



EFFECT OF BALA TAILA MATRA BASTI AND YONIPICHU IN ACHIEVING SUKHAPRASAVA (NORMAL LABOUR) - A CASE STUDY.

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ABSTRACT

Ayurveda is an indigenous system of medicine, emphasizing the Garbhavakranti (process of development of various components in Embryo) to prasavaprocess of normal labour) & Sutika (puerperium) very well. Nowadays due to changing lifestyle and daily habits most of the women tend to go for caesarean section. Which has its own remote complications. Normal delivery is not only safe for mother but also for the baby. In Garbhini Paricharya Acharyas have mentioned Basti and yoni pichu moreover with Madhura aushadi siddha taila to facilitate sukhaprasava (eutocia).

Aim- To study Bala taila Matra basti & Yonipichu in Sukhaprasava.

Methodology- Use of Bala taila Matra basti & Yonipichu in Prakruta Garbhini for Sukhaprasava based on theoretical research using texts of Ayurveda.

Result- A full-term spontaneous delivery (sukhaprasava) of a primi patient with vertex presentation of live female child of weight 3.2 kg on 15th February 2021 at 3.20pm.

KEYWORDS : Sukhaprasava, matrasthi, prasava, yonipichu, garbhini paricharya, normal labour.

INTRODUCTION-

Every couple has a positive experience on delivery of their baby. The child birth should be event of joy and satisfaction. But, the event of delivery is associated with many complications. In olden days due to the lifestyle and dietary habits majority of the women use to undergo normal vaginal delivery, except a few. There are various drugs prescribed in Ayurveda either internally or externally and Mantra Chikitsa for Sukha Prasava. During Garbhini Paricharya, Asthapana Basti with decoction of bala, atibala, badar, satpushpa, honey, milk, tila taila, Anuvasana Basti and Yoni Pichu with taila prepared with the drugs of madhura group during 8th and 9th of pregnancy for Sukhaprasava is described by various authors in Ayurvedic texts. The body of the garbhini thus treated becomes snigdha, she gains strength and the movement of vayu in right direction, the result being Sukha and Nirupadrava Prasava. Functional aspect of labour can be influenced by the vitiated Apana Vayu. For normalization of Apana Vayu, Basti is indicated which helps to reduce the obstruction of Srotas. Due to Snehana property of Anuvasana Basti, the kukshi, kati, parshva and all garbha sthanamarga become Snigdha. This Snigdha property removes the rukshata of vayu and thus it helps in the proper stretching of ligaments and in garbha nishkramana.

NEED OF STUDY-

The number of caesarean section deliveries in India has more than doubled in past decade, where Cervical dystocia is the contributing factor. The use of Oxytocic drugs during labor causes distress and harmful effect to mother and fetus. To reduce the use of such drugs and to carry out normal vaginal delivery (Sukhaprasava) with minimum aids, it is an effort to reduce complications, before and during delivery, as well as in early puerperium. Matra basti and yoni pichu can play an important role in normalizing the vitiated Doshas at the time of child birth and provide a passage to the passenger.

CASE STUDY-

Aim: To study the effect of Bala siddha Taila Matra Basti and Bala siddha Taila Yoni Pichu in Achieving Sukhaprasava.

OBJECTIVES

1. To observe the duration of stages of labor.
2. To reduce the labour duration and complications

Materials and Methods Selection of patient:

Patient was selected from SSNJ OPD, solapur after obtaining voluntary informed consent incorporated into the study.

Case Report

- Chief complaints
- Amenorrhea since, 9 months
- Labor pains since, morning (7 a.m.)
- No History of leaking and bleeding per vaginal

History of Present Illness :

A primigravida housewife female patient of age 22 years came to SSNJ Prasuti ward on date 15th February 2021. As per patient, she was asymptomatic before 9 months. Then she has developed amenorrhea of one and half month and done Urine Pregnancy Test by herself and found positive. Then at 5th month of gestation she first visited SSNJ OPD for ANC work up. Thereafter she was regularly visiting SSNJ Prasutitantra OPD for her routine ANC check-up and was given routine ante natal medications. From 39 weeks of gestation onwards, 10 days prior to EDD. She was given Bala siddha Taila Matra Basti 40ml everyday up to the development of true labor pain. She came to SSNJ OPD with labor pain at 10:00 a.m. on 15th February 2021 with no history of leaking and bleeding per vaginal. So, she was admitted to Prasuti ward for observation of vitals, uterine contraction, fetal conditions and further management of labor.

