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# Role of *Phala Ghruta Uttarabasti* in the management of female infertility w.s.r to follicular study

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## ABSTRACT

**Background:** *Streevandyatva* or Female Infertility is a Gynaecological disorder. The etiological factors include the defect in the immature Sperm and Ovum during the fertile period. Incidence rate according to W.H.O is 20-30% is primary while 70-80% of cases are secondary Infertility. Now a day's maximum number of Female Infertility is due to sedentary lifestyle, Psychological factors, Nutritional deficiency and Stress leads to different condition like PCOD, Obesity, Irregular Menstrual cycle and anovulatory cycle etc. The present study was carried out as a pilot study on 10 subjects of female infertility with the use of *Phalagruta Uttarabasti* followed by *Prakshalana* and *Pichudharana*. Three to five consecutive cycles of *Phalagruta Uttarabasti* was administered, **Posology** - *Uttarabasti* with *Phalagruta* 5ml daily for 3 days. **Diagnostic criteria** - Patients are diagnosed based on signs and symptoms like anovulation, PCOD etc., before and after treatment with USG. **Results** - Among 10 patients, 4 patients - Well response, 2 patients - Improved with follicular study, 3 patients - Poor responded, 1 Patient discontinued the study.

**Key words:** *Infertility, Phalaghrita, Uttarabasti, Pichudharana.*

## INTRODUCTION

*Streevandyatva* or Female Infertility is a Gynaecological disorder. The etiological factors include the defect in the immature Sperm and Ovum during the fertile period. Incidence rate according to W.H.O is 20-30% is primary while 70-80% of cases are secondary Infertility. Now a day's maximum number of Female Infertility is due to sedentary lifestyle,

Psychological factors, Nutritional deficiency and Stress leads to different condition like PCOD, Obesity, Irregular Menstrual cycle and anovulatory cycle etc.<sup>[1]</sup>

According to Ayurveda, *Vata* is considered as psychological factor as it is responsible for the normal functioning of body system. *Vata* is major factor for Infertility, So *Basti Karma* is more beneficial in *Vata* conditions and it gives local oleation with nourishment action. In various Gynaecological disorders *Bastikarma* has been advised through intrauterine route in the form of *Uttarabasti*.<sup>[2]</sup> It helps in nourishment of reproductive system and it will give good environment for ovulation.

Ovarian follicles are small sacs filled with fluid that are found inside a woman's ovaries. They secrete hormones which influence stages of the menstrual cycle and women begin puberty with about 300,000 to 400,000 of them. Each has the potential to release an egg for fertilisation. During ovulation period it will become 3 to 4 follicles are well develop and ready to

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fertilise. Follicles and their size and status are a vital part of assessing fertility and fertility treatment.<sup>[3]</sup>

The formulation used in *Uttarabasti* i.e. *Phalagruta*<sup>[4-6]</sup> is endowed with properties such as cleansing, strength and vitality of reproductive organs due to local action and quick penetrating and spreading property of drug, it enters the channels and absorbed easily and also helps to stimulate the hormonal receptivity, it increases the follicular development and normal function of reproductive system. So present study was carried out to treat the Female Infertility cases through *Uttarabasti* with *Phalagruta* followed by *Prakshalana* with *Panchawalkala Kwatha* and *Pichudharana* with *Phalagruta*. 10 patients of Female Infertility were taken for the present clinical study and laboratory investigations and the cause of Infertility was traced out.

### AIM AND OBJECTIVES

1. Evaluation of clinical efficacy of *Phala Ghruta Uttarabasti* in the management of Female Infertility w.s.r. to Follicular study.
2. To observe the follicles throughout the study

### MATERIAL AND METHODS

10 patients were randomly selected from the OPD of Dept. of Prasootitantra and Sthree Roga, DGMAMC Hospital, Gadag, Karnataka.

**Total sample size:** Single blind group study of 10 patients.

#### Posology

- *Sthanika Abhyanga* with *Dhanvantara Taila* and *Mridu Nadi Sweda* daily for 3 days.
- *Yoni Prakshalana* with *Panchavalkala Kwatha* 3 days before to *Uttarabasti*.
- *Uttarabasti* with *Phalagruta* 5ml daily for 3 days.
- *Yonipichu* with *Phalagruta* for 3 days.

