



**ROLE OF SUKHAPRASAVADA GHRITA ORALLY AND KSHEERABALA TAILA
MATRA BASTI IN SUKHA PRASAVA-A CASE STUDY**

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ABSTRACT

Series of events that take place in the genital organs in an effort to expel the viable product of conception out of the womb through vagina into the outer world is termed as labor.^[1] Labour is natural physiological process but they can turn into complications at any time if proper management is not done. In our classics masanumasika garbhini paricharya is mentioned for nourishment of the mother, fetus and to avoid complications during labor. Snehana of apatyapatha is needed for sukhaprasava so in Navama Masa administration of sneha, matra basti, yoni pichu with madhuroushadha siddha dravyas were described by our Acharyas.^[2,3,4,5] In present study, a 30-year-old primi gravida with 9months of amenorrhea was selected, she was given sukhaprasavada ghrita orally from 36weeks of gestation to till delivery and ksheerabala taila matra basti for 7days, she was assessed during labor to document the result of given treatment. A FTND of single live male child of 3.95kg delivered with cephalic presentation. The condition of newborn assessed by APGAR score and birth weight. The drugs present in Sukhaprasavada ghrita and ksheerabala taila helps in anulomana of apana vata and snehana of apatyapatha. Hence the current study found effective in the sukhaprasava.

KEYWORDS: Navama masa, sukhaprasava, sukhaprasavada ghrita, ksheerabala taila.

INTRODUCTION

Pregnancy and labor are important phases of women's life. Mismanagement of pregnancy can lead to complicated delivery. Utmost care and wisely management should be done in pregnancy to avoid complications. Due to fear of the complications and intolerance to labour pain, incidence of LSCS is increased nowadays. Hence to prevent the increasing rate of LSCS proper Ayurvedic management should be done and women should be encouraged for normal delivery (sukhaprasava).

Sukhaprasava is said when labour pain is spontaneous in nature and at proper kala i.e at term and delivery of the healthy live child without any fetomaternal complications. For sukhaprasava Apana vata is having significant action and it is called as prasuta maruta in garbhini. So proper functioning of apana vata is required for sukhaprasava. There are so many regimens mentioned in our classics for garbhini among them administration of sneha in Navama Masa orally or in the form of basti is said by our Acharyas.^[2,3,4,5]

Sneha like ghrita and taila are considered as best for balancing vata dosha. Acharya vagbhata has said nitya snehana for garbhini from Navama Masa to till Prasava^[6], considering this, administration of sukhaprasavada ghrita orally and ksheerabala taila matra basti in Navama Masa is done in the present case study.

AIMS AND OBJECTIVES

- To study the effect of Sneha administration in Navama Masa.
- To study the effect of drugs on prasava based on Bishops score.^[7]
- To study the affect of drugs on duration of 3 stages of labor.^[8]

CASE REPORT

A 30 year aged female patient, primi with 9 months of Amenorrhea C/O- intermittent lower abdomen pain and tightness of the abdomen since 4Am on 31/07/2024, visited to opd of Prasooti tantra and Stree roga department SDMIAH Bangalore. Then she was admitted for regular monitoring of vitals, contractions and FHS.

Assessment of the treatment is done through Bishop's score and Duration of 3stages of labor.

Menstrual History

Last menstrual period (LMP) - 24/09/2023
 Expected date of delivery (EDD) - 30/06/2024(As per USG Scan)
 Period of gestation (POG) - 36weeks
 Past menstrual history- Duration -3-4days
 Interval- 40-45days
 Amount of flow -Moderate
 Marital history- 3 years
 Contraceptive history- nil
 Obstetric history- Primi gravida (natural conception)
 Family history- nothing significant
 Past surgical history- nothing significant
 Personal history- appetite, sleep, micturation, bowel were all normal.

Ashta Sthana pareeksha

Nadi : 78/min
 Mutra: 7-8times/day
 Mala: 1time/day
 Jihwa : Aliptha
 Shabda: prakruta
 Sparsha: prakruta, anushna sheeta
 Drik: prakruta

Dashavidha Pareeksha

	PRAVARA	MADHYAMA	AVARA
Prakruti		Vata-pitta	
Sara		✓	
Samhanana		✓	
Pramana		✓	
Satwa		✓	
Aharashakthi	✓		
Vyayamashakthi	✓		
Satmya	SARVARASA		
Vaya	Madhyama		

Antenatal investigations

LAB Reports

Hemoglobin – 12.3gm/dl
 CBC- within normal limits
 Blood group – B Positive
 HIV - Negative
 HBsAg- Non-reactive
 VDRL- Non-reactive
 Random Blood Sugar- 79mg/dl
 Urine routine- within normal limits
 Bleeding time- 3min 30seconds
 Clotting time- 5minutes

USG Reports -22/07/2024

Single Live Intra Uterine Gestation Of 37weeks 3days in cephalic presentation
 Fetal weight-3210gm +/- 15%
 FHR- 134bpm
 Placenta- anterior, grade 2, 7cm away from the internal os
 BPP-10/10

