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# Episiotomy Wound Care through Herbal Preparations - A Case Report

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## ABSTRACT

The word mother itself is symbolic to God. Mother suffers much distress after childbirth due to painful perineum. Pain following episiotomy appears to be universal. Proper healing of episiotomy wound after delivery is a major concern. In Ayurvedic classics *Ghrithkumari* (Aloe vera) has been mentioned as *Varna Ropaka* and *Vishvataghani* due to its *Sheeta* properties. Various studies have demonstrated the power of Aloe vera on moisturizing, wound healing, fibroblast activity, collagen proliferation, angiogenesis, anti-inflammatory, antibacterial, antifungal, antiviral & antioxidant effects. The application of Aloe vera gel is best if extracted directly. The fresh gel from the plant has superior wound healing abilities. Allantoin, a substance in Aloe vera, has considered a cell proliferant stimulant and a chemical debrider. Aloe vera increases collagen content and degree of collagen cross – linkage within the wound. A 27 years female patient (Primigravida) was admitted in PTSR IPD with FTP with Labor pains. She delivered a healthy female baby with Normal Spontaneous Vaginal Delivery with Right Mediolateral Episiotomy. To analyze the effect of Aloe vera pulp dressing on perineal healing after a normal delivery with a right mediolateral episiotomy wound. Episiotomy wound was cleaned with *Triphala* decoction then fresh Aloe vera pulp was applied every 8 hourly on episiotomy wound for consecutive seven days. This study is being done for determining the impact of fresh Aloe vera pulp on episiotomy healing in a primiparous woman. The result was assessed by using REEDA Scale.

**Key words:** Aloe vera pulp, Episiotomy, REEDA Scale, Wound heal, Case Report

## INTRODUCTION

Episiotomy is a surgically planned incision on the perineum and the posterior vaginal wall during the second stage of labour to expedite delivery of the fetus. It is the commonest surgical intervention to facilitate the soft tissue outlet for easy and safe delivery and also to prevent the injury to perineal

muscle and fascia & to reduce the stress and strain on the fetal head.<sup>[1]</sup> Among the *Sutika Roga* there is a reference of *Yoni Kshata*, *Yoni Bheda*, *Yoni Vibhinata*, *Yoni Shopha*, *Yoni Shula*, *Yoni Bhramsha*, *Yoni Dosh* which suggest of perineal trauma causing these conditions.<sup>[2]</sup> So, for prevention of perineal injury, episiotomy, a planned surgical incision was introduced into the practice. In *Ayurvedic Samhita*, description of episiotomy wound has not been given directly but it can be considered as *Shudha Agantuja Vrana* or *Sadyovrana*. Thus, for the healing of this *Shudha Vrana* its management can be done by using *Dravya* possessing *Ropana*, *Shodhana*, *Vedanasthapan* Property.<sup>[3]</sup> Episiotomy is recommended in selective cases rather than as a routine. A constant care during the second stage reduces the incidence of episiotomy and perineal trauma. Inelastic perineum causing arrest or delay in descent of the presenting part as in elderly primigravida. Anticipating perineal tear in the case of big baby, Face to pubis delivery, Breech delivery,

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Shoulder dystocia. In the case of operative delivery: Forceps delivery, Ventouse delivery. Bulging thinned perineum during contraction just prior to crowning is the ideal time for episiotomy. During the forceps delivery, it is made after the application of blades. There are four types of episiotomies; median, mediolateral left or right, lateral and J - shape.

### Plan of procedure

#### Poorva Karma:

Part preparation, painting and draping.

#### Pradhana Karma:

Episiotomy during second stage of labour and suturing of episiotomy wound

#### Paschat Karma:

Treatment of *Shudha Vrana* with *Prakshalan* and aloe vera gel application.

## CASE REPORT

27 years female patient primigravida was admitted in PTSR, IPD with Full Term Pregnancy with Labour pains. She delivered a healthy female baby with Normal Spontaneous Vaginal Delivery with Right Mediolateral Episiotomy.

