ORIGINAL ARTICLE

“Evaluating the Efficacy of Intra vaginal Application of Palashadi Yoga in Management of Shweta Pradara with special reference to Abnormal Vaginal Discharge”

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ABSTRACT:

Background: Shweta Pradara here can be understood as abnormal vaginal discharge. Certain form of discharge is always prevalent in women genital tract, but when the discharge is associated with itching, abnormal odor, excess amount, abnormal color, burning sensation or associated urinary symptoms then it is considered to be abnormal one. Women are always prone to several forms of infection in their genital tract. It ranges from simple form of infectious discharges to malignant conditions in the genital tract. Aims and Objectives: To evaluate the efficacy of intra-vaginal application of Palashadi Yoga in Shweta Pradara (abnormal vaginal discharge). Materials and Methods: Total 20 clinically diagnosed patients of Shweta Pradara from OPD & IPD of NIA, out of which 15 patients completed the trial. Palashadi Yoga was introduced intra vaginally for 7 alternate days till 2 consecutive cycles. Results: All the results calculated by using Online InStatGraphPad software. Statistically extremely significant results in subjective symptoms like-Discharge per vagina and pain in lower abdomen were seen. Very significant result were seen in vulvar itching and backache. Significant result was seen in color change of discharge before and after treatment. Out of total 15 patients, 8 patients had normal lactobacilli in vaginal swab culture. Among 7 patients, 4 of them had Coagulase Negative Staphylococci, 1 had Bacterial Vaginosis, 1 had Candida and 1 had mixed infection of Candida and Kliebsella. The overall pathogen clearance rate was 57.14%. Conclusion: Management of abnormal vaginal discharges with

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intra-vaginal application of *Palashadi Yoga* is helpful in managing infections.

**Keywords:** *Shweta Pradara, Palashadi Yoga*, abnormal vaginal discharge, vaginal infection, Ayurveda

**INTRODUCTION:**

A certain amount of discharge is always evident in females. When normal it will never cause feeling of extra wetness in vulva, associated with other features like itching, burning sensation, foul smell and pain. Sometimes dyspareunia, burning micturition can also be associated. So deviation from the normal criteria every other discharge can be categorized in abnormal vaginal discharge. Most of the times, the natural defense system of vagina is intact, whereby it clears off infections. But, due to many reasons when the natural environment of vagina is disturbed it invites various sorts of infection to its tract.

Every year in US 7.4 million new cases of bacterial vaginosis occur. An estimate of 3 million cases of trichomoniasis occurs each year in US. The worldwide prevalence of trichomoniasis is 174 million that accounts for 10-25% of all vaginal infections. Abnormal vaginal discharge is the characteristic feature of vulvo-vaginal infections. It occurs in 1-14% of all women of reproductive age throughout the world and its prevalence in India is estimated to be 30%. Most of the documented cases of symptomatic vaginal discharge includes bacterial vaginosis, followed by vulvo-vaginal candidiasis, and trichomoniasis. The number is quite large compared to the strength of the diseases. The prognosis of abnormal vaginal discharge is that it doesn’t have fatal effects but can definitely hamper quality of life.

*Shweta Pradara* is not mentioned as a separate clinical entity in classics, but it can be considered as a symptom in many *Sri Roga*. Mostly all *Acharyas* described white vaginal discharge as *Shweta Pradara*. *Acharya Vininda Madhava* on 9th century A.D. first coined the word “*Shweta Pradara*”. Thus, *Shweta Pradara* can be compared with abnormal vaginal discharge on the basis of its cardinal feature “white or yellowish-white discharge per vagina” as well as on the basis of similar causative factor, signs and symptoms.

Though the treatment of abnormal vaginal discharges is based on kind of infection but treating empirically is very much evident. The recurrence of vaginal infections leading to abnormal vaginal discharge is very common. So, there has to be an intervention which will help in killing causative pathogens and maintaining healthy vaginal floras. *Ayurveda* explains both oral and local procedures like *Yoni Varti dharana* (vaginal tablets), *Pichu dharana* (medicated tamponning), *Yoni Prakshalana* (Vaginal douching), *Yoni Avachuranana* (introducing dry antibacterial, antifungal herbal powders), *Pariseka* etc. for the treatment of different types of *Srava* (discharges). Among many *Palashadi yoga* is a soft form of vaginal tablet introduced into vaginal canal and this study was carried to understand the efficacy of the herbal suppositories in abnormal vaginal discharge.

