

ROLE OF *PATHYA AHARA & VIHARA* IN THE MANAGEMENT OF *SHWETA PRADARA*: CASE STUDYDr. Ranjita Naharia^{*1}, Dr. Anand Prakash Verma²¹In-charge Associate Professor, Samhita Department, Govt. Ashtang Ayurved College, Indore (MP) India.²Assistant Professor, Samhita Department, Govt. Ashtang Ayurved College, Indore (MP) India.***Corresponding Author: Dr. Ranjita Naharia**

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DOI: <https://doi.org/10.5281/zenodo.17735615>**How to cite this Article:** Dr. Ranjita Naharia, Dr. Anand Prakash Verma. (2025). ROLE OF *PATHYA AHARA & VIHARA* IN THE MANAGEMENT OF *SHWETA PRADARA*: CASE STUDY. European Journal of Biomedical and Pharmaceutical Sciences, 12(12), 309–312.

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Article Received on 29/10/2025

Article Revised on 19/11/2025

Article Published on 01/12/2025

ABSTRACT

The best way to avoid disease is having healthy habits; however, in the daily chaos of a woman's life, healthy living is not often practiced today. The vaginal health of women is an important aspect along with overall health. A healthy woman is a symbol of a healthy life. Women stay in different phases and stages of life in which they face physical and psychological modification. Women must have a safe and healthy life along with optimal health condition of genital organs. Infections or altered normal balance may cause inflammation of the vagina. *Shweta pradara* is an irritating symptom that is associated with many diseases of conditions, that is related with the *Apana Vayu*. Considering the severity of disease present article discussed a case study describing role of *Pathya Ahara & Vihara* in the management of *Shweta Pradara*. This study suggested that *Pathya Ahara & Vihara* play vital role in the management of pathological conditions like *Shweta Pradara*. *Pathya Ahara & Vihara* also restrict pathological progression of disease and control severity of symptoms.

KEYWORDS: *Ayurveda, Shweta pradara, Pathya Ahara, Pathya Vihara.***INTRODUCTION**

Women are potentially at risk for several discrete female diseases because of their unique reproductive role. Infection associated with the *Yoni* is a perennial issue for females independent of their age or status. Many women experience very uncomfortable vaginal infections at one time or another. By maintaining a normal function of the vulva and vagina, unnecessary infection, irritation, and pain can be prevented. Vaginal discharge is often another issue that women encounter very commonly.^[1-3]

The term "*Shweta Pradara*" is not mentioned in the texts of *Brihatrayee*, the three primary texts of Ayurveda. However, *Cakrapanidatta* has defined "*Shweta Pradara*" as *Pandura pradara* and *Indu* the commentator of *Ashtanga Sangraha* described it as *Shukla asrigdara*. Other Ayurvedic texts also mentioned *Shweta Pradara*, as presenting symptom of disease, not uniquely recognized as a individual disease. Women typically do not analyze this issue until the patient feels uncomfortable in their daily routine. *Shweta pradara* is

also known as vaginal discharge in the modern text. By looking at clinical contributions of *Shweta pradara* it can be considered as a *Kaphaja* disorder, that existing in the region of *Apana Vayu*, as any type of *Srava* as a result of *Kapha dosha*. Therefore, it may be said that vitiated *Kapha* results in a white discharge through the vagina. In *Shweta pradara*, *Vatadushti* is involved along with *Kapha dushti* and *Rasadushti*. Coitus in excessive amount, frequent abortions, abnormal lifestyle, abnormal diet during menstruation and unhygienic vaginal environments may lead to *Shweta pradara*. The pathological events involved in disease manifestation are depicted in **Figure 1**. The *Samprapti Ghataka* are *Kapha* and *Vata*, *Rasa* and *Mamsa*, *Rasa Vaha* and *Artava Vaha Strotasas*. The *Samprapti Prakara* includes *Atistrava* and *Vimarga Gamana*.

Ayurveda suggested several approaches to manage this pathological condition including disciplinary conduction of *Ahara-Vihara*. Considering this fact present article explore a case study describing role of *Pathya*

Ahara & Vihara in the management of Shweta Pradara.^[4-6]

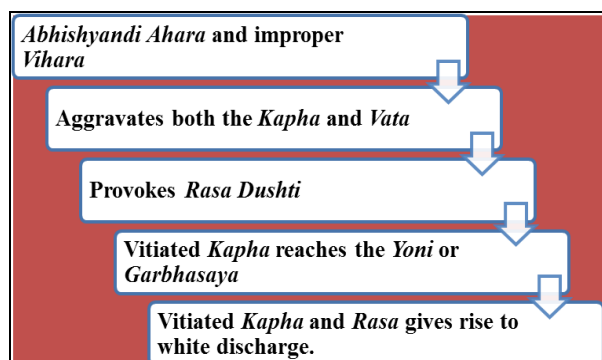


Figure 1: Pathological events associated with Shweta pradara.

