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An ayurvedic perspective on malaria (Vishamajwara): A systemic review

Dr. Akanksha Ojha JoshiDOI: <https://doi.org/10.22271/23487941.2023.v10.i6a.719>**Abstract**

Malaria is a serious problem in Africa; it accounts for 20% of all child deaths and claims a child's life every 30 seconds. Both the incidence and fatality rates of malaria are rapidly increasing. Vishama Jwara, or malaria, is one of the most common diseases spread by vectors. A female Anopheles mosquito carrying parasites belonging to the genus Plasmodium is the vector that carries the malaria protozoa virus, which causes the sickness in humans. An estimated 300–500 million clinical cases of malaria occur globally each year, and the disease is thought to kill 1.1–2.7 million people globally each year. The primary cause of it is Plasmodium falciparum. P. falciparum malaria caused 0.7 million cases and 943 fatalities in India in 2003, according to reported cases of 1.65 million and 0.7 million, respectively.

Keywords: Vishama Jwara, Malarial Fever, Plasmodium vivax**Introduction**

Malaria is a highly contagious disease that is often lethal in Asia, Africa, and America. Approximately 250 million cases are recorded globally year, with over one million deaths resulting from them. One of the Millennium Development Goals set by the UN is the elimination of malaria. According to the World Malaria Report 2015, almost 80% of the Plasmodium vivax burden worldwide is concentrated in three countries, including India. Moreover, 70% of the malaria cases in the South-East Asia region are said to occur in India^[1]. Plasmodium vivax malaria is found throughout much of the world and may affect a greater number of people than Plasmodium falciparum malaria. In Ayurvedic literature, malaria fever is called Vishamajwara (intermittent fever). In Vedic literature, fever is mentioned historically and is called Takma in Atharvaveda. The fact that the Caraka samhita, the first complete Ayurvedic compendium, opens its section on therapeutics with the treatment of Jwara (fever), shows how important fever therapy is in Ayurveda. Many other fevers are described in Ayurveda, such as Santata Jwara, Sannipata Jwara, Vishama Jwara, Abhishanga Jwara, and Abhigataja Jwara^[2].

Malaria fever is referred to as Vishama Jwara (intermittent fever) in Ayurvedic literature. Since there are Vedic time references for fever, which the Atharvaveda refers to as "Takma," The importance of treating fever in Ayurveda is demonstrated by the fact that the Caraka Samhita, the earliest comprehensive compilation of Ayurveda, begins its section on therapeutics with treating Jwara, or fever. Ayurveda describes several different types of fevers, such as Santatajwara, Sannipatajwara, Vishamajwara, Abhishangajwara, and Abhigatajwara^[3].

Vishamajwara (intermittent fever) is the name for fever that presents with irregular onset (Vishama arambha) and remission (Visarga). In Kashyapasamhita, it is said that Vishamajwara is produced when all three or two humours vitiate and arrive at Rasavaha dhamani, which are channels that contain rasa-type tissue constituents. Because of its erratic start and remission, this illness might be compared to malaria. Clinical signs and symptoms of Vishamajwara (Malaria) include fever with erratic start and remission, excessive thirst, body heaviness, headache, rigors, nausea, vomiting, and broad body pain^[4].

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Methodology

The information on Vishama Jawara and malaria was gathered from a variety of authentic literature sources, including AYU, PubMed, etc.

Malarial Jwara

In his chapter on fever, Acharya Sushruta refers to the Samanya Nidana, which is the common etiological component of all fevers. The Charaka Samhita text book does not contain any descriptions like this one. The basic cause of Jwara (fever) has been identified by several sources, including Kashta (weapons, wooden tools, etc.), Atiyoga and Mityayoga in Panchakarma, traumatic experiences with Sastra, overexertion, Dhatukshaya (depletion of Dhatu), dyspepsia, and visha (mineral toxicity, vegetative toxicity, and toxic end products of the body), among others. Season variations, Asatmya Sevana (indulgent use of food), Mitya Ahara-Vihara Sevana (unhealthy eating practices), and Prapakatha (an inflammatory process) ^[5].

When a woman gives birth improperly, when Abhichara Karma occurs or because of the curse of Devata, Guru (teachers), Kama, Krodha, Bhaya, etc. (parapsychological factors), when Abhishangaja Jwara (evil spirit possession, infections, etc.), when newly delivered women follow these practices, or when breast milk first appears, these are all signs that one is grieving. Rituvypat, often known as seasonal illnesses, is mentioned by Acharya Susrutha in the Ritucharya Adhyaya chapter (chapter on seasonal regimens) ^[6].

Nidana

Any disease's etiological agent is referred to as a nidana. Nidan word is seen as either a causal factor or a diagnostic factor. It is characterized as the causal factor in the Nidan Panchaka. In Nidan Pancha-ka, a factor known as Hetu has the ability to indicate the onset of sickness either rapidly or gradually. As per Acharya Sushrut, "Yogo Nidana Parivar-janam Sankshepataha Kriya." ⁹. Thus, the most effective and least time-consuming course of therapy is to avoid the causing variables. Both the underlying pathophysiology and the cause of the disease are attributable to Nidan. According to Shat Kriyakala, nidana is the initial stage of illness genesis and falls under Sanchaya. Each illness has a unique Nidanatamak Hetu ^[7].

According to Charaka, all Vishama jwara are originally Tridosha- ja. Additionally, according to Sushruta, Agantuka Karana, or Parahetu, is the primary cause of Vishama Jwara, but Tridosha and Vata are the prominent Doshas that cause the condition to occur. Eleven In her role as Bhutabhisanga, Dalhana illuminates this Parahetu. Vagbhat refers to Mandagni's function during Adanakala in Astanga Hridhaya as a significant or primary cause of the appearance of Vishama jwara. Additionally, he promoted the idea that Vishama jwara might result from an emaciated patient who follows an irregular diet throughout the convalescent phase even when there is still a minor amount of residual Dosh ^[8].

