

SUTIKA JWARA – PREVENTION & MANAGEMENT**B D Ashwini¹, K Sandhya², Bhat Gayathri N V³**Postgraduate Scholar¹, Professor², HOD³

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ABSTRACT

A lady can be termed *Sutika* only after the complete expulsion of placenta. It is a state of immune suppression where there is alteration in the psychological, physical and nutritional bond. Due to *Garbhavridhi* there will be *Shithila sarvadhātu* and due to *pravahana vedana* during delivery there will be *dhatu*, *agni* and *balakshaya* which leads to vitiation of *vata* causing various *Sutikaroga*'s. Among which *Sutika Jwara* is considered important and prevention of the same can be attained by following proper *Sutika Paricharya*. Points that can be considered under *Sutikaparicharya* are *Sutikagara*, *Ashwasana*, *Abhyantaraupakrama*, *Bahyaupakrama*, local wound care and breast care. Various line of management has been mentioned for *Nija* and *Agantuja Sutika jwara* in our classics. In this context the quote "Prevention is better than cure" holds good.

KEY WORD: *Sutika*, *Sutika Jwara*, *Sutikaparicharya*, *Vata*

INTRODUCTION

Stri plays a vital role in the recreation process and also in bringing up a sensible and virtuous child. *Sutika* is one of the most important phases in a woman's life where there is alteration in the psychological, physical and nutritional bond. Due to *Garbhavridhi* there will be *shithilasarvadhātu* and due to *pravahanavedana* during delivery will lead to *dhatuagnibalakshaya* in turn vitiating *vata dosha*. Then her body is referred to as *Shoonya shareera* and hence more prone to various *Sutikavyadhi*'s among which *Sutikajwara* is of prime importance. Kashyapa has enumerated 74 no of *Sutikaroga*'s and has mentioned *Sutikajwara* under two context *Sutikopakramaniyam* and *Dushprajatiyam adhyaya* quoting its importance. *Kashyapa* in *khilasthana* says that among all the *Sutikavyadhis*, *Sutikajwara* is supposed

to be *kashtathama* and he correlates *Sutika* with three similes i.e.; How difficult it is to remove the stain out of a old cloth, How difficult it is for a old house to sustain the force of wind, rain & tremors. Similarly is the body of *Sutika* who is more prone to *jwara* just lik a dry wood which is more likely to catch fire easily.

INCIDENCE & PREVELANCE

Puerperal pyrexia constitutes 7% of the total maternal mortality rate (MMR) in India. Survey in 2012 shows 178 maternal deaths among 1 lakh live births in India. The state with least MMR is Kerala and the maximum being Assam because of the increased and decreased institutional deliveries in their respective states. It is also surveyed that on-

ly 47% of the ladies in India undergo institutional deliveries whereas the other 53% still undergo unassisted delivery which is the main cause for the prevalence of *Sutikajwara* & increased MMR.

PREVENTIVE MANAGEMENT OF SUTIKA JWARA

Prevention is nothing but *Sutika Paricharya* and it can be subdivided under five headings as follows:-

1. *Sutikagara*
2. *Ashwasana*
3. *Abhyantara & Bahyaupakrama*
4. Local wound care
5. Breast care

1) *SUTIKAGARA*

Different *acharya*'s have mentioned that a *sutikagara* must be facing east north/south due to the abundance availability of sunlight & ventilation which in turn acts as disinfection.

Various *rakshoghna aushadhi*'s are to be made available like *gomaya*, *ghritha*, *madhu*, *saindhava*, *vacha* etc which acts as disinfective.

Drugs like *pippali*, *cavya*, *chitraka*, *nagara*, *hingu*, *sarshapa*, *sura*, *asava* etc and instruments like *musala*, *ulukhala*, *tikshnasuchi*, *pippilika* should be made available in *sutikagara* which are helpful in *atyayika chikitsa* like obstructed labor etc.

Further the *acharya*'s say that the ladies conducting delivery should be of *parinatavayasah*, *prajananakushala*, *kartitanakha* and *prajathastri* who would carry out *sukhaprasava*.

So the whole concept of *sutikagara* mainly concentrates on hygiene & disinfection by isolating the lady, which is psychologically

appropriate in *prasavaavastha*. This can be co related to our nowadays labor and post natal room.

