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Protocol for a Critical Analysis of Yonivyapad Formulations in Carakasamhita with Special Reference to Shareeraguna and Underlying Siddhanta – sarvada sarvabhavanam samanyam vrddhikaranam | hrasahetur viseshas ca, pravrttir ubhayasya tu |

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Abstract

Introduction:

Yonivyapad is a broad term in Ayurveda referring to gynecological disorders caused by imbalances in the doshas—*Vata*, *Pitta*, and *Kapha*. These disorders affect the reproductive system, causing various symptoms such as menstrual irregularities, infertility, abnormal discharges, and pain. According to the Carakasamhita, there are 20 types of *Yonivyapad*, each resulting from disruptions in *doshic* equilibrium and influenced by *Shareera Guna* (bodily qualities) like *guru-laghu* (heaviness-lightness), *ruksha-snigdha* (dryness-unctuousness), and *sita-ushna* (coldness-hotness). The imbalances in the doshas manifest in specific ways, requiring targeted therapeutic interventions.

Methods:

The etiological factors for *Yonivyapad* are multifactorial, including improper diet, lifestyle, psychological stress, trauma, and infections. These factors disturb the physiological and functional balance of the reproductive system. Ayurveda treats these conditions using the Samanya-Vishesha Siddhanta, a principle that focuses on balancing similar and dissimilar qualities to restore harmony in the body. Treatment strategies are

customized based on *doshic* imbalances and the *Shareera Guna*, involving therapies such as *Abhyanga* (oil massage) and *Yoni Pichu* (vaginal therapies), which use substances to balance the qualities of *Vata*, *Pitta*, and *Kapha*.

Results:

For *Vata*-induced disorders characterized by *ruksha* (dryness) and *sita* (coldness), treatments focus on *snigdha* (unctuousness), *ushna* (warmth), and *brimhana* (nourishing) therapies. In contrast, *Kapha*-related conditions, which involve excess mucus and heaviness, are treated using *ruksha* (dry), *tīkshṇa* (sharp), and *laghu* (light) substances to reduce these symptoms. Specific formulations and therapies are prescribed to counteract the disruptions and restore equilibrium in the body.

Discussion:

Restoring *doshic* balance in *Yonivyapad* requires a holistic approach that integrates both the physical and psychological aspects of health. By understanding the role of *Shareera Guna* in influencing the doshas, Ayurveda offers a comprehensive treatment plan that not only addresses the symptoms but also works to heal the root cause of the disorder. This personalized approach emphasizes the need for individualized care in managing gynecological disorders and showcases the potential of Ayurveda in promoting reproductive health.


KEYWORDS: *Shareera Guna*, *Doshas*, *Samanya* – *Vishesh Siddhanta*.

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Introduction

Aim:

To critically analyse the formulations for *Yonivyapad* mentioned in *Carakasamhita*, in relation to *Sharir Guna* and the underlying Ayurvedic principle of “सर्वदा सर्वभावानां सामान्यं वृद्धिकारणम् । ह्रासहेतुर्विशेषश्च, प्रवृत्तिरुभयस्य तु ॥” in order to understand their relevance and application in modern therapeutic contexts.

Objectives:

Primary Objective:

1. To study the types of *Yonivyapad* and their classification in *Carakasamhita*

- Analyze the 20 types of *Yonivyapad* based on their dosha imbalances and associated gunas.
- To explore the role of Sharir Guna in the pathogenesis of *Yonivyapad***
 - Investigate how specific bodily qualities (e.g., *guru*, *laghu*, *ruksha*, *snigdha*, etc.) contribute to the development of various *Yonivyapad* conditions.
- To examine the application of the Ayurvedic principle of Samanya and Vishesha in the treatment of *Yonivyapad***
 - Assess how Samanya (similarity) and Vishesha (dissimilarity)

principles are utilized in formulating treatments to balance doshas and gunas.

