

**MANAGEMENT OF INFERTILITY DUE TO LEAN PCOS: A CASE STUDY****Dr. Vidya Sambhaji Jadhav\***

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**ABSTRACT**

Infertility is a condition of female or male reproductive system defined by the failure to achieve a pregnancy after 12 months or more of regular unprotected sexual intercourse. Infertility may occur due to male, female or unexplained factors. It develops due to fault in either partner or both of them. According to ayurveda there are main four important factors for conception which are *Ritu*, *kshetra*, *ambu*, *bija*. Infertility is not an independent disease rather a cardinal feature of many diseases. Abnormalities of properly functioning *vayu* and *sadbhav* as causes infertility. The most debilitating underlying disorder that causes infertility is PCOS which is not only reproductive endocrinopathy but also a metabolic disorder. Menstrual irregularity is the most common complaint. There are two types - Obese and lean PCOS. In people with lean PCOS the main issue regarding reproduction in infertility is due to anovulation. *Yogabasti krama* with internal medicine is used in infertility as it induces ovulation and regulates menstrual cycle. *Ayurveda* aims to treat the disease from its root cause. It is not only balances the *doshas* but also includes preventive measures like *pathya aahar* and *vihar* (dietetics and mode of lifestyle).

**KEYWORDS:** Lean PCOS, Infertility, Vayu, Yogabasti.

**INTRODUCTION**

Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus.<sup>[1]</sup> It is common in 10-15% of couples. As per the statistics female infertility constitutes 40-55% and male infertility contribute 30-40% of the case. Primary infertility denotes those

patients who have never conceived.<sup>[2]</sup> Secondary Infertility indicates previous pregnancy but failure to conceive subsequently.<sup>[3]</sup> The most common problem which causes infertility is PCOS and the diagnosis of PCOS is based on anovulation, elevated androgen levels and presence of multiple ovarian cysts on usg report. These condition presented with signs and symptoms such as obesity, amenorrhea and hirsutism. A clear description of PCOS in *ayurved Samhita* is not available. After considering clinical features, *Dosha* involvement management principles of *Vandhya* were indicated. According to *ayurveda* infertility is correlated to *Vandhyatva*.<sup>[4]</sup> According to *ayurveda* there are four main important factors important for conception that is *Ritu, ambu, beeja, kshetra*.<sup>[5]</sup> There are two types of PCOS- obese and lean. In lean PCOS the main problem regarding infertility is Anovulation. In present study *yogabastikrama* was given. *Anuvasan basti* of *sahachara taila* and *niruha basti* of *dashmula kwatha* is used in infertility as it has *vataharaa* properties and *sahachara taila* induces ovulation and regulates menstrual cycle. *Basti* and *Taila* is *param aushadham* for *vata* according to *Acharya Vagbhat*.<sup>[6]</sup>

## CASE STUDY

### AIMS AND OBJECTIVES

To see effectiveness of *Sahachara taila anuvasan basti* and *Dashmula kwatha niruha basti* in the management of infertility along with internal medications.

### MATERIALS AND METHODS

Classical text of *ayurveda*, research journals, articles and internet were taken as the source of present study.

### Patient Information

A 22 Years married couple presented inability to conceive since 1 year with unprotected coitus and had menstrual irregularities since 3 years. The semen analysis report of husband is found to be normal.

She also had complaint of backache and generalized weakness during menses. She visited Prasuti Tantra evum Striroga department opd of SMBT Ayurved College and Hospital, Igatpuri, Nashik for further management.

### HISTORY OF PRESENT ILLNESS

Patient was anxious for child since 1 year and had menstrual irregularities since 3 years.

She also had complaint of backache and generalized weakness during menses. She visited Prasuti Tantra evum Striroga department opd of SMBT ayurved college and hospital, igatpuri, Nashik for further management. The menstrual history of the patient showed 5 days duration with pain and the interval of 3-4 months between next cycle. They underwent 1 year of hormonal treatment. Patient also complained backache and weakness during menses.

### **History of Patient**

#### **Personal history**

- Diet – mix diet
- Appetite – normal
- Sleep - sound
- Medication - none
- Addiction – no any
- Past medical/ surgical history- not significant
- Family history- not significant

**Marital history-** 2 years ago.

**Obstetrics history** – Nulliparous.

### **ASHTAVIDHA PARIKSHAN**

- Nadi – 80/
- Mala -one time a day
- Mutra – 4-5 times a day.
- Jivha – Ishat sam
- Shabda – Spashta
- Sparsha – Anushna
- Druk – Avishesh
- Aakruti- Krush

### **General Examination**

Temperature – 97°F

Respiratory rate – 18/min

BP- 110/70 mm hg

Height -160cm Weight –44 kg

**Systemic Examination**

CVS- S1 S2 normal

CNS- Conscious and Oriented

RS- AEBE Clear.

