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**Review Article** 

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# A REVIEW ON AYURVEDIC MANAGEMENT OF MOOLADHARA CHEDANA VRANA (EPISIOTOMY WOUND)

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#### **ABSTRACT**

Pregnancy is a creative and productive period in a women's life and the process of delivery completely depends on the mother and the fetus, where the mother plays a major role in giving birth to the fetus. The birth canal plays an important role in delivering a baby safely. The structure of the birth canal varies from person to person, some may have thick vaginal tissue that may not dilate even after pressure has been applied to the fetal axis. Therefore, during the second stage of labor, an incision is made in the perineum to allow adequate passage so that the baby can be delivered easily. Wound care is especially important. If neglected, it can lead to prenatal wound infections and delay healing that can interfere with mother-infant interactions, breastfeeding, and prolonged hospital stays Pregnant women can be

advised for Yoni Pichu, Yoni Abhyanga, and Basti after completion of 37weeks which help in Sukha Prasava by increasing perineal relaxation and muscular suppleness during labour. . Saptopakrama can be adopted as Lepa application with Ropana Dravyas, incense, *Prakshalana* to clean wounds, reduce pain, reduce inflammation and promote wound healing.

**KEYWORDS:** *Mooladhara Chedana Vrana*, Episiotomy wound, Perineum, *Dhupana*, *Lepa*.

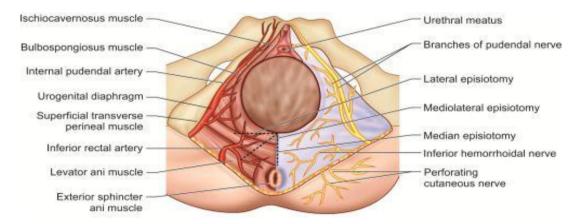
#### INTRODUCTION

Episiotomy is a surgical enlargement of the vaginal orifice by an incision to the perineum during the last part of the second stage of labour or delivery. [1][2] Episiotomy is the most common procedure performed in modern day obstetrics. In today's statistics it was estimated that as many as 65 to 80% of mothers who deliver vaginally will have an episiotomy. [3] This procedure is widely spreaded in India, America and Poland. Any delay in the healing of the resultant wound can increase the risk of wound infection, alter muscular structure, and eventually cause the loss of muscle tone.<sup>[4]</sup> Therefore, wound care is of particular importance to postnatal maternal outcomes and can facilitate women's return to normal life.

Episiotomy wound care should be start immediately after suturing the wound in order to reduce pain and inflammation. The surgical wound of episiotomy can be considered as *Sadyo Vrana*. It is also said to treat *Vrana* caused *by Sadyo Shastra Prahaara*. Different treatment modalities have been told in Ayurveda for *Vrana Chikitsa*. Drugs having *Shodhana* and *Ropana* qualities are essential for healing.

## **Classification of episiotomy**

The standard obstetric and midwifery texts usually describe only two main types of episiotomy (median and Medio-lateral), although different incisions have been described in the literature.<sup>[5]</sup>



Type of episiotomy	Origin of the initial incision	Direction of the cut
Median (midline)	Within 3 mm of the midline in the posterior fourchette	Between 0° and 25° of the sagittal plane
Modified median	Within 3 mm of the midline in the posterior fourchette	Between 0° and 25° of the sagittal plane, with two transverse cuts on each side added
'J' shaped	Within 3 mm of the midline in the posterior fourchette	At first midline, then 'J' is directed towards the ischial tuberosity
Medio-lateral	Within 3 mm of the midline in the posterior fourchette	Directed laterally at an angle of at least 60° from the midline towards the ischial tuberosity. Most commonly used incision
Lateral	More than 10 mm from the midline in the posterior fourchette	Laterally towards the ischial tuberosity

### **Indication of episiotomy**

Episiotomy is recommended in selective cases rather than as a routine. <sup>[6]</sup>

- Inelastic (rigid) perineum Causing arrest or delay in descent of the presenting part as in elderly primigravida
- Anticipating perineal tear: Big Baby, Face to pubis delivery, Breech delivery, Shoulder dystocia
- Operative delivery: Forceps delivery, Ventouse delivery.
- Previous perineal surgery: Pelvic floor repair, perineal constructive surgery

**Timing of The Episiotomy-** Bulging thinned perineum during contraction just prior to crowning (when 3-4cm of head is visible) is the ideal time. During forceps delivery, it is made after the application of blades.

#### Plan of treatment

- Preventive care during pregnancy
- Precautions & preventive care during labour
- Wound care during purperium period

#### **During pregnancy preventive care**

Pregnant women can be advised for *Yoni Pichu, Yoni Abhyanga*, and *Basti* after completion of 37weeks which help in *Sukha Prasava* by increasing perineal relaxation and muscular suppleness during labour.<sup>[7]</sup> There's good evidence to suggest that doing perineal massage once a week or twice a week can reduce risk of needing an episiotomy.

Role of Yoga Asanas: - Asanas helps in increasing pelvic laxity and facilitating easy delivery.