**AIMS AND OBJECTIVES:** To evaluate the efficacy of *Palashadi Yoga* intravaginal application in *Shweta Pradara* (abnormal vaginal discharge).

**MATERIAL AND METHODS:**

**Selection of the patients:**

Total 20 clinically diagnosed patients of *Shweta Pradara* from OPD & IPD of NIA, Jaipur were selected for the present clinical trial and informed consent was obtained. Out of which 15 patients completed the course of treatment. The study started after approval of Institutional Ethics Committee, letter no.IEC/ACA/2017/39 dated 26/04/2017. This Clinical trial was registered retrospectively under Clinical Trials Registry India, CTRI/2018/10/016115 on 9/17/2018.

**Diagnostic Criteria:**

Patients were diagnosed on the basis of classical signs and symptoms of abnormal vaginal discharge. The discharges should be associated with either any of the infective symptoms like itching, odor, varied color, altered amount, pain lower abdomen or any associated urinary symptoms.

**Method of research:** The method adopted in present study was open randomized clinical trial.

**Drug:** The drug *Palasadi Yoga* for the present study has been selected from *Charak Samhita* and it was prepared according to classical reference in the Pharmacy of National Institute of *Ayurveda*, Jaipur.
Criteria for selection of patients:

- **Inclusion criteria:**
  1. Patients complaining of abnormal vaginal discharge as a cardinal symptom.
  2. Age group between 20 to 45 years.

- **Exclusion criteria:**
  1. Unmarried girls.
  3. Pregnant women.
  4. Any type of malignancy.
  5. Patients having STDs.
  6. Patients with any Systemic diseases.
  7. Patient having any organic pathology of reproductive organs like Cervical Polyp, Fibroid uterus etc.
  8. Any discharges mixed with blood, urine or fecal matters.

- **Withdrawal criteria:**
  1. During the course of clinical trial, if patient develops any serious condition which requires urgent treatment.
  2. If patient wants to withdraw from clinical trial.
  3. Irregular follow-up & non-compliance.

- **Investigations:**
  1. Routine blood investigation: CBC, ESR, VDRL, HIV, HbsAg, LFT, RBS, RFT were advised to all the patients before commencement and CBC, ESR after completion of trial.
  2. Complete urine examination:
  3. pH of vagina:
  4. Vaginal swab for wet mount and culture:
  5. Pap smear:
  6. Sonography (U.S.G.):

**Method of administration of Drug:**
The patient was asked to empty bladder and wash the genital area. Then she was kept in lithotomy position. Gloves were worn. The genital was cleaned with betadine solution. Beforehand, 0.5 gm of palashadi yoga was mixed with honey just to hold the materials and was filled in inserter. The inserter was inserted intravaginally upto cervix. The material was pushed near the posterior fornix. The patient was kept in position for 5-10 mins then send. Again patient was asked to visit one day after. On next visit the vaginal tract was washed with distilled water and again the material was inserted. The process goes upto 7 settings of medicine insertion on alternate days. The process can be started after cessation of cycle.

**Follow up:**
- Patients were followed after every 15 days and then final assessment was done after completion of 2 months.
- Improvement and other side effects were noted.

**Ingredients of Palashadi Yoga:**

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Drug Name</th>
<th>Latin Name</th>
<th>Part Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Palasha</td>
<td>Butea monosperma Linn</td>
<td>Twak (stem cover)</td>
</tr>
<tr>
<td>2</td>
<td>Sarja</td>
<td>Shorea robusta Gaertn.1.</td>
<td>Niyas (gum extract)</td>
</tr>
<tr>
<td>3</td>
<td>Jamun</td>
<td>Syzygium cumini Linn</td>
<td>Twak (stem cover)</td>
</tr>
<tr>
<td>4</td>
<td>Samanga</td>
<td>Mimosa pudica Linn</td>
<td>Panjang (whole plant)</td>
</tr>
<tr>
<td>5</td>
<td>Moch</td>
<td>Salmalia malabarica Schott &amp; Endt</td>
<td>Niyas(gum extract)</td>
</tr>
<tr>
<td>6</td>
<td>Dhatki</td>
<td>Woodfordia fruticosa Kurz</td>
<td>Flower</td>
</tr>
</tbody>
</table>

**Overall effect of treatment:**
The score of individual symptoms were obtained before and after treatment. The total effect of therapy was assessed accordingly in terms of-
Relief of subjective parameters (amount of discharge, consistency, color, dyspareunia, burning micturition, pain in lower abdomen).

