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## **Standard Operating Procedure of Local Therapies with Special Reference to Uttarbasti, Yonidhawan and Yonipichu**

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### **ABSTRACT**

*Local Therapies like Uttarbasti, Yonidhawan, Yonipichu, are commonly performed in Ayurvedic gynecological practice to treat diseases of Tryavarta Yoni (Vaginal diseases). These are specialized treatments adopted locally to get rid of vaginal disorders. While reviewing ancient texts the information regarding these procedures is found in scattered form. There were no specific guidelines regarding execution of these procedures. Instruments, medications used in these procedures should be standardized according to present era. In Standard Operating Procedure (SOP) the activities performed are described in a clear, logical, sequential and methodical manner. In this study, all the steps followed during local therapies are described in detail & stepwise manner. Moreover instruments, medications used are altered/standardized according to present era. This study will definitely prove to be helpful to clinicians & scholars of Ayurveda & allied sciences in complimenting mainstream medicine in providing complete health care to society in preventive & curative aspect.*

**Key words:** *Uttarbasti, Tryavarta Yoni, SOP.*

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### **INTRODUCTION**

Local Therapies (Sthanik Chikitsa) gave synergistic effect when used with internal medicines while curing gynaecological disorders. Administration of medication through oral route often land up in side effects like gastric irritation, vomiting, nausea, delayed absorption etc. On the other hand in Local Therapies medications in different dosage forms acts directly on affecting organ which in turn enhances absorption of drug resulting into increased cure rate.

The presence of dense network of blood vessels has made the vagina an excellent route of drug delivery for both systemic and local effects. The main advantages of vaginal drug delivery over conventional drug delivery are the ability to by-pass first pass metabolism, ease of administration.

Uttarbasti, Yonidhawan and Yonipichu are the common Local Therapies practiced by Ayurvedic Physicians. While reviewing Texts in context of Local Therapies one can overcome many obstacles. Procedure adopted while administration of Local Therapies, Instruments used, Medications used *etc.* are not explained in clear, logical and sequential manner. Moreover, Instruments used, Medications used should be standardized/altered according to present era.

Standard Operating Procedure (SOP) is a documentation which describes regularly recurring operation relevant to the course of action. The purpose of SOP is to carry out the operations precisely and always in same manner. In this study each procedure is studied in detailed and

are written in clear, logical, sequential, scientific and logical manner. Moreover some alteration/modifications are done during carrying out these procedures and are scientific and logical explanation has been provided in SOP. It will guide ayurvedic practitioner and scholars to carry out the procedures in scientific and ethical manner with ease. This study will definitely prove to be helpful to clinicians & scholars of Ayurveda & allied sciences in complimenting mainstream medicine in providing complete health care to society in preventive & curative aspect.

### **Aim**

To study the Standard Operating Procedures (SOP) of *Uttarbasti*, *Yonidhawan* and *Yonipichu*.

### **Objectives**

- 1) Review of Local Therapies from ancient Texts.
- 2) To develop SOP of Uttarbasti, Yonidhawan and Yonipichu.
- 3) To avoid Complications and difficulties in executing Uttarbasti, Yonidhawan and Yonipichu.

## **MATERIALS AND METHODS**

The Standard Operating Procedure (SOP) of Uttarbasti, Yonidhawan and Yonipichu is described as follows:

### **I] Uttarbasti (Uterine instillation of Medicated Oil)**

#### **Definition**

It is termed as Uttarbasti because it is given through Uttarmarg *i.e.* either through the passages located above or in front part (Urethra or Vagina) of anus (where routine Basti is given) [1] Acharya Charaka defines it as basti having superior qualities is termed as Uttarbasti.[2]

#### **Indications**

Diseases of Urinary bladder such as retention of urine, dysuria, uterovaginal prolapse, severe vaginal pain other gynaecological disorders which are difficult to cure and retention of placenta.[3]

### **A) Uttarbasti in vaginal condition**

- 1) Vaginal infections – Bacterial and fungal infections are commonly found in infections are commonly found in vagina. Drugs used for these conditions should be bactericidal or bacterostatic or antifungal in nature. *Jatyai Ghrita* or *Jatyadi tail* prove to be beneficial in these conditions.
- 2) Vaginal Mucosaal defects – The vaginal mucosal defects may be explained under following headings
  1. **Vaginal milieu pH.**

