



ISSN 2456-3110

Vol 1 · Issue 2

July-Aug 2016

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS



Charaka
Publications

Indexed

A Litreary Review of *Vishama Jwara* and its principle of treatment

Saurabh Parauha, Hullur M.A.¹, Prashanth A.S.²

Post Graduate Scholar, ¹Principal & Guide, ²Professor & HOD, Dept. of Kayachikitsa, Ayurveda Mahavidyalaya, Hubli, Karnataka, India.

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 *Agantuchhanubhandohi praysho Vishamajwara*. *Madhavakara* has also recognised *Vishamajwara* as *Bhutabhishangajanya* (infected by microorganism). *Vishamajwara* is irregular (inconsistent) in its *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 "*Jwarayati 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

Address for correspondence:

Dr. Saurabh Parauha
Post Graduate Scholar, Department of Kaya Chikitsa
Ayurveda Mahavidyalaya, Hubli, Karnataka, India.
E-mail: emailtosaurabhparauha@gmail.com

Submission Date : 08/07/2016 Accepted Date: 22/08/2016

Access this article online



Website: www.jaims.in

DOI: 10.21760/jaims.v1i2.3668

more cleared by commentator *Dalhana* as *Bhutabhisanga*.^[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.^[5]

Synonyms of Vishamajwara

The synonyms of *Jwara* are *Tapah*, *Shushmi*, *Shoka*, *Abhishoka*, *Rudraha*, *Papma*, *Amarthya* *Vigadh*, *Vyangah*, *Sheersha*, *Parbheta* and *Sochi* etc. mentioned in the *Veda* are said to be developed due to *Rudrakopa*.^[6]

Samhita and Sangraha Kala

Wide description of *Vishamajwara* is found in *Samhita granthas* like, *Charaka*, *Sushrut*, *Bhela*, *Harita*, *Kashyapa*, *Madhava*, *Sharangadhara*, *Bhavaprakash*, *Yogaratanakara* etc. *Kashyapa* considered that in the *Vishamajwara* specific properties of *Jwara* are found in a 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 *Tridoshaja* in origin. *Susruta* considered that the *Vishamajwara* occurs due to *Tridosha* but *Vata* is the dominant *Dosha*. He considered the *Agantuka Karana* (external cause) of which *Bhutabhisanga* constitute one of the variety in the main aetiology for *Vishamajwara*.^[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 *Dosha* may causes *Vishamajwara*.^[8]

According to *Hareeta*^[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*. *Madhavkara*^[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. *Santarpan Dravya sevana*
6. *Anupamansa Bhakshana*
7. *Pinaka Bhojana*
8. *Asatmya Dravya Bhojana*
9. *Virudha Padartha Bhojana* (antagonist food)
10. *Ahita Ahara Sevana*

Factors relating to Vihara

1. *Visausadhi Gandha Sevana*
2. *Divaswapna* (day sleeping)
3. *Mithya Vihara* (the habits which is not good for health)
4. Sorrowfulness

Other Nidana

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., *Abhighata*, *Abhichara*, *Abhishapa* and *Abhisanga*. *Dalhana* considered *Abhisanga* as *Bhutavisanga*. *Chakrapani* stated poisonous insects may be considered as *Bhuta*. According to *Amarkosha* it is *Keetanu*. Therefore the *Keetanu* introduced the body by its corresponding portan 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 *Dhatu*s 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. *Jejjata* described *Vata* plays an important role in *Vishamajwara* where as *Pitta* and *Kapha* remain quiescent stage. According to *Hareeta* predominance of *Vata*, *Pitta* and *Kapha* *Dosha* 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. *Tapa* (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 Dhatu* 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 – Anyedushka 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 *Dhatu*s and get vitiated 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 the quatern 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 *Vasanta*. If a person takes “*Mithya Ahar-Vihara*” in a particular season the

particular *Dosha* of that season is provoked. The aggravated *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 Ahar* 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 Srota* 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 *Bhatubaisamy*, *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 Srotavaigunya* in general. But in *Vishamajwara* there is no clear description about particular *Srotavaigunya*. According to signs, symptoms and site of *Dhatu*s 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 *Vagbhata*, *Santataka*, *Satata*, *Triteeyaka*, *Anyeduska*, *Chaturthaka*, and *Chaturthaka Viparyaya*. Here has classified the *Viparjaya* as *Vatadhikya*, *Pittadhikya* and *Kaphadhikya*.^[20]
3. *Susruta* advocates as *Santataka*, *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 Tikshanata Santatajwara*, *Anyeduska*, *Triteeyak* and *Chaturthaka*.
8. *Drudhabala* described two types such as *Triteeyaka* and *Chaturthaka*.
9. *Madhavakara* viewed that *Santata*, *Satataka*, *Anyeduska*, *Triteeyaka*, *Chaturthaka*. Here *Triteeyaka* is again divided into three types according to predominance of *Dosha* like

