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Clinical approach to Sutika Unmaada w.s.r. to Puerperal Psychosis and its significance in Modern Era

Dr. Sushma

Associate Professor, Department of Prasuti Tantra & Stree Roga, I.A.M.S, Lucknow, Uttar Pradesh, India.

ABSTRACT

Pregnancy is the most exciting and joyous time in a woman's life. Because she is the only creature having the amazing power of creation. Pregnancy and puerperium are at times sufficiently stressful to provoke mental illness. Today a high number of women continue to die during and after childbirth. Puerperal or Postpartum psychosis is very rare, but several mental health conditions are experienced by one or two in 1000 women in the first 1-4 weeks after having a baby. It is very serious as a mother may be at risk of self-harm and there is a risk of potential harm to the baby or other children. All puerperal psychological disorders grouped into three are-Postpartum Blues, Postpartum depression, Postpartum psychosis. Psychiatric illness with serious distortion of thought, behavior, perception, and gross impairment in reality testing are grouped as Psychosis. In Ayurvedic texts, Unmaada is described as a similar clinical condition. The seat of Manas is the heart. Psychiatrists prescribe Mood stabilizers, Antipsychotics, and Electroconvulsive therapy (ECT). These should be used with caution in breastfeeding (especially Sodium Valproate, Clozapine, and Lithium). A healthy diet and physical activity along with antipsychotics minimize the risk of weight gain. In Western Countries alternative medicines including Herbal, Homeopathy is most common nowadays. Some women may choose these to support well-being as they are seen as safer alternatives to medications. The holistic approach to mental health which integrates mind, body, and soul is offered by Ayurveda. This elucidates due importance of care of the mother at every phase of her life especially antenatal and postnatal care. In Ayurveda Unmaada is treated as somatic alteration, the main principle being to break the Aavarana or Manovaha Srotas. Thus Shodhana, Shamana, Satvavajaya Chikitsa are used for the management of Sutika Unmaada.

Key words: Postpartum, puerperal psychosis, Sutika Unmaada, Satvavajaya Chikitsa, Aavarana.

INTRODUCTION

Sutika Unmaada or Postpartum psychosis is a psychotic condition associated with insomnia^[1] occurring in women who have recently delivered a baby. This syndrome is often characterized by the mother's depression, delusions, and thoughts of harming either her infant or herself. The ideation of suicide and infanticide need to be carefully monitored.

Address for correspondence:

Dr. Sushma

Associate Professor, Department of Prasuti Tantra & Stree Roga, I.A.M.S, Lucknow, Uttar Pradesh, India. E-mail: sushmadoctor@yahoo.com

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Postpartum psychosis is closely related to mood disorders, mainly bipolar and major depressive disorder.

Bipolar disorder is a Western psychological diagnosis, characterized by mood swings between elation or mania and depression. It has an extensive number of symptoms and manifestations that can vary greatly depending on the constitution, environment, and imbalances of the individual. Sutika Unmaada^[2] described in Kashyapa Samhita by Acharya Kashyapa, in Khila Sthana, Chapter 11, Sootikopakramaneeya Adhyaya" (verses 9). In our classics, 74 types of Sutika Rogas have been mentioned. Among 74 Sutika Rogas (Purperal disease), Sutika Unmaada is mentioned in this book only.^[3]

This psychotic condition was discussed in detail in Ayurvedic classics under the topic Unmaada. All psychosis cardinal features are included under a single roof. Unmaada is a disease comprising of morenumber of psychological symptoms and hence it can

Dr. Sushma. Clinical approach to Sutika Unmaada w.s.r. to Puerperal Psychosis

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REVIEW ARTICLE Sept-Oct 2021

be termed as Syndrome. *Acharya Charaka* described this disease in detail in *Charaka Samhita, Chikitsasthana,* chapter 9, *Unmaadchikitsitam Adhyaya.*^[4]

DISEASE REVIEW

Acharya Charaka uses the term "Unmaada" as a very general term for insanity.^[5] Insanity according to *Charaka* is "wandering about of mind, intellect, consciousness, knowledge, memory, inclination, manners, activities and conduct."