Past Medical History: Not significant

Past Surgical History: Not significant

Family History: Not significant

Menstrual History

- Last menstrual period (LMP) – 04-05-2021
- Expected date of delivery (As per LMP -EDD) – 11-02-2021 (Assigned EDD)- 15-02-2021
- Period of gestation (POG) – 36 weeks 6 days (on 26.01.2021)
- Past menstrual history – 4 to 5 days of cycle with 28 to 30 days interval, cycle- regular with mild pain and clots, approx. 2 pads soaked in a day.

Obstetric History - Primigravida

- Married life: 3years
- Patient conceived naturally

General Examination

- **General Condition:** fair

- **Blood Pressure:** 120/70 mm of Hg
- **Pulse Rate:** 84/min
- **Temperature:** 97.9°F
- **Height:** 5'6"
- **Weight:** 62 kg
- **Pallor:** absent
- **Icterus:** Absent
- **Pedal Edema:** Absent
- **Lymph nodes:** No any lymphadenopathy present
- **Tongue:** Uncoated

On Systemic Examination Cardiovascular System, Digestive System, Respiratory System, Central Nervous System appears normal.

Obstetrical Examination

Per Abdominal Examination Inspection - Striae gravidarum present

Palpation - Lie: longitudinal
Fundal height: uterus term size
Presentation: cephalic
Head: fixed

Auscultation - FHS + , Regular, 144 beat per minute

Contractions 1 in 10mins at 10.30am

- **Number/frequency** – 2
- **Duration** – 20 to 30 sec
- **Intensity** – good
- **Interval** – regular

Contractions were progressively increasing with time.

Per Vaginal findings: (at 10:30am) at the time of admission into labor room.

- **Inspection:** Vulva and vagina seems healthy
- **Pelvis:** adequate
- **Dilatation:** 2-3cm
- **Effacement:** 20-30%
- **Station:** -2
- **Consistency:** soft
- **Position:** midline
- **Show:** present

Antenatal Investigations

- RAT & RTPCR - Negative (02/02/21)
- Blood Group: A positive
- Haemoglobin (Hb): 11.2 gm% (on 15/2/2021)
- Complete Blood Count (CBC): Within Normal Limits
- HBsAg test: Non-Reactive
- H.I.V. screening: Negative
- VDRL test: Non-Reactive
- Random Blood Sugar (RBS): 92 mg/dl
- Urine: Routine- within normal limits
- Bleeding time- 2min 10 sec
- Clotting time 5min 16 sec
- TSH- 3.90 (3/07/2020)

USG Reports:

3.07.2020- SLIUP – 7 weeks 4days EDD- 15-02-2021

29-07-2020- SLIUP- 11weeks EDD – 17-02-2021

5.10.2020 - SLIUP 22weeks 0 days, breech, no obvious anomaly, FW-359gms.placenta- anterior, liquor – adequate

16-12-2020- SLIUP 30weeks 5 days, breech, EDD- 19.02.20221, placenta- fundoanterior grade 2, liquor- adequate, FW-1569gms.

26-01-2021- SLIUP 36 weeks 6 days, cephalic, EDD-17.02.2021, AFI 7cm. mild oligohydramnios, placenta- anterior grade 2, FW 3095gms. Doppler study- within normal limits

Management prior to the onto set of labor

- *Matra basti* with *bala oil* and *bala taila yoni pichu* from 10 days before assigned EDD was given till prior to the onset of labour. That is from 5th February 2021, 40ml *bala taila matra basti*, followed by *bala taila yoni pichu*, which was asked to remove after 3 hours.

Management after onset of labor

- Explain the entire labor process to the patient
- *Bala sidha Taila* applied in vaginal canal after starting of active phase of labor
- Watch for vitals, contractions, FHS.
- Maintain proper hydration

Labour progress

| Time | Blood pressure | Pulse | Temperature | Fetal heart rate (bpm) | contractions | Per vaginal findings |
|----------|----------------|-------|-------------|------------------------|--|--|
| 10.30 am | 120/70 mmHg | 88/m | 97 | 148/m | 2 – 30 sec 30 sec | OS- 2FL, Cx- 50% effaced. Membrane present station -2 |
| 2.00p m | 110/80 mmhg | 86/m | 97 | 150/m | 3- 40sec 30sec 45sec | OS- 4-5cm, cx- 80% effaced, membranes – present, station -1 |
| 2.45p m | 130/80 mmHg | 88/m | 97 | 138/m | 3 – 35 sec 30 sec 45 sec | OS- 6-7cm, cx-85% effaced, membranes- ruptured spontaneously, liquor- clear, station-0 |
| 3.15p m | 130/80 mmHg | 88/m | 97 | 146/m | 4 – 40 sec 30 sec 35 sec 20 sec 40 sec | Cervix-Fully dilated, Fully effaced, station -0 |

