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Ayurveda A Boon for Reproductive Health

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Abstract

Reproductive health is an important phase of life. It can be achieved by following healthy regimen in order to maintain the health of sperm and ovum. In today's era most people do not follow healthy regimen due to changes in lifestyle. This gives rise to health issues like infertility etc., Hence it is necessary to throw light on reproductive health w.s.r.to deerghayu of an individual. Objective is to overview the concepts of Ayurveda in reproductive health. Ayurveda speaks about longevity of life, to achieve this; many concepts for reproductive health have been quoted by Acharyas in Ayurvedic Samhitas starting from rajaswala paricharya, garbhini paricharya, importance of rutu, kshetra etc. to achieve health of sperm/ovum of progeny, to avoid garbhavyapad and also for healthy progeny. Sutika paricharya is explained to avoid Sutika-vyadhis. These factors are to be achieved by following Ayurvedic paricharyas, pathya and yoga etc. Nowadays, reproductive health has become a matter of prime concern. Unhealthy reproductive life cannot be considered just as a personal loss of family, as it also impacts the society and ultimately the progress of the nation.

Keywords

Garbhini Paricharya, Sutika Paricharya, Rajaswala paricharya, Pathya and Yoga.

INTRODUCTION:

In today's era of modernization people are adapting new changes in routine life. This change invites new emerging diseases which affect directly on lifespan. In ancient time, human lifespan was around 100 years, now it has reduced approximately to 60-70 years.

Reproductive health is one of the basic factors responsible for life span, as healthy sperm and healthy ovum together plays equal role in production of healthy offspring. According to recent statistics, 37,104 (95%UI 31,825-43,134) deaths in the early

neonatal period and 27,120 (95%UI 23,490–30,777) deaths in the post-neonatal period are due to birth defects in 2017 in India. [1] Also in case of fertility rate, around 31% in female and 43% in male, fertility rate is decreasing as compared to previous generation. [2] In males decrease in sperm count, sperm motility, morbidity etc. and in females Irregular menstrual cycle, Oligomenorrhea, P.C.O.S. etc. are becoming prime cause of infertility.

This drastic change is observed due to modification in diet and daily regimen e.g., Invention of different instruments/equipment's, which are making human



life easier by reducing human efforts; ingestion of different fast foods, street foods, more oily, spicy food etc. diet which hampers body regulating functions giving rise to multiple disorders. This affects health of the individual, resulting different pathologies in both the sexes, effect of which is also seen on their sperm/ovum.

As we all know child has features of his/her both the parents' mother as well as father. When such unhealthy ovum and unhealthy sperm fertilize together to give rise a new offspring, ultimately it shows hazardous effects in offspring. This is the reason we are getting more and more birth defects in child now a days.

To control or to overcome these problems Ayurveda stands as a great help. Literally meaning of Ayurveda is 'knowledge of the life'. Ayurveda is originated in South Asia, is one of the oldest whole medical systems (WMS) and has been practiced for thousands of years. Despite its age-old tradition, it is also quite modern in that primary, secondary and tertiary prevention, patient self-empowerment, and self-efficacy play crucial roles in the holistic and multidimensional alignment that Ayurveda is built upon. [3] Ayurveda classics explains about concept of different paricharyas viz. Rajaswala paricharya, Garbhini paricharya, sutika varicharya etc. Also, some observations in masanumasik garbha vruddhi are explained.

By following rules given in Ayurveda, we can overcome all reproductive health related diseases; also can achieve healthy progeny by avoiding congenital complications in child.

Aim:

To understand importance of pathyakara ahara and vihara mentioned in ayurvedic classics in order to achieve reproductive health ultimately leading to deerghayu of the progeny.

Objective:

To analyse all aspects quoted by acharyas in ayurvedik samhitas which helps in maintaining reproductive health of healthy offspring.

MATERIALS AND METHOD:

Literature review of Ayurveda texts for deerghayu of healthy offspring of healthy sperm and ovum.

Important factors responsible for deerghayu and well-being of child:

1.VAYA:

According to acharya vagbhat, it is necessary, to obtain healthy progeny, certain vaya is to be completed i.e. 16 years completed female and 25 years completed male. [4] In normal female, reproductive growth completes around 16 years of

age at which full growth of uterus is attained, similarly male reproductive system become capable of conception by the time of 20 years of age. If conception is done before given age premature labour, severe anaemic child, repeated abortions may occur and also late conceptions lead to gestational DM, HTN, Down syndrome, moodhagarbha etc. complications.

