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Case Study

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MANAGEMENT OF PUERPERAL DEPRESSION ACCORDING TO **AYURVEDA:** A CASE STUDY

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ABSTRACT

A women who has just given birth to a child followed by expulsion of the placenta is called *Sutika*. [1] Puerperal depression is considered as a psychiatric disorder having prevalence rate is 10% to 15% among puerperal mothers, [2] applying an effective approach is essential. In recent times there has been an increase in obstetrics and neonatal complications. Because of changing times, every pregnancy is precious for the mother and thus she becomes very anxious about it pregnancy which may lead to development of symptoms like depression, mood swings, sleep disturbance, irritation, etc. Thus for treatment of postnatal depression we can use the basic principles, traditional drugs

and various Paricharyas (regimens) mentioned in Ayurveda. Among these regimens Sutika Paricharya is one of them we can follow to treat and counsel the mother and help her maintain a good mental health and tackle various Manovaha Vikaras.

KEYWORDS: Sutika, Sutika Manasroga, Puerperium, Postnatal blues.

INTRODUCTION

Puerperium is period of 6 weeks following child birth. It's the time in which female body especially pelvic organs revert back to pre-pregnant state both Anatomically and physiologically. [3] Different Acharaya have been mentioned different period of puerperium, Acharya Sushruta has mentioned one and half month^[4] Ashtanga Hridaya has mentioned it up to next menstrual cycle^[5] Kashaypa said it be of 6 months. ^[6] According to modern science it is said to be for 6 weeks.^[7] Sutika and Manas Vikaras has been mentioned by Kashayapa in Khilasthana. [8] Approximately 10% of women suffers from post delivery depression due to Lack of affection, Multiparous women with female child, family pressure, hormonal changes in the body, disfigurement due to striae, Lactational failure, Anomalous baby, IUGR, Bad obstetric history, Preterm labour, Obstructed labour, Prolonged labour, LBW, trauma to baby after instrumental delivery, specially to primigravida. As a mother she has to manage herself with neonate care so it becomes very stressful for her to manage all the condition by her own so there is increase in rate of Purpureal depression. It is need of time to be more conscious about postnatal care to avoid Depression and Anxiety. Ayurveda classics have mentioned different Regimen which has to be followed by Puerperal women to avoid getting affected by Different Manas Vikaras.

Depression is one of the most debilitating disorders for childbearing women and is considered an international public health problem with potential life course implications for maternal and infant -child health. [9] It is severe and lasts more than 10 days, symptoms of postpartum depression included feeling sad, having trouble sleeping and feeling guilty.

AIMS AND OBJECTIVES

- 1. To establish the effect of ayurvedic drugs in puerperal depression.
- 2. Improvement in quality of life of *Sutika*

MATERIALS AND METHODS

Case Report

A Case Study of Puerperal Depression

- Patient's Name XYZ
- Age- 22 year
- **Sex** Female
- **Chief Complaints**
- ✓ Insomnia,
- ✓ Tearfulness.

5 to 6 days

- ✓ Restlessness,
- ✓ Negative feeling towards baby.

History of Present illness

A female patient of age 22 years, full term primigravida delivered normally on 27/04/2019 at 9.30 pm, female baby was born, baby cried immediately after birth. Patient shifted to Female ward of Government Ayurvedic hospital Osmanabad for further management.

• H/O Past illness

No H/O any Mental or Physical illness seen

- **Menarche** at age of 12 years
- Marital status 2 years before
- Menstrual History -
- Regular cycle with an interval of 28 days
- > 3-4 days painless bleeding,
- ➤ Average 2 Pads/ Day

• Obstetric History

- > Primigravida
- ➤ G1 Female Child 2nd Day FTND

• On examination

- ➤ GC -Fair
- ➤ Temp. Afebrile (97.3 °F)
- ➤ P- 86/min
- ➤ BP- 100/70 mm of Hg

• Systemic Examination

- ➤ RS AEBE Clear
- CVS S1S2 Normal
- > CNS Conscious, Well Oriented
- **Per Abdomen** Uterus- Well Retracted, 3 fingers below umbilicus.
- Per vaginal examination
- > No active vaginal bleeding.
- > Episiotomy wound is clean and dry.
- **Lactation** Adequate
- Management
- A. Counselling
- Reassurance
- Psychological support by the family members

B. Bhaya Chikitsa

- 1. Sarvanga Snehana Bala Tailam
- 2. Sarvanga Swedana Nadi Sweda
- 3. Yoniparisheka with Ushnodaka
- 4. Dhupana Chikitsa- Jatamansi, Bramhi, Guggul, Agaru, Nimbapatrachurna, Sarjaras.

C. Abhyantar Chikitsa

- 1. Shatavari Churna + Ashwagandha Churna each 3gms with Godugdha BD after meal
- 2. Prataplankeshwar Rasa 250 mg with Aardrak Swaras BD
- 3. Dashamularishta 10 ml with water BD after meal
- 4. Sarswatarishta 10ml with water BD after meal

OBSERVATION

After 7 days of treatment patient got moderate relief from some of the symptoms, started getting good sleep, reduction in restlessness and increased affection towards baby. This treatment was continued for one and half month and patient got complete relief from above symptoms and till today no any psychological disturbance has been observed.