#### Shamana Chikitsa

- *Dashamula Arista* 20ml with equal quantity of water after food 2 times / day.

- *Pushpadhanwa Rasa* 2 tab (1 tab -125mg) 2 times after food
- The above set of treatments was continued for 5 menstrual cycles.
- Treatment schedule - 5 months
- Follow up - 5 months
- Total study duration - 10 months

**Inclusion criteria** - Anovulation, Age 25 to 35 years, Married life within 5 years, PCOD, *Arthavakshaya*, No Issue.

**Exclusion criteria** - Systemic disorders like HTN, Diabetic, Congenital deformity of Reproductive system, Ovarian tumour, Ovarian Cyst, Fibroid Uterus, Tubal Block, PID, STD Diseases.

Note: Screened Male patients of each couple found to be Normal Semen parameters.

#### Diagnostic criteria

- Patients are diagnosed based on signs and symptoms like anovulation, PCOD etc.
- Before and after treatment with USG.

#### Investigations

- Blood: CBC, Blood grouping, RBS.
- Thyroid profile (if necessary)
- Urine Routine
- Abdomen and Pelvic USG with follicular study
- HSG

#### Uttara Basti protocol

- Before *Uttarabasti*, *Amapachana* with *Hingwastaka Churna* - 2.5g, 2times with hot water before food.
- *Kostha Shodhana* with *Haritaki Churna* 5gm at bed times with hot water for three days.

#### Uttarabasti Procedure

##### Purvakarma

- *Uttara Basti* was carried out after admitting the patient in the IPD, Vitals were recorded and

patient was instructed to empty the Bladder before the procedure.

- *Abhyanga* was carried out by *Dhanwantara Taila* on lower back region, lower Abdomen and limbs followed by *Nadi Sweda* for 15 min just before main procedure.
- After that *Yoniprakshalana* with 1000ml of *Panchwalkala Kwatha* was given maintaining all aseptic condition in MOT.

#### Pradhana Karma

- Patients were taken in lithotomic position and cervix was visualized through Sims's speculum and anterior wall retractor.
- Anterior lip of the cervix was with the help of Allis forceps.
- After that measurement was taken with uterine sound. Intra uterine *Uttarabasti* was administered through IUI cannula with 5ml of *Phalagruta* slowly pushed into uterus.
- Maintaining the patients head in lower position.
- After completion of the procedure hot water bag was kept on lower abdomen for 20 min with head in lower position.

#### Pashatkarma

- After *Uttarabasti Phalagruta Pichu* was administered
- Patient in crossed leg position for 30 minutes.

#### Observation

- Not having any complication after procedure
- Slight pain during Uttara Basti.
- BP and Pulse maintained throughout the procedure.

#### Criteria for assessment of result

The evaluation of ovulation of follicular study was carried out on alternate days the 10<sup>th</sup> day of menstruation until ovulation was achieved, depending on the size and maturation of the follicles after *Uttarabasti*.

SN	Follicular size	Grade
1.	8mm to 12mm	0
2.	13mm to 16mm	1
3.	17mm to 19mm	2
4.	20mm to 22mm	3

#### OBSERVATIONS

SN	B.T (Follicular size)	A.T (Follicular size)
1.	0	-dropout-
2.	1	3
3.	0	1
4.	2	3
5.	0	3
6.	2	2
7.	1	1
8.	2	2
9.	1	2
10.	0	3

#### Assessment of overall effect of treatment

- **Well responded:** Increases follicular size 8-10 mm
- **Moderately responded:** Increased follicular size 5-7 mm
- **Poorly responded:** Increased follicular size 1-3 mm

#### RESULT

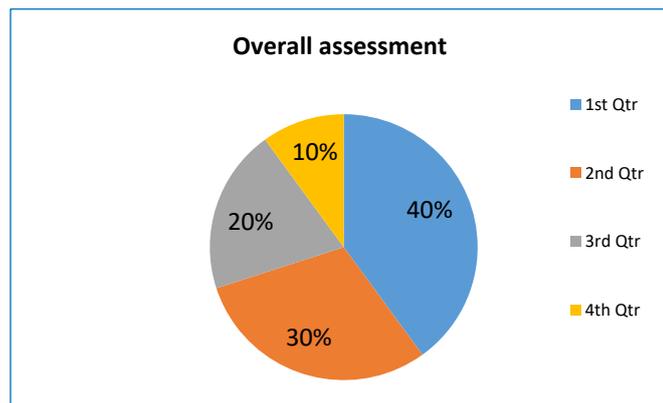
Among 10 patients,

- 4 patients - Well response
- 2 patients - Improved with follicular study
- 3 patients - Poor responded

