

A Critical Review on Karnini Yonivyapad W.S.R. to Cervical Erosion

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ABSTRACT

Health status of women is essential for healthy society. In today's fast and competitive world, there is a change in the lifestyle of women which leads to their physical and mental stress, women mostly get affected by this environment and are prone to gynaecological problems. Common gynaecological problems in women are white discharge, foul smell discharge, itching at vulvar region, burning micturition etc. Cervical erosion is a condition seen in the age group of 20-40 years with more of Kapha dominance. Kandu, Yoni Srava and other features of Kapha Pittadushti are seen in cervical erosion. It is seen as red circular granular surface surrounding the cervical os bathed in discharges. On the study of etiological factors, sign and symptoms the disease is found to be caused by Kapha – Pittadosha Prakopa affecting Yoni and Garbhasayamukha leading to Samprapti which manifests as cervical erosion. Based on symptomatology, cervical erosion can be correlated with Karnini Yonivyapad.

KEYWORDS: *Ayurveda, Karniniyonivyapad, Cervical erosion, Sthanika Chikitsa, Chikitsa*

INTRODUCTION

The greatest precious gift a woman can receive from God is motherhood. A healthy woman can create a healthy family, which will lead to a healthy country. From now on, every illness that causes a woman's bodily or mental discomfort should be treated in a right away. For her to be able to conceive and give birth to healthy children, her vaginal tract has to be in good health. The concept of healthy yoni has been asserted in various phases of women's life from menarche to menopause and thereafter. The concept of healthy yoni has been mentioned in both Ayurvedic and Modern science. Vaginal secretion serves housekeeping function in the female reproductive system. Fluids secreted by glands into the vagina and cervix carry away dead cells and bacteria. This keeps the vagina clean and helps to prevent infection. Menstrual cycle, mental stress, nutritional health, pregnancy, use of drugs, including birth control pills, and sexual excitement are just a few of the factors that might alter normal discharge^[1] However, cervicogenic disorders are significant contributors to vaginal discharges. Cervical erosion is one among them, as well. Infections of the vagina are

highly typical for women during their reproductive years. Karnini yoni vyapad is one of the yonivyapad mentioned under twenty type of Yoni vyapad in Charaka Samhita Chikitsa sthana. Other classics like Sushruta Samhita and AstangaSamgraha also mentioned clearly about it. It is characterized by elevated lesion at Garbhashayagreeva. The lesion is said to resemble pericarp of lotus flower in appearance. According to sign and symptoms, it can be correlated with the disease Cervical erosion.

Etymology of Karnini

Literally the word 'Karnini' is derived from 'Karnin' which refers to 'having ear' or 'relating to ear'. The disease got its name due to development of 'Karnika' on Garbhashayadwaramukha. Karnika means 'round protuberance', 'pericarp of lotus', 'small brush' and 'tip of an elephant's trunk'. On the basis of etymology of disease i.e. 'Karnini' or its clinical features i.e. development of 'Karnika' on Garbhashayadwaramukh, it appears to be a muscular structure covered with small sprouts or knots, growing over cervix.

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Definition of Karnika

In classics, Karnika described as a singular growth of Mansa and several Mansankur like pericarp of lotus. Indu, the commentator of Ashtang Sangraha has mentioned the place of origin as Garbhashayadwarmukha i.e. cervix. Karnini can be compared with cervical erosion. In cervical erosion the cervix becomes somewhat hypertrophied, congested and covered with small red projection resembling sprouts (described by Indu), this erosion is often associated with nabothian cysts which are small pea sized smooth nodular structures, thus due to presence of these, the cervix assumes the shape of barbed wire or small brush and when associated with nabothian cysts then assumes to the pericarp of lotus.