Kaphapitta. *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 *Dosha* 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* – *Hrudaya*
4. **Triteeyaka** – tertian fever – *Asthidhatu* – *Kantha*
5. **Chaturthaka** – quartan fever – *Majja Dhatu* – *Shira*

Samprapti of Santatajwara

The word *Santataja Jwara* means fever in continuous 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 *Dosha* 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 *Kapholbana* 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 1: Showing the *Dosha pradhanyata* in *Vishamajwara*.

Kala (Rutu)	Dushya	Dosha
<i>Vasanta</i>	<i>Medas</i>	<i>Kapha</i>
<i>Sharad</i>	<i>Rakta</i>	<i>Pitta</i>
<i>Varsha</i>	<i>Asti</i>	<i>Vata</i>

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*, *Dosha* and *Dushyas*. *Dalhana* considered *Jwara* be twice in day. Once in a night, because the seat of *Satatajwara* is *Raktadhatu*. *Raktavaha Srotas* is comparatively minute and more distant than *Rasavaha Srotas*. So *Dosha* gets longer time to enter in *Srotas* causing *Vishamajwara*. When doshas move 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. *Dosha* 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 *Anusargee* and in *Veda* it is known as “*Anyeduha*”. *Vagbhata* considered that *Manasvaha 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*. *Dosha* gets

longer time to enter *Medavaha Srotas* from *Rasavaha Srotas*. So the paroxysm of fever is on every third day.

Doshanusara 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 quatern 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 *Shirasthanas* moves towards *Kanthis* than in one day from *Kanthis* 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 *Amashaya* and produce *Agnimandya*. The produced *Ama* causes *Srotarodha* and responsible for *Vimargagamana* of *Jataragni*.

Dosha it has been classified in two types.

1. *Kaphadhikya Chaturthak Jwara*
2. *Vatadhikya Chaturthaka Jwara*

Kaphadhikya Chaturthak Jwara originates from *Jangha Pradesh* and spread all over the body and *Vatadhikya Chaturthaka 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 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

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

Sadhya Sadhyata (prognosis)

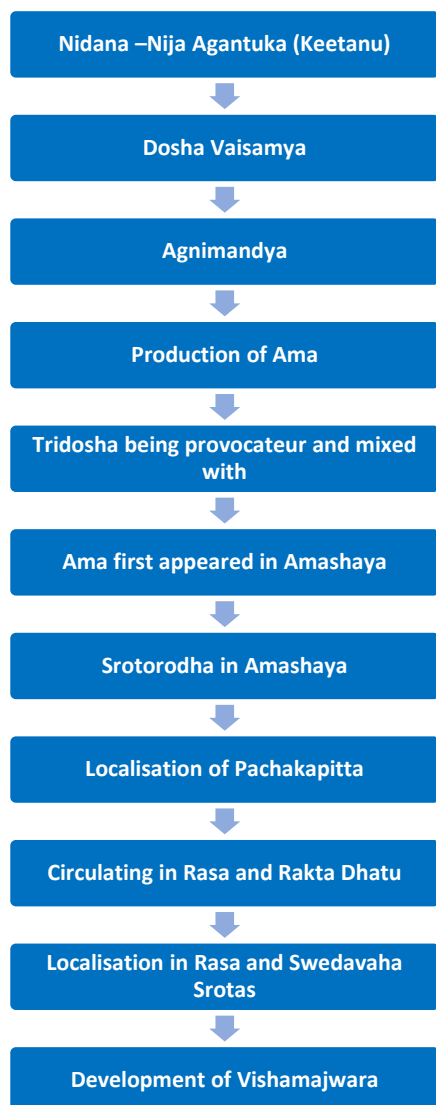
Sadhya-Sadhyata is very important to assess the prognosis of disease before starting treatment. In a person who is strong, vitiation of *Dosha* is mild without any complication of *Jwara* is said to be *Sadhya*.

