



Retrospective Clinical Case Analysis on Janmabala Pravrutta Vyadhis w.s.r to Nidana

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Abstract: Ayurveda is an ancient system of medicine, along with preventive and curative aspects of health of an individual. It plays an enormous emphasis on the importance of caring for the mother before, during, and after pregnancy. For a women, reproductive period has great importance in her life. The fetus, in the intra-uterine life, is in constant relation with the mother for both development and nourishment. Garbha vikriti is one of the most stressful aspects of pregnancy, as it results in the birth of a deformed and alive infant. It is caused by innate or acquired factors such as chromosomal defects (beejabhaga vikriti), drugs during pregnancy, infections, and so on. There are various types of congenital anomalies which may arise due to various factors such as genetic, environmental and others. Causes of congenital anomalies or diseases are associated with lack of care, awareness, supervision and prevention through diet, mode of life style habits and mental health. By following the various principles mentioned in Ayurveda i.e. Dietary regimen related to Garbhini Paricharya, avoiding Garbhopaghatakara Bhava and Tridosha vitiating diet during pregnancy can avoid various anomalies and diseases during pregnancy.

Key Words: Janmabala Pravrutta Vyadhi, Garbha vikriti, Garbhopaghatakara Bhavas, Ayurveda.

1. INTRODUCTION:

Ayurveda is accepted as an oldest written medical system and it came into existence at least five thousand years before Christ.¹ Though the present understanding of human genetics owes much to the work of Gregor Mendel but the first scientific theme on genetics had been emphasized in ancient Indian literatures.² Ayurveda is enriched with scattered references regarding this concept, commencing from abnormalities of chromosome, genetic materials as well as abnormality due to environmental causes. Various congenital abnormalities due to morbid condition of Beeja, Beejabhaga and Beejabhagaavayava are highlights of abnormalities caused by genetics and chromosomal factors.³ Among the various causative factors mentioned by acharyas, Adibala and Janmabala comes under this platform.⁴

2. LITERATURE REVIEW:

According to Acharya Sushruta :⁵

- Adibala Pravrutta – 1) Matruja 2) Pitruja
- Janmabala Pravrutta – 1) Rasakrita 2) Douhridavamana

According to Acharya Vagbatta:⁶

- Sahaja - 1) Matruja 2) Pitruja
- Garbaja - 1) Annarasaja 2) Douhridavamana



Causative Factors:

As per our ayurveda literatures Garbha Vikritis are caused by Beeja(Deformity in sperm or ovum), Atmakarma (Defects due to deeds of previous life), Kala(Time factor/ abnormality of Ritukaala), Ashaya(Deformity of uterus) Dushti along with Matur Aahara Vihara (Diet and Behaviour) Dushti.⁷

The Beeja can be affected by a variety of dietary regimens for pregnant women. If her entire Beeja is harmed, she will not be able to conceive, but if only a tiny section is afflicted, the child will be born with abnormalities of the corresponding mother body part. As per classics Beeja and Beeja-Bhagavayava(seed part). Seed-parts are portions of the seed that are involved in the development of various organs (chromosomes) that correspond to each organ and result in the birth of an individual comprised of organs unique to that species.⁸

Atmakarma can be considered as Deeds of previous life. The union of Shukra and Shonita along with Atma lead to the formation of Garbha. Therefore its association with body starts before birth of human being. Depending upon his good / sinful act of past time, his physique and mind develops. Any diseases of unknown etiology can be compared with this.⁹

Kaala dushti can be understood like Garbhadana in improper age. Effect of conception in Rutukala on fetus. Time of Prasava (full term / preterm / post term) and time of bearing down effort (Pravahana) are described in classics with their effect on the future child.¹⁰

Aashaya dushti are understood as defect in reproductive system. Intra uterine infection may lead to infection to the fetus in utero. Infection during prenatal period found hazardous to the growing fetus.¹¹

