

TREATMENT OF FEMALE INFERTILITY WITH *BALA TAIL MATRA* *BASTI* –A CASE STUDY

¹*Dr. Deepika Baranwal, ²Dr. Hetal H. Dave and ³Dr. Sushila Sharma

¹*M.S. Scholar, ²Assistant Professor and ³Associate Professor and

HOD, P.G. Department of *Prasuti Tantra* and *Stri Roga*, National Institute of Ayurveda,
Jaipur, (RJ) India 302002.

Article Received on
17 March 2017,

Revised on 07 April 2017,
Accepted on 27 April 2017

DOI: 10.20959/wjpr20175-8425

***Corresponding Author**

Dr. Deepika Baranwal

M.S. Scholar, P.G.

Department of *Prasuti*

Tantra and *Stri Roga*,

National Institute of

Ayurveda, Jaipur, (RJ) India

302002.

ABSTRACT

Infertility is defined as the inability of a couple to achieve conception after 1 year of unprotected coitus and is a common disorder of about 10% of female aged 18 to 44yrs. In the present study we report a case of 26 years old female patient, presented in NIA OPD No 27 on 22 July 2015 with complaints of wants issue. Her menses were regular with no pain and normal flow. Her active married life was of 6 years. Routine investigations such as CBC, ESR, LFT, RFT, RBS, VDRL, HIV, HBs Ag, Thyroid profile were carried out. USG for uterus and adnexa was done. There was nothing abnormal in ultrasonography. Then diagnostic laparoscopy was done, there was flimsy adhesions in both the fallopian tubes and also little peritoneal spillage was present on both the sides. We used *Bala Taila Matra Basti* thrice weekly after completion of

menses to treat this case. The study was conducted on one patient. The result of drug showed that patient was conceived.

KEYWORDS: Infertility, Flimsy adhesions, *Matra Basti*, *Bala taila*.

INTRODUCTION

Becoming a mother is the most stupendous feeling a woman can ever experience. In today's fast world due to lack of time, mode of life and increasing mental stress, infertility is emerging as a major disorder affecting the social and psychological aspect of the life of masses.

Infertility is defined as the inability of a couple to achieve conception after 1 yr of unprotected coitus^[1] and is a common disorder of about 10% of female aged 18-44yrs. Conception depends on the fertility potential of both the male and female partner. The male is directly responsible in about 30-40%, the female in about 40-55% and both are responsible in about 10% cases.^[2]

According to FIGO manual (1990) causes are^[3]- **Tubal and Peritoneal factor** (25-35%), **Ovulatory factor** (30-40%) and **Endometriosis**-1-10%.

Explaining the Tubal factor various causes of the obstruction of the tube may be due to –

- Pelvic infections causing- Peritubal adhesion Endosalpingeal damage
- Previous tubal surgery or sterilization
- Salpingitis isthmica nodosa
- Tubal Endometriosis
- Polyps or mucous debris within the tubal lumen

Among the above mentioned causes in cases of a peri tubular adhesion the ciliary action of the tube is hampered, which does not allow the sperm to move into the fallopian tube and thus results in no conception.

Aacharya Susruta equating germination of a seed with achievement of conception says that if *ritu* (season or period near ovulation or *ritukaala*), *beeja* (seed i.e. ovum and sperms), *kshetra* (field i.e. female reproductive system) and *ambu* (water i.e. nourishing substances) assemble together, the conception will definitely occur. Vitiating in any of these factors cause infertility.

CASE REPORT

In the present study we report a young female patient aged 26 y from Jaipur, Rajasthan came in the NIA OPD No 27 of Prasuti and stri roga of National Institute of Ayurveda on 22 July 2015 with complaint of inability to conceive after 4 y of regular unprotected coitus.

Investigations

All routine investigations like complete blood count (CBC), random blood sugar (RBS), thyroid profile were within normal limit. HBsAg, HIV, VDRL were negative. Antisperm antibody test was negative. USG of uterus and adnexa were done and showed no sign of any congenital malformation, and reports were normal.