2.RUTU:

2.1 Maithun:

It is said that maithun should be done till 12th day menstruation achievement for garbhadhan.^[5] As per menstrual cycle is considered ovulation is done at around 12th day of menstruation. Released ovum from the ovary further may fertilize with sperm. Hence it is very essential to follow maithun kala quoted by acharyaa. Achaarya sushrut has quoted, if maithun is practised in rajakala, garbha mrutyu will occur. [6] Achaarya charaka has also metioned about maithun purvakarma .[7] Snehan, swedanottara shodhan should be done by both male and female. These remove all the toxins from the body and provide strength for proper conception. Basti (one of the shodhan method) is mentioned for proper functioning of apana vayu. After shodhana purush should consume madhur aushadhi siddha ksheera- ghruta, stree should consume tail and masha. This aharsevana is specifically mentioned before garbhahan as it is balya, bruhaniya, shukravardhak. Also it is good source of folic acid for female and helps in spermatogenesis of male. Acharya charaka also quoted for uttam santanprapti shali, yava, dadhi, madhu, sarpi etc. ahar is to be consumed by rutumati stree.

2.2 Punsavan karma [5]:

Kala according to Samhita, is from conception till prakvyakti bhava (i.e. till formation of organs). It can be considered upto end of the 1st trimester. Drugs mentioned for punsavana are masha, apamarga, sahachara, jivak, rishabhaka, vatashrunga, shali, jivaneeya, prajasthapaka gana etc. with properties like balya, bruhaniya, vrushya, garbhasthapaka etc. It is said that punsavan samskar was done for putraprapti but along with it acharya have also quoted about proper conception and stabilization of garbha.

3.KSHETRA:

Kshetra is where fertilization, garbha vruddhi takes place. From yoni where shukra enters into system, garbhashaya where garbha vruddhi is said, till fallopian tubes and ovary from where stree bija is released and fertilization takes place, all these can be considered under kshetra. Achaaryas have quoted



multiple times, to achieve garbha swasthya, swasthya of artava and shukra is equally important. Diseases like yonivyapada etc. causing kshetra durbalata which cannot possess capacity of garbha vruddhi ultimately brings out different garbha vyapadas. Polyps, fibroids, cysts etc. uterine pathologies may inhibit further growth of foetus. Vata dosha normally does karya of gati, gandhana. When this vata gets vitiated, it causes division of beeja. This arises hinanga, adhikanga, yamala garbha etc. garbha vikruti. Hence for swasthya of garbha, kshetra is to be protected.

4.AMBU:

4.1 Garbha poshana^[8]:

Garbha poshana is done by matru ahara rasa. Ahara rasa gives nourishment to garbha, stanya and matru sharir. When this ahaar is devoid of ama or any dushta doshas, provides maximum nutrition to the garbha ultimately helps garbhavruddhi. When garha gets ashuddha or alpa rasa, different garbha vikruti or abnormal development is observed. When

amniotic fluid volume increases or decreases, complications like oligohydramnios, polyhydramnios etc. is seen.

5. BEEJA:

For garbhadhan, shuddha stree beeja and shuddha purush beeja are necessary ^[9] Acharya sushruta has quoted, shuddha shukra should be sphatikabh, drava, snigdha, madhura, madhugandhi, tailakshaudranibha. Whereas shuddha artava should be shashasrukpratima, laksharasopama. ^[6] When these beeja's are ashuddha or dushta they are not capable of prajotpadana. Hence beeja dushti should be treated first for the success of swastha prajotpadana.

6. RAJASWALA PARICHARYA:

Certain rules should be followed by rajaswala in order to prevent dosha dushti like avoid walking, running, day sleeping etc. Achaarya sushrut has also mentioned effects of all apathya by rajaswala on garbha.

APATHYA ABHYAS BY RAJASWALA	EFFECT ON GARBHA
Divaswap	Swapashila
Anjana	Andha
Rodana	Vikruta drushti
Snananulepana	Dukkhashila
Tailabhyanga	Kushtha
Nakhapkartanat	Kunakhi
Pradhavanat	Chanchala
Atihasana	Shyava danta, oshtha, talu, jivha
Atikathana	Pralapi
Atishabdashravana	Badhira
Avalekhana	Khalitya
Maruta sevana, Parishrama	Unmatta garbha

Table No I: Rajaswala Apathaya abhyasa and its effect on Garbha^[6]

Along with garbha vikruti, apathya sevana by rajaswala also results to different artava dushti. Due to atitikshna, ushna ahar sevana causes pittaja artava dushti. Excessive ruksha, shita ahar may produce vataj artavdushti, granthibhuta artava etc. Amenorrhea, menorrhagia, DUB, Chronic salphingitis, acute endometritis etc. also has similar causes. This beeja dushti will never lead to easy conception. Hence it is necessary to follow rajaswala paricharya as explained in classics.

