Recurrent Pregnancy Loss-Ayurveda Management-A Literary Review

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Abstract: बहुमूर्तिर्बहुमुखो बहुव्यूहो बहुक्रियः।।बहुचक्षुर्बहुज्ञानो बह्वात्मा च बहुप्रजः। मङ्गल्येऽयं प्रशस्योऽयं धन्योऽयं वीर्यवानयम्।।बहुशाखोऽयमिति च स्तूयते ना बहुप्रजः।

According to Acharya Charaka, a person with many virtous children are considered auspicious, praise worthy, blessed and potential as a big tree having many branches. In this era of decreased fertility and designer babies putriya vidhi and garbhaadana samskara throws light to the ancient wisdom of ensuring the superior quality offsprings and thus healthier generations. Preconception care begins with the selection of the right partner, which includes right mode of conception and balanced diet, modification of lifestyle and Shodhanachikitsa which helps to detox and normalize vitiated dosha that will help to establish foundation for the outcome of healthy progeny and contribute for healthy society.

Keywords: Fertility, Pre-conceptional care, Garbhaadana samskara, Shodana chikitsa, Healthy progeny

Recurrent abortion, Repeated pregnancy loss, Habitual Abortion or Recurrent Miscarriage is defined as three or more consecutive pregnancy loss prior to 20 weeks of pregnancy or with foetal weight < 500gm^1 . It is a relatively common event, occurring in 15%-25% of pregnancies, and increasing in prevalence with maternal age. Indeed, the risk is between 9% and 12% in women aged ≤ 35 years, but increases to 50% in women aged >40. Risk factors are increased maternal age, previous miscarriages, obesity, environmental factors.

Based on the clinical features **Recurrent pregnancy loss** can be correlated with **Garbhasravi Vandhya**⁴explained in **Hareetha samhitha** and **Puthraghni yonivyapath**^{2, 3} explained by **Brhaththrayees**.

Acharya Susruta³ says that in this condition, the foetuses after attaining stability are repeatedly destroyed due to bleeding besides there are other clinical features of disordered pitta; burning sensation and heat. Acharya Caraka² says that vayu aggravated due to predominance of ruksha properties in the body, repeatedly destroys the foetuses conceived along with vitiated sonita.

Jathaharini⁵or **Revathi** like **Andaghni, Durdhara** explained by Acharya Kashyapa

रौक्ष्याद्वायुर्यदा गर्भं जातं जातं विनाशयेत्॥२८॥ दुष्टशोणितजं नार्याः पुत्रघ्नी नाम सा मता।२९। Cha. chi 30-28-29

Charaka says that the vayu aggravated due to predominance of ruksha properties in the body, repeatedly destroys the foetuses conceived with vitiated shonitha. Though in this condition foetuses of both sex are destroyed, however destruction of male fetuses predominates, thus termed as putraghni.

स्थितं स्थितं हन्ति गर्भं पुत्रघ्नी रक्तसंस्रवात् ॥१३॥

S. S, utta-13

Susrutha opines that the fetuses after obtaining stability are repeatedly destroyed due to bleeding. **Bhavaprakasha** has followed Susrutha. **Madhava nidana** and **Yogaratnakara** following Susrutha give the cause as loss of raktha or artava due to vayu.

वन्ध्यास्यात्षट्प्रकारेणबाल्पेनाप्यथवापुनःगर्भकोशस्यभङ्गाद्वातथाधा तुक्षयादपिश जायतेनचगर्भस्यसम्भूतिश्चकदाचनकाकवन्ध्याभवेच्चैकाअनपत्याद्वि तीयका२

गर्भस्रावीतृतीयाऽथकथितामुनिसत्तमैःमृतवत्साचतुर्थीस्यात्पञ्चमीचब लक्षयात्

Hareeta samhita thriteeya 48, 4-6

Acharya Harita while mentioning types of Vandhya introduced Garbha sravi Vandhaya i.e. the lady which remains Vandhya due to recurrent Garbha Strava (foetal loss).