Fitting a set of symptoms into the diagnosis of a particular disease is not a prerequisite to treating it using Ayurvedic methods. Bipolar disorder manifests due to imbalances in the three fundamental biological qualities that govern the body and mind; *Vata, Pitta* and *Kapha*; and the mental principles of *Sattva, Rajas,* and *Tamas,* which are the "qualities of consciousness." Some modern Ayurvedic practitioners link bipolar disorder to being a lack of stability or *Ojas,* which leads to difficulty in sustaining emotional response.

Maharshi Sushruta^[6] in Sushruta Samhita, *Uttaratantra* has described that, due etiological factors mind gets damaged and intellect becomes unstable. In such condition aggravated *Doshas* spread to the heart and obstruct the *Manovaha Srotas*. As, a result of which *Unmaada* manifests.

According to him excessive aggravated *Doshas* getting localized in upper paths causing abnormality in the mind resulting in a condition of *Unmaada*, which is the disease of *Manas*.

Epidemiology

Incidence of Postpartum Psychosis being one or two per thousand childbirths. The prevalence rate of *Sutika Unmaada* is 1000:2 in postpartum mothers.^[7]

Sampraapti Ghatakas^[8]

Dosha - Shaareerika Dosha – Tridoshaja (Vata, Pitta, Kapha)

Dushya - Dhatu - Rasa; Upadhatu-; Shaareerik mala-; Dhatumala Agni - Jatharagni, Dhatvagni, Bhutagni Agnidushti - Mandata Ama - Agnijanya Srotas - Manovaha Srotas Srotodushti - Sanga, Atipravritti, Vimargagamana. Udbhavasthana - Hridaya Vyaktasthana - Hridaya Vyaktasthana - Sarva Shareera Sancharasthana - Manovaha Sroto Avayava Adhishthana - Manas, Buddhi Swabhava - Chirakari and Asukaari Prabhava - Krichchhrasadhya Roga Marga - Madhyama Etiology^[9]

Viruddha Dushta Ashuchi Bhojanaani Pragharshanam Deva Guru Dwijaanaam |

Unmaada Hetur Bhaya Harshapurvo Mano Abhighaato Vishamaashcha Cheshtah || (Cha.Chi.9/4)

Upaklishta, Satwa, Utsanna Dosha, unhygienic condition, Anuchita Ahaara, Vishama Cheshta, Upaksheena Deha and Manavikriti are the main Nidanas told by Acharya Charaka. In susceptible individuals, bipolar disorder is primarily amplified by low Ojas (immunity, strength, contentment, ability to cope) and vitiated Vata (biological principle of movement and dryness) in the mind and nervous system.

In Modern, aetiologies like Genetic, infection, drug intoxication (Scopolamine, Meperidine), Toxaemia, blood loss, hormonal (sudden decrease in oestrogen, progesterone concentration) are responsible for psychosis.

Clinical Symptoms

Symptoms begin to appear within few days of delivery.^[10] The mean time of onset is 2-3 weeks almost within 8 weeks of delivery.

 Patients usually complain of fatigue, insomnia, restlessness, and episodes of tearfulness and emotional liability.

REVIEW ARTICLE Sept-Oct 2021

- Later-on suspiciousness, confusion, incoherence, irrational statements, and obsessive concern about baby's health and welfare are present. Delusions are seen in 50% of patients and hallucinations are observed in 25% of patients.
- Complaints regarding the inability to move stand or walk.
- Patients may have feelings of not wanting to care for the baby and in some cases, wanting to harm the baby or themselves or both.
- Delusions may involve the idea that the baby is dead or defective.
- Patients may deny the birth and express thoughts of being unmarried, virgin, persecuted, influenced, or perverse.
- Hallucinations may involve voices telling the patient to kill the baby.

Special features based on Doshas are;

- Vataja symptoms: Its symptoms are talkativeness, excessiveness, racing thoughts, hyper-sexuality, euphoria, and impulsive overspending (of money, time, and energy).
- Pittaja symptoms: Its symptoms are overconfidence, irritability, aggression or anger directed outwardly against other people, undersleeping, and hyperactivity.
- Kaphaja symptoms: Its symptoms are feelings of sadness, lethargy, lack of enthusiasm, apathy, lack of appetite, lack of sexual interest, over-sleeping, and hypoactivity.