Matuaahara Vihaara dushti, as the fetus is completely dependent on the mother, her food and other activities throughout pregnancy may have an impact on the developing fetus. There is a detailed explanation on pregnant women's dietary habits like excessive intake of Madhura Rasa aahara leads to mutravikaras in fetus, Amla Rasa aahara leads to raktapitta, Twak vikaar, Lavana Rasa aahara leads to disorders of skin and hair, Tikta rasa aahara leads to reproductive disorders, Kashaya rasa aahara leads to bowel disorders, Katu Rasa aahara leads to emaciation in growing fetus.^{12,13}

There is also the a concept like Douhridavamana Janita Vikritis, Fetus may show abnormalities due to icchaaprapti like Kubja (Humpbacked), Khanja (Crooked legged), Kuni (Crooked armed), Jada (Mentally retarded), Vamana (Short stature), Vikritaksha (Disshaped eye), Anaksha (Absent eye)¹⁴

Garbhpopagatakara Bhavas- Different classics of ayurveda have explained certain factors which should not be done during pregnancy, acharya charaka describes like use of excessive ushna and tikshna substances, Avoiding daruna chesta, and not wearing Raktavarna vastra for protection from the effect of gods, demons and their followers, should not use intoxicating substance, madya and mamsa and advised to give up the things contrary to indriyas.¹⁵

Preventive Aspects:

- Goal of prevention is to reduce the incidence of congenital anomalies through removal of causative factors.
- Atulyagotriya Abhyasa.¹⁶
- Following Proper age for Vivaha.¹⁷
- Undergoing Proper Shodhana before Conception.¹⁸
- Undergoing Pumsavana Karma.¹⁹
- Following proper Gharbhinicharya.²⁰
- Celebrating Simantonayana Samskara.²¹

3. Case Discussion:

Case - 1

- A male child of 2 years delivered through NCM parents gives history that child is born through LSCS with birth weight 2.8kg which cried after the stimulation now c/o loss of sensation and strength in B/L lower limbs which was noticed 1 month after the birth.
- On DOL -2 baby undergone surgery for meningocele
- Then gradually started to notice with urine and stools incontinence noticed by parents at the age of 1 year of age.



Antenatal History:

- At 5th month scan ,the reports s/o possibility of arcnoid chiari malformation(all four limbs showed adequate movements)
- later in repeated scan @28 weeks showed lump s/o sacral spina bifida with meningocele and hydrocephalus.
- last report of 33 weeks showed NT defect with meningocele and posterior cranial fossa is small cerebellum hypoplastic.
- **Note-She was not on folic acid supplements till 5th month of the pregnancy**

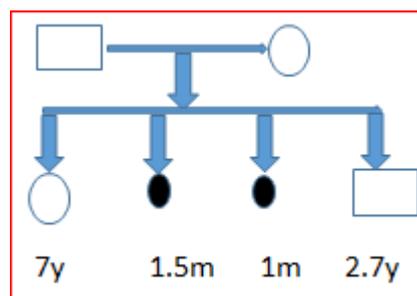
Interpretation on Causative factor for case-1:

Garbha vikriti Nidana	Maturahara-vihara
Garbhasambhava Samagri	Beeja Dushti
Shadbavas	Pitruja Bhava
Garbhadana Vikruti	Maternal age- 38
Even after prenatal diagnosis- No therapeutic abortion done	

Case -2

- A 4th born male child of 2.7 years delivered through NCM parents gives history that child is born through LSCS with birth weight 2.7kg BCIM now c/o No eye contact, no speech, not obeying commands and not mingling with other kids, Noticed at the age of 2.5yrs

Maternal History : 28y when she conceived 1st child, delivered PT(34W) due to p/v leak,
 Last baby conceived at 34yrs, Pregnancy sustaining medications taken.



Interpretation on Causative factor for case-2:

Garbha vikruti Nidana	Atmakarma
Garbhasambhava Samagri	Ritu
Shadbavas	Atmaja Bhava
Garbhadana Vikruti	Maternal age- 34
Even after multiple abortion no proper treatments taken before conception.	

