ROLE OF GOKSHURADI GUGGULU AND VARUNADI KASHAYA IN POLYHYDRAMNIOS - A CASE STUDY

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ABSTRACT
Polyhydramnios or Hydramnios is defined as a pathological increase of amniotic fluid volume in pregnancy and is associated with increased perinatal morbidity and mortality because of different criteria used in the definition of polyhydramnios, the incidence varies from 1-2% of cases. Hydramnios is suspected clinically if the uterine size exceeds that expected for gestational age, uterus may feel tense and palpating fetal parts or auscultating fetal heart rate may be difficult and with symptoms of maternal dyspnea and orthopnea and confirmed with ultrasonography. Common causes of hydramnios include gestational diabetes, fetal anomalies with disturbed fetal swallowing of amniotic fluid, fetal infections and other rarer causes. The prognosis depends on its cause and severity, can be associated with preterm labor, premature rupture of membranes, abnormal fetal presentations, cord prolapse and post partum haemorrhage. In our classics, no direct reference is available pertaining to amniotic fluid disorders. Acharya Sushruta has explained Garbha vriddhi in which ativriddhi of garbha causes ativriddhi of udara, an indirect reference to polyhydramnios which is often associated with fetal macrosomia. In the contemporary science, amnioreduction and NSAIDs are the two methods of prenatal treatment which have their own side effects. Thus, a patient diagnosed as having polyhydramnios was selected and was administered Gokshuradi guggulu and Varunadi kashaya for 10days and has been found to be effective in this condition.

Keywords: Hydramnios, Garbha vriddhi, gokshuradi guggulu, varunadi kashaya.

INTRODUCTION
Polyhydramnios is one among the amniotic fluid disorders. The normal levels of amniotic fluid between 20 and 35 weeks of gestation are 8-18cm and a value above 18cm is termed as polyhydramnios. This clinical condition is associated with a high risk of poor pregnancy outcomes. An underlying disease is only found in 17% of cases in mild polyhydramnios. In contrast, an underlying disease is detected in 91% of cases in moderate to severe polyhydramnios. Other causes include viral infections, Bartter syndrome, neuromuscular disorders, maternal hypercalcemia. As this condition results due to impairment
in the equilibrium between the production and re-
sorption of amniotic fluid, guggulu\(^3\), varuna\(^4\), gok-
shura\(^5\) are very effective in bringing about sroto-
shodhana, lekhana, moostral\(a\) karma thereby helps in
excretion of excessive retention of urine and balance
in the amniotic fluid levels and good pregnancy out-
come.

**Case Study:** A patient with obstetric history
G3P2A0L2 visited the OPD of Prasuti tantra evam
stree roga, SKAMCH&RC, on 17/2/18 with com-
plaints of difficulty in breathing while walking,
climbing stairs with history of 8 months of amenor-
rhoea and her USG-OBG revealed AFI 21.6cm at 35
to 36 weeks of gestation. Her LMP was 7/6/17 and
SEDD was 14/3/18.

**Course of treatment:**
Gokshuradi guggulu 1tid after food was given and
Varunadi kashaya 2tsp tid after food with equal
quantity of water was given for 10 days.
After 10 days of treatment(17/2/18 to 26/2/18), AFI
was 14.2 cm. Patient was relieved of her complaints
of difficulty in breathing, continued with regular an-
tenatal visits and delivered a single live male baby
on 15/3/18 by LSCS with baby weight of 2.8kg
without any congenital anomaly.

Mode of action of shamana aushadhis:

<table>
<thead>
<tr>
<th>Table 1: Gokshuradi guggulu</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug</td>
</tr>
<tr>
<td>-----------------------------</td>
</tr>
<tr>
<td>Gokshura</td>
</tr>
<tr>
<td>Guggulu</td>
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<tr>
<td>Haritaki</td>
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<tr>
<td>Vibhitaki</td>
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<td>Amalaki</td>
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<tr>
<td>Pippali</td>
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<tr>
<td>Maricha</td>
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<td>Shunti</td>
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<tr>
<td>Musta</td>
</tr>
</tbody>
</table>
Table 2: Ingredients of Varunadi kashaya

<table>
<thead>
<tr>
<th>Drug</th>
<th>Botanical name</th>
<th>Rasa</th>
<th>Guna</th>
<th>Veerya</th>
<th>vipaka</th>
<th>Dosha Karma</th>
<th>Vishishtha karma</th>
</tr>
</thead>
<tbody>
<tr>
<td>Varuna</td>
<td>Crataeva religiosa</td>
<td>Tikta, ka-shaya</td>
<td>Laghu, Ruksha</td>
<td>ushna</td>
<td>Katu</td>
<td>Kapha-vatahara</td>
<td>Deepana, krimighna</td>
</tr>
<tr>
<td>Kasisa</td>
<td>Green vitriol</td>
<td>Amla, Tikta, kashaya</td>
<td>Guru, Ruksha</td>
<td>ushna</td>
<td>katu</td>
<td>Vata-kaphahara</td>
<td>vishaghna</td>
</tr>
<tr>
<td>Saindhava</td>
<td>Rock salt</td>
<td>madhura</td>
<td>laghu</td>
<td>amushna</td>
<td>madhura</td>
<td>tridoshahara</td>
<td>Pathya, agnideepana</td>
</tr>
<tr>
<td>Shilajitu</td>
<td>Asphaltum pun-jabinum</td>
<td>Tikta</td>
<td>snigdha</td>
<td>sheeta</td>
<td>katu</td>
<td>tridoshahara</td>
<td>Mootrala, balya, Yogavahi, rasayana</td>
</tr>
<tr>
<td>Hingu</td>
<td>Ferula northax</td>
<td>Katu</td>
<td>Laghu, snigdha, tikshna</td>
<td>Ushna</td>
<td>Katu</td>
<td>Kapha-vatahara</td>
<td>Anulomaniya, Artavajanana, Balya,hrdya</td>
</tr>
</tbody>
</table>

Gokshuradi guggulu helped in the removal of excess foetal urine thereby normalising the amniotic fluid levels. It is said to have anti-inflammatory activity. Srotoshodhana karma of guggulu helps to clear the srotas which are obstructed, thereby srotoshuddhi is also achieved. Drugs like trikatu are agni deepaka and vatahara thereby agnimandya is corrected and proper circulation of rasa dhatu to the garbha and proper expulsion of mala in the form of mootra occurs. Varunadi kashaya does lekhana karma which arrests excessive secretion of fluids from cells producing it. Presence of kasisa, saindhava, shilajitu, hingu helps in vatashamana. Thus, it maintains the physiology and balance in amniotic fluid level.

CONCLUSION

Polyhydramnios is the term used to describe an excess accumulation of amniotic fluid. Under physiological conditions, there is a dynamic equilibrium between the production and resorption of amniotic fluid. Fluid levels are influenced by fetal urination and fetal lung liquid absorption and amniotic fluid is reabsorbed by fetal swallowing and intramembranous and intravascular absorption. Hence, the selection of yogas like gokshuradi guggulu and varunadi kashaya is very apt owing to the presence of dravyas which are shothahara, agnideepaka, pachaka, srotashodhaka and mootrala and has been very effective in polyhydramnios.

REFERENCES

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