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CLINICAL STUDY ON *VANDHYATWA* (FEMALE INFERTILITY) W. S. R. TO ANOVULATORY FACTOR AND ITS MANAGEMENT BY 3 STEP TREATMENT- A CASE STUDY.

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ABSTRACT

A female patient of 29 years old of primary infertility with pitta pradhan vata prakruti was diagnosed as anovulation (anartava) on the basis of follicular study. Along with this she was diagnosed as pittaj yonidushti according to her complaints. Three step treatment was given to her with pathyakar aahara and vihara. She was treated with Lashunadi taila matra basti in premenstrual phase (15/11/2019 to 21/11/2019) followed by oral administration of Chandraprabhavati and Shatpushpa choorna. In post menstrual phase (28/11/2019 to 2/12/2019) pichu dharana i.e. medicated vaginal tampon treatment was given. After this treatment she missed her period, we performed her UPT (30/12/2019), it detected presence of HCG in urine sample and on 20/01/2020, SLIUP of 8.5 weeks seen in USG report. Successful conception is achieved in that patient within one month. This treatment was found effective in one patient of vandhyatwa. Anovulatory factor is an important subset in infertility in present case. Ovulation is under the control of vata especially apana vayu which can be regulated by basti with vatahar dravya. So considering "Lashunah Prabhanjanam", Lashunadi tail matra basti is given in premenstrual phase. So in this case ovulation induction is rescuer. Considering pittaj yonidushti, the acidic pH of vagina can hamper sperm entry which is remedied by doing pichu dharana. Present single case study will explain how to understand and manage infertility based on Ayurveda perspective.

KEYWORDS: vandhyatwa, anovulation, pittaj yonidushti.

INTRODUCTION

Infertility is defined as failure to conceive though having regular unprotected coitus for more than a year. [1] The male is directly responsible in about 30-40%, the female in about 40-50% and both are responsible in about 10% cases. The remaining 10% is unexplained. [2] Infertility primarily refers to the biological inability of a person to contribute to conception. In Ayurveda infertility may be correlated with vandhyatwa or with vandhya yonivyapada. Ayurveda is science havimg its own method of diagnosis and treatment based on it. Important factors of constituents of garbha (foetus) are 1) Rutu (fertile period), 2) Kshetra (reproductive organs), 3) Ambu (proper nutrient fluid), 4) Beeja (shukra-shonit) also healthy psychological status, normal functioning of vata (one of the governing factor of body according to Ayurveda. [3] Any abnormality in these factors causes infertility.

Beeja is directly referred as antapushpa (ovum) and beejotsarga to ovulation process. Anovulation can be considered as Nashtartava which occur due to vitiated vata. Basti karma is considered as best line of treatment for vata. In this case study combined effect of Lashunadi tail matra basti, pichu dharana and aartavjanan dravya was found to be effective in one patient of vandhyatva. It has been observed that this 3 step treatment helps not only treating the symptoms but also by strengthening the reproductive system and improving the local cellular immunity.

DESCRIPTION OF PATIENT

A female patient aged 29 years came with complaints of having no issue though married for 2 years and having uninterrupted sex. She took hormonal treatment for 2-3 times without any benefit. She complained of having excessive per vaginal itching, dryness and burning. We diagnosed it as *pittaj yonidushti*. Her hormonal assay was within normal limit. On the basis of follicular study patient was diagnosed as anovulation (*anartava*).

MENSTRUAL HISTORY

Menarche- at the age of 13 years having menses with pain present during menses and clots and smell present in the menstrual fluid.

CONTRACEPTIVE HISTORY

Not used.

SEXUAL HISTORY

3-4/week.

FAMILY HISTORY

No family history of DM, HTN, T.B. and thyroid dysfunction. No history of exposure to radiation, any toxin or chemical agent.

EXAMINATION OF PATIENT

PARAMETER	RSULTS		
Weight	: 56.2 Kg		
Height	: 125 cm		
BMI	$: 35.8 \text{ kg/m}^2$		
B. P.	: 120/70 mm of Hg		
Pulse rate	: 94/min (tachycardia may be due to her habit of late night work)		
Breast examination	: NAD		
P/A	: Soft		
P/S	: Cervix healthy, dry vagina.		

ASHTAVIDHA PARIKSHA

PARAMETER	RSULTS
Nadi	: 94/min
Mala	: Once a day
Mutra	: 5-6 times/day, Pitabh shwet varna
Jivha	: Niram
Shabda	: Avishesh
Sparsha	: Anushna sheet
Druk	: Avishesh
Akruti	: Madhyam

DASHVIDHA PARIKSHA

PARAMETER	RSULTS
Prakruti	: Pitta Pradhan vaat
Vikruti	: Madhyam bal
Sara	: Raktasar
Samhanan	: Hin
Praman	: Madhyam
Satmya	: Mishrit
Satva	: Pravar satva sampan
Ahar Shakti	: Madhyam
Vyayam Shakti	: Madhyam
Vaya	: Madhyavastha

INVESTIGATIONS

PARAMETER	RSULTS
Husband's Semen Analysis	: WNL

Blood investigation of patient

PARAMETER	RSULTS
Hb	: 10.2 gm%
TSH	: 3.65 miu/ml
FSH-	: 11.6
LH	: 8.87
Prolactin	: 7ng/ml
BSL	: 96.19mg/dl

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TREATMENT

Three step treatment given

I) Premenstrual Basti Chikitsa

(15/11/2019-21/11/2019)

Time- 8 am to 10 am for 7 days

Drug- Lashunadi Taila

Route- Matra Basti by rectal route

Dose- 60 ml

II) Abhyantar yoga

For 20 days started from 15/11/2019 to 04/12/2019

Purva karma- Abhyanga with bala taila on kati-prushta-pad-parshwa-adhodara for 15 min and Swedan by Nadiswed.

