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SUTIKA PARICAHRYA- AN AYURVEDIC POSTNATAL CARE

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Abstract:

Since giving birth is stressful with an emotional touch of becoming new mother, dramatic changes in *doshas*, *dhatus* which result in declination of her health. The added responsibilities taking care of the new baby along with recuperation of her own health, makes *sutika* for special attention. Ayurveda has given prime importance to *sutika* and explained mode of life style and diet under the heading *sutikaparicharya* which helps in reverting her to get the pre-pregnant state. All *acharyas* have explained *sutikaparicharya* in detail which includes *aahara*, *vihara*, *aushadhi*, *pathya*, *apathya*etc. *Vagbhata* has explained the main purpose of *sutikaparicharya* is *Punarnaveekarana* of *sutika*which means giving a new life to *sutika*. Maternal mortality ratiois around 400 per 1,00,000 live births. This shows the importance of postnatal care to maintain the health of mother and to prevent further complications of this period.

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INTRODUCTION

Ayurveda an ancient science gives importance to *swasthyarakshana* and *vikaraprashamana*. Various procedures like *dinacharya*, *rutucharya*, *sadvrutta* are explained in Ayurveda for maintaining the physical and mental health and preventing the disease. Ayurveda regards women and her ability to reproduce. According to ayurvedic classics, woman life is divided into three phases and at-most importance has given to female health at every phase of her life in respect of *Rajaswalaparicharya*, *garbhiniparicharya* and *sutikaparicharya*.

Becoming a mother is a beautiful and gracious event of a woman's life. There are many changes which have happened to pregnant lady during her antenatal period and even more are happening in post-delivery period. Puerperium is the period of time encompassing the first few weeks following delivery during which all body tissues revert back approximately to pre-pregnant state. As explained by *Acharya kashyapa* about the stage of *prasava* that one foot of the lady is situated in this loka and other in *yamaloka*. The lady after such a difficult processof *prasava* must be advised certain mode of life called *sutikaparicharya*. After delivery due to exertion of labour pain and excretion of *kleda* and blood, *sutikasharira* is thought to be*shoonyasharira*. 74 types of *sutikarogas* can occur during this period if not managed properly. First week soon after delivery is of immense importance for both *sutika* and newly born baby and hence during this period special attention and care is necessary for both. Due to vitiation of *vata* after delivery digestive power, immunity and strength of the lady becomes weak and therefore for increasing body strength and achieving *vata* balance, proper care and management in the *sutika* is needed.

AIMS AND OBJECTIVES

A detailed review of literature for description of sootika, sootikakala, sutikasamanya and vishishtaparicharya, pathyaand apathya.

MATERIALS AND METHODS

Sutikaparibhasha, sutikakala and sutikaparicharya have been explained in bruhatrayee as well as laghutrayee. Vishishitasutikaparicharya according to desha and jaati is explained inkashyapasamhita along with sutikayyadhi and their treatment.

SUTIKA

The word *sutika* is coined to women, who have just given birth to a baby and after *aparapatana*. *Aacharyakashyapa* said that after delivery of the child the women cannot be called as *sutika*till the placenta is not expelled.⁴ The word puerperium is derived from latin- puer means child and parus means bringing forth. Currently it defines the time following delivery during which pregnancy induced maternal anatomical and physiological changes return to the non-pregnant state.⁵ Puerperium is the period following childbirth during which the body tissue, specially the pelvic organs revert back approximately to the pre-pregnant state both anatomically and physiologically.⁶

SUTIKA KALA

There is different opinion regarding the duration of this period.

