara*, which refers to an excessive vaginal discharge. One type of *Striroga* that influences the daily lives of women is *Swethapradara*. Since it is regarded as a symptom of various *Stri rogas* or *Yoni vyapads*, *Sthanika Chikitsa*, as outlined in *Striroga*, is highly relevant to *Swetha Pradara*. Our *Acharyas* have described various forms of *Sthanika Chikitsa* across numerous Ayurvedic texts. These methods include *Uttara Basti*, *Yoni Parisheka*, *Yoni Swedana*, *Yoni Pichu*, *Yoni Poorana*, *Yoni Dhavana*, *Yoni Dhoopana*, *Yoni Lepana*, and *Yoni Varti*. In *Sthanika Chikitsa*, medications are administered intravaginally through various forms of therapies. The administration of medication via the vaginal route is the most preferred and accepted approach for addressing various reproductive health concerns. Modern treatments such as vaginal douching, suppositories, tampons, vaginal painting, and cauterization are seen as adaptations of *Sthanika Chikitsa*, as outlined in Ayurveda. Each method of *Sthanika Chikitsa* holds its own importance and shows significant effectiveness when applied with proper indications and stringent aseptic practices, necessitating meticulous care. *Swetha Pradara* is one condition where *Sthanika Chikitsa* has shown remarkable success in mitigating the disorder. This study offers a comprehensive examination of the localized therapies, or *Sthanika Chikitsa*, as put forward by Ayurveda experts. The methods of *Sthanika Chikitsa* are affordable, safe, and efficient, with no known adverse effects reported.

INTRODUCTION

Infections of the reproductive tract pose a serious threat to public health in developing countries, and reproductive health is an essential component of overall health. Often accompanied by discomfort, leucorrhea is an irregular, non-haemorrhagic vaginal discharge. The flow of a white, yellow, or greenish discharge from the female vagina that may be normal or an indication of infection is known as leucorrhea, sometimes spelled likoria. The ovaries, fallopian tubes, vagina, or, most frequently, the cervix can all produce these discharges. It indicates underlying pelvic pathology.^[1]

It accounts for over one-fourth of the visits that Gynecologists make to their patients. It is among the common problems that women face throughout their lives.^[2] Women may seek treatment solely for this symptom if it gets so bad that it masks the underlying condition.^[3-5]

In many cases, leucorrhea is an indication of infection, particularly when the discharge is yellow or green, has an unpleasant odor, and is accompanied by irritation, itching, pain, or tissue inflammation. Physiologic leucorrhea is a normal condition that occurs in adolescent girls within a few months to a year of the onset of menses and is occasionally present in new-born girls, usually lasting one to two months.^[6,7] Infections with bacteria, yeast, or other microorganisms can result in abnormal leucorrhea.^[8] Chronic retroverted uterus, fatigue, malnourishment, emotional disorders, unhygienic conditions, improper diet, constipation, and chronic illness are the causes of leucorrhea. *Trichomonas vaginalis*, *Candida albicans* or

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mixed bacterial infections, gonococcal, monilial infections, vulvovaginitis, vaginal wall lesions, and uterine cervix lesions have all been connected to leucorrhea. [9-11]

To treat physiological leucorrhea, hormonal axis must be balanced to maintain estrogen levels at the optimum throughout the month. For pathological leucorrhea treatment, hormone balance, normalization of the genital tract, and infection control are all necessary. Treatment may include antibiotics like metronidazole, povidone, natamycin, and nystatin. The bacteria that they attempt to kill are just one of the many causes of leucorrhea. [12] Antibiotics or antimicrobial drugs are commonly used in patients with bacterial vaginosis as abnormal leucorrhea remedies. In order to treat yeast infections, vaginal creams in gel form are administered to patients who are allergic to antibiotics or whose allopathic leucorrhea treatments have a lot of negative effects. [13,14]

About 80% of the world's population in developing nations receives their primary medical care from traditional medicines, and about 25% of modern medicine is based on medications derived from plants. The documentation of plants used to treat leucorrhea, however, has received no attention. [15] Based on the signs and symptoms, leucorrhea is interpreted as *Swetha pradara* in Ayurveda. Leucorrhea (Likoria) can be treated in a variety of ways with Ayurvedic medicine. Likoria, or vaginal discharge brought on by bacterial or fungal infections, is also managed by Ayurvedic medications.

