

CASE STUDY ON BANDHYATAVA

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INTRODUCTION

Infertility is failure to conceive after 1 year of regular unprotected coitus. Female infertility is responsible for 45% of all etiology.

Description of Patient: A female patient age 20 years came with complaints of severe pain before menses with weakness and vertigo.

Chief complaints

Severe lower abdomen pain before menstruation since menarche.

Weakness

vertigo

Patient want to conceive since 5 months with unprotected coitus.

Marital life 1 year.

History of Present illness

According to patient she was suffering from severe lower abdomen pain with vertigo and weakness since menarche. She was not taken any

treatment for this before and she also want to conceive, then she came to SBMN Ayurvedic hospital for treatment.

Past History

Not any disease.

Family History

Not any disease.

Personal History

Vegetarian without any addiction of smoking and alcohol.

Bowel habits regular, no constipation with sound sleep.

Menstrual History

Regular menstrual cycle with duration of 28-30 days.

Quantity 2-3 pads per day for 5days cycle

Severe pain before and during menses.

Small clots present.

History of present illness

She took hormonal treatment for 2-3 times but no improvement could be achieved. She had Irregular menstrual cycles and her menstrual picture was scanty menses since last few years. Her S. AMH level was WNL, and serum prolactin levels were WNL and S. TSH level was within normal range (4.5 in Dec 22). Endometrium thickness is 7.9 mm on day 12 of menstrual cycle.

- **Past history:** past medical History was negative for Diabetes mellitus /Hypertension / Hypothyroidism / major Illness and also surgical history was also negative.
- **Family history** - No H/O of same illness in any family members
- **Menstrual History** -- Menarche: 13 years, Cycle-Irregular, Hypomenorrhea (Scanty menses lasts for only 1 to 2 days)
- **Obstetrical History-** Not conceived after 1 year of marriage life without using of contraception.

Systemic Examination

CVS- normal heart rate and blood pressure, cardiac sounds were normal, no abnormal clinical findings were found

CNS –conscious & well oriented, all reflexes were found normal, no abnormal clinical findings were found

R/S – Normal breathing, no abnormal pulmonary/respiratory sounds were found. R/R21/min

P/A - soft, no organomegaly found. no lump/mass/ Tenderness found.

P/V – on Bimanual examination: -Uterus - Anteverted & Normal in size, no tenderness felt

Per Speculum examination: - cervix and vaginal walls were normal, Cervix healthy & normal size No discharges, no any abnormality was found.

Ashtavidha Pariksha

- 1) Nadi - 82/min
- 2) Mala- Prakrit, once a day
- 3) Mutra – Prakrit, 5-6 times a day
- 4) Jihwa- Prakrit, Aipta
- 5) Shabda- Avushesha
- 6) Sparsha- Anushna Sheeta
- 7) Drika- Avishesha
- 8) Akriti- Samaakrity

Dashavidha Pariksha

- 1) Prakriti – Vatapittaja
- 2) Vikriti - Madhyama
- 3) Sara -Madhyama
- 4) Sanhanana- Madhyama
- 5) Pramana – Madhyama
- 6) Satmaya - Madhyama
- 7) Satva – Mishra Rasa Satmya
- 8) Aahara Shakti - Madhyama
- 9) Vyayama shakti – Avara
- 10) Vaya -Madhyama

Laboratory investigations: (as done on 08/12/22)

- T3 - 1.43
- T4 – 8.91
- TSH- 3.13

Ovulation Study

Day 10	DF rt. Ovary 5-7 mm	DF LT. Ovary 14mm, 10mm, 8mm, 8mm	ET – 6mm
Day 11	Do	Do	7.1
Day 12	9mm, 8mm, 8mm	15mm, 10mm, 9mm, 9mm	7.9

USG ON 25th sept. 2024 - Cervix is bulky and shows few nabothian cyst, cervicitis.

Mild free fluid seen in POD – PID changes.

On 29 Jan 2024 – Single Live Intrauterine Foetus of 10 weeks 5 days.

Treatment

1. **Matra** basti with dasmoola taila 30ml od for 7 days * 3 months after menstrual cycle.
2. Kanchnaar gugglu 2 bd * 3months with water AF.
3. Dasmooolarishta 20 ml bd * 6 months with equal amount of water after food.
4. Punaranava mandura 2 bd * 6 months with water after food.
5. Medohara gugglu 2bd * 3 months with warm water after food.
6. Hingwastaka churna 1tsf bd * 3 months with warm water before food.
7. Tab. Conceive N 2 bd on 2nd day of cycle for 7 days* 3 months with water after food
8. Arogyavardhini vati 2bd with warm water * 3 months after food.
9. Pushpadhanwa rasa 2bd * 3 months with water after food
10. Phala ghrita 1tsf bd with milk bf * 6 months
11. Lakshmanarista 20 ml bd * 3 months with equal amount of water.

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Lab No. : 012309250088
Patient Name : [REDACTED] Age/Sex : 20 YRS/FEMALE
Referred By : Dr. SONAM Reg. Date : 25 Sep 2023

ULTRASOUND OF LOWER ABDOMEN WITH T.V.S.
(Done with 3D/ 4D Colour Doppler Ultrasound Machine)

REPORT:-

- Urinary bladder empty.
- Uterus is anteverted & showing normal size with normal echotexture.
- Endometrial thickness is 7.5 mm. Cervix is bulky & shows few nabothian cysts. ADVISED: R/O cervicitis & pap smear.
- B/L ovaries show normal size & echotexture.
- No adenexal mass lesion seen on both sides.
- Mild free fluid seen in POD -PID changes.

