



ISSN 2456-3110

Vol 9 · Issue 2

February 2024

Journal of
**Ayurveda and Integrated
Medical Sciences**

www.jaims.in

JAIMS

An International Journal for Researches in Ayurveda and Allied Sciences



Maharshi Charaka
Ayurveda

Indexed

An Ayurvedic perspective of Female Infertility - A Case Study

Sheela Verma¹, Anjana Saxena², Deepika Gupta³

¹Post Graduate Scholar, Dept. of Prasuti Tantra and Stri Roga, Govt. Ayurvedic P.G. College and Hospital, Varanasi, Uttar Pradesh, India.

²Reader, Dept. of Prasuti Tantra and Stri Roga, Govt. Ayurvedic P.G. College and Hospital, Varanasi, Uttar Pradesh, India.

³Assistant Professor, Dept. of Prasuti Tantra and Stri Roga, Govt. Ayurvedic P.G. College and Hospital, Varanasi, Uttar Pradesh, India.

ABSTRACT

Infertility is an emerging health problem that has profound socioeconomic and health implication on both the individual and society. Unexplained Infertility is defined as the inability to conceive even after one year with routine investigations of infertility showing no abnormality; with overall incidence of 10-30%. Ayurveda assures normal pregnancy by proper maintenance of *Garbha Samgraha Samagris* and normalcy of mind. All the causes of female infertility come under the imbalance of *Garbha Samgraha Samagri* and *Manasika* factors. In this case report patient suffered from primary infertility since years, after allopathic consultation came for Ayurvedic treatment. From detailed history involvement of vitiated *Vata*, *Agnimandhya* and stressful mind was noticed. The line of treatment followed in this case was *Virechana*, *Basti*, *Nasya*, *Vatanulomana*, *Garbhastapana Aushadhis* and psychological assurance that favours conception in this couple.

Key words: Unexplained infertility, Primary infertility, Vandhyatva, Conception

INTRODUCTION

Ayurveda is a science, having its own method of diagnosis & treatment based on it. According to Ayurvedic classics infertility is failure achieve a child rather than pregnancy as *Garbha Strava* (repeated abortions) & *Mrutvatsa* (having repeated still births) is also included in types of infertility.

Important factors of constituents of *Garbha* (foetus) are 1) *Rutu* (fertile period), 2) *Kshetra* (reproductive organs), 3) *Ambu* (nutritive fluids), 4) *Beej* (Ovum) -

Also healthy psychological status, normal functioning of *Vata* (one of the governing factor of body according to *Ayurveda*), *Shadbhava* (Six factors mother, father, *Atma*, *Satva*, *Satmya*, *Rasa*). Any abnormality in these factors causes infertility. In *Ayurvedic* classics six type of *Vandhyatva* are noted, which seems to be specific clinical features,

Garbha Kosh Bhang (injury to uterus), *Kakvandhya* (one child sterility or secondary infertility), *Anapatya* (no child or primary infertility), *Garbhastravi* (repeated abortions), *Mrutvatsa* (repeated still births), *Balakshaya* (loss of strength). Prognosis of infertility (cited by classics) depends on the cause, in *Beejdosha* - (developmental abnormalities of reproductive organs) is incurable, *Anapatya* & *Kakvandhya* can be treatable. In *Ayurveda* main cause of any abnormal function in body is *Agnimandya* & *Tri Dosha Dushti* (vitiation of three governing factors of body).

CASE REPORT

Presenting Concerns

A couple named Mr X and Mrs Y, aged 26 years and 30 years respectively came to the OPD of RAC Chaukaghat

Address for correspondence:

Dr. Sheela Verma

Post Graduate Scholar, Dept. of Prasuti Tantra and Stri Roga, Govt. Ayurvedic P.G. College and Hospital, Varanasi, Uttar Pradesh, India.

