

Volume 7, Issue 13, 569-573.

Case Study

ISSN 2277-7105

EFFECT OF AYURVED AND YOGA IN MANAGEMENT OF PRE – ECLAMPSIA- A CASE STUDY

*Dr. Jayshree Patil and Dr. Kiran Kalbhor

*HOD of Dept. of PTSR and PG Scholar. Dr. D Y Patil College of Ayurved & Research Center Pimpri Pune 18.

Article Received on 07 May 2018,

Revised on 27 May 2018, Accepted on 17 June 2018 DOI: 10.20959/wjpr201813-12704

*Corresponding Author Dr. Jayshree Patil HOD of Dept. of PTSR, Dr. D Y Patil College of Ayurved & Research Center Pimpri Pune 18.

ABSTRACT

Pre eclampsia is a clinical syndrome in a pregnancy showing – Hypertension, Proteinuria and oedema on leges. It has no know cause. But may prove fatal for mother and fetus. Many patients are seen in prasutitantra. If those patients are diagnosed early, treated in time, with integrated approach, most of the complications will not occur. There will be less mortility rate.

KEYWORDS: Pre – Eclampsia, PIH, Integrated approach.

INTRODUCTION

Historically specially 4000 years ago, people realized that there was

certain conditions with childbirth related death. One was haemorrhage & other was toxaemia. Ayurveda has not mentioned any disease like toxaemia. But Garbhini shoth & Garbhini Akshepak can be comparatively studied alongwith the treatments may seem giving results.

Pre –Eclampsia is a condition occurs after 20 weeks of pregnancy. It represents as- 1) Raisd Blood Pressure – Where diastolic pressure is > 90mm of Hg for 2 or more consecutive occarans.

2) Proteinuria

3) Oedema on legs.

Complications of Pre –Eclampsia include Eclampsia with convulsions, cerebral haemorrhage, renal cortical necrosis, oedema, HELLP syndrome in mother. And IUGR, Prematurity, IUD in baby.

The aim of the treatment is to reduce the complications, give supportive treatment along with allopathic medicine under supervision.

Objective of the Study: To assess the effect of ayurveda and yoga in the management of Pre – Eclampsia.

History and Diagnosis of Patients

Patient was 2^{nd} gravida married 2 yrs back. M\H - 4-5 D \ 28-30 D \ REGULAR O\H - 2^{nd} gravida with history of one abortion LMP - 8\6\2017 EDD- 15\3\2018

She represented complete clinical picture of pre – eclampsia when admitted in DR D Y PATIL AYURVEDIC HOSPITAL on 9th Jan 2018 with complaints of B|L pedal oedema, BP – 148\100 mmofHg, urine albumin ++, Hb – was 7.8 gm %, USG report was showing IUGR with AFI = 6cm, fetal wt – 1300gm.

She had been adviced emergency caeserian section by other consultants in town. But refusing it she got admitted in DR DY PATIL AYU. HOSPITAL.

The medicine on hypertension 1) tab. ALHADOPA 500mg BD

2) Tab. CALCIGARD 20mg BD was continued And other ayurvedic treatment were started for the patient

- 1) SARPAGANDHA VATI BD
- 2) BRAHMI VATI BD
- 3) DHAMASA+ JATAMASI + GOKSHUR FANT in eveing 6PM
- 4) PUNARNAVADI MANDUR 2 TDS

She atteneded garbhasanskar sessions with yoga and meditation.

On 12\01\2018 her BP was observed as 130\90 mmofHg

On 17012018 her BP was 12480 mmof Hg

Mean while she was given i\v Alamin SN to increase her amniotic fluid level. She was dischargd on 22 Jan. with the same treatment and complete bed rest at home. She used to come for weekly checkup and every thing was normal.

Patil et al.

On 28\02\2018 she had been adviced admission for observation and care but she refused due to some domestic reason.

Her USG report on $28\02\2018$ was AFI – 5 cm, Fetal weight – 2233 gm.

Patient went into spontaneous labour on 2\3\2018

EMERGENCY CESERIAN SECTION WAS DONE ON 2\3\2018 FEMALE BABY DELIVERED WEIGHING 1700GM.

Duration of Treatment

 1^{st} day of treatment – $9\setminus01\setminus2018$ Post treatment – $02\setminus03\setminus2018$ Duration of treatment- Aprox 2 months.

Assessment Criteria

1. Hypertension

| Diastolic BP 70 | 0 |
|-----------------------------|---|
| Diastolic BP 88 | 1 |
| Diastolic BP 90 | 2 |
| Diastolic BP > 90 | 3 |

2. Oedema

| Absent | 0 |
|---------------|---|
| + | 1 |
| ++ | 2 |
| All over body | 3 |

3. Urine Albumin

| NIL | 0 |
|-----|---|
| + | 1 |
| ++ | 2 |
| +++ | 3 |

Investigation

1) Haematological Investigation – CBC

- URINR ROUTINE
- LFT
- RFT
- 2) Usg Gravid Uterus

RESULTS

1) Hypertension

| 9\1\2018 | 3 |
|-----------|---|
| 10\1\2018 | 3 |
| 11\1\2018 | 3 |
| 12\1\2018 | 1 |

2) B\L Pedal Oedema

| 9\1\2018 | 3 |
|-----------|---|
| 10\1\2018 | 2 |
| 11\1\2018 | 1 |
| 12\1\2018 | 1 |

3) Urine Albumin

| 9\1\2018 | 3 |
|-----------|---|
| 10\1\2018 | 3 |
| 11\1\2018 | 2 |
| 12\1\2018 | 1 |

4) Fetal Growth

9\1\2018- 1300Ggm

28\2\2018- 2233gm.

DISCUSSION

- Ayurveda has not directly mentioned pregnancy toxaemia. But the pathophysiology of pregnancy toxaemia (samprapti) can be controlled \ arrested at some level.
- It was clearly observed in the above case. Some drugs acting on Renal function to relieve oedema without hampering on the function of kidney like Punarnava were used. Some drugs acting directly on Hypertension like sarpagandha.
- Drugs acting on central nervous system readuces the chances of eclampsia & also can help in reducing effect of Hypertension on brain.

Meditation & yoga relieve the anxiety, increased blood supply to important organs like brain, liver, kidney and specially uterus.

CONCLUSION

The main aim for management of Pre-Eclampsia here is to avoid the complications and produce positive result with help of Ayurveda and Yoga. Integrated Aprroach of treatment has shown good outcomes. Hypertension was controlled, oedea reduced and the pregnancy

continued successfully with less adverse effects on baby. The baby survived well and now it's a healthy baby after 2 and half months.

REFERENCES