The management of *Swetha Pradara* also heavily relies on local remedies, or *Sthanika Chikitsa*, in addition to oral medications. In order to assess their effectiveness in treating *Swethapradara* of leucorrhea, a review of these local remedies has been conducted in this study.

Swetha Pradara

According to Ayurveda, leucorrhea is one of the most prevalent complaints among women in the reproductive age range and is associated with *Shweta Pradara*, or excessive vaginal discharge. [16] In particular, Ayurvedic classics refer to white vaginal discharge as *Shweta Pradara*. Given the clinical characteristics of *Shweta Pradara*, we can conclude that it is a *Kaphaja* disorder in the *Apana Vayu* region because *Kapha Dosha* causes all forms of *Srava*, or discharge. Therefore, it can be concluded that vitiated *Kapha*, which is caused by a number of factors, causes vaginal white discharge. In addition to *Kapha Dushti* and *Rasadushti*, *Shweta Pradara* also contains *Vatadushti*. [17]

The Brihatrayee, the three primary Ayurvedic treatises, makes no mention of the term "*Shweta Pradara*." In any case, Indu, the commentator of Ashtanga Sangraha, explains *Shweta Pradara* as *Shukla Asrigdara*, while Cakrapanidatta, the commentator of Charaka Samhita, has explained it as *Pandura Pradara*. [16,17] Later Ayurvedic textbooks such as Sharangadhara Samhita, [18] Bhava Prakasha, [19] and Yoga Ratnakara [20] mention *Shweta Pradara* in relation to *Yoni Srava*. As a symptom of an underlying pathology in numerous disorders such as *Vatala*, *Pittala*, *Shleshmala*, *Sannipatiki*, *Acharana*, *Atyananda*, *Aticharana*, *Upapluta*, *Paripluta*, *Phalinee Yonivyapadas*, [3] *Parisruta Jataharini*, etc., it has not been explained as a distinct disease entity in any of these references. [21]

Shweta Pradara (leucorrhea) is frequently caused by excessive coitus, frequent abortions, poor lifestyle choices, poor dietary habits during the menstrual and ovulatory periods, and unsanitary vaginal conditions. [22] The vitiation of *Kapha* and *Vata Doshas* (*Apana Vayu*) as a result of *Kapha* and *Vata Vridhikara Ahara* and *Vihara* are included in the *Samprapti* of *Swethapradara*. Because *Kapha* and *Rasa* have *Ashrayaashrayi Sambandha*, vitiated *Kapha* also results in *Rasadushti*. *Drava Guna Pradhana* is what *Kapha* and *Rasa* are. In the area of *Apana Vayu*, the combined *Dushti* of *Kapha* and *Rasa* results in white discharge per vagina. [23] Based on the clinical characteristics of *Shweta Pradara*, we can conclude that it is a *Kaphaja* disorder in the *Apana Vayu* region because *Kapha Dosha* is the cause of all *Sravas* (discharges). *Abhyantara*, or internal administration, and *Bahya prayogas*, or external administration or local therapies, are two components of the *Shweta Pradara* treatment modality. Drugs with a preponderance of *Kashaya rasa*, *Tridosha shamaka*, and *Balya* properties are the mainstay of treatment for *Shweta Pradara*. As a result, the majority of *Kashaya Rasa* dominance drugs are taken internally and locally. [24]

