

**International Journal of Medical Science and Advanced Clinical Research (IJMACR)** Available Online at: www.ijmacr.com

Volume – 1, Issue – 5, September - October - 2018, Page No. : 21 - 25

## Applied Aspect Garbhini Paricharya

Shivaleela\* Dr.Shridevi Reddi\*\* Dr.Sunita Siddesh\*\*\*

<sup>1</sup>PG Scholar, Dept. of PG Studies in PTSR, SKAMCH & RC,RGUHS, Bangalore, Karnataka, India.

<sup>2</sup>Lecturer, Dept. of PG studies in PTSR, SKAMCH & RC, RGUHS, Bangalore, Karnataka, India.

<sup>3</sup>Professor, Dept. of PG studies in PTSR, SKAMCH & RC,RGUHS, Bangalore, Karnataka, India.

**Corresponding Author:** Dr. Shivaleela, PG Scholar, Dept. of PG Studies in PTSR, SKAMCH & RC, Bangalore, Karnataka, India.

## Type of Publication: Original Research Paper

## **Conflicts of Interest:** Nil

## Abstract

For a tiny seed to develop into a mighty tree it needs healthy nourishment. Similarly is the *garbha*. .. A growing fetus requires the best of nourishment for physical and mental development. In this context, ancient *Acharyas* have recommended a balanced nutrition to be given at different stages during antenatal period. Women have special dietary needs during each stage of her life, from adolescence to menopause and great emphasis has been given to maintain optimal nutrition to women in the form of specialised protocol called *Garbini paricharya* which bears a great impact on the fetal growth and development. Keywords: *garbhini paricharya*, antenatal period, fetal growth and development

## Introduction

The term *garbhini paricharya* is a compound of two separate words i.e *GARBHINI & PARICHARYA*. According to *Amarakosha* 

- *GARBHINI* means a lady in which *garbha* is present.
- CHAR or CHARYA refers to SERVICE or NURSING

The literal meaning of *GARBHINI PARICHARYA* is a planned Programme of observation, education, & Medical Management of pregnant lady which is directed towards making pregnancy & Delivery safe. *Ayurveda* lays great emphasis on ensuring holistic approach with the combination of *Ahaara, Vihaara and Aushadha* have been given great significance in antenatal period called *Garbhini paricharya*. Hence attempt is made to emphasize on the modalities of *Garbhini paricharya* with few modulation to the modern lifestyle with a scientific approach<sup>1</sup>.

*Garbhini paricharya* as a prime role in modern era due to the increasing incidences of many of the gestational abnormalities like Gestational Diebetes, Pregnancy induced Hypertension,Gestational Obesity, Gestational thyroid problems and positive Torch Tests etc. Hence attempt is made to emphasize on the modalities of *Garbhini paricharya* with few modulation and scientific approach in explaining them because as many disadvantages seen due to adaptation of modern lifestyle even advantages like education where pregnant women asks for a valid action and role if any modality is asked to be followed.

## Aims & Objectives<sup>2</sup>

- To Facilitate a healthy growth & development of the fetus
- To promote, protect & maintain the health of the mother
- To remove anxiety associated with delivery
- To minimize the complications during labour.

The three fold principle reveals three motives of *GARBHINI PARICHARYA -Anupaghataya, paripurnata, sukaprasava*<sup>3</sup>

*ANUPAGHATAYA* - It means atraumatic pregnancy, Those factors should be avoided which can cause direct or indirect trauma or it can be understood interms of *garbhopagathakara bhavas*.

*PARIPURNATVA* - This indicates continuation of pregnancy till term and full growth and development of the fetus without harming the maternal physiology.

