



Review Article

YONISHAITHILYA (PERINEAL LAXITY) - A COMPREHENSIVE REVIEW

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ABSTRACT

Yonishaithilya is a common gynecological problem of women of contemporary era which has very important impact on female's sexual function. This must not be taken lightly as they can adversely affect the quality of woman's life. As per *Brihatrayi*, *Yonishaithilya* represents as a symptom of *Mahayoni Yonivyapada*, *Vatala Yonivyapada*, *Phalini Yonivyapada* and *Karnini Yonivyapada*, not as a separate disease. Etiology, sign, symptoms and treatment of *Yonishaithilya* resembles with perineal laxity. Perineal laxity is the condition where there is loosening of supporting structure of female pelvis, thereby allowing the descent of one or more pelvic organ through the lax vaginal introitus. **Data Source:** *Brihatrayees* and *Laghutrayees*, also from all contemporary textbooks, Relevant journals and Websites; **Review method:** Literary review; Objective: This review article summarizes details of *Yonishaithilya*, current scientific researches and elaborates the various therapeutic procedure and drug formulations suggested in Ayurveda for the treatment of *Yonishaithilya*. **Scope and Conclusion:** Ayurveda gives various *Panchakarma* and *Sthanik chikitsa* like local application of *Pichu*, *Snehana Swedana* which are economical, easy and nonsurgical; many single plants; herbal formulations used traditionally which gives an eminent result in *Yonishaithilya*. Untreated *Yonishaithilya* may produces complications like pelvic organ prolapse, urinary incontinence and may convert into 2nd or 3rd-degree prolapse where conservative treatment is not beneficial. In some cases, a patient has been advised for a hysterectomy but the patient is reluctant to undergo surgery. So, it is preferred to try Ayurvedic medicine which may be the step to avoid hysterectomy. So, it is necessary to treat it as early as possible.

INTRODUCTION

Every woman suffers from some gynecological disorder at some point in her life. Complaints related with reproductive system create both physical, psychological stress and anxiety in women. Because of these complaints women experience fear, guilt, discomfort, shame, anxiety etc., which hesitate them from seeking health care facility. Ayurveda, the system of medicine with historical roots in Indian subcontinent, is particularly ideal for healing and empowering the female body, mind, and spirit.

For women, Ayurveda traverse detailed landmark changes associated with the three stages of life childhood, adulthood, and old age, and provides practical advice on exercise, sleep, diet, beauty care, meditation, massage, sex relationships, childcare, menopause, and other issues central to women's lives. Simple to enact and profound in effect, Ayurveda could be the answer for many seek women. It deals with positive health, ways of living healthy life, maintenance of health, prevention of disease and also their care.

Ayurvedic classics described the word *Yoni* as *Tryavarta yoni*, a whole genital tract which includes uterus, cervix, vagina and the word *Vyapada* means disorder. Hence, in Ayurveda gynecological disorders are described under the heading of *Yonivyapada*. All *Acharya's* have mentioned *Yonivyapada* which are 20 in numbers, evolving due to vitiation of *Vata*, *Pitta* and *Kapha*. But *Yonishaithilya* is not described as a disease in Ayurvedic literature.

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The word *Shaithilya* means laxity, state of being lax. We can correlate *Yonishaithilya* with perineal laxity as the clinical features of *Yonishaithilya* and perineal laxity are same. Perineal laxity^[1] is the condition in which the muscles of the perineum become loose. This lessens strength of levator muscles, causes the changes like expansion of vaginal introitus, vaginal and anal opening become too close. So, the sexually active women having perineal laxity complain of very lax vagina and unpleasurable coital activity. This happens mostly in multiparous and postmenopausal women. Vaginal laxity is very prevalent conditions which affect women's sexual wellness. 38% of women have self-reported for vaginal laxity.^[2]

MATERIALS AND METHODS

Materials

Literature related to the title is explored from all Brihatrayees and Laghutrayees also from all contemporary textbooks, relevant journals, and Websites.

Methodology- Review Article

Literary Survey

In Ayurveda classics, *Yonishaithilya* is described as a symptom of following *Yonivyapadas*:

- *Vatala Yonivyapada*
- *Mahayoni Yonivyapada*
- *Phalini Yonivyapada*
- *Prasransini Yonivyapada*

Vatala Yonivyapada

Hetu and samprapti (Etiology and pathology)

Women with *Vata* constituency if indulges in *Vatala Cheshta*- The *Vata* provoking activities like excess coitus, sitting in squatting position, upholding natural urges (*Mala mutra vega vidharana*), forcible micturition or defecation may lead to *Vatala yonivyapada*.^[3]

Acharya Vagbhat has mentioned that excessive coitus, improper posture during coitus, vitiated menstruation, defective seed (ovum) and use of bad material are responsible for *Vatala Yonivyapada*.^[4] Here *Vata* provocative factors are considered and majority are of *Apanavata*. Because the *Shroni chakra* (pelvic girdle) is the main seat of *Apanavata*.

