





International Journal of Contemporary Research In Multidisciplinary

Review Article

Literature Review of 'Masanumashik Garbhini Paricharya' w.s.r. to 9th Month Paricharya – Anuvasan Basti and Yoni Pichu and it's Effect on Labour and Immediate Postnatal Outcome

Dr. Narayan Chandra Mishra 1*, Dr. Arun Kumar Das²

¹Assistant Professor & H.O.D., Department of Prasuti Tantra Evam Stree Roga, Govt. Ashtang Ayurvedic College, Indore, Madhya Pradesh, India ²Guide & Principal, Gopabandhu Ayurveda Mahavidyalaya, Puri, Odisha, India

Corresponding Author: * Dr. Narayan Chandra Mishra

DOI: https://doi.org/10.5281/zenodo.13856274

Abstract

Motherhood is one of the most important phases of every woman's life. During pregnancy, regular and systematic supervision is the utmost requirement for the maintenance of the health in the mother as well as the proper development of the fetus in the womb. By definition – "The systematic supervision of pregnant woman is named as *Garbhini Paricharya*" (Antenatal Care) in texts. This incorporates different aspects like *Ahara* (Diet), *Vihara* (Lifestyle), *Oushadha* (Medications), *Pathyapathya* (do's and don'ts), *Paramarsha* (Counselling), and *Sambhashana* - preparing her for *Sukhprasava* (safe delivery), both physically and psychologically along with removing the fear psychosis. The benefits of *Garbhini Paricharya* as a whole are observed in terms of safe delivery with a healthy baby from a healthy mother. Special considerations regarding 9th month Paricharya i.e. *Anuvasan Basti and yoni Pichu* with oil prepared of *Madhur gana* drugs help for birth preparedness. The use of anuvasana basti and yoni pichu influences the autonomic fibres governing myometrium and helps regulate and coordinate their functions. Moreover, this process softens the pelvic outlet by relaxing the pelvic ligaments, helping in proper uterine contraction during labour.

Manuscript Information

ISSN No: 2583-7397
 Received: 16-06-2024
 Accepted: 15-07-2024
 Published: 29-09-2024

IJCRM:3(5); 2024: 133-136©2024, All Rights Reserved

Plagiarism Checked: YesPeer Review Process: Yes

How to Cite this Manuscript

Narayan Chandra Mishra, Arun Kumar Das. Literature Review of 'Masanumashik Garbhini Paricharya' w.s.r. to 9th Month Paricharya – Anuvasan Basti and Yoni Pichu and it's Effect on Labour and Immediate Postnatal Outcome. International Journal of Contemporary Research in Multidisciplinary.2024; 3(5):133-136.

KEYWORDS: Garbhini paricharya, Anuvasan Basti, Yoni pichu, Sukha-prasava.

INTRODUCTION

According to *Charaka Samhita*, the pregnant women should be dealt with just like a pot filled with oil as the slightest turbulence of such pot can cause the spilling of oil as like -the slightest misconduct by pregnant women can also lead to *Garbhapata* (abortion) and prevention of which Acharyas have given a

description in detailed about Systematic & Month wise regimen beneficial for the pregnant women¹.

The ultimate expectation from every pregnancy is in terms of resulting in safe labour without any complications. Ayurveda has vivid descriptions, giving prime importance to antenatal care and thus as a result uncomplicating labour process. Normal

functioning of apana vayu is key eliment for normal labour as per Ayurvedic texts. To facilitate this, many formulations and treatment protocols are described in classics to be used right from the preconception period through the *Garbhini Paricharya*.

Normal labor is a retrospective term that has the primary objective of a healthy mother and child along with no or minimal complications. *Garbhini paricharya* aims to achieve basic three components –

- 1. Anupaghataya (preventing untoward effect),
- 2. Paripurnatvaya (to attain full-term fetus)
- 3. Sukhprasava (normal uneventful labor).

One can fulfil these goals of easy parturition and healthy progeny by adopting the methods described under *Garbhiniparicharya*. Every woman and her family members aspire to an easy, natural, and safe delivery without any maternal and fetal complications. The same is termed in Ayurveda classics as 'Sukh-Prasava' (less painful delivery) also. But in the present scenario, it is very rare with drastically increasing rate of cesarean section, more numbers of instrumental deliveries, routine use of episiotomy as well as certain add by poor pain tolerance, sedentary lifestyle, and poor bearing down efforts and also in some cases demand for elective cesarean section.

