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Vaidyabandhu

Adding science to practice

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Prenatal & Postnatal Care

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Our Books, Notable Quotes, Nirnaya – Diagnostic tips

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Exclusively for Registered Ayurvedic Medical Practitioners

Sootikaparicharya



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Ayurveda, being the indigenous medical system of India, is a widely accepted health care system followed by a majority of the Indian population. Kerala has its own traditional scientific health care system that is blended with the lifestyle of the local population and has influenced the social, economic and cultural perspective of the society. A rich Ayurveda based culinary tradition exists in Kerala and there is a still prevailing methods for antenatal and postnatal care. It includes herbal home remedies as food and medicine. These are used as single-drug preparations or combinations. *Sootikaparicharya* is a unique contribution of Ayurveda. A woman who has just given birth to a child, followed by the expulsion of the placenta, is called *Sootika*. If the placenta is not expelled, the woman cannot be called *sootika*. The duration of *sootika kaala* is 45 days or the reappearance of the next menstrual cycle after delivery.

Line of management

After delivery, a woman becomes weak or emaciated. This is due to the development of foetus inside, unsteadiness of all the dhatus, labour pains, and excretion of *kleda* and blood. Ayurveda has its own scientific schemes to bring the body from this state to its normalcy. *Sootikaparicharya consists deepana, pachana, vathaanulomana, vaathasamana, garbhaasaya sodhana,soolaprasamana, sthanya janana, sthanya vardhaka and brumhana*. With these systematic regimens she attains *bala* and reaches her pre-pregnant state. The first two weeks of *sootikaparicharya* aim to manage pain and stress after labour and to increase digestion and lactation. Hence the drugs which are used in the first week after delivery are *deepana pachana*. It corrects *agni* and helps to promote *sthanya utpadana*. Panchakola churnam is good for *deepana pachana* and is suggested for three to five days according to digestive capacity of *sutika*. Coffee prepared with palm jaggery, black pepper, cumin and coriander seed, *Mukkudi churnam* or *ardrakom* prepared with honey are also good for *deepana*. *Mukkudi* has an identity of medicine that can be used as a food supplement e.g., *mukkudi* kanji and also used as medicine for postnatal ailments. The drugs are ground cooked in buttermilk, and made into a liquid form is called *mukkudi*. It is used as a simple preparation and also has different ingredients and different forms like *mukkudi* kanji, *mukkudi moru*, *mukkudi churnam*, *pettumukkudi* and *pettu podi* in the (gruel with *mukkudi*, butter milk with *mukkudi*, powder of mukkudi medicines,mukkudi after delivery, powder after delivery) in different parts of Kerala.

After the regime with a *deepanapachana* drug *yavagu pana* (intake of gruel) is important. It is *balavardhana*. This is to be followed by *deepana pachana, vathanulomana* or *vathasamana* drugs. Dhanwantharam kashayam, , Dhanwantharam gulika, Jeerakadyarishtam and Dasamoolaarishtam are good for relieving pain due to delivery, increasing breast milk, and for low back ache. *Garbhasya sodhana* drugs like Pulinkuzhambu are also given in this period. Followed by *kledasoshana/ soola prasamana* single drugs or *ilakurukkukal* or *kurukkumarunnu* are also given from the 2nd week (Leaves, seeds or the whole plant body can be used for this purpose.) These medicines are also used in the form of *ksheera kashaya*, *ksheera yavagu*, *churna*, and *kwatha* preparations according to specific conditions. If breast milk is not sufficient, Vidaryaadi kashayam/ Jeerakadyarishtam/ Satavary kseerakashayam/rice gruel with *medhika* or *jeeraka* and coconut milk/Sthanyajanana rasayanam can be given. Dietary advice is important in this stage. *Mamsarasa*, prepared with goat meat, small onion, garlic, turmeric, cumin seed, pepper, wheat, dadima, amalaki, nagara and curry leaf, which is good for *balavardhana* and is *sthanya*

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vardhaka too. *Brumhana* drugs can be given according to the requirement by accessing pre and postnatal condition of the sutika. Ajasvagandhadileham, Panchajeerakagudam, Chyavanaprasam, Amrutaprasa ghritam, Vidaryadi ghritham, etc. are commonly preferred for *brimhana* purpose.

***Kurukkumarunnu*/medicated porridge**

Kurukkumarunnu or medicated porridge, is a healthy recipe in postnatal care. Lakshmana(*Ipomoea sepiaria* R), Alambusha(*Biophytum sensitivum* L), Pindalu(*Xeromphis uliginosa*), Kundali(*Azima tetracantha* L), Parisham(*Thespesia poplnea* L), Kuroodaka(*Pergutaria etaemia*), Haridra (*Curcuma longa* L), Kaidarya(*Murraya koenigii* L), Dronapushpi(*Leucas aspera* W), Lajjalu (*Mimosa pudica* L), Sreyasi(*Cissampelos pareira* B), Ajamoda(*Cissampelos pareira*), Satahwa (*Anethum graveolens* L) and Bhoomyamalaki (*Phyllanthus niruri* L) are the drugs that can be used for making *kurukkumarunnu*. Make a paste with one of these drugs and add rice powder, coconut milk, palm jaggery (karupetty), and cow's ghee and cook well to make porridge. One cup of this porridge can be given daily to the sutika after the bath, starting from the second week. Satahwa, ajamoda, nimba, jeera, and haridra can also be given in the form of liquid, or grated.

Abhyanga:

Abhyanga with taila reduces stress and strain of the muscles due to the excessive stretching, weight bearing and is also *vatasamana* and *vedana samana*. *Mridu abhyanga* with Dhanwantharam tailam,Dhanwantharam kuzhambu, Pinda tailam, Balaswagandhadi kuzhambu, etc. can be used according to *prakruti* and physical condition of *sootika*.

Vethukuli / parishekam

Water boiled with drugs used for bathing is called vethuvellam. Bathing with *vethuvellam* is *sramahara*, *aekthaprasadana* and *sarvendriya vivodhana*. After the application of taila, *vethuvellam* is used from the next day after discharge from the hospital in normal delivery. The water should not be too cold or hot and the temperature should be maintained as what the lady would normally use. So, it is better to prepare the water a day before planning to use it, and just heat it to the desired temperature before bath. It should be allowed to cool down on its own. It is continued to 7 or, 14 or 21 or 28days. The selection of drugs for preparing *vethuvellam* is different according to its availability. Drugs for *vethuvellam* is having *vathasamana*, anti-infective and anti-inflammatory properties. *Varikkaplavila* (Panasam), *Adalodakam*(Vasa), *Karinochi* (Nirgundi), *Athi*(Udumbaram), *Ithi*(Plaksha), *Arayal*(Aswatha), *Peral*(Nyagrodha), *Thechi* (Paranthi), *Kurumulaku valli*(Maricha), *Karingotta*(Gucchakaranjah), *Pooparuthi / Poovarasu*(Parisham), *Chorukku madal*(Narikela), *Chiratta*(Kalpavruksha) Coconut shell, *Vattayila, Pada* (Paadha), *Paranki mavu*(Arushkara), *Pullanji*, *puliyila*(Chincha), *Vatakkodi*(Ghanavalli), *Panchi*(panal), *Veppila* (Nimba), *Peruvalam*(Granthiparna), *Pezhu* (Bhadrendrani) are the drugs we can use for preparing for *vethuvellam* according to its availability. Green gram powder or eladi churnam can use for external applications. Bathing with medicated water or *Vethuvellam* is refreshing the body and mind and helps to strengthen the low back, ligaments, muscles, joints and also smoothens skin and relieves pain. After *vethukuli* abdominal binding is important and it helps to provide support to low back, abdomen and maintain a good posture and shape.