2) *ASHWASANA*

- This is nothing but psychological reassurance by the *prajathastri* mentioned earlier.
- In *Ayurveda* it's told that during *prasava* there would be vitiation of *vata* leading to *satwaheenata*.
- Hence *Ashwasana* is essential.

3) *ABHYANTARA & BAHYA UPAKRAMA*

- Analysing the *abhyantara & bahyaupakrama* mentioned acc to different *acharya*'s it can be seen that: Intially *aharaprayoga* in the form of *yavagu*, *peya* processed with *panchakola* and *ushnagudodaka* is advised. This helps in *agnideepana*, *vatanulomana*, *stanyotpathi* & *purana rakthashuddhi* from *garbhashaya*. Later *jangalamamsa rasa* and *yusha* with *kola kulattha* etc *bramhana* drugs has been told & this helps in *dhatuwardhana* in turn helping in endometrial regeneration.
- Various *bahyaupakrama*'s like *abhyanga*, *udwartana*, *parisechana* & *udara-veshtana* has been aadvised which would do the *vatanulomana* & *purana rakthashuddhi*.
- *Kashyapa* has further mentioned *sthani-ka upakrama* like *yoni abhyanga*, *yoni swedana* & *dhupana* which helps in maintaining hygiene and stops the ascending infections to the reproductive tract.

4) *LOCAL WOUND CARE*

Table No.1 (LOCAL WOUND CARE)

INTRA PARTUM CARE	POST PARTUM CARE
Strict asepsis to be followed in labor.	With strict asepsis, care of the puerperal wound

	with <i>haridra kalka & kumara majja</i> .
Isolate the women with infection.	Environmental sanitation to be maintained.
Minimize the vaginal examinations.	Avoid too many visitors.
Preserve membranes as long as possible.	Frequent changing of sanitary pads.
Repair lacerations of genital tract promptly.	<i>Yoni prakshalana</i> with <i>panchavalkala/triphala kwatha</i> .
Replace blood loss.	<i>Yoni pichudharana</i> with <i>durvadi/nimbadi ghritha</i> .
	<i>Yoni dhoopana</i> with <i>kushta, agaru & guggulu</i> .

5) BREAST CARE

- Counseling plays an important role.
- Usually 2nd or 3rd day the breast milk appears and exclusive breast feeding should be advised. Nursing pads can be used to absorb the excess lactation.
- Position of the breast feeding should be told and taught. Hygiene to be maintained.
- Wherever necessary *stanyashodhaka & stanyajanaka* drugs to be given.
- Worldwide breast care associations of WHO/UNICEF have launched 10 steps to successful breast feeding which should be advocated in every institution.

CURATIVE MANAGEMENT

General line of Management

- *Nidana Parivarjana*
- *Swedana (Ushna jala)*
- *Apatarpana*
- *PachanaAushadha*
- *Kashaya*
- *Abhyanga*
- *Jwaraghna sarpi*
- **VATAJA SUTIKA JWARA CHIKITSA**
- *Dwipanchamooladi taila pana* → Processed with *shatavari, punarnava, bala, rasnaand kalka* of *shatapushpa, vacha, shigru* etc...
- *Yavakoladighritha pana* → Its *vatashleshmahara* and processed with *yava, kola, kulattha, panchamoola, chavya, chitraka, nagara, pippali, dadhi* etc...

- *Vatahara kwatha kalpana*'s like *Mahapanchamooladi, Vidarigandhadi, Rasnadiand Bilwadi* are mentioned.
- *Avagahana* with *ushnakashaya* of *shyona-ka, apamarga, vasa, eranda* and *vamsha*.
- *Sankara sweda* with *kravyadamamsa, masha, tila, dashamoola, gomayachoorana, kanji* etc..
- *Sarvanga dhoopana* with *kushta, guggulu* and *ghritha*.
- *Pathya* → Soup prepared of *panchamoola & jangalamamsa rasa* adding *amla & lavana rasa*.
- In *vepathu yukta jwara* → *Ushna taila abhyanga, suradaru dhoopana, sukhoshna lepa* of *sarvagandha dravya & kanji*.
- **PITTAJA SUTIKA JWARA CHIKITSA**
- In *Atikshna upadrava* → *Pradeha & Abhyanga* with *madhura, tikta* and *kashaya* drugs.
- *Laajapeya* processed with *sariva, chandana, ushira, draksha, padmaka* is given.
- In *Jwaratisara* → *Mudgadi yusha* is given.
- *Asava* prepared of *pata, vatsaka, nimbi, aragvada & madhu* is preferred.
- *Kashya kalpana* → *Sthiradi, Mustadi, Mridwikadi & Bradhrashri kashaya*.
- *Mukha vishodhana leha* of *madhuka, nimba, kesara, kaseru, sharkara & madhu* is given.
- In *shanthavega* → *Mrudu virechana, pradeha, abhyanga & patoladi ghritha* is advised.