Table 1: Sutikakala according to various acharyas

Aacharya	Sutikakala
AacharyaCharaka	Not exactly mentioned
AacharyaSushruta ⁷	1 ^{1/2} month i.e. 45 days
AshtangSangraha ⁸	$1^{1/2}$ month i.e. 45 days or upto recurrence of menses
AshtangHridya ⁹	1 ^{1/2} month i.e. 45 days or upto recurrence of menses
AacharyaKashyapa ¹⁰	6 months
AacharyaBhavprakasha ¹¹	$1^{1/2}$ month i.e. 45 days or upto recurrence of menses
Yogaratnakara ¹²	$1^{1/2}$ month i.e. 45 days or upto recurrence of menses
Modern ¹³ -Immediate	Within 24 hours
Early	Upto 7 days
Remote	Upto 6 weeks

SUTIKA PARICHARYA

Ayurveda has suggested a very good protocol during *sutikakala* which includes a detailed description of *aahara*, *vihara* and *aushadhi* to maintain the health of the women. Mainly two types of *paricharya* are told by *acharyas- samanyasutikaparicharya* and *vishishtasutikaparicharya*.

[A] SAMANYA PARICHARYA

According to AacharyaCharaka¹⁴-

- -Pippali, pippalimula, chayya, chitraka, shringverchoornayukta ghrita/taila/vasa/majjapaan.
- -Udarabhyanga with ghrit or taila
- -Udarveshtana
- -Pippatyadiaushadhisadhitaghritayuktayavagu (after digestion of sneha)
- -Everytime before snehapana andyavagupana, parisechan by ushnodaka should be done.
- -This regimen should be followed upto 5-7 days.
- -After 7 days- bruhanachikitsa ormamsabalavardhakupaya

ChakrapaniTeeka-

-Parisechana-Snehpana-Parisechana-Yavagupana

-Due to *kapha* predominance in *anupdesa* this paricharya is not suitable for women of this *desa*. This regimen is suitable for the women of *jangaladesa*.

According to aacharyaSushruta¹⁵-

- -Balatailaabhayanga
- -Parisechana withVataharaaushadhikwath
- -Ushnagudodakapana mixed with choornaof pippali, pippalimoola, hastipippali, chitraka and shringberachoorna should be given for 2-3 days till dushtaraktais properly excreted.
- -From 3rd or 4th day to 6th or 7th day, *sneha* or *ksheerayuktayavagu*medicated with *vidarigandhadiaushadhi*should be given.
- -From 7th or 8th day, cooked *Sali*rice with *jangalamamsa rasa* prepared with *yava*, *kola*, *kulattha* should be given according to her *bala*and *agni*.
- -Parisechanawith more quantity of usnajala is advised and sutika should avoid krodh, vyayama, maithun.

Dalhanateeka-

-Parisechanashould be done by ushnajaladhara. Its purpose is to excrete dushtaraktafrom garbhashaya and to suppress vata.

According to AacharyaKashyapa 16-

- -Sutika should use rakshoghnadravyas
- -Abhayanga and samvahanaover kukshi, parshavaprustain nubjashayana
- -Udara-vestana
- -sutikashould sit over a chair covered with leather-bag filled with usnabalataila
- -Yoni-swedana with krushara prepared with priyangu etc. drugs
- -Sutikasnana is advised with usnajala and advised to take rest
- -Yoni-dhoopana with kusta, guggulu, agaru mixed with ghrit
- -For 3-5 daysmandapana and hitabhojana
- -Snehapana
- -Lavanarahitasnehayavagupana medicated with pippali, nagara etc. drugs for 3 days

- -After 6 or 7 days, lavanayuktasnehaand aushadhayuktayavagu-pana
- -Sneha-lavanaamlayuktakulatthayusha
- -Jangalamamsa rasa
- -Ghritabharjitashakaofkushmanda, mulaka, ervarukaetc.
- -For 1 monthsnehapana, swedanaandusnajalapariseka is advised

[B] VISHISHTA SUTIKA PARICHARYA 17

Kashyapa has explained specific regimen based on type of desha in which sutika is residing.

Anupadesha

Due to predominance of moisture in this area, *snehadravyas* should be avoided. *Manda* prepared with *agni-balavardhakadravyas* is advised. *Swedana, niwatashayana* and *ushnadravyas* are best for *sutika* of this *desha*.

Jangaladesha

Sneha is advised to sutika of this area along with pippalyadikashaya. Snehapana is advised to a strong woman while yavagupana is advised to a weak woman for 3-5 days. Afterwards snigdhaannasamsarjana karma is advised. Pariseka should be done with good quantity of ushnodakaand should avoid krodha, vyayama, maithun etc.

