

**CONCEPTUAL STUDY OF PUNARNAVASHTAKA KSHEERABASTI IN GARBHINI SHOTHA (EDEMA IN PREGNANCY.)**

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**ABSTRACT**

Pregnancy is most beautiful phase of a women's life its incredible journey that leads to great emotional fulfillment to women and Having a successful motherhood and continuation of pregnancy till term is very important. *Garbhini Shotha* (Edema in Gravidarum) is one of the most commonly found in *Garbhini* (Gravidarum) which mentioned in *Garbhopadrava* (Complications in pregnancy). There are 8 *Upadravas* (Complications) are mentioned in *Harita Sanhita*. On the basis of signs and symptoms *Garbhini Shotha* correlates with Pregnancy induced Hypertension (PIH) in Modern science. Number of causes have been Proposed but none of them has been proved It May leads to Preeclampsia which is life threatening convulsive disorder. Modern science has treatment on that, but it is not satisfactory it can lead side effects also so that I have tried to explain that *Punarnavashtak Ksheerbasti* this *Ayurvedic* Medicine can overcome this problem by its *Shothaghna* (removing swelling) and anti-hypertensive Properties. This drug act with their different Properties on basis of causative factors of disease in early stages.

**Keywords:** *Garbhini Shotha*, *Punarnavashtak Ksheerbasti*, *Punarnavashtaka Kwatha*, Edema in pregnancy

## INTRODUCTION

Numbers of cases of PIH are seen today due to lack of maternal nutrition and ante natal care. During the pregnancy maternal physiology altered due to fetus. According to modern science common causes of edema in pregnancy is Preeclampsia, Anemia, Proteinuria Clinically edema manifests as swelling. 75- 80% of all pregnant women suffer from pitting edema is shown by study in second and third trimester of pregnancy. Increased blood flow during pregnancy and pressure of growing uterus on the pelvic veins and vena cava causes edema. It presents with mainly ankle edema which reduces on rest, unassociated with other features of preeclampsia, proteinuria, cardiac, renal and hematological pathologies. During pregnancy, the body requires an additional amount of fluid in order to meet the baby's requirements and to increase the blood circulation. Thus, the body continues to retain water with other features of Preeclampsia, proteinuria, cardiac, renal and hematological pathologies. The body requires an additional amount of Fluid for fetal development and increase blood circulation during pregnancy thus the body continues to retain water. Early diagnosis and treatment are necessary to reduce edema and prevent complication preeclampsia, renal failure, Hypertension, cardiac failure, Anaemia. According to *Kashyap Samhita* Main cause of *Shotha* is imbalance in *Vata Dosha*. According to *Acharya Charaka* pregnancy is very delicate stage and we have to treat it as possible as in early stage because it takes very short period to attain *Daruna Avastha* (Chronic Stage) and it becomes harmful for mother and fetus. One of important sign of preeclampsia is edema in pregnancy which is associated with hypertension and albuminuria and which may get complicated in the form of eclampsia.

### Literary Review of *Garbhini Shotha*:

#### *Charak Samhita* and *Ashtang Hridaya*:

Direct reference of *Garbhini Shotha* does not mentioned in *Charaka Samhita* and *Ashtanga Hridaya* but *Acharya Charaka* mentioned main cause of *Shotha* (Edema) is *Garbha sampidan* (Conception Compression) and *Acharya Vagbhata* also mentioned cause of *Shotha* (edema) is *Garbha* (Foetus)

#### *Harita Samhita* and *Kashyapa Samhita*:

*Garbhini Shotha* has mentioned as *Garbhoupdrava* in both *Samhita*. But *Kashyapa* has mentioned treatment in *Garbhini Chikitsa Adhyaya* and *Nidanpanchak* of *Shotha*

#### *Yogratnakar*:

In *Yog Ratnakar Chikitsa* for *Garbhini Shotha* is mentioned in *Garbha Roga Chikitsa*.

#### *Rasratna Samuchchaya*:

In *Rasratnasamuchchaya Garbhini Shotha Chikitsa* is mentioned in *Adhyaya 22* which contain *Garbhini Shothahar Lepa* and *Kwatha*.