Secondary Objectives:

1. To identify and categorize formulations for *Yonivyapad* based on Sharir Guna and dosha involvement

- Create a comprehensive list of Ayurvedic formulations prescribed for different types of *Yonivyapad*, categorized by Shareera Guna and dosha targeting.

2. To critically analyze the relevance of these formulations in contemporary gynaecological practice

- Evaluate the effectiveness and applicability of classical Ayurvedic treatments for modern conditions such as PCOS, menstrual irregularities, infertility, etc.

3. To provide recommendations for integrating Ayurvedic principles into modern gynaecological care

- Suggest ways to enhance personalized treatment and preventive healthcare using Ayurvedic insights in

women's reproductive health.

Research Question

- How do the formulations for *Yonivyapad* in *Carakasamhita*, based on *Sharir Guna* and the *Samanya-Vishesha* Siddhanta, contribute to treating gynaecological disorders, and what is their relevance in modern clinical practice?

Materials

Inclusion and Exclusion Criteria

Primary Source Text

- Carakasamhita serves as the fundamental text for the present research work, being one of the most authoritative treatises of Ayurvedic medicine.

Inclusion Criteria

1. Classical texts included in the study:
 - Carakasamhita (Primary text)
 - Texts from Brihatrayi (Greater triad):
 - Sushruta Samhita
 - Ashtanga Hridaya
 - Texts from Laghutrayi (Lesser triad)
 - Bhaishajya Ratnavali (Specifically for pharmaceutical procedures and formulation details)
 - Chakradatta
 - Hemadri

2. Published Sanskrit editions with authentic commentaries

3. Research articles and publications directly referencing these classical texts

4. Authenticated translations in English

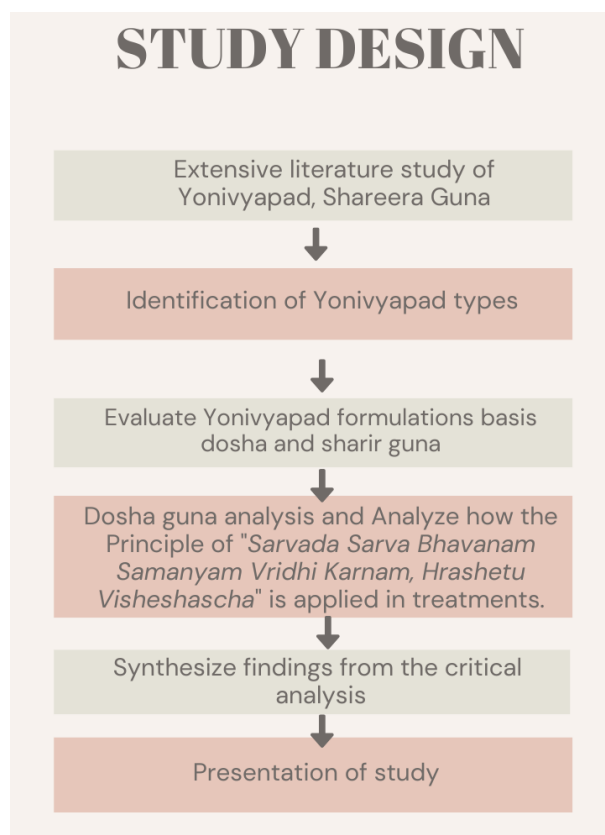
Exclusion Criteria

1. Texts not included within Brihatrayi and Laghutrayi corpus
2. Translations in Hindi and other regional languages
3. Unpublished manuscripts of the aforementioned texts
4. Secondary sources without direct reference to the classical texts
5. Modern interpretations lacking classical textual evidence
6. Non-peer reviewed publications

Rationale for Selection

The selection of these texts is based on their historical significance, authenticity, and direct relevance to the research objectives. Carakasamhita, being the primary source, provides the foundational concepts, while Bhaishajya Ratnavali offers detailed pharmaceutical procedures essential for standardization. Other included texts offer valuable supplementary information and scholarly perspectives that enhance the comprehensive understanding of the subject matter.