CASE STUDY

A 36-year-old woman reported with complaints of Yonigata Shweta Srava, Kati Shula, Yoni Kandu, Yoni Daha and Daurgandhya, these conditions had occurred over the past few months. She had received treatment at different institutions previously, but was not satisfied

with relief of her symptoms afterwards she opted to visit for Ayurvedic management.

History

The patient had no medical history of diabetes, hypertension or any prior surgical history. There was no pertinent family history. Her personal history notes she is a housewife with a sedentary lifestyle and irregular food habits. In regard to her menstrual history, menarche was at age 14 years and menstrual cycle was regular. She had no history of abortion or stillbirth, but menstrual cycle was irregular and vaginal discharge with foul smell from last few months.

Clinical Examination

The patient's general condition was as follows

- ✓ Pulse rate 78/min, blood pressure 130/90 mmHg, respiratory rate 17/min and heart rate 70/min.
- ✓ In Ashta Sthana Pariksha, the observations were made as: Nadi – Vata Kaphaj; Mala – normally formed and regular; Mutra – Prakrita; Jihva – Lipta; Sabda – Prakrita; Sparsha – Mridu; Druk – Prakrita and Akriti – Madhyama.

Assessment criteria

Grade	Shweta Srava	Katishoola	Yoni Kandu	Yoni Daha	Durgandha
0	No vaginal discharge	No pain	No itching	No burning	Absent
1	Mild – Occasionally wetting undergarments / slight discharge, vulva moistness	Mild – Can withstand pain and manage routine work	Mild – Slight rubbing	Mild – Occasional burning	Mild
2	Moderate – Wetting of undergarments	Moderate – Cannot manage routine work and needs rest	Moderate – Instant rubbing causing redness	Moderate – Frequent burning	Moderate
3	Severe – Heavy discharge requiring vulva pads	Severe – Cannot withstand pain and is bedridden	Severe – Continuous rubbing causing redness	Severe – Continuous burning	Severe

TREATMENT PROTOCOL

Pathya and Apathya Ahara-Vihara was utilized as treatment protocol for managing present condition of Shweta pradara:

✓ Pathya-Ahara

She was told to stay hydrated and drink water frequently while flushing out toxins. She was asked to consume fibrous diet of fruits and green leafy vegetables for healthy digestion and bowel movement. Inclusion of garlic, meat soup and rice water was advised for nutrients and immune-boosting properties. Supachya Ahara like Salichya Lahya, Fulke, Mugdala Khichadi and Bhakari were advised to balance digestion and prevent obstruction of Kapha. Overall dietary regimens suggested light, warm and wholesome meals that are non-irritating and support optimal metabolism.

✓ Pathya-Vihara

The lifestyle recommendation included washing the genital area clean, and keeping it dry at all times to limit the chances of infection, irritation and discomfort.

Garments were expected to be washed in boiling water with antiseptic solution (like Dettol) and fully dried in sunlight for additional disinfection. Special attention was recommended for hygiene of the vagina and surrounding parts. She was also advised to wear clean, dry, sun dried undergarments made out of breathable cotton fabric to limit moisture retention and prevent fungi.

✓ Apathya-Ahara

Access to meat, seafood, eggs, sugar, fried food, and all hot; dry; heavy; gas-producing; items were restricted.

✓ Apathya-Vihara

Sexual activity and arousal was to be avoided through the duration of treatment. The more simple, monitored, and Sattvik diet and lifestyle, the easier health can be obtained, up to the treatment's completion.

Follow-Up Intervals

- ✓ First follow up: after 08 days
- ✓ Second follow up: after 15 days

✓ Third follow up: after 22 days

RESULTS AND OBSERVATIONS

The patient was treated until the complete resolution of all symptoms. Since the patient diligently adhered to the *Patya-apatya* guidelines as well as the *Yoni prakshalana* protocol, along with medications, patient had gradual improvement of symptoms. At the end of treatment, all signs and symptoms were resolved. The treatment protocol for the patient was based on identified etio-pathogenesis.

The **Table 1** demonstrates a clear and progressive reduction in clinical complaints as indicated by the

scoring from day 1 to day 22. Initially, all parameters including *Shweta Srava*, *Katishula*, *Yoni Kandu*, *Yoni Daha*, and *Daurgandhya*, were assigned a score of 3 out of a possible score of 3 which designated marked symptoms. By Day 8, all but *Katishula*, showed a notable reduction in scoring indicating the initial positive response to treatment. As of Day 15, all symptoms were documented as 1 out of possible scored 3 demonstrating therapeutic potentially as mild symptoms. Overall, the pattern reflects a clear therapeutic response, with most symptoms significantly reduced and some completely resolved by Day 22, demonstrating the effectiveness of the treatment in alleviating the major clinical features.

