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Case Study

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AN AYURVEDIC MANAGEMENT OF INFERTILITY: A CASE STUDY

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ABSTRACT

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Infertility is a state in which a successful pregnancy has not occured despite engaging in normal intercourse for a duration of 12 months. The etiology of female infertility is multifactorial. Ayurveda provides reassurance of a normal pregnancy through the appropriate maintenance of Garbha Samgraha Samagris i.e. Rutu, Kshetra, Ambu, Beej and normal mental health. All the causes of female infertility can be attributed to an imbalance in Garbha Samgraha Samagri and mental factors. In this particular case, the patient has experienced primary infertility for a period of six years and sought ayurvedic treatment subsequent to allopathic consultation and treatment procedures. Recurrent pregnancy lossi. e. Putraghni yonivyapad and

advocates specific treatments such as *Uttarbasti* for this condition. Given that *yoniyapada* leads to infertility due to vikrit Vata, the treatment of Vata, namely Bastichikitsa, is considered highly beneficial in managing Infertility. Along with this Virechan and Raktmokshan was done along with shaman chikitsa.

KEYWORDS: Primary infertility, Putraghni yonivyapad^[2] Garbha Samgrah Samagri, Uttarbasti, [3] Virechan and Raktmokshan.

INTRODUCTION

Infertility can be defined as a medical condition affecting the reproductive system, characterized by the inability to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse.^[4] It has been estimated that approximately 10% to 15% of couples in their reproductive years experience difficulties with fertility. Fertility is a complex issue that affects both partners, with the male factor accounting for 30% to 35% of cases, the female factor accounting for 40%, and both partners contributing approximately 10% to 15% each, while 10% to 15% of cases remain unexplained. Female infertility can be attributed to various factors, including issues with ovarian and ovulation function, the fallopian tubes, the uterus, and the cervix.

Ayurveda provides detailed insights into the four crucial factors that influence conception, namely *Rutu* (menstrual cycle), *Kshetra* (the womb, also known as "*Yoni*"), *Ambu* (cervical mucus) and *Beeja* (Ovary and Sperm). Among these, *Kshetra* refers to the *garbhashaya*, the site where fertilization and implantation occur. Any abnormalities in the *yonipradesha* (reproductive organ) can hinder successful conception. The majority of recurrent abortion occurs due to genetic factors, immunological, endocrine factors, infection, are the most common causes of first trimester abortion. Here, we put forward a case of recurrent abortion with hypothyroidism. The condition was successfully treated with Ayurvedic protocol.

CASE PRESENTATION

A female willing to conceive of 39 years approached with a marital life of 6 years came to OPD in December 2022 with complaint of multiple abortions and previously diagnosed hypothyroidism. She had also gone through IUI for 3 times but not gained satisfactory results. Her menses were regular with normal flow, minimal clots and dysmenorrhea. LMP was 27/10/2022. Recent IUI was done in November 2022 and conceived but unable to carry it successfully as previously.

Not shown any specific history other than hypothyroidism. Male partner is also a known case of hypothyroidism since 4 years.

Her HSG reveal bilateral patent fallopian tubes with loculated spill. Distal dialation seen more in right side than left. USG seemed normal. Serological study showed presence of CMV IgG antibodies which suggest previous infection. Along with this TSH, Prolactine and AMH levels were slightly abnormal. Her blood group was O positive.

Treatment Given

After thorough examination Ayurvedic treatment was planned including both *shodhan and* shaman.

Uttarbasti was done for sthanik shodhan along with Virechan and Raktmokshan for sarvdehik shodhan for successive 2 months. Shaman chikista was given after detailed study which

include Chandraprabha vati, Mahamanjishthadi ghan vati, Paripathadi Kashay and Kamadudha.

With above mentioned medication patient approached with history of amenorrhea and when advised for UPT it found positive. Almost a year later baby was delivered in November 2023.

DISCUSSION

Infertility is a relatively common reproductive health concern in todays health issues. Here in this case of recurrent abortion with CMV infection. As mentioned by Acharyas study of Garbh Sambhav Samagri in case of reproduction plays crucial role. Rutu (Menstruation), Kshetra (Normaly Operationg Reprodutive Organs), Ambu (Digestive Juices) and Beej (Healthy sperm and ovum). In respective case of infertility, Kshetra entity appeared to be disturbed from normal. The Uterus (Garbhashaya) became weak due to local infection was its cause was noticed. Also Ras dhatu was slightly disturbed as she showed high TSH levels. Recurrent Abortions considered as *Putraghni Yonivypad* according to Ayurved.

Disturbed vata is primary cause in all yonivyapadas. Local Infection is considered as vitiation of Pitta which further causes Rakta Dushti. Ras- Rakta togetherily can be considered Ambu as they play vital role in nourishment of Garbh. Hence Uttarbasti was performed for Vatanuloman and to maintain Garbhashaya healthy as Sthanik Shodhan. Along with this Sarvedhik Shodhan was taken into consideration to maintain overall equilibrium of tridoshas, dhatus and malas. Virechan and Raktmokshan was done for this purpose.

Shaman Chikista was planned to maintain normalcy with Chandraprabha vati, Mahamanjishtadi Ghan Vati, Paripathadi kashay and Kamadudha. Chandraprabha vati is Rasayana, Balya, Tridosha Shamaka properties and also acts as catalyst. It is truly a medicine for all diseases and hence called as Sarvaroga Pranashini and is also been used in ailments of reproductive health in women. Maha manjishthadi ghanvati is an immunomodulator and blood purifier which aimed to be pacify Pitta and Rakta. Paripathadi *Kashay* and *Kamdudha* helped for *pitta shaman* along with *rakta prasadan*.

Thus, after 2 months of the treatment protocol adopted in this case successfully served in establishing a healthy conception by normalizing the Garbh Sambhav Samagri and delivered a healthy baby.

CONCLUSION

According to Ayurveda recurrent abortion is specified under Putraghni yonivyapad and specific treatment like *Uttarbasti* is described for the same. Along with this *sarvdehik* shodhan like Virechan and Raktmokshan plays important role in dosha elimination with dhatu poshan which is key factor to maintain Garbha sambhav samagri to fruitful conception and its maintenance throughout pregnancy. Ayurvedic treatment works marvelously in this circumstance, where all other modern procedures fail.

REFERENCES

- 1. Dr Anantram Sharma, Sushrut Samhita, Part 2, Sharrir Sthan, Chapter 2, Verse 33, Page no.21.
- 2. Charak Samhita, Chakrapani commentary, Chikista Sthan, 30, Verse 28, Edition 2020, page no.636.
- 3. Charak Samhita, Chakrapani commentary, Chikista Sthan, 30, Verse 41, Edition 2020, page no.636.
- 4. https://www.who.int/news-room/fact-sheets/detail/infertility.
- 5. Lata Rai et al. Ayurvedic Managment of Putraghni yonivyapad IJAPR, March 2022; 10(3).