Methods



1. Classical Textual Source Selection:

- Used *Carakasamhita* as primary text with Chakrapani commentary.
- Included only classical *Yonivyapad* and related formulations from Caraka.

2. Criteria for Inclusion:

- All formulations prescribed by Caraka specifically for *Yonivyapad*.
- b. Only clear references where Guna and Dosha are explicitly mentioned.

3. Mapping Shareera Guna:

- For each *Yonivyapad*, studied symptoms and identified the *Guna* (quality) imbalance described in Samhita.

- Mapped each ingredient's *Guna* (from Dravyaguna texts & Samhita) to understand therapeutic action.

4. Application of Samanya–Vishesha Siddhanta:

- Analyzed whether the formulation's main action is via *Samanya* (similar Guna to increase/restore)

<p>or <i>Vishesha</i> (opposite Guna to decrease/harmonize) according to the verse:</p> <p>5. Tabulation and Comparative Analysis:</p> <ul style="list-style-type: none"> • Compiled findings into structured tables—linking <i>Yonivyapad</i>, Guna, formulation, and Siddhantic approach. • Highlighted clinical logic: whether therapy increases deficient Gunas (<i>Samanya</i>) or diminishes excess Gunas (<i>Vishesha</i>). <p>6. Reference Cross-Validation:</p> <ul style="list-style-type: none"> • Cross-checked commentary (esp. Chakrapani) for explanations on interplay between Guna, Dravya, and treatment logic. 	<ul style="list-style-type: none"> ◦ Enhanced understanding of the role of Shareera Guna (e.g., guru, ruksha) in the pathogenesis of <i>Yonivyapad</i>, enabling more precise, individualized treatments. <p>3. Validation of Classical Ayurvedic Formulations</p> <ul style="list-style-type: none"> ◦ Critical evaluation and validation of Ayurvedic formulations for relevance and effectiveness in contemporary gynecological practice.
<p>Expected Outcomes</p> <p>Primary Outcomes:</p> <ol style="list-style-type: none"> Integration of Ayurvedic and Modern Approaches in Gynecology <ul style="list-style-type: none"> ◦ Development of holistic treatment strategies for conditions like through Ayurvedic formulations mentioned in Carakasamhita. Dosha-Specific Treatment Based on Shareera Guna 	<p>Secondary Outcomes:</p> <ol style="list-style-type: none"> Theoretical Foundation for Future Clinical Research <ul style="list-style-type: none"> ◦ Laying groundwork for future clinical trials and academic research focused on Ayurvedic treatments in gynecology. Global Acceptance and Integration of Ayurveda <ul style="list-style-type: none"> ◦ Promotion of Ayurveda as a viable complementary system in global healthcare by demonstrating its applicability and efficacy. Broader Application of Samanya–Vishesha Principle

- Insight into how this *Yonivyapad* through dosha imbalances and fundamental Ayurvedic Shareera Guna. It promotes personalized principle can be applied treatment approaches for conditions like **beyond gynecology**, PCOS, infertility, and dysmenorrhea. By encouraging **cross-** validating classical formulations and **disciplinary use** in modern applying principles like Samanya and medicine. Vishesha, the research supports the integration of Ayurveda into contemporary

Significance of the Study

This study bridges classical Ayurvedic concepts with modern future clinical studies. gynecological care by analyzing

Table No. 1: Advantages and Limitations of the Protocol and Its Relevance to Study Objectives

Aspect	Advantages	Limitations
Comprehensive Classical Foundation	Utilizes Carakasamhita and authoritative Ayurvedic texts, ensuring a genuine, time-tested basis for analysis.	Reliance on ancient texts may limit the applicability to populations or conditions not described therein.
Clear Classification Framework	Detailed categorization of <i>Yonivyapad</i> by dosha and guna supports systematic analysis and individualized treatment.	Some descriptions or classifications may lack the specificity expected in modern clinical settings.
Holistic and Individualized Approach	Focus on Shareera Guna and Samanya–Vishesha enables tailored interventions for each patient’s unique profile.	Individualization may create challenges in standardizing protocols for larger, diverse populations.
Inclusion of Authoritative Sources and Integration Potential	By using only authoritative classical texts such as Carakasamhita and other reputable Ayurvedic treatises,	Due to the limited time frame of 15 months for PG thesis completion and restricted access to

