

**SUPRAJA THROUGH GARBHADHANA VIDHI – A CASE REPORT**

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**ABSTRACT**

Pregnancy is an important stage in a woman's life. In this regard, nowadays, pregnancies are planned rather than unplanned or by accident. Therefore the ancient methods that have been explained in Ayurveda are becoming accepted in this present era. Motherhood is considered as a great responsibility as the future of a nation depends on the quality of its youth. In Ayurveda, it is said as "*Shreyasi Praja / Suprajapraja*", i.e. a healthy progeny. To achieve this, Ayurveda fixed some rules and regulations for the couple before attaining pregnancy by the *Garbhadhana Samskara / Vidhi* or also known as *Purva – Samyoga Vidhi*. This is a case study where the congenital scan at 20 weeks, detected the fetus with hydrocephalus, a congenital anomaly.

**Key words:** *Garbhadhana Vidhi, Supraja, Hydrocephalus, Congenital anomaly, Birth defects, Ayurveda*

**INTRODUCTION:** The importance of a planned pregnancy is gaining popularity day by day. The ancient methods have proven that pregnancy is not only about physical well being of the mother and child, but it is also for the mental and spiritual well being. It is also a procedure which is done to get a designer baby. This *Samskara* is practised to stimulate baby's intellect gently during pregnancy itself keeping *Masanumasika Garbha Vriddhi*, monthly wise development of the foetus as said in Ayurveda.

There are sixteen *Samskaras* according to our *Shastras*<sup>1</sup>. *Garbhadhana Samskara* is one of them. This *Samskara* is a process which removes the *Doshas* of *Kshetra* i.e. reproductive system of both female and male partners. With reference to this objective, the following case was treated.

**AIM:**

To deliver a *Shreyasipraja*, a healthy progeny, without any birth defects through Ayurvedic modalities of preconception care and *Garbhini Paricharya* to the patient with history of medical termination

of pregnancy at 20 weeks due to Hydrocephalus.

**Background:**

**Ayurved *Garbh Samskara* mainly consists of....**

1. *Beeja-Shuddhi*<sup>2</sup>
2. *Garbhadhana-Vidhi*<sup>2</sup>
3. *Pumasavana Karma*<sup>3</sup>
4. *Garbhini Paricharya*<sup>4</sup>

1. *Beeja-Shuddhi*

Prior to conception, it's very important that the *Matrubeeja* (Ovum) and *Pitrubeeja* (Sperm) have no deformity and are pure in a biological sense. Impure or deformed *Beeja* are responsible for hereditary deformity. In Ayurveda, *Matrubeeja* and *Pitrubeeja* are purified by means of an appropriate cleansing procedure called *Panchakarma*.

2. *Garbhadhana -Vidhi*

After the *Beeja Shuddhi*, the couple should try for procreation on an auspicious day.

3. *Pumasavana Karma*

This process is done with three objectives (1) Before conception for the

achievement of conception, (2) Immediately following conception for proper implantation and (3) To have the desired sex of the baby.

#### 4. *Garbhini Paricharya*

Monthly diet and regimen advised during antenatal visits.

**Study centre:** JSS Ayurveda Medical College and Hospital, Mysuru

#### **Case description:-**

**Chief complaints:** A lady aged 30 years with obstetric history of G3P1A2L1 and a history of MTP conducted at 20 weeks due to hydrocephalus wanted to conceive for a second child without any birth defects.

#### **Associated complaints:**

She did not have any associated complaints. She was N/K/C/O of DM, thyroid dysfunction and hypertension.

#### **History of the present illness:**

The lady was apparently healthy 1 ½ years back until she conceived for the third time. During the anomaly scan at 20weeks, she was diagnosed with hydrocephalus pregnancy and underwent medical termination of pregnancy due to the same.

The lady also gave a history of missed abortion 2 years back during the second month of pregnancy.

During her first pregnancy, the lady was diagnosed with GDM (gestational diabetes mellitus) and was on medication for the same. She had undergone LSCS (Lower segment caesarean section) to prevent complications. During the post natal period, she completely recovered from diabetes mellitus and was not on any kind of medications thereafter.

She had not experienced any difficulty in conceiving and every time she had conceived naturally. Her husband was absolutely healthy.

The patient wished to conceive again but was afraid of the recurrence of the

previous anomaly. Therefore the patient wanted to take proper medical advice through Ayurveda before conception and the couple approached our hospital.

#### **Menstrual history**

LMP: 23<sup>rd</sup> April, 2020

Duration: 3 – 4 days

Interval: 28 to 30 days, Regular

#### **Obstetrics history:**

G3P1A2L1

#### **Contraception history:**

The couple were not using any methods of contraception.

#### **Family history:**

All family members were said to healthy.

#### **Personal history:**

Appetite: Good

Diet: mixed diet, the lady had no habit of consuming coffee or tea.

Micturition: 4 to 5 times / day

Bowel: once / day

#### **Married life:**

The couple had a married life of 7 years. It was a non – consanguineous marriage.

#### **MATERIALS AND METHODS**

Present study was a single case study. *Shodhana (Snehapana and Virechana)* was advised for the couple for the purpose of *Beeja Shuddhi. Pumasavana Karma* was done for the achievement of *Garbha* and *Garbha Sthapana. Garbhini Paricharya* was advised after conception along with routine Antenatal care as per WHO guidelines – folic acid<sup>5</sup>, iron<sup>6</sup> and calcium<sup>7</sup> supplements. Two doses of Injection Tetanus toxoid were given.