Relief of objective parameters (local tenderness of fornix, foul smell,)

Decrease of Pus cells in wet mount (vaginal discharge)

Maintenance of normal pH level.

Criteria of assessment-

The improvements in the parameters were assessed mainly on the basis of relief in the signs and symptoms of the disease. To assess the effect of therapy all the signs and symptoms were scored depending upon their severity. Scored as following grading’s: 0, 1, 2, 3.

Statistical analysis- Various observations made and results obtained were computed statistically using Wilcoxon matched-pairs signed-ranks test, Paired ‘t’-test, to find out the significance of the values obtained and various conclusions were drawn accordingly. All the results calculated by using Online InStatGraphPad software.

Results:

There was highly significant results in subjective symptoms like Discharge per vagina and pain in lower abdomen. Very significant result were seen in vulvar itching and backache. Significant result was seen in color change of discharge before and after treatment. But not significant results were seen in consistency, foul smell, local tenderness, burning micturition and dyspareunia. The table shows significant improvement in Vaginal pH and vaginal pus cells. Rest of the laboratory results are found not significant. Out of total 15 patients, 8 patients had normal lactobacilli in vaginal swab culture. Among 7 patients, 4 of them had Coagulase Negative Staphylococci, 1 had Bacterial Vaginosis, 1 had Candida and 1 had mixed infection of Candida and Kliesella. The overall pathogen clearance rate was 57.14%. 2 cases of CoNS, 1 Candida and 1 mixed Candida and Kliesella were cleared off after completion of study.

Discussion:

Table no.5 Probable mode of action of drugs in Palashadi Yoga:

<table>
<thead>
<tr>
<th>Drugs</th>
<th>Dosagnata</th>
<th>Karma</th>
<th>Rogagnata</th>
<th>Pharmacological action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Palasha</td>
<td>Vata-Kapha Shamaka</td>
<td>Stambhana, Lekhana, Shothahara, Vedanasthapana, Bhedana, Mutrala, Sandhaniya, Vishaghta, Rasayana, Vranashodhana &amp; Vrana ropana</td>
<td>Pradara, Mutravarodha, Vrana, Yonistrava, Agnimandya, Krmi Shula, Mutrakrichchhra, Daha, Daurbalya</td>
<td>Anti-helminthic anti-estrogenic antifungal, antispasmodic, Astringent, bactericidal,</td>
</tr>
<tr>
<td>Sarja</td>
<td>Pitta-Kapha Shamaka</td>
<td>Vranashodhana, Vranaropana, Sandhaneyya, Jantugnha, Vedanasthapana, Stambhana Kaphanissaraka, Kaphadaurgandhyahara, Mootrasangrahaneeya, Garbhashayashothahara, Yonisravahara, Kushthaghna</td>
<td>Shweta-Pradara, Yoniyapada, Kan- du, Vrana, Shotha, Vedana, Twagvikara, Raktasrava, Pandu, Pooyameha, Agnidag-dhavrana, Krmi</td>
<td>Inhibitory, astringent</td>
</tr>
<tr>
<td>Jamun</td>
<td>Kaphapitta Shamaka, Vata Yardhaka</td>
<td>Stambhana, Mootrasangrahaneeya</td>
<td>Raktasrava, Vrana, Daha, Sannipatajwara, Charmaroga, Agnimandya, Shoola, Phiranga, Upadansha.</td>
<td>Antivir Anti-inflammatory, Anti Anti Anti-viral</td>
</tr>
<tr>
<td>---------------</td>
<td>----------------------------------</td>
<td>-------------------------------</td>
<td>-----------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>Samanga</td>
<td>Kapha-Pitta Shamaka</td>
<td>Grahi, Kaphahara, Pittahara, Sandhaniya, Vranaropana</td>
<td>Sopha Daha, Vrana, Yoniroga</td>
<td>Antim Anti-microbial Antifungal, wound healing, antioxidant</td>
</tr>
<tr>
<td>Moch</td>
<td>Kapha-Pitta Shamaka</td>
<td>Vranaropana, Vishaghna, Grahi, Krimighna, Raktashodhaka, Kaphaghna, Mootrula, Balya, Shothahara</td>
<td></td>
<td>Leucorrhoe</td>
</tr>
<tr>
<td>Dhataki</td>
<td>Kapha-Pitta Shamaka</td>
<td>Jantughna, Vranashodhaka, Vranaropana, Stambhana, Sandhaneeya, Daha, Vrana, Sangrahani, Shwetapradara., Krimi</td>
<td></td>
<td>Antibiotic, antifungal, antiviral</td>
</tr>
</tbody>
</table>

Here majority of the drugs are exhibiting the desired effect of Shambhana, Kandughna Durgandhyanasan, Jantugna/ Krimighna, Sothahara, Soolagna, Rasayana, Mutrala, Lekhaha, Vrana sodhana/ropana properties.

