p harma centro Resent

WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.084

Volume 11, Issue 10, 569-578.

Review Article

ISSN 2277-7105

CRITICAL STUDY OF GARBHAPOSHANA AND ITS IMPACT ON GARBHAVRIDHI W.S.R OF DEVELOPMENTAL ANATOMY

Dr. Varsha*¹, Dr. Madhavi Goswami MD (ayu)², Dr. Naresh Kumar³ and Dr. R.B. Shukla⁴

¹PG Scholar final year Department of Rachna Sharir UAU Rishikul Campus Haridwar.

²Former Registrar UAU, Professor of PG Department Rachna Sharir UAU Rishikul Campus Haridwar.

³Professor and HOD Department of Rachna Sharir UAU Rishikul Campus Haridwar.

⁴Professor Department of Rachna Sharir UAU Rishikul Campus Haridwar.

Article Received on 01 June 2022,

Revised on 22 June 2022, Accepted on 12 July 2022

DOI: 10.20959/wjpr202210-24941

*Corresponding Author

Dr. Varsha

PG Scholar final year Department of Rachna Sharir UAU Rishikul Campus Haridwar.

ABSTRACT

Ayurveda is depends upon the basic principles "swasthasya swasthya rakshanamatursya vikar prashamanam" swasthya i.e well being of individual depends upon the prakruti which is formed during garbhavastha. Journey of foetus starts in mother womb. Whole growth of foetus depends upon the nutrition taken by mother. Nutrition stores for optimal growth and health outcome later in life.the improper foetal nutrition may end in abortion, IUGR or foetal abnormalities. The similar concepts explored in ayurvedic classics in the form of garbha poshana (foetal nourishment), aided by Apara (placenta) and nabhinadi (umbilical cord). Garbhaposhana and garbha matru parathantrata dependency of child on its mother for its proper growth

and development respectively. As the grows inside the *garbhaashaya* (uterus) many changes occurs simultaneously both inside and outside the fetus. Development of structure such as *Garbha Nabhi nadi garbha poshana*. The exchange of materials between the mother and fetus

KEYWORDS: Garbha poshana, Garbha, Nabhi nadi.

INTRODUCTION

Ayurveda whole concept of foetal growth is included under the heading of Garbha. Here the essential factors of conceptions, time of conception followed by formation and its subsequent

development to form an individual is stressed. The term Garbha is the union of "Shukra, Shonit & Aatma" in the mother pelvis. Development of a baby follows a predictable path, from conception to birth. After the union of *shukra* and *shonit*, cells divide and differentiate, the developing baby begins as a zygote, forms into a blastocyst, becomes an embryo and then transforms into a fetus. From the very beginning, the developing cells need oxygen and nutrients which are received from the mother through the endometrium, placenta and umbilical cord. Ayurvedic classics also explores about the role of apara and nabhinadi. Garbhvikriti represents defects in morphogenesis during early fetal life. Garbhvikruti are the important cause of still births and infants' mortality and contributor to child morbidity. Data reveals that 18.5% are children with other congenital malformations found in every year. According to March of Dimess (MOD) global report on birth defects 7.9 million births (6% of total birth) occurs annually worldwide with serious birth defects and 94% of these births occur middle and low income countries. According to joint WHO and MOD meeting report, birth defects account for 7% of all neonatal mortality and 3.3 million under five deaths. The prevalence of birth defects in India is 6-7% which translates to around 1.7 million birth defects annually. The common birth defects include congenital heart disease (8-10 per 1000 live births), congenital deafness (5.6-10 per 1000 live births), and neural tube defects (4-11.4 per 1000 live births). There are various quotes mentioned in Ayurvedic literature about the anomalies or congenital defects precipitating in the fetus and aiming on significant factors that attached to the defective Shukra, Shonit, Aatma, Kaal and Matur- Aahar (dietetic ovum), regimen of the mother) Matur-Vihar (deeds of pregnant mother). All these factors are responsible for vitiation of *Dosha* producing abnormalities of fetus in terms of appearance, complexion and *Indrivas*. Various precautions have been described for pregnant lady to avoid any malformation or defect in progeny These are Garbhopaghatakara Bhava such as Matrija (maternal), Pitrija (paternal), Atmaja (Soul), Rasaja(Nutritional), Satmyaja (Wholesomeness), and Sattvaja (Psych / Mind) to avoid any congenital abnormality in fetus. Garbhani Paricharya described in our Ayurvedic literature has direct scientifically approach towards development of healthy fetus inside the womb of pregnant mother without having any birth defect. It plays a significant role in stabilization of Garbha along with meet the essential nutrient and energy requirement necessary during pregnancy. Chakrapani has clarified the views of Charka and said that suppression of acute desires may cause death of the fetus, but milder ones may ensure abnormalities. GarbhakarBhavas are strongly related to the organogenesis of fetus. In this duration of nine months, Garbha requires the essential nutrition that is called *Poshan*. According to *Ayurveda*, essence of food (rasa) taken by

