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Common Dictums To Be Followed In Pregnancy: View Of Sushruta

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Abstract

Pregnancy a physiological phenomenon of the life of every woman may convert into an irreversible curse if not taken care of. Ayurveda advocates dietary and behavioral regimen for a pregnant woman which is known as Garbhini Paricharya. Acharya Sushruta a father of surgery has mentioned the preventive aspects in relation to avoid complications due to which surgery might be needed and one can achieve a healthy offspring and avoid certain anomalies. The aim of this article is to review the ayurvedic literature of antenatal care especially a view of Sushruta, its relevance in present era and to make mass aware of its importance.

Keywords: Pregnancy, Garbhini Paricharya, Ayurveda, Sushruta

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Introduction

Pregnancy is a physiological phenomenon of the life of every woman, which if transpires with ease; it is a blessing for whole family to have a gift of god in the form of a new member in a family with the transformation of a female into mother. But if this phase come out with any problem during pregnancy, at the time of labor or after delivery it may convert into an irreversible curse in the form of maternal or fetal mortality or morbidity.

Ayurveda advocates care of a pregnant woman to overcome or to prevent such complications by following special dictums mentioned for a pregnant woman including dietary and behavioral regimen which is known as Garbhini Paricharya. Adaptation of these measures mentioned for the management of a pregnant woman right from the first month up to the ninth month helps in softening of pelvis, waist, sides of the chest and back, it promotes downward movement of vata, normalizes elimination of urine and stool with ease, softens the skin and nails of a pregnant woman, promotes strength and complexion and delivery with ease of healthy baby endowed with excellent qualities in proper time.

Above all it is also mentioned that by doing this the mother herself will keep good health and give birth to a child endowed with the excellence of health, strength, complexion, voice and compactness which will make him the best even among the children of the entire clan.

Acharya Sushruta a father of surgery has mentioned the preventive aspects in relation to avoid complications due to which surgery might be needed. Hence Acharya Sushruta has

given instructions to avoid protecting a woman from surgical interventions. Acharya Sushruta has mentioned dictum to be followed by Day one. It is mentioned that a pregnant woman right from first day of her pregnancy should follow some general dictums up to her delivery. She should remain in high spirit with happy mood, she should remain pious, she should be decorated with ornaments, she should wear clean white garments, perform religious rites, do auspicious deeds, worship deity brahmanas and priests. Her place of sleeping and seating should be covered with soft cushions, not very high, elevated at head end, should be perfect and comfortable. She should use palatable liquid, sweet and unctuous substances prepared with appetizing things.

Aims and objectives

To explore ayurvedic literature in relation to garbhini paricharya to establish its relevance in present time.

Material and methods

Ayurveda classics, books of obstetrics, medical research journals and internet were the source of present study.

Discussion

Outcome of pregnancy is desired to be as healthy mother and healthy baby. Ayurveda being of the opinion that excellence of the progeny is related to the dictums followed by a pregnant woman during pregnancy. These dictums known as Garbhini Paricharya not only imbibes excellent qualities in the fetus but it also looks after and care a woman and reduce morbidity and mortality.

As quoted by Acharya Sushruta from day one a pregnant woman as and when come to know about her pregnancy should remain in happy mood with positivity. Happiness of the pregnant woman is related to the growth and development of the fetus, physical as well as mental and save a woman from complications like preterm delivery, premature labor and give her strength to bear the pain during labor.

In various studies it is established that maternal happiness and positivity is associated with better outcome in terms of reduced risk of preterm births. Happiness relates with weight of the baby — either healthy/low birth weight/IUGR. Everything depends upon happiness and positivity of a woman during pregnancy. Cardiovascular function is improved with positive emotions [1-3]. Improved cardiovascular function may improve the blood circulation towards fetus and so as to growth and development of the fetus. Along with weight of the fetus it is related to the brain development of the fetus is also related to the happiness of a pregnant woman.

A number of studies have reported relation of positive affect to lower the cortisol [4-6]. In a Cohort study it is quoted that elevated maternal cortisol levels during pregnancy are associated with reduced childhood IQ [7].

Placental Corticotropic releasing hormone (CRH) is most responsive to cortisol and release of CRH results in increased risk of preterm delivery. In a study it was observed that elevated maternal cortisol in early pregnancy predicts third trimester levels of corticotrophin releasing hormone which resulted in increased risk for preterm delivery [8]. CRH may play a direct role not only in the parturition but also in processes related to fetal growth and maturation too.

Timing of onset of parturition may be determined or influenced by events occupying earlier in gestation rather than nearer to the time of actual onset of labor [9]. At the time of delivery, labor pain coping behaviors were measured during contractions in a study and it was concluded that higher levels of happiness during pregnancy was associated with more favorable labor pain coping behaviors [10]. Positive psychological status and emotions can have major impact on overall sleep quality among pregnant women [11].

While doing commentary on Astanga Hridaya, Sha, Arundatta has commented that for the treatment of Upavishtaka and Nagodara, a pregnant woman should have made cheerful repeatedly which helps in development of fetus [12]. If it can correct the diminished growth, then in a normal pregnancy cheerfulness and happiness of a pregnant woman will improve the weight of the fetus.