Yoni dhupana

Yoni dhupana with *guggulu, haridra, vacha*, etc. helps to reduce pain as well as inflammation and promotes the healing process.

Diet

Since *Agni* bala is minimal in *sootika*, a special diet pattern *(peyadikrama)* is followed, which is *deepana*, *laghu*, and *brumhana*. The diet in postnatal care is to provide an adequate intake of calories, protein, vitamins, and minerals. *Uluva kanji*, *jeeraka kanji*, *Mukkudi kanji*, *cherupayar kanji*, goat soup, vegetables, and small fishes are recommended. Soup containing vegetables, cereals, spices, curcuma, ginger, etc. along with goat meat is good for breastfeeding mothers. *Methika and Uluva kanji*(fenugreek gruel) is good for *sthanya janana*. Palandu (small onion) is good for *Deepana pachana*, *Garbhasaya* sodhana, *Vathasamana*, *vedana sthapana*, *Sthanya vardhana* and for proper *lochia* discharges and it is used as both medicine and food. Small onion (shallots) plays an important role in regulating of the menstrual cycle.

Conclusion

Classical postnatal care supports the normalisation of the uterus, prevents postpartum anaemia and promotes breast milk. It is the area where Ayurveda knowledge has been effectively blended with the nutritional and dietary needs influencing the food habits of the society.



Kshirabalatailam



Vidaryadi Ghritam



Pulileham



Ajaswagandhadi Leham

Sootika Paricharya at Kottakkal Arya Vaidya Sala Ayurvedic Hospital & Research Centre



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Postnatal period is mentioned as *Sootika kaala* in Ayurveda. The care given during this special period to maintain health and immunity is referred to as *Sootika Paricharya*, which is equally important as pregnancy care. Child birth is a strenuous activity which cause *dhatukshaya*, *vatakopa* and thereby depletion of dehabala which needs an exclusive attention for the mother after delivery. *Sootika paricharya* is mentioned extensively in classics which includes *Ahara*, *Oushadha* and *Vihara*. Postpartum care involves practices to cleanse the uterus of the mother, shrink it to its original state, increase mothers' digestive power, relieve fatigue and improve breast milk. Breastfeeding can be started half an hour after normal delivery. The sooner breastfeeding begins, the faster the production of breast milk.

As the uterus contracts, vaginal bleeding decreases and the blood changes from red to brown in colour and only a small amount is passed. The pain gradually disappears and discharge [lochia] usually stops within 14 days, but in some cases it lasts for a month and a half in small amounts. Especially for first three days after delivery *sootika* should not move much and everything should be taken care of until the twelfth day. After that, she can walk a little and go out for essential things, but better not to do anything that will cause too much movement or exertion to the body. Do not exercise during this time and avoid exposure to cold, wind, rain, snow, dust, smoke or heat.

Main objectives of postnatal care:

- Ensure uterine involution and control bleeding.
- Provide proper nutrition and hydration.
- Proper wound care, prevent breast engorgement, mastitis and nipple soreness.
- Ensure proper rest, physical as well as mental recovery and protect from emotional shifts.
- New born care- Monitor weight, urine, stool and ensure proper breast feeding and bonding.

Usually we begin with a gentle treatment plan from the fourth day after a normal delivery and after 14 days in case of caesarean section. What makes our treatment unique is that the treatment is personalised for every patient. We study the body constitution. State of digestion and sleep, lactation pattern and emotional stability before deciding the treatment.

Internal Medication
Usually medications can be started from fourth day of delivery for the purpose of *deepana*, *pachana* (to improve digestion and appetite), *garbhasaya sodhana*, *soolaprasamana* and *vatanulomana* and medicines like **Pulileham, Dasamularishtam, Jeerakadyarishtam, Mahadhanwantaram Gulika**, *Panchakolamukkudi* etc. are given during the first two weeks. The line of treatment can then be modified focusing on *balavridhi*, *stanyajanana*, *brimhana* and *dhatuposhana*. **Dhanwatharam Kashayam/ Kwatham Tablet, Kshirabala (101) Softgel Capsule, Lactokot Granules, Vidaryadi Ghritam, Stanyajanana rasayanam, Ajaswagandhadi Leham, C-Health Forte** or medications as per the symptomatic requirement of the patient can be given for the next six weeks.

External Treatments
Special external treatments are also done from the fourth day after normal delivery. Medicated oils like Chemparutyadi Keratailam, Dhanwantaram Tailam/Kuzhampu are usually made use of for massage on head and body as *vatahara*, *vedanahara* and *dhatuposhana* treatment. Application of '*Nisa*' churna, *sireesa* churna, etc. also can be done all over the body and face as varnya, for reducing blackish discolouration and improving complexion. Head wash is done using chemparuthi thali – crushed leaves of japa,bala,patha etc. are applied on the head during bath as hair shampoo. Kottakkal Ayurveda Hair Nourishing shampoo is beneficial for hair care.

Sootika snana or *ushnodaka parisheka* is a special bath given with warm decoctions prepared with *Nalpamara*(*Kshirivriksha*) and vatahara drugs. After *snana*, *Udara Veshtana* or wrapping around the abdomen tightly with long and soft cloth is also done. A cotton cloth should be folded length wise like a wide belt tied tightly as much as is comfortable and then *sootika* should lie flat. It is best to lie like this for 5-6 hours for the first 2-3 weeks. These procedures would help expel *dushta raktha*. Also normalise *garbhasaya* and avoid *vata vitiation*. The procedures would also support reduce abdominal fat, strengthen and stabilize low back and hip area. These are mentioned in all classical texts with utmost importance.

External treatments can be modified according to the health condition of the patient.

Special diet
Special diet is also mentioned in classics for *soothika*. *Manda* or *Yavagu* (rice porridge) with sneha [ghee] or kshira [milk] along with digestive medicines are advised according to the agnibala for first 2-3 weeks.

Well balanced *sootika* diet prepared under doctor's supervision is provided at AHRC, Kottakkal. The diet would help nourish the mother and improve production of breast milk.

Soothika* regimen according to *Acharyas

- For *Garbhasaya sodhana* churna of pippalimoola(*Piper longum*), Chavya(*Piper mullusea*), chitraka(*Plumbago indica*) and sringavera(*Zingiber officinale*) mixed with jaggery should be given internally for 2-3 days after delivery or till the expulsion of

dushta raktha [Susruta]

- After *garbhasaya suddhi*, *snigdha yavagu* or *kshira yavagu* processed with *brimhana dravyas* [rice porridge prepared with ghee or milk and medicines which nourishes the body] should be given for 3 days.[Susrutha]
- *Sneha* [medicated ghee] prepared with Panchakola Churnam or other deepana-pachana dravya [medicines which improve digestion] is given when hungry, according to agnibala [Ashtanga Sangraha and Charaka.]
- After digestion of *sneha*, *Yavagu* with *Ghrita* and pippalyadi churna may be given twice daily for 5-7 days[Charaka.]
- If snehapana is contraindicated, kwatha of *vatahara* drugs and laghupanchamoola can be given [Ashtanga Sangraha.]
- According to Kashyapa, *ahara* of *soothika* should be as per *agnibala*, that is '*Manda*' for 3-5 days, after that Yavagu with sufficient quantity of salt and sneha or Kulatha Yusha [horse gram soup] prepared with *sneha*, *lavana*, *amla* and *mamsarasa* may be taken with kushmanda, moolika etc.
- From 7th - 8th day, *jangalamamsarasa* [meat soup of chicken, quail or goat] prepared with Sali [brown rice] and *deepana-pachana dravya* [digestive medicines] can be given [Susrutha]

Baby Care at Kottakkal Arya Vaidya Sala
We provide care for the baby too with traditional baby massages with special coconut oil, followed by bath in herbal water.