mother is divided into three parts. First nourishes her body, the second promotes her breast milk and third nourishes to the *Garbha*. *Ayurveda* classics also explores about the role of *Apara* and *Nabhinadi* in fetal nourishment. *Masanumasika Garbhini paricharya* explained in *Ayurvedic* literature should be fo pregnant woman to get a healthy offspring. In *Ayurveda* Maternal food with nutrients enters in maternal *Rasvahininadi* through the *Nabhinadi* of *Garbha*, it circulates blood in *Garbhasharir* and *Sarvashariravayav*. In *Ayurveda* classics *Charka* mentioned *Garbhupghatakara bhava* and *Doharadya avamnana* which leads the cessation in the growth of *Garbha* and cause *Garbhvikrati*. *Charaka sharirsthana* contains many regimens given in *Garbhavastha* which inhance the growth of developing *Garbha*. According to *Ayurvedic* principles, proper preparation of the parents is an essential prerequisite for a healthy progeny.

Proper nutrition of the mother during pregnancy help to produce healthy offspring, thus structuring a healthy family, society and nation. Negligence in *Garbhposhan* becomes a cause for unhealthy and defective child birth and also causes fetal anomalies, abortion and IUGR.there is a need for interpretation of *Garbhposhan* mentioned in *Ayurveda* classics with modern literature according to organogenesis.Here is an attempt made to understand the concepts of *garbhposhana* (fetal nourishment) in comparison with modern concepts of fetal nourishment and related applied aspects.

AIMS AND OBJECTIVES

- 1. To compile the facts related to *Garbhposhan* and *Garbhvidhi* on the basis of basis of ancient and modern literature.
- 2. To explore the structures involved in *Garbhposhan* as per *Ayurveda* and Modern literatures.
- 3. To evaluate the growth and development of *Garbha* according to *Masa- anumasik vridhi* correlation with weekly development.

REVIEW OF LITERATURE

Ayurvedic review

According to Acharya *Susrutha* the umbilical cord is attached to the *rasavaha nadi* (maternal part of the placenta) of the mother and this carries ahara rasa *virya* (nutrition) from the mother to the fetus. The fetus grows by this indirect supply of nutrition. [1] From the time of conception until the different parts of the body and their subdivisions have got manifested, the embryo gets nutrition from the *tiriyak gata* (obliquely running) *rasavaha dhamanis*

(vessels carrying rasa) which course through all parts of the body and imparts life to the embryo. [2] The growth and development of the fetus takes place by means of the garbha Nabhi nadi, which serves as a channel for the rasa (lymph-chyle) formed in the mother's body. This nourishment of the fetus from the mother's body begins as soon as the fetus becomes endowed with life and continues up to the time when the child ceases to be connected with the mother. [3] The fetus receives all the nourishment it needs from the metabolic products of the mother and also breathes and sleeps in unison with the mother. According to Acharya Charaka the fetus is free from thirst and hunger. The garbha is dependent upon the mother for all its activities. The fetus is nourished by the process of upasneha (exudation) and upasweda (thermo-regulation). Some of the organs are well manifested and some others are not so, the fetus draws nourishment by the process of exudation, sometimes through the romakupa (hair follicles) and sometimes through the channels of umbilical cord. The umbilical cord of fetus is attached to the umbilicus on one side and placenta on the other. The placenta is in turn connected with the matru hrdaya (mother's heart) via syantana sira (pulsating vessels). The matru hrdaya is said to flood the apara with rasa with sarvarasa (all taste) which promotes bala (strength) and Varna (complexion) of the fetus. According to Acharya Charaka the Rasa of the pregnant woman serves 3 purposes:-Swa-shareera pushti (Nourishment of her own body), Stanyaaya (Lactation) and Garbhavridhi (Growth of fetus). Being supported by that food, the fetus is dependent upon the mother keeps living inside the uterus. Situated inside the uterus, the fetus sleeps when mother sleeps and is awake when she is awake, the activities of the fetus is not independent, from the time of conception it is dependent for its moistness and dryness upon the food of the mother.^[7] When all the organs and parts of the fetus become manifested, a tube connecting the umbilicus of the fetus with the apara which is in turn gets connected with the mother's heart is formed. The nutrient portion of the food travels from the mothers heart carried through the *dhamanis* and reaches the apara and from there to the *Nabhi*. Then it goes to the pakwaashaya (intestine) where it undergoes further digestion by kaya Agni (digestive juices). Comprised mainly of nutritive materials rasa nourishes all the tissues. Rasa also oozes out through the hair follicles to form the fluid outside the fetus. [8] According to Vagbhata in Aṣṭānga Hrdaya, during the 3 rd month of gestation manifestation of gaatrapanchaka (5 parts of body) as well as sarvasushma-anga (all minute organs) starts. A tube connecting the *Nabhi* (umbilicus) of the fetus with *hrdaya* of the mother develops which is responsible for the passage of *matur ahara rasa* (essence of mothers.

