



Case Study

AYURVEDIC MANAGEMENT OF INFERTILITY

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ABSTRACT

Infertility is a condition which could affect the entire world. This case study discusses a patient diagnosed with secondary infertility who had a history of one abortion after one year of unprotected sexual life and could not conceive subsequently after that. Considering the chances of abortion and the need for healthy uterus capable of childbirth, ayurvedic treatment plans were adopted. This case was diagnosed as *Garbhasravi Vandhyata*. Treatment plan included both *Shodhana* followed by *Uthara vasthi* and *Shamana* therapies. As a result of the Ayurvedic interventions made in three courses of treatment, the patient conceived and delivered a healthy baby boy.

INTRODUCTION

Infertility is the inability to conceive within one or more years of regular unprotected coitus. Large number of people are affected by infertility in their lifetime. It includes primary and secondary infertility. Primary infertility denotes that the patient who have never conceived. Secondary infertility indicates previous pregnancy but failure to conceive subsequently.^[1] In Ayurveda, infertility is termed as *Vandhyatva*. According to Acharya *Charaka* and *Vagbhata*, *Vandhyatva* is due to abnormality in *Bijamsa*. Failure to conception is infertility. Among the important factors or constituents of *Garbha* have included *Rtu* (season or fertile period), *Kshetra* (healthy *Yoni*) *Bija* or *Sukra* and *Sonita* (sperm and ovum), *Ambu* (proper nutrient fluid), *Hrdaya* (psychology), *Vayu*, and *Sadbhawas*, abnormality in any one of these can cause infertility.^[2] According to *Haritha Samhitha*, *Vandhyatva* is classified into 6 and among them includes the *Garbhasravi vandhyatva* where there is recurrent loss of pregnancy^[9] which may be due to *Aharaja*, *Viharaja*, *Manasika nidanas* causing *Artva dhusti* which alters pregnancy. This is a case report of 34 years old female who was diagnosed

with *Garbhasravi Vandhyata* (secondary infertility) and was treated successfully by Ayurvedic treatment modalities.

History

A nulliparous women of age 34 years came to the Department of Prasuti tantra and streeroga OPD at Vaidyaratnam Ayurveda College, Ollur, Thrissur, with the complaint of no issues since 11 years of unprotected married sexual life. She attained menarche at the age of 13 years. Her cycles were irregular.

She got married in the year 2012. After 1 year of marriage, she got conceived but it was aborted due to heavy bleeding in the first trimester itself. She also took several allopathic medications but no results were obtained. In 2023 she came to our OPD with a presenting complaint of inability to conceive. On USG it was shown one enlarged follicle on left ovary. Endometrial thickness 10mm. Husband's semen analysis showed normal results. She was prescribed with internal medicine from OP later she was advised IP admission and had done 3 courses of IP management on 17/07/2023, 21/08/2023, 25/09/2023.

Menstrual History

Age of menarche- 13 years

LMP - 03/07/2023

PMP 01/06/2023

Duration of bleeding- 4-5 days

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Amount 3 pads per day
Interval between cycles- 28-30 days

Obstetric history
Gravida 1
Parity 0
Live 0
Abortion 1

Marital and sexual history
Age of marriage -24 years
Dyspareunia – No
Vaginismus – No
The couples were aware of fertility period – Yes
Frequency of coitus -3-4 times per week

Male partner
Age -39 years
No H/O DM, HTN, DLP, thyroid dysfunction.
No H/O smoking and alcohol
Sperm motility – Normal
Family history – Nothing relevant

Personal history

Bowel – Formed stools, 1 -2 times per day
Appetite – Moderate
Micturition – 4-5 times per day
Sleep – Sound

Clinical Examination

General physical and systemic examination of the patient was normal.

Local Examination

Inspection- Slight white discharge, no redness, no ulcers, no scars, no prolapse.

Per Speculum- No erosion, eversion, cysts, polyps, lacerations, ulcerations, cervical enlargement, bleeding, and menstrual discharge. No evidence of vaginitis or presence of any foreign body.

Per Vaginal- Uterus smooth, non-tender with normal tone.