For follicular study USG was done which was normal and showed evidence of ovulation. Then diagnostic laparoscopy was carried out to know tubal patency which showed **Flimsy adhesion in both the tubes with bilateral little peritoneal spillage**. Also husband's semen analysis was done and all parameters were within the normal limit.

Treatment

We gave *Bala Tail Matra Basti* thrice weekly after completion of menses for three consecutive cycles. The patient visited the IPD alternate day for *Matra basti* for three months. We gave her *Bala tail Matra Basti* mixed with pinch of *Saindhaw lavan* as mentioned in our samhita. After three months patient had conceived.

DISCUSSION

In the present case we are discussing the role of *Bala Tail Matra Basti* which helps to improve the condition of fallopian tube and facilitate the movement of sperm into the fallopian tube thus helps in fertilization and implantation.

Aacharya Charak says that all the gynaecological disorder is because of vitiation of VATA.^[5] *Aacharya Charak* also says that *BASTI* is the *ardh chikitsa* of *vata*. So in this case we used *Basti chikitsa* to normalize VATA dosha. We gave *Tail Basti* because of its *Vatshamak* properties.

Tail has a property of *vatshamak* and *aam paachan* because of its *Ushna veerya*. Also due to its *Vyavayi* and *Sukshma guna* it enters into the small channels and removes obstruction and clear *srotas*.

BALA (Sida Cardifolia Linn.)-This plant grouped under *Brimhaniya* (increases the body bulk), *Balya* (strengthens the body), *Prajasthapan* (herbs used to cure infertility) and *Vatasamshaman* (herbs which normalize *vata dosha*). It has *Laghu*, *Snigdha*, *Pichchhil* gunas, *Madhur ras*, *Madhur Vipaka* and *Sheet Veerya*.^[6]

Because of *Snigdha* and *Madhura guna* *Bala* has *Vatashamak* properties so it is used to treat the infertility as *vitiation* of VATA dosha is one of the leading factors for infertility. Due to its *Snigdha* and *Pichchhila guna* it might be helpful to facilitate the movement of sperm in fallopian tube. Being *Sheeta Veerya* *Bala* also has anti-inflammatory property. These mentioned properties of *Bala* make it as a promising therapy for infertility basically by bringing up the fertilization and implantation.

CONCLUSION

In the present case history we report a case of infertility due to flimsy adhesion of both the fallopian tube with bi-lateral little peritoneal spillage. We have given the treatment of *Bala Tail Matra Basti* because of the medicinal properties of *Bala*. *Bala Tail* has facilitated the movement of sperms into the fallopian tube and thus resulted in the fertilization. At the end of three months of treatment the patient has conceived. Further studies need to be done with this treatment in similar kind of cases so the data can be statistically more significant.

REFERENCES

1. Jeffcoate's Principles of Gynaecology, 8th international Edition, New delhi, Jaypee Brothers Medical Publishers (P) Ltd.: 2014; p-650.
2. D.C. Dutta, Text Book of Gynaecology including contraception, 5th edition, Kolkata, New Central Book Agency (P) Ltd: 2009; p-220.
3. D.C.Dutta, Text Book of Gynaecology including contraception, 5th edition, Kolkata, New Central Book Agency (P) Ltd: 2009; p-222.
4. Ambika Datta Shastri, Sushruta samhita Shareer sthaan 2/35, Ayurveda Tatva Sandeepika, Hindi Vyakhya, Part 1, Varanasi, Chaukambha Sanskrit Sansthan, 2010; p-19.
5. Pt. Kashinath Shastri, Dr, Gorakhnath Chaturvedi, Charak Samhita Chikitsa sthan 30/115, Vidyotani Hindi commentary Chaukhamba Bharati Academy Varanasi, 2009.
6. *Bhavaprakasa Nighantu* commentary by Dr. K. C. Chuneekar Chaukambha Bharati Academy.