यस्यास्त्वालक्ष्यमालग्नमण्डंप्रपततिस्त्रियाः३६ अण्डघ्नीमितिह्याहुस्तांदारुणांजातहारिणीम् नातिनिर्वृत्तदेहाङ्गोयस्यागर्भोविनश्यति३७ दुर्धरानामसाज्ञेयासुघोराजातहारिणी संपूर्णाङ्गंयदागर्भंहरतेजातहारिणी३८ कालरात्रीतिसाप्रोक्तादुःखात्स्तीतत्रजीवति

K. S, Revathikalpa

Durdhara includes abortions in first trimester when parts of fetus are not formed distinctly. As mentioned in Ayurvedic classics Madhura, Sheeta, Balya, Jeevaniya and Rasayana dravyas are helpful in preventing Garbhasrava and maintaining Pregnancy⁶. Acharya Sushruta has stated Masanumasika treatment of Grabhasrava for ten months

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which contains all those drugs which are Garbhasthapaka. They have Rasayana property and foetal growth promoting action and minimises the chances of Abortion in future. Masanumasika garbhasrava chikitsa⁷

- a) Treatment during first month of pregnancy Madhuka, sakabija, Payasya, Suradaru.
- b) During second Month Ashmantaka, black tila, tamravalli and shatavari.
- c) During third Month Vrukshadani, payasya, priyangu or lata, Utpala, sariva.
- d) During fourth Month Ananta, sariva, rasna, padma, madhuka.
- e) During fifth Month Bruhatidwaya, kashmari, kshiri shunga-tvacha (stem-bark and leafbuds, of latex yieldingtrees), ghruta.
- f) During sixth month Prushniparni, bala, or vacha, shigru, shwadanshtra, and madhuparnika.
- g) During seventh month Shrungataka, bisa, draksha, kasheru, madhuka, and sita.
- h) During eighth month Kapitha, bilva, bruhati, patola, ikshu, nidigdhika.
- i) During ninth month Milk treated with root of Ananta, sariva, payasya, madhuyashti.
- j) During tenth month Milk treated with either shunthi and payasya or shunthi madhuyashti and surdaru or only payasya. Use of this prescription relieves even very severe pain.
- k) During eleventh month For relief of pain during eleventh month of pregnancy the women should be prescribed paste of kshirika, utpala, samanga root and shiva along with milk.
- During twelfth month use of sita, vidari, kakoli, kshiri, mrunalika, with relieves pain during twelfth month and is beneficial for proper development of the fetus.

The chikitsa of garbhachalana is explained from 1st to 8th month of pregnancy with the intention to prevent unwanted termination of fetus before the viability or after attaining viability but before term.

Different combinations are mentioned for each month with *sheeta, sthambhana* and *raktapittahara* properties. The concept of garbhachalana described by acharyas probably denotes the very early signs and symptoms of **garbhasrava** or **garbhapata** or **akalaprasava**.

The chikitsa of akalaprasava, prasramsamanagarbha, and garbhasrava or garbhapata are found more resemblance with the garbhachalanachikitsa.

(Hareeta Samhita-50 th chapter, chalithagarbha chikitsa) Vandhyatva management can be adopted in this along with garbhasthapaka oushadhas.

The factors essential for occurrence and continuation of pregnancy (garbha sambhava samagri). When these four essential factors are in avyapanna avastha (without any abnormalities) conception is bound to occur just like a seed germinates naturally when a seed is sown in appropriate season, field is ploughed and water is adequately supplied. Ayurveda mainly focuses on these garbhasambhava samgris for getting a healthy pregnancy and healthy baby especially in cases of unexplained pregnancy losses.

Recurrent Pregnancy Loss can have a significant psychological impact on couples trying to conceive. It can cause feelings of grief, guilt, and anxiety. Counseling and support groups can help couples cope with the emotional toll of Recurrent Pregnancy Loss.

In Agreya Sangraha of Charaka Samhita, Acharya has mentioned the prime factor for Garbhaadana is 'Soumansya Karanam' i.e. healthy conjugation of mind, happy state of mind or undoubted loving nature of mind in healthy relationship.

soumanasyam garbhadhaarananaam...|-Charak. Su. 25/40

According to Ashtanga Hridaya

शुद्धे गर्भाशये मार्गे रक्ते शुक्रेऽनिले हृदि॥८॥ वीर्यवन्तं सुतं सूते ततो न्यूनाब्दयोः पुनः।

Garbhasambhava samgris for getting a healthy pregnancy and healthy baby especially in cases of unexplained pregnancy losses. It emphasizes on begetting *'shreyasi praja'* through a planned pregnancy.

> ध्रुवंचतुर्णांसान्निध्याद्गर्भःस्याद्विधिपूर्वकम् । ८ ऋतुक्षेत्राम्बुबीजानांसामग्र्यादङ्कुरोयथा ॥

Conclusion

Ayurveda emphasizes on begetting '*shreyasi praja*' through a planned and conscious pregnancy. To prepare for the desirable and quality pregnancy outcome, preconception care is essential and it reduces the risk of adverse outcomes such as congenital defects, miscarriage and preterm delivery. Putriyavidhi could be a cost effective, easily accessible and safe modality which can be practiced by couples trying to conceive to increase the chances of conception.

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