- *Bhadrasana* It not only strengthens inner thighs and makes the hips stronger, but also improves blood circulation in the pelvic area.
- *Malasana* It help in strengthening of the pelvic bones as well as the subsequent rising helps in making the body more flexible and comfortable.
- Marjariasana Improves blood circulation, ensuring that the reproductive organs are well nourished
- *Utkata Konasana*: This asana helps in strengthening your muscles in the legs and create space in the pelvis region.



### **During labor preventive care**

Some research suggests that taking these steps might prevent the need of episiotomy. [8]

- **Prepare to push.** During the second stage of labor, the pushing stage, aim for more controlled and less expulsive pushing. Pushing the baby out gently and slowly can allow tissue time to stretch and give way for the baby. *Acharya's* has mention (early second stage) the bearing down efforts should be mild, but should be forceful at the end. <sup>[9]</sup>
- **Keep perineum warm.** Applying warm compresses to the perineum during labor with the help of a birth attendant which, in turn, helps in making the tissue around the area become softer, manageable and more flexible.
- Perineal massage. During the second stage of labor, health care provider might place
  two fingers of a lubricated gloved hand just inside your vagina and move them from side
  to side. Acharya Vagbhata advice for gentle massage with Luke warm oil over flanks,
  back, sacrum and thigh bring the fetus down.<sup>[10]</sup>
- **Deliver in an upright, non-flat position-** Maintaining an upright position or alternatively, lying on the side at the time of giving birth. According *Acharya Susrutha* during labour women should sleep in supine position with flexed thigh on bed having pillow. [10]

#### Wound care during the purperium period

Perineal muscles play an important role in normal activities, and cutting this area causes a lot of pain and discomfort for the mother. This issue disrupts physical activities and causes mental problems for the mother. For episiotomy wound care, proper approximation should be made at the time of suturing, and the incision should be kept clean and dry to avoid infection, promoting healthy wound healing. In this stage, *Saptopakrama* can be adopted along with *Ropana Dravyas* in the form of *Lepa* application, *Dhupana*, and *Prakshalana* for cleaning wounds, reducing pain, inflammation, and promoting wound healing as mentioned in Ayurveda *Ropanavastha* and *Rudavastha* stages are seen.

<b>Procedure Name</b>	Drugs	Action
Vrana Dhupana	Dhupana with Sarshapa, Kushta, Vacha, Guggulu. Agaru, Sarjarasa, Hingu.	It dilates blood vessels and helps in oxidation of blood. It leads to adequate tissue perfusion and oxygenation. Thus, reduces inflammation, itching, eliminates infection, and promote healing. The drugs used like <i>Kushta</i> , <i>Agaru</i> , <i>Guggulu</i> have the properties like <i>Jantugna</i> , <i>Kandugna</i> , <i>Shothahara</i> , <i>Vranashodhana</i> , and <i>Ropana</i> .
Vrana Prakshalana	Panchavalkala Kwatha, Dashamoola Kwatha Triphala Kwatha etc.	Prakshalana is done for cleansing the wound and also when drugs like Dashamoola is used for Prakshalana it will also help in reducing pain.  Panchavalkala Kwatha act as anti-inflammatory and antimicrobial.
Vrana Lepa	Tumbi Lodhra Lepa <sup>[11]</sup> Jatyadi Taila <sup>[12]</sup> Karpoora Gritha <sup>[13]</sup> Kumarimajja, Haridralepa <sup>[14]</sup> Durvadi Taila <sup>[15]</sup> Yastimadhu Gritha <sup>[16]</sup> Prapoundarikadya Ghrita <sup>[17]</sup>	Drugs having <i>Vrana Shodhak</i> and properties when used as external application effective in controlling wound infection and promote healing.

## Pathya Apathya

## Vranita should follow the following Pathya -Apathya.

	Pathya	Apathya
Shak Varga,	Balmulak, Vartak, Patol Karvellak, Tanduliyak, Jeevanti, Sunnishannak Vastuk	Patra-shak, Haritak shak, Shushk Shak,
Phala Varga	Dadim, Draksha, Panas	-
Mansa Varga	Jangal mansa	Anup Mansa, Aja mansa, Avik mansa, Shushka mansa
Krutanna Varga	Vilepi, Odana, Laj-manda, Mudga Yusha	Dadhi, Takra, Payas, Krushara
Tail Varga	Katu Tailam, Tila Tailam	-

Toya Varga	Shrut Jala	Sheetambu
Madya Varga	-	Maireya, Seedhu, Sura
Shuka Dhanya	Yava, Godhum	Nava Dhanya
Shimbi Dhanya	Mudga, Masur	Masha, Kalay , Kulattha

#### **CONCLUSION**

The principles told in Ayurveda are found to be applicable even today and well established even in the presence of other conventional wound healing medical sciences. Ayurveda has delineated *Pathya-Apathya* (diet restriction) as part of treatment since ancient time. We can say that, if *Pathya* is followed properly there will be no need of medicine and if not followed no medicine will work. The treatment like *Vrana Prakshalana*, *Upanaha*, *Dhupana*, *Lepa*, *Vrana Shodhana*, *Ropana*, taking proper diet as advised in Ayurvedic text for wounded provides proper nutrition to wound which enhance the wound healing and prevents the wound from infection and wound healing becomes uneventful.

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