Importance of the Study

Nowadays, the incidence of cesarean deliveries is rising day by day. The incidence of cesarean delivery reported in 2015–16 was around 17.2% and by 2019-21 it was reported to be 21.5% in India according to the National Family Health Survey. In current obstetric practice, it has been adopted in such a way that again the rising number of 'C-sections' has emerged as a new concern

for society. Even the World Health Organization (WHO) has been warning about the rising rate of C-sections in the world and recommends that countries should maintain a rate of 10-15% of total numbers. The prevalence of operative deliveries ultimately increases the risk of maternal and fetal complications like blood transfusions, adhesions, and surgical injury, postpartum hemorrhage, wound infection, anesthesia reaction, increased risk in a future pregnancy, fetal distress, etc. Therefore, enhancing the rate of normal labour and decreasing the rate of operative deliveries are the need of the hour.

In different Ayurvedic literatures, many formulations along with procedures are advocated for *Sukhprasava* as a part of *Garbhini Paricharya*.

As per the description given by Charaka by following the monthly regimen the pregnant woman remains healthy and delivers the child possessing good health and energy or strength. The voice and compactness are much superior as compared to other family members. Vagbhata-I describes that garbha dharini kuksi, sacral region, flanks, and back become soft when a pregnant woman uses this regimen from the first to the ninth month. Vayu moves into its right path or direction thus feces, urine, and placenta are excreted or expelled easily through their respective passages.

Susruta described the benefits of month wise regimen in the way that the fetus attains good growth, vayu moves in its right direction. The pregnant woman achieves unctuousness, becomes strong, and thus delivers the child easily without any complications.

Month	Charaka 13	Sushruta ¹⁴	Vagbhata 15	Harita ¹⁶
1 st	Sheeta, ksheera, and satmya Bhojana	Madhura, sheeta, drava Ahara	Upa samskruta ksheera	Yashtimadhu or parusaka or madhupushpa with Navneeta with Madhura Payo anupana
2 nd	Madhura aushadhi siddha ksheera	Madhura, sheeta drava Ahara	Madhura aushadi siddha ksheera	Kakoli siddha ksheera
$3^{\rm rd}$	Madhusarpi siddha ksheera	Madhura, sheeta drava Ahara	Madhusarpi siddha ksheera	Krishara
4 th	Ksheera and one aksha Navneeta	Shastikaodana with dadhi and dugdha navneeta sigddha jangala mamsa yukta hridya anna	Ksheera Navneeta	Sumskruta odana
5 th	Ksheera and Ghrita	Shastika odana with dugdha, ksheera sarpi yukta jangala mamsa yukta hridaya anna	Ksheera and Ghrita	Paayasa
6 th	Madhura aushadhi siddha ksheera and sarpi	Swadanshtra sidhha sarpi or yavagu	Madura aushadhi siddha ksheera and sarpi	Madura dadhi
7 th	Madhura aushadhi siddha ksheera and sarpi	Vidarigandhadi siddha sarpi	Madura aushadhi siddha ksheera and sarpi	Ghrita-khanda
8 th	Ksheera yavagu and sarpi	Aasthapana basti followed by Anuvasana basti	Ksheera yavagu and sarpi aasthapana basti followed by Anuvasana basti	Ghrita-puraka
9 th	Madhura aushadhi sidhha taila anuvasana basti and yoni pichu	Snigdha yavagu and jangal mamsa rasa till delivery	Madura aushadhi siddha taila yoni pichu	Vividha anna

Table 1: Month-wise dietary regime in pregnancy by Acharyas

Acharya Charaka has advised the *anuvasana basti* and *yoni pichu* (Vaginal tampon) with oil prepared from the drugs of *Madhura*

gana for clearing of the retained feces and anulomana of vayu as well as lubrication of garbhasthana and garbhamarga.

Acharaya Vagbhata has advised *anuvasana basti* and *yoni pichu* in both the eighth and ninth months of pregnancy.

PREVIOUS RESEARCH WORKS

There are several research studies conducted related to 'Garbhini Paricharya and Prasava'.