Cures Shweta Pradara/ abnormal vaginal discharge

Jantugna / krimighna effects → Jantugna / krimighna effects
Kandughna effects → Relieves itching
Durgandhnasana effects → Relieves foul smell
Stambhaka effects → Reduces secretion
Lekhaha effects → Scraps unhealthy epithelium
Vrana sodhana/ropana effects → Sterilizes/ heals wound
Mutrala effects → Relieves burning micturition
Rasayana effects → Immunomodulation of vagina
Jantugna / krimighna effects → Reduces associated pain
Sothagna effects → Reduces inflammation

The excessive Srava is controlled with Stambhaka Karma. The Lekhana Karma helps in scraping of unhealthy tissues (inflamed tissues) in the vaginal tract. The Krimighna/ Jantugna effects help to kill the pathogens in the tract. The Kandugna effects helps to relieve from itching. Owing to the Durgandhyanasan property of the drugs it helps to get rid of foul smell from discharges. The Mutrala effects help in relieving the burning sensation during micturition which is often associated with vaginal infections. The Sothagna effects helps to relieve the local inflammation undergoing inside the vaginal tract and sometimes in vulva too. The Vatahara and Kaphahara effects help in management of pain and excessive formation of Srava respectively. The drugs also exhibiting Sodhana and Ropana properties that helps in cleaning or sterilizing the vaginal tract and healing the vaginal epithelium. The Soolagna property helps in relieving the lower abdominal pain or back pain that seems to accompany vaginal infections in cases of pelvic inflammatory diseases. The Rasayan effects of drugs help in overall maintenance of vaginal ecosystem. Thus the combination of drugs in both the groups i.e. Yoga seems to be a complete approach in managing abnormal vaginal discharge.
Pharmacologically also almost all the drugs are exhibiting anti-bacterial, anti-fungal, anti-viral, astringent, anthelmintic, aromatic properties. Many of them, also showing anti-oxidant properties owing to which faster healing and lesser cellular damage can be predicted.

Use of honey as a Yoga binder also has major function to perform. Owing to its Lekhanam, Sandhanam, Shodhanam, Ropanam, Chedanam, Sangrahi actions. It shows that it acts synergistically with the Yoga to bring the desired effect of elimination of abnormal vaginal discharge. Many studies have shown its anti-microbial, antioxidant, anti-inflammatory, anti-cancer and wound healing activity.7

Table no.6. Rasa Panchaka of Palashadi yoga-

<table>
<thead>
<tr>
<th>Rasa</th>
<th>Guna</th>
<th>Virya</th>
<th>Vipaka</th>
</tr>
</thead>
<tbody>
<tr>
<td>Katu = 2/6</td>
<td>Laghu = 5/6</td>
<td>Ushna = 1/6</td>
<td>Katu = 6/6</td>
</tr>
<tr>
<td>Tikta = 2/6</td>
<td>Snigdha = 2/6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kashaya = 6/6</td>
<td>Rukshya = 4/6</td>
<td>Sheeta = 5/6</td>
<td></td>
</tr>
<tr>
<td>Madhura = 2/6</td>
<td>Pichhila = 1/6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1) **At Rasa level:**

Here majority of drugs have Kashaya rasa, which has main function of Sangrahi, Sandhaniya, Vrana pidiani, Ropaniya properties. It dries up excessive Kleda from the body. It has Rukshya, Sheeta, Guru guna. Tikta rasa has Vishanasak, Kriminasak guna, brings Shihirta(integrity) in Twacha and Mamsa. It also dries up excessive Kleda, Pooya, Kapha in body owing to its Lekhana property. Katu rasa has Kandu Vinsan property and Vrana ropana properties. It cleans up Srotas also has Krimighna and Lekhana property. Madhura rasa has Vishanasak, Vayunasak, Pittanasaka, Dahasaman, Sandhaniya properties.

2) **At Vipaka level**:

In Palashadi yoga, 6 out of 6 drugs have Katu Vipaka, which increases Vata. Here Shweta Pradara is a state of excessive Kapha dominance where increment of Vata factor helps in drying of excess secretions.

