SUTIKA JWARA – PREVENTION & MANAGEMENT

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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 Garbhavriddhi there will be Shithila sarvadhatu 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 SutikaParicharya. 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, SutikaJwara, 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 Garbhavriddhi there will be shithilasarvdhatu 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 Pari-charya 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 disinf ective.

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 chikit-sa like obstructed labor etc.

Further the acharya’s say that the ladies conducting delivery should be of parinatatayasyah, prajananakushala, kartitanakha and prajathastri who would carry out sukha-prasava.

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 satwahanata.

- Hence Ashwasana is essential.

3) ABHYANTARA & BAHYA UPA-KRAMA

- Analysing the abhyantara & bahyaupakrama mentioned acc to different acharya’s it can be seen that: Initially aharaprayoga in the form of yavagu, peya processed with panchakola and ushnagudadaka is advised. This helps in agnideepana, vatanulomana, stanyotpathi & purana rakthashuddhi from garbhashaya. Later jangalamamsa rasa and yusha with kola kulantha etc bramhana drugs has been told & this helps in dhatuvardhana in turn helping in endometrial regeneration.

- Various bahyaupakrama’s like abhyanga, udwarta, parisechana & udara-veshtana has been aadvised which would do the vatanulomana & purana rakhashuddhi.

- 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

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<tr>
<th>INTRA PARTUM CARE</th>
<th>POST PARTUM CARE</th>
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<tr>
<td>Strict asepsis to be followed in labor.</td>
<td>With strict asepsis, care of the puerperal wound</td>
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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. Yoni prakshalana with panchavalkala/triphala kwatha.
Replace blood loss. Yoni pichudharana with durvadi/nimbadi ghritha.

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
- Pachana Aushadha
- Kashaya
- Abhyanga
- Jwaraghna sarpi
- VATAJA SUTIKA JWARA CHIKITSA
  - Dwipanchamooladi taila pana ➔ Processed with shatatvari, punarnava, bala, rasaadand kalka of shatapushpa, vacha, shigru etc…
  - Yavakoladighiritha pana ➔ Its vatashleshmahara and processed with yava, kola, kalattha, panchamoola, chavya, chitraka, nagara, pippali, dadhi etc…

- Pittaja Sutika Jwara Chikitsa
  - In Atikshna upadrava ➔ Pradeha & Abhyanga with madhura, tikta and kashaya drugs.
  - Laajapeya processed with sariva, chanda, ushira, draksha, padmaka is given.
  - In Jwaratisara ➔ Mudgadi yusha is given.
  - Asava prepared of pata, vatsaka, nimbi, aragvadha & madhu is preferred.
  - Kashya kalpana ➔ Shiradi, 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.
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- **KAPHAJA SUTIKA JWARA CHIKITSA**
  - Mrudu vamana, 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, Nagarakhandu, Sutikabharana rasa, Sutikaghno rasa, Sutikari rasa etc.
  - In sahasrayoga → Sahacharadikashaya, Hiriberadikashaya & 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, Jeerakarishta, Tulasiardraka prayoga, Laahuna prayoga, Gudardraka prayoga, Gu-duchi 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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