# INTERNATIONAL AYURVEDIC MEDICAL JOURNAL



Review Article ISSN: 2320 5091 Impact Factor: 5.344

# IVF INFERTILITY MANAGEMENT V/S SUPRAJAJANANAN AYURVED LITERATURE REVIEW

Manisha M. Lade<sup>1</sup>, Soudamini S. Chowdhari<sup>2</sup>

<sup>1</sup>M.S. Scholar, (Streeroga & Prasutitantra), Government Ayurved College, Nanded, Maharashtra, India <sup>2</sup>Professor & HOD (Streeroga & Prasutitantra Dept.), Government Ayurved College, Nanded, Maharashtra, India

Email: manishababar@gmail.com

**ABSTRACT** 

In vitro fertilization (IVF) is the most common and most advanced type method in management of infertility. It is an assisted reproductive technology to help women to become pregnant. Still success rate of IVF is less than 50%. Causes of IVF failure are abnormal embryo, implantation failure, poor ovarian response, treatment stress etc. There is also premature rise of progesterone in stimulated IVF cycles and emerging evidence suggests that it negatively affects the outcome of IVF. In this treatment mainly all drugs are used for ovarian stimulation then multiple follicles generation and maintenance of transferred embryo in womb by giving high doses of progesterone supplements and many more medicines. It seems like artificially created embryo getting nourished in an artificially created environment. That means it is only producing offspring not the *Supraja*. Ayurveda takes conception as physical, emotional and spiritual phenomenon. For healthy child male and female should be physically and mentally healthy so that they produce healthy sperm and ovum. In this article an attempt is made to explain how principles of Ayurveda and therapies will be effective for management of infertility and achieving *supraja janan* Vs IVF from pre to post conception.

Keywords: IVF, Supraja, Infertility

### INTRODUCTION

The field of reproductive medicine has changed forever with the birth of Louise Brown in 1978 by IVF. Today IVF is one of the most important methods for treatment of infertility. IVF refers to the process of conceiving an embryo in a test tube or watch glass, in a substance with similar characteristic to the inside of a women's uterus. The past decades has witnessed dramatic changes in the treatment protocol of IVF one such change was natural cycle to superovulation protocol. IVF is an increasing popular treatment for those who are having lots of trouble in conceiving, elderly women's, male with sperm abnormalities and many more. Infertility and its management is very well explained in *Ayurveda*. It take conception as by choice not by the chance. If we planned conception as per the way described by ancient *Acharya* there may be a ray of hope for creating a good progeny as life begins with conception.

#### **MATERIAL AND METHODS**

- 1. Literary information is compiled from Ayurveda texts Brihad Trayi.
- 2. References collected from scientific publications and research papers related to subject
- 3. Information also collected from local IVF centres in Nanded city.
- 4. Scientific analysis of collected references was done and rearranged

### **DISCUSSION ON LITERATURE:**

Common indications of IVF are <sup>1</sup>

#### In female-

- Bilateral tubal block
- Long standing infertility with 3 IUI
- Premature ovarian failure
- Ovulation disorders
- Advanced maternal age
- Endometriosis, etc.

#### In male

- Long standing infertility with normal semen analysis.
- Poor sperm motility
- Abnormal morphology (Asthenenzoospermia)
- Azoospermia
- Oligospermia, etc.

# Principle steps involved in IVF are-1

- Down regulation using GnRH agonist
- Controlled ovarian stimulation
- Monitoring of follicular growth
- Oocytes retrieval
- Fertilization in vitro
- Transfer of gamete or embryo
- Luteal support with progesterone

# Drugs used for IVF<sup>2, 3</sup>

Drugs used in IVF are designed to regulate and stimulate the production of hormones or to trigger ovulation these are -

hMG

**FSH** 

hCG

GnRH agonist

**GnRH** antagonist

Progesterone

Metformin

Low molecular wt heparin

Ecosprin

Clomiphene citrate

Letrozole

Estrogen, etc.