7. GARBHINI PARICHARYA [4]:

Garbhini paricharya has direct correlation with garbha vruddhi. Ahaar vihaar of garbhini changes according to development of garbha. In first Trimester, starting phase there is no implantation of embryo in uterus. Whatever pathya Acharyas have advised is more of madhura, shitala, drava i.e. shaliparni, palash siddha jala or swarna/ rajat siddha jala etc. which gives bala, sthirata to garbha. Due to increase in HCG, progesterone hormone indigestion, constipation, nausea etc. are observed in the mother, to avoid the same dravapraya ahar is necessary. If pathya is not followed, a chance of missed carriage increases. In second trimester, mamsashonita upachaya, garbha-hrudaya vyakti chetana abhivyakti, buddhi etc. bhava arises. For which paya, navneeta, jangalmamsa, hrudya anna, dadhiodan, ksheerasarpi, ksheerayavagu, shwadamshtrasiddha sarpi, etc. is mentioned by achaarya. In 6th month, pedal oedema is observed. Acharyas have advised to give vatahara yavagu, mutral, shothahara drugs in this period which will automatically take care of these symptoms. In third



trimester, saptadhatu forms, high demand of ion, phosporous, fat, calcium is required. To fullfill the same phalahar, mamsodana, ksheera yavagu, badaroaka, bala, atibala, shatapushpa etc. is given in classical texts. Likewise, if garbhini paricharya is followed, then rupavanta, satvavanta, chirayushi prajaprapti can be achieved. Acharya also emphasises on Dauhrudavastha [10], wherein all cravings of the garbhini must be fulfilled in order to nourish the foetus. If they are not fulfilled vata gets dushta and does garbha vikruties like kubja, pangu, muka etc.

Formation of foetal organs is from the nutrition which the foetus receives. E.g. Yakrut, pleeha are made of rakta, phuphhus is made of shonitphena,

unduk is made of shonit kitta i.e. rasa raktadi are formed by garbha poshana after which avayava nirman is possible. Garbhasthapaka aushadhi^[7] like Aindri, brahmi, shatavirya, sahasravirya, patala, guduchi, haritaki, kutaki, priyangu etc. are explained by acharya charaka which helps in garbha dharana, sthapana. Garbhopghatkar bhavas ^[7] also explained by charak Achaarya like utkata, vishama, kathina asana sevana, vata-mutra-purisha vegadharana, darun anuchita vyayam sevana, ati tikshnoshna sevana, pramitashana causes akaala sramsana, mrutagarbha. Hence these factors garbhini must avoid. In Ashtang hrudaya achaarya explains about apathya and their effects on garbha.

Apathya sevana	Effect on garbha
Vataj ahar vihar	Kubja, Andha, Jada, vaman
Pittaj ahar vihar	Khalitya, pinga
Kaphaj ahar vihar	Shwitra, pandu
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Table II: Apathya sevan and effect on Garbha^[5]

Upavishtak, nagodara etc. garbha vikrutis arising specifically because of shoka, upvas, ruksha padartha sevana, excessive yonisrava. Hence for swastha prajotpatti garbhini paricharya is also important.

8.SUTIKA PARICHARYA [4]:

Achaaryas have mentioned certain dravyas like sarpi, tail, madhu, saindhav, vidanga, kushtha, chitrak, hingu, sarshap, lashun, kulattha, langali etc. Some of sankochak, them act garbhashaya as vedanasthapaka during labour. The pregnant lady suffers from a lot of pain during the time of delivery, also extra force is required in case of reduced uterine contractions, in such conditions these drugs can be used. Also some krumighna, rakshoghna, dhupana dravyas are mentioned. Akantha yavagu pana, saghruta peya is mentioned in early stages of prasutavastha for tarpana. Once avi starts koshna tailabhyanga, ushnodaka parisheka is advised to support gati of vata. Repeated yawning and slow walking are advised by which pressure is exerted on the apanakshetra resulting in easy prasava. Repeated inhalation of garbhasankochak aushadhis like langali, vacha etc. are mentioned to increase contractions. These instructions to be followed to prevent certain complications during labour like cervical dystocia, IUD etc. Also ahaar of mata should be pathyakara as formation of stanya is depend on ahara and fetal growth is depend on stanya.

DISCUSSION:

In ayurvedic classics, acharyas have covered all the aspects of reproduction, starting from the

importance of vaya till stanyapana of <u>balak</u>. All the rules and regulations mentioned by them are applicable till date.

Now a days, in this life of competition, certain bodily changes have occurred. Consistent exposure to fast food, oily food, stale food, more use of spices in routine food, continuous seating work, working 8 hrs in A/C etc. factors are being responsible for pathologies running in the human body. Most of the women have complaints related to menstruation; many men are being victim of oligospermia etc. sperm pathologies.

