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AN OBSERVATIONAL SURVEY OF THE TRADITIONAL MEDICINAL PRACTICES WITH REGARD TO
SUTIKA PARICHARYA (POST-NATAL-CARE) IN INDIA

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ABSTRACT

Folklore medicine is an integral part of ancient civilizations like India. The various traditional practices have been carried over through generations. Folklore plays a major role in post natal care, prevention and cure of diseases of the puerperal women. Data was collected by interview method from 30 subjects of different regions of India (Karnataka, Kerala, Rajasthan, Maharashtra, Uttar Pradesh, Haryana, Bihar and Chhattisgarh) who have either practiced or experienced folk practices. The data was analysed and it was observed that 36.67% of the subjects adopted postnatal period up to 3 months, 86.67% of the subjects practiced Abhyanga (massage) with medicated oil or ghee, 36.67% of the subjects started bath from 2nd day of delivery, 40% of the subjects applied abdominal binder up to 2 months and 23.33 % of the subjects practiced meat soup intake from the 4th day onwards. It was observed that there was a similarity in certain practices like pattern of rest, sleep, use of hot water, massage, Yoni Dhoopan, Yoni Prakshalon, customized rooms for the woman and child and special beds. The traditional pattern of Sutika care are as such a modified adaptation of the methods explained in Ayurveda. The difference in practices observed can be attributed to the availability and century’s long history of practice. There are certain errors in the practices which are owing to the errors occurring transfer of knowledge. Adopting the Sutika Paricharya explained in the classics and creating optimum awareness can give an authentic outlook to the traditional Indian practices with special reference to post natal care.

Key words: Folklore, Post natal care, Sutika Paricharya, Tradition, India.

INTRODUCTION

There are three main stages of every woman’s life, it includes - Pregnancy, Parturition and Puerperium (Sutika). Among them, puerperium is the one which is ignored the most, by the new mother as well as the elated relatives. Puerperium is the period following child birth during which the body tissues, specially the pelvic organs revert back approximately to pre-pregnant state both anatomically and physiologically. The woman is termed as a puerpera. It begins as soon as the placenta is expelled and lasts for approximately 6 weeks 1 Puerperium is the phase where the woman must be prepared for the forthcoming life, to take good care of the child and deal with the family, to retrieve her body and to prepare her for further pregnancy. If this stage is neglected, as we see in most cases, mortality and morbidity are prone to occur. It is clearly stated that if the proper post natal care has not been followed it may lead to many puerperal disorders.

Traditional medicinal practices in the form of Ayurveda, Unani, Homeopathy, Naturopathy and folk medicinal system co-exist side by side in India and have century’s long history of practice. Among the various systems, folk medicinal system is possibly the least complicated and mainly relies on medicinal plants and home remedies for treatment of various ailments, including complicated ailments like diabetes, hypertension, rheumatism, heart disorders and also for the management of the ante natal care, deliveries and post natal care too. The rural population relies primarily on the folk practitioners for providing primary health-care. The practices adopted by a folk practitioner have been found to be quite diverse in a number from practices adopted by folk practitioner of different regions of the country. This diversity even extends to folk practitioner, who may be practicing in adjacent villages or sometimes, even in the same village. As a result to get a comprehensive viewpoint of practices related to the post natal care, it is necessary to conduct surveys among the folk practitioner of as many areas of India as possible. Ayurvedic influences were observed in the practices by folk practitioner.

MATERIALS AND METHODS

Data was collected by interview method with the help of a semi-structured questionnaire from 30 families of different regions of India (Karnataka, Kerala, Uttar Pradesh, Rajasthan, Maharashtra, Haryana, Bihar and Chhattisgarh) who have either practiced or experienced folk practices. Set of questions were asked during interview as shown in the Table 1.
Table 1: Set of questions asked during survey