Baby massages on face, body and head with **Kottakkal Ayurveda Baby oil**, helps to sharpen and shape facial muscles, forehead, nose and ears and to strengthen the body muscles and improve flexibility of body. **Kottakkal Ayurveda Baby Soap** is used for the skin care of baby.

Sootika who is emaciated due to growth and development of foetus and weak due to expulsion of *kleda*, *raktha* and *dhatuvaigunya*, regain the lost nourishment and health almost completely, like pre-pregnant state, easily through proper *soothika paricharya*.

At Arya Vaidya Sala, we follow a time tested regimen that helps mother for a complete physically, mentally and hormonally recovery, as the postnatal care is just as important as pregnancy care.

Know our units

Nanjangud Factory



Arya Vaidya Sala established the new pharmaceutical manufacturing facility in Nanjangud, Karnataka, in 2009. The idea of this unit's conception, design, and establishment was to help AVS meet the changing needs of broader parts of Indian society. The factory is equipped for microbial tests for all formulations produced. The factory was planned, designed, and established as a state-of-the-art medication manufacturing facility that incorporates some of the most recent elements of the government's GMP (Good Manufacturing Practices) regulations. The factory has installed some very modern pharma equipments like Fluidized Bed Processor, and similar others. Such modern equipments have facilitated higher operational efficiency and better quality standards.

The products are basically adapted from time tested classical texts as well as from the century old clinical experience of AVS. But they are all presented as more user compliant forms like coated tablets, granules, syrups,balms, gels, etc. More than products are manufactured at Nanjangud factory.

Pre natal and post natal care



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Ayurveda advices the diet and special care for maintaining the health of pregnant lady. Similarly authentic ayurvedic books describe the after delivery care also. The health of women during pregnancy, childbirth, and the postpartum period is referred to as maternal health. Ante natal care is essential to maintain the health of the mother and child. In order to ensure that women and their infants achieve their maximum potential for health and wellbeing, each step should be a positive experience.

In order to fulfill the increased needs of both the mother and the fetus, the nutritious diet during pregnancy must include adequate supply of energy, protein, vitamins, and minerals. Micronutrient deficits may result from pregnant women's dietary consumption of fruit, vegetables, meat, and dairy products being insufficient to meet these demands.

According to WHO, Diabetes during pregnancy affects about one in six live births (21 million annually). Type 1 or type 2 diabetes, also known as pre-gestational diabetes, can be pre-existing during pregnancy, or hyperglycemia can be discovered during pregnancy and is categorized as either gestational diabetes mellitus or diabetes in pregnancy.

Pre natal Care

Let us examine the main medicines prescribed by Ayurvedic doctors to protect the health of pregnant lady.

Gulika

In fever, nausea and respiratory complaints

1. Mahadhanvantharam gulika (Garbharakshini gulika): (Proprietary Medicine): This unique tablet of AVS is used in indigestion, flatulence, cough, stomach disorders occurring during pregnancy period.

2. Dhanvantaram gulika (Ref.Text: Sahasrayogam): Indicated in dyspnea, cough, hiccup, vomiting and stomach disorders.

3. Asalyadi gulika (Proprietary medicine): This unique tablet of AVS is beneficial in flatulence and indigestion.

4. Gorochanadi gulika (Proprietary medicine): Used in fatigue, fever, vertigo, respiratory complaints , hiccup, convulsions and multi system involvement conditions of acute and chronic diseases.

5. Mukkamukkaduvadi gulika (Ref.Text:Sahasrayoga): This tablet is useful in fever, allergic rhinitis etc. during pregnancy period.

6. Vilvadigulika (Ref.Text:Ashtangahridayam): Used in fever, dysentery, toxicity in the body

Bhasma

Anemic conditions

1. Annabhedi sinduram Capsule (Proprietary medicine)
Widely prescribed in anemia, useful in anorexia, improves vision and hair growth.

2. Lohasinduram capsule (101), (14), (21), (7) (Proprietary medicine)
Lohasinduram is used in iron-deficiency anemia and related complications

Stomch disorder

Sankhabhasmam capsule (Ref.Text:Rasatarangini)
Useful in acid peptic diseases, gastric / duodenal ulcer, hyper acidity, and heartburn and associated stomach disorders.

Respiratory diseases

Pravalabhasmam capsule (Proprietary medicine) Prescribed in dysfunctional uterine bleeding, respiratory diseases, uterine tract

infections, leucorrhoea, etc. and it is a good source of calcium

Kashayam

Pregnancy care

1. Garbharakshakashayam (Bhadradikashayam)/Bhadradikwathamtablet (Proprietary medicine): This unique decoction of AVS is used in ante natal care, anemia, abdominal colic, edema, hypertension and dysuria.

2. Dhanvantaram Kashayam/Dhanvantaram kwatham tablet (Ashtangahridayam)
Useful in pregnancy care, rheumatic complaints, urinary tract complaints, diseases of bone, back pain, and fracture

Fever and bronchitis

1. Dasamulakatutrayadi kashayam/kwatham tablet (Ref. Text: Sahasrayogam)
This medicine is prescribed in cough, bronchitis, and dyspnea and inter costal pain during pregnancy

2. Sitajvarari kashayam/Kwatham tablet
(Proprietary medicine): Indicated in fever, allergic rhinitis and respiratory diseases

3. Drakshadi kashayam/ Drakshadi kwatham tablet
(Ref. Text: Ashtangahridayam)
This medicine is used in fever, vomiting, vertigo, burning sensation, general debility, liver disorders, thrombocytopenia, complications of prolonged alcohol intoxication, anxiety and insomnia, reduces mental stress.

4. Nayopayam Kashayam/Kwatham tablet
(Ref.Text:Sahasrayogam): Useful in cough, bronchitis and dyspnea

5. Pachanamritam kashayam
(Ref.Text:Sahasrayogam) Used in fever and indigestion

6. Balajirakadi kashayam
(Ref.Text:Sahasrayogam): Used in cough, bronchial asthma, and dyspnea.

7. Dasamulam kashayam
(Ref.Text: Bhaishajyaratnavali)Used in cardio pulmonary, renal and liver disorders.

8. Guluchyadi kashayam/Guluchyadi kwathamtablet (Ref.Text:Ashtangahridayam):
Prescribed in excessive body heat, vomiting, fever, gout, urticaria, and indigestion

9. ShadangamKashayam/ Shadangamkwathachurnam
(Ref.Text: Ashtangahridayam):
Used in indigestion, fever, burning sensation and excessive thirst.

Ghrita

Pregnancy care

1. Amritaprasa ghritam (Ref.Text: Ashtangahridayam):
This contains goat meat, helps to improve the body weight, prevents vomiting, cough, bronchitis, urinary tract diseases and can be used in pregnancy period and after delivery care according to the directions of the doctor.

2. Asvagandhadi ghritam
(Ref.Text: Bhaishajyaratnavali):
This ghrita contains goat meat, beneficial in subfertility, improves body weight, improves immunity and prevents respiratory disorders.

3. Kalyanaka ghritam
(Ref.Text:Ashtangahridayam):
Useful in anemia during pregnancy period, improves memory, intellect, prevents fever, removes toxins from the body and improves general immunity.

4. Dadimadi ghritam
(Ref.Text:Ashtangahridayam):
Used in anemia, subfertility, respiratory disorders and digestive disorders

5. Phalasarppis (Ref.Text:Ashtangahridayam):
Prescribed in uterine disorders, subfertility, improves intellect and immunity during pregnancy.

6. Dhatryadi ghritam(Ref.Text:Sahasrayogam):
Used in anemia, burning sensation, subfertility, and bleeding

7. Sukhaprasavada ghritam
(Proprietary medicine)
This unique product of AVS helps for painless delivery and corrects anemia. Ghrita contains *Upodika*(Basella alba), *Urvaru*(Cucumis sativus) , *Bhadrika*(Aerva lanata), *Yashti*(Glycyrrhiza glabra), and *Kshiram*(Milk)

8.Satadhoutaghrita(Proprietary medicine)
Used as an external application in striae gravidarum, burning paraesthesia, herpes, fungal and bacterial skin lesions, etc.