When excessive dry food substances are taken or deficient diet or food which is not really nutritious leads to vitiation of *Vata*. When *Vata* peculiarly *Apanavata* afflicting the *Yoni garbhasaya*, is already weak and having susceptibility, results in *Vatala yonivyapada*.

Rupa (Clinical features)

Rupa (Clinical features): Due to these causes, aggravated *Vata* causes a pricking type of pain, stiffness, feeling of crawling of ant's, hardness and numbness of vagina, exhaustion and other *Vatika* disorders.^[5] Due to *Vata*, her menstrual discharge appears thin, frothy, rough, sound and painful.^[5]

According *Acharya Vagbhata*, provoked *Vata* causes piercing, stretching pain in the vagina, loss of tactile sensation, stiffness, roughness and feeling of crawling of ants, frothy, rough, reddish black, thin, scanty discharges and displacement of *Yoni*.^[6]

Table 1: Clinical features of Vatala Yonivyapada according to different Acharyas

Charaka	<i>Yoni Toda</i> <i>Savedana stambha</i> <i>Pipalikasr iptimiva</i> <i>Karkasata</i> <i>Supti</i> <i>Ayasa</i> <i>Sashabda ruk phena tanu</i> <i>rukshartava</i>	Pricking pain Pain along with stiffness Feeling of creeping of ants Roughness Numbness Lethargy Menstruation with bubbling sound, painful frothy and scanty discharge
Sushruta	<i>Swanam</i>	Menstruation with sound
Vagbhata	<i>Aruna karshnya varna artava srava</i> <i>Bhramsana</i> <i>Vakshana parshwadau shola</i> <i>Gulmam</i>	Menstrual bleeding with pink black coloured. Displacement of uterus Pain in groin, flanks etc. A lump

Yoni bhramsana may be present, this is due to increased *Vata*, laxity of perineum. Perineal support becomes poor and uterine ligaments will lose their tonicity and *Yoni Bhramsana* (uterine prolapse) occurs.

Vatala yonivyapada can be correlated with modern gynecology as follows-

- *Stambha, Karkashata*- Endometriosis, Estrogen deficiency

- *Shoola, Toda*– Vaginal neuralgia
- *Bhramsa*- Prolapse of genital organ (due to lax perineum)
- *Swanam*- Garulitus Vulvae

Chikitsa (Treatment)

Principle of treatment

In *Vatala Yonivyapada*, *Vata* alleviating measures (*Vatavyadhihara karma*) such as Oleation, Fomentation, Enema etc. should be prescribed^[7]. Sprinkling (*Seka*), massaging (*Abhyanga*) and tamponing (*Pichu*) should be done in *Vataja* type of *Yonivyapada*^[8]

Swedana (Fomentation)

She should be subjected to pitcher (*Kumbhisweda*) or tube (*Nadisweda*) hot moist with the meat of aquatic and marshy animals, milk, sesamum seeds, and *Vata* relieving drugs. The women should be first massaged with *Lavantaila* (i.e., oil processed with salt) and then fomented by stone (*Ashmaghana sweda*), bed (*Prastara sweda*) and bolus (*Sankara sweda*) method of fomentation.

Thereafter she should be sprinkled with warm water and fed on *Vata* relieving meat soup.^[9]

Yonilepana (Vaginal Painting)

Warm paste of *Himsra* (*Himsrakalka*) should be apply per vaginum after massage.^[10]

Yonipichu dharana (Vaginal Tamponing)

This is one of the simplest *Sthanik Karma* that gives the continuous drug delivery to the target organ. Another advantage is that there is no need of sophisticated instruments and trained expert rather than patient can do itself after little instruction.

Guduchyadi taila yoni pichu^[11] and *Lavanataila yoni pichu* should be applied per vaginum to relieve pain^[12] and *Udumber tail yonipichu*^[13] should be used in *Yonishaitilya* (perineal laxity).

Basti (Enema)

Enema of recipes containing oil and sour (*Amla rasa*) juice is useful.^[14,15]

Ghritapan

Kasmaryadighrita^[16], *Balaghrita*^[17], *Shatawaryadi ghrit*^[18]

Others

If genital tract displaced, it should be brought back to its normal position after oleation and fomentation it.^[19]

Mahayoni Yonivyapada

Hetu (Etiology): Female who takes abnormal posture during coitus on uncomfortable bed, it causes vitiation of *Vata* in genital tract^[20].