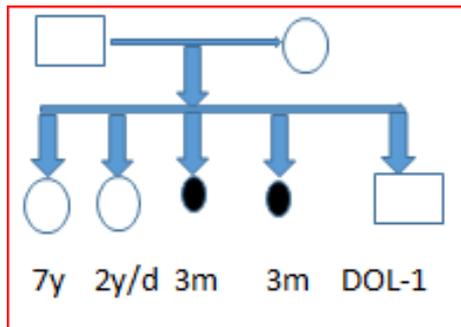


Case- 3

- A 5th born male child of DOL-1, delivered through Consanguineous married parents through LSCS with birth weight 2.5kg BCIAB(Meconium Aspiration) / CTEV was noted at birth with syndromic features.

Maternal History: Last baby conceived at 35yrs.

Note: Husband was chronic Smoker, Alcoholic addict, Mother has not undergone any anomaly scan, she has nutritional insufficiency.



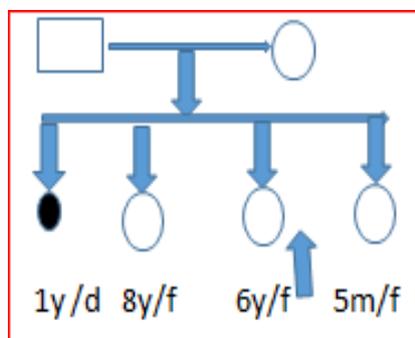
Interpretation on Causative factor for case-3:

Garbha vikruti Nidana	Maturaahara, vihara & Kaala Dushti
Garbhasambhava Samagri	Kshetra, Beeja
Shadbavas	Pitruja
Garbhadana Vikruti	Maternal age- 35
Even after multiple abortion no proper Investigations/ treatments taken before conception.	

Case -4

A 6 years old female child 3rd born, delivered through Consanguineous married parents through NVD with birth weight 2.5kg BCIAB/no any obvious congenital anomalies observed at birth. Now c/o hearing loss, deformity of lower limb since 2 yrs.

Note: Insufficient breast feeding during infancy.



Interpretation on Causative factor for case-4:

Garbha vikruti Nidana	Beeja Dushti, Maturaahara vihara Dusti
Garbhasambhava Samagri	Rasakrita, Beeja Dusti



Shadbavas	Rasa
Garbhadana Vikruti	Maternal age- 34
No proper preconception and Antenatal Care was undergone.	

4. DISCUSSION:

As per our Samhitas Garbha is generated by the union of shukra, shonita and jeeva, which grows up with the help of nutrients provided by the mother's aahara rasa during the prenatal period. Garbha samagri(Ritu, Kshetra, Ambu, and Beeja), shadhavas, Garbhiniparicharya, and other supplements are required for garbha development in addition to shukra and shonita. These concepts, according to acharyas, should be taken simultaneously. If any of these components are missing, Garbha may become complicated, or Garbha may not form at all.

The qualities of "Shudha Shukra" and "Shudha Artava" have been described in length by acharya. If Shukra and Artava have the attributes described by Acharyas and unite at a specific " Ritu and Kshetra", the offspring will be healthy and possess all the necessary characteristics. If Bija, Bijabhaga, Bijabhagavayava, Ritu, Kshetra are distorted, the fetus will be deformed in size, shape, and behaviour.

All of the "Garbhajvikritis" stated in ayurvedic books has comprehensive evidence. Many prenatal malformations resembling odd shape-serpant, scorpion and gurad like fetus are discussed in ayurvedic writings. The foetal malformations recorded in Ayurvedic writings include several types of Napumska that are unable to perform sexual activity properly, as well as various types of monsters such as "Nagaudara," "Upvishtaka," "Lina Garbha, and others. The importance of Garbhaj vikriti in modern life is the focus of this study work. All acharyas believe that Aadibhala Pravrita vikriti and Janmabala Pravrita Vrikriti are synonymous with genotype and phenotypic abnormalities.

5. CONCLUSION :

There are various types of congenital anomalies which may arise due to factors such as, genetic, environment and others. Ayurveda suggest that the prevalence of congenital disorders are controlled by normalcy in Shad Garbhakarabavas & Garbha Sambhava Samagri which play significant role in the development of normal fetus. The health of the fetus is emphasized over diet and lifestyle of parent, balances of Vayu and normal Beeja, Beejabhaga and Beejabhagaavayava.

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