DISCUSSION

भा. प्र. चि. ७०\१५१ [10]

Treatment capable of supressing *Vata* or else on the basis of aggravation of *doshas* and strength (of the women) should be done. After delivery or in *Sutika Kaal*, the mother has problems like *Agnimandya* due to *Dhatukshaya* and aggravation of *Vata Dosha* due to *Pravahan* during labour. Sometimes she does not have proper lactation and may suffer from vaginal or perineal injuries during delivery of fetus. Due to all these reason, she might show symptoms like depression, anxiety, etc. Ayurvedic drugs and different *Kalpas* are give best result and minimal effects. So in this case study I used some Ayurvedic drugs and various procedure which are mentioned in *Sutika Paricharya* to relieve the patient from physical and psychological symptoms.

Sarvanga Snehana

Sarvanga Snehana given to Sutika with Bala Tailm which is Vatshamaka, Rasayana to Mamsdhatu and Shramhara. It gives tone up of the pelvic floor, abdominal muscle, back

muscle, tissues and relives the muscle spasm. It helps proper drainage of lochia it prevents thrombosis and improves the venous blood flow by dilating the superficial blood vessels.

Sarvanga Swedan

It is Vatakaphahar, Vedanashamaka and also helps in reduction of exertion produced during Pravahana.

Yoniparisheka

Parisheka is done with hot water in stream. It act like Srotonirmalata, Vedanahar, Vatakaphaher. It removes abnormal accumulated blood clots in uterine cavity after the delivery of foetus and subsides Vata Dosha.

Yonidhupana

Vaginal defence is lowered due to hypoestrogenic state and patient is prone for infection. Dhupana will maintain the hygiene of perineum and helps to clean episiotomy wound and initiates healing process. The drug used like Kushta, Agaru Nimbapatra Churna, have the properties like Krimighna, Kandughna, Shothahara, Vranashodhan and Ropan. [11]

Shatavari (Asparagus Racemosus)

It is Guru, Snigdha Guna, Madhura Ras, Sheeta Veerya, Madhura Vipaka. It has phytoestrogenic activity so balances hormones. It has antidepressant, analgesic, antioxidant action. It is *Medhya*, hence protects against stress and help in enhancing memory. [12] Shatavari roots increases lactation via an estrogenic effects on the mammary glands and increases prolactin production. [13]

Ashwagandha (Withania Somnifera)

It constituents of Withania Somnifera include steroidal lactones, withanolides, withaferins. It protects brain cells from inflammatory proteins and free radicals. It acts on endocrine system and encourage the hormones to settle down. It helps to improve concentration and peaceful sleep. The severity of symptoms like mood swings, depression, anxiety get reduce and overall quality of life is improved. Ashwagandha may help the body resist environmental stressors. It helps reduce cortisol level, cortisol is stress hormone and having too much cortisol can lead to anxiety.[14]

Sarswatarishta

The drug Sarswatarishta has Madhura, Tikta, Katu Rasa, Sheeta Veerya, Madhur Vipak and

Laghu Guna properties. It is nootropic adaptogenic, immunomodulator antioxidant. It has contents like Bramhi, Vidari, Haritaki, etc. and it has properties like Medhya, Manodoshaher, Rasayana, Balya which helps in relieving psychological disorder in puerperium. [15]

Dashamularishta

It is reported to exhibit anti-inflammatory properties and antibacterial activity. Main constitutes of *Dashmularishta* are *Bilva* (Aegle marmelos), *Shonyaka* (Oroxylum indicus), Shalparni (Desmodioum gangeticum) and Guduchi (Tinispora Cordofolia) etc. It reduce abdominal girth. It is mainly Vata Dosha Shamaka. [16]

Prataplankeshwar Rasa

Its main content is Vanyopala Bhasma, it helps in uterine purification. Parada (Mercury) is Rasayana, Yogavahi, Jantughna. Shankha Bhasma is Diapana and Pachana. Abhraka (Mica), it reduce Mana udreka and it helps in Raktagata Dosha Prashamana. Chitraka (Plumbago Zeylanica) and Loha (Iron) helps in uterine purification. Bhringaraja (Eclipta alba) acts as Vataghna. Vatsanabha (Aconitum ferox) acts as antipyretic so mainly used in Sutika Jwara. Prataplankeshwar Ras used in suppression and expotential outburst of *Vaatvahinis.* It also reduce headache and *Mana Vibhrama*.

RESULT

After treatment.

- Tearfulness and anxiety reduced gradually.
- She started getting good sleep.
- The bond between mother and baby improved.

CONCLUSION

The above patient was suffering from postpartum depression, she was given ayurvedic treatment after which the symptoms like anxiety, irritation, depression, lack of concentration on foetus reduces after 5 to 6 days. Treatment included Medhya, Rasayana Shatavari, Ashwagandha, Sarswatarishta also helped in reducing above symptoms. After this Abhyanga, Yonidhupan, and Sutika Paricharya was continued for one and half month and the patient is asymptomatic till now. Thus Ayurvedic treatment helped the patient to get relief from physical as well as psychological symptoms.

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