Nidana (Etiology) of Karnini Yonivyapada

Nidana of Karnini Yonivyapada describe under two headings as - 1. Samanya Nidana 2. Vishista Nidana. 1. Samanya Nidana comprises all the Nidana those are responsible for all Yonivyapada including Karnini Yonivyapada. Acharya Charaka mentioned in Chikitsa sthana that no any Yonivyapada occurs without vitiation of Vata. It means all the factors which causes vitiation of Vata are directly or indirectly are causative factor for Yonivyapada. Further he describes Samanya nidana of Yonivyapada as abnormalahara, vihara, Artava, Bija (sperm and ovum) and Daiva are the factor leading to various Yonivyapada. Acharya Sushruta correlating the above view has added that excessive coitus done by a woman having Suksha body or else a weak woman or at an early age with a man having big sized penis is also responsible for Various Yonivyapada by means of causing vitiation of Vata. Accepting the abnormalities of Artava and Bija as well as Daiva as causative factors, both Acharya Vagbhatta have added the abnormal diet, having coitus in abnormal body postures, excessive coitus and use of any foreign body or substance for sexual pleasure are also responsible for the disease of reproductive tract i.e. Yonivyapada. Vishista Nidana Acharya Charaka and Vagbhatta have mentioned the specific Nidana (etiology) i.e., Akalavahmanaya^[2] or 'Akalevahna' responsible for Karnini yonivyapada. So we can summarize etiological factor for Karnini yonivyapada. 1. Mithyachara 2. Pradushtaartava 3. Bija dosha 4. Daiva 5. Akalevahmanaya or Akalevahana

Samprapti (Pathogenesis)

Acharya Charaka and Sushruta both are mentioned that Yonivyapada does not occur without vitiation of Vata. Acharya Charaka has clearly mentioned role of vitiated Vata and Kapha in Samprapti of Karnini Yonivyapada but Acharya Sushruta explained the

pathogenesis in different manner, he describes that vitiated Kapha along with Rakta produces Karnika in Yoni^[3]. While describing the general pathogenesis of Yonivyapada Acharya Sushruta has emphasized on the importance of the vitiated Vata, which ultimately leads to various Yoniroga, there he says that Nidana sevana leads to vitiation of Vata and this Vata, withholding Pitta and Shleshma, already vitiated due to their specific causes reaches to the yoni and produces different kinds of Yoni roga. Acharya Charaka mentioned Karniniyonivyapada is Vata-kaphajadoshaja while classifying the twenty Yonivyapada. Sushruta describe Karnini in Shleshmalayonivyapada. Thus from the above discussion it is clear that the causative Doshas in Karniniyonivyapada are vitiated Vata and Kapha and Dushya is Rakta dhatu.

Samprapti Ghataka

Dosha - Vata (Apana), Kapha, Dushya - Rakta Dhatu, Adhisthana - Garbhashaya dwarmukha (Cervix), Shrotas - Artav Vaha srotas., Shrotodushti - Sanga, Vyadhiswabhaba - Chirkari, Sadhyaasadyata - Krichasadya

Rupa (Signs and symptoms) of Karnini Yonivyapada

The cardinal features of Karniniyonivyapada described in all the Ayurvedic classics, is 'Karnika' developed at Garbhashayadwaramukha (cervix) obstructing the passage of Raja. This Karnika can be compared with nabothian follicle developed in follicular cervical erosion. Karnika can also be correlated to the erosion on cervix which may be slightly raised above the level of squamous epithelium of vaginal portion of the cervix and is granular in appearance and when touched gives a grating sensation. Further as the disease is the resultant of localized vitiation of Vata and Kapha in the region of yoni, so the symptoms produced due to these Doshas will also be found in this disease. Acharya sushruta has clearly mentioned that the 'Shleshmala' features will also be found associated in 'Karnini Yonivyapada.'^[3] Acharya Dalhana commentator of Sushruta says that due to vitiation of Kapha i.e. Unctuousness and itching are also present. Symptoms due to vitiated Kapha 1. Pandu Varna 2. Pichhila Yoni means excessive mucoid discharge per vagina 3. Kandu Yukta i.e. Pruritis Vulvae 4. Shitala Yoni means wetness of vagina Symptoms due to vitiation of Vata 1. Backache 2. Pain in lower abdomen 3. Aayas are also found in this disease.

Modern Review Cervical erosion

Etymology The word erosion is derived from Latin word "Erosion" ('E' means - off & 'Rode' means - 'worn off' denoting denudation of superficial

epithelium) and from French word – "Eroder" which means 'to go away'.

