

International Journal of Indian Medicine



International Journal of Indian Medicine, 2021; 2(11): 33-39



International Journal of **Indian Medicine**



International Category Code (ICC): IIII ICC-1702

International Journal Address (IJA):

A critical review on Garbhini-Paricharya (Ante Natal Care) described in various **Ayurveda Samhitas**

Tarar KD

Professor, Dept of Samhita Sidhhant Smt. Shalinitai Meghe Ayurved Medical College and Hospital, Bhandara (Maharashtra), India.

Abstract:

Pregnancy is a physiological event that occurs naturally in a woman's life. Because Garbha (the foetus) is fully reliant on the mother for sustenance and growth, food plays a crucial role in this situation. Food consumed by pregnant women serves a variety of purposes, including nourishing the mother's body, producing milk, and providing nutrition to the foetus. The Ahara - Vihara that pregnant women follow in order to maintain all of their body processes regular and healthy are referred to as Paricharya. Ayurveda's nine-month diet is a one-of-a-kind concept. It alters in response to the foetus's development in the womb while also ensuring the mother's health. Our traditional literature outlines a detailed and complete routine for the Garbhini to have a safe pregnancy and a healthy baby.

Keywords: Pregnancy, Garbhini, Paricharya, Ahara, Foetus.

Corresponding Author: Dr. Kishor Daulatrao Tarar

MD, Samhita Siddhant Professor, Dept of Samhita Siddhant, Smt.Shalinitai Meghe Ayurved Medical College and Hospital, Bhandara

Email.: drkishortarar@gmail.com Mob.: 9422155505



How to cite this article: Tarar KD. A critical review on Garbhini-Paricharya (Ante Natal Care) described in various Ayurveda Samhitas. Int J Ind Med 2021;2(11):33-39

ISSN: 2582-7634

Introduction:

Garbhavastha (pregnancy) is a physiological situation in which the embryo is conceived and grows in the womb in order to maintain the species. It is a moment of metamorphosis, when incredible transformations occur. The lady would be prone to Vikrutis due to the Prachalita dhatus and Doshas, according to Charak. As a result, the pregnant lady must be handled with extra care. Everything which affects the mother has impact up on the fetus. Everything that happens to the mother has an effect on the foetus. According to Maharshi Charaka, if all six factors, Shukra (sperm), Artava (ovum), Atma, Ashaya (uterus), Kala (time), and the pregnant woman's diet and way of life are normal, she remains healthy and gives birth to a child with good health, energy or strength, voice, compactness, and superiority over other family members. The foetus gets its nutrition from rasa, which the mother provides through the Upasnehan (moisture-attracting) and Upasweda processes (osmosis).[1]According to Maharishi Kashyapa the Rasa formed from mother's diet performs three functions such as

nourishment of woman's body, formation of milk and nourishment to the fetus. Improper diet or mode of life can lead to anomalies of fetus. [2] Thus, to reduce the complications like damage to foetus, risk of miscarriage, anemia and other unforeseen complications related to pregnancy, Garbhiniparicharya (antenatal care) should be followed by the pregnant woman, which is described in our classics. Garbhaja vyadhis are produced as a result of Maatrujaapacharas, according to Acharya Charaka. Vagbhata emphasises the need of sensitive care from those who join her. They need to comfort her and make her feel at ease and stress-free. [3]

Due to reasons such as haemorrhage, difficult abortions, infection, obstructed labour, hypertension, and others, maternal mortality is more common in developing countries than in developed countries. Foetal mortality happens in the antepartum period owing to a variety of factors including chronic foetal, maternal, and foetal congenital malformations. Antenatal care is critical in overcoming these challenges. [4,5,6]

Review Article

ISSN: 2582-7634

Table no.1 Masanumasik Garbhini Paricharya: [7,8,9,10]

Months	Charaka samhita	Sushruta samhita	Ashtang sangraha	Harita
First	Non medicated	Madhur, sheet, liquid diet	Medicated milk	Madhuyasthi,
	milk			madhukapuspa
				with butter, honey
				and sweetened
				milk
Second	Milk medicated	sweet, cold, and liquid	milk medicated with	sweet milk treated
	with Madhura rasa	diet be taken	Madhura rasa	
	drug			
Third	Milk with honey	sweet, cold, and liquid	Milk with honey and	Krisara. Dauhruda
	and Ghrita.	diet be taken, sweet milk	Ghrita. Dauhruda	utpatti should be
	Dauhruda utpatti	treated with Kakoli	utpatti should be	fulfilled
	should be fulfilled		fulfilled	
Fourth	Milk with butter	Cooked shasti rice with	Milk with one tola of	Medicated cooked
		curd, dainty food mixed	butter	rice
		with milk and ghrita		
Fifth	Ghrita prepared	Shashti rice with milk.	Ghritam prepared	Payasa (rice
	with butter	Pleasant food mixed with	with butter extracted	cooked with milk
	extracted from	milk and Ghrita.	from milk	& sweetened)
	milk			
Sixth	Ghrita prepared	Ghrita or Yavagu (rice	Madhur aushadh	Sweetened curd
	from milk	gruel) medicated with	sidha ghritam	
	medicated with	gokshura		
	Madhura dravyas			
Seventh	Ghritam	Ghritam medicated with	Ghritam medicated	Ghrutkhanden
	medicated with	Prithakparnyadi group,	with the drugs of	
	the drugs of	Vidarigandhadi group of	Madhura group	
	Madhura group	drugs.		
Eight	Kshira yawagu	Asthapanabasti with	Kshirayawagu mixed	Ghritapuraka
	mixed withghirta	decoction of Badri mixed	with Ghrita,	
		with Bala, Atibala,	Asthapanabasti with	
		Satapuspa, patala etc,	decoction of badari,	
		honey and ghirta.	anuvasana basti with	
		Asthapan is followed by	oil medicated with	
		Anuvasanabasti of oil	madhra drugs	
		medicated with milk,		
		madhuradrugs		