Generally vaginal PH remain in between 3 & 4. This acidic PH prevents vaginal infections. In case of PH variations appropriate drugs should be administered to restore normal PH. Commonly used drugs for this purpose are *Triphala*, *Panchavalkal*, *Dashamula etc.*

#### **2. Vaginal Secretion**

*Uttarbasti* with suitable drugs can be administered either to increase or decrease vaginal mucosal secretions. *Ghrita* preparation possessing *snigdha* and *pichchhil* properties can be used to improve vaginal mucosal secretions. Similarly formulations predominantly having *kashaya* rasa are useful to decrease vaginal secretions.

**3. Inflammation of vaginal walls –**

Drugs possessing anti-inflammatory properties can be best administered in the form of *uttarbasti* in case of vaginal Inflammation. Preparations with *Nirgundi* (*Vitex Nigundo*), *Dashamula*, *Ashwagandha* (*Withania Somnifera*) can be selected for this purpose.

**B) Uttarbasti in Cervical conditions**

- 1) Cervical Erosions – Chronic Cervicitis associated with erosions can be easily treated with *Uttarbasti* by using *Ropana* drugs (Wound healing drugs). Medicated *Ghrita* like *Triphala Ghrita*, *Shatavari* (*Asparagus Racemosus*) *Ghrita*, *Phala Ghrita*, etc are being used commonly.
- 2) Cervical Mucous - Cervical Mucous (CM) is the vehicle for transport of sperms and also works against infections. Quantitative less CM is observed in individuals having *vata prakriti* predominance, short cervical canals, small cervical OS. It can be improved by using medicated *Ghrita* having *snigdha* and *pichchhil guna*.
- 3) Cervical Mucous pH – The pH of cervical mucous plays an important role as it provides transport media for spermatozoa. Normal range of PH of CM falls in between 6 and 7. Any variation in this range may lead to non survivability of spermatozoa. Altered Cervical PH can be corrected by using appropriate drugs.
- 4) Cervical Mucous Disorders – Altered Viscosity, increased cellularity etc can be treated with *Jatyadi Ghrita*, *Shatavari Ghrita* etc.

**C) Uttarbasti in endometrial condition**

*Uttarbasti* plays a vital role in recuperating thickness of endometrium and improving quality of endometrium. *Snehas* prepared *Brihan dravyas* administered through *uttarbasti* plays a vital role in maintaining above conditions. The absorption of these *sneha dravyas* are very fast which gives results quite fast.

**D) Uttarbasti in Tubal Disorders**

- 1) Hydrosalpinx – An inflammatory condition can be effectively combated with the help of administration of *Nirgundi Taila* (Medicated oil with *Vitex Nigundo*), *Yashtimadhu Taila* (Medicated oil with *Glacrrhiza Gabra*), *Til Taila* (Sesame Oil) etc through *Uttarbasti*
- 2) Tubal Block – *Kshar taila* can be used in *uttarbasti* if Tubal Block is due to adhesions but in cases of spasm due to fibrosis *Brimhan Snehas* can be used

**Contraindication**

*Uttarbasti* is contraindicated in Hypersensitivity, Carcinoma of Cervix, Heavy bleeding, Virginity, Vesicovaginal fistula etc.

- 1) **Time of Administration:** *Uttarbasti* should be administered after cleansing of women's body by two or three *Asthapana Basties*, It should be administered preferably during *Artavakala* or *Ritukala* (Just after menstrual bleeding is over). In this period uterus and vagina are free from coverings and their orifices are open. This facilitates easy entry of medicinal preparations into vagina and uterus. [3]
- 2) **Instruments:** *Dispovan 10cc*, *Infant Feeding Tube No.6* or *Insemination Canula*, *Anterior Vaginal Wall Retractor*, *Volsellum*, *Uterine Sound*, *Pichu* (Tampoon).