# Garbhadhana in view of Ayurveda 4-

Pregnancy should be by choice and not by chance. In Ayurveda texts acharya have explained the garbhadhan vidhi in detail. According to Ayurveda 4 factors are essential for conception namely Ritu (fertile period), Kshetra (reproductive tract), Ambu (nutrition), Beeja (oocyte and sperm) 5. Archarvas have described specific protocol for bringing a healthy pregnancy. The objective of the protocol is to make both male and female physically, mentally and spiritually healthy for conception. The process starts 3 months before conception and continues even after birth of baby. Ayurvedic Texts has clearly described the adequate age for marriage and also for conception <sup>6</sup>. They have even mentioned days of coitus for healthy child7, 8, and <sup>9</sup>. Caraka and Kasvapa have described Putresti vaina in detail 10, 11.

Before conception the process for purification of body by panchkarma therapy is mentioned<sup>12, 13</sup>. It eliminate impurities and balance Doshas. Acharya have described rasayana (Rejuvation) and vajikarana (Aphrodisiac) chikitsa in detail 14, 15. In today's modern world due to unhealthy food and eating habits, stressful life style Ayurvedic purification processes and Raejuvenation therapies are even more important. Acharyas have mentioned rajaswala charya 16,17,18 (adaptations during menstrual days), garbhini paricharya<sup>19,20,21</sup> (antenatal guidelines), Sukhaprasav Vidhi<sup>22,23,</sup> (intrapartum care), Sutikagar<sup>24,</sup> (maternity ward), Sutika Paricharya<sup>25,26,27</sup> (puerperal care), Jatmatra masanumasik Paricharya<sup>28,29</sup> (neonatal care). Even archarya have described month wise chalit garbha(threatened abortion) chikitsa<sup>30</sup>, garbhupaghatkar bhavas31 (factors responsible for bad obstetrics outcomes) are also mentioned. Garbhasthapaka drayvas<sup>32</sup> (drugs for maintenance of pregnancy) are described by Charka. Kasyapa has prescribed a type

of mantra *Varanbandh* treatment for preventing abortion<sup>33</sup>. It is also believed that couple can invite divine souls to take birth.

We can divide these into preconceptional, antenatal, postconceptional and preventive guidelines as follows-

#### **Preconception**

- 1. Rajaswala charya (care during menstrual days),
- 2. Rutumati charya
- 3. Putresti yajna

# Antenatal guidelines

- 1. Garbhini Paricharya
- 2. Garbhini masanumasik paricharyas (antenatal guidelines),
- 3. Garbhupaghatkar bhavas(do's and do not's during pregnancy)
- 4. Sukhaprasava Vidhi (comfortable and safe delivery),
- 5. Asthapana basti in 8<sup>th</sup> month
- 6. Vaginal oil tampoon with anuvasana basti in 9<sup>th</sup> month

## Postnatal guidelines for mother and child

- 1. Sutikaagara(maternity ward),
- 2. Sutika Paricharyas( puerperal care),
- 3. Breastfeeding,
- 4. Jatmatra Paricharyas (newborn care).

# Preventive guidelines such as

- 1. Management of BOH by month wise *chalit gar-bha*(threatened abortion) *chikitsa*,
- 2. *Garbhopaghatkar bhavas* (factors responsible for bad obstetrics outcomes)
- 3. *Garbhasthapaka, Prajasthapaka dravyas* (drugs for maintenance of pregnancy)
- 4. *Kasyapa* has prescribed a type of mantra *Varanbandh* treatment for preventing abortion.

So if we planned the pregnancy as per these protocols we can bring physically, mentally and spiritually healthy progeny from physically, mentally and spiritually healthy parents.

# Side effects of IVF<sup>34</sup>-

IVF though popular ART (Assisted Reproductive Technology) but associated with many side effects.

There are number of short term and long term risk associated with IVF.

The premature LH rise that refers to a rise in serum progesterone occurs after 5 to 7 days of stimulation and it negatively affects the endometrial advancement. Prolonged use of GnRh agonist induces menopause like state characterised by low estradiol levels and common side effect such as hot flushes and moodiness.

There is increased risk of multiple pregnancies; the birth wt. of babies born is lower than the babies born through natural conception.

There is increasing evidence that ART conceived children may be at greater risk of perinatal outcome.

OHSS (Ovarian Hyper Stimulation Syndrome) is a medical complication that is both completely introgenic and unique to stimulatory infertility treatment.

Increased miscarriage, multiple pregnancy and ectopic, heterotopic pregnancy have been observed.

Patient exposed to high dose or long duration treatment may warrant closer attention as they may have risk of having ovarian breast cancer.

IVF couple is on more stress than couple conceived naturally, stress may affect outcome. In country like India infertile couple are already in mental, physical and family, society and economical stress.