<table>
<thead>
<tr>
<th>S.N.</th>
<th>Set of questions asked</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Postnatal period</td>
</tr>
<tr>
<td>2</td>
<td>Massage advised</td>
</tr>
<tr>
<td>3</td>
<td>Day of first bath after delivery</td>
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<tr>
<td>4</td>
<td>Duration of abdominal binder application</td>
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<tr>
<td>5</td>
<td>Meat soup intake</td>
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<tr>
<td>6</td>
<td>pattern of rest</td>
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<tr>
<td>7</td>
<td>Sleep</td>
</tr>
<tr>
<td>8</td>
<td>Use of hot water</td>
</tr>
<tr>
<td>9</td>
<td><em>Yoni Dhoopan</em> (vaginal fumigation)</td>
</tr>
<tr>
<td>10</td>
<td><em>Yoni Prakshalan</em> (vaginal cleaning)</td>
</tr>
<tr>
<td>11</td>
<td>Customized rooms for the woman and child</td>
</tr>
<tr>
<td>12</td>
<td>Special beds</td>
</tr>
</tbody>
</table>

Graphs:
- Graph 1: Postnatal period wise distribution among 30 families
- Graph 2: Massage wise distribution among 30 families
- Graph 3: First bath after delivery among 30 families
- Graph 4: Abdominal binder duration among 30 families
- Graph 5: Meat soup intake wise distribution among 30 families
RESULT

It was observed that there was a similarity in certain practices and also difference in the practices adopted by folk practitioner of different regions. Those are as follows:

1. Incidence of postnatal period: Post natal period wise distribution shows that the maximum number of family, i.e. 36.67% were following post natal regimen up to 3 months, 30% were following up to 1.5 months, 16.67% were following up to 5 months, 6.67% were following up to 2 months and 9.9% were following up to 1 month, as shown in the Graph 1.

2. Incidence of massage: Among 30 families, most of the families i.e. 86.67% were having practice of massage after delivery for certain period. As shown in Graph 2.

3. Incidence of first bath after delivery: Among 30 families, maximum numbers of subjects were having practice of first bath on the third day after delivery. As shown in Graph 3.

4. Incidence of abdominal binder duration: Among 30 families, most of the families were having practice of abdominal binder up to 2 month after delivery. As shown in Graph 4.

5. Incidence of meat soup intake: Among 30 subjects, maximum numbers of non vegetarian subjects were having practice of starting meat soup intake from the 4th day after delivery. As shown in Graph 5.

DISCUSSION

Garbhní Parīchārya and Sutika Parīchārya are two unique concepts explained in detail in the classical text book of Ayurveda for the women health. The classical text books of Ayurveda have mentioned a strict regimen of diet, medicine and activities under the heading of the Sutika Paricharya (post-natal care) to prevent any complications during Puerperium (Sutika). It was observed that there was a similarity in certain practices regarding post natal care by the folk practitioner, like (1) pattern of rest and sleep: puerperal women are advised to take proper rest, (2) use of hot water: for all purposes external as well as internal uses they are advised to use hot water only, (3) massage with medicated oil or ghee: according to the availability of the drug as turmeric (Curcuma Longa), garlic (Allium Sativum), Cumin seed (Cuminum cyminum) and different types of oil as Coconut oil, castor oil, sesame oil, (4) Yoni Dhoopan (vaginal fumigation) and Yoni Prakshalan (vaginal cleaning): they are advised for vaginal cleaning with hot water after that fumigation of vaginal area with Guggulu (Commiphora mukul) fumes at least twice daily, (5) customized rooms: for the woman and child generally separate room with calm and low light to provide good environment for proper rest and (6) special types of bed. The difference in practices observed can be attributed to the availability and Satmyata (congenial) for the puerperal women according to the particular region. There are certain errors in the practices which are owing to the errors occurring transfer of knowledge. The traditional patterns of Sutika (puerperal) care are as such a modified adaptation of the methods explained in classical text book of Ayurveda. But in clinical methods there are some wrong practices adopted by few families such as no use of abdominal binder, no massage practices etc, which should be correct by women awareness programmes. Everyone should give utmost importance to the Sutika Paricharya (post natal care) for healthy mother, healthy baby and healthy nation.

LIMITATIONS

The sample size of the survey is small, we can take large number of sample for the further study and also the number of question asked can be increased.

REFERENCES


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