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COMPREHENSIVE INSIGHTS INTO AYURVEDIC MANAGEMENT OF AHIPUTANA IN CHILDREN: A LITERATURE REVIEW

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ABSTRACT

Ahiputana (commonly referred to as napkin rash) is classified as a Kshudraroga in Ayurvedic texts and is extensively described in all major Samhitas. This condition, characterized by Kapha and Rakta Dosha predominance, is frequently observed in infants and young children, with a prevalence rate ranging from 4-35% in children up to 2 years of age. Ahiputana primarily arises due to inadequate hygienic practices, prolonged sweat retention, and the subsequent formation of ammonia, which causes burning rashes and inflammation in the anal region. One of the critical causative factors, as per Ayurvedic principles, is Stanyadushti (vitiation of breast milk). The Samhitas advocate a dual approach to management: treatment of the mother to address Stanyadushti through Nidana Parivarjana (eliminating the root cause) and corrective measures, coupled with direct therapeutic interventions for the child. This comprehensive strategy ensures both symptom relief and long-term prevention.

Ayurvedic management involves

• Bahya Chikitsa (external treatments): Application of herbal pastes and medicated oils to soothe and heal the affected skin.

INTRODUCTION

Ahiputana is a prevalent issue frequently encountered in pediatric outpatient departments (OPD). References to Ahiputana in Ayurveda are found in Sushruta Samhita, where it is categorized under Kshudraroga. In Ashtanga Hridaya, the condition is described using various terms such as Gudakuttaka, Mathrukadosha, Ahipoothana, Prishtaru, and Anamaka, each highlighting distinct characteristics of the disease. A comprehensive understanding of Ahiputana is crucial to developing effective management protocols, providing significant relief to affected infants and their caregivers. This paper aims to present a detailed review of Ahiputana.

Derivation of *Ahiputana* and Its Synonyms Understanding the synonyms of Ahiputana offers valuable insights into the nature and nuances of the disease.

1. *Ahiputana*^[3]: The term in Sanskrit translates to "sores on the posterior part of the body." Acharya Indu associates *Ahiputana* with *Putana-graha*, emphasizing its affliction and severity.

- 2. *Mathrukadosha*: This term signifies a disorder arising from maternal causes. *Matruka* refers to "mother" or "maternal," and *Dosha* indicates "flaw" or "disorder." It suggests that the condition may result from improper maternal care or vitiated breast milk.
- **3.** *Gudakuttaka*: The term implies "a condition that causes cuts or afflictions in the anal region" (*Guda* = anal region; *Kuttaka* = cutting or inflicting damage). [4]
- **4.** *Prishtaru*: Derived from *Arus*^[5] (sore or lesion) and *Prishta*^[6] (back), this term denotes sores or lesions on the posterior or back region.
- **5. Anamaka**^[7]: This term translates to "unspecified," "unknown," or "enigmatic," indicating a condition with ambiguous or less defined characteristics.
- **6.** *Durnama*: Often used as a reference to hemorrhoids, it reflects a condition involving discomfort and lesions in the anal or surrounding region.

This exploration of terms provides deeper insights into the multifaceted nature of *Ahiputana*, aiding in better understanding and clinical application of Ayurvedic concepts.

Etiology and Pathology of *Ahiputana* ^{[8][9]} The primary causes of *Ahiputana* are as follows

- 1. Lack of cleanliness: Failure to clean the diaper area of the infant immediately after the passage of stools and urine, often due to negligence by the mother (*Matrukadosha*).
- **2. Infrequent bathing**: Irregular bathing practices contribute to poor hygiene.
- **3. Sweating**: Excessive sweating in infants, especially in warm climates, aggravates skin irritation.
- **4. Vitiated breast milk**^[10]: The consumption of *Dushta Stanya* (vitiated breast milk) is a significant cause.
- **5.** *Putana-Graha: Ahiputana* is linked to *Putana-Graha*, described in Ayurveda as an infectious diarrheal condition associated with *Graha Rogas* (infections and sepsis). [11]
- **6. Tender infant skin**: Acharya Kashyapa highlights the delicate nature of an infant's skin, which is prone to damage due to friction from clothing, contact with feces and urine, exposure to warm climates, excessive sweating, and improper cleansing. Overuse of powders or harsh cleansing can further irritate the skin. [12]

Doshas and Dushyas Involved in Ahiputana [13][14]

Ahiputana primarily arises from the vitiation of *Rakta* (blood) and *Kapha Dosha*, as elaborated by Acharya Sushruta and Vagbhata. Dalhana, in the *Nibandhasangraha*, states: "Ahiputanam kapha-raktajam jneyam", emphasizing the role of these two *Doshas*.