In India success rate varies and depend on many factors and is between 30 to 35%. In India there is no centralised data, so clinics can claim whatever they want<sup>35</sup>.

Susruta opines that what so ever type of diet, behaviour and conduct is followed by the couple at the time of coitus, born child possesses similar characters<sup>36</sup>. In IVF embryo is not created naturally, an environment is created by bombardment of medicines for the growth of embryo; couple is already in lot of mental, physical, economic and social stress. So, all these conditions will definitely have its impact on foetus.

For achievement of conception, proper functioning vayu (nervous system), normal psychology, healthy and properly functioning female reproductive system, well prepared uterus, healthy sperms and ovum are essential factors. *Ayurveda* treated infertility for several thousands of years without help of modern diag-

nostic tools. Ayurveda through its medicines, diet and lifestyle modifications and panchkarma raises a new hope for creating good progeny. It may enhance the success rate of artificial reproductive techniques. It regularise metabolism of the body, purify reproductive organs and maintain hormonal equilibrium, improve endometrial lining and receptivity, increase egg and sperm quality and relieve stress.

### CONCLUSION

Though IVF is very popular ART technique for many couples but it has its own benefits and hazards. Ayurveda takes conception as physical, mental and spiritual phenomenon. Life begins with pregnancy because it gives birth to another life. Everybody wants that their children should inherit good and moral qualities. So it is need of current modern era to follow the principles of Ayurveda for healthy conception which ultimately leads to the birth of a child who is handsome, endowed with goodness, have long life, repay the debts of parents and are excellent. So it is a need of time to combine the Ayurveda protocols in IVF procedure for generating good progeny. Further more research is needed to overcome side effects of IVF and how principles of Ayurveda can be implemented for better outcome through IVF for Supraja janan. There is a need of further research in this topic for its worldwide acceptance.

#### REFERENCES

- 1. D.C.DUTTA Textbook of Gynecology, Jaypee Brothers, chapter 17, 7<sup>th</sup> edition page no 205.
- 2. Berek & Novaks Gynaecology, Chapter 32, fifteenth edition, page no 1151-1155.
- 3. D.C.DUTTA Textbook of Gynecology 7<sup>th</sup> edition, Jaypee Brothers chapter 17 page no 200,201.
- 4. Premvati Tiwari, Ayurvediya Prasutitantra Evam Stree Rog, Part 1, Second Edition, Reprint 2003, chapter 3,page no-79-91.
- 5. Dr Anantram Sharma, Sushrut Samhita, Reprint 2006, Sharirsthan 2/33,page no-21.
- 6. Dr Anantram Sharma, Sushrut Samhita, Reprint 2006 Sharirsthan 10/53, 54, 55, 56, page no-144.
- Dr Anantram Sharma ,Sushrut Samhita, Chaukhamba Surbharti Prakashan, Reprint 2006, Sharirsthan 2/28-30,page no18