#### **Treatment**

*Deepana – Pachana* was done for five days for the couple as they had *Ama lakshanas* with following tablets:-

- Tab. *Agnitundi Vati*: 1-1-1
- Tab. *Chitrakadi Vati*: 1-1-1 both administered 15min. before food.

*Pravicharana Snehapana* was done from the sixth day onwards with *Phalaghrita* for the woman and *Amrita Prasaha Ghrita* was given to the husband. After *Samyak Snigdha Lakshanas* were found, *Sarvanga Abhaynaga* and *Bashpa sweda* was done for 3 days. Later 70gms of *Trivrut Lehya* followed by a glass of warm milk was given to both. The lady had about 18 vegas and her husband had 16 vegas. *Madhyama shuddhi* was achieved. Both were advised with *Samsarjana Krama* accordingly.

After the completion of *Samsarjana Krama*, the lady was given oral medications as follows:

1. Tab. *Pushpadhanva Rasa* 2-0-2 for one month
2. Cap. Fala Gold 1-0-0 for one month
3. Syp. *Sukumara Kashaya* 10ml-10ml-10ml for one month

In the next follow up, she was administered *Uttara Basti* with *Maha Narayana Taila* for 3 days after *Yoni Prakshalana* with *Panchavalkala Quatha*. The patient was also administered with 8 drops of *Nasya* starting from 6th day of for seven days, then discontinued for 3 days and again given for seven days.

The patient was administered with these procedures and internal medications for three months and during this period her cycles were regular. Follicular study showed good follicles after these medications.

In the fourth month of her treatment, she was administered with the following

1. Tab. Torchnil 1-0-1 after food
2. Tab. Leptadine 1-0-1 after food

The male partner was given *Ashwagandha Ghrita* 10ml orally in the morning for 1 month. In the 2<sup>nd</sup> month of pre conception care, he was advised with *Pratimarsha Nasya* with *Ashwagandha Ghrita*.

After taking these medications and having followed active sexual life as advised after three months of treatment, the patient had a missed period and UPT was positive in December 2020.

#### Investigations:

NT scan done at 12 weeks and Anomaly scan done during 20 – 22weeks were both normal.

Antenatal Blood investigations were absolutely normal.

**Table.1 Garbhini Paricharya<sup>8</sup>**

1	<i>Laja Manda</i> <sup>9</sup>	1small bowl for before breakfast and dinner for 1 month
2	Syp. <i>Matulunga Rasayana</i> <sup>10</sup>	10ml – 10ml – 10ml before food from beginning till completeion of 28 weeks
3	<i>Dhanvantaram gulika</i> <sup>11</sup>	1-0-1 started from 8weeks till 32 weeks
4	<i>Narikela Rasayana</i> (a folklore medicine)	Given only 1 day and 1 dose at 12 weeks, 20 <sup>th</sup> week and 28 <sup>th</sup> week
5	<i>Gokshura Ksheerapaka</i> <sup>12</sup>	Started from 24 weeks to 28weeks
6	<i>Shatavari Ksheerapaka</i>	Started from 28weeks till delivery
7	<i>Anuvasana Basti</i> <sup>13</sup>	Was administered in 34 weeks for 1 week
Month wise diet and lifestyle was advised. Yoga, meditation, mantra and music were also advised.		

The Antenatal period was uneventful. LSCS was done on 2<sup>nd</sup> September 2021. She delivered a healthy female baby weighing 2.8 kgs. without any birth defects.

**Probable mode of action:**

**DISCUSSION AND CONCLUSION:**

Hydrocephalus<sup>14</sup> or *Sheershambu*<sup>15</sup> as mentioned in *Bhaishajya Ratnavali*, can be congenital or acquired. There is abnormal accumulation of *Sneha (Ambu)* in *Siras* because of the following reasons such as intake of cold water, parasitic infestation, trauma, excessive use of alcohol, intake of unwholesome diet causing *Vata* vitiation. *Snehapana* helps in curing the vitiations in the partners, *Sarvanga Abhyanga* and *Bashpa sweda* helps to move the *Dosha* from *Shakha* to *Koshta*. *Virechana* helps in eliminating the vitiated *Doshas*.

*Vata* is the physiological force in the body responsible for normal functioning of other factors. Basti is the best treatment for vitiated *Vata dosha*. *Uttarbasti* is *Uttarphaladayaini*.

*Nasya karma* is indicated in *Yoni Rogas* and it helps to promote health. The action of the medications and diet can be understood in the following manner. Drugs are active due to their own inherent components (*Dravya Prabhava*), properties (*Guna Prabhava*) and both combined (*Dravyaguna Prabhava*) in a particular time. On reaching the particular site, they act on that site with a particular mechanism and objective. (Ch.Su. 26/13).

**CONCLUSION:** Preconception care mentioned in Ayurveda has again given successful conception. The outcome being a healthy baby or *Supraja*. The impact of diet and regimen as per *Garbini Paricharya* stated in our texts is helpful for prospective parenting. As in this case, Preconception care and Antenatal care

helped in an uneventful pregnancy. But the aspect of *Garbhadhana Vidhi* and *Garbini Paricharya* has scope for further research and documentation.

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Source of support: Nil Conflict of interest:  
None Declared

Cite this Article as : [Vidya Narayan et al :  
Supraja Through Garbhadhana Vidhi – A  
Case Report] [www.ijaar.in](http://www.ijaar.in) : IJAAR VOL V  
ISSUE V NOV-DEC 2021 Page No:336-340