E-mail: ms.sheelaverma@gmail.com

Submission Date: 14/12/2023 Accepted Date: 19/01/2024

Access this article online

Quick Response Code



Website: www.jaims.in

DOI: 10.21760/jaims.9.2.47

Hospital, Varanasi on 01/07/2023, to conceive for 2 years of married life. Both are non-alcoholic, non-smokers with no history of HTN/DM. The female patient had a history of delayed menses at the interval of 4-6 months since menarch.

Clinical Finding

The female patient was examined thoroughly, and physical examination did not reveal any abnormal findings. Her BP wants 120/80mm of Hg, pulse rate 70/min, body mass index 33 kg/m.^[1] P/V and P/S examination showed a nulliparous cervix without significant abnormality. She is of *Kapha-Vata Prakruti* with *Madhyama Satva Mrudu Koshta* and *Mandagni*. The male patient was also stable with not clinical examination findings with BP 120/80 mm of Hg, pulse 74/min, body mass index 28 kg/m. He is of *Pitta Prakruti* with *Pravara Satva Madhayama Koshta* and *Teekshnagni*.

Menarche: at the age of 14 year

LMP: 17/05/23

Interval: 4 -5 months / Irregular cycles

Duration of bleeding: 0-1 days

Associated complaints: Pain in abdomen during menses

Medical History: No History of DM, HTN, TB/any major illness

Asthvidha Pariksha

Nadi: 74/min

Mootra: Prakrut

Mala: Prakrut

Jihva: Saam

Shabda: Spashta

Sparsh: Anushnashit

Drik: Prakrut

Aakriti: Madhyam

Internal Examination

P/S: White mild discharge with healthy cervix

P/V: Uterus anteverted, Normal in size, No fornix tenderness.

Lab Investigation

Mrs. Y

(8/12/21)

Hb% - 10.7 gm/ dl %

RBS - 102 mg/dl

Lipid Profile - WNL

Normal thyroid profile

LFT - WNL

KFT - WNL

HCV - NR

HIV I, II - NR

VDRL - NR

HBsAg - NR

Sr. LH - 25.32mIU/ml

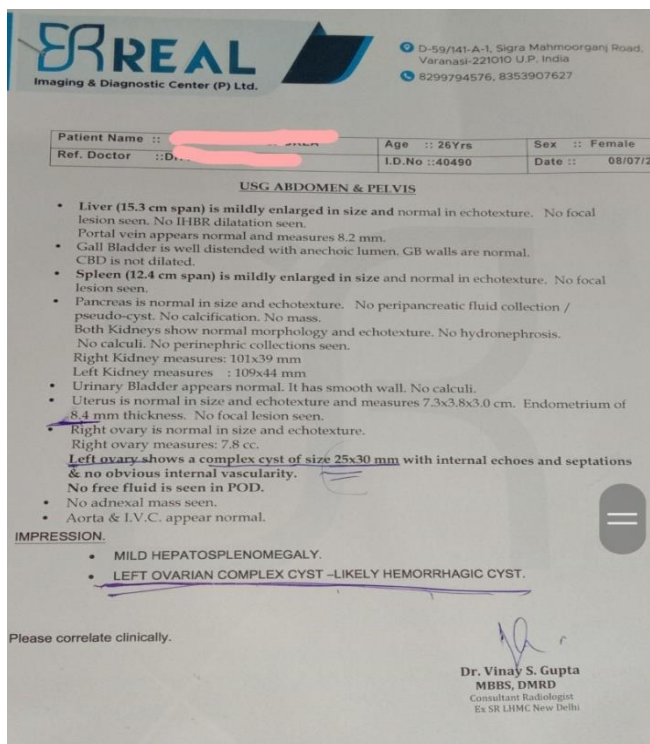
Sr. FSH - 10.53 mIU/ml

Sr. PRL - 25.32mIU/ml

AMH - 2.167ng/ml

USG (8/07/23)

- Mild hepatosplenomegaly
- Ut - normal (7.3×3.8×3.0cm)
- ET - 8.4mm
- Right ovaries normal
- Left ovary shows a complex cyst of size 25x30 mm with internal echoes and septations & no obvious internal vascularity.
- Left Ovarian Complex Cyst-Likely Hemorrhagic Cys



Mr. X - Normal semen analysis.

