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Rushda Saeedi

Assistant Professor, D/O Ilmul Qabalat wa Amraz e Niswan (OBG), Jamia Tibbiya Deoband, Saharanpur, Uttar Pradesh, India

Mohammad Asif Khan

Assistant Professor, D/O Ilmul Jarahat (Surgery), Jamia Tibbiya Deoband, Saharanpur, Uttar Pradesh, India

Antenatal care: Routine care of pregnant women: An approach through Unani system of medicine

Rushda Saeedi and Mohammad Asif Khan

Abstract

The health of future generations is to a great extent determined by the baby's growth and development within the womb. The success of fetal life determines not only the health of the newborn but also has a major impact on adult health and disease risk. Good antenatal, perinatal health is therefore important to individuals, society, and future generations.

Childbirth is the happiest moment for the mother as she is taking care of it for nine months. Care during those nine months prefers the term antenatal care. Most problems at birth are caused by prematurity, fetal growth restriction, congenital abnormalities, or asphyxia. With access to antenatal care, especially in early pregnancy, many of these can be prevented or anticipated. Antenatal care (ANC) has repeatedly been shown to reduce neonatal deaths via the identification of high-risk pregnancies. According to Unani prospective *Tadabeer-e-Hamla/Tadabeer-e-Hawamil* refer to antenatal care. Based on approaches by Unani Medicine, the most important topics in lifestyle habits during pregnancy are divided into four main groups: Nutrition, physical exercise, sexual activity, and psychological stress. Then special recommendations are suggested which include a regimen to facilitate labor. Eating behaviors and other lifestyle habits have a major role in optimizing the health of women in pregnancy. Regarding traditional medicine viewpoints paying special attention to correcting diet, lifestyle, and preventive attitude with effective and simple therapeutic procedures, it seems that traditional (Unani) medicine can offer efficient management to alleviate some pregnancy complications.

Keywords: Antenatal care, dietary regimen, pregnancy, *Tadabeer-e-hawamil*, unani medicine

1. Introduction

"Antenatal care (ANC) can be defined as the care provided by skilled health-care professionals to pregnant women and adolescent girls in order to ensure the best health conditions for both mother and baby during pregnancy. The components of ANC include: risk identification; prevention and management of pregnancy-related or concurrent diseases; and health education and health promotion." [1] (WHO)

ANC plays a central role in a variety of care, a critical framework for understanding the continuity between maternal, newborn, and child health. ANC is an opportunity for skilled professionals to educate and engage with women about how and why to deliver in a facility, the profit of exclusive breastfeeding, where and when to return for postpartum and postnatal care and the accessibility of modern family planning methods [2].

In the Unani system of medicine, supervision, and care of a woman during pregnancy is known as *Tadabeer-e-Hawamil/Tadabeer-e- Haamla*. Unani physicians provided detailed accounts of lifestyle in pregnancy and strategies for their management [3, 4]. Maternal and child health is the leading health issue in the present scenario. The main aim of *Tadbeer-i Hawamil* (ANC) is to ensure good maternal health with the delivery of a healthy baby at term without any complication. Good ANC can also play a critical role in prepare a woman and her family for birth by establishing assurance between the woman and her health care provider and by individualizing promotional health messages [5]. Further antenatal visits may raise awareness about the need for care during delivery [6]. According to WHO a minimum of 8 contacts are recommended to reduce perinatal mortality and improve women's experience of care [1].

In the present scenario, great interest is being paid for the wellbeing of the women during pregnancy, motherhood, and their children before and after birth. In this view several preventive and screening methods using preconception and prenatal counseling, regular medical visits, and diet recommendations have been developed.⁷ However; nowadays there is also a great awareness particularly by women in their reproductive age for alternative medicine which requires adequate knowledge from both healthcare providers and users.