In the management of Ahiputana, Acharya Vagbhata describes the involvement of Kapha and Pitta Doshas in both the mother and child as key contributors to the disease. He recommends treatments that pacify Kapha and Pitta in breastfeeding mothers. The role of Pitta Vrana Chikitsa (wound management for Pitta vitiation) Raktamoksha (bloodletting) highlights importance of addressing Pitta and Rakta in treating the condition. The *Dhatu* involved is primarily *Twak* (skin), which corresponds to Rasa Dhatu (the first tissue formed after digestion). The involvement of Malas (excretory wastes like feces, urine, and sweat) is attributed not only to the Upalepa (local accumulation) around the perianal region but also to the vitiation of Mala (feces) caused by Kapha-Pitta vitiated breast milk and the influence of Putana-Graha.

Pathogenesis of Ahiputana^{[15][16]}

Ahiputana develops primarily due to inadequate cleansing of the anal region following defecation and insufficient bathing of a sweating child. The smearing of *Mutra* (urine), *Mala* (fecal matter), and *Sweda* (sweat) over the perianal region leads to *Utkleda*^[17] (excessive moisture or fermentation), which subsequently vitiates *Rakta* (blood) and *Kapha Dosha* in the skin. The

vitiation of Rakta and Kapha doshas initially manifests as *Kandu* (pruritus) in the anal region. Persistent itching and scratching result in *Pitaka* (pustules) or *Sphota* (papules) with *Srava* (discharge). These eruptions evolve into Vrana (ulcers) or wounds, which merge to form a severe and extensive rash characteristic of Ahiputana. This large, inflamed ulcer, referred to as Ghora Vrana, is associated with Bhuri-Upadrava (multiple complications). The condition is described as being the opposite of Sanniruddha-Guda, where anal stricture occurs. Instead, Ahiputana involves gaping of the Guda (anal opening) due to frequent stools, ulceration, and inflammation. Gayadasa, in his commentary, supports this distinction, noting that Ahiputana is described after Sanniruddha-Guda in Sushruta's Kshudraroga Nidana.

Clinical Features of *Ahiputana*^{[18][19][20]} Signs and Symptoms

- 1. *Kandu*: Pruritus around the *Guda* (anal region).
- 2. Daha: Burning sensation.
- 3. *Sphota/Pitaka*: Appearance of papules or pustules.
- 4. Ruja: Pain in the affected area.
- 5. *Tamra-Vrana*: Ulcers with a coppery-red hue.
- 6. *Srava*: Discharge from the ulcers.
- 7. Ekibhuta-Vrana: Merged or blended ulcers.
- 8. *Ghora*: Horrible and severe appearance of the lesions.
- 9. *Bhuri Upadrava*: Accompanied by multiple complications, including *Jwara* (fever).

Types of $Ahiputana^{[21]}$

While Vagbhata and Sushruta do not mention specific types, Bhoja categorizes *Ahiputana* based on the predominance of doshas and their severity:

- Vata-predominant: Dryness, severe pain, and hard lesions.
- **2.** *Pitta*-predominant: Red, inflamed, and burning lesions with discharge.
- **3.** *Kapha*-predominant: Thick, pale, and slow-healing lesions with itching.
- **4.** *Dwidoshaja*: Involvement of two *Doshas*, with mixed symptoms.
- Sannipataja: Severe form involving all three Doshas.

These classifications offer insights into the varying presentations of *Ahiputana* and guide dosha-specific management strategies.

Management of Ahiputana [22][23]

Stanyasodhana (Purification of Breast Milk): The initial step in managing Ahiputana is the purification of Stanya (breast milk). Drugs pacifying Pitta and Kapha Doshas are recommended for this purpose. Sushruta emphasizes that Ahiputana in infants becomes Sadhya (curable) only when breast milk is purified. A medicated Ghrita prepared with Patolapatra, Triphala, and Rasanjana is suggested for Pana (oral intake), as it can effectively address even Krichrasadhya (difficult-to-treat) Ahiputana.