Localized Therapies

Swethapradara is one of the *Striogas* affecting the daily activities of the women. It is also considered as the symptom for many types of *Striogas* or the *Yonivyapads* and hence *Sthanika Chikitsa* indicated in *Striroga* is also applicable for *Swetha Pradara*. Our *Acharyas* have mentioned different types of *Sthanika Chikitsa* in various Ayurvedic classics. These include *Yoni Parisheka*, *Yoni Swedana*, *Yoni Pichu*, *Yoni Poorana*, *Uttara Basti*, *Yoni Pichu*, *Yoni Dhavana*, *Yoni Dhoopana*, *Yoni Lepana*, *Yoni Varti* etc. In *Sthanika Chikitsa*, medicines are applied intravaginally. Vaginal wall and adjacent tissues are extremely vascular and this facilitates the absorption

of drugs through vagina. [25] *Sthanika Chikitsa's* are described below;

One type of *Striroga* that affects women's everyday lives is *Swethapradara*. As it is also considered a sign of various *Strirogas* or *Yoni Vyapads*, *Sthanika Chikitsa*, referenced in *Striroga*, is relevant to *Swetha Pradara* as well. Our *Acharyas* have mentioned different forms of *Sthanika Chikitsa* in several Ayurvedic texts. Some of these include *Uttara Basti*, *Yoni Parisheka*, *Yoni Swedana*, *Yoni Pichu*, *Yoni Poorana*, *Yoni Dhavana*, *Yoni Dhoopana*, *Yoni Lepana*, and *Yoni Varti*. Medications are delivered intravaginally in *Sthanika Chikitsa*. Due to the high vascularity of the vaginal wall and the surrounding tissues, drugs can be absorbed more readily through the vagina. A more detailed description of *Sthanika Chikitsas* is provided below.

Yoni Prakshalana

Another name for *Yoni Prakshalana* or *Yoni Dhawana* is vaginal douching. Under aseptic precaution, the vagina is cleaned using medicated liquids, decoctions, or water. The douche pot should be filled with water or medication, and a rubber catheter should be attached for vaginal douching. Enema pot, sterile catheter, cotton or gauze pieces, Kelly's pad, and hand gloves are needed.

Purva Karma: The patient keeps their bladder empty while the medication is prepared.

Pradhana Karma: The dorsal lithotomy position is recommended for the patient. After placing the Cusco speculum, Luke warm *Kashaya* is added to the douching pan. The nozzle (7-8 cm in length) is attached to a rubber pipe that is 4-5 feet long and connected to a douching pan. *Yoni* (vagina) is used to insert nozzles, which are then rinsed out for ten to fifteen minutes.

Paschat Karma: The patient is instructed to sit in a squatting position following the procedure. The patient is instructed to strain gently, which causes the remaining *Kwatha* to come out and to dry the vulva.

Indications: *Yoni Srava* - decoction of *Triphala*, *Yoni Kandu* - decoction of *Guduchi*, *Triphala* and *Danti*, *Yoni Daurgandhya* - *Aargwadhadi Kashaya*

Mode of action: All *Prakshalana* medications have *Tikta Kashaya Rasa* and *Laghu Ruksha Guna* as their modes of action. They are *Shothahara*, *Vedana Shapaka*, *Kandughna*, *Krimighna*, *Ropana*, *Srava Kleda Shoshana*, and *Vrana Shodhana*. It is evident that *Prakshalana's* primary effects are anti-inflammatory and bactericidal.

They encourage the growth of new tissue while eliminating waste and unhealthy tissue. They eliminate harmful bacterial growth, preserve normal vaginal pH, heal unhealthy vaginal mucosa, and maintain normal vaginal flora. [26]

Yoni Parisheka

Yoni Parisheka has hot fomentation to the vagina. *Parisheka* is performed for five to ten minutes on the vaginal exterior. The vagina is covered with lukewarm water or medicated oil that is 4 to 5 inches high.

Indications: *Yoni Shoola* - decoction of *Guduchi*, *Triphla* and *Danti*

Yoni Pichu

Applying a cotton ball or tampon soaked in *Kashaya* or medicated oil to the vagina. [8] *Pichu* is composed of two to three cotton swabs wrapped in a piece of gauze and tied with long thread. It is then submerged in medicated oil, *Kalka*, or *Kashaya* and put in the vagina.