Akruti: Madhyama

General examination

Built - Normal
 Pallor- Absent
 Icterus-Absent
 Cyanosis- Absent
 Clubbing- Absent
 Edema- Absent
 Lymphadenopathy- Absent
 Height- 5 feet
 Weight- 60kg

Vital Signs

Blood Pressure : 120/70mmHg
 Temperature : 98.4° F Afebrile
 Respiratory rate : 18 cycles per minute
 Pulse : 78 beat per minute

Systemic Examination

Respiratory System- Air entry bilaterally, No any added sounds heard
 Cardio Vascular System- S1 and S2 heard, No murmur sound
 Central Nervous System- Conscious and oriented to time and place

Liquor- Adequate
 AFI-15cm

Obstetric examination/ Antenatal Examination P/A-

Inspection- striae gravidarum present
Palpation – Fundal height – 36weeks
 Fundal grip- Buttocks
 Lateral grip- Left lateral- limbs
 Right lateral- spine
 Pawliks grip- Head engaged
 Pelvic grip- Cephalic presentation

Auscultation- FHS- 148bpm, regular

Contractions – present, 1-2contractions/ 10min/15-20sec

Per vaginal examination

Pelvis- adequate
Cervix – 2cm dilatation

Effacement- 30-40%
Consistency -Soft
Cervix Position- middle
Head station- -2

Chikitsa vrittanta

1) Sukhprasavada ghrita

Route-oral

Quantity -12ml BD

Anupana – warm water

Duration- 36 weeks of gestation -till delivery

2) Ksheerabala taila matra basti

Route –rectal

Quantity- 60ml

Duration – 7days (24/07/2024 -30/07/2024)

OBSERVATION AND RESULT

Bishops Score

Time	Position	Consistency	Effacement	Dilatation	Station	Score
5AM	Mid posterior	Medium	30-40%	2cm	-2	5
7AM	Mid posterior	Soft	40-50%	3-4cm	-1	8
10AM	Anterior	Soft	80-90%	5cm	0	12
11PM	Anterior	Soft	100%	7-8cm	+1	13
12PM	Anterior	Soft	100%	10cm	+2	13

Other examination

Time	Contraction	Fetal heart rate	Blood pressure	Pulse
5 AM	1/25'/15-20"	146-150bpm	124/84mmhg	76/min
6AM	1/10-15'/20"	136-140 bpm	130/80mmhg	72/min
7AM	1-2/10'/20-25"	140-144 bpm	126/80 mmhg	78/min
8AM	3/10'/30-35"	140-146 bpm	120/78 mmhg	80/min
9AM	3-4/10'/35"	146-152 bpm	128/86 mmhg	84/min
10AM	4/10'/35-40"	142-144 bpm	120/84 mmhg	88/min
11AM	4/10'/40-45"	142-144 bpm	124/80 mmhg	88/min
12PM	4-5/10'/45-50"	140-146 bpm	126/82 mmhg	84/min

RESULT

A FTND of single live Male baby with cephalic presentation delivered at 12:28pm on 31/07/2024 with RMLE and vaccum suction. Baby cried after tactile stimulation.

Baby details

Sex-male

Weight-3.95kg

Time-12:28pm

Date-31/07/2024

Apgar- At birth-7/10

After 5min-8/10

Duration of 3 stages of labor

1st stage- 8 hours

2nd stage- 28minutes

3rd stage- 10minutes

DISCUSSION

The Mechanism of labor depends on the functioning of apana vata which is also known as prasuta maruta. One of the Karma of apana vata is garbha nishkramana kriya, so maintaining apana vata is necessary for sukhprasava. Sneha is considered as first line intervention for vata. Basti considered as absolute treatment for combating vata dosha.

Our Acharyas also mentioned administration of sneha and matra basti in Navama Masa paricharya for garbhini

which helps the apana vata for its proper functioning. Sukhprasavada ghrita having drugs like *madhura rasa*, *snigdha guna* and vata anulomana property, ksheerabala taila having madhura rasa, vatahara, shoolahara and rasayana property drugs. Properties of Sukhprasavada ghrita and ksheerabala taila helps in anulomana of apana vata, strengthens the uterus and reduces the labour pain and eases the normal delivery.

CONCLUSION

In Garbhini especially in Navama masa there are chances of apana vata dushti. To combat this apana vata, Navama Masa garbhini paricharya i.e orally Sukhprasavada ghrita and ksheerabala taila matra basti has been advised to the patient. Snigdha guna of Sukhprasavada Ghrita and ksheerabala taila found effective for sukhprasava by shortening the duration of 1st stage of labor. Sukhprasavada Ghrita and ksheerabala taila contributed for anulomana of apana vata, snehana of garbhashaya marga and garbha nishkramana. It also contributed for reducing the labor pain in present case study. Both formulations are helpful for nourishment of reproductive organs of mother and nourishment of fetus. So oral administration of sukhprasavada ghrita and Ksheerabala taila matra basti should be advised in Navama Masa for sukhprasava.

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