Anuvasana Basti

Sahachar Tail 60ml

Erand Tail 20 ml

Uttarbasti

Shatpushpa oil: 5ml

Exercise (Yoga, Suryanamaskar, Pranayam)

Internal Medicines

| SN | Date | Treatment | Drugs |
|----|----------|----------------------|---|
| 1. | 21/07/23 | Rookshana | Triphala Phanta, barley diet |
| 2. | 27/07/23 | Deepan Pachan | Aaragvadh + Panchtikta Ghritta |
| 3. | 27/07/23 | Shodananga Snehpana | Varunasigrw Kwatha |
| 4. | 05/08/23 | Internal medications | Chandraprabha Vati, Saptamrita Lauha, Yogaraj Guggulu |
| 5. | 05/08/23 | Virechana | Eranda Taila |

During the course of medicines, it was observed that, her menstrual cycles were regularized. We advised her to continue the same medicines for another one month.

RESULT

Patient come with LMP 17/05/23. She got her UPT positive on 04/10/23. On her first scan on single live intrauterine gestation approximately corresponding to 06 weeks 04 days + 10days has noted. In further follow up *Abhra Lauha, Amalaki Churna & Bilwadi Churna* etc. with appropriate *Garbhini Paricharya* for the lady.

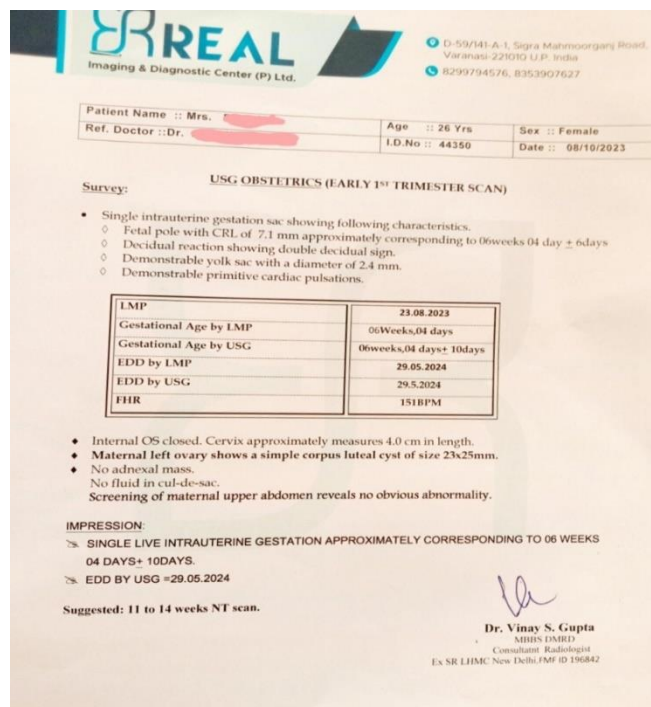
Bilvadi Churna - 2gm

Amalaki Churna - 3gm

Giloy Satva - 500mg

Sankh Bhasma -250mg

Tav Abhra Lauha - 2tab BD



DISCUSSION

According to *Acharya Kashyapa Virechana* helps the *Beeja* to become efficacious *Beejam Bhavati Karmukam*, Because of the involvement of *Vata Dasha* next *Basti* was planned. *Uttara Basti* probably will be helping in increasing the endometrial receptivity by helping in increasing endometrial thickness, and

uterine artery flow. It helps in maintaining the healthiness of the endometrium, uterine contractility, and circulation. It helps in the nourishment of the reproductive system, and it will give a good environment for ovulation. After this in the next cycle *Anuvasana Basti*. As mentioned in *Bhaishajya Ratanavali Shatapushpa Taila* is *Yoni Dosh Hara* and helps in conception *Shatpushpa Nasya* was administered which helped in stimulating the hypothalamus pituitary axis. In *Kashyapa Samhitha Shatapushpa Tail* has been mentioned as *Arthavajanana* and its *Brumhana* properties increase *Bala* of the person, it does *Shodhana* of *Yoni* and it is said to be *Putra Pradayini*, *Pushpa Utpannakari*. All the internal medication given helped in normalizing the *Doshas* and *Agni* and helped her to conceive.

