

## AN AYURVEDIC APPROACH TO INDUCE NORMAL LABOUR - A CASE STUDY

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## ABSTRACT

Labour is a series of process that takes place during the expulsion of the foetus. Successful labour depends on the factors like maternal health, proper uterine contractions, proper nutrition to the foetus and pelvic adequacy.<sup>1</sup> Compared to surgery, normal vaginal delivery is always beneficial for the mother and foetus to avoid pre, intra and postnatal surgical complications<sup>2</sup>. In *Ayurveda*, *Acharyas* were explained *Masanumashik Paricharya* for the well-being of both mother and the fetus. In the process of labour, *Apanavata* plays an important role i.e. *Garbha nishkramana Kriya*. *Snehana* is particularly meant for *Apanavata anulomana* thereby promoting normal labour.<sup>3</sup> So in this case study we are trying to evaluate the effect of *Gandharvahastadi eranda taila* to reduce the duration of the first stage of labour and how it avoids postnatal complications.

**Keywords:** *Gandharvahasta eranda taila*, Normal labour, *Vata anulomana*

## INTRODUCTION

Motherhood is the essence of being a woman. The segment of pregnancy and the phase of giving birth to a baby are the most, critical and complex times of a woman's life. This stage starts from the

commencement of conceiving or when fertility occurs. Pregnancy is a state where a woman not only requires a proper dietary regimen but also measures to prepare herself physically and psychologically for this

natural process. In *Ayurveda* proposes *Apanavata* (force responsible for downward movements) is responsible for the expulsion of the fetus.<sup>4</sup> Normal labour depends mainly upon the natural function of these two factors). *Acharya Charaka* described “*Garbhini Paricharya*” in which there is an explanation of *Ahara*, *Vihara* and *Vichara* is mentioned which were to be followed by a pregnant woman during pregnancy. So that she will be able to deliver a child with good health with ease.<sup>5</sup> In *Shushrut Samhita* also illustrate the procedure of *Prasava* and state that as a mature fruit naturally isolate from the stalk itself on the right course of time, in the same way, *Garbha* in its suitable time, also separate from its *Nadi Nibandha* (Umbilical cord) and progress for *Prasava*.<sup>7</sup> For *Sukha Prasava* i.e. uncomplicated and normal delivery *Acharya Charaka* has mentioned the use of *snehana dravyas* from the beginning of the ninth month of pregnancy. *Gandharvahasta eranda taila* is known as

the best *mrudu virechana dravya* in *Ayurveda*. It is having the properties like *Rasayana*, *Vayasthapana*, *Srotoshodhana*, *Yoni sukra vishodhana*. It acts as *Vatanulomana* by the above-said qualities. Among the three *doshas Vata* mainly *Apanavata* plays important role in *Prasava*. *Eranda* can be used as a labour stimulant in convectional and folk medicine. This case study scientifically incorporates the action and effect of *Gandharvahasta eranda taila* to promote normal labour without any maternal and foetal complications.

**CASE REPORT:**

27 years aged primigravida with her LMP-22/10/20 EDD-29/7/21 POG-39 weeks and with a single foetus with cephalic presentation and adequate pelvis who came to OPD of SDM Ayurveda Hospital, Udupi with complaints of hardening of the abdomen associated with low backache. She has no history of any major illness like DM, HTN, Thyroid dysfunction.

**DIAGNOSTIC ASSESSMENT:**

Vital data	
Blood pressure	100/60 mm of Hg
Pulse rate	70/minutes
Respiratory rate	20/minutes
Temperature	98 F
Height	160 cm
Weight	62 kg

Haematological report on 21/12/2020	
Blood group	A positive
HBsAg	Negative
HIV	Negative
VDRL	Nonreactive
TSH	2.6 micro-IU/ML
Free T4	0.87 ng/dl

Haematological report on 22/07/2021	
Hb	12.4 gm%
BT	2 minutes 15 seconds
CT	4 minutes 25 seconds
PLC	2.3 lakhs/cu mm
RBS	103 mg/dl