P/A - Soft and Non tender

**Local Examination P/S**

No any discharge

Cervix – Appears normal

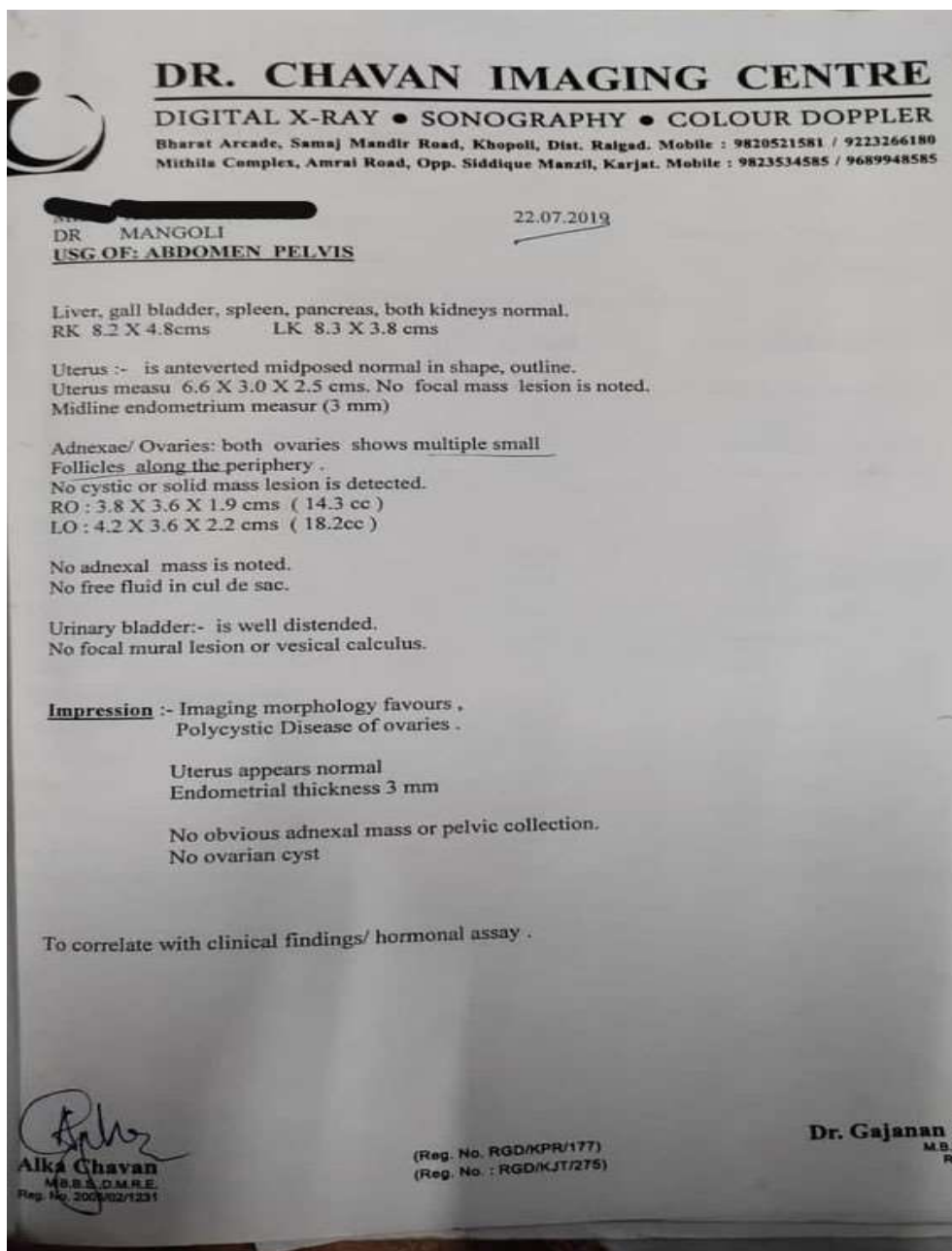
**P/V:** Uterus – anti verted, anti – flexed, normal sized

