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Clinical Efficacy of Local *Guggulu Dhoopana* in Management of Episiotomy Wound

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Abstract

Sometimes, to prevent perineal tear and injury to the baby, episiotomy is done during second stage of labour. However, if not cared for properly, it may cause great pain, discomfort and systemic infections too. Thus, it's care should be taken in all possible manners. Kashyapa Samhita has elaborated Dhoopana with Guggulu and Ghee in Sutika Paricharya. Hence, present clinical study was planned to determine efficacy of local Dhoopana in Sutika with Guggulu episiotomy wound. The specific examination of local inflammation, pain and foul smell of Lochia were considered as study parameters. The present study concluded that Dhoopana with Guggulu and Ghrita provided 90 % relief in management of episiotomy wound, especially pain and inflammation associated with it.

Keywords- *Guggulu*, *Sutika*, Perineum, Wound healing, Fumigation

Introduction

Gestation and childbirth are very important physiological functions in women's lives. Although they are physiological, can prove dangerous if not happened in a natural manner properly. Sometimes, to prevent perineal tear and injury to the baby, episiotomy is done during second stage of labor. It is performed on perineum and posterior vaginal wall just before the crowning. This episiotomy wound helps to avoid perineal damage. However, if not cared for properly, it may cause great pain, discomfort and systemic infections too. Thus, it's care should be taken in all possible manners.

Ayurveda classics have described a specific regime for diet and lifestyle in this puerperal period, as 'Sutika Paricharya'.² The main

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aim of this regime is to restore the anatomical and physiological changes happened to the women's body. In doing so, great caution must be taken to sooth her pain and also prevent looming infections. Though not part of a normal labor, episiotomy is the most employed procedure. Thus, it is the need of the hour to count it under *Sutika Paricharya* only.

Dhoopana Chikitsa has been described in the classics for sterilization of places as well as body parts through fumigation with various herbal, animal and animal origin ingredients. It is one of the under-explored gems of Ayurveda with great potential. Kashyapa Samhita has elaborated *Dhoopana* in Sutika Paricharya. Here, Dhoopan with Kushtha, Guggulu, Agaru etc. has been advised along with Ghee.3 Of these, the volatile oil of Guggulu was found to be highly effective as a fumigant. The methanolic extract of Guggulu possesses an active compound, 5(1-methyl,1-aminoethyl)-5-methyl-2- octanone, that has shown significant antibacterial activity against gram-positive bacteria and moderate activity against gram-negative bacteria.⁴

Hence, present clinical study was planned to determine efficacy of local *Guggulu Dhoopana* in *Sutika* with episiotomy wound. It was done in order to present an easy, soothing and efficacious alternative to limit pain and infection associated with episiotomy wound and help in its better healing.

Methods-

In the present single arm, open labelled, prospective study, 50 female patients were

selected following inclusion, as per exclusion and specific examination was done. The Inclusion Criteria were the females who have undergone normal delivery with episiotomy at the study centre, above 18 years of age and who willing to provide informed consent and take part in study. The females with Normal delivery without episiotomy, delivery by Caesarean section, forceps, ventose etc., post-delivery complications such PPH. psychological issues etc. and Not willing to take part in the study were excluded from the study.

Specific Examination of episiotomy wound-

Sr. No.	Symptom	Gradation
1	Shotha	Grade 1- Absent
	(Inflammation)	Grade 2- Present
2	Shoola (Pain)	Grade 1- Pain
		during walking
		etc.
		Grade 2- Mild to
		moderate pain
		during rest
		Grade 3- Severe
		pain during rest
3	Gandha (Foul	Grade 1- Absent
	smell of	Grade 2- Present
	Lochia)	

B) Study Plan-

The participants were administered *Dhoopana* with *Guggulu+ Ghrita* from second day of delivery to tenth day of delivery.⁵ It was done once in the morning

for 3-5 minutes as per participant compliance. The specific examination was done every day and results before starting the therapy i.e., Day 0 (second day of delivery) and Day 9 (tenth day of delivery) were compared. During this duration, they were advised to follow all other common regimens and advisories for puerperal period.

C) Preparation & administration of study drugs-

Guggulu and Ghrita were purchased from authentic sources. For each sitting, 5 gm Guggulu and 1 to 2 Tablespoons of Ghee were used. After taking hot water bath, participants were advised to take rest for 30 minutes. Then, local cleaning of vagina was done and Dhoopana was given in sitting position on a specially designed chair. Participant was asked to keep her thighs wide open and was covered properly for concentrating the fumes.