Corresponding Author:

Rushda Saeedi

Assistant Professor, D/O Ilmul Qabalat wa Amraz e Niswan (OBG), Jamia Tibbiya Deoband, Saharanpur, Uttar Pradesh, India

This study was performed to present Unani perspectives on maternal lifestyle and management of various pregnancy-related ailments like *Qai* (vomiting), *Qabz* (Constipation), *Gathāyan* (nausea), *Suda* (headache), flatulence, excessive salivation, *Du'f al Istiha* (anorexia), etc. to provide suggestions for practitioners concerned for pregnant women. The Unani system of medicine properly deals with these issues as evident from ancient Unani literature the number of drugs and regimens available for the treatment of various problems related to pregnancy.

➤ Consequences of Poor antenatal care

Effects on mother:^[8]

Several women die as a result of complications during and following pregnancy and childbirth. The major complications are:

- Severe bleeding
- Infections
- Pre-eclampsia and eclampsia
- Unsafe abortion
- Complications from delivery

➤ Effects on Fetus:^[9]

- Ante partum stillbirths
- Preterm birth
- IUGR
- Congenital anomalies.

➤ Aims and objectives of *Tadabeer-e-Hamla* (ANC):^[9, 10]

- Overall-reduced maternal and perinatal morbidity and mortality.
- Timely detection and management of complications.
- Ensure the birth of a healthy child.
- Ensure the health of a mother.
- Provide essential health education to the mother including information on the danger signs of pregnancy.
- To educate the mother about the care of the baby and maintain baby's hygiene.

Material and Methods

The classical Unani sources viz., *Al-Qanun fi'l Tibb* (Canon of Medicine), *Iksir-i-A'zam*, *Al Hawi fi'l Tibb* (Continens Liber), *Tarjuma Kamil al-Sana'a al-Tibbiyya*, and *Kitab al-Mansoori* were reviewed. Further, Library and different search engines were also browsed on the website to explore the recent studies.

Results and Discussion

▪ Dietary Regimen for Pregnant Woman

The quality of nutrition and the type of food have played an extensive role in the development of medical sciences.¹¹ It was strongly said that the kind of food consumed during pregnancy influences both the mother and the child, and therefore not just the present but also future generations. Unani scholar's deals with two major aspects of the woman's nutrition in the pregnancy regimen: Recommended foods and foods to be avoided^[12].

➤ Recommended dietary regimen^[3, 4, 13, 14]

- Moderate amounts of food that are suitable for the stomach and can lead to good digestion consist of eggs, meat, fish, milk, dates, jaggery, honey, cheese, butter, ghee, soya, in diet.
- Foods should be eaten several times during the day and

not just in one big meal.

- Pregnant women should eat light, digestible foods especially when they approach to labor and delivery. (*Jayyed al-Kaimoos*)
- Fruits and vegetables such as currant (raisin), grapes, sweet quince, sour-sweet apple, pear, almond, sour-sweet pomegranate, lettuce, and succor are highly recommended.
- Foods to be consumed during pregnancy include bread made from fine wheat, meat, liquid foods and soups, and traditional pottage named "*Esfidbaj*" and "*Zyrbaj*" in the Persian language.
- *Razi* with the reference of Hippocrates mentioned that *Sattu* (roasted barley flour) mixed with water is advised.

➤ Contraindicated dietary regimen^[13-17]

According to eminent Unani scholars before and during pregnancy a woman has to avoid certain foodstuffs and eating routine which can be harmful to the pregnancy and might lead to miscarriage or diseases and abnormalities in the offspring.

- Starvation and overeating
- Food and drinks which are too hot or too cold
- Astringent food should be used with caution, taking vinegar, bitter and sharp foods such as caper, raw olives, peppers, chili, and likewise should also be avoided.
- Foods that predispose flatulence such as *Baqila*, *Lobiya*, chickpea, and caper should be avoided.
- Emanogauge: Foodstuffs such as chick pea, beans, safflower, sesame, fennel, rue, fenugreek, celery, and clover which are believed to provoke menstruation are to be avoided.
- Substances that cause cardiac and stomach weakness and miscarriage for instance: violets, marshmallow, common mallow should be avoided, and finally, if humid humor is high in the pregnant woman's body, all fruit with high water content, fatty pottage, and long-term and frequent bathing should be avoided, because high humidity in the body can cause miscarriage.
- Smoking and alcohol should be avoided during pregnancy, as many fetal alcohol spectrum disorders have occurred due to heavy alcohol intake during pregnancy.