**History of Past Illness:** No significant Past History.

**History of Surgery:** No history of any surgical intervention.

**Family History:** Mother was suffering from DM II.

### Clinical Examination

Pulse	80/min
BP	122/80mm of Hg
Temp.	98.4degree F
RR	18/min
<i>Agni</i>	<i>Madhyama</i>
<i>Koshtha</i>	<i>Maadhyama</i>
<i>Prakriti</i>	<i>Kapha Pradhan Vata Anubandhi</i>

<i>Sara</i>	<i>Rasa-Raktasara</i>
<i>Mutra</i>	<i>Samyak</i>
<i>Mala</i>	<i>Samyak</i>

### Menstrual History

Duration - 2 to 3 days

Interval - 32 to 34 days.

Amount - 2 pads/day

Pain, Smell, Clots - Not present

### Obstetric History

Primigravida

### B/L Breast

Milk secretion - Adequate,

Breast Feeding - Established,

Engorgement and Tenderness not present.

### Per Abdomen

Uterus Contracted.

7-8cm above pubis symphysis

### Lochia

Amount - 2 pads per day

Smell - Not present,

Clots - not present

### On Examination

All stitches intact,

Wound Healthy,

No abnormal Discharge present,

Mild Tenderness Positive

### Investigations

WBC - 7.7X 1000/ $\mu$ l	B.Urea - 26mg/dl
RBC - 4.98X 100000/ $\mu$ l	S. Creat - 0.6 mg/dl
Hb - 12.6 gm/dl	TSB - 0.6mg/ dl

HCT - 39.9%	DSB - 0.2 mg/dl
MCV - 80.1/Lt	SGOT - 28 IU/l
MCH - 25.3 pg	SGPT - 36 IU/l
MCHC - 31.6 gm/dl	HIV - NR
PLT - 242X 1000 µl	VDRL - NR
L% - 31.0%	HBsAG - NR
M% - 12.4%	
N% - 56.6%	
ESR - 25mm/hr	
FBS - 86 mg/dl	

### Plan of Treatment

#### Sthanik Chikitsa

Episiotomy wound was cleaned with *Triphala* decoction then fresh Aloe vera pulp was applied every 12 hourly followed by *Yoni Dhoopan* with *Kushthadi Dravyas* (*Kushta, Guggul, Agru, Ghee*) on episiotomy wound for consecutive 7 days.

#### Shaman Chikitsa

SN	Drugs	Ingredients	Dose	Anupana
1.	<i>Prataplankeshwar Rasa</i>	Purified Mercury, Purified Mica, Purified Sulphur, Black Pepper, Iron Bhasam, Cough Shell Bhasam, Cow Dung Cake Bhasam, Aconitum Ferox	125 mg BD After meal	Honey
2.	<i>Panchkol Churan</i>	Pipli, Pipplimool, Chavya, Chitrak, Shunthi	3gm BD after meal	Gudodak
3.	<i>Amlaki Rasayan</i>	Amla, Madhu, Ghee, Pipli, Amla Ras, Khand	3gm BD after meal	Milk

4.	<i>Dashmool Kwath</i>	<i>Agnimanth, Patla, Gambhari, Shyonak, Gokhru, Brihati, Kantkari, Shalparni</i> etc.	100ml BD	-
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### Procedure for fresh aloe vera pulp application on episiotomy wound

**Step I:** Wash Aloe vera stalk under running water.

**Step II:** Remove the skin of Aloe vera and scrap the fresh aloe vera pulp using sterile knife & place in a sterile bowl.