Location: *Yoni* (vaginal canal); patient position: lithotomy position.

Pichu Dharana Kala: *Aamutra Vega* (urge to urinate); treatment lasts for 7-14 days following the end of menstruation.

Purva Karma: The patient is asked to empty their bladder after the part preparation is complete. Preparation of oil-soaked

Pradhana Karma: Sterile, aseptic *Pichu* placed in the vagina after being soaked in lukewarm *Taila*, *Ghrta*, and *Kashaya*. For easy removal, the *Pichu's* thread should emerge from the vagina.

Paschat Karma: The patient is instructed to rest for fifteen minutes following the procedure. When the patient feels the need to urinate, the *Pichu* is removed.

Indications: *Vataja Yoni Vyapad* - *Guduchyadi Tail Pichu*, *Yoni Daah* - *Chandanadi Tail Picchu*, *Yoni Shool* - *Tagar*, *Kusht*, *Sindhva Siddh Tail Pichu*. *Upapluta Yonivyapad* - *Panchvalkal Kwath soaked Pichu*

Mode of Action: Depending on the medication, the mode of action varies. The most popular oil base is *tila*. The oil helps to nourish and strengthen the uterine muscle and has *Sukshma Yogavahi* properties, making it highly antiseptic and anti-bacterial. *Pichu* keeps the vaginal wall up and stays there for a long time to improve the effectiveness of the medication. [27]

Yoni Varti

Varti are wicks created by combining tablets that have been finely powdered. Shape and dimensions: *Yavakara*, *Tarjani Anguli Pramana* (Index finger).

Location: Dorsal lithotomy; site: *Yoni* (vaginal canal). Duration: 48 minutes (one *Muhurta*) or a brief period of time.

Purva Karma: A portion of the setup is complete. Urinary emptying is requested of the patient. Getting *Varti* ready.

Pradhana Karma: involves inserting a vaginal *Varti*.

Paschat Karma: involves asking the patient to rest for fifteen minutes following the procedure. With *Sukhoshan Jala*, *Prakshalana*.

Indications: *Kaphaja Yoni - Varah Pitta Varti*, *Yava* and *Masha Varti*, *Karnini Yoni - Kushtha*, *Pippli*, *Arkagra*, *Saindhava*, *Vasta Mutra Varti*, *Shweta Pradara - Lodhra*, *Priyangu Varti*, *Yoni Kandu - Gopitta/ Matsya Pitta Varti*.

Mode of Action: Due to the presence of *Laghu Ruksha Guna*, *Tikshna*, *Katu Rasa*, *Katu Vipaka*, and *Ushna Virya*, these medications have the following effects: Astringent (*Sneh Kled Nashaka*), *Ropana* (promote new tissue growth), bactericidal (*Kandu Krimihara*), and dead cell removal (*Vrana Shodhana*). [26]

Yoni Dhoopana

During *Yoni Dhoopana*, the vagina is fumigated by administering medicated and disinfected smoke.

Location: *Yoni*,

Duration: 10 to 15 minutes

Patient Position: Sitting

Purva Karma: Part preparation is completed, the patient is asked to empty their bladder, and *Dhoopana Dravya* are lit in the *Dhoopana* apparatus.

Pradhana Karma: A chair with a hole in the middle is used, and the patient is asked to sit on it after voiding. The apparatus is positioned immediately beneath the chair. The external genitalia must be reached by the smoke from *Dhoopana* drugs. The chair needs to have a cloth covering it.