**USG findings on 08/07/2021**

Single foetus with the cephalic presentation, Foetal cardiac activity noted, FHR-148/min. Placenta-Anterior, Grade 2, Placenta os distance-normal  
 EFBW-3151 gm +/-15 %, AFI-9.2 cm  
 EGA by USG-36 weeks +/- 2.6 weeks, cervical length-3.5 cm

**SYSTEMIC EXAMINATION**

CNS- HMF Intact  
 CVS- S1 S2 Heard  
 RS-NVBS Heard  
 GIT-Soft, non-tender

**LOCAL EXAMINATION**

P/A-Uterus term, cephalic presentation, head engaged, FHS-146/minutes regular

**INTERVENTION**

DATE	MEDICINE	DOSE	NO OF TIMES	ANUPANA
20/07/21	<i>Gandharvahasta eranda</i>	15 ml	2	Milk
21/07/21	<i>Gandharvahasta eranda</i>	15 ml	2	Milk
22/07/21	<i>Gandharvahasta eranda</i>	15 ml	2	Milk

**DRUG REVIEW<sup>7</sup>**

**GANDHARVAHASTA ERANDA**

<i>Rasa</i>	<i>Madhura, Katu</i>
<i>Guna</i>	<i>Sookshma, Teekshna, Sara, Snigdha</i>
<i>Virya</i>	<i>Ushna</i>
<i>Vipaka</i>	<i>Madhura</i>
<i>Doshagnata</i>	<i>Vatakapha hara</i>
<i>Karma</i>	<i>Rasayana, Vayasthapana, Sroto shodhana, Yonisukra vishodhana</i>

*Charaka Samhita: Bhedaniya, Swedopaga, Angamarda-prashamana, Madhur skandhas*

*Sushruta Samhita: Vidarigandhadi, Adhobhaghara, Vata-Samshamana.*

It contains stable oil 45%, slimy substance, sugar, white juice and salt 10%, it contains 85-90 % of Ricinoleic acid, Oleic acid, Linoleic acid, Alpha Linoleic

acid, Stearic acid, Palmitic acid, Dihydroxystearic acid

**IMPORTANCE OF TAILA**

*Taila* is *Agryaushadha* for *Vatasamaka*. It is having *Nirvapana, Mridukara, Twachya, Ushnya* and *Vatakaphahara* properties.

**ASSESSMENT CRITERIA**

Progress of labour was assessed based on Bishop’s score & Partogram<sup>8</sup>

Bishop score	0	1	2	3
Cervical Dilatation	closed	1-2 cm	3-4 cm	5+
Cervical Effacement	< 30%	40-50%	60-70 %	80% +
Consistency of Cervix	firm	medium	soft	-
Position of The Cervix	posterior	middle	anterior	-
Head Station	-3	-2, -1	0	+2, +1

**BEFORE TREATMENT**

P/A-Uterus relaxed FHS, Regular 142/minutes

P/V-Cervix soft, Head engaged, os closed

**AFTER TREATMENT**

Time	Contractions	Foetal Heart sounds
At 4.45 pm	2/10 minutes/25-30 seconds	142/minutes
At 5.15 pm	3/10 minutes/30-35 seconds	146/minutes
At 5.45 pm	3/10 minutes/40-45 seconds	148/minutes
At 6.15 pm	4/10 minutes/45-50 seconds	134/minutes
At 6.30 pm	4/10 minutes/55-60 seconds	134/minutes