USG Pelvis – Follicular study on 13/01/2023

Findings - One large follicle in left ovary 29mm, ET - 10mm

Semen Analysis

Sperm motility - Normal

Treatment History**Table 1: Internal medicines of first course of treatment**

Internal medicines
<ul style="list-style-type: none"> • <i>Sukumaram Kashaya</i> – 15ml <i>Kashaya</i> + 45ml lukewarm water, 6am-6pm, before food • <i>Hinguvachadi Gulika</i> – 1-0-1 with <i>Kashaya</i> • <i>Vaiswanara Choornam</i> – 1 tsp twice daily with buttermilk • <i>Siddhamakaradhwajam</i> - 1 small packet with honey and betel leaf juice at 12pm. • <i>Dasamoolarishtam</i> + <i>Jeerakarishtam</i> – 30ml-0-30ml, after food • <i>Dhanwantaram Gulika</i> 1-0-1 with <i>Arishta</i>

Table 2: Treatment procedures of first course of treatment

Procedures
<ol style="list-style-type: none"> 1. <i>Udwartanam</i> with <i>Kolakulathadi Choornam</i> in <i>Dhanyamlam</i> for 3 days from 13/06/2023. 2. <i>Snehapanam</i> with <i>Phalasarpis</i> and <i>Tilataila</i> for 7 days from 16/06/2023. <ul style="list-style-type: none"> 30ml on 16/06/2023 60ml on 17/06/2023 90ml on 18/06/2023 120ml on 19/06/2023 150ml on 20/06/2023 180ml on 21/06/2023 210ml on 22/06/2023 3. <i>Sadyasneham</i> with <i>Phalasarpis</i> and <i>Tilataila</i> for 1 day on 25/06/2023. 4. <i>Abhyangam</i> Steam with <i>Dhanwantaram Tailam</i> for 9 days from 23/06/2023 5. <i>Vamanam</i> on 24/06/2023. 6. <i>Yonikshalanam</i> with <i>Thriphala Kashyam</i> for 13 days from 27/06/2023. 7. <i>Sneha Vasthi</i> with <i>Phalasarpis</i> and <i>Tilataila</i> for 5 days from 28/06/2023. 8. <i>Yapanavasthi</i> for 3 days from 27/06/2023. 9. <i>Yonipooranam</i> for 2 days with <i>Tilataila</i> on 9/07/2023 and <i>Phalasarpis</i> on 16/07/2023.

10. *Abhyangam (Dhanwantaram Tailam) + Uttaravasthi* for 7 days with *Tilataila* (3 days) and *Phalasarpis* (4 days) from 10/07/2023.
11. *Yoni Kshalanam* with *Triphala Kashayam* and *Dhanyamlam* for 8 days from 10/07/2023.
12. *Vaginal Pichu* with *Chinnaruhadi Choornam* dipped in *Triphala kashayam* for 8 days from 10/07/2023.

Patient was discharged and was advised to get admission for next course treatment after menstruation
Discharge medicines were;

- *Phalasarpis* - 1 tsp at 6 am in empty stomach.
- *Sukumaram Kashayam* - 15ml *Kashayam* with 45ml lukewarm water, at 7am and 7 pm, before food.
- *Dhanwantaram Gulika-1-0-1* with *Kashayam*, before food.
- *Lakshmanarishtam + Bringarajasavam*-30ml-0-30ml, after food.

Table 3: Internal medicines of second course of treatment

Internal medicines
<ul style="list-style-type: none"> • <i>Dasamoolarishtam + Jeerakarishhtam</i> – 30ml-0-30ml, after food • <i>Dhanwantaram Gulika 1-0-1</i> with <i>Arishta</i>

Table 4: Treatment procedures of second course of treatment

Procedures
<ul style="list-style-type: none"> • <i>Abhyangam</i> steam with <i>Dhanwantaram Taila</i> for 2 days from 12/08/2023. • <i>Yapana Vasthi</i> for 2 days from 12/08/2023. • <i>Kadeepichu</i> with <i>Dhanwantaram Taila + Kottamchukkadi Taila + Sahacharadi Taila</i> for 9 days from 12/08/2023. • <i>Abhyangam</i> with <i>Dhanwantaram Taila</i> for 7 days from 14/08/2023. • <i>Yoni Kshalanam</i> with <i>Triphala Kwatha + Dhanyamla</i> for 7 days from 14/08/2023. • <i>Uttaravasthi</i> with <i>Tila Taila</i> for 3 days from 14/08/2023 and with <i>Phalasarpis</i> for 4 days from 17/08/2023. • <i>Yonipooranam</i> with <i>Phalasarpis</i> on 20/08/2023