According to modern science after fertilization, till the implantation blastocyst receives nutrition partly from the substance stored within the ovum and partly by diffusion from the uterine secretion. When the blastocyst moves towards the uterine cavity, large quantity of secretions formed by the secretory cells of the fallopian tubes provide nutrition. Once it reaches uterus it gets implanted. After im- plantation deciduas or endometrium of the pregnant uterus provides nutrition. The gland show marked dilatation and increased tortuousity and increased secretory activity. The endometrial stromal cells contain extra quantities of glycogen, protein, lipids and minerals necessary for the conceptus. From 8th week on- wards gradually it is taken up by the placenta. Placenta is the site of exchange of nutrients and wastes between mother and foetus. There will be exchange of oxygen and carbon dioxide across the foetal membrane. The foetus r nutrients from the maternal blood such as glucose, lipids, amino acids, water and electrolyte. Umbilical cord also plays an important role in foetal nourishment by establishing a connection between the placenta and the foetus. Through which the foetal blood flows to and from the placenta. It develops from the connecting stalk. It consists of 2 arteries carry de- oxygenated foetal blood to the placenta, one umbilical vein which contains oxygenated blood and nutrients from mother's intervillous spaces in to the foetus.

AYURVEDA	MODERN
Maturhrdya	Maternal blood from heart
Rasvahininadya	Vessels from mother heart
Nabhi	Foetal umbilicus
Nabhinadi	Umbilical cord
Aapra	placenta
Garbhasharir	Foetal circulation
Upsneha	Amniotic fluid(consist of water, glucose, albumin, Na, urea, lipid etc.
Unswada	Proteolytic activities of trophoblast and tropholytic activities of
Upsweda	chorionic villi provide nourishment to the blastocyst.
Rasvahanadi	Maternal part of the placenta

S No	In Ayurveda	
1.	Charak samhita	By <i>Upsneha</i> and <i>Upsweda</i>
2.	Sushruta Samhita	By upsneha, Ras-nimitta
3.	Ashtanga Samgrah	By <i>Upsneha</i> and <i>upsweda</i>
4.	Ashtang hridaya	By kedarikulaya nyaya
5.	Bhel samhita	By kedarikulya_nyaya
6.	Bhoja_samhita	By_kedarikulya_nyaya

OBSERVATION OF MASAANUMASIK PARICHARYA

Month	Charaka samhita	Sushrutasamhita	Astanga Sangraha	Harita_samhita
1 st month	Non medicated milk	Madhur, sheet, liquid diet	Medicated milk	Madhuyasthi, madhukapuspa with butter, honey and sweetened milk
2 nd month	Non medicated milk	Same as first month	Same as <i>Charaka</i> milk medicated with <i>madhura</i> rasa	Sweetened milk treated with <i>kakoli</i>
3 rd month	milk with honey and <i>ghrita</i>	Same as first month	Milk with honey and <i>ghrita</i>	krisara
4 th month	Milk with butter	Cooked <i>sasti</i> rice with curd, dainty food mixed with milk and ghrita	Milk with one <i>tola</i> of butter	Medicated cooked rice
5 th month	Ghrita prepared with butter extracted from milk	Cooked shastika rice with milk, jangal mansa along with dainty food mixed with milk and ghrita	Same as Charaka	payasa
6 th month	Ghrita prepared from milk medicated with madhur drugs	Ghrita or rice medicated with gokshura	Same as Charaka	Sweetened curd
7 th month	Same as sixth month	Ghrita medicated with prithakaparnyadi group of drugs	Same as charaka	ghirtakhanda
8th month	Kshira yawagu mixed with ghrita	Asthapanbasti with decoction of badri mixed with bala, atibala, satpuspa, patala etc, honey and ghrita. Asthapan is followed by anuvasanbasti of oil medicated with milk, madhura drugs	Ksirayawagu mixed with ghrita, asthapanbasti with decoction of badri, anuvasana basti with oil medicated with madhura drugs	ghritapuraka
9 th month	Anuvasanabasti with oil prepared with drugs of madhura group, vaginal tampon of this oil	Unctuous gruels and jangal mansa ras up to the period of delivery	Same as charaka	Different varieties of cereals

