A Literary Review of Vishama Jwara and its principle of treatment

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ABSTRACT

In Ayurveda, Jwara is not merely the concept of raised body temperature, but as is said in Charaka Samhita, 'Deha- Indriya- Manah- Santap' is the cardinal symptoms of Jwara. This can be defined as the state where the body, mind as well as sense organs suffer due to the high temperature. Vishamajwara is a type of fever, which is described in all Ayurvedic texts. Charaka mentioned Vishamajwara and Chakrapani have commented on Vishamajwara as Bhutanubanda, Susruta affirmed that Aagantuchhanubhandohi praysho Vishamajware. Madhavakara has also recognised Vishamajwara as Bhutabhisangajanya (infected by microorganism). Vishamajwara is irregular (inconsistent) in it's Arambha (nature of onset commitment), Kriya (action production of symptoms) and Kala (time of appearance) and possesses Anushanga (persistence for long periods). The treatment of this disease depends upon Vegavastha and Avegavastha of Jwara. Various Shodhana and Shamana procedures are mentioned in classics to treat Visham Jwara.

Key words: Jwara, Vishama Jwara, Shodhana, Shamana.

INTRODUCTION

Ayurveda has a significant name. It is the knowledge of the science, which ensures health and longevity. It is in no way inferior to other systems. The Ayurvedic doctors had very great influence in the field of medicine.

Ayurveda mentioned Jwara as the synonym of the disease or a febrile condition. “From among all disorders fever deserves to be described first, it being

the foremost of all somatic diseases”. Charaka mentioned Jwara afflicts body, mind and sense organs, regulates the well being of life. Chakrapani described Jwara as “Jwaryati Santapayati” i.e. disease associated with burning manifestation is known as Jwara.[1]

Jwara is the term originated by the anger of Rudra. Rudra is known as god of destruction in Hindu mythology.[2]

Jwara is the king of all diseases and known by different terms in various animals also i.e. Pakala for the Jwara of elephants and Abhitapan for horses’ etc. Vishamajwara is the varieties of Jwara, which can be identified by its peculiarity of Visamata (irregularity). Vishamajwara characterised by Visamarambha (irregular onset) Visama Kriya (alternative feeling of hot and cold) and Visamakala (irregular duration of sufferings) of Jwara.[3]

Susruta believed this to be caused by Agantuka Karana or Parahetu (external factor). This Parahetu is
more cleared by commentator Dalhana as Bhutabhisanga.\footnote{4}

Bhutabhisanga can be correlated with parasitic infection as discussed in modern medicine.

Vishamajwara, literally meaning irregular fever, is very vast. It may be remittent type or intermittent type as Keetanu (micro-organisms) have been incriminated as one of the causes of Vishamajwara. The major cardinal symptoms of Vishamajwara i.e. Fever with chill and rigor have been observed to be present in other disease including Malaria, which is a protozoal disease caused by plasmodia group of organism and transmitted to man primarily by certain species of infected female anopheles mosquitoes.

The description of Vishamajwara was known from ancient era. In “Upanishad” (400B.C) Vishamajwara is described as “Takman”. It is described that the Jwara having Dahana and Shosana properties, which attacks like fire (Agni) and they’re by the patient runs like a mad. For it’s relief chanting of Mantras has been described to pray God.\footnote{5}

**Synonyms of Vishamajwara**

The synonyms of Jwara are Tapah, Shushmi, Shoka, Abhishaka, Rudraka, Papma, Amarthya Vigadh, Vyangah, Sheersha, Parbheta and Sochi etc. mentioned in the Veda are said to be developed due to Rudrakopa.\footnote{6}