*SUKHAPRASAVAYA* - The events of labour have a long lasting effect on woman psychology hence psychprophylactic preparation of patients for removing fear and tension is essential i.e counselling during labour is advised

## Masanu Masika Garbhini Paricharya

| MONTH                  | CHARAKA <sup>4</sup>  | SUSHRUTHA <sup>5</sup>  | VAGHBHATA <sup>6</sup>                |
|------------------------|---|---|---------------------------------------|
| 1 <sup>stl</sup> month | <ul> <li>Milk</li> <li>Satmya bhojana<br/>twice in morning<br/>and evening</li> </ul> | Madura,SheethaDravapraya<br>aahara  | • Milk,ghee<br>• Satmya<br>bhojana    |
| 2 <sup>nd</sup> month  | Ghee prepared out of<br>madhura rasa drugs (sweet<br>taste drugs)                     | Madura,SheethaDravapraya<br>aahara  | Milk along with<br>madhura rasa drugs |
| 3 <sup>rd</sup> month  | Milk along with honey and ghee  | <i>Madura,SheethaDravapraya</i><br><i>aahara</i> specially cooked<br>sastika rice with milk | Ghee along with honey                 |

| 4 <sup>th</sup> month | Milk with butter   |  | Shashtika shaali with curd,<br>food mixed with milk, butter,<br>and meat of wild animals |   | Milk with butter                                    |
|-----------------------|--|--|--|---|---|
| 5 <sup>th</sup> month | Ghee prepared with<br>butter extracted fron<br>milk                | 1  | <i>Shashtika shaali</i> (rice) with milk, meat of wild animals mixed with milk and ghee  |   | Ghee prepared with<br>butter extracted from<br>milk |
| 6 <sup>th</sup> month | Ghee prepared from<br>milk medicated with<br>madhura (sweet) dru   |  | Ghee or rice gruel medica<br>with gokshura   | ted   | Ghee medicated with<br>madhura dravyas              |
| 7 <sup>th</sup> month | Ghee prepared from<br>milk medicated with<br>madhura (sweet) drugs |  | ee pepared out of<br>thakparnyadi group of drugs   |   | nedicated with madhura<br>as                        |
| 8 <sup>th</sup> month | Ksheera yavagu (gruel)<br>mixed with ghee                          | Asthapana basti<br>Anuvasana basti   |  | Ksheera yavagu (gruel) mixed<br>with ghee<br>Asthapana basti<br>Anuvasana basti |   |
| 9 <sup>th</sup> month | Anuvasana basti<br>Yoni pichu (vaginal<br>tampoon)                 | Unctuous gruels ,meat soup of<br>wild animals<br>Anuvasana basti<br>Yoni pichu |  | Unctuous gruels with meat<br>soup , Anuvasana basti<br>Yoni pichu               |   |

## 1 st trimester (1-3 months)<sup>8,9,10</sup> :

- In first trimester nutrients advised are folic acid, Vit B6, B12, Mg, and Fe. These drugs help in initiating the development of different systems of growing fetus.
- *Ksheera* which is advised by all *acharyas* as an important food intake contains Vit B6, VitB12 and Mg.
- All the *dravyas* mentioned during first three months of *garbhini paricharya* contain all the above essential nutrients told for healthy growth and development of fetus.
- The woman experiences nausea and vomiting ,so can not take proper diet. Use of *sheeta*, *madhura*, *drava ahara* and milk will prevent dehydration and supply required nourishment. Drugs which *are madhura rasa pradana* help in maintenance of pregnancy.

## 2 nd trimester (4-6 months<sup>7, 8, 9, 10</sup>)

गर्भ attains स्थिरता after completion of 4<sup>th</sup> month and
 उपचय of धातुs occur extensively. Hence drugs

advised in this trimester are बृंहण, धातुवर्धन and रसयन in their property.

- According to modern science, pregnant lady in second trimester should intake food that are rich in protein calcium, omega 3 fatty acids, vitamin D and A, which is essential for nourishment of fetus. Butter is rich in omega 3 fatty acids and protein.Butter is necessary for functioning of thyroid health.
- Ghee is rich in vitamin A and has cholesterol property.
- By the end of 2<sup>nd</sup> trimester most women suffer from edema of feet and other complications of water accumulation. Drugs like गोक्षुर are good diuretic. At sixth month it prevents retention of water as well as its complications.