OBSERVATION OF MASAANUMASIK GARBHVRIDHI

Month	Charka	Sushruta	Vagbhata	Kashyap	Garbhoupnishad	Modern
1st	Khetbhuta (sleshma shadrisha	kalala	Kalala in 7 th day	kalala	7 th day-appears as budhbuda(vesicle like sac) 15 th day-appears as panda (soft spherical mass) 1 month- become kathina	Morula, blastocyst Germ disc Tubular embryo, head & neck region, limb bud, umbilical cord begins to form primitive hearth and begins to beating
2nd	Panda shaped(spherical mass)-male Elongated like pesi (muscular fiber)-female Arbuda (tumour like irregular mass-napushaka	Accumulated mahabhutas in 1 st month (i.e.kalala) get processed by combined effect of sheet- <i>ushma-anila</i> and become ghana	Ghana, pesi, arbudha-purusa, stri&napunshaka		Shira(head) is formed	Prominent head, basic plan of limbs, face Telencephalic vesicle appear, peripheral nerves, special senses Placenta ad foetal membrane Gonads become recognizable as testes or ovaries
3rd	All <i>indryas</i> , major and minor body parts appears simultaneously	Protrusion of panch pidika(bud like appearance) of hands, feet & head. Minute division of all body parts simultaneously takes place.	5 body parts are manifested-head, 2 legs & 2 hands in the minute bud form. Due to appearance of head the <i>garbha</i> get sensation of happiness and sadness.	All body parts manifest simultaneously Praspandana (pulsation) Chetna (consciousness) appears & feels pain Subtle manifestation of budhii.	Appearance of limb	Sign of digitations of limb in hand (fan like), nail develop Primary ossification centeres of bone, bone marrow, laungo, eye brow, skin simultaneously other system face- forhead, eyes ear
4th	Foetus get stabilized, so pregnant women get excess	Differentiation of all body parts & sub parts clearly Foetal heart manifest – dauhrdini	Foetus gets stable Organs and its parts manifest fully.		Appearance of digits, jathara (GI-tract), kati Pradesh (pelvic region)	Scalp hair Foetal movement. quickening by the end of this month Diagnosis of external genitalia

	heaviness of the body	Chetna.conciousness arise & desire are express via mother.				of male or female. Other parts also simultaneously developed
5th	Excess increase of muscle, blood, therefore pregnant women become thinner.	Mana become more enlightened	Chetna (consciousnesses) develops.	Similar to charaka	Formation of pristavamsa(back bone	Placental circulation- begins Limb, head & chin, nose & ear prominent Skin covered by vernix caseosa lanugo over body Quickening felt by mother
6th	Excess increase in strength, complexion in garbha so considerably.	More enlightment of buddhi/intellect-brain	Formation of snayu, sira, roma, appearance of strength, complexion, nail-hair.	Increase in strength, complexion & oja so mother get exhausted.	Ear, face-nose & its bone formation	Eye brow and eye lid formed, movement of eye ball Finger nail are present and distinct finger Cerebral cortex are defined Haematopoiesis begins in the sternum
7th	Growth & development of all aspect of garbha take place so pregnant women become exceedingly defict in all aspect of her health	Distinct development of all body parts completely.	Full growth and development of fetus& well nourished too.	Complete development of all the dhatu and body parts and is completely associated with vattapitta- kapha. Pregnant lady get tired	During this month the Fetus become viable	Growth and maturation of all aspects of the fetus up to9 month
8th	Oja remins unstable	Instability of oja	Unstable oja	Unstable oja	Completely development of fetus take place	
9th	Labor from 9 to 10 months	9-10-11-12 labor	Labor in 9 month	Labor in 9 month		