**Step III:** Wear gloves and clean the perineum with *Triphala* decoction and dry with Gauze Piece.

**Step IV:** Apply fresh Aloe vera pulp on the episiotomy wound and cover the whole edges.





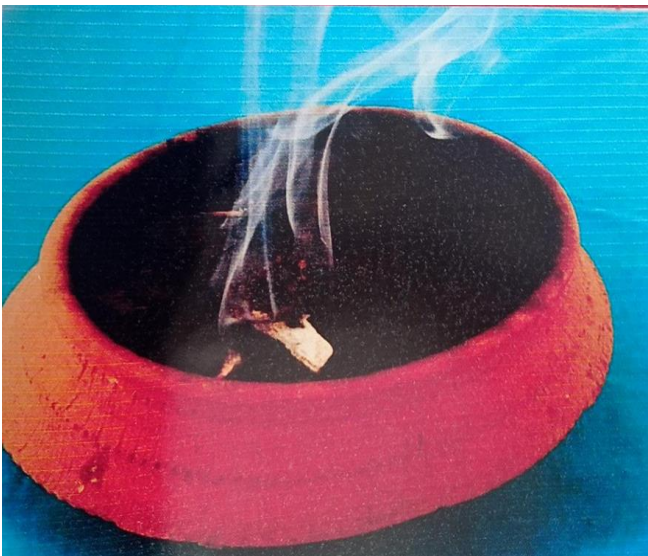
**Yoni Dhoopan<sup>[4]</sup>**

A chair having hole in the middle is used for this procedure.

Patient is allowed sit on the *Dhoopan* chair after voiding the urine.

The *Dhoopan Dravyas* are lit in *Dhoopan Patra* which is placed below the chair.

The smoke coming from the *Dhoopan* drugs reach upto the episiotomy wound for fumigation.

**Dhoopan Chair****Dhoopan Patra****Pathya & Apathya:****Pathya<sup>[5]</sup>**

*Sutika* should consume *Jeerna Shali, Odana* which is made warm, unctuous and taken with *Jangala Mamsa*.

Soup prepared from *Tanduliyaka, Jeevanti, Vartaka, Patola, Karvellaka, Dadima, Amalaki* etc.

*Sutika* should not sleep during day, should remain inside house devoid of breeze.

**Apathya<sup>[6]</sup>**

*Sutika* should not consume *Navadhanya, Masha, Tila, Kalaya, Kulatha, Nishpava, Harita, Shaka, Katu, Amla, Lavana Rasa, Sushka Shaka* eatables made from *Pishta Aja, Avika, Anooa Mamsa, Sheeta Udaka, Krushara, Paayasa, Dadhi, Dugdha* etc. Avoid using *Maireya, Arishta, Aasava, Seedhu*.

*Sutika* should avoid *Vata, Aatapa, Raja, Dhoom, Atibhojana*, this will inhibit the process of wound healing & therefore it should be avoided.

**Assessment Criteria**

Score	Redness
0	None
1	Mild - less than 0.5cm from each side of the wound edges
2	Moderate - 0.5cm to 1cm from each side of the wound edges
3	Severe - more than 1 cm from each side of the wound edges

Score	Oedema
0	None
1	Mild - less than 1cm from each side of the wound edges
2	Moderate - 1cm to 2cm from each side of the wound edges.
3	Severe - more than 2cm from each side of the wound edges

Score	Ecchymosis
0	None
1	Mild - less than 1cm from each side of the wound edges

2	Moderate - 1cm to 2 cm from each side of the wound edges
3	Severe - 1cm to 2 cm from each side of the wound edges

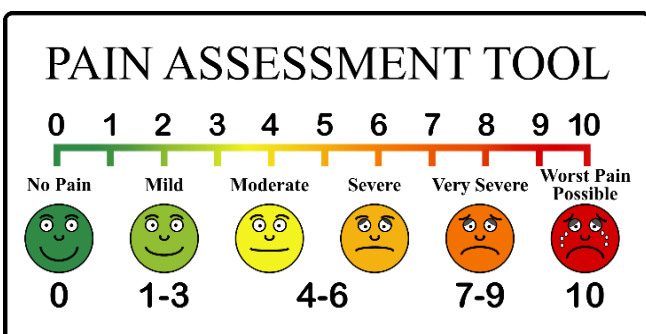
Score	Discharge
0	None
1	Serum
2	Serosanguinous
3	Purulent