#### Pathophysiology of *Garbhini Shotha* (Edema in gravidarum):

Due to enlarged gravid uterus, increased renin secretion due to glomerular filtration rate is decreased and renal perfusion is impaired, which activates production of angiotensin – II. It is responsible for increase in aldosterone, which causes more retention of sodium by renal tubules. Water is also retained in tissue spaces with sodium to maintain the tonicity of body fluid and the part get distended and edema occurs

#### *Nidan Panchak* (pathophysiology):

*Hetu* (Causes):

*Hetu* performs multidimensional actions in the initiation of the disease process by aggravating *Dosha*.

All *Neej Hetu* of *Shotha* are classified as

1) *Aharaj* 2) *Viharaj* 3) *Upadrava*.

#### *Aharaj* (Diet Induced) -

##### *Rasapradhanya*

Excessive *Lavan* (Salty) and *Amla* (Sour) *rasa* causes *Kapha*, *Pitta* and *Rakta Dushti*.

##### *Gunapradhanya*

Excessive *Guru* (heavy and difficult to digest), excessive *Ruksha* (dry), *Ushna Anna* (Hot Food), Excessive *Tikshna* (Spicy), *Vidahi*, *Abhishyandi*.

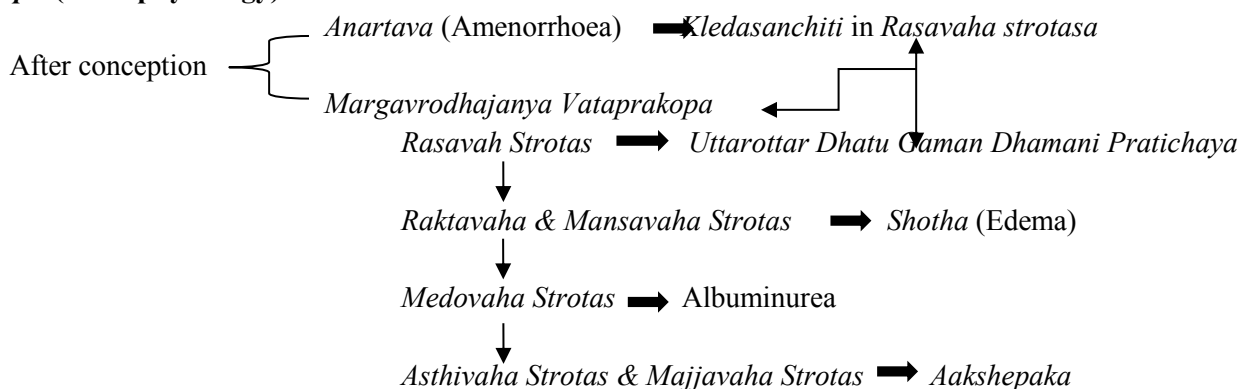
*Rupa of Shotha* (Sign & Symptoms) is mentioned in *Charaksamhita* as follows:

1. *Gaurav* (Heaviness)
2. *Anavasthitatwa* (Not confined to certain part).
3. *Utsedh* (Elevation due to accumulation of fluid)
4. *Siratanutwa* (Thinning of Vessels), *Lomharsha*, *Vaivarnyatwa*.

**Upashaya (Relief):** Upashaya which gives pleasure to those persons by using medicines, diet, and regimens

their actions may be work directly against to cause or to the disease itself.

**Samprapti (Pathophysiology):**



**Table 1:** Discussion of Drug

SR. No	Drug	Latin name	Family	Part	Quantity
1	<i>Punarnava</i> (Spreading hogweed)	Boerhavia Diffusa	Nictaginaceae	Root	1 Part
2	<i>Nimba</i> (Indian Margosa Tree)	Azadirachta indica	Meliaceae	Bark	1 Parts
3	<i>Patola</i> (Pointed gourd)	Trichosanthus Diocia	Cucurbitaceae	Leaves	1 Parts
4	<i>Shunthi</i> (Dry Ginger)	Zinziber Officinalis	Zinziberaceae	Rhizomes	1 Parts
5	<i>Tikta</i> ( <i>Picrorrhiza</i> )	Picrorrhiza Kurro	Scrophulariaceae	Root	1 Parts
6	<i>Abhaya</i> (Myrobalan)	Terminalia chebula	combretaceae	Fruit	1 Parts
7	<i>Darvi</i> ( <i>Indian beriberi</i> )	Berberis Aristata	berberidaceae	Root	1 Parts
8	<i>Amruta</i>	Tinospora cordifolia	menispermiceae	Rhizomes	1 Parts