## 3rd trimester (7-9 months)<sup>8,9,10</sup> :

- The drugs mentioned above are also rich in vitamin D, Calcium, iron , protein, fats, carbohydrates which helps in the nourishment of fetal growth.
- It is also rich in carbohydrates & protein . Both are wholesome nutrition which contain vitamins A,D,E,K ,C and minerals NA ,K, P, Ca and Fe are essential for optimal development of fetus in this month.
- In this month anuvasana basti with मधुरौषधसिद्धतैल with yoni pichu is advocated गर्भिणी गर्भमार्गाशय स्नेहनार्थम्, पुराण पुरीष निर्हरणार्थम् which aids in sukha prasava.
- The whole अहार and विहार advised for pregnant woman is this trimester is to attain proper nourishment so as to prevent IUGR.
- Also it prepares गर्भिणि शरीर for स्खप्रसव.

## Panchakarma In Garbhini

a/c Cha sha 8/22

- Vamana, virechana, nasya, raktamoksana and even sarvakala anuvasana and asthapana basti is contraindicated in garbhini.
- Basti can be administered after 8<sup>th</sup> month same way he also mentions of mrudu *vamana,mruduvirechana and mrudu nasya or the tadarthakari upachara in needful conditions i.e*
- Vamana Kavala, Gandusa, Nistivana
- Virechana Gudavarthi
- Nasya Shirobasti

# According To Modern Daily Requirement Of Nutrients

| NUTRIENT OR<br>MINERAL | DAILY<br>REQUIRMENT | FUNCTION  |
|------------------------|---------------------|---|
| VITAMIN A              | 770mcg              | Bones and teeth growth  |
| VITAMIN D              | 5mcg                | Calcium and Phosphorous absorption, Bones and Teeth growth                              |
| VITAMIN C              | 80-85mcg            | Antioxidant, helps in iron absorption and<br>building immunity                          |
| FOLIC ACID             | 600mcg              | Supports the placenta , prevents spina bifida and other neural tube defects             |
| CALCIUM                | 1000-1300mg         | Creates strong bones and teeths, prevents blood clots helps muscles and nerve functions |
| IRON                   | 27mg                | Production of haemoglobin, prevents anaemia,<br>low birth weight and premature delivery |
| PROTIEN                | 71mg                | Production of amino acids and repairs cells   |

## Modern Lifestyle

Modern lifestyle has number of advantages includes easing people life, saving hundreds of peoples lives by the new development of medicine and vaccines, on the other hand different modern lifestyle pattern have negative effects on health physically,psychologically and on society.

## **Diet quality and Habits**

The women's dietary patterns and other factors prior to pregnancy remain similar to that of during pregnancy.The poor dietary habits characterized by high sugar intake and low intake of whole fruits and vegetables and Habits like

smoking exposure to alcohol, caffeine, stress etc are increased in modern life style and are common.Due to all the modification in modern era's lifestyle like exposure of pregnant women to hapazard eating habits, diet style and nicotine.alcohol.caffeine.stress etc other factors to incidence of pregnancy induced hypertension (PIH), gestational diabetes etc are increasing nowadays along with fetal complications .The fetal adaptation to an unfavourable intrauterine environment due to mother's habit permanently increases suspectibility to chronic diseases or disorders later in life .Neurobehavioral changes similar to ADHD symptoms in human children found have been in exposed inutero to nicotine,caffeine,ethanol and stress.

#### Discussion

It is particularly important to pay attention towards fetal nourishment, since India being a developing country, vast majority of Indians belong to lower middle class or poor class. Hence it is essential to identify nutrients which though economically feasible, fulfill maternal and fetal requirements. The Pushti of the garbha can be maintained and modulated at all these stages - prior to conception, during fertilization and during pregnancy. Poshana is exclusively mentioned under rasaja bhava through which we can understand that rasa plays a major role in garbha poshana. During pregnancy the mother acts as a medium through which the nourishment and excretion of the fetus take place and hence the words upasneha and upasweda. Ayurveda prescribes Ksheera during major part of Garbhini avastha. Ksheera though not very cheap, can be afforded if proper enlightenment is provided during antenatal care. Another valuable prescription provided by Ayurveda is ghrita and navneetha. They are very essential for the healthy growth of Central nervous system. Gokshura another prescription given by Ayurveda, it helps in maintenance of fluid balance<sup>11</sup>.