D) Assessment Criteria:

The assessment was done on basis of specific examination of episiotomy wound parameters before treatment and at the time of every-day follow up depending upon their gradations during the duration of study. Descriptive statistics were used to present the results.

Results- The observations and results are presented in tabular format. Of the 50 participants, all possessed inflammation and pain at episiotomy wound; while only 5 participants had foul smelling lochia discharge. (Table 1)

Table 1- No. of participants as per parameters of specific examination of episiotomy wound

Sr.	Parameter	No. of	Percenta
No		Particip	ge
		ants	
1	Shotha	50	100 %
	(Inflammation)		
2	Shoola (Pain)	50	100 %
3	Gandha (Foul	05	10 %
	smelling		
	Lochia)		

Also, the days required for relief in all these parameters were noted separately.

1. Shotha (Inflammation)

Table 2- Number participants with relief after treatment

8	Day	No. of	Percentage
5.5		Participants	
1	3	30	60 %
1	6	15	30 %
a d	Total	45	90 %

It was noted that 5 participants did not have relief in *Shotha* (Inflammation) even after completion of study duration.

2. Shoola (Pain)

Shoola (Pain) was present in all 50 participants. Of them, 27 participants (54 %) had Grade 1 pain, 15 participants (30 %) had Grade 2 pain and 8 participants (16 %) had Grade 3 pain.

At the end of 3rd day of treatment, 4 participants from Grade 3, 3 participants from Grade 2 and 7 participants from Grade 1 got relief as they had reduction in their pain. On sixth day, 2 participants from Grade 3, 7 participants from Grade 2 and 11 participants from Grade 1 got relief from

pain. On 9th day, 1 participant from grade 3, 4 participants from Grade 2 and 6 participants from Grade 1 got relief from pain.

Table 3- Number participants with relief after treatment

Day	No. of	Percentage
	Participants	
3	14	28 %
6	20	40 %
9	11	22 %
Total	45	90 %

It was noted that 5 participants did not have relief in *Shoola* (Pain) even after completion of study duration.

3. Gandha (Foul smell of Lochia)

Table 4- Number participants with relief after treatment

Day	No. of	Percentage
	Participants	
3	03	60 %
6	00	0 %
9	02	40 %
Total	05	100 %

It was noted that all 5 participants had relief in *Gandha* (Foul smell of Lochia) after completion of study duration.

Of the 5 participants that did not get relief from treatment, 2 participants were non-cooperative during *Dhoopana* procedure. Hence, the treatment could not be administered properly. 2 participants did not follow hygiene norms and used cloth sanitary pads. One participant initially had good response, however for unknown reason

the condition was worsened and had to administer antibiotics.

Discussion-

Amongst several dietary and lifestyle changes advised to *Sutika*, most are related to her and the child's nourishment and strength retainment. However, therapies such as *Dhoopana* are particularly meant to disinfect and prevent infections of the perineum, especially in episiotomy wound, perineal tear etc.⁶ Various medications have been mentioned in the classics, out of which the most commonly available one i.e., *Guggulu* has been administered and studied here for its efficacy to deal with management of episiotomy wound.

Dhoopana Chikitsa has been advocated in Charaka Samhita for wound healing.⁷ As, episiotomy can be considered as 'Sadyo Vrana', it is applicable here too. The mode of action of Guggulu Dhoopana can be described as follows- The Sookshma and Laghu Guna of Dhooma helps penetrate in Sookshma Srotasa. The Ruksha Guna of fumes of Guggulu help to dry out the secretions and its Ushna and Tikshna Guna help in maintaining their consistency and normal excretion through vagina.8 It will also help in absorbing excessive Cleda and Dushta Kapha. Due to presence of soothing volatile oils (Sugandha), it may help in maintaining normal condition of Apana Vayu too. In all, it will not only prevent the infections but, will help regain normal texture and elasticity to the local skin tissue.

Conclusion-

Kashyapa Samhita is a treasure for obstetrics and pediatrics treatments. It possesses many simple yet effective regimens such as one studied in this study. Guggulu and Ghrita are both easily available and *Dhoopana* is also easy to administer. The traditional care of *Sutika* also contains *Dhoopana* with many ingredients. So, Guggulu can also be included there. The present study concluded that Dhoopana with Guggulu and Ghrita provided 90 % relief in management of episiotomy wound, especially pain and inflammation associated with it. Further studies with precise laboratory investigations and bigger sample size can prove its efficacy. Its mode of action can also be understood in a better manner in a long duration study.

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