



ROLE OF PIPPALYADI GRITHA AND PRABHAKARA VATI IN THE MANAGEMENT OF GARBHODAKA KSHAYA VIS A VIS OLIGOHYDRAMNIOS- A CASE STUDY

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ABSTRACT

Garbhodaka is fluid surrounding the foetus which helps in growth, easy movements and change in position and sustains its survival. The quantity of Garbhodaka plays an important role in foetal development and one of the factors indicating about healthy and term pregnancy. Oligohydramnios is a condition of abnormally low amniotic fluid volume that has been associated with poor pregnancy outcome. This is a case study on a patient with mild oligohydramnios diagnosed at 31 weeks of gestation during regular Ante-natal checkup with no signs and symptoms. Abdominal examination was suggestive of 30 weeks as fundal height was 1 week lesser corresponding to the period of gestation and USG showed AFI was 9.0 cm. In this case, Pippalyadi gritha and Prabhakara vati was given orally for a month. There is no direct indication of above said medication in garbhodaka kshaya, but with yukti correcting agni vishamata, pramathi guna of pippali and clears srotoavarodha, rasaoushadis in prabhakara vati like abhraka, loha, makshika indicated in kshaya, acts a rasayana and balya. After 9 days of treatment there was significant increase in amniotic fluid.

KEYWORDS: Garbhodaka kshaya, Oligohydramnios, pippalyadi gritha, prabhakara vati.

INTRODUCTION

Acharya Charaka and Vagbhata mentions the word garbhodaka in the context of aasana prasava avasta^[1] and in upastita prasava^[2] stage. Garbhodaka which is compared to amniotic fluid functions as shock absorber, prevents adhesion between fetal parts and amnion, helps musculoskeletal development, promotes surfactant synthesis and provides adequate expansion ensuring proper placental and foetal circulation.^[3]

Acharya Charaka and Vagbhata mentions nourishment of Garbha occurs in following manner – mothers Hridaya pools the placenta with blood through blood vessels, from placenta to umbilical cord and then to foetus through kedara kulya Nyaya where siras play a major role through which the ahaara rasa flows.^[4] This Nyaya can be considered for utero placental circulation. Therefore, any obstruction in the pathway of circulation can hamper fetal growth as well as transudates across umbilical cord and fetoplacental circulation which is the major contribution of amniotic fluid.

In Ayurveda classics We do not find a direct reference of Garbhodaka kshaya, but there is a reference of garbha kshaya. Garbhodaka kshaya and garbhakshya are associated with each other as studies reveal low values of amniotic fluid are associated with intra uterine growth restriction (IUGR).^[5] This is a case study diagnosed as Oligohydramnios which can be coined as garbhodaka kshaya which is managed with Pippalyadi gritha and Prabhakara vati orally.

CASE STUDY

A female patient aged about 22 years, belongs to Muslim religion and middle-class family with married life of 3 years visited the OPD of PTSR dept, SKAMC&HRC with history of 7 months of amenorrhea with Obstetric history G2P1L1A0D0, for regular ANC checkup and USG scan revealed AFI-9cm. She is not a k/c/o GDM, PIH or thyroid dysfunction/ systemic dysfunction. Her obstetric scan on 21/11/23 revealed AFI 9.0cm(mild oligohydramnios) at 31 weeks of gestation.

Diet – non-vegetarian

Appetite – Good

Bowel – Once a day, Regular
 Micturition – 6-7 times/day
 Sleep – Normal
 Habits – coffee 1time/day
 Built – moderate
 Nourishment – Good
 Pallor – Absent
 Edema – Absent
 Clubbing – Absent
 Cyanosis – Absent
 Icterus – Absent
 Lymphadenopathy – Absent
 Height – 156 cm
 Weight – 61 kg
 BMI – 24.7 kg/m²
 Pulse Rate – 78 beats/minute
 BP – 120/80 mm Hg
 Respiratory Rate – 18 cycles/minute
 Heart Rate – 80/minute
 Temperature – 98.2°F
 Tongue – Uncoated

ASHTA STHANAPAREEKSHA

Nadi- 78/min
 Mala- 1 time/day
 Mutra- 6-7times/day
 Jihwa- Alipta
 Shabda- Prakrita
 Sparsha- Prakrita
 Drik- Prakrita
 Akriti- madyama