➤ Other useful advice^[13-17]

- Proper rest and sleep in a left lateral position are advised. Sleep for 8 hours at night and 2 hours during the daytime.
- Mild exercises are recommended, such as a slow walk.
- Loose-fitting dresses are recommended.
- Pregnant women should avoid strenuous sports which can stimulate the fetus and cause miscarriage.
- Extreme movements such as running and jumping are not allowed.
- Beating objects forcefully can cause severe shaking of the fetus and should be avoided and carrying heavy loads, allowing other children to sit on the abdomen and falling or any other trauma should be avoided.
- Sexual intercourse is to be restricted, particularly in early and late pregnancy. The reason for avoiding sexual intercourse is the risk of cervical dilatation, stimulation of the fetus, and miscarriage.
- head anointment which is likely to result in catarrh and cough that can, in turn, cause severe shaking of the fetus and abortion, should be avoided
- Avoid *Fāsd* (venesection) during pregnancy.
- Avoid *Hijamah* (Cupping), *Amal-e-Qai* (Emetic), and

- Purgatives are avoided in the first and last trimester.
- Repeated bathing should be avoided except near delivery time.
- Severe emotional and psychological stress during pregnancy can lead to miscarriage, especially in the first trimester. Pregnant women should avoid strong emotions, negative and positive feelings, anger, and sadness. They should also avoid intense fear, shouting aloud and loud noises.
- **Ibn sina** advised a number of regimen facilitate to labor, as follow: Bathing frequently, taking digestible and light food, when the woman approaches to labor, cutting down on food amount in final days of pregnancy, eating fatty foods and fatty sweets mixed with almond oil at the time of delivery, in case of constipation, daily intake of sweet almond oil is suggested, drinking fresh cow milk every day, avoiding eating sour and astringent foodstuffs, taking a hot *Abzan* (sitz bath) of boiled cabbage, fenugreek, dill, cabbage seeds and flax seeds near

childbirth and rubbing the abdomen and back with sesame or dill or chamomile oil after getting out of the *Abzan* (sitz bath).

- **Management of common ailments associated with pregnancy:** During the first 2 months of pregnancy Unani medicine stresses the well being of the mother and the fetus by stressing on diet therapy, and very much less on pharmacotherapy. Apart from diet therapy other important considerations like the emotional state of the mother, sanitation and hygiene of the mother and her surroundings, standard and quality of life are all important factors which play a dominant role in the well being of the child and the mother during the first and second trimesters of pregnancy^[18].
- Few common ailments associated with pregnancy and their treatment is listed in table no.1.
- Some indicated and contraindicated drugs in pregnancy are listed in table no. 2 (a) & (b).

Table 1: Common ailments of pregnancy and their treatment.

