



Review Article

GARBHINI PARICHARYA WITH SPECIAL REFERENCE TO NUTRITION

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ABSTRACT

The well-being of humanity is the focus of Ayurveda, an Indian system of medicine and science of life. The health and well-being of a newborn begin before conception and are influenced by the mother's health and nutrition. It is a crucial component of a woman's life; her health and adequate nutrition (*Aahar*) will undoubtedly aid in the healthy development of the foetus, birth, breastfeeding, and the health of the mother. Our *Acharyas* construct a concept in Ayurveda about what kind of diet, behaviour, conduct, and drugs pregnant women should follow. The purpose of this study is to explore the nutrition and value of *Garbhini paricharya* in today's environment.

KEYWORDS: Nutrition, *Garbhini Paricharya*, Pregnancy, Diet.

INTRODUCTION

India's maternal and newborn mortality rates are on the decline. High maternal mortality rates have been attributed to a number of causes, including illiteracy and socioeconomic difficulties. Infant and child mortality rates are high due to poor hygiene and poor nutrition. As a result, there is a greater need for increased understanding of proper care and nutrition.^[1] The government has adopted a number of steps in this direction, such as reproductive and child health, to name a few. *Janani suraksha-yojana* and *Kishori shakti yojana* place a special emphasis on the right directions with regard to energy from the right sources and the right type of proteins, i.e., fibre, Vitamin A, folic acid, iron, calcium, zinc, and choline intake for proper foetal development as well as adult development. Protein, Vitamin C, Calcium, iron-rich meals, sufficient fat, folic acid, whole grains, fruits, and vegetables are all part of a well-balanced pregnancy diet.^[2]

AIMS AND OBJECTIVES

To review literature of *Garbhini paricharya* is safe motherhood and healthy progeny with devoid of any anomalies following a normal delivery. It refers to the antenatal care including *Aahara*, *Vihara* for pregnant women for the benefit of both mother and fetus. Ayurveda the oldest system of medicine has laid enormous importance on safe motherhood. Out of many factors which are responsible for overall development of fetus, *Garbhini aahara* plays very important role.

MATERIAL AND METHODS

A comprehensive literature search was done on the concept of *Garbhini paricharya* and nutrition from, standard text book of ancient *Vedas*, Ayurveda and nutrition science, research article, different online journals of standard e-Databases like PubMed, PubMed central and Google Scholar where search to get relevant research papers related to the topics.

Ayurveda *Acharyas* recommends easy to get and simple type of nutraceutical supplementation recipes in various phases of pregnancy and after delivery, supplement nutrients that ensure healthier growth. Thus expectant mother is advised to take those foods which enhance the anabolic process and help gain in body weight (*Brihan Aahar*).

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Table 1: Dietary Regimen Suggested by Acharyas According to Various Phase of Pregnancy [3-7]

	<i>Charak Samhita</i>	<i>Surshrut Samhita</i>	<i>Ashtang Samhita</i>	<i>Harit Samhita</i>
1 st month	Non-medicated milk	Sweet, cold liquid diet	Medicated milk	<i>Madhuyashthi</i> <i>Madhukpuspa</i> with butter honey & sweetened milk
2 nd month	Milk medicated with <i>Madhura Rasa</i>	Same in 1 st month	Same as <i>Charaka</i>	Sweetened milk treated with <i>Kakoli</i>
3 rd month	Milk with honey & <i>Ghrita</i>	Same as 1 st month	Milk with honey & <i>Ghrita</i>	<i>Krisara</i>
4 th month	Milk with butter	Cooked <i>Sasti</i> rice with curd <i>Dainty</i> and pleasant food mixed with milk & butter, meat of wild animals	Milk with 12 gm of butter	Medicated cooked rice
5 th month	<i>Ghrita</i> prepared with butter extracted from milk	Cooked <i>Shastika</i> rice with milk, meat of wild animals along with dainty food mixed with milk and <i>Ghrita</i> .	Same as <i>Charaka</i>	<i>Payasa</i>
6 th month	<i>Ghrita</i> prepared from milk medicated with <i>Madhura</i> (sweet) Drugs	<i>Ghrita</i> or rice gruel medicated with <i>Gokshura</i>	Same as <i>Charaka</i>	Sweetened curd
7 th month	Same as in sixth month	<i>Ghrhita</i> medicated with <i>Prithak</i> <i>parnyandi</i> group of drugs	Same as <i>Charaka</i>	<i>Ghritakhand</i> (a sweet dish)
8 th month	<i>Kshira yavagu</i> mixed with <i>Ghirita</i>	<i>Asthapana basti</i> with decoction of <i>Badari</i> mixed with <i>Bala</i> , <i>Atibala</i> , <i>Satpushpa</i> , <i>Patala</i> etc honey & <i>Ghrita</i> . <i>Asthapan</i> is followed by <i>Anuvasan</i> <i>basti</i> of oil medicated with milk <i>Madhura</i> drugs	<i>Kshira yavagu</i> mixed with <i>Ghrita</i> <i>asthapana basti</i> with decoction of <i>Badar</i> , <i>Anuvasan</i> <i>basti</i> with oil medicated with <i>Madhura</i> drugs	<i>Ghritapuraka</i>
9 th month	<i>Anuvasana basti</i> with oil prepared with drugs of <i>Madhura</i> (Sweet) group vaginal tampon of this oil	Unctuous gruel and meat soup of wild animals up to the period of delivery	Some as <i>Charaka</i>	Difference varieties of cereals