Leha

In vomiting and respiratory disorders

1. Vilvadileham (Ref.Text: Sahasrayogam)
This medicine is very useful during pregnancy time which helps to control vomiting, cough, respiratory disorders, indigestion, and hyper acidity.

2. Talisapatradi leham
(Ref.Text: Ashtangahridayam)
Beneficial in vomiting, cough, bronchitis, sinusitis, allergic rhinitis indigestion and stomach disorders.

3. Talisapatradi vatakam
(Ref.Text:Ashtangahridayam)
Beneficial in vomiting, throat infections, cough, bronchitis, sinusitis, allergic rhinitis, indigestion and stomach disorders

4. Haridramarichadi leham
(Ref.Text ,Chakradatta)
Indicated in Cough and bronchitis.

Churnam

1. Talisapatradi churnam
(Ref.Text:Ashtangahridayam)
Used in anorexia, cough, bronchitis, sinusitis and indigestion

2. Dadimashtaka churnam
(Ref.Text:Ashtangahridayam)
Effective in irritable bowel syndrome and gastric disorders.

Taila

1. Dhanvantaram tailam/Kuzhampu
(Ref.Text:Ashtangahridayam)Used as post natal care medicine, widely prescribed in rheumatic diseases, bone fracture, back pain, uterine complaints and it improves general strength.

2. Dhanvantaram (101)/Dhanvantaram (101) softgel capsules (Ref.Text:Ashtangahridayam)
Used as post natal care medicine, widely used in rheumatic diseases, bone fracture, back pain, uterine complaints and to improve general strength. Usage as directed by the doctor.

3. Kshirabala tailam (Ref.Text:Bhavaprakasam)
Used in rheumatic diseases and for daily abhynga in pregnancy period.

4. Kshirabala (101)/ Kshirabala (101) soft gel capsules
This medicine may be taken internally during pregnancy period to decrease the labor pain, useful in rheumatic ailments, back pain and is having rasayana properties.

5. Sudhabala tailam(Ref.Text:Sahsrayogam)
Used in rheumatic and neurological diseases and for daily *abhyanga* in pregnancy period

6. Lakshadi tailam/Keratailam
(Ref.Text:Ashtangahridayam)
This pediatric oil is used for external application for pregnant ladies also. Helps to control respiratory disorders, epilepsy, and improves body complexion.

7. Valiya Lakshadi tailam
(Ref.Text:Sahasrayogam)
This pediatric oil is used for external application for pregnant ladies also. Helps to control respiratory disorders, epilepsy, and improves body complexion.

After Delivery Care
Ayurvedic medical practices in postpartum care are aimed at strengthening the mother's uterus, and restoring to its natural size, boosting the mother's digestive capacity, relieving exhaustion, and enhancing lactation. Keralam had a healthy traditional practice of after delivery care. The below mentioned medicaments are prescribed by

Ayurvedic doctors.

Arishtasavas

1.Dasamularishtam
(Ref.Text:Bhaishajyaranavali):
This medicine is widely prescribed in after delivery care. Used in anorexia, irritable bowel syndrome, bronchitis, cough, rheumatic complaints, uterine complaints, and urinary tract diseases and to improve general immunity.

2. Jirakadyarishtam
(Ref.Text:Bhaishajyaranavali):
Beneficial in cough, bronchitis, indigestion, stomach disorder and in uterine disorders.

3. Draksharishtam
(Ref.Text:Shanrgadharasamhita):
Prescribed in cough, bronchitis, consumption, throat diseases, anemia and constipation.

4. Asokarishtam (Ref.Text:Bhaishajyaranavali):
Used in dysfunctional uterine bleeding, fever, hemorrhoids, indigestion, edema and other uterine disorders.

5. Lohasavam (Ref.Text:Bhaishajyaranavali
Useful in iron deficiency anemia. Improves digestion, controls edema and is indicated abdominal diseases.

6. Visvamritam (Proprietary medicine):
Fever, diarrhea, irritable bowel syndrome, stomach ache, anemia and edema.

Leha

1. Ajasvagandhadi leham
(Proprietary medicine):
This medicine contains goat meet. Used to improve general strength, weight and immunity after delivery.

2. Panchajiraka gudam
(Ref.Text:Sahasrayogam):
Indicated in antenatal and post natal care. Nourishing, useful in cough, anemia and uterine disorders.

3. Pulileham (Ref.Text:Sahasrayogam)
Prescribed in after delivery care. Improves digestive capacity and corrects the bowel.

4. Vidaryadyasvam/Vidaryadi leham/ Vidaryadi ghritam
(Ref.Text:Ashtangahridayam):
Indicated in after delivery care, improves body weight, useful in stomach disorders, uterine disorders and it improves lactation.

5. Stanyajanana rasayanam
(Proprietary medicine):
This avaleha is used to improve lactation.

Kashayam

Dhanvantaram Kashayam/ Dhanvantararishtam
(Ref.Text: Ashtangahridayam):
This medicine is indicated in after delivery care, uterine disorders, urinary tract diseases, bone disease, fracture, and rheumatic ailments and it improves general strength. Usage as directed by the doctor.

Bhasma

1. Annabhedi sinduram capsule
(Proprietary medicine):
Indicated in Iron-deficiency anemia, improves digestive power and immunity

2. Lohasinduram (7),(14),(21),(101)
(Proprietary medicine):
Indicated in Iron-deficiency anemia and associated complications. Improves digestive power.

Tailam

1.Dhanvantaram tailam/kuzhampu, Dhanvantaram (101)/ Dhanvantaram (101) Softgel capsule (Ashtangahridayam):
This medicine is indicated in after delivery care, uterine disorders, urinary tract diseases, bone disease, fracture, and rheumatic ailments and it improves general strength. Usage as directed by the doctor.

2.Nalpamaradi keratailam/tailam
(Ref.Text:Sahasrayogam)
This oil is used to improve the colour and is beneficial in skin diseases.

3.Lakshadikeratailam
(Ref.Text:Ashtangahridayam)
It is indicated for infants. Helps improve

immunity and colour, cures respiratory issues and is effective in epilepsy

New generation medicine

General immunity

1.C Health Forte(Proprietary medicine)
This unique product of AVS is balya, poshak and a positive health promote. Indicated in immune deficiency, general debility and emaciation.

In cough and bronchitis

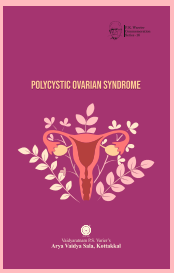
1.Vasakot Cough syrup (Proprietary medicine)
This unique product of AVS is indicated in cough and respiratory problems, and the contents are:
Vasa(*Adhatoda zeylanica*), Kantakari (*Solanum surattense*), Tulasi(*Ocimum sanctum*), Parnayavani(*Coleus amboinicus*), Maricha(*Piper nigrum*), Pippali(*Piper longum*), Sunthi(*Zingiber officinale*), Khanda(*Sugar Candy*), Madhu (Honey), Pudinasatwam(Menthol).
This medicine is available in **sugar free** form also.

Pediatric oil

Kottakkal Ayurveda Baby oil: A massage oil formulated for the use of children (including new born). May be applied and massaged on body and head. It helps to impart smoothness, tone and glow to the skin.