B/ L -Fornix – free and non tender

**Investigation**

- Hb – 13.1 g/dl
- Wbc –  $5.2 \times 10^3/\text{ul}$
- Platelet –  $222 \times 10^3/\text{ul}$
- Sr testosterone – 0.41 ng/ml
- FSH – 6.11 mIU/ml
- LH – 13.65 mIU/ml
- Prolactin - 11.06 ng/ ml
- T3 – 0.82
- T4 – 9.1
- TSH – 2.73
- **Semen Analysis**
- Volume – 2.5 ml
- Appearance- slightly hazypH – alkaline
- Fructose- positive
- Sperm count – 45 million /ml

## USG(A+P) –Before treatment



## TREATMENT PROTOCOL PANCHKARMA

- *Sarvang Snehana Swedan* for 8 days for 3 consecutive cycles
  - *Yogabastikrama* for 8 days for 3 consecutive cycles.
  - *Anuvasana basti* with *sahachara taila* 120 ml
  - *Niruha basti* with *dashmula kwatha* 500ml
  - **Oral Medications**
    - *Chandraprabha vati* 250 mg
- 2tab BD for 15 days

- *Ampachak vati* 250 mg  
2 tab BD for 7 days
- *Tab Pushpadhanva rasa* 125 mg  
2 tab BD for 15 days
- *Raja pravartini vati* 250 mg  
1 tab BD for 5 days
- *Cap Falova* 250mg  
1 tab BD for 1 month
- *Aarogyavardhini vati* 250 mg  
2 tab BD for 7 days

## OBSERVATION AND RESULTS

After the treatment patient got regular menses after yogabastikrama and internal medications and she got concieved after 4 months.

**SMBT HOSPITAL** SMBT IMSRC®  
Nandihills, Dhamangoan, Gholi, Tal. Igatpuri, Nashik.

Name :	Age/Sex :	23 YEARS/F
Ref By :	DR. KIRAN RAJOLE M.D.	Date : 07 Feb 2023

**EXAM: USG OF GRAVID UTERUS**

Single live intrauterine gestation is noted in changing presentation. Foetal cardiac activity & movements appeared normal. FHR = 170 BPM. Foetal pole and yolk sac are seen well. Adequate amniotic fluid is noted. Internal os is closed.

**Foetal biometry:**  
CRL = 20 mm = 8 WK 4 D  
LMP: 06 Dec 2022

	Gestational Age	EDD
By LMP	9 Weeks and 0 Days	12 Sep 2023
By USG	8 Weeks and 4 Days	15 Sep 2023

No adnexal mass. No cystic lesion.

**IMPRESSION:**  
SINGLE LIVE INTRAUTERINE PREGNANCY OF 8 WKS, 4 D +/- 1 WK.  
Adv: NT-Scan.

All congenital anomalies may not be detected on USG.  
We've neither detected nor disclosed the sex of her baby to anybody in any manner.

I, **DR. SHRIKANT PATIL**, declare that I have neither detected nor disclosed the sex of the fetus to anybody.

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## DISCUSSION

According to Ayurveda the PCOS involves *Kapha* and *Vata Dosha*, *Meda*, *Mamsa*, *Rakta Dhatus*. According to Ayurveda this disease *Vandyatva* due to *nashtartv*. *Aavrana* of *Artavaha* The word *Aartava* is used in the *Samhita* in connection with menstrual blood, ovum, and ovarian hormones. *Aavrana* of *Artavaha srotas* chief causative factor. *Apana vata* got obstructed by increased *kapha* disturbed the normal functioning of *Artava*. According to Ayurveda disintegration of *Samprapti* is the way to treat the disease. Site of origin of the disease is *koshta* the specific site is *Garbhashaya*. The pathology is an obstruction in the pelvic cavity (*Apana Kshetra*) causing disorders in the flow of *Vata*. This in turn leads to an accumulation of *Kapha* and *Pitta*. The treatment principle is to clear obstruction in the pelvis, normalize metabolism and regulate the menstrual system (*Aartava Dhatu*). *Kapha* reducing, insulin enhancing and hormone rebalancing drugs help to the relieve symptoms of Polycystic Ovarian Syndrome Main objective of treatment was to regulate the menstrual cycle. *Mulsthana* of *Aartavaha srotas* is *Garbhashya* and *Aartava vahini dhamani* which is the main site of *Apanvayu*<sup>[7]</sup> In this disease condition mainly *Apanvayu dushti* is there and *Basti* is the most effective for *vata*. It works on correcting the underlying root cause along with symptoms of the diseases. *Basti* works on the whole body and regulates the hypothalamic-pituitary-ovarian axis which helps in normalization of ovarian and menstrual cycle. Local effect of *Basti* are like Parasympathetic activity is mainly responsible for the *Apana Vayu* activity and stimulate the parasympathetic nerve supply which in turn helps for the maintenance of normal cycle. *Chandraprabha Vati* help to clear obstruction and normalize the *srotas*. Capsule *Falova* increases the chances of conception in infertility. It nourishes the reproductive system and facilitates regular menstruation and ovulation. *Aampachak vati* enhances properties of *Rasa dhatu*. *Pushpadhanva rasa* helpful in ovulation by balancing hormones in the body. Along with *shamana* drugs its can give better results So, for this patient we choose *Basti* treatment as *Vatahara chikitsa*.