**Samhita and Sangraha Kala**

Wide description of Vishamajwara is found in Samhita granthas like, Charaka, Sushrut, Bheka, Harita, Kashyapa, Madhava, Sharangadhara, Bhavaprakash, Yogaratnakara etc. Kashyapa considered that in the Vishamajwara specific properties of Jwara are found in an irregularity manner. He enumerated the Vishamajwara as follows Santataka, Satataka, Anyeduska, Triteeyaka and Chaturthaka considering the days of its onset. According to Kashyapa the aetiology lies as - if one takes exercise, heavy meal, unsuitable diet, excess drinking of water or milk, blackgram preparation, recent curd, paste of tila, village animal flesh, Virudhahara (incompatible food), day sleeping and takes much food before the digestion during the period of Jwara temperature goes on rising and attains the stage of Vishamajwara. He also described not to take Kashaya during the Amavastha or Tarunavastha of Jwara etc. which may leads to Vishamajwara. Bhaluki considered that the Jwara that comes with cold or hot stage with temperature rise or low is uncertain in Vishamajwara.

Charaka described that all the Vishamajwara are Tridosha in origin. Susruta considered that the Vishamajwara occurs due to Tridosha but Vata is the dominant Dosha. He considered the Agentuka Karana (external cause) of which Bhutabhisanga constitute one of the variety in the main aetiology for Vishamajwara.\footnote{7}

Vagbhata defined Vishamajwara, as the Jwara is irregular in respect to its onset, suffering and symptoms. The Mandagni during Adanakala is one of the important causes of Vishamajwara. He also advocated if an emaciated patient who takes irregular diet during convalescent period in spite of residual of small quantity of Doshay may causes Vishamajwara.\footnote{8}

According to Hareeta\footnote{9} the Vishamajwara is five types such as Vataja, Ekaikajwara, Dwahieka Jwara, Triahika Jwara, Chaturthakjwara. Chakrapani opines, the poisonous insects may be considered under the word Bhuta. Dalhana consider Bhutas responsible to produce Vishamajwara. Madhavakara\footnote{10} views as Bhuta plays an important role for Vishamajwara too.

In Amarkosh the Bhuta means Keetanu. Jejjata considered Vishamajwara as Tridoshaja in origin. Most of the authors considered five types of Vishamajwara. Bhavamishra and Madhavakara have included Pralepaka Jwara also in the group of Vishamajwara.

**Nidana**

Factors relating to Ahara

1. Kasaya Dravya Sevana
2. Ruksha Dravya Sevana
3. Ushna Dravya Sevana
4. Shitambu Pana
5. Santaran Dravya sevana
6. Anupamsansa Bhakshana
7. Pinaka Bhojana
8. Asatmya Dravya Bhojana
9. Virudha Padartha Bhojana (antagonist food)
10. Ahita Ahara Sevana

Factors relating to Vihara
1. Visausadhi Gandhi Sevana
2. Divaswapna (day sleeping)
3. Mithya Vihara (the habits which is not good for health)
4. Sorrowfulness

Other Nidhana
1. Aupasargika Karana
2. Rutuparivartana
3. Kroda
4. Bhaya

Role of Bhuta (Keetanu) in Vishamajwara
Susruta believed that Vishamajwara takes place due to Agantuka Karana (external cause). Agantuka is divided into 4 types i.e., Abhigata, Abhichara, Abhisapa and Abhisanga. Dalhana considered Abhisanga as Bhutavisanga. Chakrapani stated poisonous insects may be considered as Bhuta. According Amarkosha it is Keetanu. Therefore the Keetanu introduced the body by its corresponding portal entry and aggravates the Doshas. The time taken from the entry to manifestation of disease is known as Sanchaya Kala (incubation period). After Sanchaya the Doshas follow their normal pathway to travel for manifestation of diseases. But in this instance which Dosha is principal may be considered on the type of Keetanu and the strain of Keetanu.[11]

Regarding the vectors, Charaka mentions countries which abound Mashaka (mosquitoes), Mooshaka (rats) and Makshika (flies) as unhealthy.[12]

In Charaka, it is stated that “unsanitary winds, unsanitary water, unsanitary countries and unsanitary seasons are cause of catastrophes. Water is considered to be more important than wind, and country more important than water and season yet more important than country by virtue of their degree of indispensability.[13]

In this statement one can see the rudimentary concept of germ theory and epidemiology.