- 1 patient - Discontinued

**Overall assessment**

Well response	40%
Moderately responded (Improved with follicular study)	20%
Poor response under (since from 2 years)	30%
Drop out	10%



**Mode of Action**

*Hingvastaka Churna* acts as *Amapachana*, *Haritaki Choorna* acts as *Vata Anuloma* relieves constipation.

*Phalagruta Uttarabasti* activates the normal function of *Vata* and stimulates the ovarian hormone.



Ovaries contain receptor which receives the hormone secreted from hypothalamus and pituitary gland, it stimulates the receptors. So that Maturation of follicles and ovulation occurs in cycle. It also increases tubal potency.



It will give normal function of the cilia by its regulating and soothing effects. *Uttarabasti* causes local uterine contraction which stimulates the endometrial and ovarian receptors, which stimulates the receptors and HPO axis regulating; the normal menstrual cycles with ovulation will appear.



Endometrium acts as a bed for Fertilized Ovum where it gets embedded for further development; Unresponsive endometrial may cause implantation failure or abortion in early stage.



*Grutha* directly gets absorbed by cervical epithelial cells acts locally on the tissue. Its passive diffusion across the membrane nourishes and regenerates the epithelial cells and normalizes the cervical secretion and cervical mucosa gets more active.



*Pushpadhanwa Rasa* and *Dashamoola Arista* these 2 *Yoga* are very beneficial in infertility management.

**DISCUSSION**

Ovum is one among the 4 essential factors of conception so process of ovulation is very important in case of fertilization.

Vata is the main responsible factor for development of follicles, cell division etc.

*Uttarabasti* was beneficial in increasing endometrial thickness, uterine artery flow and in achieving ovulation.

*Phalagrutha* possessing Oleating, Nourishment and Phytoestrogenic properties gets easily absorbed through the mucus membrane, glands and vessels.

They Proliferate and nourish the endometrial and Rejuvenates the local tissue potentiating the endometrial receptors which may finally improve the implantation rates promoting Fertilization and Negation of Embryo.

**CONCLUSION**

*Phalagruta Uttarabasti* in management of Female Infertility is more beneficial and increases ovulation factor. It gives tubal potency. In Endometrial factors it increases the blood circulation, helps in proliferation increases the receptive activities of endometrial and cervical mucus secretion. *Uttara Basti* is a great contribution in Ayurvedic field in management of female infertility. *Pushpadhanwa Rasa* and

*Dashamoolarishta*. these 2 *Yoga* also helps in the Female Infertility. Out of 10 patients, 4 patients got good results and other 5 patients had moderate relief.

#### REFERENCES

1. D.C.Dutta (author), Hirala konar (editor) Text book of gynaecology, chapter 15, 4<sup>th</sup> edition reprint, Calcutta, New central book, Agoney (P) Ltd page no 212.
2. P.V.Tiwary, A text book of Ayurvediya Prasuti Tantra Evam Stree Roga, Part -2, page no 297-300.
3. Dawn C.S, A Text book of. Dawn book gynaecology & Contraceptive, 3<sup>rd</sup> chapter, 13<sup>th</sup> Edition reprint, 1994, Calcutta, page no 34.
4. Acharya Vagbhat, Astanga Sangraha, Uttarantra, Translated by K.R Shrikant Murty, Chaukhamba Orientalia Publication, Varanasi, shloka 39/81.

5. Acharya Vagbhat, Astanga Hridaya, Uttarantra, Translated by K.R Shrikant Murty, Chaukhamba Orientalia Publication, Varanasi, Shloka 34/63-67.
6. Acharya Bhavamishra, Bhava prakasha, commentary by Dr. Bulusu Sitaram, Chaukhamba Orientalia Publication, Varanasi, Shloka 70/ 54, 56, 58, 61 Yonivyapisha , page no 80,81
7. Dr. Rumeena Khan, A Clinical study of the efficacy of Jyotishmatyadi Kalka in the Management of Nastarthava w.s.r. to Annovulation.

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