Ninth	Anuvasan Basti	Asthapanabasti,	rice gruel prepared	different varieties	
	with oil prepared	Madhura,	with milk and mixed	of cereals should	
	with madhur	snigdhadravyaahara	with ghruta should	be used	
	drugs, Yonipichu		be given		
	(vaginal tampon)				
	of this oil				

Clinical Importance of Garbhini Paricharya

First Trimester - Because embryogenesis occurs throughout the first trimester, a greater amount of energy is necessary at this time. Kshira, Ghirta, Krusara, Payasa, and Kshira treated with Madhur ausadhi will offer all of this energy. Most women experience nausea and vomiting throughout the first trimester of pregnancy, preventing them from eating a balanced diet, resulting in dehydration and nutritional loss. Dehydration may be avoided by eating a cold and sweet liquid diet, as well as drinking milk. The anabolic properties of Madhura group drugs will aid in the proper health of the mother and foetus. Drugs should not be provided during the embryonic phase because they can disrupt organogenesis and induce teratogenicity. Only folic supplementation is required since it is required for the formation of methionine (which is required for the DNA methylation reaction). The foetus would not be stable

until 4 months, according to Acharya Kashyapa, hence no medication should be given. Milk is a natural supply of folic acid, as well as a healthy source of carbohydrate, fat, proteins, as well as all vitamins, minerals, and enzymes required for foetal and maternal nutrition. Milk is an external supply of progesterone hormone, which is required for pregnancy to continue. Upasneha and Upasweda provide nourishment for the foetus until Vyaktagarbha, for which milk is beneficial; breast milk is the Uupadhatu of Rasa dhatu.

Second Trimester - Foetal growth in 2nd trimester occurs by cellular hyperplasia and cellular hypertrophy. From the fourth month onwards, the foetus' muscle tissue increases significantly, necessitating additional protein, which is obtained from animal sources such as meat, milk, cheese, butter, and so on. The foetus gets nutrients and stability from milk. Cooked sasti rice, which is recommended in Garbhini paricharya, is high in carbohydrate and gives the body energy.

Meat provides nutrition to the foetus and aids in the development of the foetus' muscles. During last month of second trimester pedal edema is observed, so Ghrita medicated with Gokshura (Tribulus terrestris) is used. Ayurveda described qualities of Gokshura as Mutravirechaka (diuretic), Shothahara (anti-inflammatory) and Krimighna (anti-bacterial), so it helps to reduce oedema and other complication of water accumulation by gravid uterus in the later months of pregnancy.

Third Trimester - Ghrita administered with the Prithakparnayadi group of medicines is diuretic, anabolic, relieves emaciation, and suppresses Pitta and Kapha doshas. Their consistent usage during the seventh month may aid in the health of both the mother and the foetus. Yavagu, which is Balya and Brimhana, is consumed by the mother and foetus throughout the eighth month. In late pregnancy, most women have constipation; Asthapana Basti, which is beneficial for Vata anulomana, is taken during the eighth month and cures constipation. Apart from that, it may have an effect on the autonomous neurological system that governs the myometrium and aids in the regulation of their activity during labour. Tampons of oil in

the vaginal canal lubricate the cervix, vaginal canal, and perineum, facilitating proper labour. This may kill vaginal harmful microorganisms and prevent puerperal sepsis. Tampon usage on a regular basis may have an effect on the autonomic fibres that govern myometrium and regulate its functioning. Madhura group milk and medications are recommended throughout the entire pregnant time.

Garbhopaghatkar Bhavas (Factors likely to harm the foetus)

- According to Acharya Charaka- use of excessive heavy, hot and pungent substances, harsh and violent activity.
- According to Acharya Sushruta -Vyavaya,
 Vyayama, Atitarpan, Atikarsan,
 Divaswapna Ratrijagaran, Shoka,
 Yanaavarohana, Bhaya, Utkatasana,
 Sonitamoksan, Vegadharan, Snehan etc.
- According to Acharya Vagbhata- Tiksna Ausadh, Vyavaya, Vyayama.
- According to Acharya Kashyap- Should not look at declining moon, setting sun and both the rahus, she should not remain for long in acutely erect or flexed posture and carry heavy weight for long, avoid tremering, excessive laughing and trauma, use of cold water and garlic.