Relation of Dosha in Vishamajwara
Ayurvedic doctrine based on the Tridosha theory. The three Doshas are responsible for all diseases when they are deranged. The vitiated Dosha after localising in Dhatus of the body are responsible to produce diseases. Through it is described in all classical texts that Vishamajwara is Tridoshaja but Vata plays an important role. Charaka described that Vishamajwara is developed due to vitiation of Tridosha, but according to predominance of Dosha different features of its varieties may be noticed.[14]

According to Susruta Vishamajwara is due to predominance of Vata and Kapha, because patient feels chill and rigor during first stage. Vagbhata described due to vitiation of three Doshas, five types of Vishamajwara occur. Jejata described Vata plays an important role in Vishamajwara where as Pitta and Kapha remain quiescent stage. According to Hareeta predominance of Vata, Pitta and KaphaDosha causes Vatolbana, Pittolbana and Kapholbana Vishamajwaras in 14th, 18th and 22nd days respectively. According to Ayurvedic scholars the seat of Jwara is stated to Amashaya. The three Doshas (Samana Vayu, Pachahaka Pitta, Kledakakapha) remain in Amashaya in Jwara the Pitta is mainly involved with Samanavata and Kledakakapha. Jwara occurs in whole body by the circulation of blood with the help of Vyanavata. Besides all the factors Pitta plays an important role for producing Jwara. So description of Pitta may not be out of place. Topa (temperature) and Daha (burning sensation) are due to Pitta. Pitta regulates the normal body temperature along with other functions also.

Role of Dushya in Vishamajwara
In Vishamajwara the Doshas are not only localised in Rasa Dhatus like other Jwara. But Rakta, Mamsa,
Meda, Asthi and Majja Dhatu are also involved subsequently as stated by Charaka, Susruta and Vagbhata in the following manner as regard its seat in particular Dhatu.  

1. Rasa Dhatu – Santata Jwara  
2. Rakta Dhatu- Satata Jwara  
3. Mansa Dhatu – Anyedhuka Jwara  
4. Meda Dhatu – Triteeyak Jwara  
5. Asthi Dhatu – Chaturthak Jwara  
6. Majja Dhatu – Chaturthak Jwara  

Relation of Vega in Vishamajwara[15]  

As a seed lies dominant in the soil and grows up in favourable time, Doshas stay in Dhatus and get viitated in opportune time. The Dosha having attained exacerbation and timely strength due to weakening of the contracting factor gives to the tertian as well as exacerbation and timely strength due to weakening of the quaterain fever. After the paroxysm, the Doshas being weakened stay in their respective places and being reinforced in their opportune times again give rise to fever.

Role of Prakruti  

Prakruti plays pivotal role in occurrence and prognosis of diseases. According to Deha Prakruti the Dosha Kalpana is also considered. The Vishamajwara due to Kapha is difficult to cure in Kapha Prakruti because in this disease the Vata and Pitta are less powerful. Similarly Pittolbana is difficult to cure in Pitta Prakruti and Vatolbana is difficult to cure in Vata Prakruti.[16]

Role of Kala in Vishamajwara  

The rise of temperature at the end of the day, end of the night is due to Vata Dosha, the same rises in the mid-day and mid night due to Pitta Dosha. The rise is during morning and evening hours due to Kapha Dosha respectively. Besides these, same disease is produced in particular season. According to the principles of Ayurveda Vata is aggravated in Varsa, Pitta in Sharat and Kapha in Vasant. If a person takes “Mithya Ahar-Vihara” in a particular season the particular Dosha of that season is provoked. The aggravrated doshas interact Rasa and other Dhatu and ultimately produces Vishamajwara.

Role of Agni in Vishamajwara  

Among the thirteen types of Agni, the Jataragni is most important.[17] It digests the food and controls all other Pittas. The Pachakapitta remains in Grahani and stimulates Dhatwagni. If a person adopts Mithya Ahara and Vihara for a long time then the imbalance Dosha localised in Amashaya, disturb the functions of the same and displace Agni. Therefore, activity of Agni becomes impaired in Amashaya but enhances in Dhatu. Ultimately there is formation, of Ama Rasa and obstruction of Rasavaha and Swedavaha Srotas giving rise to different clinical features known as Jwara Roga.