Samprapti (Pathology)

Due to vitiated *Vata*, pressure exerted on organs in the act of intercourse, then the vaginal wall

gets prolapsed along with or without cervix and this prolapsed vaginal wall along with cervix appears like prominent mass (*Mamsonnata*). *Acharya Vagbhata* has clearly stated that *Srasta*– displacement of yoni or descent down from its place is the main phenomenon occurring in *Samprapti*.

Rupa (Clinical Features)

According to *Acharya Charak*, the vitiated *Vata* dilates the opening of uterus and genital tract. Due to this, genital tract becomes painful with unclosed opening and rough, frothy discharges. It also causes the pain in joints and groin. This is known as *Mahayoni*^[21].

Acharya Sushruta has described *Mahayoni Yonivyapada* in which vagina is too dilate due to involvement of all three *Doshas*. Other symptoms of *Vata* like dryness and pricking pain. Heat, burning sensation because of *Pitta*, unctuousness and itching due to *Kapha* will be produced^[22].

Acharya Vagbhata emphasized that provoked *Vata*, creates stiffness and displacement of *Yoni* and *Garbhkosh*, vaginal orifice and os of cervix becomes dilated (relatively). In this condition, pain like *Vatala yonivyapada* is present *Srasta*-displacement is important sign of *Mahayoni*^[23].

According to the concept of *Sushruta* in this *Yonivyapada*, *Yoni* becomes *Ativivritta* - widely opened. This may be the condition like vaginal tear. According to *Acharya Charaka* and *Vagbhata*, *Srasta* - prolapse and prominence of mass- *Mamsonnata*, this is appeared to be as proclitientia.

Chikitsa (Treatment)

Principle of treatment

Whatever remedy is said for *Vatika* disorder, it should be applied in all disorder of female genital tract particularly in *Mahayoni*^[24].

Manual procedure

According to *Acharya Vagbhata*^[25], the displaced vagina should be placed in its correct place after it lubrication and sudation.

The vagina displaced upward should be pulled down by the hand, the constricted one should be dilated, the protruding one should be pushed inside, that which is bent backward should be turned forward and misplaced vagina is by itself a foreign body in women.

Yoni Purana (Vaginal Packing)

Fat of bear, hog and *Ghrita* boiled with *Madhur rasa dravya*; make it in *Kalka* form and then plugged into vagina and bandaged with a flaxed piece^[26].

Basti (enema)

Anuvasana and *Uttar-Basti* therapy must be done with *trivritta sneha* (i.e. *Ghrita + Taila + Vasa*)^[27]

Snehapana

Snehapana should be given with the same *Trivritta Sneha*.^[28]

Yonipichu Dharana (Tamponing)

Pichu with *Mushika tailam*.^[29]

Phalini Yonivyapada**Hetu and Samprapti (Etiology and pathology)**

Young woman has coitus with a man having big size penis.^[30] This is *Sannipataja yonivyapada*.

Rupa (Clinical Feature)

Dryness and pricking pain due to vitiated *Vata* and other features of vitiated *Pitta* and *kapha* i.e., burning sensation and heat, unctuousness and itching also observed in *Phalini yonivyapada*.^[31-33]

Vaginal orifice becomes widely opened and prolapse of vaginal wall occurs. The prolapsed part appears like a fruit or egg. Hence it is called as *Phalini*.

Phalini is a state of uterovaginal prolapse where the laxity of the vaginal wall is marked. Prolapse is a state of displacement of uterus and that leads to infertile condition in female.

It can be correlated with prolapse of vaginal wall, specially cystocele and rectocele.

Chikitsa (Treatment)

According to *Acharya Sushruta*,^[34] *Phalini* is *Tridoshaja* disease that is incurable.

Prasransini Yonivyapada**Hetu and Samprapti (Etiology and pathology)**

According to *Acharya Sushruta*, excessive coital activity^[35] causes *Prasransini yonivyapada*. The disease name itself indicates pathogenesis. The word *yon* refers to uterus and vagina and *Prasransini* means displacement of the vaginal canal from its home place may be caused by some external stimulus or itself without any external stimulus.

Rupa (Clinical feature)

It occurs due to vitiation of *Pitta*. Excessive vaginal discharge or its displacement during straining and labor occurs due to abnormality of passage due to displacement of the vaginal canal from its home position^[36]. Other features of *Pitta* vitiation are burning sensation, suppuration, fever etc.

It can be correlated with Ist and IInd degree uterine prolapse.

