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### PRASAVA PARICHARYA - A CASE STUDY

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### **ABSTRACT**

In a women's life, during reproductive period, pregnancy, parturition and puerperium are three main stages. Among these, parturition needs more care and attention. Labour is a natural process which requires minimal assistance but more care. Giving birth is a life changing event and the care a woman receives during labour has the potential to affect her physically and emotionally. Even though labour is the natural process, sometimes due to altered anatomy, physiology and any other reasons a normal labour may suddenly become abnormal. So to avoid such complications our *Acharyas* have described about *Garbhini Paricharya* (antenatal care), *Prasava Paricharya* (intranatal care) and *Soothika Paricharya* (postnatal care) in detail. Among these *Acharya Vagbhata* has explained about *Prasava Paricharya*. In that he explained About *Sthanika Abhyanga*, *Swedana and Upaghrana* (snuffing) of compound drugs followed by *Dhooma Sevana* (inhalation) during *Prasava Kaala* i.e. in the first and second stage of labour. So that the women can bear down easily and can deliver baby in short period. He also explains that, this procedure will help in *Adhomukha Sampadana* of *Garbha* i.e. descent of baby during labour which is necessary for *Sukha Prasava*.

Keywords: Sukhaprasava, Dhooma Sevana, Upaghrana

### INTRODUCTION

The definition of labour is series of events that take place in genital organs in an effort to expel the viable products of conception out of the womb through the vagina into the outer world. In *Ayurveda* the process of normal labour is termed as *Sukha Prasava*. So to achieve *SukhaPrasava* many *Paricharyas* has been explained by our *Acharyas*. Tribal population accounts for 8.4% of the total population of India. The overall rate of caesarean section in 2015-2016 is around 17.2% in India, increased from 8.5% in 2005-06.

The ultimate aim of every pregnant woman is have a healthy baby with normal delivery. Giving birth is a life changing event, and the care that woman receives during labour has the potential to affect her both physically and emotionally the short and longer term. Nowadays even though many modern technologies, treatment modalities are available, there are some areas where still our old *Shaastras* and *Vedas* rule. In the Dept. of Gynaecology and Obstetrics, compared to Allopathic medicines and procedures, our *Ayurvedic* 

medicines and procedures have much more effect on the patient and managing the cases. For example compared to old era the incidence of caesarean section is increased. In previous time the woman used to deliver naturally; thus, they were healthy with their healthy reproductive system without any complications. Giving birth through the vaginal canal is natural process but other than vagina is against the nature. Even though labour is a natural process, sometimes it may convert into abnormal due to some maternal or fetal causes.

Ayurveda, the Veda of life means it's the science of life. It has abundant knowledge within it. Concept of Garbhini Paricharya, Prasava Paricharya, Soothika Paricharya which were explained by our Acharya will help a pregnant woman go through the process of labour without any complications and will help the woman to deliver a baby through natural process.

Compared to caesarean sections, the vaginal delivery is much safer. LSCS being a major surgery, makes the patient to stay longer in the hospital and it is costlier one also.

In present day, the obstetrician and woman in labour also would prefer the delivery to be accomplished in shortest duration, compatible with safety of mother and fetus. Thus the effort is made to study the effect of *Prasava Paricharya* which is to be followed by pregnant woman during *Prasava*.

### **Case Report**

A 21 years, Muslim patient resident in Sangli was presented in IPD of *Prasootitantra and Streeroga* department, Shri J.G.Co. Ayurvedic hospital Ghataprabha on date 04/01/2020 with the following details:

Patient name : XYZOPD No :4078

IPD NO :171
Age : 21 year
DOA : 4/1/2020
Address : Sangli

• Chief complaints: Primi gravida with 8&3/4<sup>th</sup> months of amenorrhea (37weeks, 5days), Labour

- pain started along with mucoid discharge from vagina and low backache at 5am on 4/1/2020.
- History of present illness: Patient is having primi gravida with 8 & 3/4th months of amenorrhea.
   She has developed pain abdomen and low backache since today morning 5am. So she came to our hospital for delivery at 7:10am on 4/1/2020.
- Menstrual history: Age of menarche: 13years, LMP: 17/4/2019, EDD: 24/1/2020
- Family history: Nil
- Immunological history: 2 doses of inj.TT were taken at 4<sup>th</sup> and 7<sup>th</sup> month of pregnancy.
- Diet history: Mixed diet
- Personal history: Marital status: 1year; Appetite: Normal; Sleep: Normal; Bowel: Normal; Micturition: Normal

### **Systemic Examination:**

CVS-S1, S2 heard.

**CNS**-Conscious, oriented.

RS-B/L lung fields clear.

### **Local Examination:**

Breast examination: Everted nipple, secondary areola+, Montgomery's tubercle+

P/A Examination: Everted umbilicus, linea nigra+, striae gravidarum+, uterus height-36 to 38 weeks, FHS: 138bpm and regular.

P/V Examination: Cx-1 finger tight at 7:30 am on 4/1/2020.