- 3) **Basti Dravya:** *Kashaya* (decoction), *Taila* (oil) and only oil/*kashaya* are used simultaneously as *basti dravya* for *Niruha*, *Anuvasana*, and *Uttarbasti* respectively. As per *Sushruta* either *kashaya* or *taila* can be used as *uttarbasti dravyas*. In *charak samhita* only only *taila* is used in *uttarbasti* procedures. [4]

### Quantity And Frequency

*Charaka* suggests administration of *Uttarbasti* three times a day on three consecutive days. The quantity mentioned is *half pala* (20gms). [4] *Sushruta* and *Vagbhata* differ with this dose opinion. *Sushruta* has mentioned definite quantity of *kashaya* (decoction) and *taila* to both sexes separately. The quantity of decoction should be one *Prasrita* (96gms) for males and two *Prasrita*(192gms) for adult females [4]. For cleansing of uterus *sneha* should be taken in double quantity. [5]

Sneha: Male – 1 *Prakuncha* (48 gms)  
Female- 1 *Prasrita* (96gms)

Decoction: Male- 1 *Prasrita* (96gms)  
Female-2 *Prasrita* (192gms)

### Procedure

- 1) Patient should be admitted to the hospital
- 2) Before giving *uttarbasti* one *Anuvasan* and two *Niruha Bastis* should be administered in order to detoxification of the body. [3]
- 3) It should be administered preferably during *Artavakala* or *Ritukala* (Just after menstrual bleeding is over). [3]
- 4) Procedure should be carried out in Operation Theatre under all aseptic precaution
- 5) Inj. Atropine 0.6 mg is given half hour before *Uttarbasti*.
- 6) Patient should be given lithotomy position.
- 7) Painting and Drepping is done.
- 8) Cervix should be visualized with the help of anterior wall retractor and Sim's Speculum by retracting anterior and posterior vaginal wall respectively.
- 9) Cervix is caught with volsellum.
- 10) Length of uterus is measured by uterine sound.
- 11) Infant Feeding tube No.6 should be taken and it should be cut about 1 to 2 cm at its proximal end.
- 12) This end should be attached to 10cc Syringe. In this syringe 5 to 7 ml of drug should be taken. Air should be removed from this syringe.
- 13) Proximal cut end should be inserted into uterus through cervix upto the length measured by uterine sound.
- 14) Drug (oil/decoction) is pushed slowly with steady hands.
- 15) Tampon should be kept in vagina for 2 hours and patient should be given head low position.
- 16) This procedure should be repeated for 3 to 5 days.

### I] Yonidhawan

*Dhawana* means cleaning or purification of wound with water and other medicated material [6,7]

**Sthana** - Prathamavarta (Vagina)

**Duration** - 8 days

**Timing** - Rutukal (after 5<sup>th</sup> day of Menstrual Cycle)  
**Time** - 1 to 1.5 min.  
**Drug** - Decoction, oil, Kshirpaka (Medicated Milk)  
**Quantity** – 1 Litre of decoction, 250 ml of oil.

**Indications -**

- 1) *Kunapganghi Artavdushti*
- 2) *2.Kaphaja Artava Dushti*
- 3) *Yoni Srava* (Vaginal Discharge)
- 4) *4.Yoni Kleda*
- 5) *Yoni Paicchilya*
- 6) *Yoni Kandū* (Vaginal Itching)
- 7) *Yoni Arsha* (Vaginal Polyps)

**Instruments**

Enema pot, Catheter, Yonidhawan table

**Procedure**

- 1) Patient should be given lithotomy position on yonidhawan table having basin like arrangement with outlet at centre of one end of table.
- 2) Sterile rubber catheter should be attached to the enema pot which is kept 5 feet above the patient's level.
- 3) All vagina and Cervix should be exposed by retracting vaginal walls by Ant. Vaginal wall retractor and Sim's Speculum
- 4) Then rubber catheter should be inserted into vagina and prathamavarta (Vagina) should be washed out with lukewarm water.
- 5) Ant. Vaginal wall retractor and Sim's Speculum should be removed
- 6) Vulva is dried with gauze pad
- 7) Oil and decoction once used should not be reused.
- 8) For each patient separate enema pot and catheter should be used

Most of the drugs used in yonidhawana are wound healer, analgesics and bactericidal. They help in preventing infections. They restore altered PH.