Role of Ama in Vishamajwara  

Ama is defined as undigested food particles, which subjected to less amount of Agni as desired. This Ama is produced in Amashaya as a result of Aharapaka. Ama may be grouped into two parts (1) local and (2) systemic. The systemic effects of Ama (Amarasa) which sticky in nature obstruct the fine channels of Swedavaha Srotas as a result there is elevation of body temperature. On the other hand in Bhutabhisanga Vishamajwara, person having Bhutobaisamyam, Swabhava (immunity) and the Keetanu directly involved the Dhatu and produces Agantuka Vishamajwara.[17]

Role of Srotas in Vishamajwara  

In Ayurveda all diseases are produced by Srotovaigunya. Jwara is due to Annavaha Srotavaiungunya in general. But in Vishamajwara there is no clear description about particular Srotovaigunya. According to signs, symptoms and site of Dhatus it may be concluded that Udakavaha, Swedavaha, Rasavaha, Raktavaha, Mansavaha, Medavaha, Asthivaha, Majjavaha and Manovaha Srotas are involved.
Role of Rogamarga in Vishamajwara

Ayurveda described the three Rogamarga (pathway of disease) for the manifestation of diseases. The seat of Jwara is Amashaya and is one of the organs of Kostha (thoraco-abdomino-pelvic cavity). Therefore, Jwara is considered as abhyantara Rogamargaja Vyadhi.

Types

There are mainly five types of Vishamajwara accepted now.[18] But there are various views on these types of Vishamajwara illustrated below.

1. Charaka described five types according to its Vega and Agamankala i.e., Santata, Satata, Anyeduska, Triteeyak and Chaturthaka.[19]

2. According to Vaghbata, Santataka, Satata, Triteeyaka, Anyeduska, Chaturthaka, and Chaturthaka Viparyaya. Here has classified the Viparyaya as Vatadhikya, Pittadhikya and Kaphadhikya.[20]

3. Susruta advocates as Santatak, Satata, Anyeduska, Triteeyaka, Chaturthaka, Pralepaka and also due to predominance of Doshas (Anupathyaka Jwara Madhya Samudbhavan) and Vata Balasaka.[21]

4. Harita describe as Kahika, Dwahika, Trayahika, Chaturthaka.[22]

5. According to Gananath Sen it is four types such as Vatabalasaka, Sleepadika, Kalajwara, Upadravikjwara.[23]

6. Kharanada described as Viparita Tikhanata Santatajwara, Anyeduska, Triteeyak and Chaturthaka.

7. Kashyapa described it as Viparita Tikshana Santatajwara, Anyeduska, Triteeyak and Chaturthaka.

8. Drudhabala described two types such as Triteeyaka and Chaturthaka.

9. Madhavakara viewed that Santata, Satataka, Anyeduska, Triteeyak, Chaturthaka. Here Triteeyaka is again divided into three types according to predominance of Dosha like Khapipitta. Vatakapha, Vatapitta Chaturthaka, two types as Slesmika and Anila. Besides this he described another three types known as Chaturthaka, Viparjava, Vatavalasaka and Pralepaka.[24]

Samprapti of Vishamajwara[25]

If the Mithya Ahara Vihara taken in case of residual fever or during convalescent period of Jwara it causes Vishamajwara being localised in one or more Dhatu. On the other hand Keetanu may aggravate Doshas in according to Balam Kalamcha Prapya (dependent on the host strength and climate). But according to Susruta as well as supported by Madhavakara about the pathogenesis of disease stated that if a weak person just after fever adopts unsuitable food and drink, his residual doshas aggravated being afflicted by Vata localised in Kaphasthana (Shira, Kantha, Hridaya, Amasaya) to produce different of Vishamajwara. The five types of Vishamajwara manifested after invading of Rasa, Rakta, Mamsa, Meda, Asthi and Majja Dhatu and loges at Shira, Kantha, Hridaya, Amasaya and Rasavaha Srotas, as a result of which the following types of Vishamajwara are produced.