3) **At Guna level**:

Majority of the drugs have Laghu, Rukshya guna which are opposite to that of Kapha. Few of them have Snigdha and Pichhila guna to bring out a complete harmonization so that Vata is not provoked, though little action of Vata is desirable in this context.

4) **At Virya level**:

Majority drugs show Sheeta virya, which has tendency of Vishyandana, Sthirakarana, Prasadana kledana, Stambhana properties.

Some drugs work on the basis of Rasa some on Guna, some on Virya and some by Vipaka and some by Prabhava.10

As a result of the clinical trial done on total 15 patients of Shweta Pradara following conclusion:

- 2 patients out of 20 had their infection flared up with increased discharge. So they were dropped out from the study. The excessive discharge was managed within 3rd day with repeated use of Gokhsur Siddha Jala. No significant adverse effect was seen. It can be due to many causes like the patient didn’t follow up the instruction well or may have attain some nosocomial infections. Otherwise the treatment was found safe in all the remaining patients. So this treatment is found to be safe, economic, and effective. It can be recommended for the management of Shweta Pradara.

- Considering the time bound duration of study
with small sample size and limited resources for conducting this clinical trial, drawing concrete and precise conclusions would be premature so number of patients in large scale will be more valid in suggesting efficacy of the drug.

CONCLUSION:

Thus Palashadi yoga a very simple combination of herbs to be introduced locally on vaginal canal helps in managing varied range of infections.

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CONFLICT OF INTEREST: Author declares that there is no conflict of interest.

SOURCE OF SUPPORT: None

REFERENCES:

(Endnotes)


3 Vaginitis. NHION DEmand.Available at http://content.nhiondemand.com/psv/HC2.asp?objID=100638&cType=hc


5 Kalia Namrata, Singh Jatendra,Sharma et al , Prevalence of Vulvovaginal Infections and Species Specific Distribution of Vulvovaginal Candidiasis in Married Women of North India, www.ijcmas.com,surfed on 5/5/19

6 Charak chi Chikitsasthan 30/122-123


9 Dr Laxmidhar dubedi, Dr B.K Dubedi,Charak Samhita, , Sutrasthana 26, sloka 42 onwards, pg - 486 -499, Choukambha Krishnadas Academy, Varanasi, Edition :2016

10 Dr Laxmidhar dubedi, Dr B.K Dubedi,Charak Samhita, Choukambha Krishnadas Academy, Varanasi, Edition :2016, Sutrasthana 26, sloka no.71 pg-501

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Table no.2: Shows the pattern of clinical recovery in various Subjective and Objective Parameters of Shweta Pradara in 15 patients treated with “Palashadi Yoga” vaginally by Wilcoxon matched-pairs signed-ranks test

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Symptoms</th>
<th>BT</th>
<th>AT</th>
<th>Diff</th>
<th>% Imp.</th>
<th>SD</th>
<th>SE</th>
<th>P value</th>
<th>Sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Discharge per vagina</td>
<td>1.333</td>
<td>0.1333</td>
<td>1.200</td>
<td>90%</td>
<td>0.4140</td>
<td>0.1069</td>
<td>&lt;0.0001</td>
<td>H.S</td>
</tr>
<tr>
<td></td>
<td>Consistency</td>
<td>1.267</td>
<td>1.200</td>
<td>0.0667</td>
<td>5.26%</td>
<td>0.5936</td>
<td>0.1533</td>
<td>0.4089</td>
<td>N.S</td>
</tr>
<tr>
<td></td>
<td>Color</td>
<td>0.6667</td>
<td>0.2667</td>
<td>0.4000</td>
<td>59.99%</td>
<td>0.5071</td>
<td>0.1309</td>
<td>0.0156</td>
<td>S</td>
</tr>
<tr>
<td>2</td>
<td>Vulvar itching</td>
<td>1.133</td>
<td>0.4667</td>
<td>0.6667</td>
<td>58.84%</td>
<td>0.3519</td>
<td>0.09085</td>
<td>0.0020</td>
<td>VS</td>
</tr>
<tr>
<td>3</td>
<td>Foul smell</td>
<td>1.733</td>
<td>1.467</td>
<td>0.2667</td>
<td>15.38%</td>
<td>1.033</td>
<td>0.2667</td>
<td>0.1085</td>
<td>N.S</td>
</tr>
<tr>
<td>4</td>
<td>Backache</td>
<td>1.067</td>
<td>0.4667</td>
<td>0.6000</td>
<td>56.23%</td>
<td>0.7037</td>
<td>0.1817</td>
<td>0.0020</td>
<td>V.S</td>
</tr>
<tr>
<td>5</td>
<td>Pain in lower abdomen</td>
<td>1.200</td>
<td>0.4667</td>
<td>0.7333</td>
<td>61.10%</td>
<td>0.5606</td>
<td>0.1447</td>
<td>0.0005</td>
<td>H.S</td>
</tr>
<tr>
<td>6</td>
<td>Local tenderness</td>
<td>1.467</td>
<td>1.200</td>
<td>0.2667</td>
<td>18.17%</td>
<td>0.7432</td>
<td>0.1919</td>
<td>0.1085</td>
<td>N.S</td>
</tr>
</tbody>
</table>
7. **General weakness** | 1.133 | 1.667 | -0.5333 | 47.06% | 0.5164 | 0.1333 | 0.0105 | S
8. **Burning micturition** | 0.8000 | 1.067 | -0.2667 | 33.33% | 0.9411 | 0.2430 | 0.1504 | N.S
9. **Dyspareunia** | 1.800 | 1.333 | 0.4667 | 25.92% | 1.082 | 0.2795 | 0.0549 | NS