Our Books





1. Garbhineecharyayum Prasavasusrooshayum
Pages: 67 Price: 60

2. Polycystic Ovarian Syndrome
Pages: 68 Price: 150

Preconceptional Care: Preparing today for new beginnings



Dr. Sreeranjini P.S.
Deputy Medical Officer
Arya Vaidya Sala, Kottakkal

Preconceptional care includes treatments and medicinal applications that improve the physical, mental, and reproductive health of partners. This is achieved by ensuring healthy lifestyle changes, a balanced diet, disease prevention, counselling, and preparation for reproduction, thereby ensuring a healthy pregnancy and the wholesome development of the foetus. The approach differs depending on whether the couple is already healthy or has underlying issues.
Ayurveda says healthy conception depends on four factors.These are together called *garbha sambhavasamagri*.

Ritu – proper timing (fertile window),
Kshetra – healthy reproductive organs,
Ambu – proper nutrition & fluids,
Beeja – healthy ovum and sperm.

In Ayurveda, pre-conceptional care can be used as a supportive approach alongside Assisted Reproductive Techniques (ART) like IVF, IUI, and ICSI. The goal is not to replace ART, but to prepare the body and improve the factors of *Garbha sambhava Sāmagrī* so that ART success rates improve.

How the quality of components in garbha sambhava samagri is improved:

1. Improves *Beeja* (sperm & ovum quality)
Rasayana and vajikarana therapies strengthen reproductive tissues
Medications, diet, and lifestyle improve fertility potential.

2. Prepares *Kshetra*
(uterus & reproductive system)

Panchakarma procedures helps in maintaining the balance of doshas, supports uterine health and hormonal balance.

3. Enhances *Ambu*
(nutrition & internal environment)
Wholesome diet, and nourishing foods
Ensures proper tissue nourishment and hormonal function.

4. Ensures proper *Ritu* (timing of conception)
Identifying fertile window, planning intercourse at optimal physiological and mental state.

This holistic preparation is expected to increase:

- Chances of conception
- Quality of embryo
- Healthy pregnancy and offspring development.

Importance of sodhana karma in preconceptional care:

Shodhana karma along with prior *sneha sweda* is considered as a foundational step in ayurvedic preconception care. By detoxifying the body, balancing *doshas*, and enhancing reproductive tissue quality, it creates an optimal internal environment for conception and healthy pregnancy. The primary *Shodhana kriyas* include *Vamana*, *Virechana*, *Vasti*, and *Nasya*, chosen based on individual constitution and clinical condition.

Mode of action of medicines commonly used:

1. *Sama doshavastha* - Balance aggravated doshas.
2. *Sodhana* - Purify the body
3. *Agni dipanaama pachana* - Improve digestion and metabolism
4. *Dhātu poshana* - Nourish body tissues, especially reproductive tissues
5. *Sukra artava sudhi* - Enhance quality and quantity of sperm , support ovum health and menstrual regularity
6. *Garbhasaya balakara*: - Strengthen uterus and reproductive organs
7. *Medhya*:- Promote hormonal balance
8. *Rasayana* (rejuvenation, vitality, immunity)
9. *Vajikarana*
(fertility and sexual health enhancement)
10. *Sattva vardhaka* - Improve mental well-being and reduce stress

Commonly used medications and their mode of action in brief:

The selection of medicine , dosage, mode of action, etc. may vary from person to person

1. *Sodhaka*
Gandharavahasthadi kashayam, Triphaladi churnam, Avipathi churnam, Erandatailam - Clears pakvashaya and regulates apana vata, which is crucial for ovulation, fertilization, and implantation. Removes *dosha sanchaya* affecting reproductive channels (*artavavaha* and *shukravaha srotas*).

2) *Rasayana* (rejuvenative) medicines
Chyavanprasham, Brahma Rasayanam, Phalasarpis, Guduchyadi kwatham, Balaksheerapakam , medicated milk with *lakshmana* - Majorly works as *medhya*, *balya*, *rasayana*, *vayasthapana*, and *garbhasthapaka*

Therapeutic indications- Preconceptional care – improves *ojas*, *dhātu* quality, and mental health of parents, supporting healthy conception, support in infertility associated with stress, weakness, or *dhātu kashaya*.

3) Male Fertility (*Shukra-vardhaka*) Formulations
Used to improve sperm count, motility, and reproductive strength like Atmagupta churnam or tablet, Spermakot tablet or granules, Indukantha ghritham, Kalyanaka ghritham

4) Female Fertility (*Artava-shodhaka* / *Garbhashaya-poshaka*)
Support ovulation, uterine health, and hormonal balance, uterine tonic, menstrual regulation.
Eg:- Phalasarpis, Sukumara ghritam, Kalyanaka ghritam, Pushyanuga churnam, Ashokarishtam,

Kumaryasavam, Lodhrasavam, Dashmoolam kashayam, Hinguvachadi churnam, Dadimadi ghritham, *satakuppa podi*.

5) *Medhya* - to maintain better mental health, stimulates HPO axis
Eg:- Brahmi capsule, Shankhapushpi extract Saraswatarishtam, Mahatiktam kwatham, Brahmi ghritham

6) Nutritional supplements
Improve overall vitality and reproductive tissue nourishment.
Eg:- C Health granules, Chyavanaprasam

Preconceptional care in Ayurveda is comprehensive and individualized. It addresses the physical, mental, and nutritional dimensions of both partners rather than focusing solely on conception. By preparing the body through purification, nourishment, rejuvenation, and emotional balance, it seeks to optimize all four factors of *Garbhasambhava Samagri-Ritu*, *Kshetra*, *Ambu*, and *Beeja*.

When integrated thoughtfully with modern reproductive methods, this approach may enhance internal readiness and improve outcomes. Its emphasis on digestive health, hormonal balance, tissue nourishment and psychological well-being aligns with contemporary understanding that fertility depends on overall systemic health.

However, careful assessment and supervision by qualified practitioners are essential. Since constitution, clinical condition and reproductive history vary widely, individualized planning ensures safety and effectiveness.

The Fruitful Life of a Physician
(Collection of clinical experience)
Dr. M.R. Vasudevan Nampoothirui



The book certainly would serve as an aid in interpreting clinical conditions in terms of Ayurveda, which adds to its contemporary relevance.
Dr. P.M. Varier

Disease management during pregnancy in Ayurveda



Dr. Sujitha S. Nair
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Arya Vaidya Sala, Kottakkal

Procreation is a divine art and will continue till the male and female entity exists in the universe.

Garbha is defined as the union of *sukra* (male gamete), *sonita*(female gamete), along with *atma* (soul), *prakriti* (the inherent constitution) and *vikara* (the imbalances). The whole process of pre-conception, conception, ante-natal care and post natal care has been explained meticulously in Ayurveda tomes, since time immemorial.

Garbhini is nurtured with due care and they need to be treated with sweet, cold, gentle, pleasing, medicines, diet and regimen. Monthwise regimen is explained in detail too. Susruthacharya mentions "*mriduviryam madhuraprayam garbhaavirudham*"(all diet and medicine which is mild in potency and which is sweet are beneficial for the foetus).

Disease management in pregnancy:-

1.Vomiting : - Though it is one of the signs of pregnancy, troublesome vomiting needs to be addressed. 'Mahadhanwantaram gulika or Dhanwantaram gulika may be given along with dry food in the early morning like puffed rice, rusk etc. Vilwadi leham is found effective.

2.Anaemia :- Haemoglobin level of less than 11gm/dl is considered anemic, right from first trimester. Low levels lead to preterm birth, low weight of foetus, post partum haemorrhage etc. Mandoora vatakam, Annabhedi sinduram capsule, Dadimadi ghritham etc are given. Iron supplements should be continued.

3.Pedal edema :- Change in circulation of blood, hormonal changes are pressure changes are the main reason for pedal edema in pregnancy. Bhadradi kwatham is one of the main *garbharakshini* drug, and is a boon to the *garbhinis*, used several years at AVS.