Table 2: Clinical features of *Prasransini Yonivyapada* according to *Acharya Sushruta*^[36]

1. <i>Sransana of Yoni</i>	Since the word <i>Yoni</i> is applicable to vaginal canal and uterus thus it can be presumed as prolapse of the vagina and uterus.
2. <i>Syandana</i>	Undue vaginal discharge and descent of the genital organ.
3. <i>Swasthana chyuti</i>	Displacement of the vagina and uterus.
4. <i>Pitta lakshana</i>	Burning sensation and heat may present.
5. <i>Kashta prasava</i>	Due to prolapse patient will have difficult labor. Non-dilatation of the cervix due to excessive congestion caused by compression of presenting part over the upper part of cervix due to its prolapse is one of the important complications during labour.

Chikitsa (Treatment)

Principles of treatment: Local washing, irrigation, anointment, massage, use of *Bandha* (*Veshwara bandha*) and tampons prepared with the drugs either having cooling properties or capable of suppressing pitta should be done.

Application of *Veshwara Bandh*^[37]

Yoni protruding or prolapsed out of the vagina should be anointed with *Ghruta* and sudation with warm milk should be done. The prolapsed organ should be pushed inside the vagina then *Veshwara* must be inserted and kept till the period of getting sensation of the bladder. The *Veshwara* is prepared with *Sunthi*, *Maricha*, *Krishna*, *Dhanayaka*, *Ajaji*, *Dadima* and *Pippalimula*.

Yoni Dhawan/Parisheka (Local douching)

It is a procedure in which the vagina, vaginal passage, and mouth of uterus is washed with medicated decoction or other liquids. *Dhawana* means

cleaning or purification of wound with water or other medicated material, *Kwatha*, *Kshirapak*, *Siddha jala*, *Taila* are have aseptic, wound healing, pain alleviating, and bactericidal action

Oleation

Either only *Ghruta* or *Ghruta* medicated with the drugs capable of suppressing *Pitta* should be used.^[38]

Basti

Basti with the milk treated with either *Madhura*^[39] group of drugs or *Madhuka*.^[40]

Uttaravasti

With *Sukumara taila*, *Bala taila*, *Shirisha taila*.^[41]

Yoni lepana (Application of paste)

Local application of paste of *Panchawalkala*.^[42]

Ghruta for Oral Administration

The juice expressed from *Jeevaniya* group of drugs should be mixed equal quality of *Ghruta*

extracted directly from milk and cooked. Oral use of thus prepared *Ghritha* cures all types of *Pittajayonirogas*^[42]. *Phalaghrita (Laghuphalagrita)* described by Acharya *Sharangdhar* may be used orally.^[43]

DISCUSSION

Yonishaithilya is the condition in which *Vata* provoking activities and food habits causes vitiation of *Vata* which may lead to various complications like *Yoni bhransh* etc. In western medicines, there is no permanent therapy with gels creams, or pessaries. Moreover, when used in long term, they are deleterious to health. Hence, the management of this disease is merely insufficient in other systems of medicine and patients are constantly looking with a hope towards Ayurveda to overcome this challenge.

To prevent laxity of perineal muscles, it is important to follow *Swasthivritta* and *Sadvritta*, maintain good nutritional status, proper lifestyle management, to follow *Prasava paricharya* and *Sutika paricharya* and to avoid improper habits. In India, women are too shy to speak up about their genital problems, there has been a veil of silence around women's pelvic health issues and women have suffered in silence for far too long. So, proper counseling to the women should be done about the disease and its consequences.

Aim of treatment is to treat *Yonishaithilya (Vivritta yoni)* by constricting vaginal orifice or os of cervix with the use of different single drugs or formulation that are given by Ayurveda, to improve tonicity of perineal muscles and to prevent further descent of genital organs. To meet this aim, Ayurveda has offers excellent remedies which are naturally available, rejuvenating and finally improve the women's health and quality of life. Also, Ayurveda tells about Yoga for muscle strengthening is observed that, the regular practice of contraction and relaxation of the perineal muscles, i.e., *Mula bandha* causes increase in blood supply to the pelvic regions; hence, it results in normal stretching and healing of the wear and tear of pelvic floor muscles^[44]. According to the study conducted in BHU in 2017, *Palashadi Taila Yoni Pichu* gives excellent result in *Yonishaithilya*.^[45]

CONCLUSION

Yonishaithilya is a very common gynecological morbidities amongst women who compromise the quality of their lives. *Yonishaithilya* is not the problem for old ladies only. In fact it is estimated that fifty percent of women of childbearing age will experiences some level of *Yonishaithilya*. Untreated *Yonishaithilya* may lead to many complications like difficulty in labour, micturition disturbances and genital organ prolapse. It may result in second or third-degree prolapse where there is no scope for conservative treatment. Also, in some cases, the patient has been

advised for a hysterectomy but the patient is reluctant to undergo surgery. So that it is preferred to try Ayurvedic medicine which may be the step to avoid hysterectomy in such cases. So, it is very essential to treat *Yonishaithilya* as early as possible.

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