SadharanaDesha

For sutika of this desha use of neither too sneha nor too rukshadravyas is advised.

VideshaJati

Rakta, mamsa-niryuh, kanda, moola, phala etc. are advised to sutika of mlecchajaati.

Sutikaparicharya according to sex of child is also explained by kashyapa. [18] Taila and ghritashould be given for drinking in case of delivery of male and female child respectively. After digestion of sneha, deepniyaaushadhisadhitayavagu should be given for 5-7 days. Then mandaadi should be used in gradual manner.

Importance of sutikaparicharya¹⁹

Woman becomes weak or emaciated due to *garbhavridhi* and *shoonyashareera* due to *dhatushithilta*, *pravahanavedana* and excretion of *kleda* and *rakta*. With the help of *sutikaparicharya* explained by *acharyas*, *punarnaveekarana* of *sutika* happens and she attains her pre-pregnancy stage.

Effect of sutikaparicharya on sutika

Effect on Agnibala

Sutikaparicharya include yavaguand snehapanawith panchkolachoorna which does agnideepana and aam-pachana. Yavaguis pachaka and grahi, laghu in nature, easily digestible and absorbable. Panchkola-choorna has pippali, chavya, chitraka, and shunthi which all are individually agni-deepaka so it also act as agni-deepaka and aam-pachaka. Panchkola removes the blocks created by aam and make sroto-shudhi. Piperine present in Pippali increases coenzyme Q₁₀ and beta-carotene which enhances digestion. Snehpana with yavaguand panchkolachoorna collectively suppress vataand increase peristalsis movements thereby increase agni. Snehpana and yavagu is a balanced diet for sutikawhich improves rasadhatwagni qualitatively and quantitatively which in-turn increases uttarotaradhatwagni.

Effect on different pain in sutika-avastha

Abhyang and pariseka improves circulation, release endorphins which are natural painkillers, cause vasodilatation and relieve muscle spasm. Increased circulation result in more oxygen supply thereby helps in reduction of local as well as generalized pain. Sootika-avastha is a vata predominant stage due to which there is kati shola, udar shola, perineal pain and generalised bodyache. Balatailais advised for abhyangand dashmoola for pariseka has properties like vatahara, shothhara, shoolahara, balya, bruhana. Along with these procedures panchkola-choorna is having ushna, teekshana properties. All these internal and external procedures increase basal metabolic rate by enhancing agni, have rasayanaeffect and nourish the shithila and shoonya-shareera. This may help in increasing the pain threshold of sutika. Vataanuloman takes place by these therapies which leads to pain relief.

Massage exerts soothing effect on body by improving circulation and release endorphins which cause relaxation of muscles. *Abhyanga* followed by *pariseka*has more effect as sudation relieves muscular pain. *Yoni dhoopana* drugs have *vedana-sthapana*, *shothhara*, *vranashodhana* and *ropana* properties so it enhances healing process as well as relieve perineal pain.

Effect on Involution of uterus & abdominal girth

Panchkola-choorna have the ingredients of katu rasa, tikta rasa, usnaveerya, katuvipaka increases the basal metabolic rate and may help in karsana of adipose tissue, along this abdomen is compressed by cloth to avoid the vata vitiation by this abdominal girth is reduced. Panchkola-choorna

does *udar-kukshir* has by doing *garbhashaya-shudhi* due to its *ushna*, *teekshna* properties. Due to *ushnaveerya Pradhan dravyas* present in *panchkola-choorna* along with *garbhashayasankochaka* property it removes *dushta-shonita* from *garbhashaya* so it does proper involution of uterus thereby minimize afterpains or *makkala shola*. There are chances of sub-involution due to infection caused by retained clots in *garbhashaya*. This can be prevented by *yoni dhoopana* with *kushtha*, *guggula* and *agaru* as these drugs possess *jantughna*, *kandughna* properties.