Highly significant results seen in discharge per vagina (90%) and improvement in pain in lower abdomen (61.10%). Very significant results seen in vulvar itching (58.84%) and relief in backache (56.23%). Significant result seen in color of discharge (59.99%) and general weakness (47.06%). Non-significant results seen in consistency of discharge (5.26%), foul smell (15.38%), improvement in local tenderness (18.17%), improvement in burning micturition (33.33%) and improvement in dyspareunia (25.92%).

**Table no.3:** Showing effect on various laboratory parameters of *Shweta Pradara* in 15 patients treated with *Palashadi Yoga*.

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Group B</th>
<th>BT</th>
<th>AT</th>
<th>Diff.</th>
<th>% Imp.</th>
<th>SD</th>
<th>SE</th>
<th>T</th>
<th>P value</th>
<th>Sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Hb gm%</td>
<td>10.750</td>
<td>10.807</td>
<td>-0.05667</td>
<td>0.52</td>
<td>0.4411</td>
<td>0.1139</td>
<td>0.4975</td>
<td>0.3133</td>
<td>NS</td>
</tr>
<tr>
<td>2.</td>
<td>ESR</td>
<td>12.600</td>
<td>13.200</td>
<td>-0.6000</td>
<td>4.76</td>
<td>1.639</td>
<td>0.4231</td>
<td>1.418</td>
<td>0.0890</td>
<td>NQS</td>
</tr>
<tr>
<td>3.</td>
<td>TLC</td>
<td>6926.7</td>
<td>6866.7</td>
<td>60.000</td>
<td>0.86</td>
<td>213.14</td>
<td>55.032</td>
<td>1.090</td>
<td>0.1470</td>
<td>NS</td>
</tr>
<tr>
<td>4.</td>
<td>Vaginal PH</td>
<td>1.667</td>
<td>1.067</td>
<td>0.6000</td>
<td>36</td>
<td>0.9103</td>
<td>0.2350</td>
<td>2.553</td>
<td>0.0115</td>
<td>S</td>
</tr>
<tr>
<td>5.</td>
<td>Vaginal Pus Cells</td>
<td>1.600</td>
<td>1.133</td>
<td>0.4667</td>
<td>30</td>
<td>0.6325</td>
<td>0.1633</td>
<td>2.432</td>
<td>0.0145</td>
<td>S</td>
</tr>
<tr>
<td>6.</td>
<td>Urine Epi. Cells</td>
<td>0.9333</td>
<td>0.7333</td>
<td>0.2000</td>
<td>21.42</td>
<td>0.6761</td>
<td>0.1746</td>
<td>0.1356</td>
<td>1.146</td>
<td>NS</td>
</tr>
<tr>
<td>7.</td>
<td>Urine WBC</td>
<td>0.9333</td>
<td>0.8000</td>
<td>0.1333</td>
<td>14.28</td>
<td>0.6399</td>
<td>0.1652</td>
<td>0.2166</td>
<td>0.8069</td>
<td>NS</td>
</tr>
</tbody>
</table>

**Table no.4** showing effect of therapy in treating organisms in vaginal discharge

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>BT</th>
<th>AT (vaginal swab culture)</th>
<th>% relief of therapy in treating organism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathogens present</td>
<td>Pathogens absent (cured)</td>
<td>pathogens still persist</td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>7 patients.</td>
<td>4</td>
<td>3</td>
</tr>
</tbody>
</table>