All of these listed symptoms can manifest in the short term as well as the long term and can appear in countless combinations, making each patient a unique case.

Investigations: Following investigations are required in such patients;

- Haemoglobin Count
- Thyroid profile
- Serum Lithium concentration

Body mass index

Diagnosis

There is no definitive biological test and diagnosis can be difficult even for an experienced Psychiatrist. The diagnosis is primarily based on the self-history as well as what is reported by friends, family, and co-workers by using the criteria for both manic and major depressive episodes.

In Ayurveda, diagnosis is based on the patient's *Prakriti* (underlying constitution) and the past and present history of *Vikriti* (short-term symptoms and *Doshic* imbalances). The practitioner must consider the long and short-term state of *Doshas* and *Up-Doshas;* the patient's level of *Ojas, Tejas,* and *Prana;* as well as the state of mental principles, *Satva, Rajas,* and *Tamas.* Ayurvedic practitioners must also identify the major stressors that are pushing the patient's mental states to opposite poles.

Ayurveda focuses on diagnosing *Unmaada* as a physical disease by the involvement of *doshas* though categorized under psychological disorders. *Acharyas* clearly stated that there is no involvement of "Supernatural powers" in maniac and depressive manifestations rather are, mere because of *Doshik* imbalance (Disturbance in Neuro-transmission and modulation).

Prognosis

The onset of florid psychotic symptoms is preceded by prodromal signs like insomnia, restlessness, agitation, the liability of mood, and mild cognitive deficits. A favourable outcome is associated with a good premorbid adjustment and a supportive family network.

Treatment

The two main Ayurvedic treatments for managing bipolar disorder center on increasing our *Ojas* and reducing our stress. The patients having a stronger ability to cope and withstand the stressors of the world are less likely their moods will fluctuate between highs and lows. When *Ojas* are strong patients are less likely to be buffeted by the *Doshas*.

General line of treatment

- Snehapana It relieves Vata.
- Sasneha Mrudu Shodhana Beneficial in Vata Pradhana Unmaada.
- Sasneha Vamana Beneficial in Kapha Pradhana Unmaada.
- Sasneha Virechana Beneficial in Pitta Pradhana Unmaada.

Other treatments

Shiro Basti and Shiro Virechana

Shuddha Shareerasya Sato Manah Praseediti |

Vagbhata clearly considered *Unmaada* as physical disturbance. Any psychological disorder is to be treated as *Doshik* imbalance.

In symptomatic Unmaada,

Shuddha dehasya chittam prakritim praapyanti |

After *Shodhana* following treatments and *Pathyas* are to be advised;

Teekshna nasya	Snehapana
Teekshna Anjana	Harshana
Abhyanga	Aashwasana
Udhvartana	Utraasana
Aalepa	Bhaya, Taadana
Dhoopa	Tarjana

- Memory boosters and improving the quality of sleep relieve from Psychotic disorders.
- Application of Yuktivyapashray Chikitsa with Daivavyapashray Chikitsa. Also, Satvavajay Chikitsa should be given to promote good quality of life.
- Ratri Shiroabhyanga with Dhanvantaram Taila improves sleep enhancement.
- By Satvavajay Chikitsa, Psychoeducation, Psychological support should be given to the

patient. This helps in preventing relapses in *Sutika*.

Sept-Oct 2021

REVIEW ARTICLE

Specific Treatment

In Sri Lanka besides Ayurveda, an Indigenous psychiatry also known as *Deshiya Unmaada Chikitsa* of Neelammahara psychiatry tradition), it has been elaborated a detailed description on *Sutika Unmada*, by including etiopathogenesis and treatment protocol. Here, in this *Chikitsa* wholesome and unwholesome regimen are being followed.^[11] Also cold treatments or *Sheeta Chikitsa* like bathing, oral intake of food and medicine with *Sheeta Veerya Dravyas* are avoided in *Sutika Unmada*. Because in *Sheeta Chikitsa, Vata* gets vitiated, and puerperal woman suffers from more decrease in physical strength. So, treatment of such conditions must be done by considering the *Dhatukshay* of *Sutika*.