During pregnancy, you'll need to eat a lot of different things. Although it is now widely accepted that pregnant women do not need to "eat for two," a healthy, varied, and nutrient-dense diet is essential for both the mother and the baby. Because the developing foetus receives all of its nutrients through the placenta, dietary intake must meet the needs of both the mother and the products of conception, allowing the mother to store nutrients for the foetus' development and lactation after birth.

The most important piece of advice is to eat a healthy, well-balanced diet. A diet rich in starchy carbohydrates and fruits and vegetables alters metabolism, resulting in more efficient utilization. Vitamins A, C, and D, as well as thiamin, riboflavin, and folate, are essential for the fetus's development and maintenance. During the third trimester, when the foetal growth is at its fastest, requirements are at their highest.

The release of energy in the biological cell requires thiamin (B1) and riboflavin (B2). Extra folate is needed throughout pregnancy to prevent megaloblastic anaemia, in addition to taking a folic acid supplement prior to conception and during the early stages of pregnancy. This level of intake can be achieved by eating a well-balanced diet that includes plenty of folate-rich foods. Foods fortified with folic acid supplements are only recommended up until the 12th week of pregnancy.

Table 2: Recommended Dietary Intakes during Pregnancy

Nutrient	Pregnant Woman
Energy (Kcal/day)	+300
Protein (g/day)	+25
Fat (g/day)	30
Calcium (mg/day)	1000
Iron (mg/day)	38
Vitamin A (RE)(mcg/day)	600
Betacarotene	2400
Thiamin (mg/day)	+0.2
Riboflavin (mg/day)	+0.2
Nicotinic acid (mg/day)	+2
Pyridoxine (mg/day)	2.5
Ascorbic acid (mg/day)	40
Folic Acid (mcg/day)	400
Vitamin B12 (mcg/day)	1

A well balanced pregnancy diet includes protein, vitamin C, calcium, iron rich foods, adequate fat, folic acid, whole grains, fruits and vegetables. [8-11]

DISCUSSION

Pre-pregnancy weight and the result of the birth: Women who are considering a pregnancy should try to achieve a healthy body weight before getting pregnant, as being overweight, obese, or underweight before to conception is linked to an increased risk of a variety of issues.

Maternal nutritional condition, or the timing of conception, is now well established as a significant predictor of embryonic and foetal growth. The embryo is the most vulnerable to the negative consequences of poor maternal nutrition. The neural tube develops in to the spine and neural tube defects occur when the brain and skull and/ or the spinal cord and its protective spinal coloumn do not develop properly with in the first 4 weak after conception. The most common NTD'S are [Neural tube defect] Ancephaly, which result in still birth or death soon after delivery and spina bifida which may lead to a wide range of physical disabilities including partial or total paralysis.

Pregnant woman need an adequate dietary intake of essential fatty acids and their longer chain derivatives DHA (Docosa Hexinoic Acid) and A (Amino acid) which are necessary for development of brain and nervous system of fetus particularly in late pregnancy Anemia during pregnancy can increase the risk of having LBW [Lower Birth Weight] baby and infant developing iron deficiency anemia.[12,13,14,15]

CONCLUSION

Dietary recommendations for pregnant women are similar to those for other people, with a few modifications. During pregnancy, you'll need more energy, protein, and a variety of micronutrients like thiamine, riboflavin, folate, and vitamins A, C, and D. During the second and third trimesters, the increased energy need is greatest.

To help avoid megaloblastic aneamia, a higher level of folate is required during pregnancy. In addition to taking folic acid supplements until the 12th week, it is recommended that you eat plenty of folate-rich foods as you get closer to the end of your pregnancy.[17] *Garbhini Paricharya* regimen described by Ayurveda *Acharya* is highly effective for this purpose. If this *Parichrya* is followed by *Garbhini* then one can expect a disease free, complication free healthy baby. All the required macro-micro nutrients are acquired from the regimens suggested by them in *Smahintas*.

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