1. Santata – continuous fever – Rasa Dhatu – wall of Amashaya

2. Satata – double quotidian fever – Rakta Dhatu – Amashaya

3. Anyeduska – quotidian fever – mamsa and meda – Hrdaya

4. Triteeyaka – tertian fever – Asthidhatu – Kantha

5. Chaturthaka – quartan fever – Majja Dhatu – Shira

Samprapti of Santatajwara

The word Santataja Jwara means fever in continuos nature. Now it is under controversy before the modern Ayurvedic scholar’s deviates from the definition of Vishamajwara. But to overcome the controversy Charaka classified that the ‘Muktanubandhitvam Visamatvam’, which means fever with relapsing nature. Then Doshas circulating in
body through Rasavaha Srotas with the help of Vata and gets localised in the Kapha Sthana. The period of localisation may vary according to Kala Prakriti and predominance of Doshas. They also affect Dhatus and Malas to manifest the diseases. The site of Santatajwara is Rasadhatu and its period is 7 days, 10 days, 12 days according to predominant of Vata Pitta and Kapha respectively. During this period the Jwara may either subside or kill the patient without appropriate therapeutics intervention.[26]

According to Harita the period of subsidence of Jwara is 14, 18, 22 days in Vatolbana, Pittolbana and Kapkolbana respectively. During the period the fever may subside or kill the patients.

**Dosha Pradhanyata**[27]

The Dosha Pradhanyata in the Santata Jwara is tabulated as below.

<table>
<thead>
<tr>
<th>Kala (Rutu)</th>
<th>Dushya</th>
<th>Dosha</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vasanta</td>
<td>Medas</td>
<td>Kapha</td>
</tr>
<tr>
<td>Sharad</td>
<td>Rakta</td>
<td>Pitta</td>
</tr>
<tr>
<td>Varsha</td>
<td>Asti</td>
<td>Vata</td>
</tr>
</tbody>
</table>

**Samprapti of Satatajwara**

The Satatajwara is said to be Dwikalika (two times) in an Ahoratra (24hr). The vitiated Doshas are localised in Raktavaha Srotas and aggravated in a day and night. According to Kashyapa this types of aggravation and remission depends upon the Kala, Dosa and Dushyas. Dalhana considered Jwara be twice in day. Once in a night, because the seat of Satatajwara is Raktadhatus. Raktavaha Srotas is comparatively minute and more distant than Rasavaha Srotas. So Dosha gets longer time to enter in Srotas causing Vishamajwara. When doshas more from Rasavaha to Raktavaha during this phase there will be only febrile attack.

According to Vagbhata onset of Jwara in Vata Dosha is at early Aparanha (afternoon) and Pratyusha (morning and last part of night). Pitta Dosha aggravates in midday and midnight and Kapha Dosha in Purvanha (evening hours)

**Vruddhi Kshayatmaka of Satatajwara**[28]

The heavy Doshas spread all over the body through the channels carrying Rasa and stiffened and give rise to Santata Jwara (remittent fever). Being unbearable and quick – acting it gets subsides or kills the patients by the period of seven, ten or twelve days. Dosa equal in respect of time, dushya, (affected tissue) and constituents and having no counter acting factor causes the remitted fever and as such in quite unbearable. In remittent fever, as a rule, Vata etc. also affect in urine and faeces simultaneously as the Dhatus. This fever gets subsides or becomes fatal in periods of a week etc. according to the conditions whether Rasa etc. have been purified completely or not. When they are not purified completely or entirely the remitted fever gets lodged in the twelve entities (seven Dhatus, three Doshas, urine and faeces). Thus even after remission on twelfth day, it continues hidden for a long time without responding to any treatment. Considering all this, the physician should treat the case of fever. Mostly in such management de-saturating remedy is administered at first.