	the protocol ensures academic and philosophical integrity while also laying a validated foundation for the potential integration of Ayurvedic principles with contemporary gynecological care. This selective and integrative approach enhances both the reliability of analysis and the potential for practical application alongside modern medicine.	resources (only college/regional/local library and free online portals), the study may not cover every intricate detail or access all classical works and commentaries, potentially narrowing the scope and depth of the literature review and limiting some integrative analysis.
Safety Focus and Preventive Emphasis	Addresses both symptom management and root cause, emphasizing prevention and long-term health.	Some classical interventions (herbs, procedures) require more rigorous toxicological and pharmacological evaluation.

How the Protocol Supports the Study Objectives:

- **Facilitates Systematic Classification and Analysis:** The clear organization of *Yonivyapad* types according to doshic imbalances and Shareera Guna directly supports the objective of studying their classification in Carakasamhita and understanding the root causes through an Ayurvedic lens.
- **Elucidates Pathogenesis via Shareera Guna:** The focus on gunas helps

to unravel how specific bodily qualities contribute to different *Yonivyapad* manifestations, fulfilling the aim of exploring their roles in disease mechanisms.

- **Rationalizes Treatment Principles:** By employing the Samanya–Vishesha Siddhanta for formulation selection and therapy design, the protocol closely aligns with the objective of examining Ayurvedic treatment application in *Yonivyapad*.

- **Supports Relevance Assessment and Integration:** The inclusion of classical formulations and exclusion based on strict criteria ensure critical analysis is grounded in authoritative texts, allowing an authentic evaluation of their relevance for modern gynecological conditions.
- **Promotes Individualized and Preventive Care:** The methodological focus on individualized profiles and preventive strategies through diet, herbs, and lifestyle offers specific pathways for integrating Ayurveda’s emphasis on **Future Implications**

personalized healthcare into current practice.

Summary: Overall, the protocol’s advantages reinforce the depth, authenticity, and clinical relevance of the study, directly supporting its core objectives. Limitations underline the importance of future interdisciplinary research, scientific validation, and consideration of broader evidence to enhance the applicability and acceptance of Ayurveda in modern gynecology.

The methodology and formulations reviewed in this study suggest several promising directions for the evolution of women’s healthcare:

Table No. 2: Potential Future Implications

Aspect	Potential Future Implications
Clinical Integration	Classical Ayurvedic formulations could be rigorously evaluated in clinical trials for contemporary gynecological conditions, enabling their validation and adoption alongside mainstream medicine.
Personalized Medicine	The individualized assessment based on dosha and guna provides a model for precision medicine, which could be adopted for more tailored treatment protocols.
Preventive Approaches	Emphasizing dietary, lifestyle, and herbal interventions could help in proactive management and prevention of gynecological disorders.
Interdisciplinary Research	Collaborations between Ayurvedic practitioners and biomedical scientists could expand the scientific evidence base, supporting the safe and effective integration of Ayurveda.

Global Relevance	As holistic and preventive medicine gains traction worldwide, Ayurvedic insights into <i>Yonivyapad</i> could contribute significantly to global women's health strategies.
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In summary, reviving and revalidating these classical approaches could enhance the management of gynecological disorders globally, paving the way for integrative, patient-centered care and sustainable health outcomes for women.

Timeline

Task	Date	Status	Text
Phase 1: Literary Review of Ayurvedic Text	December 2024 to February 2025	In progress	Conduct a literature review.
Phase 2: Literary review of modern text	March 2025 to May 2025	In progress	Conduct a literature review.
Phase 3: Analysis of literature text reviewed	June 2025 to August 2025	Not started	Data analysis
Phase 4: Writing thesis and submission	September 2025 onwards	Not started	Draft, revise, and finalize thesis.

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