If the *Jwara* developed by strong positive factors which all the sign and symptoms are present, function

of *Indriya* (sense organ) are derranged, 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*, *Durbala*

Flow chart –1

Schematic diagram of *Vishamajwara Samprapti*



Indriya, *Tikshna Jwaravega*, *Durbalata*, *Prabahani*, *Aruchi* and function of *Indriyas* become feeble then the *Jwara* is said to be *Asadhya*.

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 *Dhatu*s like *Asthi*, *Majja* leaving to development of other diseases.

The *Bhutavisanga Vishamajwara* depends upon *Bhaya*, *Bala*, *Agni*, *Prakriti* and the involvement of *Dhatu*s. 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 *Dosha* (*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 reliefs. Some Lauha preparations like *Vishamajwarantaka Lauha*. *Sarbajvarahar 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 *Tiktarasa* (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.

REFERENCES

1. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), Nidana 1/16-20
2. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), Nidana 1/16-20
3. Susruta, Susruta Samhita, Varanasi: Krishnadas Academy; 1980. (Krishnadas Ayurveda series 51), Uttara 39/51-57)

<u>Rasayogas</u>	<u>Choornas</u>	<u>Kwatha</u>
<i>Vrihad</i>	<i>Anantadi Choorna.</i>	<i>Guduchyadi Kwatha</i>
<i>Kasturibhairava</i>	<i>Sudarshana Choorna</i>	<i>Pathyadi Kwatha</i>
<i>Rasa.</i>	<i>Mahasudarshana</i>	<i>Mustaparpatkadi</i>
<i>Putpakwa</i>	<i>Choorna</i>	<i>Kwatha</i>
<i>Vishamjwarantaka</i>	<i>Nimbadi Choorna</i>	<i>Nagaradi Kwatha</i>
<i>Lauha</i>	<i>Dadimashtaka</i>	<i>Mustadi Kashaya</i>
<i>Sarvajwarahara</i>	<i>Choorna</i>	<i>Kiratiktakadi Kwatha</i>
<i>Lauha</i>	<u>Arishta</u>	<i>Kshudradi Kwatha</i>
<i>Sannipatabhairava</i>	<i>Amrutarishta.</i>	<i>Parpatkadi Kwatha</i>
<i>Rasa</i>	<i>Kutajarishta</i>	<i>Tiktadi Kwatha</i>
<i>Kanakasundar</i>	<u>Pralepa</u>	<i>Drakshadi Kwatha</i>
<i>Rasa</i>	<i>Kulatthadipralepa</i>	<i>Hiberadi Kwatha</i>
<i>Panchvaktra Rasa</i>	<i>Gairikadipalepa.</i>	<i>Patoladi Kwatha</i>
<i>Jalabandhu Rasa</i>	<i>Dashamoolapralepa</i>	<i>Lodharadi Kwatha</i>
<i>Laghusoochikabh</i>	<u>Ghrita</u>	<i>Duralabhadi Kwatha</i>
<i>rana Rasa</i>	<i>Indukanta Ghrita.</i>	<i>Chandanadi Kwatha</i>
<i>Mahajwarankusha</i>	<i>Panchatikta Ghrita.</i>	<i>Mustadyaasta</i>
<i>Rasa</i>	<i>Shatpala Ghrita.</i>	<i>Dashanga Kwatha</i>
<i>Jwarankush Rasa</i>	<i>Amritashatpala</i>	<i>Astadashanga Kwatha</i>
<i>Hutashana Rasa</i>	<i>Ghrita</i>	<i>Parushakadi Kwatha</i>
<i>Agnikumar Rasa</i>	<i>Pippalyadi Ghrita</i>	<i>Shrangyadi Kwatha</i>
<i>Trinetra Rasa</i>	<i>Kalyanaka Ghrita</i>	<i>Shatyadi Kashaya</i>
<u>Vati</u>	<i>Mahakalyanaka</i>	<i>Panchtikta Kashaya</i>
<i>Sanjivanivati</i>	<i>Ghrita</i>	<i>Kiratadisapta Kashaya</i>
<i>Sudarshanaghan</i>		<i>Shalparnyadi Kashaya</i>
<i>Vati</i>		
<i>Amrutadivati</i>		
<i>Jwaraghnavati</i>		

4. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), Nidana 1/16-20
5. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), Nidana 1/16-20
6. Susruta, Susruta Samhita, Varanasi: Krishnadas Academy; 1980. (Krishnadas Ayurveda series 51), Uttara 39/51-57)