Definition Clinically- it is defined as the development of red velvety area on the portio vaginalis around the external os. Pathologically, cervical erosion is a condition in which the squamous epithelium of the ectocervix is replaced by columnar epithelium which is continuous with the endocervix. Incidence - The incidence of the disease is increasing day by day as is evident from the data given below:

- Gray has mentioned the figure as 50.8%^[4].
- One and a half decade later, Gray's incidence was raised by 5% (Shah, 1975)^[5].
- Profit and Sharma, H.S. (1993) mentioned the figure of incidence of Cervical erosion as 55%^[6].
- More than 3/4th of adult women suffer from this condition (Dawn, 1997). Now days, it has been estimated that almost 80% ^[7] of women of reproductive age group are suffering from this clinical entity and is contributing to the major part of all gynecological O.P.D. An erosion / ectopy is not a static condition and the line of demarcation between the two types of epithelium moves to and from the external os. The functional zone is referred to as the 'transformation zone' of the squamocolumnar junction. When it is advancing towards the os, erosion is said to be 'healing'. Alternatively healing may also occur by squamous metaplasia of reserve cells in the endocervix.

Types According to the process of formation and healing / re-epithelisation, the Cervical erosion can be classified as –

1. Congenital
2. Acquired • Simple Flat Erosion • Papillary Erosion • Follicular Cystic Erosion

Etiology

The causes which are held responsible for the Cervical erosion are broadly classified as. A. Congenital B. Acquired - Physiological, Pathological. Congenital- This is not a pathological state and is said to be found in at least one-third, some say all female babies at birth possibly because of exposure of maternal oestrogen in utero. The columnar epithelium of the cervical canal may extend to some extent over the vaginal portion of cervix. The condition persists for a few days after birth. On withdrawal of hormone, the erosion retrogresses. The ectopy tend to disappear during childhood only to reappear at or soon after puberty in one third of teenage girls. This again may be an oestrogen effect.

Acquired causes can further be divided into 2 categories – " Physiological ± Pathological

Physiological In the adult as in the fetus and adolescent, Cervical erosion is determined by the amounts of oestrogen and progesterone in the circulation, the probable operative factor being oestrogen. During pregnancy and puerperium, sex hormone causes columnar epithelium overgrowth beyond external os, then retrogressing spontaneously during the subsequent 3 to 6 months. The finding of erosion a few weeks after delivery was formerly thought to be evidence of low grade puerperal infection and to require treatment. It is now generally recognized that it is a physiological reaction.

Pathological - Pathological causes are further divided into –

1. Hormonal
2. Infection
3. Environmental
4. Dietetic habits
5. Socioeconomic factors

➤ Hormonal

➤ Sex hormonal hyperplasia – other than physiological conditions.

➤ Oral contraceptive hyperplasia –The taking of oestrogen – progesterone oral contraceptives often causes an erosion or makes one more obvious (therefore called 'pill ectopy'). Indeed these preparations sometimes result in gross proliferation of columnar epithelium of cervix, causing it move away from the external os.

➤ Infection

An ectopy (erosion) of the cervix was once regarded as always being indicative of chronic cervicitis, and there are still some who surprisingly in view of the evidence hesitate to discard this concept. It was and still is postulated that the initial infection, operating directly or by altering the vaginal pH and bathing the cervix in irritant discharge destroys the squamous epithelium around the external os leaving a denuded or potentially denuded area. At the same time it stimulates over activity of the endocervical epithelium which grows down and out to cover the raw area. This is pure theory and quite out of keeping with the known natural life history of cervical erosion. Moreover, it is ruled out by the fact that whenever an area of portio vaginalis is deliberately denuded, it is the squamous and not the columnar epithelium which grows in to cover it. Indeed, this is the basis of treating an ectopy (erosion) by destroying the columnar epithelium with a cautery, diathermy, cryotherapy or laser. Cervical erosion may render the cervix more susceptible to infection with N. gonorrhoea, C. trachomatis, HPV, because the columnar epithelium has less power of resistance to infection than the normal stratified squamous covering.