Some of them are as follows:

1. Baswade, J.H. (2011): Role of Matra Basti and Pichu in Sukhaprasaya

Baswade (2011) explored the efficacy of *Matra Basti* (oil enema) and *Pichu* (medicated vaginal tampon) in facilitating *Sukhaprasava*. The study found that these treatments help prepare the reproductive system for smoother labor, reducing the duration of labor and the intensity of labor pains.

- 2. Thakur, J. (2011): A Randomized Clinical Study on Sukhprasavkar Lepa, Matra Vasti, and Yoni Pichu Thakur (2011) conducted a randomized clinical trial to assess the combined effect of Sukhprasavkar Lepa (herbal paste), Matra Vasti, and Yoni Pichu during labor. The findings indicated that these therapies help in cervix softening and improving uterine contractions, making the labor process smoother and reducing the need for medical intervention.
- 3. Karandikar, A.N. (2008): Efficacy of Shatavari Taila Anuvasan Basti and Pichu in the 9th Month of Pregnancy

Karandikar (2008) studied the impact of *Shatavari Taila* (*Asparagus racemosus* oil) administered through *Anuvasan Basti* and *Pichu* during the ninth month of pregnancy. The results showed that these therapies promote cervical ripening and help prepare the body for labor by providing nourishment and lubrication, leading to a smoother delivery.

- 4. **Sirmagdum, S.A. (2006): Effect of Kebuka in Prasava** Sirmagdum (2006) investigated the role of *Kebuka* (a traditional herb) in labor. The study found that *Kebuka* has antispasmodic and anti-inflammatory properties, which help relax the uterine muscles, easing labor pains and contributing to a more efficient birthing process.
- 5. Mayura, M. (2006): Garbhini Paricharya with Gokshura Ghrita in the Sixth Month of Pregnancy Mayura (2006) examined the use of Garbhini Paricharya (antenatal care) alongside Gokshura Ghrita (ghee prepared with Tribulus terrestris) in the sixth month of pregnancy.

The study concluded that the regular use of *Gokshura Ghrita* strengthens the uterine muscles and prepares the body for a normal delivery.

- 6. Shivu, N.S. (2007): Effect of Vasa Swarasa and Tincture Vasa in Labor Shivu (2007) explored the impact of *Vasa Swarasa* (extract of *Adhatoda vasica*) and *Tincture Vasa* on labor. The findings suggest that these herbal preparations help improve uterine contractions, making labor less painful and smoother, and provide a natural aid to the delivery process.
- 7. Mehjabin, H., & Humtsoe, Y. (2017): Efficacy of Potaki (Basella Alba) Pichu for Sukhaprasava Mehjabin and Humtsoe (2017) evaluated the use of *Potaki* (Basella alba) Pichu for facilitating normal labor. The study concluded that Potaki helps in softening the cervix, promoting cervical ripening, and thereby facilitating smoother labor with fewer complications.
- 8. Shipra, D., & Neelam, P. (2018): Matra Basti and Yoni Pichu for Normal Labor Shipra and Neelam (2018) assessed the effectiveness of *Matra Basti* and *Yoni Pichu* in promoting normal labor. Their study showed that these therapies help enhance uterine contractions, reduce labor pain, and ensure a smoother delivery, with a significant reduction in complications during labor.
- 9. Mittal, S., & Gupta, R. (2016): Anuvasana Basti and Yoni Pichu in Sukhaprasava and Postpartum Complications

Mittal and Gupta (2016) investigated the combined use of *Anuvasana Basti* and *Yoni Pichu* in reducing postpartum complications while promoting smooth labor. The findings demonstrated that these therapies assist in facilitating labor and help minimize postpartum issues such as hemorrhage and uterine infections.

10. Ambalgekar, S., & Mamtha, K.V. (2016): Efficacy of Eranda Taila for Labor Augmentation Ambalgekar and Mamtha (2016) evaluated the role of Eranda Taila (castor oil) in augmenting labor. Their research concluded that castor oil stimulates uterine contractions, helping to induce and accelerate labor in overdue pregnancies, without significant adverse effects.