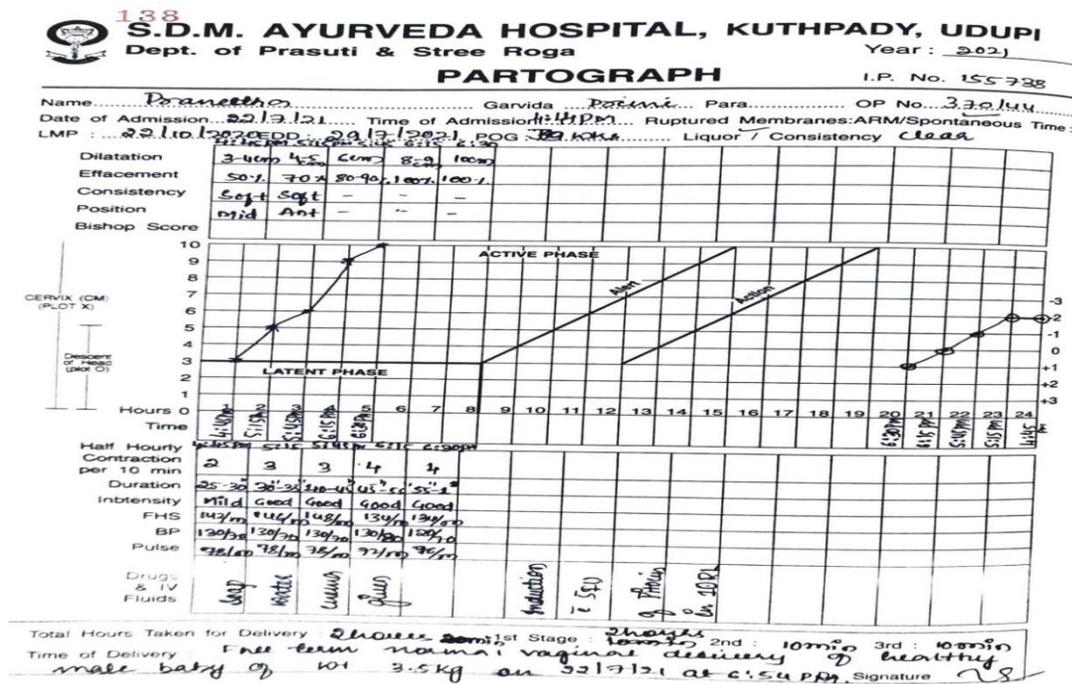
P/V EXAMINATION	At 4.45 pm	At 5.15 pm	At 5.45 pm	At 6 pm	At 6.30 pm
Cervical Dilatation	3-4 cm	4-5 cm	6 cm	8-9 cm	10 cm
Cervical Effacement	50%	70%	80-90%	100 %	100%
Consistency of Cervix	soft	soft	soft	soft	soft
Position of The Cervix	middle	anterior	-	-	-
Head Station	-2	-2	-1	0	+1
Bishop score	7	7	11	12	13

**RESULT**

The patient delivered FTND at 6.54 pm

The first stage of labour – 2 hours 20 minutes  
 The second stage of labour-10 minutes

A single live healthy male baby of 3.5 kg with a cephalic presentation on 22/7/21 at 6.54 pm



## DISCUSSION

Acharyas were mentioned *Masanumasik charya* for both the mother and fetal wellbeing. By following that regimen, it will help to the normalcy of *Vata* thereby promoting normal labour. The process of the mechanism of labour mainly depends on *Apanavata*. *Garbha nishkramana kriya*, *Akunchana prasarana* are considered to be the functions of *Apana vata* which can be considered as uterine contractions, relaxation and retraction. so, it has been referred to as '*Prasuti marutha*'. *Gandharvahastadi eranda taila* is having *Adhobhagahara*, *Vatanulomana Rasayana*, *Yoni vishodhana* properties. so, it provides strength to *mamsapesi* of *Garbhasaya* and *yonis* and also it helps reduce the labour pain by reducing the duration of the first stage of labour. The internal administration of eranda has a *Vatanulomana* effect and it helps to induce normal labour. These effects are mediated by Ricinoleic acid, which is a hydroxylated fatty acid. this helps to activate the prostaglandin EP3 and EP4 receptors. PGE2 and EP receptors have been implicated in the regulation of intestinal and uterine functions. The presence of EP3 in the pregnant uterus is activated by the Ricinoleic acid and thereby it induces uterine contractions. In this case study, 27 years old primigravida got delivered within 2 hours 20 minutes without any complications. Where it usually takes 12 to 14 hours for primigravida. So proper and safe administration of *Gandharvahasta eranda taila* will help to reduce the duration of the first stage of labour.

## CONCLUSION

*Gandharvahasta eranda taila*, one of the best *snehana dravya* is having the properties to induce normal labour. It helps to promote a fruitful outcome without causing any maternal and foetal complications. As said already labour is the essence of being a woman. Through *Ayurveda*, we should ensure the better life of a mother, thereby a better progeny.

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