ISSN: 2582-7634

Garbhasthapak Drugs (Substances beneficial for maintenance of pregnancy)

Acharya Charaka and Kashyap prescribed certain drugs during pregnancy. Vagbhata has indicated use of Prajasthapana drugs described in Sutrasthana Pumsawana karma. Some of the drugs mentioned by Acharyas are Aindri (Centella asiatica), Brahmi (Bacopa monieri), Amogha (Stereospermum suaveolens), Avvatha (Tinospora cordifolia), Shiva (Terminalia chebula), Satavirya (Asparagus recemosus), Vatyapuspi (Sida cordifolia), etc.

Effect of use of contraindicated things by pregnant woman [11]

Discussion:

Pregnancy and childbirth are nature's gift to the women. Pregnant women's care is identical to that of the foetus. As a result, pregnant women should be treated with care and provided with pleasant and appropriate items, while also being protected from any elements that may cause defects in the foetus. Antenatal period is very crucial in women life as there is a continuous growth of the embryo or foetus, there is also variation in its requirements of food and nutrition. Kashyapa stated that the lady's meal should

be considered in relation to Desha, Kala, Matra, Agni, etc. The requirements of the developing embryo are different in different months so acharya mentions Paricharya according to the need of embryo or foetus.

Conclusion:

Garbhini paricharya refer to antenatal care which recommends Ahar (specific dietary regimen) Vihar (normal daily activity) and Vichara (psychological and emotional activities). is the comprehensive Ιt coordinated approach to medical care and psychological support that begins before conception and extend throughout antenatal period. After following the dietetic regimen from 1 to 9 month, the woman remains healthy and delivers the child possessing good health, energy or strength, voice, compactness, much superior to other progeny.

Reference:

1. Acharya Vagbhata, Astanga Hridaya. composed by with the commentaries of Sarvangasundara of Arunadatta and Ayurveda Rasayana of Hemadri. Collaterated Dr. by Late Anna MoreswaraKunte and Krsna Ramachandra SastriNavare, Edited by Bhisagacharya Harisastri Paradakara Vaidya, Introduction by Prof. P. V. Sharma, ChaukambaOrientalia, Varanasi, Reprint

- ninth edition, SariraSthana. 2005sharira sthāna 1/42-43.
- 2. Rani SRD. Clinical understanding of garbhini and sootika paricharya. Int J Health Sci Res. 2019; 9(12):264-267.
- Rasmi Hadimani & Sheela Mallikarjun: Concept Of Garbhini Paricharya: A Scientific Review. International Ayurvedic Medical Journal, 2018.
- Dutta DC. Text book of Obstetrics, 4th Ed.
 New Delhi (India): New Central Book
 Agency(P) Ltd;2004.p.105
- Reddy Sudhaka. Comprehensive guide to Swasthvritta. Varanasi, Chaukhamba Sanskrit Pratishthan, 2006, p.114
- Dhargalkar Nandini. A textbook of Physiology, Varanasi, Chaukhamba Sanskrit Series Office, 2008, p.7.
- 7. Shashri S, Pandey K. Chaturvedi G. Charak Samhita of Agnivesha, Revised by Charak and Dridhabala, Elaborated with Hindi commenraty, Sharirstahna, Chapter no 8, Verse no 33, Varanasi, Chaukhamba Bharti Acadamy, 2007, p. 939.
- 8. Dwivedi L, Sushruta Samhita, English translation, Vol 2, 2nd Edition , Sharira

- Sthana, Chapter no 10, Verse no 2-5, Varanasi, Chaukhamba Sanskrit Series, 2002, p. 252-255.
- Shriniwas P. Astanga Sangraha of Vagbhata, Sharirasthana, Chapter 3, Verses no 3-12, Varanasi, Chaukhamba Krishandas Academy, p.33-35.
- 10. Harit, Harit Samhita edited by Ramavalamba Shastri, Samhita with Hindi commentary Asha 1st Ed, Tritiya Sthana Chapter 49 Verse 1,2,3, Prachya Prakashana Varanasi;p.404.
- 11. 11. Tomar Samata et al : Concept of Garbhini Paricharya for Achieving the Best Progeny] www.ijaar.in : IJAAR VOLUME III ISSUE XII Jan –Feb 2019 Page No:1748-1763.
- 12. Charaka Samhita Of Agnivesa Elaborated By Charaka & Drudhabala With The Ayuvedadipika Commentary By Sri Cakrapanidatta Edited By Vaidya Yadavaji Trikamji Acharya Prolongued By Prof. R.H. Singh, Chaukhamba Surbharti Prakashan, Varansi, Edn 2014,Sutrasthan4/18 pg. no.34.

Source of Support: None declared

Conflict of interest: Nil

© 2021 IJIM (An International Journal of Indian Medicine | Official Publication of Ayurveda Research & Career Academy.(ARCA)