Patient was discharged and was advised to get admission for next course treatment after menstruation
Discharge medicines were,

- *Phalasarpis + Mahakalyanaka Ghritam* – 1 tsp at 6 am with *Kashaya* in empty stomach.
- *Sukumaram Kashayam* – 15ml *Kashayam* with 45ml lukewarm water, at 6am and 6pm, before food.
- *Dhanwantaram Gulika-0-0-1* with *Kashayam*, before food.
- *Lakshmanarishtam + Bringarajasavam + Saraswatharishtam* – 30ml-0-30ml, after food.
- *Manasamitram Gulika-1-0-1* with *Arishta*.

Table 5: Internal medicines of third course of treatment

Internal medicines
<ul style="list-style-type: none"> • <i>Dasamoolarishtam + Jeerakarishhtam</i> – 30ml-0-30ml, after food • <i>Dhanwantaram Gulika 1-0-1</i> with <i>Arishta</i> • <i>Sukumaram Kashaya</i> 15ml <i>Kashaya</i> with 45ml lukewarm water, 6am-6pm, before food • <i>Phala Sarpis + Maha kalyanaka Ghritham</i>, 1 teaspoon with <i>Kashaya</i>, 6am, empty stomach • <i>Dhanwantharam Gulika 0-0-1</i> before food • <i>Lakshmanarishtam + Bhringarajasavam + Saraswatharishtam</i> 30ml-0-30ml, after food • <i>Manasamitram Gulika 1-0-1</i> with <i>Arishta</i>

Table 6: Treatment procedures of third course of treatment

Procedures
<ul style="list-style-type: none"> • <i>Abhyangam</i> steam with <i>Dhanwantharam Tailam</i> from 09/09/23 for 2 days. • <i>Yapana Vasti</i> from 09/09/23 for 2 days. • <i>Kadeepichu</i> with <i>Dhanwantharm Tailam+ Sahacharadi Tailam + Kottamchukkadi Tailam</i> from 09/09/23 for 8 days.

- Abhyangam with *Dhanwantharam Taila* from 11/09/23 for 8 days.
- *Yoni Kshalanam* with *Triphala Kashaya* from 11/09/23 for 8 days.
- *Uttara Vasthi* with *Tila Taila* from 11/09/23 for 3 days.
- *Uttara Vasthi* with *Phalasarpis* from 14/09/23 for 4 days.
- *Yonipooranam* with *Phalasarpis* on 17/09/23.
- *Shirodhara* with *Ksheerabala Taila* from 19/09/23 for 7 days

Patient was discharged on 25/09/2023 with discharge medicines as mentioned:

- *Sukumaram Kashaya* 15ml *Kashaya* with 45ml lukewarm water, 6am-6pm, before food.
- *Phala Sarpis* + *Maha Yanaka Ghritham*, 1 teaspoon with *Kashaya*, 6am, empty stomach.
- *Dhanwantharam Gulika* 0-0-1 before food.
- *Lakshmanarishtam* + *Bhringarajasavam* + *Saraswatharishtam* 30ml-0-30ml, after food.
- *Manasamitram Gulika* 1-0-1 with *Arishta*.

RESULTS

The patient got conceived through 3 courses of IP management and delivered a baby boy.