DASHAVIDHA PAREEKSHA

Prakriti: vatakapha
 Hetu: Akala bhojana, katu, madhura ruksha ahara.
 Dosh: Vata, kapha
 Dushaya: Rasa, rakta, Meda
 Desha: Sadharana

Kaala: 3rd trimester of Garbhini avastha Bala: Madhyama
 Sara: Madhyama
 Samhanana: Madhyama
 Pramana: Madhyama
 Satmya: Vyamishra
 Satwa: Madhyama
 Ahara shakti: madhyama
 Abhyavarana Madhyama
 Jarana Shakti: Madhyama
 Vyayama Shakti: Madhyama
 Vaya: Vivardhamana, Youvana

ATURABHUMI DESHAPAREEKSHA

Samruddhatah: sadharana
 Vyadhitah: sadharana
 Jatah: sadharana

PER ABDOMEN EXAMINATION

Uterus

Fundal height-Approx 30 weeks size (GA A/c LMP is 31 Weeks)
 Fetal Movements – Present
 Fetal Heart Rate – 136-142 bpm
 Diagnosis: Garbhodaka kshaya

Course of treatment

21/11/2023
 Prabhakara vati 1-0-1 after food
 Pippalyadi gritha 10ml -0-10ml with milk before food
 X 9 days

OBSERVATION

After the course of treatment the patient had an uneventful pregnancy, at 38 weeks 5days of gestation patient came with the complaints of pain at previous LSCS scar associated with low back pain, later she delivered a single live healthy male baby with birth weight of 2.7kg through LSCS.

Date	USG findings	Treatment given	Observations
21/11/2023	Mild oligohydramnios (AFI-9.0 cm) AFI- 9cm BPP- 8/8 EFW - 1544+/- 225gm	1.Prabhakara vati 1-0-1 after food 2.Pippalyadigritha 10ml-0-10ml with milk before food X 9 days	Repeat scan (30/11/2023): AFI- 11.7cm BPP- 8/8 EFW-1928+/- 281gm

DISCUSSION

When we look into cause for oligohydramnios, it can be fetal or maternal cause, in this case it mainly invokes about utero placental insufficiency which we can correlate to vishamata of siras where impairment of vata is seen due to which ahaara rasa to garbha is reduced or impaired which may be the cause for reduced garbodaka.

Pippalyadi Gritha^[6] mentioned in Bhaishajya Ratnavali contains Shunthi (Zingiber officinale Rosc.), Kushtha (Saussurea lappa C.B. clarke), Pippali (Piper longum Linn.), Bilwa (Aegle marmelos Correa ex Roxb.) and Munakka (Vitis vinifera Linn.). The ingredients of the Pippalyadi Gritha are having the properties like

Vatashamaka, Kaphanashaka, Srotoshodhana, Rasayana, anti-inflammatory and antibacterial.

Prabhakara vati- a khalviya rasayana has Swarna makshika bhasma, Loha bhasma, Abhraka bhasma, and Shuddha Shilajatu and Arjuna kwatha as ingredients.

Abhraka bhasma possesses snigdha, sheeta veerya, kashaya, madhura rasa, sarva dhatuposhaka, medhya and rasayana property.^[7] Abhraka bhasma by its dhatuposhana (nourishing to all dhatu) and rasayana action helps in correcting the circulation which is caused due to thinning of blood vessels.

Makshika bhasma possesses tikta, madhura rasa, sheeta, laghu guna, sheeta veerya, katu vipaka, tridoshaghna and is said to have balya, yogavahi, rasayana property.^[7] Due to the presence of loha in swarnamakshika bhasma, it enhances the strength in person and blood circulation.

With all the above drugs mentioned it acts as srotoshodaka, rasayana, yogavahi and thus alleviating vata dosha along with good circulation. Hence, there is improvement seen in the patient.

CONCLUSION

Ayurvedic medicine administered orally showed promising results in the management of Garbhodaka kshaya via-a-vis oligohydramnios. Pippalyadi gritha acts as Deepana in terms of kayagni in both mother and Garbha and also has srotoshodaka property. Prabhakara vati improves the circulation and its ingredients like abraka, makshika, shilajatu, loha acts as balya, rasyana thus, improving the condition. By right intervention at right time, we can decrease the incidence of pre term labor, Intra Uterine Growth Retardation, Intra Uterine Death and need for emergency cesarean section due to low amniotic fluid, thus improving both maternal health and fetal outcome.

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