Indications: *Yoni Kandu- Haridra and Brahati Dhoopana*, *Shweta Pradara- Dhoopana by Saral, Guggul, Yava, Ghrita*

Mode of Action: All of these medications contain *Laghu*, *Ruksha Guna*, *Kashaya*, *Tikta Rasa* *Pradhana*, *Shothahara*, *Vata-Pittahara*, *Vrana Shodhana-Ropana*, and *Vedna Sthapaka*. As a result, the volatile oils in its fumes have analgesic and anti-inflammatory properties. In order to increase blood flow, *Dhoopana* raises the vaginal temperature. This has a calming effect that helps reduce pain. Moreover, *Dhoopana* has a drying effect that lowers vaginal discharge and has antimicrobial properties that aid in infection prevention. [26]

Yoni Lepana

The finely ground powder is combined with water or a medicated liquid to create a paste of consistent consistency, which is then locally applied to the affected area. *Pradeha*, *Pralepa*, and *Aalepa* are the types. Time: Until the *Lepa* dries; Thickness: *Doshaghna Lepa* ¼-1/8 *Angula*. The patient's position during the lithotomy procedure. According to Acharya Sushruta, *Lepana* cures *Vrana Shula*, cleanses wounds

or infections, lessens swelling or inflammation, and accelerates suppuration, much like water instantly puts out fire. Through glands, capillaries, and vessels, the medication is absorbed.

Purva Karma: A portion of the preparation is finished. The patient's bladder is asked to empty. Medicine preparation.

Pradhana Karma: It is recommended that the patient lie down in the position of dorsal lithotomy. The Cusco speculum is positioned. The affected area receives an even layer of freshly made *Lepa*. Before drying, *Lepa* is promptly removed.

Paschat Karma: *Sukhoshan Jala* and *Prakshalan*, while a piece of gauze dries vulva.

Indications: *Vivrata Yoni* is indicated by applying a paste of *Palasha* and *Udumbara* mixed with honey and till tail. *Palash Udumbar Til Tail Pradeha* by *Yoni Drantva*, *Yoni Shoola* and *Arsha - Lepana* by *Sarshap*, *Lehsun*, *Hingu*, *Vachaadi*.

Mode of Action: Maximum drug has *Tikta Rasa* and *Kashaya*. They work by sloughing off dead cells and reducing inflammation, ulcers, and diabetes. Boost blood flow, encourage new development, and offer reinforcement. It relieves burning and pain when used with *Sheeta Dravya*. When applied locally, the local nerve is first stimulated and then relaxed. [27]

Yoni Poorana

This process involves using *Kalka*, *Churna*, *Ghrat*, and *Vasa* to completely fill the vaginal cavity. This process is carried out when a significant amount of medication must be kept at the site of action.

Pooran Dharana Kala: *Aamutra Vega* (urge to urinate); *Yoni* (vaginal canal); Patient position during procedure: Dorsal lithotomy; Therapy duration: 7-14 days following the end of menstruation.

Purva Karma: A portion of the setup is complete. Urinary emptying is requested of the patient. Getting the medicine ready.

Pradhana Karma: It is recommended that the patient lie down in the position of dorsal lithotomy. The Cusco speculum is positioned. Applying *Puran Dravya* inside the vagina with a hand wearing sterile gloves.

Paschat karma: *Prakshalana* with *Sukhoshan Jal* and a piece of gauze are used to dry vulva in *Paschat Karma*.

Indications: *Yoni Kandu - Brihti Kalka Pooran*, *Vataja Artava Dushti - Priyangu*, *Tila Kalka Poorana*, *Pittaja Artava Dushti - Chandan*, *Paysya Kalka Poorana*, *Kaphaj Artava Dushti - Madanphala Kalka Poorana*.

Mode of Action: The required action is produced when the active ingredients are absorbed through the cervical or vaginal epithelium. [26]

Uttara Basti

The word *Uttara Basti* is the conjugation of 2 word i.e., *Uttar + Basti* which means- "*Uttar*" i.e., "*Shrestha*" or the *Basti* which is given in *Uttar Marga* (i.e., in urinary or vaginal passage) and has Superior qualities. The *Uttar Basti* can be performed using *Sneha* or *Kwatha*. As the dosage of *Sneha* increases, *Uttar Basti* should be administered for three days in a row.