4.Constipation :- This mainly due to lack of water intake, fibre diet, pressure symptoms, and prolonged sitting or standing. Kalyanaka gulam is one such safe drug used for constipation, instead of strong laxatives which are harmful during pregnancy. Mahadhanwantaram gulika may be used for bloating/ gaseous troubles.

5.Piles :- Constipation where it is more common and is not addressed, may lead to piles, in the bleeding form or otherwise. Preventive and lifestyle changes are more welcomed than strong laxatives, like sitz bath, fibrous foods etc. Pilocid gel for external application, kalyanaka gulam as mild laxative, and other carminatives may help.

6.Fissures :- Eating very spicy, oily and non-fibrous foods has to be corrected. Sitz bath, topical applicants may be used. Satadhouta ghritam for local application, carminatives like Mahadhanwantaram gulika, dhanwantaram gulika, etc. helps.

7.Low back ache :- This very common in 2nd and 3rd trimesters. Dhanwantaram oil application, Dhanwantaram cream, bala tailam, etc. may be just applied, followed by warm shower. Also correct postures need to be followed.

8.Varicose vein :-Lifestyle changes like pillow below the feet, avoiding long sitting or standing, gentle upward massage on legs, gentle exercises may be practised. Oils like Valiya sahacharadi thailam, Prabhanjanavimardanam, etc. may be used.

9.Indigestion :- This is very common during pregnancy. Ashtachurnam used along with buttermilk is beneficial.

10.Cough :- Cough may become difficult at times during pregnancy, especially during allergic cough. Sitopaladi churnam, Dasamula rasayanam, Dasamula katuthryadi kwatham tablet etc. helps.

11.Anorexia :- Shadangam churnam steeped in water helps.

12.Fever :- In any trimester, the cause needs to be ruled out. Shadangam kashyam or churnam, proper hydration and diet helps.

13.Mutrakrichhra :- urinary tract infection is common in the 1st trimester. *Gokshura* & *Bala paneeyam* helps, apart from dietary and lifestyle changes.

14.Jaundice :-Vasaguluchyadi kashayam, guluchyadi kwatham, etc. helps, along with dietary changes.

15.Kikkisa :- It is Striae gravidarum or the linear striations on skin. Several paste, churnam and oils are recommented for it. Nalpamaradi kera thailam, Lakshadi kera tailam, panchavalkadi kera tailam, etc. are helpful.

16.Oligohydramnios :- Less amniotic fluid is due to various causes including maternal causes like anemia etc. Apart from medicated milk with *Yashtimadhu*, *bala*, *satavari*, etc., *ksheeravasti* (enema prepared with milk and ghee) etc are also given in last trimester. Even cardamom infused coconut water has good results.

17.Polyhydramnios :- Digestants like Ashtachurnam, Hinguvachaadi, etc. and mild diuretics like gokshura and punarnava are used. Nayopayam kashayam and Bhadradi kwatham tab are helpful.

18.IUGR :- Intrauterine growth restriction has to be monitored carefully. Medicated milk made with roots of *Yashti*(*Glycyrrhiza glabra*), Kashmarya(*Gmelina arborea*) and Bala(*Sida cordifolia*) is found to be helpful. Vidaryadi ghritham, Dadimadi ghritham, etc. are also useful, along with changes in diet and lifestyle.

19.Gestational Diabetes :- Gestational diabetes has to be monitored carefully. Sudden fluctuations in sugar levels is the risk factor. Having a diabetic diet and lifestyle will surely

help to control and maintain. *Haridra*, *Amalaki*, *Vilwa* and *Jambu* may be used judiciously. But it is important to attend to the modern way of management to prevent untoward incidents.

20.Gestational Hypertension :-gestational hypertension has to be monitored carefully. Nayopayam kashayam, Punarnavadi kashayam, Mahadhanwantaram gulika, etc. may help. But it is important to attend to the modern way of management to prevent untoward incidents.

21.Antepartum haemorrhage :- APH is a nightmare in pregnancy, and needs due careful monitoring. This is mostly seen in placenta praevia or abruption placenta condition, where it may be concealed haemorrhage too. Giving complete bed rest, *raktapitta shamana*, *stambhaka* drugs like *Vasa*, *Guluchi*, etc. and medical management would be necessary.

22.*Jataharinis* :- Sometimes unknown causes are seen for the ill health of *garbhinis* and *garbha*. Acharya Kashyapa has given descriptions of *jataharinis* or afflictions, capable of even destroying the foetus. Unrighteous acts or immoral behavior is said to be the cause. Divine eye and religious virtues are only the remedies.

Acharya Vagbhata has a clear mentioning that *Garbhinis* are like a pot filled with oil, with chances of spilling on slight exertion, hence they should be dealt gently and carefully. High risk pregnancy cases should also be assessed.

Notable Quotes

उपचारः प्रियहितैः भर्त्रा भृत्यैश्च गर्भधृक्।
नवनीतघृतक्षीरैः सदा चैनामुपाचरेत्।।

The woman, who has conceived should be looked after affectionately by her husband and attendants, supplied with things she likes and which are good for health, nourished with more of butter, ghee and milk always

(Ashtangahridayam Sareerasthanam)

Medicinal plants in Antenatal & Postnatal care



Dr. Neetha Surendran M.S.(Ay) PhD
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Ayurveda gives prime importance to maternal and child health. The care of a woman during pregnancy (*Garbhini Paricharya*) and after delivery (*Sutika Paricharya*) is described in classical texts like Charaka Samhita, Sushruta Samhita, and Ashtangahridaya. These texts emphasize that proper care during these stages ensures the birth of a healthy child and preserves the long-term health of the mother. Ayurvedic drugs used during pregnancy are mainly *brimhana* (nourishing), *garbhasthapaka* (fetus-supporting) and *rasayana* (rejuvenating). Postnatal drugs are mainly Vata-shamaka, balya (strengthening) and *stanyajanana* (lactation-promoting).The monthly regimen (*Masanumasika paricharya*) described in Ayurveda ensures stage-wise nutritional and medicinal support according to fetal development.

Bala (*Sida cordifolia*, *Sida retusa*, *sida* sp.)





© Flora of Zimbabwe

Bala (Sida cordifolia and related species like Sida retusa and Sida rhombifolia) is a revered herb in Ayurveda, classified as a *Balya* (strength-promoting) and *Brumhaniya* (nourishing) drug. It is traditionally administered in antenatal and postnatal care through specific methods such as medicated milk (*ksheerapaka*), decoctions (kwatha) or powders (churna) mixed with warm

milk or ghee. Classical formulations like Bala Taila (used externally for massage to relieve stress, swelling, and vata disorders), Bala Ghrita (taken internally to nourish reproductive tissues and support fetal growth) and Bala Kwatha (used for generalized weakness and back pain) are central to its application. Research indicates that *Sida cordifolia* exhibits a uterine tonic effect, suggesting it tones uterine muscles without stimulating contractions, based on pre-clinical studies. Animal studies have demonstrated potential galactagogue activity, showing increased prolactin levels and milk production, likely due to its phytoestrogenic constituents. The herb also possesses confirmed anti-inflammatory and analgesic properties, validating its traditional topical use for pregnancy-related joint pain and swelling. Its nutrient profile is rich in iron, calcium and essential amino acids, which may help combat maternal fatigue and support fetal skeletal development. A toxicological evaluation of Sida cordifolia root extract in animal models reported no maternal or developmental toxicity at therapeutic doses, supporting its historical reputation as a safe herb during pregnancy when used appropriately.