**Samprapti of Anyeduska Jwara**

Jwara Vega occurs once in a whole day or night is called Anyeduska Jwara. Kashyapa named it as Anusarghee and in Veda it is known as “Anyeduha”. Vagbhatta considered that Mansavaha Srotas are very smaller(minute) than Raktavaha Srotas. Therefore delay occurs because of Doshas have to reach a longer distance. This Doshas circulated all over the body slowly and ultimately reach Mansavaha Srotas once in a whole day or night.

**Samprapti of Triteeyak Jwara**

The Jwara Vega occurs once in every third day. Vagbhata considered that the sites of vitiated Doshas are Medhadhatu and Medavaha Srotas. Dosa gets
longer time to enter Medavaha Srotas from Rasavaha Srotas. So the paroxysm of fever is on every third day.

**Doshaanusara Bheda – Trika Grahi – Prusta Grahi – Shirograhi** [29]

**Triteeyaka Jwara** (tertian fever) is of three types,
1. Due to *Kapha* and *Pitta* starting from *Trika* (sacral region)
2. Due to *Vata* and *Kapha* starting from the back
3. Due to *Vata* and *Pitta* starting from head.

Likewise, the quartain fever has also two type of characters - one caused by *Kapha* and starting from legs and other caused by *Vata* and starting from head.

**Samprapti of Chaturthaka Jwara** [30]

Jwara comes on every fourth day having two days interval between the onset of every attack. The site of *Dosha* in this Jwara is said to be *Majja-Dhatu* which is deeper than other discussed above. So vitiated *Dosha* takes a longer period to reach there. Therefore paroxysm of fever is an every fourth day.

According to Kashyapa the *Dosha* which have been localised in *Shirasthana* moves towards *Kanthas* than in one day from *Kanthisthana* to *Hrudaya* on next day and from *Hrudaya* to *Rasadhatu* or *Amashaya* to manifest the *Jwara* on the fourth day. *Dosha* located in *Shira* and *Majja Dhatu* being provocateur by Kala Prakriti. Dushya enters into *Amasaya* and produce Agnimandya. The produced *Ama* causes Srotarodha and responsible for *Vimargagamana* of *Jataragni*.

Dosha it has been classified in two types.
1. *Kaphadhikya Chaturthaka Jwara*
2. *Vatadhikya Chaturthaka Jwara*

*Kaphadhikya Chaturthaka Jwara* originates from *Jangha Pradesh* and spread all over the body and *Vatadhikya Chaturtaka Jwara* originates from *Shira* and spread throughout the body.

**Viparyaya Jwara**

If the fever comes in its remission period discussed above then it can be regarded as *viparyayajwara*. The word *viparyaya* means *virudhata/veniyama* or *parivartana* (reverse). Sushruta considered it as Viparjaya. Charaka and Vagbhata considered for Chaturthaka as “Viparyaya Jwara” are mainly according to the predominant of *Doshas* in the particular site of vitiation. Here it is noted that the vitiated *Doshas* has no definite place to be localised in any of the five *Kapha Sthana* in *Santatajwara*, there is no Viparyaya because the *Dosha* remains in all five *Kaphasthanas*. But in case of *Anyeduskajwara*, if it is comes in remission period than it is known as *Anyeduska Viparyaya*, in Chaturthaka Viparyaya *Jwara Vega* occurs continuously for three days and subside as fourth day. Also the similar process takes place in *Treetiyaka Jwara*.

**Table 2: Duration and Vega in different Jwaras**

<table>
<thead>
<tr>
<th>Name of Jwara</th>
<th>No. of Vega</th>
<th>Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Santata</td>
<td>Nirantara</td>
<td>7,10 or 12 days</td>
</tr>
<tr>
<td>Satata</td>
<td>Twice</td>
<td>In <em>Ahoratra</em> (24hr)</td>
</tr>
<tr>
<td>Anyeduska</td>
<td>Once</td>
<td>In <em>Ahoratra</em> (24hr)</td>
</tr>
<tr>
<td>Triteeyaka</td>
<td>Once</td>
<td>An alternate day</td>
</tr>
<tr>
<td>Chaturthaka</td>
<td>Once</td>
<td>On every 4th day</td>
</tr>
<tr>
<td>Chaturthaka Viparjaya</td>
<td>Twice</td>
<td>In between two days leaving 1st and 4th day</td>
</tr>
</tbody>
</table>

**Sadhya Sadhyata (prognosis)**

*Sadhya-Sadhyata* is very important to assess the prognosis of disease before starting treatment. In a person who is strong, vitiation of *Dosha* is mild without any complication of *Jwara* is said to be *Sadhya*.