**II] Yonipichu (Insertion of Tampons Soaked in medicinal oil or liquid)**

**Sthana** - Prathamavarta (Vagina)  
Dwitiya awarta (Cervix)  
**Duration** - 8 days  
**Timing** - After 5<sup>th</sup> day of menses  
**Time** - 5 to 6 hours or upto the urge of micturation.

**Indications**

- 1) *Yonidaha* and *Yonikandu*
- 2) *Yoni Paichilya* and *Yoni Srava*
- 3) *Yoni Paka*
- 4) *Yoni Karkashata*
- 5) *Vivritta Yonivyapada*
- 6) *Vataja Yonivyapad*
- 7) *Pittaja Yonivyapada*
- 8) *Vamini* and *Upapluta Yonivyapada*

- 9) Ninth Month pregnancy
- 10) Retained Placenta
- 11) *Yoni Bhransha* after parturition

### **Material**

Cotton Swab, Gauze piece

### **Pichu Formation**

It is made up of cotton swab 3×3 cm wrapped with gauze piece which is then tied with long thread. It is dipped in medicated oil. If powder is used then it is kept with thin layer of cotton and pichu is made. Oils are preferred because of its tendency to retend.

### **Procedure**

- 1) Pichu should be autoclaved
- 2) Prior to pichu insertion patient should be advised to void urine
- 3) Patient should be given supine position with flexed knees
- 4) Posterior wall of vagina is retracted by Sim's Speculum
- 5) Sterile Pichu soaked in medicated oil or liquid is inserted with index finger into vagina in such a way that thread should come out of vagina which helps in easy removal after 5-6 hours

Pichu improves musculature of vagina. It also acts as wound healer and antibacterial depending upon drugs used. After pichu insertion vulval pad is given to patient if oil or medicated liquid is used.

### **DISCUSSION**

The present work was aimed at studying the procedure of Local therapies in the perspective of their Standard Operating Procedure. Standard Operating Procedure (SOP) is a set of written instructions that document a routine or repetitive activity. Uttarbasti, Yonidhawan and Yonipichu are commonly practising Local Therapies. The information regarding these procedures found in ancient texts is in scattered form. Instruments used, Medications used should be standardized/altered according to present era. These loopholes implicate to study and document these therapies in detail, scientific and logical manner so that someone having basic knowledge of Ayurveda by following these SOP can easily replicate them in proper manner.

Before carrying out these therapies patients should be investigated for HbsAg, VDRL, HIV etc to cover risk of infections. Patients should be admitted in the hospital for these procedures. Sometimes Pichu is done on OPD basis. But due to daily activities of patient, pichu gets sleep of and desired results are not obtained. Uttarbasti may cause per vaginal bleeding, oil embolism, urogenital infections. These complications can be avoided by admitting the patients in the hospital

In this study (SOP) every step is described in detail. Inj. Atropin given prior to Uttarbasti helps in preventing corneal spasm and vasovagal shock. It is strict OT procedure. Aseptic precautions are mandatory otherwise infection can spread directly to uterus, tubes and peritoneum. Pichu after uttarbasti helps in absorbing leaked oil after uttarbasti.

In Yonidhawana if catheter is inserted into vagina, there is possibility of injury to vagina and cervix. So in present SOP vagina is advised to expose through Sim's speculum and AV retractor.

If Yonipichu is inserted into vagina, due to approximation of labia majora, during insertion of pichu it gets squeezed and valuable medicine can get wasted. So it is advised in this study to use Sim's Speculum so that it makes vaginal opening wide. Vulval pad is advised after pichu which avoids leaking of medicinal oil in undergarments.

## CONCLUSION

In Ayurvedic Gynaecology *Sthanik Chikitsa* (Local therapies) have lot of potential in treating Gynaecological disorders. Different dosage forms are used in the form of medicated smoke, medicated tampons, medicated oil, *kalka* according to necessity of the treatment. The success of these procedures totally depends upon how well these procedures are being adopted by *vaidyas* on the patients. This Standard Operating Procedure gives a definite sequence of processes involved in execution of Local Therapies by which one can perform the work scientifically to obtain definite expected output. This study will definitely prove to be helpful to clinicians & scholars of Ayurveda & allied sciences in complimenting mainstream medicine in providing complete health care to society in preventive & curative aspect.

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