ADVISED:- Clinical correlation & further investigations.

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LABORATORY TEST REPORT

Patient Name: [Redacted]
 Age/Gender: 20 Year(s) Female
 Sample/SID: SERUM/2322281
 Ref. Doctor: [Redacted]
 Ref. Customer: [Redacted]

Patient Id: 1329707
 Ordered By: HR0039
 Sample Drawn Date: 2024-01-29 19:15:00
 Sample Regn Date: 2024-01-30 07:30:54
 Sample Report Date: 2024-01-30 08:59:00

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
Thyroid Profile I			
T3 (Tri Iodothyronine)	1.43	ng/ml	Adult: 0.60-1.81 Paediatric: 2weeks to 4months: 1.2-2.4 1-14years: 1.05-2.45 Newborns: 0.73 - 2.88 Pregnancy: 1st Trimester: 1.21-3.08 2nd&3rd Trimester: 1.52-3.62 Adult: 3.5-12.6 Paediatric: 2weeks-4months: 7-15 1-14years: 6.4-13.3 Pregnancy: 1st Trimester: 7.8-16.2 2nd & 3rd Trimester: 9.1-18.3
T4 (Thyroxine)	8.91	ug/dl	Adult: 0.35-5.50 Newborns: 0.70 - 15.2 Paediatric: 2weeks-4 months: 1.7-9.1 <12 months: 1.36 - 8.8 1-6 years: 0.85 - 6.5 7-12 years: 0.28 - 4.3 Pregnancy: 1st Trimester: 0.1-2.5 2nd&3rd Trimester: 0.2-3.0
Thyroid Stimulating Hormone (TSH) , ULTRASENSITIVE	3.13	uIU/ml	

Interpretation:-In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated and in primary hyperthyroidism, TSH levels will be low. In Hypothyroidism there is decreased production of thyroid hormones by the thyroid hence the person may experience symptoms such as weight gain, dry skin, constipation, cold intolerance, and fatigue. Iodine deficiency and Hashimoto thyroiditis is the most common cause of hypothyroidism. If the thyroid releases inappropriately large amounts of T4 and T3, the affected person may experience symptoms associated with Hyperthyroidism, such as rapid heart rate, weight loss, nervousness, hand tremors, irritated eyes, and difficulty in sleeping. Graves disease is the most common cause of hyperthyroidism. Several medications including dopamine and glucocorticoids or excessive use of dietary supplements containing Biotin may affect TSH results. For diagnostic purpose a test result should always be assessed in conjunction with the individual's medical history, clinical examination and other findings.

Dr Annu Sajeev
MD, PATH, DNB, PATH, ERCPATH IUK

Dr Jasneet Kaur
MD, Pathology, ERCPATH IUK

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Lab ID: 2023_10_31956
 UHID: NDC_2023_027770
 Doctor Name: Dr. Sonam
 Reported on: 23-Oct-2023 11:58 AM

Patient Name: [Redacted]
 Age/Sex: 20 / Female
 Registered on: 23-Oct-2023 09:05 AM
 Dispatched on: [Redacted]

U/S Ovulation Study TVS
 (Done with High Definition 3D / 4D Colour Doppler Ultrasound Machine)

Report:-
 LMP: 14.10.2023

Date	Day of cycle	Dominant follicle Right ovary	Dominant follicle Left ovary	Endometrial Thickness.	POD Fluid	Remarks
23.10.2023	10th	Right ovary multiple 5-7mm	14mm, 10mm, 8mm, 8mm	6mm	No	
24.10.2023	11th	do	do	7.1 mm	NO	
25.10.2023	12th	4mm, 8mm, 8mm, 7mm	15mm, 10mm, 9mm	7.9 mm	NO	

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16 Slice CT Scan - Digital X-Ray - 3D/4D Ultra Sound - Colour Doppler - Well Equipped Lab - Interventions

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Lab ID	: 2024_01_36416	Patient Name	[REDACTED]
UHID	: NDC_2023_027770	Age/Sex	: 20 / Female
Doctor Name	: Dr. Sonam	Registered on	: 29-Jan-2024 12:26 PM
Reported on	: 29-Jan-2024 13:56 PM	Dispatched on	:

U/S of Foetal well being & gestation age
(Done with HIGH DEFINITION 3D / 4D Colour doppler Ultrasound machine)

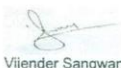
Report:

- Single intrauterine gestation sac with yolk sac and foetal node seen.
- Cardiac activity is present. FHR= 168 beats/min.
- CRL is 3.77cm corresponds to gestational age of 10 weeks 5 days approx.
- EDD = 21.08.2024approx.

IMPRESSION:- Single live intrauterine fetus of 10 weeks 5 days.


ADVISED:- NT/NB Scan at 11-13 weeks.

(I hereby declare that while conducting ultrasonography I have neither detected nor disclosed the sex of foetus of the pregnant woman to anybody in any manner).


Vijender Sangwan

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