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EFFECT OF SHATAVARI ON GARBHINI PARICHARYA

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Abstract: Ayurveda being the ancient scientific medicinal system of the world has a significant contribution in the field of human reproduction. And after thousands of years the principles are constant and still can be utilized to find solutions to the increasing problems connected with the future progeny. The foetus is called as garbha and it consists of anga-prtyanga (organs and systems) mana (mind) and soul (atma). The woman carrying the garbha is garbhini (pregnant lady) and the care taken by the relatives, herself, doctors and paramedics is called as Garbhini paricharya (antenatal care) in ayurveda. Ayurveda advocates the dietary regimen, exercises, psychological counselling, dos and don'ts in the behavior.

Shatavari has guru, snigdha guna, madhur vipaka and sheet virya and vringhana property which helps in growth and development of fetus and maintenance of proper health of mother.

Keywords: Ayurveda, Garbhini Paricharya, Shatavari, Guru, Snigdha, Vringhana.

Introduction: Garbhini paricharya is a unique concept in ayurveda. According to Ayurvedic philosophy, antenatal care starts before conception. A special dietary regime and code of conduct has been advocated for the garbhini right from the first day till the ninth month of pregnancy. This regime has been formulated considering the different physiological changes taking place in the pregnant women and to minimize the minor ailments and major complications during pregnancy. The aim of present study is to see the effect of Shatavari on garbhini paricharya.

Materials and Methods

The basic physiology of women is changed during pregnancy. These physiological changes and minor ailments can be neutralized by dietetic regimen and drugs of mridu guna, madhura rasa, madhura vipaka and sheet virya because most of the ailments in Garbhini is due to vitiated vata.

Patients with early pregnancy (8-9 weeks) of different age and parity were selected for study. Selection of cases was done on the basis of detailed history. Treatment was advised in these selected cases and divided in two groups 'A' and 'B' according to different treatment. In group A iron, calcium and folic acid tablets were

given and in group B additional Madhuyashti churna 3 gm BD orally with milk was given.

Discussion

The pregnancy care in Ayurveda has a very special emphasis on the principles of care that are often not considered important enough in modern medicine. In today, modern medical sciences the antenatal care is said to begin only after conception while according to Ayurvedic philosophy it starts before conception with main objective of their future offspring. After conception maximum emphasis is on regulated diet and mode of life. It is established fact that most of the complications during pregnancy develop due to mental/physical ill health of the expectant mother, If proper care of this aspect is taken, majority of the complications can be avoided. In Ayurvedic classics, description of clinical features of pregnant women, advices for month wise dietetics were available. Holistic approach of Ayurveda is more than replacement of vitamins or mineral deficiencies.

The drug selected for the study is based on criteria, authentic references or as those having madhura rasa, sheeta virya, normalize the vata, is not pungent and easily available with reasonable cost. In Samhita (Sh. 10/3) madhur, sheet dravyas are prescribed^[1] in 1st trimester, so Shatavari was selected.

Table 1 : Showing total incidence of minor ailments in total no. of women and both the groups.

| Minor ailments | TOTAL (n=50) | | Group A (n=25) | | Group B (n=25) | |
|-------------------------------------|--------------|----|----------------|----|----------------|----|
| | Present | % | Present | % | Present | % |
| Nausea | 19 | 38 | 10 | 40 | 9 | 36 |
| Vomiting | 15 | 30 | 9 | 36 | 7 | 28 |
| Pain in abdomen | 16 | 32 | 9 | 36 | 8 | 32 |
| Gas formation | 9 | 18 | 5 | 20 | 4 | 16 |
| Constipation | 11 | 22 | 7 | 28 | 4 | 16 |
| Loose motion | 4 | 16 | 3 | 12 | 1 | 4 |
| Leg cramp | 14 | 28 | 9 | 36 | 5 | 20 |
| Backache | 14 | 28 | 8 | 24 | 6 | 24 |
| Heart burn | 12 | 24 | 7 | 28 | 5 | 20 |
| Fatigue | 16 | 32 | 9 | 36 | 7 | 28 |
| Tingling sensation in hand and foot | 12 | 24 | 7 | 28 | 5 | 20 |

Minor ailments during pregnancy as nausea, vomiting, pain in abdomen, gas formation, constipation, loose motion, leg cramp, backache, heart burn, fatigue and tingling sensation in hand and foot were 36%, 28%, 32%,

16%, 16%, 4%, 20%, 24%, 20%, 28%, 20% and 28% respectively in group B patients. Percentage of common ailments were less in comparison to group A (Table 1).

Table 2 : Showing status of weight of new born baby after delivery in total no. of women and both the groups.

| Weight of new born baby | TOTAL (n=50) | | Group A (n=25) | | Group B (n=25) | | Between both the groups comparison chi- square test |
|-------------------------|--------------|----|----------------|----|----------------|----|---|
| | No. | % | No. | % | No. | % | |
| <1.5 kg | 0 | 0 | 0 | 0 | 0 | 0 | X ² =2.540 |
| 1.5- 2 kg | 1 | 2 | 1 | 4 | 0 | 0 | P=0.468 |
| 2-2.5 kg | 8 | 16 | 5 | 20 | 3 | 12 | N.S. |
| 2.5-3 kg | 25 | 50 | 13 | 52 | 12 | 48 | |
| >3 kg | 16 | 32 | 6 | 24 | 10 | 40 | |

Majority of new born babies i.e. 82% having the weight above 2.5 kg while 24% and 12% new born babies in group A and Group B respectively having the weight below 2.5kg (table. 2). In group B weight of new born babies were more than group A. It may be due to madhur rasa, sheeta virya drugs which are beneficial to the mother and foetus.

Conclusion: Shatavari was given in group B patients. Nausea and vomiting are the commonest complain of pregnant women in first trimester. In group B, no. of cases were less having complaint of nausea and vomiting. Sushruta (S.S. Su. 46/302, 303) has advocated Shatavari as agnibala vardhaka, vrishya, hridaya and rasayana^[2].

Complain of pain in abdomen was also reduced in group B patients. All the drugs prescribed in garbhini paricharya having madhura rasa, madhura vipaka, sheeta virya and vatahara property. One of the karma of vitiated vata is shula. The incidence of constipation and gas formation were also decreased in group B women. It may be due to oral drug like Shatavari having agnibala vardhana, hridaya (SS. Su. 46/302), gulma nashaka^[3] (B.P. Gud. Varga. Shlok No. 186-188) property. Shatavari has vatahara property so, give relief in leg cramp and backache. Incidence of heart burn was also less in group B, because Shatavari given in group B having madhura rasa and sheeta virya property.

Besides this, anti-inflammatory property was seen in Shatavari^[4].

Shatavari has madhura rasa, madhura vipaka and sheeta virya properties, so have anabolic effect and normalize the vitiated vata. As vitiated vata is the main cause of minor ailments in pregnancy. Garbha is predominantly kaphatamak so, madhura guna, sheeta virya and madhur vipaka drugs are positively produce/ increase growth and development of the foetus. Balya, rasayana, jivniya and vrihana properties will help in betterment of the health of the expectant women. The number of patient for this study is less so further study in big patient sample is required.

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