DISCUSSION

According to Ayurveda, puerperal mothers experience blood loss after childbirth, which is akin to Dhatukshaya. Cases of Dhatukshaya should not be treated with a focus on Shodhana Karma without taking into account Roga and Rogi Bala (the severity of the sickness and the affected individual's physical/mental strength). Fulfilling the therapy protocol with Yuktivyapashraya, Daivavyapashraya, and Satvavajaya Chikitsa is highly useful in quick prognosis, as well as relapses are reduced by having adequate psychoeducation and psychosocial support, according to Ayurveda Chikitsa protocol. There is Dhatukshaya condition as well as decreased mental stamina after the delivery of baby. When compared to Dhatukshaya, Jatharagni, Dhatwagni, and Panchabhutagni are decreasing in the afflicted instance. As a result, an Agniwardhaka diet menu is started with Laghu qualities and subsequently added Guru properties. Positive proof for nutrient intake through food regimen was developed by an increase in haemoglobin count and a decrease in body mass index. Consuming diet like Dashamool Kashaya and mild laxative, the effect occurred with the case was beneficial in relieving constipation without further aggravating Vata Dosha as well as Lunuwila (Bacopa

monnieri) acted as a memory enhancer. Kwatha Dhara Snana was used to treat the patient's unhygienic condition since it was efficient in calming the patient's body as well as their mind. When Ratree Shiroabhyanga used with Dhanvataram Taila, it boosted the Guna of Swapna Janana (sleep enhancement). All the methods used bv Daivavyapashraya Chikitsa, Jnana, and Vijnana Chikitsa helped control the victim's persecutory delusions and make her aware of the incident she had been through, while her consciousness and focus improved dramatically.

Rasayana Karma was introduced in the treatment. The goal of using *Rasayana Chikitsa* was to reclaim one's bodily and emotional well-being. The *Antarparimarjana* medications have *Medorasayana* qualities and improved mental calm by boosting memory, discriminative ability, attention, and sleep quality. By avoiding the inferiority feeling she had uncomfortably encountered, *Dhairya Chikitsa* assisted in encouraging the case. The *Smriti Chikitsa* helped restore her memory's vigour.

Postnatal psychosis is classified as a psychiatric emergency based on suicidal, homicidal, or infanticide inclinations, according to current scientific knowledge. As a result, a predefined case of postpartum psychosis is given detailed instructions on how to proceed with treatment.^[12] psychiatric Apart from Daivavyapashraya (spiritual remedies) and Satvavajaya Chikitsa, both Ayurveda and Allopathy primarily concentrated on Yuktivyapashraya Chikitsa (internal and external medication) (psychotherapy). Through Yuktivyapashraya Chikitsa, application of Daivavyapashraya or Satvavajaya Chikitsa is good for effective and quick prediction of the disease.^[13]

CONCLUSION

According to Acharya Charaka, there is no involvement of supernatural powers until the man disturbs his bodily constituents by his *Aahaara* and *Vihaara*. The symptoms manifest based on the physical cause or activities of the person. There cannot be any symptom without the physical cause.^[14] Ayurveda is useful for managing

bipolar disorder because it is a holistic approach that looks at the constitution, the state of current imbalances, and the whole environment of an individual before deciding what is the best regimen to bring him or her into a balanced state. It provides a complete package of useful everyday tools such as lifestyle, diet, herbs, purification, and meditation that best suits the specific individual. Ayurveda not only can treat symptoms of a psychological disease like bipolar disorder, but it can also move past the disease to identify its root causes and the underlying patterns affecting the individual. Combined with meditation and other yogic practices, Ayurveda works on the subtle aspects of the mind to heal consciousness and release individuals from disease.

REVIEW ARTICLE

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Sept-Oct 2021

REVIEW ARTICLE Sept-Oct 2021

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