

TREATMENT OF LEUCORRHOEA WITH SYSTEMIC DRUG MYRON

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Leucorrhoea is one of the most common bug bear of any Gynaecological clinic, The management of Leucorrhoea cases need real patience specially when it is non-specific and resistant. The treatment is quite tedious and annoying both from the patients as well as from the gynaecologist point of view. The cure is never certain and recurrences are not uncommon. Sudden changes in the relative incidence of Trichomonas and monilial infections has aroused an increasing interest in this subject all over the world.

A Therapeutic trial has been undertaken with oral Myron in 109 cases of leucorrhoea from Govt. Kasturba Gandhi Hospital and is presented here. Cases with erosion of Cervix, endometritis & Cervicitis, have not been taken for the study.

PHARMACOLOGY AND THERAPEUTIC OF THE DRUG

Hirabol (Bals Myrrh)	100 mgm
Bal Mukul	33.5 mgm
Abhrak Bhasma	16.75 mgm
Kasis Bhasma	33.5 mgm

BALS MYRRH (HIRABOL)

It is a uterine tonic. It is excreted through mucous membrane of genito urinary tract and during excretion tones up, disinfects and regulates the functions of these organs. It is also emmenagogue, carminative, stomachic and urinary antiseptic.

BALS MUKUL (GUGGUL)

This has properties similar to Bals Myrrh and therefore used in anaemia, debility and allied conditions. It is stomachic and carminative and is used for girdle pain, joint aches and rheumatic pains.

ABHRAK (MICA) BHASMA

It is stomachic and urinary antiseptic. It is a tonic and its effect is much intensified by simultaneous use of Kasis Bhasma.

KASIS (IRON) BHASMA

It is a haematinic for anaemia and debility without the side effects of iron therapy.

MATERIAL & METHODS

Hundred and nine women with a complaint of leucorrhoea is selected for study from Govt. Kasturba Gandhi Hospital. Details of all symptoms, sexual habits and prior treatment were noted and a thorough gynaecological examination was carried out in all the cases. The pH of vagina is studied in all cases with the Universal indication (BDH) and a smear taken for T. V. and moniliasis.

DOSE ADOPTED

2 tablets of Myron were given orally thrice a day for 10 days. The patients who did not respond with this dosage were again given 2 tablets thrice daily for five more days. The patients were instructed to avoid coitus and to observe personal cleanliness. The treatment was continued during menstruation as well.

RESULTS

Results of the treatment are divided according to the following criteria.

1. Good Improvement: When there was complete remission of leucorrhoea and associated symptoms.
2. Moderate: When more than 80% improvement
3. Fair: When there was more than 50% response.
4. None: When there was no improvement in vaginal discharge as well as associated symptoms

There were 109 cases of leucorrhoea out of which 77 cases were non specific and 32 specific.

TABLE I

	No of cases
Non Specific	77
Specific	32
Total	109

AGE GROUP

Age Group ranged from 14 years to 43 years. The majority belong to the age group of 21-30 years (63 cases). There were only 21 cases of 20 years and below and 25 cases of 31 years and above only one was 14 years and unmarried. (Table-II)

Nearly 80% of the non specific leucorrhoea cases and 83% of Trichomonas vaginalis showed a change in pH whereas only 33% of candida infection (Table-III) showed a change in pH.

In 95% of non specific leucorrhoea cases, there was a decrease in pH of vagina of 0.5 pH. In specific cases like Trichomonas vaginalis the decrease was from 0.8 to 1, in Candida the decrease was 1.5. (Table IV).

Low backache and pruritis vulva were the most common associated symptoms and therefore there was complete disappearance of these symptoms in 60% of the cases (Table V).

There were 77 cases of non-specific leucorrhoea out of which 79% had good results. Out of the 29 cases of Trichomonas Vaginalis 52% had good result and in Candida group 33%. Only 3 cases of the total showed no response to treatment.

**TABLE II
ACCORDING TO AGE**

Years of Age	No of cases	Results			
		Good	Moderate	Fair	None
Below 15 years	1	-	-	1	-
16-20	20	12	3	4	1
21-25	36	25	8	3	-
26-30	27	17	8	1	1
31-35	13	6	5	2	-
36-40	7	3	2	1	1
41 & above	5	1	4	-	-
Total	109	64	30	12	3
	100%	58.80%	27.40%	11.00%	2.80%

**TABLE III
VAGINAL pH**

Types	Total No of cases	No change in pH	%	Change in pH	%
Non Specific	77	17	22.1	60	77.9
Trichomonas	29	5	17.2	24	82.8
Candidiasis	3	1	33.3	2	66.7

**TABLE IV
DIFFERENCE IN pH BEFORE AND AFTER MYRON THERAPY**

Types	pH4.5 to below 5			pH 5 to below 6			pH 6 to below 7			pH 8 and		
	No of cases	Change in pH		No of cases	Change in pH		No of cases	Change in pH		No of cases	Change in pH	
		Before Myron	After Myron		Before Myron	After Myron		Before Myron	After Myron		Before Myron	After Myron
Non Specific	3	5	4.5	16	6	5.5	36	7	6.5 & 6.0	5	7.5	7
Trichomoniasis	3	5.5	4.5	7	7 & 6.5	5.5	10	7.5 8 & 8.5	6.5	4	8.5 & 9	7 & 8.5
Moniliasis	-	-	-	-	-	-	1	8 & 7.5	6.5	1	8 & 9	7

TABLE V
Symptomatic relief in cases of Non-specific Leucorrhoea

Symptoms	No of cases	Results			
		Good	Moderate	Fair	None
No Symptoms (only leucorrhoea)	19	11	4	3	1
Low Back Ache	54	30	18	6	1
Sterility	10	3	4	3	-
Burning Micturition	9	6	3	-	-
Pruritis Vulva	16	12	3	1	-
Menstrual disorders	11	3	4	3	1
Pain lower abdomen	15	9	6	-	-

OBSERVATION

There was decrease in vaginal pH of 0.5 in non-specific leucorrhoea and 0.8 to 1.5 pH in specific leucorrhoea cases. In majority of the cases there was marked improvement in 10 days of therapy. While only 8 cases needed 15 days treatment. Even in resistant cases results were encouraging. There was a striking relief of associated symptoms which made the patient confident of a cure. No side effects were observed.

CONCLUSION

With oral Myron therapy there is a decrease in Vaginal pH which helps in curing the specific and non specific leucorrhoea and associated symptoms mainly low backache and pruritis vulva.

By decreasing the pH of Vagina it increases the resistance of vaginal epithelium and thus cures leucorrhoea and associated symptoms.

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