Ailments	Remarks	Treatment
<i>Qabz</i> (constipation) <i>wa dard shikam</i> ^[13-15, 17] .	<ul style="list-style-type: none"> • Constipation and flatulence is very common during pregnancy. • During 4th month and 7th month prescribe any <i>Muhsil</i> (purgative) while first trimester and in last trimester avoid strong purgatives. 	<ul style="list-style-type: none"> • <i>Nuskha</i>: Mix 3 <i>masha</i> of <i>Gul-e-Khatmi</i> to 10 grains of <i>Maweez Munaqqa</i> and boil them, after boiling add <i>Shera Kasni</i> 5 <i>masha</i> along with <i>Gulqand</i> 2 <i>tola</i> and then sprinkle 4 <i>masha</i> of <i>Khaksi</i> on top of it. • <i>Qurs Tabasheer</i> made with <i>Arq lemu</i> is useful. • <i>Roghan Badam Sheeren</i> is also useful.
<i>Gathayan</i> (Morning sickness/ Nausea vomiting) ^[13-15, 17]	<ul style="list-style-type: none"> • Abu Bakr Muhammad Bin Zakaria Al-razi state that the female fetus is more liable for nausea and vomiting then male because of a male fetus having hot temperament (<i>Harart</i>) and female having cold temperament (<i>Barudat</i>). • Nausea and vomiting usually happen in the first trimester and vanish after the 4th month. But in some females, it occurs throughout the pregnancy. 	<ul style="list-style-type: none"> • Oral administration of <i>Zarawand</i> • <i>Joshanda</i> (Decoction) made with <i>Asi- ur Rae</i> (<i>Amaranthus gangeticus</i> Linn.) or <i>Soya</i> (<i>Anethum sowa</i> Roxb.) is useful. • Chewing of Pomegranate seeds after a meal. • <i>Sharbat Angoor</i> and other Sour items, <i>Nashasta</i> (Starch), <i>Safarjal</i> (<i>Cydonia oblonga</i>), and <i>Nana</i> (mint) are also advice to eat. • Astringent drugs like <i>Gulnar</i> (<i>Punica granatum</i> Linn.), <i>Karafs</i> (<i>Apium graveolens</i> Linn.), <i>Badiyan</i> (<i>Foeniculum vulgare</i> Mill.), <i>karnab</i> (<i>Brassica oleracea</i> Linn) are used for Local Application over abdomen. • <i>Sikanjbeen Lemuni</i>, <i>Murabba lemuni</i>, <i>Sikanjbeen Sada</i>, <i>sharbate fawakeh</i> are useful. • <i>jawarish Anarain</i> 7 gms twice daily.
<i>Khafaqan</i> (Palpitation) during pregnancy ^[13-15, 17]	<ul style="list-style-type: none"> • flatus and <i>Fasid Akhlat</i> (morbid humours) in the stomach 	<ul style="list-style-type: none"> • Few sips of lukewarm water are given • Orally and slow walk is advised. • Mild exercise is also preferable. • <i>Arq-e-Badranjboya</i>, <i>Arq-e-Mundi</i>, <i>Arq-e-Gaozaban Sada wa Ambary</i> are very beneficial. • Few sips of lukewarm <i>Arq-e-Gulab</i> are very good for palpitation. • <i>Sudab</i> (<i>Ruta graveolens</i> Linn.) is used orally with suitable adjuvant. • Rubbing is done over the chest with the cloth. • Inhalation of aromatic fragrance is advised. • Some unani formulations such as <i>Sharbat Tuffah</i>, <i>Dawa al-Misk</i>, and <i>Khamira Marwareed</i> are also beneficial.
<i>Du'fal Istiha</i> (Anorexia) and pica ^[13-15, 17]	<ul style="list-style-type: none"> • Disappears after 3 to 4 months itself 	<ul style="list-style-type: none"> • Give <i>Zarawand</i> alone before or after meal alone or give it with <i>Sharab-e-Ruhani</i>. • <i>Gulqand</i>, <i>Paneer</i> (Cheese), roasted gram, unripe grapes, and sour dietary items are advised. • Other useful drugs are <i>Rayee</i> (<i>Brassica nigra</i> Linn.), <i>Mastagi</i> (<i>Pistacia lentiscus</i> Linn.), <i>Asi-ur-Rae</i> (<i>Amaranthus gangeticus</i> Linn), <i>Sudab</i> (<i>Ruta</i>