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- 1. Use of Medicated Ghrita: Dalhana explains that the above-mentioned Ghrita purifies the breastfeeding mother's Dhatus. This medicated ghee can also be applied to the ulcers after proper Kshalana (cleansing). Administering Stanyasodhana drugs not only purifies breast milk but also delivers therapeutic benefits to the breastfed child by carrying the drug via the milk. This promotes the purification of Rasa Dhatu (the first tissue formed after digestion) in both mother and infant, resulting in healthy skin.
- 2. Decoctions for Oral Intake: Vagbhata advises a cooling drink prepared with boiled and cooled water for the mother to pacify *Pitta Dosha*. Indu and Chandra recommend *Panaka* prepared with *Sitaseeta*^[24] (white sandalwood).
- 3. Tarkshya *Antarapanaka*: Ashtanga Sangraha mentions *Tarkshya Antarapanaka* as a remedy for *Anamaka*, *Sthoulya*, *Pittasra*, *Kandu*, *Gandagalamaya*, *Udaraatyunnati*, and related conditions. [25]
- **4. Makshika Rasanjana Yoga**: *Indu* highlights the use of *Makshika* (honey-based formulation) and *Rasanjana* internally and externally. These can be applied as a paste or used in therapeutic formulations. [26]

5. External Applications

- Swetachandana with honey and Tarkshyasaila for ulcer application.
- Sushruta suggests Badari twak lepa with Saindhava and Amla (acidic mediums like kanchika) to restore the skin's natural pH.
- Cleansing with decoctions such as *Triphala*, *Badari Plakshatwak Kashaya*, or *Triphala* alone is
 beneficial in cases of severely oozing ulcers.

6. Dusting Powders and Lepas

- Powders made of Kaseesa, Gorochana, Tutha, Manohwa, Haritala, and Rasanjana, mixed with Amlakanchika, can be used for Lepa or dusting due to their antiseptic and antimicrobial properties.
- Yashtimadhu and Shankha Churna or Asanatwak Churna are also useful for dusting.
- Kapalatuthaja Churna is recommended for Avachurnana (dusting).
- **7. Raktasrava** (**Bloodletting**): In severe cases of redness and itching, *Raktasrava* is advised. *Jalouka avacharana* (leech therapy) is preferred for infants, as it is painless and avoids complications.

8. Taila and Ghrita Applications

 Panchavalkala taila, Jatyadighrita, Kera, Kaseesadi Taila, Durvadi Ghrita, and Shatadhouta Ghrita can be applied depending on the dosha involvement and the condition of the ulcer.

- Procedures like Pradeha (poultice), Parisheka (sprinkling), Sarpipana (ghee intake), and Virechana (purgation) are mentioned in Charaka's Pittavrana Chikitsa for managing ulcers.
- **9. Dietary Recommendations**: The mother and infant should adhere to a light diet including Manda, Peya, Vilepi, Simbidhanya, *Shaka*, and *Ghrita* for maintaining balance. [27]

RESULTS AND DISCUSSION

Ahiputana is primarily caused by Stanyadushti (vitiated breast milk), which is a significant etiological factor along with poor hygiene in the anal region postdefecation and urination. Nidana Parivariana (avoiding causative factors) and Stanyasodhana (breast milk purification) form the cornerstone of Ahiputana treatment. The use of Stanyasodhana Gana drugs, medicated decoctions, dusting powders, Vranahara Tailas, Ghritas, and Jalouka Avacharana are pivotal. External applications like Swetachandana, Tarkshyasaila, Kaseesadi Churna, Kapalatuthaja Churna, and therapies with acidic mediums help restore the normal pH of the infant's skin. Despite the detailed guidelines in Ayurveda, the therapeutic measures for Ahiputana, particularly Lepas and Stanyasodhana, remain underutilized in the Kaumarabhritya OPD. Their application could significantly improve outcomes.

CONCLUSION

Ahiputana is predominantly caused by Stanyadushti, along with unhygienic practices in the care of the infant's perianal region. A comprehensive understanding of its etiology, pathogenesis, and management provides Kaumarabhrityakas (pediatric Ayurveda practitioners) with effective tools for treating Ahiputana. By incorporating Ayurvedic principles into clinical practice, a holistic and dosha-specific approach can ensure optimal care for affected infants.

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