If the *Jwara* developed by strong positive factors which all the sign and symptoms are present, function
of Indriya (sense organ) are deranged, the disease is considered to be Asadhya. If the Jwaravega is Antarvega, it is said to be Kruchhara Sadhya (curable with difficulties) and Vaheervega it is Sukhasadhya. When the Jwara associated with Bhrama,

The Santata Jwara if one or two Doshas are involved then it is curable but if more two than kill the patient.

The Santata Jwara if one or two Doshas are involved then it is curable but if more two than kill the patient. The Anyedushka, Satata, Triteeyak are curable as the Doshas lies in superficial as in Rakta, Mansa and Meda Dhatu. Chaturthaka is difficult to cure because the Doshas lies in deeper Dhatus like Asthi, Majja leaving to development of other diseases.

The Bhutavisanga Vishamajwara depends upon Bhaya, Bala, Agni, Prakriti and the involvement of Dhatus. The symptoms like Swasa, Murcha, Chharoli Trishna, Atisara, Vatagraha, Hicca, Kasa, Angavedana are detected than it is said to be Asadhya.

Management of Vishamajwara in Ayurveda

In Ayurveda removal of positive factors as well as measures adopted for the maintenance of Doshic equilibrium is called as Chikitsa. There are 3 types of Chikitsa i.e.,

1. Daiva Vyapasraya
2. Yukti Vyapasraya and
3. Satwavajaya

Yuktivyapasraya joins its popularity now days because of its application of therapeutics dilemmas in particular ailments. Again this is divided into three parts i.e.,

1. Antahparimarjan (internal purification)
2. Bahirparimarjan (external purification and
3. Sastra Pranidhana (surgical measures)

For each one of those five fevers different Kashayas (decoctions) are prescribed. Though bitter drug is prescribed in any kind of fever, in the treatment of Vishamajwara more emphasis is laid on bitter drugs like Kirata, Guduchi, Bharangi, Nimba etc. The emphasis on bitter medicine is due to the vitiated Pitta though other two Doshas also play some important role. For Pitta Shamana drugs, which are astringent, bitter and sweet are useful. In high temperature and extreme burning sensation of the body, application of water and milk externally are recommended for immediate relives. Some Lauha preparations like Vishamajwarantaka Lauha, Sarbajavarahar Lauha, Chandanadilauha etc. will be highly useful in case of anemia after malaria attack.

Perusal of various texts of Ayurvedic classics will indicate the following main mode of treatment in Vishamajwara.
1. Kasaya (decoction) (Panchakashaya)
2. Ghritams (medicated ghee)
3. Suportive therapy like Rasona Yoga
4. Anjana
5. Dhupana

Role of Langhana

The treatment of ordinary fever, Langhana (fasting), Swedana (diaphoretics), Kala (time factor), Yavagu (liquid diet) and Tiktara (bitter medicines) are indicated. In Vishamajwara, Langhana and Swedana are not recommended.

Deterrence/Prevention

- Avoid endemic regions.
- Take the proper prophylactic drugs at proper intervals if traveling to endemic regions.
- Use topical insect repellent (30-35% diethyltoluamide [DEET]), especially from dusk to dawn.
- Wear long-sleeved permethrin-coated clothing if not allergic to permethrin; spray under beds, chairs, tables, and along walls.
- Sleep under fine-nylon netting impregnated with permethrin.
- Avoid wearing perfumes and colognes.
- Seek out medical attention immediately upon contracting any tropical fever or flulike illness.

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