Roopa

Poorvaroopa Bhavi Vyadhi Bodhkamev Lingam. Thirteen Poorvaroopa refers to the signs that an illness is about to strike. Put another way, poorvaroopa refers to the mild symptoms that appear before the discomfort. Kriyakala states that Sthansanshrya Awastha is the first person to emerge in the Samprapti of the sickness. We might uncover indications

or clues regarding the condition in Poorvaroopa. There are two varieties of Poorvaroopa: Samanya Poorvaroopa, which indicates illness without providing details on Dosh derangement, and Vishista Poorvaroopa, which provides information regarding Dosh derangement ^[9].

It is the disease's confirming symptom. Nevertheless, panna vyadhi bodhaka mev lingarupam. Roopa identifies the particular ailment by exhibiting its particular symptoms. After the completion of the Dosh Dushya Sammurchhana, it manifests in Vyaktawastha. The onset and development of the illness are invariably followed by the appearance of the Roopa. Planning for a certain disease's Vyadhi Pratyantik Chikitsa is assisted by Roopa Awastha. When the Roopa shows up, the illness becomes easier to comprehend ^[10].

Samprapti

The ailment appears as a result of a certain Dosh activity, and knowledge of these occurrences is known as Samprapti. Samprapti refers to the entire course of the sickness, from Nidan Sevan to Roopa's appearance. Samanya Samprapti and Vishista Samprapti are the two varieties of Samprapti. Any disease's Shatkriyakala is described in Samanya Samprapti. Sankhya, Pradhanya, Vidhi, Vikalpa, Bala, and Kala Samprapti are among the Vishista forms of Samprapti. Each of these elements supports Samprapti's Vighatana and aids in identifying the disease's contributing aspects ^[11].

Classification of Nidana

Vishama Jwara occurs when any of the Dhatus are entered and there is a slight Dosh aggravation as a result of improper dietetics and behavior ^[12].

Viprakrishta Hetu

Vyayama, Divaswapna, Kashaya Sevena, and so on (the factors being, among other things, eating strange foods, sleeping throughout the day, and overexerting oneself). These kinds don't immediately make you sick, but their cumulative or delayed effects eventually do ^[13].

Vyabhichari Hetu

The aspects that determine if and how a disease manifests in an individual are Dosh, Dooshya, and etiological variables. A disease that does not develop or appears slowly, appears but is mild, or has symptoms that are not well expressed might be caused by disturbances in the equilibrium state of Nidana, Dosh, and Dooshya, their lack of mutual support, or their temporal weakness. When these three are slightly or very favorable to each other, the outcome might be the reverse. Stated differently, the ailment may present itself readily, immediately, or completely ^[14].

Discussion

When a doctor uses the right diagnosis technique, they always have successful therapy. A precise diagnosis may be made with the aid of these five Nidan Panchaka components. Physicians can detect the condition sooner and prevent future complications by planning treatment based on the Nidana Pancha-ka. It is a tool for diagnosing illnesses from the beginning to the conclusion. The nomenclature of diseases is not as important as determining the specific causes, Dosh vitiation, etiology, or illness progression and monitoring it at an early stage ^[15].

Since the fundamental idea of therapy is Nidan Parivarjana, it

is imperative that Vishama Jwara avoid Nidan in the form of large meals, inappropriate diets, Apathaya-palan, and other such practices in order to prevent the emergence of sickness. This is why understanding Hetu in its early stages is crucial. In the second element, Poorvaroop, aid in the early treatment of partially developed diseases since they call for fewer or easier treatment modalities. Since Vishama Jwara does not have a designated Poorvaroop, the Poorvaroop of Jwara is regarded as its Poorvaroop. The Roopa stage is marked by the completion of the illness's pathogenesis and the manifestation of disease symptoms, which is useful for organizing a targeted course of therapy^[16].

Five subtypes of Vishama Jwara exist: Santata, Satata, Anyedushka, Triteeyak, and Chaturthaka Jwara. Everybody has unique symptoms and a fever pattern. Understanding each Vishama Jwara's Roopa is essential for differential diagnosis and the right sort of treatment for each. The Samprapti provides comprehensive understanding of the ailment, and the Samprapti Ghatak, which is accountable for its pathogenesis, is advantageous for therapeutic purposes. Samprapti also provides information on the path of the disease, the Dhatus involved, and the impacted Srotas. Aagantuja Nidana and Mithya Ahara Vihara have assumed a significant part in the Samprapti of Vishama Jwara in case of residual fever^[13].

In the hidden point of diagnosis, differential diagnosis, and therapy of disease, Upashaya is crucial. Purgatives and emetics should be avoided in Vishama Jwara, however bitter medications like Kirat, Guduchi, Bharangi, Nimba, etc. are helpful. Every element of Nidana Panchaka individually contributes to the accurate diagnosis. When one element of Nidana Panchaka points to a sickness, other features of the system validate the diagnosis. This also holds true for Vishama Jwara. A solid diagnosis is the cornerstone of a strong treatment plan, which elevates a physician's reputation and inspires trust^[14].

Conclusion

Before beginning any form of treatment, a correct diagnosis is necessary. A physician may validate a patient's illness and provide them with better care by using knowledge of Nidan Panchaka. The most effective technique for diagnosing an illness is Nidan Panchaka. Nidan Panchaka of Vishama Jwara has been studied through a variety of extant literary works. The doctor will succeed in practice if they identify the illness and treat patients in accordance with Nidan Panchaka.

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