Lakshmana

(Ipomoea sepiaria)

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Ipomoea sepiaria, a member of the Convolvulaceae family, is an important Ayurvedic medicinal plant used in women's health, especially in antenatal and postnatal care. It is included under the *Garbhasthapana gana*, indicating its role in stabilizing and sustaining pregnancy. Traditionally, it is recommended during the second month of gestation and is considered suitable for *Pumsavana karma* to support healthy fetal development. Additionally, its documented antioxidant, analgesic, and anti-inflammatory properties provide a modern pharmacological basis for its traditional use in preventing threatened abortion, reducing discomfort and promoting overall gestational well-being. Flavonoids and phenolic compounds help reduce oxidative stress during early pregnancy, protecting maternal tissues and supporting fetal development. Steroidal compounds and flavonoids help control inflammatory responses, which may reduce the risk of complications like threatened abortion.



Gokshura

(Tribulus terrestris)

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By the end of the second trimester, many pregnant women experience swelling of the feet and fluid retention, mainly due to the increasing size of the uterus exerting pressure on the intestines and urinary bladder. Gokshura is known for its diuretic action, which helps in reducing edema and may assist in preventing pregnancy-related hypertension and toxemic conditions. Major bioactive compounds include steroidal saponins (especially protodioscin, dioscin), flavonoids (kaempferol, quercetin), alkaloids, tannins, glycosides, and phytosterols. The steroidal saponins are considered responsible for its diuretic, adaptogenic, and reproductive health–supporting activities. Experimental and clinical studies suggest that Gokshura exhibits significant diuretic activity, helping reduce edema and urinary retention—common concerns in late pregnancy. Some studies indicate mild antihypertensive and nephroprotective effects, which may be beneficial in preventing pregnancy-induced hypertension under medical supervision. Its anti-inflammatory and antioxidant properties support maternal tissue health.According to classical Ayurvedic descriptions, Gokshura possesses Madhura Rasa and Madhura Vipaka, has Sheeta Virya (cool potency) and exhibits Vata–Pitta Shamana as well as Garbhasthapana (supportive to the maintenance of pregnancy) properties.



Sathavari
(Asparagus racemose)
© Agroshopy.com

Asparagus racemosus, commonly known as Shatavari or wild asparagus, is a traditional Ayurvedic herb widely used as a galactagogue. It is officially recognized in Ayurvedic pharmacopeia for supporting lactation. The roots contain steroidal saponins, along with folic acid, vitamins A, C, and K, phytoestrogens, and tryptophan. Phytoestrogens exhibit estrogen-like activity, stimulating prolactin production by enhancing prolactin-secreting cells and reducing dopamine inhibition. Tryptophan may further promote prolactin release, thereby increasing milk production.Preclinical animal studies have demonstrated that Shatavari root extract elevates serum prolactin levels, enhances milk yield, and improves offspring growth parameters. Additional immunomodulatory and anti-inflammatory properties may contribute to improved maternal recovery and overall postpartum well-being. From an Ayurvedic perspective, Shatavari possesses madhura rasa, madhura vipaka and sheeta virya, conferring balya, rasayana, jivaniya and brimhana effects.Clinical observations indicate improved milk volume, maternal confidence and infant weight gain with supplementation.Overall, Shatavari root extract appears to be a safe, natural galactagogue with potential benefits for lactation and maternal health. However, further robust clinical trials are essential to confirm efficacy, safety and broader fertility applications.



Vidari *(Pueraria tuberosa)*
©Planetayurveda.com

Vidari is a renowned *Brimhana* and *Rasayana* drug in Ayurveda, widely used in antenatal (Garbhini Paricharya) and postnatal (Sutika Paricharya) care. With *Madhura rasa*, *Guru–Snigdha guna*, *Sheeta veerya* and *Madhura vipaka*, it acts as *Balya*, *Vrishya*, and *Stanyajanana*, promoting maternal strength, fetal nourishment, and lactation.

Phytochemical studies confirm the presence of carbohydrates, flavonoids, steroids, glycosides and the key compound puerarin, which exhibit nutritive, antioxidant and endocrine-modulatory effects. Experimental research shows hormonal regulation (FSH, testosterone and prolactin), improved reproductive tissue health, enhanced milk secretion and no significant toxicity.Vidari supports maternal nourishment, hormonal balance and lactation, validating its classical Ayurvedic use in comprehensive maternal care.



Yasank
(Azima tetracantha)
© Powo.science.kew.org

Yasank is traditionally valued in postpartum (*Sutika*) care for its *Vata*-pacifying, anti-inflammatory, and restorative actions. After delivery, women commonly experience aggravated *Vata*, musculoskeletal pain, uterine weakness, and digestive disturbances; preparations of yasank like *ilakkurukku* are used to alleviate body ache, lower abdominal discomfort and back pain while supporting uterine involution and proper lochial discharge. Its carminative and digestive properties help improve appetite, reduce bloating and enhance metabolic recovery, thereby indirectly supporting strength and lactation. Phytochemical studies report the presence of alkaloids, flavonoids, saponins, tannins, terpenoids, steroids, glycosides and phenolic compounds, which contribute to its anti-inflammatory, analgesic, antioxidant and antimicrobial activities. These bioactive constituents may promote tissue healing, reduce

oxidative stress and protect against postpartum infections. Traditionally administered as decoctions, powders or medicated oils under professional guidance, Azima tetracantha serves as a supportive herb in restoring maternal vitality and facilitating physiological recovery after childbirth.

In conclusion, Ayurveda offers a holistic and stage-wise framework for maternal care through *Garbhini Paricharya, Sutika Paricharya, and Masanumasika Paricharya*, ensuring systematic support for both mother and fetus. Classical texts such as Charaka Samhita, Sushruta Samhita and Ashtanga Hridaya emphasize nourishment, stability of pregnancy and postnatal rejuvenation through appropriately selected *Brimhana*, *Garbhasthapaka*, *Rasayana*, *Vata-shamaka*, *Balya* and *Stanyajanana* drugs. By integrating dietary regimens, lifestyle measures and carefully selected herbal formulations, Ayurveda ensures safe pregnancy, healthy fetal development, smooth postpartum recovery and long-term well-being of both mother and child.

Feed Back/ Letter to editor

Sir,
Gone through the copy of Vaidyabandu with special reference to Eye diseases. Articles were good especially insights given by Dr. Shanthakumari Ma'am and Dr. Devikrishnan. Appreciate Kottakkal Publication division in putting effort to publish such valuable articles.

Thank you for the opportunity.

Dr. P.A. Sudhir Menon
Principal
Sri Sairam Ayurveda Medical College & Research Centre, Chennai



Lakshadi Keratailam

Vilwadi Leham



Nirnaya – Diagnostic tips

Prenatal and Postnatal Investigations



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Perinatal care is a continuous, stage-wise diagnostic process that begins early in pregnancy and extends into the postpartum period. Prenatal and postnatal investigations function as structured surveillance tools to monitor maternal physiological adaptation, fetal development, neonatal transition and long-term maternal recovery. Because pregnancy produces major cardiovascular, hematological, endocrine, immunological, and metabolic changes, trimester-specific reference values are essential to distinguish normal adaptation from pathology. The first trimester establishes baseline health and genetic risk, the second focuses on structural and metabolic assessment, and the third emphasizes placental function and fetal surveillance. After birth, investigations evaluate neonatal transition, screen for metabolic and genetic disorders, monitor maternal stabilization in the puerperium and assess long-term cardiometabolic and autoimmune risks. Together, these staged evaluations form a comprehensive diagnostic range aimed at early risk detection, complication prevention, timely intervention and optimal outcomes for both mother and child.