Pradhan karma- Matra basti through anal route in left lateral position

Pashchat karma- rest in supine position for atleast 30 min.

Tab. Chandraprabha va	ti 2 tablets of 500mg BD	at 8 am & 6 pm with water
Tab. Krumikuthar Ras	1 tablet of 500 mg	at night after food with water
Shatapushpa choorna	3 gm	at night after food with water

LMP-23/11/2019-26/11/2019

III) Post menstrual Sthanik Chikitsa

(28/11/2019-02/12/2019)

Pichu Dharan i.e. medicated oil soaked vaginal tampon Dravya- Bala oil 15 ml

Sterile cotton tampon soaked in it and placed in yoni *marga* for 2 hours

Time- 4 pm to 6 pm (pitta kal)

During this period the patient was advised to take *samyaka aahara* (fresh fruits and vegetables) and avoid *amla, lavana, vidahi* and *snigdha aahara*. Along with this patient followed following lifestyle.

Standard life style advised by Ayurveda

Wake up	: 6-6:30 am
Walk For	: 10-20 min
Lunch	: In between 11am to 1 pm
Afternoon free time	: Listen to favourite songs, spending time with family, whatever she wants to do she can as "saumanasyam garbhadharnanam" [4]
Dinner	:Between 7 to 8 pm
Walk for	: 15-20 min
Bed time	: Around 9:30 to 10:30 pm
Precautions	: Avoid overnight work, late night diet, avoid anger.

Results of Sonography before treatment

PARAMETER	RESULT		
1. UTERUS			
Length	: 6.30 cm		
Height	: 2.98 cm		
Width	: 4.31 cm		
LEFT OVARY			
Length	: 2.94 cm		
Height	: 1.08 cm		
Width	: 3.07 cm		
2. RIGHT OVARY			
Length	: 2.57 cm		
Height	: 1.08 cm		
Width	: 3.54 cm		
Uterus antiverted, normal in size, shape and echostructure.			
No e/o anamolies.			
POD empty.			
Right and left ovary normal in size and shape.			

Follicular study LMP-23/11/2019

Day of Ovulation	Right Ovary	Left Ovary	Endometrial Thickness	Free Fluid
10^{th}	=	Multiple follicles	7.8 mm	Nil
12 th	No dominant follicle	Largest follicle 1.8×2cm	9 mm	Nil
14 th	10×7mm	Mature follicle 2.3×2.6cm	1 cm	Nil
16 th	-	Ruptured	1cm	Seen

UPT done- positive (30/12/2019)

Findings of sonography after treatment – (20.01.2020)

- > Single live intrauterine pregnancy seen within G sac
- ➤ G sac appears normal
- Yolk sac seen
- > Single foetal pole with good and regular cardiac activity noted.
- ➤ GA-8.5 Weeks
- ➤ CRL- 2.09 cm
- ➤ HR- 173 bpm

DISCUSSION

There is dominance of vata dosha in vandhyatva. Acharya Vagbhat mentioned "Lashunah Prabhanjanam". Basti and Taila is param aushadham for vata according to Acharya Vagbhat. Anuvasan Basti is indicated by Acharya Kashyap for Nashtabeeja. Matra basti is a type of anuvasan basti. So it will act on ovulation. Lashunadi Taila was mentioned by Acharya Kashyap for kleeb and vandhya. Acharya Kashyap for kleeb and vandhya. Lashunadi taila has properties like vatakaphashamak, deepen, aampachan, vryshya, jeevaniya, balya, rasayan, aartavjanan and garbhasthapan. Hence Lashunadi taila and Matra basti was selected for treatment.

Chandraprabha vati has properties like vata-pittakaphahar, balya, vrushya and rasayan. It helps in correcting an anovulatory cycle. Shatapushpa (anethum sova) is ushna veerya dravya with vatakaphashamak property which acts on reproductive system and improves the function of ovary and aartava.

Local cellular immunity increases as *pichu dharan* was done. *Snehan karma* occurs due to use of *bala taila*. This *sthanik chikitsa* helps to reduce acidity of vaginal secretion and promotes motility of sperms.

Panchakarma and Ayurvedic herbal medicines acts at root level and brings back deviations of hormonal system back to normalcy. All these drugs are having *vata-pitta-kapha-shamak* qualities also have *vatanuloman* property which promotes fertility. Thus combined effect of these 3 treatment was found effective.

CONCLUSION

Basti karma is a best treatment to regulate vata dosha. It also bring about the harmony of tridosha. Lashunadi

Taila has vatashamak and garbhasthapak properties. Aartavjanan property of chandraprabha vati and inhancing local immunity by pichu dharana helps in regulating menstrual cycle and further helps in conception. The combined effect of all these found to be effective.

RESULT

The patient got conceived with one month of treatment and is under regular ante natal checkup. Now her gestational age is 32 wks. (12.07.2020).

CONSENT

Before starting treatment consent of the patient and her husband is taken along with proper advice and counselling.

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