Need of garbhini paricharya in modern era Causes of Maternal Mortality in india are as follows

| Direct cause 70%                                      | Indirect cause 30%  |
|---|---------------------|
| eclampsia (PIH)24%                                    | Anaemia 11%         |
| Haemorrhage (PPH, APH, retained placenta, ectopic)23% | Viral hepatitis 7%  |
| Abortions 10%   | Heartdisease etc 2% |
| Sepsis 7%   |                     |
| Obstructed labour 3%                                  |                     |
| Operative complications 3%                            |                     |

Therefore it is imperative that women of reproductive age and women trying to conceive should consume recommended dietary intakes of nutrients and get rid of habits and exposure to alcohol,caffeine,stress etc.This harmony can be achieved by fallowing *Garbhini paricharya* 

#### Conclusion

- In order to build a healthy society it is essential to have healthy individuals. Health of an individual is greatly influenced during intra uterine stay period.
- Hence understanding and following holistic approach told *in Ayurveda for Garbha Poshana* by adopting and advising *Garbhini paricharya* to a mother is need of the hour.
- The standardization of *the GARBHINI PARICHARYA* and Ayurvedic method of planned pregnancy are needed to optimizie the pregnancy outcome.

## References

 Satyapala, Kashyapa Samhita with Vidyotini Hindi Commentary. Reprint Ed.Varanasi; Chaukambha Sanskrita Sansthana; 2010.

© 2018, IJMACR, All Rights Reserved

- Tiwari P V. Ayurvediya Prasutitantra evum Striroga Part 1, 2nd Edition, Varanasi, Chaukhamba Oriental, 2009, p. 242-243.
- Shriniwas P. Astanga Sangraha of Vagbhata, Sharirasthana, Chapter 3, Varanasi, Chaukhamba Krishandas Academy.
- Shashri S, Pandey K. Chaturvedi G. Charak Samhita of Agnivesha, Revised by Charak and Dridhabala, Elaborated with Hindi commentary, Sharirstahna, Chapter no 8, Varanasi, Chaukhamba Bharti Acadamy, 2007,
- Dwivedi L, Sushruta Samhita, English translation, Vol
   2, 2nd Edition , Sharira Sthana, Chapter no 10, Verse , Varanasi, Chaukhamba Sanskrit Series, 2002.
- Shriniwas P. Astanga Sangraha of Vagbhata, Sharirasthana, Chapter 3, Varanasi, Chaukhamba Krishandas Academy.
- Sharma PV, Dravyaguna vignan (Vol-2) Reprint Ed. Varanasi; Chaukambha Bharati Academy; 2005.
- Shastri Kasinath &Chaturvedi Gorakknath, Ed. Charaka Samhita of Agnivesha revised by Charaka and Dridabala with introduction of Srisatyanarayanasastri, Elaborated Vidyotini Hindi Commentary, vol 2, Chaukambha Bharati Academy, Varanasi (India), Reprint 2007.
- Susruta Samhita Chikitsa Sthana edited with Ayurveda tatvasandipika Hindi Commentary by Kaviraj Ambikadatta Shastri, Published by Chaukambha Bharati Sanskrit Sansthana Varanasi, Part 1, Chapter 35, Reprint 2006,
- Shastri Kasinath & Chaturvedi Gorakknath, Ed.Charaka Samhita of Agnivesha revised by Charaka and Dridabala with Introduction of Srisatyanarayanasastri, Elaborated Vidyotini Hindi Commentary, Vol 2, Chaukambha Bharati Academy, Varanasi (India) Reprint 2007,.

 Sharma PV, Dravyaguna vignan (Vol-2) Reprint Ed. Varanasi; Chaukambha Bharati Academy; 2005.