Herburt proposed infection theory divided into two parts:

A. Predisposing causes- It includes factors responsible for breaking down the normal barriers of infection via changes in the anatomical structure of the cervix, out flow of alkaline mucous, glycogen, menstrual flow, variations of hormones. Of these most imprints is change in the anatomical structure, which is mainly brought by trauma, excessive coitus, instrumental contraceptives (Cu.T, Loops), local chemicals, unhygienic irritants as douches, creams, jelly etc. Infections are most important cause according to Palak (1926) with incidence of 85%.

B. Precipitating factors- Bacterial infections mainly bacteria are Gonococci, Streptococci and Staphylococci work as precipitating factors. Works have been conducted recently to find the association of various organisms with cervical erosion. Chlamydia trachomatis was significantly associated with ectopy greater than 50% of total cervical area. Chronic cervicitis may present as erosion or one can say that during the process of healing chronic cervicitis leads to recurrent erosions of the cervix.

➤ Environmental

It is sometimes said that changes in the pH of the vagina brought about by vaginitis, douching and chemical contraceptive can cause an ectopy but there is no convincing evidence in support of this.

➤ **Dietetic habits** Recently, it is also being held responsible for cervical metaplasia.

➤ **Socioeconomic Factors** In a clinical study a statistically significant association was found between lower socioeconomic status, early age at marriage and occurrence of cervical erosion ($p < 0.001$)

Clinical Features

Symptoms

The lesion may be asymptomatic. However quite often the following symptoms are present.

1. Vaginal discharge – Profuse mucoid discharge per vagina is quite often the presenting feature due to which the patient lands up in gynecological OPD. The discharge may vary in character. It may be excessively mucoid in character due to the overgrowth or overactive cervical crypts (e.g. in hyperplastic erosion). Sometimes it is mucopurulent, offensive and irritant in the presence of infection (in inflammatory erosion). It may be even blood stained due to premenstrual congestion.
2. Contact bleeding –The epithelial area is fragile and sometimes it may bleeds on coitus. Post coital

bleeding in vascular erosion is seldom a symptom in non pregnant woman, this is the symptom of cervical neoplasia rather than that of cervical erosion. But contact bleeding may be quite common during pregnancy, because in that condition erosion becomes highly vascular and bleeds easily. Contact bleeding is also associated with oral contraceptive pill use.

3. Low backache
4. Pelvic pain
5. Deep dyspareunia
6. Infertility
7. Chronic ill health and metastatic infection – arthritis, muscular pains.
8. There may be frequency of micturition and dysuria perhaps due to spread of infection around the bladder wall.
9. Pruritis vulva does not ordinarily be the symptom but may be present in profuse mucous discharge.
10. Psychological upsets due to persistent vaginal discharge since it is believed by lay public that white discharge is white blood. Consequently she develops palpitation and sense of unwell.

Signs

1. General health may be below normal, there may be slight anaemia.
2. Internal examination (Per speculum) - It is a diagnostic procedure.

It reveals-

- There is a bright red area surrounding and extending beyond the external os in the ectocervix. The outer edge is clearly demarcated. On the other hand hyperaemia resulting from acute cervicitis fades gradually into the normal tissue. The lesion may be smooth or having small papillary folds.
- It is not tender unless complicated by infection.
- When associated with chronic cervicitis, the cervix feels fibrosed, bulky with nabothian follicles around the area of erosion.
- Mucoid discharge may be seen emanating through the os and around the erosion.
- It generally does not bleed on touch. On rubbing with a gauze piece, there may be multiple pinpoint oozing spots (sharp bleeding in isolated spots in carcinoma).
- The feel is granular giving rise to a grating sensation when stroked with the tip of finger. The impression is similar to that provoked by

attempting to smooth velvet against its pile.
Diagnosis

- Per speculum - Speculum examination of the cervix is the diagnostic procedure.
- Pap smear- In every case, Pap stain cytological examination from cervical scrape and vaginal smear should be performed to screen out dysplasia, carcinoma in situ and early carcinoma. In all women with abnormal Pap test showing mild dysplasias, it is important to treat any inflammatory pathology and repeat the Pap test.
- Colposcopy and Biopsy- In lesions with suspicious or cytological positive smear cases colposcopy and then cervical biopsy must be performed for histological diagnosis.