Poorva Karma: Bowel and bladder evacuation. Milk with ghee, a light diet, etc. **Abhyanga:** By any tail of *Vatashamak*. The local area should receive *Abhyanga*. For ten minutes, focus on the *Kati Pradesha*, *Adhodara*, *Prustha*, and *Parshva Pradesha*.

Swedana: The same areas received *Swedana* for roughly fifteen minutes following *Abhyanga*. **Yoni Prakshalana:** 500ml of *Panchavalka Kwatha*, *Dashmula Kwatha*, or *Triphla Kwatha* is administered as a vaginal douche. Pulse examination, B.P. etc. was completed. A standard P/V examination was conducted to evaluate the uterus's size, shape, and location.

Position: The patient was put in the lithotomy position. **Painting and Draping:** The genital organs were covered with perineal towels and painted with an antiseptic solution. The covering was secured with clips. The light setup and instrument trolley were prepared.

Pradhan Karma: Cusco's speculum is used to visualize the cervix in *Pradhan Karma*. The antiseptic solution was swabbed onto the vaginal canal, external os, and fornices. The length and position of the uterus, as well as whether or not the os was open, were evaluated using uterine sound. To make it easier to insert the uterine canula, the os is gradually dilated. *Grita* or oil. The intrauterine insemination (IUI) cannula is attached to a 5ml syringe, filled with medication, and then the medicated oil or *Ghrta* is carefully inserted into the uterus. The patient was kept with their head down while the medication was being injected into their uterus.

Paschat Karma: After carefully removing all of the instruments, the perineal towels were removed. In the vagina, sterile *Pichu* is applied. The patient should spend fifteen minutes lying in a left lateral position. For two hours, blood pressure and pulse were recorded.

Indications: *Bandhyatava - Phala Ghrata, Shatpushpa Tail, Lashuna Tail, Trivrat, Shatpak Tail, Bala Tail, Narayana Tail Basti, Vataj Yonivyapad - Guduchyadi Tail Basti, Udavarta, Vatala, Mahayoni - Trivrit Sneha Uttarbasti, Rakta Yoni - Kashmarya Kutaj Sidhh Basti.*

Mode of Action: The endometrium is rejuvenated by the *Snehana* and *Brmhana* drug, which is based in

Uttara Basti Ghrta. When menorrhagia results from a hyperplastic endometrium, *Uttara basti* combined with *Lekhana Dravya* is recommended. Together with *Lekhan Dravya*, *Uttara basti* mechanically removes the blockage in the tubal lumen and restores the tubal cilia's normal function. The infection is eliminated with the aid of *Uttara basti*.^[25]

Yoni Abhyanga

Yoni Abhyanga improves the strength and tone of the perineal muscles. *Sthana-Yoni* (vaginal canal), Position: Lithotomy, Indications: Uterine Prolapse, Duration: 15 to 20 minutes,

Purva Karma: Part preparation is completed. The patient's bladder is asked to empty. Medicine preparation.

Pradhana Karma: a sterile rubber catheter is used to insert a 5ml syringe filled with lukewarm *Taila* into the vagina. *Abhyanga* is performed on the vaginal walls while gloved fingers are inserted into the vagina.

Paschat Karma: The patient will lie for fifteen minutes. A gauze pad is inserted to prevent *Taila* spills.

Mode of Action: *Abhyanga* with *Sneha Dravya* strengthens muscles, enables them to stretch, and nourishes tissues.^[25]

DISCUSSION

It is anticipated that a higher concentration of the drug will act on the target organ when administered locally as opposed to internally. *Sthanika Chikitsa* acts quickly and effectively. The fundamental idea behind *Sthanika Chikitsa*'s work is i.e. absorption is a feature of the vagina. The vagina's anatomically backward position aids in the longer-term self-retention of medications. The vaginal absorption is increased by the high vascularity. The lower vagina's lateral recesses and rugae experience the highest absorption. The vagina absorbs *Dravyas* with low molecular weight. The epithelium of the vagina is lipophilic.