Score	Approximation
0	Closed
1	Skin separation 3mm or less
2	Skin and subcutaneous fat separation
3	Skin and subcutaneous fat and fascial layer separation

**RESULTS**

**Grades for overall effect of therapy for healing**

SN	Before Treatment	After Treatment
Redness	2	0
Edema	2	0
Ecchymosis	1	0
Discharge	1	0
Approximation	1	0



**Pain Intensity**

Before Treatment	After Treatment
5 - Moderate	1 – Mild Pain

On 7<sup>th</sup> postnatal day, the wound regeneration was assessed using REEDA SCALE.

The score was 0 which means episiotomy was healed properly.



**Before Treatment**



**After Treatment**

**DISCUSSION**

The study is being done for determining the impact of fresh aloe vera pulp followed by *Yoni Dhoopan* on episiotomy healing in a primiparous woman. It revealed that the patient had a significant progress in

wound regeneration by the application of fresh aloe vera pulp.

In *Ayurvedic* classics *Ghrithkumari* (Aloe vera) has been mentioned as *Vrana Ropaka* and *Vishvataghani* due to its *Sheeta* properties. The result identified that Aloe vera has a property to penetrate and anaesthetize tissue.

By the action of moisturizing, wound healing - fibroblast activity, collagen proliferation, angiogenesis, anti-inflammatory, anti-bacterial, antifungal, antiviral and antioxidant properties. The fresh aloe vera pulp from the plant has superior wound healing abilities. Allantoin, a substance in Aloevera pulp, has considered a cell proliferant stimulant and a chemical debrider. Aloevera pulp increases collagen content and degree of collagen cross-linkage within the wound.<sup>[7,8]</sup>

*Triphla: Kapha Shamaka, Stambhaka, Kashaya rasatmak, Vranaropana*, antiseptic, astringent properties.<sup>[9]</sup>

*Yoni Dhoopan with Kushtadi Dravyas is Kaphahara, Sravahara* and acts as anti-bacterial.

*Shaman Chikitsa with Prataplankeshwar Rasa, Panchkol Churna, Dashmoolarishta* enables *Vatashamana*, Rejuvenates the general health of puerperal women, improve lactation, involution and strength to the reproductive organs. It can also improve the process of healing.

### The process of wound healing comprises of four stages

#### Haemostasis

During the first day of post-natal period the haemostasis is strongly achieved by the presence of lignon, saponin, prostaglandins and gamma - linolenic acid in aloe vera extract.

#### Inflammatory Phase

This phase is completed by the 3<sup>rd</sup> day of postnatal period due to the presence of mannose phosphate, Vitamin A and C, aminoacids such as tryptophan and phenylalanine, salicyclic acid and fatty acids in aloe vera.

#### Proliferative Phase

The wound proliferation is successfully completed on 4<sup>th</sup> post-natal day, due to the presence of glucosamine, anthraquinones and zinc in aloevera extract.

#### Maturation Phase

The maximum wound tensile strength is achieved by 5<sup>th</sup> day of postnatal period with the action of Gibberellins - a plant growth hormone and high levels of protein in the aloe vera.

#### CONCLUSION

The procedure for application of fresh aloe vera pulp was done in aseptic conditions. The assessment and obstetrical history were collected by interview and observation method. The procedure was carried out twice a day for a period of 7 days during postnatal period. The wound healing was assessed by using REEDA Scale Scoring. The study resulted that application of fresh aloe vera pulp on episiotomy considerably increases the speed of episiotomy wound healing, which revealed that fresh aloe vera pulp application was one of the important and effectiveness intervention in improving episiotomy, wound healing in early puerperal mothers. Patient achieved complete wound regeneration at the time of discharge.

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