**Table 2:** Properties and action of *Punarnavashtaka Kwatha* drug

1	<i>Punarnava</i>	Relieves edema, anti-inflammatory, diuretic, hepatoprotective, act on urinary disorders, reduce water retention and edema.
2	<i>Nimba</i>	Alleviates Pitta, stimulates liver, relieves edema, diuretic, stomachic, anti-inflammatory, hepatoprotective, reduce urinary disease
3	<i>Patola</i>	Mild purgative, rejuvenator, stomachic, stimulates liver, anti-inflammatory, uterine tonic, cures dysuria and retention of urine, reduces congestion, relieves edema and abdominal disorders.
4	<i>Shunthi</i>	Aampachana (digests the undigested un-metabolized food), rejuvenator, relieves edema, stomachic, carminative, anti-inflammatory
5	<i>Tikta</i>	Alleviates Pitta, stimulates liver, relieves edema, diuretic, stomachic, anti-inflammatory, hepatoprotective, reduce urinary disease,
6	<i>Abhaya</i>	Uterine tonic, cures dysuria and retention of urine, reduces congestion, relieves edema and abdominal disorders.
7	<i>Darvi</i>	Antiinflammatory, appetizer, hepato-protective, reduce water retention, immuno-stimulatory, relieves urinary tract infection.
8	<i>Amruta</i>	Mild diuretic, immuno-modulator, antioxidant, curative of edema, urinary disorders, burning sensation, anemia, dysuria and abdominal related disorders.

**DISCUSSION**

Lower socioeconomic Status and middle-class female are more prone to *Garbhini Shotha* due to symptoms of Malnutrition.

*Shothagna* effect of *Punarnavashtak Kwatha* in *Garbhini Shotha* This drug is used in the form of *Ksheerapaka Basti* form this form has *Katu, Tikshna, Ruksha* properties that are normalise with milk *Sheeta*

(cold), *Madhura* (sweet), *Snigdha* (unctuous) properties. Also, in the *Basti* (Enema) form, large quantity of drug can be delivered without any undue issues on palatability or any other side effects.

*Shotha* is mainly *kapha –Vataja* in nature *Punarnavadi Kwatha* has *Katu Tikta Kashaya, Dipan, Pachana* in nature they are act as *Kaphavatsamak, Kledghna, Shophghna, Mutral, Rasshodhna* of *Strotasa*. It decreases *Kledasanchiti* by its *Mutravruddhi* and *Kaphavatsamana* and *Shothaghna*.

Main contents of this drug are *Punarnavait* has *Katu, Tikta, Kashaya Rasa, Ushna Virya* and *Katu Vipaka, Vata-Kaphaghna*, hence reduces *Kleda* in body. *Punarnava* is one of the most *Shothaghna* drugs without any side-effects. It contains unusual large quantity of potassium nitrate partly accounts for its diuretic property. It is haematinic and growth promoter. *Shothahara* properties present in the formulations plays major role in reducing the edema. It flushes out the toxins and excess fluid retention due to the diuretic action of the drugs, relieving the complaints of urine infection and scanty micturation. Immunomodulatory and *Rasayana* (rejuvenator) properties are beneficial in overcoming *Garbhini Vyadhi* (disorders in pregnancy). *Vatanulomana* (carminative), *Deepana* and *Pachana* (stomachic) properties act on *Agni* (digestive fire), normalizing the digestion and metabolism. Pain is subsided by the *Shoolahara* (analgesic) action of the formulation. Many of the contents have *Yakrut-Uttejaka Guna* (stimulates liver) along with action on *Pandu* (anaemia). Therefore, the formulation may have positive effect on *Rakta Dhatu* (blood and circulatory system) thereby preventing anaemia in pregnant lady. Milk further nourishes the tissues of mother and the foetus.

## CONCLUSION

*Punarnava* has anti-inflammatory action. It has Also Cardiotonic Property, it reduces Blood pressure, its diuretic Property due to large amount of potassium and presence of alkaloid Punarnavine So excrete Excess water from the body and it decreases edema. It relieves the edema, reduces the water retention and also cures burning & scanty micturation along with urinary tract

infections efficiently. Endowed with immunomodulatory, antioxidant, adaptogenic, hepatoprotective properties, it rules out any side effect of the drug on the growing foetus.

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