Further it is mentioned by Acharya Sushruta that a pregnant woman should consume liquids in her diet. After the union of shukra shonita the process of cell division is initiated. Cell is having surface area which is known as cell membrane and volume is cytoplasm. Further growth of cells is dependent upon water content, liquids in the body. Liquidity in the body promotes growth of new cells and mitosis. Body itself tries to accommodate it as it is in the state of liquid – Kalala. So everywhere in the body water content is increased physiologically which is known as hydraemia of pregnancy. It is a relative anaemia as RBCs are

the same but relative haemoglobin percentage is decreased. In gastrointestinal system also water content is increased and a female feels nausea and vomiting. Haemodilution occurs in pregnancy due to its disproportionate increase in plasma volume which results in hemodilution i.e. hydraemia of pregnancy. Upto the formation of placenta, the nourishment of the fetus is done by the process of exudation (Upasneha) and conduction of heat (Upasweda) [13]. Rasa which is digestive product of food of a pregnant woman nourishes the fetus through these conductions. Hence to keep the fetus healthy; liquid diet is helpful and mentioned too. Fluid intake is an important part of pregnancy nutrition. Consumption of liquid diet and water content in pregnancy may prevent chances of urinary tract infections, constipation and haemorrhoids. Water helps to dissolve wastes and flushes it from the kidneys, keeps urine diluted, moves solid waste more speedily down the digestive path.

All the systems like Circulatory, respiratory and urinary system are in need of extra water to fulfill their functions properly during pregnancy. As far as circulatory system is concerned, increasing volume of the blood may expect more hydration as 83% of blood in the body is composed of water and main component of human tissue is water. Glomerular Filtration Rate (GFR) increases in early pregnancy and throughout pregnancy, it remains at higher level. In respiratory system, due to increased ventilation and tidal volume, amount of output of water through expiration may also increases. Due to hyperactive adrenal and thyroid functions during pregnancy, water loss through sweating also increases during pregnancy. Food intake during pregnancy also increases day by day as per the growth and development of the fetus.

Water is required for the functions like digestion, absorption, metabolism, circulation and excretion. Hence more water consumption is the need to accomplish all these functions. In a study it is concluded that maternal hydration may be beneficial in the management of oligohydramnios and prevention of oligohydramnios during labour or prior to external cephalic version [14].

In a study on relation of water intake and pregnancy outcome concluded that it is the need to develop water intake related interventions to improve maternal health and birth outcomes. Montgomery has also quoted that adequate fluid intake during pregnancy is essential for fetal circulation to maintain appropriate fluid level and blood volume during pregnancy.

Uterus accommodates an average total of 5 liters at term compared to 10 milliliters in the non-pregnant state [15]. Uterus is composed of the predominance of Jala and prithvi mahabhoota. Jala mahabhoota facilitate stretching of the uterus to accommodate the growing fetus hence consumption of liquid diet in the starting of pregnancy will be supportive to the growth of the fetus. In this way fluid intake by a pregnant woman in pregnancy work upon both the things.

Growth of the fetus by upasneha and upasweda and stretching capacity of the uterus. If we see concept of the transformation of dhatus, pregnancy a state of regeneration, growth and development involve all the dhatupushtion either side, fetal as well as maternal. In these circumstances, rasa, rakta, mamsa require liquid content more. Hence more liquid in diet and medicated

milk are mentioned. It is also mentioned that medicines for preventive aspect should also be given in the liquid form. Along with this due to osmosis everywhere in the body, gastric juices are diluted, so a pregnant woman will be having agnimandhya. In the state of diluted gastric juices and agnimandhya, liquid things are easy to digest and nourish rasadhatu.

Further it is mentioned by Acharya Sushruta that a pregnant woman should consume madhura dravya in diet. Madhura rasa is made up of Prithvi and Jala mahabhoota. In the process of growth and development of the concepts, described in classics, initial kalala form-jelly form has to be converted into solid form in subsequent months and cell growth is to be continued [16].

In the process of taking a compact form, sub sequential dhatu formation process is also initiated and continued. In this process; formation of mamsa dhatu will also happen, vayu, jala and agni mahabhoota are involved in the formation of mamsadhatu, after formation; it is predominant in prithvi mahabhoota. So to sustain, prithvi mahabhoota is also required. So, Jala of Madhura rasa contribute in the formation and prithvi mahabhoota contributes in the sustainability of the concepts. If we think about the doshas, kapha dosha is also made up of jala and prithvi mahabhoota. Qualities of kapha dosha are love, patience, stability, firmness and these are required at the time of a jiva coming into existence.

Further it is also mentioned that snigdha aahara should be consumed by a pregnant woman during pregnancy and it should be medicated by deepaniya dravyas. Snigdha dravyas are helpful to Jatharagni. It improves taste of diet, increases agni so that food can be easily digested. Secondly vata dosha may harm the pregnancy, so in the state of pregnancy to alleviate rukshata of vata dosha, snigdhata is required. That's why it is mentioned to consume snigdha aahara – diet during pregnancy. But due to the state of agnimandhya in pregnancy, it is mentioned that snigdha dravya to be consumed in pregnancy should be treated with appetizing drugs. Snigdha dravya enhances growth of the body and provide strength to senses. Moreover, it is also mentioned that these regimens should be followed till delivery. Aim of such care mentioned in Ayurveda classics should be healthy mother, healthy baby during pregnancy, during labour and after delivery. And for a baby, throughout the life, as lot many adult problems are found to have linkage with intrauterine life.

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