Investigation / Test name	Clinical significance
First Trimester	
Indirect Coombs Test (Antibody Screen)	Detects maternal alloantibodies in Rh-negative mothers; prevents hemolytic disease of fetus.
Rubella IgG Antibody	Determines immunity; prevents congenital rubella syndrome.
Varicella IgG (if non-immune history)	Identifies susceptibility to congenital varicella.
Hepatitis C Virus (HCV) Serology	Detects vertical transmission risk.
VDRL / RPR (Syphilis Screening)	Prevents congenital syphilis.
HIV-1 & HIV-2 Serology	Enables early antiretroviral prophylaxis.
Thyroid Stimulating Hormone (TSH ± FT4)	Screens for maternal hypothyroidism affecting fetal neurodevelopment.
HbA1c (High-risk women)	Detects pre-existing overt diabetes.
Hemoglobinopathy Screening (Thalassemia / Sickle Cell)	Carrier detection; important in high-prevalence populations.
Early Dating / Viability Ultrasound	Confirms gestational age and fetal cardiac activity.
Urine Routine Examination	Detects glycosuria and proteinuria during routine visits.
Quantitative Beta-hCG	Confirms viable intrauterine pregnancy; tracked serially to rule out ectopic gestation.
Complete Blood Count (First Trimester)	Establishes baseline for physiological hemodilution; detects subclinical anemia.
Blood Type and RhD Screen	Identifies risk for rhesus alloimmunization and hemolytic
	disease.
Infectious Disease Serology	Prevents vertical transmission of pathogens; dictates intrapartum prophylaxis.
Urine Culture	Screens for asymptomatic bacteriuria to prevent pyelonephritis and preterm labor.
25-Hydroxyvitamin D	Crucial for fetal skeletal mineralization and immune modulation.
Vitamin B12	Essential for fetal neurodevelopment and prevention of neural tube defects.
Noninvasive Prenatal Testing (NIPT / cfDNA)	Screens for chromosomal aneuploidies (T21, T18, T13) and specific microdeletions.
Nuchal Translucency (NT) Scan	Sonographic measurement of fluid at the posterior fetal neck; marker for aneuploidy and cardiac defects.
Chorionic Villus Sampling (CVS)	Invasive diagnostic genetic testing obtained via placental biopsy.
Second Trimester	
Fetal Anomaly Scan (Mid-trimester Ultrasound)	Detailed structural evaluation of fetal anatomy to detect congenital anomalies, neural tube defects, and facial clefts.
Triple Marker / Quadruple Marker Test	Biochemical screening for chromosomal aneuploidy and neural tube defects when NIPT is not used.
Oral Glucose Tolerance Test (OGTT)	Universal screening for gestational diabetes mellitus; assesses maternal physiological insulin resistance.
Second Trimester Complete Blood Count	Ongoing monitoring of maternal hemodilution and red cell indices; identifies the base of physiological anemia.
Amniocentesis	Invasive diagnostic genetic testing analyzing desquamated fetal cells in the amniotic fluid.
Fetal Echocardiography	Highly specialized ultrasonic evaluation of the fetal heart structure and function.
Third Trimester	
Non-Stress Test (NST)	Evaluates fetal heart rate reactivity and well-being.
Amniotic Fluid Index (AFI)	Assesses amniotic fluid volume; detects oligohydramnios or polyhydramnios.
Biophysical Profile (BPP)	Assesses fetal central nervous system oxygenation and autonomic regulation.
Umbilical Artery (UA) Doppler	Evaluates resistance in the fetoplacental circulation; high resistance indicates severe placental insufficiency.
Middle Cerebral Artery (MCA) Doppler	Assesses fetal cerebral vasodilation; indicative of the hypoxia-induced brain-sparing reflex.
Cerebroplacental Ratio (CPR)	Mathematical ratio of MCA PI to UA PI; highly sensitive marker for fetal hypoxemia and acidemia.
sFlt-1 / PlGF Ratio	Predicts the onset of severe preeclampsia by quantifying maternal angiogenic imbalance and endothelial injury.

Group B Streptococcus (GBS) Culture	Identifies maternal vaginal/rectal bacterial colonization to prevent early-onset neonatal sepsis and pneumonia.
Third trimester complete blood count	Final evaluation of maternal hematological reserves prior to anticipated surgical or physiological blood loss.
Immediate Neonatal Period	
Direct Coombs Test (if indicated)	Detects immune-mediated hemolysis in newborn.
Pulse Oximetry Screening	Identifies critical congenital heart disease (CCHD).
Newborn Hearing Screening (OAE / ABR)	Detects early auditory impairment.
Standardized Newborn Heel-Prick Blood Spot Panel	Consolidated metabolic screening protocol.
Cord Blood Gases	Retrospective assessment of intrapartum hypoxia, placental reserve, and fetal acid-base balance.
Neonatal Complete Blood Count (CBC)	Baseline hematological assessment; differentiates expected physiologic leukocytosis from congenital sepsis.
Neonatal Basic Metabolic Panel	Evaluates renal adaptation, electrolyte shifts, and hydration status in the immediate transitional period.
Cerebrospinal Fluid (CSF) Analysis	Conducted during a sepsis workup to rule out neonatal meningitis.
Neonatal Coagulation Profile	Assesses synthetic liver function and risk of hemorrhagic disease of the newborn.
Advanced Neonatal Screening	
Congenital Hypothyroidism Screen	Detects failure of thyroid organogenesis to prevent profound intellectual disability.
Congenital Adrenal Hyperplasia (CAH) Screen	Identifies 21-hydroxylase deficiency, preventing lethal adrenal salt-wasting crises.
Cystic Fibrosis (CF) Screen	Detects pancreatic ductal obstruction and exocrine failure in utero.
Classical Galactosemia Screen	Identifies profound inability to metabolize galactose; prevents liver failure and sepsis.
Severe Combined Immunodeficienc	Quantifies thymic function to detect profound absence of cellular
y (SCID)	T-cell immunity.
Spinal Muscular Atrophy (SMA) Screen	Detects motor neuron degeneration, allowing for early gene therapy administration.
Maple Syrup Urine Disease (MSUD) Screen	Detects branched-chain amino acid defects to prevent toxic encephalopathy.
Fatty Acid Oxidation Disorders Screen	Identifies defects in energy metabolism (e.g., MCAD, VLCAD) utilizing acylcarnitines.
Neonatal Hyperbilirubine mia Assay (TSB)	Quantifies unconjugated bilirubin to prevent blood-brain barrier penetration and kernicterus.
Developmental Dysplasia of the Hip (DDH) Ultrasound	Objective sonographic quantification of acetabular morphology and femoral head stability.
Immediate Puerperium	
Postpartum Hemoglobin / Hematocrit	Diagnoses the magnitude of peripartum blood loss and dictates the need for blood transfusions or iron therapy.
Serum Ferritin / Iron Studies	Confirms iron deficiency beyond hemoglobin measurement.
Urine Protein Quantification (if hypertensive)	Evaluates persistent proteinuria postpartum.
Maternal Blood Pressure Monitoring	Identifies the onset or persistence of hypertensive disorders of pregnancy.
Postpartum Transvaginal Ultrasound (Pelvic Scan)	Detects Retained Products of Conception (RPOC) to prevent secondary hemorrhage and endometritis.
Late Postpartum Follow-up	
Lipid Profile	Reassesses cardiometabolic risk, especially after Gestational Diabetes Mellitus or preeclampsia.
Pap Smear (if due)	Cervical cancer screening opportunity.
Edinburgh Postnatal Depression Scale (EPDS)	Standardized screening tool for postpartum depression.
Postpartum Oral Glucose Tolerance Test (OGTT) / Fasting Glucose	Identifies persistence of impaired glucose metabolism in women with history of Gestational Diabetes.
Postpartum Thyroid-Stimulating Hormone (TSH)	Primary screening tool for Postpartum Thyroiditis.
Free Thyroxine (FT4)	Confirms overt postpartum hypothyroidism when TSH is elevated.
Thyroid Peroxidase Antibodies (TPOAb)	Prognostic marker quantifying autoimmune thyroid destruction.
Routine 6-Week Physical and Mental Health Assessment	Ensures physical recovery and screens for postpartum depression.

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