Effect on Stanyapravritti and chest circumference

Abhyanag with balataila acts as rasayana to mamsadhatu. Yavagu with ghrita are fat rich diet and carbohydrate supplements. This balanced diet given to sutika increases rasa-dhatwagni which does rasa dhatu-utpatti along with its updhatu and also uttarothara-dhatuposhana. This results in adequate lactation. Panchkola has one ingredient pippali which is having piperine as its active chemical constituents. Piperine increases coenzyme Q₁₀ and beta-carotene which enhances digestion. Piperine produces thermogenic action which increases absorption of nutrients from gastrointestinal tract. Due to all these actions on dhatu-utpatti and digestive enzymes there is increased stanyautpatti in trial group. Panchkoladoes srotoshudhi by removing aam so all channels will be clear and stanyapravritti will be adequate.

Effect on lochia

Katu rasa of panchkolachoorna causes shonit-sanghat-bhedan, so it helps for normal yonigata-srava. Panchkoladravyas have garbhashaya-shodhak and garbhashayasankochakproperties due to which it removes dushta-shonita from garbhashaya and normalizes lochial discharge.

Effect on episiotomy wound healing

Due to *shodhan* and *ropana* properties of *jatyaditaila* it promotes healing. *Yoni dhoopan* with *kushtha, guggulu* and *agaru* have antibacterial action so chances of infections are not there. Due to effect of all the therapies *abhyanga*, *pariseka* and *dhoopana* blood circulation is increased, muscle relaxation will be there, tenderness will be reduced and also healing is augmented. Essential oil and glycosides present in *kushtha* are strong disinfectants which prevents the bacteria to grow. *Agaru*relieves pain on fumigation while *guggulu* is anti-infective. So all these collectively enhance the healing process.

Effect on physical and mental well being

Sutikaparicharya helps in improvement of *Deha-bala*, *Satva-bala*, physical and mental well-being of *sutika*. Along with these factors *sutika*paricharya helps sutika in returning to her daily activities. *Vata*is in *prokopavastha* in *sutika* which is mainly confined to an individual's health. *Vata-anuloman* is achieved by *vatahara*, *sroto-mardavkara*, *balya* properties of *bala-tailaabhyanga* as well as *dashmoolakwath pariseka*. As soon as vata get normalize there is improvement in condition of *sutika* and she became able to perform her daily activities.

Massage shows its effect by stimulating sensory receptors and this is the cause why after abhyanga and parisekasutika feels better. Massage acts by affecting the levels of different neuro-hormones like serotonin, dopamine, oxytocin, cortisol which all are responsible for mental health of an individual. Serotonin is a hormone which regulates our behavior, emotions. Massage increase the level of serotonin which makes *sutika* less irritating, regulates her sleep cycle. Massage increases dopamine which is responsible for feeling of happiness, enthusiasm and improve disturbed mental condition. Cortisol, a hormone which is stress related, its level decreased during massage so the stress of *sutika* is relieved.

Massage helps in regulating hormone levels by acting on sympathetic as well as parasympathetic nervous system. Normalcy of these hormones makes *sutika*to feel better, stress free, pain free as well as helps in regaining her pre pregnant state both physically or mentally.

CONCLUSION

Different procedures including *ahara* and *achara* for the purpose of *punarnaveekarana* of the *stree* itself is *suthikaparicharya*. It is re-tuning or process of rejuvenation done for the purpose of *swasthyarakshana*. It is the *paricharya* followed in order to protect herself and her infant too.

The very definition of *suthika* finds relevance with the definition of puerperium that after placental expulsion only the lady can be called as puerpura. Regarding the duration of *suthika* also there is similarity that both sciences accepted six weeks of stipulated regimen to be followed. Even the list of complications or diseases by not following proper *paricharya* is also almost the same.

Sutikaparicharya has fruitful results over agni, balavridhi and lochial discharges. Helps in proper involution of the uterus, reduces abdominal girth, and udar-shoola, kati-shoola, proper healing of episiotomy wound as well as complete physical and mental wellbeing was achieved by this paricharya. Main purpose of sutikaparicharya is to enhance the natural recovery process, prevention from various sutikarogas and punarnaveekaran of sutika.

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