In Ayurvedic science, local treatment methods are given priority, known as stacked *Tikitsa* or topical therapy. Among them, *Uttarabasti* nourishes the uterine lining, stimulates the necessary secretion of the cervix, and eliminates obstruction. *Uttarabasti* helps rejuvenate the uterine lining. *Prakhsalana* means purification, and their entire medicine has purification, bacterial and therapeutic properties. *Pichu* provides strength, expandability and tissue nutrition. *Yoni Prana* affects the entire vaginal epithelium, requires large amounts of medication, and is recommended to prevent descent from the uterus position.

Lepana helps keep medications in the body for a long period. *Yoni Lepana* improves the bio-availability of the medicine by providing a larger surface area for absorption. *Varti* is used to keep pH levels in check and also regulates the vaginal

flora. By preserving a healthy vaginal flora, *Dhoopana* enhances the defense mechanisms of the female genital tract. Medications Its antimicrobial activity is utilized in *Dhoopana* displays. [25]

Anything that is white in color is referred to as *Shweta*. An overabundance or increase in volume is referred to as *Pradara*, which denotes an excessive flow. Consequently, the phrase "*Shweta Pradara*" refers to an excessive amount of white discharge from the vagina. Because it is often the primary sign of an underlying disease, the etiology of *Shweta Pradara* would be that of the underlying condition. The *Abhyantara* (internal administration) and *Bahya Prayogas* (external administration) are the treatment modalities used in the treatment of *Shweta Pradara*. The therapy of *Shweta Pradara* is treated using medications that are *Tridosha Shamaka*, specifically *Kapha Shamaka*, *Krimighna*, *Kledaghna*, *Putihara*, and *Kanduhara*. The Ayurvedic approach to therapy for *Shweta Pradara* is based on its aetiopathogenesis. Since *Kapha* is the primary cause of vaginal discharge, restoring *Agni* is essential to its cleansing. Rejuvenating herbs are used to tone the muscles of the reproductive organs, re-establish *Kapha Dosha* balance, and eliminate toxins that have built up and this is considered as the primary course of treatment in Ayurveda. [28]

In 1918, Macht demonstrated that the vagina could absorb drugs like morphine and atropine. Although vaginal drug delivery is frequently used to treat a variety of conditions, it is important to note that the vagina is able to absorb medications. These medications may also have systemic effects depending on local circumstances. [29] There have been few studies on the therapeutic benefits of these *Sthanika Chikitsas*, as seen in one experiment. The impact of douching on vaginal flora was discovered by *Monif GR*, *Onderdonk AB*, and others, who experimented with douching once a day with saline or acetic acid. The aim is to minimize the amount and composition of vaginal flora in 10 minutes. [30,31] Using the vagina as a drug delivery mechanism will likely result in making it ideal for drug absorption will probably continue to increase. Oral drug administration might be challenging due to vomiting, changes in GI absorption, and medication interactions. [29]

Sthanika Chikitsa elaborated in the present study focusses on the healing effect of these localized therapies as they help to treat the infections in the vagina, increases the blood supply to the vulvovaginal tissue, which thickens the vaginal epithelium, improving tissue integrity, reduces vaginal pH, helping to restore healthy vaginal microorganisms and prevent infections and leads to physiologically healthy vaginal wall.

CONCLUSION

The vaginal administration of drugs is often the preferred and most acceptable method for various reproductive health issues. Contemporary treatments such as vaginal douching, suppositories, tampons, vaginal painting, and cauterization represent modified forms of *Sthanika Chikitsa*, which has been discussed in Ayurveda. Each *Sthanika Chikitsa* has its unique significance and demonstrates considerable efficacy when utilized with appropriate indications and strict aseptic measures, requiring great care. *Swetha pradara* is one condition where *Sthanika Chikitsa* has proven highly effective in alleviating the disorder. This study provides a thorough review of the localized therapies, or *Sthanika Chikitsa*, as described by Ayurveda scholars. *Sthanika Chikitsa* methods are economical, safe, and effective, with no reported adverse effects.

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