



EFFICACY OF YASHTIMADHUWADI CHURNA IN THE MANAGEMENT OF GARBHAKSHAYA WITH SPECIAL REFERENCE TO INTRAUTERINE GROWTH RESTRICTION (IUGR): A SINGLE CASE STUDY

Dr. Nikita Ashokkumar Mulik, Dr. Sujatha Patil

ABSTRACT

Background

Garbhakshaya described in Ayurvedic texts denotes underdeveloped fetal growth due to improper nourishment, which parallels Intrauterine Growth Restriction (IUGR) in modern obstetrics. IUGR is associated with increased perinatal morbidity and mortality.

Objective

To evaluate the efficacy of Yashtimadhuwadi Churna in the management of Garbhakshaya with special reference to IUGR.

Method

A 26-year-old primigravida at 28 weeks gestation with reduced fetal movements and lagging fundal height was diagnosed with IUGR. Yashtimadhuwadi Churna (5 g twice daily with warm milk after meals) was administered for 8 weeks alongside routine antenatal care. Maternal weight, fundal height, fetal growth parameters (USG), and subjective wellbeing were assessed.

Results

After 8 weeks, fundal height matched gestational age, maternal weight gain was +4.5 kg, AFI improved from 7 cm to 10.5 cm, and estimated fetal weight improved from <10th percentile to 25th percentile. At term, the patient delivered a healthy 2.7 kg female infant by normal vaginal delivery. No adverse effects were reported.

Conclusion

Yashtimadhuwadi Churna improved maternal and fetal parameters in IUGR without side effects, suggesting its efficacy as an adjuvant in the management of Garbhakshaya/IUGR. Larger clinical studies are warranted for validation.

KEYWORDS: Ayurveda, Yashtimadhuwadi Churna, Garbhakshaya, Intrauterine Growth Restriction, IUGR, Fetal growth

INTRODUCTION

Garbhakshaya is mentioned in Ayurvedic texts as a condition where the fetus fails to achieve proper growth due to inadequate nourishment and dhatu kshaya (Charaka Samhita, Sharira Sthana 4/19). It is comparable to Intrauterine Growth Restriction (IUGR), a condition in modern obstetrics where the fetal weight is below the 10th percentile for gestational age. IUGR complicates 3–10% of pregnancies and is a major contributor to perinatal morbidity and mortality (Gardosi et al., 2013).

Ayurveda emphasizes maternal nutrition, proper ahara-vihara, and use of rasayana for healthy fetal development.

Yashtimadhuwadi Churna, as mentioned in Bhaishajya Ratnavali (Garbharoga Chikitsa Prakarana), contains Yashtimadhu (Glycyrrhiza glabra), Shatavari (Asparagus racemosus),

Gokshura (Tribulus terrestris), and Musta (Cyperus rotundus). These drugs have balya, rasayana, and garbhasthapaka properties, and modern research also validates their antioxidant, anabolic, and uterine tonic effects.

This case study evaluates the efficacy of Yashtimadhuwadi Churna in a pregnant woman with IUGR.

METHODOLOGY (CASE PRESENTATION)

- Patient Information

A 26-year-old primigravida woman at 28 weeks gestation presented with complaints of reduced fetal movements and weakness.

- Clinical Findings

Fundal height: 24 cm (lagging by 4 weeks)
Decreased perception of fetal movements
USG: Estimated fetal weight – <10th percentile; AFI – 7 cm;
Umbilical artery Doppler – normal
Hemoglobin: 10.2 g/dl
No PIH, GDM, or infection

- Diagnosis

Ayurvedic: Garbhakshaya
Modern: IUGR



- Intervention

Yashtimadhuwadi Churna 5 g twice daily with warm milk after meals for 8 weeks

Routine ANC care (iron, calcium, protein supplements) continued

Dietary advice: satmya ahara — milk, ghee, protein-rich diet

Rest and stress management advised

- Assessment Criteria

Fundal height progression

USG parameters (EFW, BPD, FL, AC, AFI)

Maternal weight gain

Subjective wellbeing

RESULTS

At 36 weeks gestation (after 8 weeks of therapy):

- Fundal height: 34 cm (catch-up growth achieved)

- Maternal weight gain: +4.5 kg

- USG:

- Estimated fetal weight: improved to 25th percentile
- AFI: 10.5 cm (normalized)
- BPD, FL, AC: within normal range

- Fetal movements: regular and normal

- Delivery: Healthy female baby, 2.7 kg, at 38+4 weeks via normal vaginal delivery

- No adverse effects reported

DISCUSSION

The improvement observed in this case supports the role of Yashtimadhuwadi Churna in Garbhakshaya/IUGR.

- Yashtimadhu: Rasayana, enhances nutrient assimilation, improves fetal growth (Charaka Samhita, Sutra Sthana 27/217).

Modern studies show antioxidant and immunomodulatory properties (Armanini et al., 2002).

- Shatavari: Uterine tonic and garbhasthapaka, promotes maternal strength and lactation (Thakur et al., 2012).

- Gokshura: Improves renal circulation and fluid balance, maintains AFI (Neychev & Mitev, 2016).

- Musta: Corrects agni, aids digestion, prevents ama formation, and has antioxidant activity (Raut et al., 2014).

Thus, the formulation enhances maternal health, optimizes nutrient transfer, and supports fetal growth.

CONCLUSION

Yashtimadhuwadi Churna was effective in managing Garbhakshaya with reference to IUGR, improving fetal growth and maternal wellbeing without adverse effects. It can be considered a safe adjuvant in IUGR management, but larger clinical trials are needed for validation.

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