7. Singh. R.H, Principles of Ayurvedic diagnosis and treatment, Vol-2, 2nd edition, 1991, Choukhamba Amarabharati Prakashan, Varanasi, p 352-353
8. Sharma. P.V. Vedic Medicine : in History of Indian Medicine in India, 1st print, 1992, India National Science academy, New Delhi, p 20
9. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), Chikitsa 3/74-76
10. Vagbhata, Astanga Hrudaya, Varanasi: Krishnadas Academy; 1982.. (Krishnadas Academic series 4), Nidana, 1/64-65
11. Hareeta Samhita, Sutra 2/178-199
12. Madhava Nidana, ed. Yadunandana Upadhyaya, with Vijaya rakshita - Madhukosha, 1980, chaukambha Sanskrit Orientalia, Varanasi, ref. 2/8-10
13. Patak RR; Therapeutics guide to Ayurvedic medicine, 1st ed, 1970, Shree Baidyanath Ayurveda Bhavan, Patna, p 33-41
14. Gupta KRL, Hindu practice of medicine, 2nd ed, 1986, Sri Satguru publications, New Delhi, p 1-7
15. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), Chikitsa 3/217-218
16. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), Chikitsa 3/217-218
17. Susruta, Susruta Samhita, Varanasi: Krishnadas Academy; 1980. (Krishnadas Ayurveda series 51), Chikitsa 3/68-70
18. Dash, Bhagawan, Kashyap Lalith, Diagnosis and Treatment of diseases in Ayurveda, part -1, Toderananada Ayurveda Saukhyam series no-3, p38-70
19. Dash jagabandhu, Clinical study of Panchatikta Ghanavati on *Vishamajwara*, Thesis, 1982, Utkal university, Bhuvaneswar, Orissa
20. Panda AK, Clinical usefulness of Sudarshana Churna – A traditional Ayurvedic preparation in Bhutavishanga Visamajvara (of Malarial origin), thesis, 1997, IPAE&R, Department of Kayachikitsa, SVSP Hospital, Calcutta University, Calcutta
21. Agnivesa, Charaka Samhita, 4th ed. Varanasi: Chaukhambha Sanskrit Sansthan; 1994. (Kasi Sanskrit series 228), sutra, 3/34-35
22. Vagbhata, Astanga Hrudaya, Varanasi: Krishnadas Academy; 1982.. (Krishnadas Academic series 4), Nidana, 2/56-57
23. Susruta, Susruta Samhita, Varanasi: Krishnadas Academy; 1980. (Krishnadas Ayurveda series 51), Uttara, 39/57-58, 92
24. Madhava Nidana, ed. Yadunandana Upadhyaya, with Vijaya rakshita - Madhukosha, 1980, chaukambha Sanskrit Orientalia, Varanasi, 2/28
25. Sen, Ganath, The Siddhanta Nidanam, Vol-2, 5th ed, Choukhamba Sanskrit Series, Varanasi, 1966:112-115
26. Madhava Nidana, ed. Yadunandana Upadhyaya, with Vijaya rakshita - Madhukosha, 1980, chaukambha Sanskrit Orientalia, Varanasi, 2/28
27. Susruta, Susruta Samhita, Varanasi: Krishnadas Academy; 1980. (Krishnadas Ayurveda series 51), Uttara, 39/53
28. Gaur, Vaidya Banwarilal, Ayurveda Chikitsa Vijnana, Vol-1, 1st ed, 1985, Publication Scheme, Jaipur, p 151-152
29. Agnivesha, Charaka Samhita, Bramahananda Tripathi editor, Charaka Chandrika Vyakhya, 1988, Chowkhambha Surabharathi Prakashan, Varanasi, Chikitsa 3/55 (commentary) p 127
30. Susruta, Susruta Samhita, Varanasi: Krishnadas Academy; 1980. (Krishnadas Ayurveda series 51), Chikitsa 3//61-62
31. Susruta, Susruta Samhita, Varanasi: Krishnadas Academy; 1980. (Krishnadas Ayurveda series 51), Chikitsa 3//71
32. Kashyapa Samhita Khila stana, 1 chapter, sloka 36-37

How to cite this article: Saurabh Parauha, Hullur M.A., Prashanth A.S. A Litreary Review of Vishama Jwara and its principle of treatment. J Ayurveda Integr Med Sci 2016;2:64-73.

<http://dx.doi.org/10.21760/jaims.v1i2.3668>

Source of Support: Nil, **Conflict of Interest:** None declared.