Recurrent Pregnancy Loss-Ayurveda Management-A Literary Review

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Abstract:
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 < 500gm¹. 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.

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

According to Acharya Charaka, a person with many virtuous 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 pataa vidihi 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 dosa that will help to establish foundation for the outcome of healthy progeny and contribute for healthy society.

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Based on the clinical features Recurrent pregnancy loss can be correlated with Garbhasravi Vandhya² explained in Hareetha samitha and Puthraghni yonivyapath³ explained by Brhaththrayees.

Acharya Susruta³ says that in this condition, the foetuses after attainment of stability are repeatedly destroyed due to bleeding besides there are other clinical features of disordered pitta; burning sensation and heat. Acharya Caraka⁴ says that vayu aggravated due to predominance of ruksha properties in the body, repeatedly destroys the foetuses conceived along with vitiated sonita.

Jathaharini⁵ for Revathi like Andaghni, Durdhar explained by Acharya Kashyapa

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 foetuses predominates, thus termed as putragnhi.

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

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

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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 Garbhaasrava and maintaining Pregnancy⁶. Acharya Susrutha has stated Masanumasa treatment of Grabhsrava 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. Masanumasikak garbhasrava chikitsa

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 Vrukshadadi, 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), ghruita.
f) During sixth month Prushniparni, bala, or vacha, shigru, shwadanshtra, and madhuparnika.
g) During seventh month Shrungatika, bisa, draksha, kasheru, madhuya, and sita.
h) During eighth month Kapitha, bilva, bruhati, patola, ikshu, nidigdika.
i) During ninth month Milk treated with root of Ananta, sariva, payasya, madhuyashthi.
j) During tenth month Milk treated with either shunthi and payasya or shunthi madhuyashthi 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.
l) 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 garbhaalana 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 raktapitakahara properties. The concept of garbhaalana described by acharyas probably denotes the very early signs and symptoms of garbhasrava or garbhapata or akalaprasava.

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

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

The factors essential for occurrence and continuation of pregnancy (garbha sambhava samagri). When these four essential factors are in avayapanna 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 Sangrah of Charaka Samhita, Acharya has mentioned the prime factor for Garbhdaana is 'Soumansya Karanam' i.e. healthy conjugation of mind, happy state of mind or undoubted loving nature of mind in healthy relationship.

soumanasyam garbhadharaananaam… ] -Charak. Su. 25/40

According to Ashtanga Hridaya

शुद्धे गभीराये मार्गे रक्ते शुद्धेऽनले ह्रदि||
| वीर्यवत सूते सूते ततो नृत्ताब्दयोऽपि: 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.

श्रवित्वांलोकाकलिंगसांसामात्रयायांकृतयोऽपि: ||

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.

References