DISCUSSION

Through history taking and necessary investigations, the patient was diagnosed with secondary infertility resulting from abortion. Since a history of abortion is present, this case aligns with *Garbhasravi Vandhyata* in Ayurveda. In terms of treatment, the focus shifts from infertility to preventing abortion. For the initial course of treatment, possible *Avarana* and *Doshic* imbalances were assessed, and appropriate treatments were initiated. The internal medicine *Sukumara kashaya*, *Hinguvachadi gulika*, *Vaiswanara Choorna*, *Dhanwantara Gulika*. All these were given with an intention to make the uterus healthy and to establish an equilibrium state of *Vatadosha*. *Sukumaram kashaya*, majority of ingredients are having *Madhura rasa*, *Ushna veerya* and *Snigdha guna* and hence these can normalize the vitiated *Vata*. *Dashamula* is the other main ingredient in *Sukumara kashaya* and it is *Anulomana*, *Vatakapha hara* and *Sothahara*. So, it helps in bringing back the normalcy of *Vata gathi*. Many of the ingredients are *Tridosahara*, *Anulomana*, *Sothahara*, *Garbhasya Shodhana* and *Rasayana*.^[11] *Hinguvachadi gulika* is also considered as a *Vatashamana* medicine.^[3] *Vaishwanara churna* is an effective medicine for kindling *Agni* helpful in metabolic activity.^[13] External therapies like *Udwarthanam* was done as a preparatory *Karma* aid in reducing *Kaphadosha*, also supports *Pachana* of *Amadosha* present in the body, hence is highly beneficial. *Snehapana* was done with equal proportion of *Tila taila* and *Phalasarpis* with starting dose of 30ml and it took 7 days to get ideal signs and symptoms. *Phalasarpis* helps women to achieve conception and is best for curing all female genital tract disorders. It is *Vatahara*, *Balya*, *Brihmana*, *Garbhada* and *Rasyana*.^[12] *Tila taila* has effective action on *Garbaahasya shodana*.^[15] The major *Shodana* adopted was *Vamana* in order to contract the effects caused by the increased

Kapha dosha. Through *Snehana*, *Swedana* was done to provide *Dosha Utkkleshana*. Later on, *Vamana karma* performed for removing the toxins from body via various chemical changes. *Shodana karma* helps in attaining *Srotoshodana*, improve the metabolism, helps to provide an environment of for reproductive health essential for conception, regulate menstrual cycle and hormonal balance. *Vamana* is used for purifying measures as it removes the *Saumya* substances, resulting in relative increase in *Agneya* constituents of the body, consequently *Artava* increases.^[14] After that *Samsarjana karma* was done to maintain the *Agni*. After a period of rest, *Vasthi* was planned. It was planned in such a way that two *Sneha vasthi* were done initially, later, *Yapana vasthi* and *Sneha vasthi* in an alternative manner for eight days. *Sneha vasthi* was administered with *Phalasarpis* and *Tila taila*. The concept of *Yapanavasthi* is beautifully described in the *Samhitas* and has a wide range of practical applications. *Yapana vasti* has a specific effect on *Shukra* and *Bala*, and it is especially beneficial for both men and women struggling with infertility, helping them conceive and have offspring. These *Yapanavasthi* serve dual purposes, namely *Sodhana* and *Snehana*, making them an ideal choice in these conditions.

Utharavasti was the core procedure in the treatment schedule since medicines reaches the uterus directly. Patient was administered with *Yonikshalana* with *Triphala kashaya* after *Abyanga* with *Dhanwantharam taila* prior to this procedure. *Phalasarpis* and *tila taila* was the drug of choice while doing *Utharavasti*. Apart from this, various localised procedures like *Yoni kshalanam*, *Yoni pooranam*, *Yoni pichu* were done in order to keep the reproductive tract healthy and to prevent infections

During second and third course of treatment both *Dasamoolarishtam* and *Jeerakarishhtam* used which help to ignite the *Agni*, balancing *Vata dosha* and it also act as a general health tonic. *Dasamoolarishta* is also mentioned to have an excellent action on *Vandyata* condition which is directly mentioned under

the *Yogam* itself [4]. *Jeerakarishitam* have special action upon *Agni* and it also act as a general tonic.[5] *Dhanwantharam gulika* is also considered as a *Vatashamana* medicine.[6] The therapies that followed during the first course of admission continued during the next two episodes of readmission. *Lakshmanarishita* is a specially mentioned for diseases related to females apart from that *Lakshmana* is a wonderful drug which even mentioned under *Pumsavana*, *Masanumasika garbini paricharya*. [8] Similar *Brngarajasavam* [7] and *Saraswatharishitam* [10] have action over endocrine function and also improves general health.

During last course of treatment *Shirodhara* performed. *Shirodhara* is a simple technique specifically designed to balance the hormonal activities of the body. It also stimulates the sense organs and help to relive stress.

CONCLUSION

The patient who was struggling with secondary infertility over a span of eleven years was able to conceive and give birth to healthy baby boy after the three courses of Ayurvedic treatment. This case highlights the capacity of Ayurveda in the treatment of complex reproductive disorders by enhancing the factors essential for conception

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