A woman, who desires a good progeny, should give prime importance to her physical and psychological aspects right from the age of menarche. Normal reproductive function is based on HPO axis. This axis is always vulnerable to the influences from higher centres, neurotransmitters, modulators etc. Ayurveda guides women to follow certain menstrual regimen before, during and after menstruation. From the basic principles of Ayurveda, it is understood that *Pitta dosha* is more related to the hormonal mechanism in the body. Also, yauvan avastha has predominance of pitta dosha. Hence for proper functioning of HPO axis in the reproductive period, balance of *vata*, *pitta* and *kapha* is very essential.

Age description regarding menarche explained in classics seems similar with the period of pubertal changes. Though a girl attains menarche by 12yrs, Acharyas considered 16yrs and above as a better period for conception. It can be correlated to the modern view that, a girl after menarche usually has anovulatory cycles for next 1-2yrs and girl who is



matured physiologically and psychologically will only be able to take care of her baby in a better manner. Maithun kala is very essential for fertilization. Maithun, if performed as advised by acharyas, results in fertilization. Otherwise, sperm entered into system will shed off without fertilization.

During menstruation, use of a easily digestable food with restricted activities is advised for first 3 days. A concept of not taking head bath in first 3 days seems scientific as the quality of cold water can hinder the normal flow of menstrual blood. Retrograde menstrual flow is one among the causes of endometriosis. Herbs like *tila*, *kulatha* etc. have ability to promote *pitta* and thereby influencing the hormonal actions leading to folliculogenesis.

Difference in duration can be substantiated by the amount of bleeding. Women may bleed for 7 days with reduced bleeding or may bleed for 5 days with moderate bleeding. This differs according to their tendency.

Specific treatments for menstrual disorders with respect to doshas are elaborately mentioned in all the classics. One can determine effective treatment for specific menstrual disorder. Purificatory therapies are advised to improve the quality of bija, to stimulate the responsiveness of reproductive system and also to provide better health to mother before conception.

The menstrual irregularities explained in modern science can be related with various arthava dushti's. Based on dosha predominance there is separate description of each artavadushti. Following the pathya and apathya told in rajaswala charya one can prevent any sort of menstrual abnormalities. Also, factors acting on male fertility to be monitored. Pathologies related to semen motility, count etc. mentioned as shukradushti in ayurvedic texts.

The concept of doing *pumsavana* has different interpretations. It is mainly done with the intention of getting a healthy child and to prevent defects related to implantation.

The concept of bahuapatya (multiple pregnancy) is mainly because of vatavruddhi in bija (zygote). It mostly gives the description of monozygotic twins. Foetal nutrition is provided by mother. Adequate Garbhaposhana is necessary for garbhavruddhi. Hence maintenance of matru ahaar is important. During pregnancy, kapha predominant stage i.e. essential for development of the baby in utero is seen due to prescribed diet and regimen. The medicinal preparations mentioned in month wise garbhini paricharya are also in accordance with the maternal and fetal changes of the corresponding month. The advice to give laja manda in pregnancy is one of the efficient means to supply quick

nourishment to the dehydrated women. Gokshuradi ksheerapaka advised in 6th month help to prevent pregnancy induced hypertension and the basti performed in the last trimester not only relieve constipation but also helps to do the anulomana of vata (normal downward movement of vata) which is very essential for the ease of normal delivery. The masanumasika garbha vridhi features are very similar to the corresponding USG findings.

Factors influencing IUGR, IUD, congenital anomalies etc. are due to certain causes, which should not be followed by garbhini, are mentioned under name of garbhopghatakar bhavas by Achaaryas.

Sutika paricharya is also one among prime factor of reproductive system mentioned by achaaryas. It can be correlated to puerperal period of modern texts. All the diet and regimen given in this period helps in easy delivery and also helps in postpartum changes.

CONCLUSION:

Deerghayu of an individual start from its foetal life. From time of conception till annad avastha of child is vital period for natural well-being of an individual. Many factors are dependent on these period e.g. prakruti, features of child, immunity of child, proper and complete development of child etc. Whatever nutrition foetus gets from its mother is depend on mothers' diet and regimen. Hence to get healthy progeny healthy sperm and ovum is important. Ayurveda emphasises on various factors responsible for healthy development of child. Rules and regulations given in ayurvedic texts have great effect on reproductive health of male as well as female. In today's era, due to higher incidences of congenital anomalies, abortions, missed carriages, infertility issues etc. it is necessary to understand importance of reproductive health acting on deerghayu of child. In developing countries like India, youth is a major strength to lead towards progress of nation. If these defects in children keep on increasing it will be a huge loss for country.

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