- 8. Dr Ganesh Krishna Garde, Sarth Vagbhat, Chaukhamba Surbharati Prakashan Reprint 2011 Sharirsthan2/27,page no123.
- Prof. Jyotir Mishra, Ashtangsangraha of Vahat or Vrudha vagbhata with Sasilekha Sanskrit Commentry by Indu, ISBN: 81-7080-186-9 Chokhamba Sanskrit Series office, Varanasi, ISBN:81-7080-186-9,Sharirsthana 1/47,48,49 page no 271.
- Dr Brahmanand Tripathi, Charak samhita, Chaukhamba Prakashan Reprint 2004 Sharirsthan Adhyay 8/11, 12, page no 935,936.
- Sri Satyapala Bhisagacharya, Kashyap Samhita Nepalrajguruna Pt.Hemraj Sharmana in Hindi, Chaukhamba Sanskrut Sansthan, Varanasi, Reprint 2006, Kalpsthan9/80 page no 199.
- 12. Dr Brahmanand Tripathi, Charak samhita, Chaukhamba Prakashan Reprint 2004 Sharirsthan 8/4, page no-930.
- 13. P.V.Tewari, Kasyapa Samhita, Chaukhamba Visvabharti Varanasi, Rrprint 2008, Sharirsthan 5/3, page no 134.
- Dr Ganesh Krushna Garde, Sarth Vagbhat Chaukhamba Surbharati Prakashan Reprint 2011, Uttarsthan 39, 40.
- Dr Brahmanand Tripathi, Charak samhita, Chaukhamba Prakashan Reprint 2004 Chikitsasthan 1-4.
- 16. Dr Anantram Sharma, Sushrut Samhita, Chaukhamba Surbharti Prakashan ,Reprint 2006, Sharirsthan 2/25 page no-18.
- 17. Charak samhita Dr Brahmanand Tripathi Chaukhamba Prakashan Reprint 2004 Sharirsthan 8/5, page no 931.
- 18. Dr Ganesh Krushna Garde, Sarth Vagbhat, Chaukhamba Surbharati Prakashan Reprint 2011, Sharirsthan1/24-26,page no 123.
- Dr Brahmanand Tripathi, Charak samhita, Chaukhamba Prakashan Reprint 2004 Sharirsthan 8/32, page no 953.
- 20. Dr Anantram Sharma, Sushrut Samhita, Chaukhamba Surbharti Prakashan, Reprint 2006, Sharirsthan 10/4, page no 127.
- Prof. Jyotir Mishra, Ashtangsangraha of Vahat or Vrudha vagbhata with Sasilekha Sanskrit Commentry by Indu, ISBN: 81-7080-186-9 Chokhamba Sanskrit Series office, Varanasi, ISBN: 81-7080-186-9, Sharirsthana 3/1-13, page no-285, 286.
- Dr Brahmanand Tripathi, Charak samhita ,Chaukhamba PrakashanReprint 2004 Sharirsthan 8/36-41, page no958-963

- 23. DrAnantram Sharma, Sushrut Samhita, Chaukhamba Surbharti Prakashan ,Reprint 2006,Sharirsthan10/8,page 130.
- Dr Anantram Sharma, Sushrut Samhita, Chaukhamba Surbharti Prakashan Reprint 2006 Sharirsthan 10/5, page no 128.
- 25. Dr Anantram Sharma ,Sushrut Samhita ,Reprint 2006 Sharirsthan10/16,page no 133
- Dr Brahmanand Tripathi, Charak samhita, Chaukhamba Prakashan Reprint 2004 Sharirsthan 8/48,page no 970.
- 27. P.V.Tewari,KasyapaSamhita,Chaukhamba Visvabharti Academy, Reprint 2008,Khilsthan11/17-27,page 578
- 28. Dr. Brahmanand Tripathi, Charak Samhita, Chaukhamba Prakashan Reprint2006 Sharirsthan8/42, page964.
- 29. Dr Anantram Sharma, Sushrut Samhita, Chaukhamba Surbharti Prakashan, Reprint 2006 Sharirsthan 10/12-15,page no131-133.
- 30. Pt. Harihar Prasad Tripathi ,Harit Samhita,Chaukhamba Krushna Academy,Varanasi,ISBN:81-218-0914-X ,Reprint 2009 trutiyasthana Adhyay 50, Chalitgarbha Chikitsa,page no 454.455
- 31. Dr Brahmanand Tripathi ,Charak samhita, Chaukhambha Prakashan Reprint 2004 Sharirsthan 4/18,page no 884.

- 32. Dr Brahmanand Tripathi, Charak samhita ,Chaukhambha Prakashan Reprint 2004 Sharirsthan 8/20, page no 941.
- 33. Sri Satyapala Bhisagacharya, Kashyap Samhita Nepalrajguruna Pt.Hemraj Sharmana in hindi,Chaukhamba Sanskrut Sansthan,Varanasi,Revatikalpa adhyay shloka 80,page no 301
- 34. Berek & Novaks Gynaecology, fifteenth edition, Chapter 32, page no 1166-1177.
- 35. 40 years of IVF: See how fertility tech has change the world and India by Sanchita Sharma and Anonna Dutt Hindustantimes.com 21.
- 36. Dr Anantram Sharma ,Sushrut Samhita,Chaukhamba Surbharti Prakashan, Reprint 2006 Sharirsthan 2/46,page no-25.

# Source of Support: Nil Conflict Of Interest: None Declared

How to cite this URL: Manisha M. Lade & Soudamini S. Chowdhari: Ivf Infertility Management V/S Suprajajananan Ayurved Literature Review. International Ayurvedic Medical Journal {online} 2019 {cited May, 2019} Available from: http://www.iamj.in/posts/images/upload/787 791.pdf