Table 1: Improvement in assessment symptoms at different follow-up intervals.

Sr. No.	Assessment Criteria	Different follow-up intervals			
		Day 1	Day 8	Day 15	Day 22
1	<i>Shweta Srava</i>	3	2	1	1
2	<i>Katishula</i>	3	3	2	1
3	<i>Yoni Kandu</i>	3	2	1	0
4	<i>Yoni Daha</i>	3	2	1	1
5	<i>Daurgandhya</i>	3	2	1	0

DISCUSSION

The *Tridoshahara*, *Stambhaka* and *Kashaya Rasa* properties of consumed *Ahara* helps to enhance local immunity and alleviate symptoms. The suggested dietary plan and hygienic life style pattern proved beneficial in managing discharges associated with painful *Vrana*, as it promotes both *Vrana Shodhana* and *Vrana Ropana*. The *Stambhana* properties of *Ahara* restricted vaginal discharges and other conditions caused by microbial infections. The *Madhura Rasa*, *Ushna* and *Ruksha Guna* of food imparted *Grahi*, *Pittahara* and *Pitta-Vata Anulomana* properties. The life style conduct also balances *Dosha* synchronization and restricted microbial pathogenesis by virtue of hygienic pattern thus prevents infection induced vaginal discharge.^[6-8]

CONCLUSION

The word *Shweta pradara*, referenced in Ayurvedic literature, and the word *Leucorrhoea*, referenced in modern Gynaecology, share similar definitions. The current case showed that a carefully planned treatment of *Pathya* and *Apathya Ahara-Vihara*, as well as adequate local and internal therapy, can provide good results in the management of *Shweta Pradara*. The inclusion of light, easy-to-digest, *Tridoshahara*, and *Stambhaka* food, alongside strict hygienic practices of the genitalia, and improvements in lifestyle modifications, assisted in minimizing symptoms and restricted microbial dissemination. The patient's compliance with the recommended diet and lifestyle adjustments, as well as the *Yoni Prakshalana*, led to continual improvements in all clinical parameters noted during the follow-up visits. By Day 22, symptoms of *Shweta Srava*, *Yoni Kandu*, and *Daurgandhya* had entirely resolved, while *Katishula* and *Yoni Daha* were markedly improved. Study suggested

that hygiene practices and adherence to proper diet practices are beneficial to prevent *Shweta Pradara*.

REFERENCES

1. Jadavaji Trikamji Acharya. Charaka Samhita of Acharya Agnivesa with Ayurveda Dipika Commentary by Chakrapanidatta. Chikitsa Sthana, 30/116. 1st Edition. Varanasi; Chaukhamba Surbharati prakashan, 2000; 639.
2. Brahma Sankara Misra. Bhavaprakasha of Sri Bhavamishra with Vidyotini Hindi Commentary. Stri Roga Adhikara. 70/13. 1st Edition. Benares; Chowkhamba Sanskrit Series Office, 1941; 799.
3. Parasurama Sastri Vidyasagar. Sharangadhara Samhita of Acharya Sharangadhara with Commentary -Adh am all as Dipika and Kashiramas Gudhartha Dipika. Prathama Khanda, 7/177-179. 1st Edition. Bombay; Tukaram Javaji, proprietor of Nirnaya-sagar press, 1931; 127.
4. Jadavaji Trikamji Acharya. Charaka Samhita of Acharya Agnivesa with Ayurveda Dipika Commentary by Chakrapanidatta. Chikitsa Sthana, 30/90.1st Edition. Varanasi; Chaukhamba Surbharati prakashan, 2000; 116-117.
5. Lakshmi Shastri.yogratnakar. verse 4, edited with 'vidyotini' Hindi commentary edited by Bhishagratna Brahmashankar Shastri ,5th edition, editor Varanasi: Chaukhambha Sanskrit Sansthan, 401-402.
6. Kaviraj Govind Das Sen Bhaisajya Ratnavali 66/34-39 Edited by Prof. Siddhi Nandan Mishra, chaukhambha Surbharati Prakashan, 2005; 1032.
7. Vaidya Shamrao Dhonodopant Kulkarni, Ayurvediya Rasaushadhi Nirman, First Edition, Continental Prakashan Vijay Nagar Colony, Pune, 1981; 8: 243-244.

8. P. V. Sharma, Dravya Guna Vidnyana, Reprint Edition Ch Rasayana, Chaukhamba Bharti Academy, Varanasi, 2005; 2: 761-763.