DISCUSSION

Treatment of Karnini YoniVyapad

Karnini Yonivyapad is an illness that is brought on by the vitiation of the vata and kapha dosha, and dushya is rakta, according to the samprapti and clinical symptoms. Therefore, the treatment should centre on a diet, way of living, and medications that pacify the vata, or and kapha doshas as well as shothhara and raktashodhak properties. Therefore, the drugs having properties like, tikshna, ruksha, snigdha, and shodhana can help in removing or clearing out the karnika. In our Ayurvedic classics, the following treatments are mentioned in different texts.

Specific Management

1. Uttarabasti with the oil treated with jivaniya group of drug should be given^[8]
2. A varti with kustha, pippali, tender leaves or arkaagra, and rock salt; pestle with aja mutra should be applied locally. ^[9]
3. All the measures capable of suppressing the kapha should be used^[10].
4. Varti prepared with sodhana drugs should be used. ^[11]

Internal Medicine

1. Churna

- Pushyanugchurna
- Pippalyadichurna

2. Ghrita

- Phalaghrita
- Brihat shatavarighrita

3. Kwath

- Nyagrodhadikwath
- Maharasnadi kwath

4. Asava

- Patrangasava
- Lodhrasava

External Medicine

1. Picchu: With Udumbaradi taila, Dhatakyaditaila.
2. Varti: With Pippalyadi Varti, Kusthadi Varti, Khadiradi Varti, Arkadi Varti.
3. Prakshalan: With Kariradikwath, continuous flow of Kwath of Guduchi, Triphala, Danti.
4. Basti: Palash Niruha Basti, Satavaryadi Anuvasana Basti, Dhatakyadi Anuvasana Basti, Jivaniya Dravya sadhita Uttara Basti.

Pathya

- Use of taila, sidhu, yavanna, pathyarista (abhayarista) are congenial.
- Use of asava, arista, lasuna and diet having abundance of milk and mamsa rasa^[12]
- For woman, lasuna acts like nectar.

Apathya

- Manda is contraindicated in case of yoni rogas^[13]
- A woman during her life span may have different types of discharges per vagina. The vagina serves as a passageway between the outside of the body and the inner reproductive organs. The pH balance of the vagina is acidic, which discourages infections from occurring. This acidic environment is created by naturally-occurring bacteria. A healthy vagina produces secretions to cleanse and regulate itself, similar to how saliva cleanses and regulates the environment of the mouth. These vaginal secretions are normal vaginal discharge. Any interference with the delicate balance of vaginal secretions sets up an environment conducive to infection. Most common causes of leucorrhoea in modern are cervicitis, vaginitis, cervical erosion and bacterial vaginosis etc. Nowadays, cervical erosion is most important cause of leucorrhea. In Ayurvedic classics, all gynecological disorders including cervical erosion come under yonivyapada. Cervical erosion is named as Karnini yonivyapad in Ayurveda. Karniniyonivyapad is mainly due dominance of kapha or vatakapha dosha. Therefore, yonivyapadas which are caused by Kapha or Vatakaphaja doshas are main causative factors of swetapradara. Treatment of Karniniyonivyapad is mainly based on the use of drugs which are having predominance of kashaya rasa and kapha-shamaka property and anti-inflammatory action also. Therefore, the drugs of katu, tiksha&kashaya rasa dominance are mainly used locally as well as internally.

CONCLUSION

Karnini Yonivyapad can be put parallel to Cervical Erosion in modern medicine on the basis of different signs & symptoms. By improving the general health of women and increasing personal hygiene, we can

prevent the incidence of Cervical erosion. Treatment of Karniniyonivyapad is mainly based on the use of drugs which are having predominance of kashaya rasa and kapha-shamak property. Balya chikitsa also play important role to prevent the incidence and to treat the present disease. Anti-inflammatory drugs also have important role in treatment of karniniyonivyapad.

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