www.wjpr.net | Vol 11, Issue 10, 2022. | ISO 9001:2015 Certified Journal

DISCUSSION

Garbhaposhana is totally depends on the structure involving in fetal nutrition includes placenta, umbilical cord, foetal membranes etc. if any structure do not functionally active due to any structural deformity causes alter in the foetal circulation. Garbha poshana is occurring through the rasa obtained from the mother. Garbha requires rasa from mother because of its apakwa dhathu (under developed organs). Aahara rasa forms the ambu part of the garbhotpathi samagri^[13] (Ritu, kshetra, ambu and bija). It refers to lymph- chyle containing nutritional substance and is formed in the amapakwashaya (stomach along with intestine), later reaches the hrdaya where after it's called as rasa dhathu and this rasa is directed to the whole body through rasavahadhamanis. During pregnancy this rasa also reaches the apara which conveys the essence to the garbha Nabhi nadi. The umbilical veins (sira). According to Charaka Acharya), carries the rasa to the garbha Nabhi and enters the systemic circulation of fetus. This rasa nourishes the shareera dhathu of garbha. In modern explanation nutrient materials absorbed through intestinal villi are brought to the liver via portal vein. Inside the liver it undergoes detoxification and later it reaches lungs via heart and gets oxygenated. This oxygenated and nutrient rich blood is then given to systemic circulation by the pumping action of heart. The supply of nutrition to the fetus is from different sources in different stages of development. Soon after fertilization till implantation the cytoplasmic contents of ovum as well as the secretions from the uterine tube provide the necessary nourishment to the embryo. From the time of implantation till the formation of placenta the secretions from trophoblastic cells, uterine tube and endometrial cells provide nourishment. After the formation of placenta the fetal circulation is established, which becomes the major nutritional source for the fetus.

CONCLUSION

Nourishment plays an important role in healthy growth of the foetus. The concept of *Garbha poshana* (foetal nourishment) explained in Ayurvedic classics holds good in parlance with modern science. The deficiency conditions, placental and umbilical cord ab-normalities which can lead to the improper nourishment of the foetus should be diagnosed in the early pregnancy and should be treated accordingly. *Masanumasika garbhini paricharya* (month wise dietic regimen) ex-plained in Ayurvedic literature should be fol-lowed by the pregnant woman to get a healthy offspring.

REFERENCES

- 1. CharakSamhitaEdited with Charak-Chandrika Hindi commentary Dr. Bramhanandan Tripati Vol 1, sharirsthan4/10 chaukhambaprakashan Varansi, 878 to 880.
- 2. Sushrut Samhita Ayurvedrahasyadipikahindi commentary by Dr. BhaskarG ovind Ghanekar. Reprint 2006, Sharirsthan 3/40 Mehachandlachmandas publication, 97/
- 3. Charak Samhita Edited with Charak-ChandrikaHindicommentary Dr. Bramhanandan TripatiVol 1, Sharirsthan6/32ChaukhambaprakashanVaranasi.
- 4. SushrutaSamhita of sushruta with the nibandhsangrhaCommentry by Dalhanachrya Edited by jdhavjiTrikamjiAcharya, Sharirsthan, 3/31.
- 5. Sushrut, sushrutsamhita, AyurvedTatvasandipika Hindi comment by Kaviraj Ambika Datta Shstri. Sharirsthan3/40 vranasi Chaukhamba Sanskrit sansthan.
- 6. CharakaSamhita Edited with Charak-Chandrika Hindi commentary Dr. Bramhanandan TripatiVol-1.Sharirsthan6/23Chaukhambaprakshan Varanasi, Reprint, 2016.
- 7. Agnivesha, Charaka Samhita, Revised by Charaka and Dridhabala with the Ayurveda Dipika commentary of Chakrapanidatta, Edited by Vaidya Jadavaji Tri- kamji Acharya, Shareera Sthana 6/23, Chaukhambha Orientalia, Varanasi, 2009.
- 8. Dutta D.C, Textbook of Obstetrics, Edited by Hiralal Konar, 7th Edition, Published by New Central BookAgency(P)LTd,Kolkata, 2011; 462.
- 9. Dutta D.C, Textbook of Obstetrics, Edited by Hiralal Konar, 7th Edition, Published by New Central BookAgency(P)LTd,Kolkata, 2011; 263,323.
- 10. Dutta D.C, Textbook of Obstetrics, Edited by Hiralal Konar, 7th Edition, Published by New Central BookAgency(P)LTd,Kolkata, 2011; 492.
- 11. Agnivesha, Charaka Samhita, Revised by Charaka and Dridhabala with the Ayurveda Dipika commentary of Chakra- panidatta, Edited by Vaidya Jadavaji Tri- kamji Acharya, Shareera Sthana 6/23, Chaukhambha Orientalia, Vara-nasi, 2009; 346.