OBSERVATIONS AND RESULT-

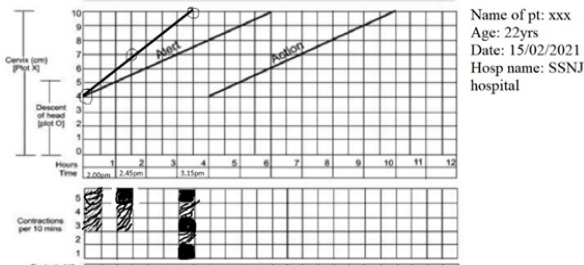
Patient came to hospital with labor pain on 40weeks of gestational period. Contractions came with regular interval, along with increased frequency, duration and intensity. Per vaginal findings also showed that show present along with the formation of Bag of membrane. After observing P/V findings and contractions we could be said that pains were true. So, no complications observed.

During per vaginal examination adequate pelvis was found. Effacement & dilatation of cervix was increased gradually. Bishop's Score at 10:30am was 4, better cervical conditions observed. Pain threshold during labor was moderate. Good bear down efforts (*Pravahana*) applied by patient. No signs of patient fatigue seen.

First stage of labor in this primigravida patient was 5 hours and second stage also reduced to 45mins. No any delay in labor observed. A Full term normal vaginal delivery with medio-lateral episiotomy as vertex presentation, delivered an alive healthy female child of weight 3.2 kg on 15th February 2021 at 3.20pm. Baby was found active and cried well at the time of birth. APGAR score at 1st min was 7, at 5th min was 9 and at 10th min was 10.

Placenta delivered completely after 15mins with all its membranes and cotyledons intact. Uterus contracted well, no cervical tear seen and no post-partum haemorrhage (PPH) found. Patient was in under observation for 1 hour but no any complications seen.

Progress of Labor



Rationality Of Selection Of Trial Drug-

In the present study Bala (*Sida cordifolia* Linn.) is selected. Acharya Charaka described Bala under Madhura skandha, Prajasthapana mahakashaya and brmhaniya. Bala is madhura rasa, madhura vipaka, snigdha guna, balya. Bala is also mentioned as a rejuvenate (rasayana). Acharya Susruta also described Bala among Madhura dravyas. The Root of Bala is known as good tonic and having balya (Strength promoting) property. On Pharmacological screening the drug is found to have Betaphenethylamine, Ephedrine, vasicinol, choline, hypaphorine methyl ester. On Pharmacological screening, Bala having anti-inflammatory, analgesic, antipyretic, antioxidant, neuroprotective, antiulcerogenic, CNS depressant and laxative properties

DISCUSSION:-

As child bearing and delivery are physiological phenomenon and any abnormality in courses of labor can affect women health not only for that time being but also through her life. That's why for good health of mother and baby Sukhprasava is important. Labor is a painful experience with extreme uterine contractions and retractions, As Vata is main responsible Dosh for pain and Bala having better functioning on Apnavayu and also having Balya and Ojovardhaka properties, so it works on pain threshold capacity leads to good bear down efforts and reduces the incidence of after pains. Bala sidha oil being Guru, Snigdha, Balya and Brimhana in properties, it helps in increasing tone and contractility of uterine muscle when applied through vaginal and anal route. This leads to good and effective uterine contractions during labor and also leads to proper contraction of uterus after labor preventing post partum complications.

Daily use of Yoni Pichu of madhura varga siddha Taila lubricates the garbhasthana (cervix) and garbhamarga (vaginal canal and perineum) by Snehana, Vishyandana, Mardavata and Kledana properties of Taila and helps in Sukhprasava. Yoni Pichu helps to improve and strengthen the musculature of the vaginal canal.

Yoni Pichu may soften the garbhasthana and garbhamarga thus help in Sukha Prasava. It is just possible that the regular use of Pichu might influence autonomic fibres governing myometrium and help in regulating their function and helps in its relaxation during labour.

Bala is considered as Prajasthapana and Bruhaniya so it also influences APGAR score and weight of new born positively.

CONCLUSION

To get the fruitful outcome of nature, Garbhiniparicharya has advised from conception till delivery, which includes administration of Matra basti and use of Yoni Pichu in ninth month and month wise dietary regimen. This Ayurvedic regimen improves the physical and psychological condition of pregnant women and makes her body suitable for Sukhprasava. Every pregnant woman should follow Masanumasik Garbhini Paricharya to gain healthy baby from a healthy mother.

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