Analysis of some of the researches are summarized below:

S. No.	Institution	Author	Year	Reference	Conclusion
1	Sumatibhai Shah Ayurved Mahavidyalay, Malwadi, Hadapsar	Trupti Gawade, Manda Ghorpade	2014	Effect of *Bala Siddha Taila* Anuvasana Basti on Labour Pains, Ayurlog: National Journal of Research in Ayurved Science - 2014; 2(4): 1-9	In the trial group, 78% of patients had a Bishop's score of 6 or above, while 20% had a score between 0-5. Only 5 patients required LSCS due to fetal distress; the rest delivered normally.
2	S.D.M. College of Ayurveda, Udupi	Dr. Sunita S. Beragi	2011	Effect of *Ksheera Bala Taila Matra Basti* and *Yoni Pichu* (*Navama Maasa Paricharya*) on Prasava	In the trial group (15 patients), 13 delivered normally, while 2 underwent LSCS due to failed induction. The control group also had 13 normal deliveries, with similar outcomes.
3	Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka	Dr. Jyoti H. Baswade	2011	Role of *Bala Taila Matra Basti* and *Pichu* in *Sukhaprasava*	In Group A (trial group), 66.66% had normal deliveries, while 33.33% had C-sections. In Group B (control group), 40% had normal deliveries, while 40% had C-sections.
4	R.G.G.P.G. Ayu. College and Hospital, Paprola, (H.P.)	Dr. Priyanka et al	2016	A Clinical Study to Evaluate the Effect of an Ayurvedic Preparation on the Phenomenon of Labor, Research Article ISSN 2456-0170221	Out of 27 patients, 44.44% showed marked improvement (Grade I), 48.15% showed moderate improvement (Grade II), and 7.41% showed mild improvement (Grade III). No patient reached Grade IV.
5	R.G.G.P.G. Ayurveda College and Hospital, Paprola	Thakur Jyotsna et al	2018	A Randomized Clinical Study to Evaluate the Effect of *Sukhprasavkar Lepa*, *Matra Vasti* and *Yoni Pichu* on Ameliorating the Process of Labour, Int. J. Res. Ayurveda Pharm. 9(2), 2018	The study was conducted on 61 women, with 54 completing the trial. In Group I, 96.55% had vaginal deliveries, while in Group II, 84% delivered vaginally with a small episiotomy.

 Table 2: Review of previous research work

CONCLUSION

The review of previous research works done on the *anuvasana* basti and yoni pichu with oil prepared with Madhura gana drugs in the ninth month of pregnancy has been observed with positive effects on labour and immediate postnatal outcome. This facilitates normal vaginal delivery with minimum or no aids while shortens the total duration of labour. All studies reported that anuvasana basti and yoni pichu can help in easing the labour and natural termination of pregnancy with minimal or no postnatal complications. The anuvasana basti administration helps the Apanavayu (prasuti-marut) function normally along with development of snigdha property in the pregnant's body parts like abdomen, flanks and specially genital organs. Yoni pichu helps to prepare lower segment of uterus during term and also soften the vaginal passage helping in a normal labour.

REFERENCES

- Dutta DC. Textbook of Obstetrics. 6th ed. Calcutta: New Central Book Agency; 2004. p. 527-528.
- Tewari P. Ayurvediya Prasuti Tantra evam Stri Roga. 2nd ed. Varanasi: Choukhamba Orientalia; 1999. p. 224.
- 3. Pandeya K, Chaturvedi G. Carak Samhita, Bodhoutini Hindi Commentary, Part-1. Varanasi: Choukhamba Bharti Academy; 1998. p. 939.
- 4. Sastri A. Bhaisajya Ratnavali. 13th ed. Varanasi: Choukhamba Sanskrit Sansthan; 1997. p. 396-397.
- 5. Tripathy B. Carak Samhita, Carak Chandrika Commentary, Part-2. Varanasi: Choukhamba Sanskrit Pratisthan; 2001. p. 1223-1224.

- 6. Tewari PV. Kaumarbhritya in Ayurveda. 2nd ed. Varanasi: Choukhamba Viswabharati; 2006. p. 23.
- 7. Sastri AD. Sushrut Samhita, Ayurveda Tatwa Deepika, Part-1, Chikitsa Sthan 35/18. Varanasi: Choukhamba Sanskrit Samsthan; 1997. p. 145.
- Daftary SN, Chakravarti S. Holland and Brews Manual of Obstetrics. 16th ed. New Delhi: B.I. Churchill Livingstone; 1998. p. 161.

Creative Commons (CC) License

This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY 4.0) license. This license permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.