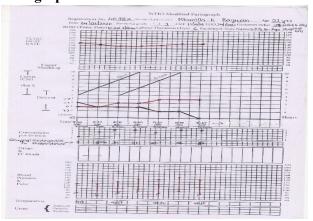
### **Treatment Plan**

- Soap water enema.
- Sthanika Abhyanga to Parshwa, Prushta, Kati, Sakthi with Sukoshna Tilataila followed by Ushnajala Parisheka<sup>1, 2, 4</sup>.
- Snuffing of *Pottali* prepared with *Vastragaalita Choorna* of *Kushta*, *Ela*, *Langali*, *Vacha*, *Chavya*, *Chitraka*, *Chirabilwa* is given along with *Dhumasevana* with the drugs *Bhurjapatra*, *Shimshipa* and *Sarjarasa* is given during intracontraction period<sup>1, 2</sup>.
- Chankramana (walking) and Jhrumbhana (yawning)<sup>1, 2, 3</sup> are advised upto 6-7cm dilatation of cervix in the first stage of labour.

### Bishop's Score<sup>5</sup>:

Date(4/1/2020) & Time	Dilatation	Effacement	Consistency	Station	Position	Score
7:30am	1 finger tight	60-65%	firm	-1	Posterior	1
8:00am	1 finger loose	60-65%	firm	0	Posterior	1
8:30am	3-4cm	70-75%	soft	0	Midline	2
9:00am	4-5cm	75-80%	soft	0	Midline	2
9:30am	5-6cm	75-80%	soft	+1	Midline	3
10:00am	7-8cm	85-90%	soft	+1	Midline	3
10:30am	Full dilatation	100%	soft	+2	Midline	3

### Partograph<sup>6</sup>:



#### Prasava Kala:

Prathama Avastha: 5hours, 20min

Dwitiya Avastha: 20min Tritiya Avastha: 15min Navajata Shishu Vivarana:

Baby delivered at: 10:42am on 4/1/2020.

Live male baby of birth weight 2.4kg with APGAR<sup>7</sup>

score 9.

### **Mother Note (1 Hour After Delivery):**

BP: 140/80mmhg Pulse: 80/min

P/V: Lochia rubra+, normal bleeding **Probable Mode of Action of Drug** 

1] Sthanika Abhyanga and Swedana:

In the process of labour, the action of *Vaata* is very important (mainly *Apanavata*). To achieve the normalcy in the labour, *Prakrutavastha* of *ApanaVata* is essential. During labour the *Sthanika Abhyanga* and *Swedana* helps to maintain the *Apanavata*, relaxation of pelvic muscles and also improves the blood circulation.

### 2] *Upaaghrana* of *Pottali* and *Dhumasevana*:

"Nasa hi shirasodwaram" Acharya Sushruta has explained that nose is the gateway for Shiras. According to him the drugs instilled through the nose will directly act on the brain centres. Here the drugs which are used are volatile in nature with Teekshna Guna, so snuffing and Dhumaseva of these drugs may affect the hypothalamus part of brain. By that it may have effect on the production of oxytocin hormone which is very much necessary for the normal delivery.

### DISCUSSION

Prasava i.e. labour is a natural process which requires minimal assistance but maximum care. The present study deals with aiding 'a mother to be' woman to pass through a normal labour, uncomplicated and unhindered. All the Ayurvedic classics provide description about Prasava Paricharya. Among all, Acharya Vagbhata has explained Prasava Paricharya in a unique manner. A normal labour passes through three stages. In the first stage of labour, duration of the stage is very important since prolonged labour due to ineffective uterine contractions or undescended fetus can have adverse effect on mother and baby. It is equally important that the second and third stages also occur within the normal time period. The present study is undertaken with a view to bring about safe, effective normal vaginal delivery.

The Sthanika Abhyanga and Swedana; they help in the relaxation of muscles of pelvic cavity, improves blood circulation and also regulates the Apana Vata. Upaaghrana of Pottali and Dhumasevana may act on the brain centres mainly on hypothalamus by that they may help in the production of oxytocin hormone which is very necessary for the contraction and

relaxation of uterus and this will lead to *Sukha Prasava* i.e. normal delivery. *Chankramana* and *Jhrumbhana* will help in the descending of fetus by regulating the *Vata*.

In the present study the patient is given with the treatment as mentioned in the *Prasava Paricharya* of *Acharya Vagbhata*. She has completed her first, second and third stages of labour within six hours and delivered a healthy baby without any complication. After delivery the condition of the patient was also good. No any complaints were reported by the patient.

### CONCLUSION

The ultimate dream of every pregnant woman is to have a healthy baby with normal delivery. The labour process is precious stage in female's life. It needs more care.

एकपादो यमकुले पादएक इहस्थित:।द्रुश्ट्वादु:ख्ंस्त्रीयस्तस्या इत्येवम्ब्रुवतेमित:॥ (का.शा.५/३६)

In Kashyapa Samhita it is told that the woman who is in the stage of labour is in the condition like her one leg is in the hell and another leg on the earth, means she is fighting in between the life and death. So the Prasava Paricharya which is explained by Acharya Vagbhata will help the pregnant woman to go through the process of labour with short period of time along with fewer complications. Practicing the Prasava Paricharya will also help to reduce the incidence of LSCS. The drugs used are cost effective and the procedure is also very much convenient to the pregnant woman. So there is a need of study on this Prasava Paricharya in large number.

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