CONCLUSION

Infertility is a relatively common reproductive health concern. More over no significant pathology was detected in both partners. But according to Ayurveda, conception takes place due to healthy sperm, healthy ovum, and a healthy uterus. According to *Charaka*, abnormalities of *Yoni*, psychology, *Shukra*, *Artava*, diet and mode of life, coitus at improper time and loss of strength causes delay in achieving conception in an otherwise fertile woman. Here in this case important consideration was given to *Vata Anulomana*, because proper functioning of *Vata Dosh* is necessary in every aspects of fertility. Thus, the treatment was planned for ensuring *Vata Anulomana* and *Agni*. Initially she was given *Deepana Pachana Chikitsa* and *Virechana* was done.

REFERENCES

1. Sushruta Samhita with Ayurveda Tatva Sandipika by Kaviraj Ambikadatta Shastri, 11 ed, 1997
2. Charaka Samhita with Ayurveda Dipika commentary by Chakrapani and with Vidyotini Hindi Commentary by Kashinath Shastri edited by Dr Gangasahaya Pandeya
3. DC Dutta, Textbook of Gynaecology 5th Edition published by New Central Book Agency, Kolkata, 2008
4. Sushrut Samhita with Ayrvedarahasyadipika Hindi commentary by Dr Bhaskar Govinda Ghanekar, 13th ed. Meher Chand Lacchaman Das, Delhi, 1998
5. Ashtang Hriday with Vidyotini Hindi commentary by Kaviraj Atridev Gupta, Chaukhamba Prakashan, Varanasi, 12th ed, 1997
6. Sharangdhar Samhita by Dr. Bramhanand Tripathi, Pratham Khanda Adhyaya Choukhamba surbharti prakashan, edition, 2016.
7. Journal of Human Reproductive Sciences by Naina Kumar and Amit Kant Singh
8. Sushruta Samhita with Ayurveda Tarva Sandipika by Kaviraj Ambikadatta Shastri. Sharir sthan, 11 ed, 1997
9. Sushruta Samhita with Nibhandha Sangraha by Dalhana, Edit by YT Acharya, Reprint, 1994,
10. Sushruta Samhita with Nibhandha Sangraha by Dalhana, Edit by YT Acharya, Reprint Amarkasha-1978, by Amara Sinha, II ed. 1976, Reprint, 1978.
11. Sushruta Samhita with Ayurveda Tatva Sandipika by Kaviraj Ambikadatta Shastri, Shari sthan. 11th ed. 1997
12. Ashtang Hriday with Vidyotini Hindi commentary by Kaviraj Atridev Gupta, Chaukhamba Prakashan, Varanasi, 12th ed, 1997
13. Dr. Bramhanand Tripathi, Sharangdhar Samhita, Pratham Khanda Adhyaya. 2016 Ed., Choukhamba surbahar prakashan,
14. Charaka Samhita with Ayurveda Dipika commentary by Chakrapani and with Vidyotini Hindi Commentary by Kashinath Shastri edited by Dr. Gangasahaya Pandeya.
15. Bhavprakash Nighantu of Shri Bhavmishra by Shri Brahmashankar Mishra, Chaukhamba Sanskrit Bhavan, Reprint, 2015

How to cite this article: Sheela Verma, Anjana Saxena, Deepika Gupta. An Ayurvedic perspective of Female Infertility - A Case Study. J Ayurveda Integr Med Sci 2024;2:296-299.

<http://dx.doi.org/10.21760/jaims.9.2.47>

Source of Support: Nil, **Conflict of Interest:** None declared.