## CONCLUSION

PCOS is mainly due to *Avrana* of *Vata*. In ayurvedic classics as *basti chikitsa* is considered *ardha chikitsa* for *vata* patient was given *yogabastikrama anuvasan*. *Sahachara taila anuvasan* and *dashmula kwatha niruha basti* gave best results in this patient along with internal medications. Patient got conceived after 4 months of treatment and had no side effects. Due to *vitiated Vata* and *Kapha Vatanulomak*, *Kapha Shaman*, and *Pitta Vardhan*, *Aamapachana*, *Artava Janana Chikitsa*, are effective. Therefore, we are giving



this treatment regime for polycystic ovarian syndrome all these drugs have properties which helps all the symptoms of PCOS. *Sahachara* is used to remove unwanted follicles. *Sahachara* oil is used to destroy cysts on ovaries and help stimulate the follicular maturity.<sup>[9]</sup>

## REFERENCE

1. D.C. dutta textbook of Gynaecology edited by hiralal konar, Jaypee brother medical publishers 8th edition, 2020; Chap. 17: page- 186.
2. D.C. dutta textbook of Gynaecology edited by hiralal konar, Jaypee brother medical publishers 8th edition, 2020; Chap. 17: page- 186 2 paragraph.
3. D.C. dutta textbook of Gynaecology edited by hiralal konar, Jaypee brother medical publishers 8th edition, 2020; Chap. 17: page- 186 3 paragraph.
4. Ayurvediya prasutitantra avum stree roga, part 2, stree roga, prof PV Tiwari, chaukhambha orientalia, varanasi, chapter 5: page no. 272.
5. Ayurvediya prasutitantra avum stree roga, part 2, stree roga, prof PV Tiwari, chaukhambha orientalia, varanasi, chapter 5: page no. 274- 275.
6. Astangahrdayam of Vagbhata edited with Vidyotini hindi commentary by Kaviraj Atridev Gupta; Sutra sthan 1/25, page 14; Chaukhamba Prakashan, Varanasi.
7. AYUSHDHARA ISSN: 2393-9583 (P)/ 2393-9591 (O) An International Journal of Research in AYUSH and Allied Systems AYUSHDHARA | March-April2022| Vol 9| Issue 2128 CLINICAL EFFICACY OF *SAHACHARADI TAIL BASTI* IN MANAGEMENT OF PCOS -A CASE STUDY Snehal Akhare<sup>1\*</sup>, Rajesh Raut<sup>2</sup>, Vidya Dole<sup>3</sup>, Karuna Dongre.
8. AYUSHDHARA ISSN: 2393-9583 (P)/ 2393-9591 (O) An International Journal of Research in AYUSH and Allied Systems AYUSHDHARA | March-April2022| Vol 9| Issue 2128 CLINICAL EFFICACY OF *SAHACHARADI TAIL BASTI* IN MANAGEMENT OF PCOS -A CASE STUDY Snehal Akhare<sup>1\*</sup>, Rajesh Raut<sup>2</sup>, Vidya Dole<sup>3</sup>, Karuna Dongre.
9. AYUSHDHARA ISSN: 2393-9583 (P)/ 2393-9591 (O) An International Journal of Research in AYUSH and Allied Systems AYUSHDHARA | March-April2022| Vol 9| Issue 2128 CLINICAL EFFICACY OF *SAHACHARADI TAIL BASTI* IN MANAGEMENT OF PCOS -A CASE STUDY Snehal Akhare<sup>1\*</sup>, Rajesh Raut<sup>2</sup>, Vidya Dole<sup>3</sup>, Karuna Dongre.