- **KAPHAJA SUTIKA JWARA CHIKITSA**
- *Mrudu vama*, *Nasya* & *Mruduvirechana* is advised.
- *Ushna jala pana* with *nagara* & *amradaru*.
- *Balamulaka yusha*, *Kalyanaka ghritha* & *Dashamoolaghritha* is told.
- *Kwatha kalpana's* → *Brihatyadi*, *Dwipanchamooladi* and *Patoladi*.
- *Taila pana* → *Lakshadi taila* & *Kushtadi taila*.
- In *shanthavega* → *samsarjana karma*, *abhyanga* & *ghritha pana* is advised.
- **SANNIPATAJA SUTIKA JWARA CHIKITSA**
- First the *prabaladosha* should be treated. If we cannot elicit it then treat the *kaphadosha* first as it is *anubandha*, *kricchrapakita* & *urdhwakayashritha*.
- *Kwatha kalpana's* → *Nagaradi*, *Patoladi*, *Bharangyadi*, *Patolatriphaladi*.
- *Ghritha kalpana's* → *Kalyanaka*, *Panchagavya* & *Madhukadighritha*.
- *Kushakashadi swedana* & *Lalata upalepa* with *dadhi*, *sarjarasa*, *ashwagandha*, *madhu* is advised.
- *Mukhashodhana* with *amra* & *rasanjana* and *Haritakyadi mukhadhawana* is told.
- In *vimukta jwara* → *Pachaneeya susheeta kwatha* of *pippali* & *mridvika* is advised.
- **STANYAGAMOTTA SUTIKA JWARA CHIKITSA**
- Here the main cause itself is *stanya*. Hence appropriate usage of *Stanyashodhaka* & *Stanyajanaka* drugs to be given.
- Once the normal *Stanyotpatti* is attained *jwara* subsides.
- **GRAHOTTA SUTIKA JWARA CHIKITSA**
- It should be treated according to *Vataja sutika jwara*.
- **AUSHADHA YOGA – SUTIKA JWARA**

- Generally many medications are mentioned in our classics as *Sutika vyadhihara* & they are: -*Soubhagyashunti*, *Nagarakhanda*, *Sutikabharana rasa*, *Sutikaghno rasa*, *Sutikari rasa* etc.
- In *sahasrayoga* → *Sahacharadikashaya*, *Hriberadikashaya* & *Baladusparshadikashaya* are told as *sadyo sutikajwarapaham*.
- The most commonly used medication is *Pratapalankeshwara rasa* which is mainly indicated for *vataja* & *sannipataja sutikajwara*.

FOLKLORE/TRADITIONAL MANAGEMENT

Shunti lepa on *lalata*, *Dashamoolakashaya*, *Jeerakarishtha*, *Tulasiardraka prayoga*, *Lashuna prayoga*, *Gudardraka prayoga*, *Guduchi prayoga* & *Dhanyaka prayoga*. These are all known to be very effective in the management of *Sutikajwara*.

DISCUSSION

Sutikaparicharya itself acts as a combating factor in preventing the *Sutikajwara*.

Nowadays, Puerperal pyrexia is one of the most alarming situations globally. Hence many national programs have been launched in preventing the same like Janani suraksha yojana which mainly targets on reducing the rate of puerperal pyrexia & maternal mortality.

CONCLUSION

So it is not just the prevention & management of *Sutikajwara*. It is very necessary to follow everything right from the beginning like a proper *Garbhopakrama*, *Garbhini paricharya*, *Prasava paricharya* & finally a proper *Sutika paricharya*.

This would yield a healthy mother, a healthy baby & in turn a healthy nation.

So the saying “Prevention is better than cure” holds good in this context.

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