		<p><i>graveolens</i> Linn.), <i>Zaranbad</i> (<i>Aristo lochia</i> sp.).</p> <ul style="list-style-type: none"> • <i>Zimad</i> (paste) prepared with <i>Qabiz</i> (astringent) and (<i>Khushboo dar adwiya</i>) aromatic drugs are useful and this zimad is applied over the epigastric region. • Some compounds are also useful: <i>Jawarish Mastagi</i>, <i>Qurs Tabasheer</i>, <i>Anushdaru</i>, <i>Safoof al-Hawamil</i>, <i>Jawarish Fawakeh</i>, <i>Jawarish Ood Tursh</i>, <i>Sharbat Angoor</i>, <i>Sikanjbeen Tuffahi</i> • <i>Arq keora</i> 7 tola, <i>Gulab</i> 2 tola, along with <i>Sharab Rehani</i>.
<i>Ghashi</i> (Syncope)	<ul style="list-style-type: none"> • It occurs due to general weakness, low blood pressure, anemia (as a fetus requires the supply of iron, which is obtained only from mothers). • Woman during pregnancy feels dizzy because of a lack of hemoglobin which carries oxygen to the brain and other organs of the body., Hypoglycemia (Another common reason causing dizziness is low blood sugar level that occurs in your body due to changes in the metabolism). 	<ul style="list-style-type: none"> • Oral administration of <i>Aab Anar</i> (pomegranate juice), <i>Arq Gulab</i> (Rose distillate), <i>Arq Badiyan</i> (fennel extract), and <i>Arq Gauzaban</i> (Extract of <i>Onosma bracteatum</i>) –48 ml each is given orally. • <i>Dawa al-Misk Motadil</i>, <i>Sharbat Anarien</i>, <i>Jawarish Amla</i>, etc are also helpful. • <i>Ood Saleb</i> (<i>Orchis officinalis</i> Linn.) 1gm ground with <i>Arq Gulab</i> is given orally with <i>Yaqooti Motadil</i>. Thereafter Decoction prepared with <i>Gul Gaozaban</i> (<i>Onosma bracteatum</i> Linn.) and <i>Arq Gulab</i> is given with <i>Sharbat Gaozaban</i> in case of recurrence. • <i>Gulqand Aftabi</i> 24gm with <i>Arq Gulab/Arq Badiyan</i> orally at bedtime.
<i>Su' al Qinya</i> (Anemia during pregnancy) ^[13-15, 17, 19]	<ul style="list-style-type: none"> • Anemia is very common in pregnant women and infants. • <i>su' i-mizaj Jigar wa Zofe Jigar</i> 	<ul style="list-style-type: none"> • Shift the patient to well ventilated or open space. • Regular bath. • Encourage light and digestible food. • <i>Filfil siyah</i>, <i>Majoon dabidulwarad</i>, <i>jawarish jalinoos</i>, <i>Qurse khabsulhadeed</i>, <i>Fauladi sayal</i> are useful. • <i>Muwallid-i Dam Aghdiya wa Adwiya</i> (haematinic diet and drugs) are recommended during pregnancy like cereal flour with husk, green leafy vegetables, turnip, beetroot fruits like gooseberries, pomegranate, grapes, Banana and dates are included in the diet. • Gives <i>Sharbat Deenar</i> and <i>Sharbat Anarain</i> 20-40 ml per day. • <i>Sharbat Faulad</i> 30ml per day.
Menstrual bleeding during pregnancy ^[13-15, 17]	<ul style="list-style-type: none"> • Sometimes periodic vaginal bleeding occurs during pregnancy 	<ul style="list-style-type: none"> • <i>Abzan</i> (Sitzbath) with the decoction of astringent agents like <i>Adas</i> (lentil), <i>Qishoor Rumman</i> (fruit peel of pomegranate), <i>Gulnar</i> (flower of pomegranate), <i>Afis</i> (<i>Quercus infectoria Olivier</i>) and <i>Baloot</i> (<i>Aesculus hippocastanum</i> Linn) is advised. • <i>Zimad</i> (paste) prepared with <i>Qishoor Rumman</i> (fruit peel of pomegranate), <i>Gulnar</i> (flower of pomegranate), <i>Afis</i> (<i>Quercus infectoria Olivier</i>), <i>Teen yabis</i> (dry fruit of <i>Ficus carica</i> Linn.) and <i>Khal</i> (vinegar) rubbed over the pelvic region.

Table 2: (a):^{13-15, 17} Indicated single and compound drugs during pregnancy

<i>Adwiya Mufreda</i> (Single drugs)		<i>Murakkabat</i> (Compound drugs)
Drugs	Scientific name	
<i>Amla</i>	<i>Embilica officinalis</i> Gaertn	<i>Dawa-ul-Misk</i>
<i>Angoor</i>	<i>Vitis vinifera</i> Linn.	<i>Mufareh Yaqooti</i>
<i>Anjeer</i>	<i>Ficus carica</i> Linn.	<i>Khamira-e-Gaozaban Saada</i>
<i>Behi</i>	<i>Cydonia oblonga</i>	<i>Khameera Marwareed</i>
<i>Darunaj</i>	<i>Doronicum hookeri</i> Hook.	<i>Tiryaq Farooq</i>
<i>Gul-e-Gaozaban</i>	<i>Borago officinalis</i> Linn.	<i>Nushdaro Lului</i>
<i>Gul-e-surkh</i>	<i>Rosa damascenes</i> Mill.	<i>Sikanjabeen Sada</i>
<i>Gil-e-armani</i>	Aluminium silicate	<i>Sikanjabeen Lemuni</i>
<i>Heel Khurd</i>	<i>Elettaria cardamomum</i> Maton.	<i>Jawarish-e-Amla Sada</i>
<i>Jauzbuwa</i>	<i>Myristica fragrans</i> Hoult.	<i>Sharbat Faulad</i>
<i>Kalonji</i>	<i>Nigella sativa</i> Linn.	<i>Jawarish Fawakeh</i>
<i>Kundur</i>	<i>Boswellia serrata</i> Roxb.	<i>Sharbat Anar Shireen</i>
<i>Mastagi</i>	<i>Pistacia lentiscus</i> Linn.	<i>Arq-e-Gaozaban</i>

<i>Qaranful</i>	<i>Syzygium aromaticum</i> Merr & L.M. perry.	<i>Araq-e-Gulab</i>
<i>Rumman</i>	<i>Punica granatum</i> Linn.	<i>Arq-e-Mundi</i>
<i>Zarawand</i>	<i>Aristolochia longa</i> Linn.	<i>Arq-e-Badranjboya</i>
<i>Sudab</i>	<i>Ruta graveolens</i> Linn.	<i>Araq-e-Keora</i>
<i>Nana</i>	<i>Mentha arvensis</i> Linn.	<i>Jawarish Mastagi</i>

Table 2(b): ^{20,21} Contraindicated drugs during pregnancy

Drugs	Functions
<i>Abhal (Juniperus communis</i> Linn.)	Emanogauge
<i>Afsanteen (Artemisia absinthium)</i>	Abortifient
<i>Arand (Ricinus communis</i> Linn.)	Strong purgative
<i>Asaroon (Asarum europaeum)</i>	Emanogauge
<i>Baranjasif (Artemesia vulgaris</i> Linn.)	Uterine stimulant/ Abortifient
<i>Balsaan (Hypericum perforatum)</i>	Abortifient
<i>Chiraita (Swertia chirata</i> Buch. Ham.)	Emanogauge and Abortifient
<i>Jamal gota (Croton tiglium</i> Linn)	Strong purgative
<i>Marzanjosh (Oliganum vulgare</i> Linn.)	Abortifient
<i>Murmaki (Commiphora myrrha</i> Engl.)	Emanogauge
<i>Papita (Carica papaya</i> Linn.)	Emanogauge and Abortifient
<i>Qurtum (Carthamus tinctorius</i> Linn.)	Emanogauge
<i>Sana makki (Cassia angustifolia</i> Vahl.)	Strong purgative

Conclusion

The health status of a country is determined by the status of women and children's health in that country. They are perennially at risk of health problems. Unani can provide the life cycle approach in health care for women. The preceptors of Unani had very well appreciated the necessity of women's health in the maintenance of a healthy community. While realizing the importance of women's role played in propagation and the uplifting of the society, the emphasis on promoting the health of the women, by all means, was encouraged. During pregnancy, the patient needs proper care and support to tackle the difficulties of the whole journey and to achieve a healthy mother and healthy baby at the end of pregnancy. Through this paper, an effort has been made to focus on and highlight the strength of Unani medicine in antenatal care. The pregnancy pathway and antenatal care are based on a person's individual needs. The majority of risks in pregnancy can be prevented by proper antenatal visits, diet, counseling, and avoidance of harmful things during pregnancy.

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