



AYURVEDIC MANAGEMENT OF SECONDARY INFERTILITY – A CASE REPORT

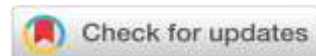
Abha.L.Ravi¹, Arjun Chand C.P², Malavika.M.Nair³, Arya Venugopal⁴.¹Associate Professor and Head, Department of Prasuti Tantra and Striroga, India²Associate Professor Department of Kayachikitsa, India³Ayurveda Medical Practitioner, Trivandrum, India⁴House surgeon, Trivandrum, IndiaCorresponding Author: abharavi22@gmail.com<https://doi.org/10.46607/iamj3210122022>

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ABSTRACT

Secondary infertility indicates previous pregnancy but failure to conceive subsequently. This condition can be co-related with “VANDHYATHA” in Ayurveda. Proper functioning of the reproductive system, healthy ovum, and sperm, normal psychology, and proper functioning of *Vayu* are the factors needed for achieving conception. A 29-year-old lady was unable to have a viable child after 9 years of unprotected intercourse. From a detailed history *Agnimandya*, a stressful mind and irregular bowel movements were noticed. The patient was treated with *Udwarthana*, *Virechanam*, and *Yogavasti*, followed by internal medications including *Erandadi special kashayam*. The patient got conceived on 30/04/2018 within 3 months of treatment and delivered a baby girl on 20/11/18.

Keywords: Anapathyatha, Infertility

INTRODUCTION

Infertility is defined as the inability to conceive after 1yr unprotected intercourse. Female infertility problems constitute 40 – 50%. Primary infertility denotes those patients who had never conceived.

While secondary infertility indicates previous pregnancy but failure to conceive subsequently. Infertility is a common condition, affecting 10 – 15 % of reproductive-age couples. Ovarian factors

constitute a major role in female infertility which includes Anovulation, Luteal phase defect, and Luteinized unruptured follicle. Tubal factor, Peritoneal factor, uterine factor, cervical factor, and Vaginal factor are some of the other contributing factors. It can be better understood in ayurveda with the concept of "VANDHYATHA".

STUDY DESIGN:

A single case study of a patient registered in Pankajakasthuri Ayurveda Medical College Hospital Thiruvananthapuram, Kerala, India.

CASE REPORT

A successfully treated case of VANDHYATA in a 29-year-old female who was unable to get a viable child after 9 years of married life.

PATIENT INFORMATION:

HISTORY OF THE PRESENT COMPLAINT

The patient was unable to conceive even after 5 years of unprotected intercourse. So, she underwent treatment from modern medical science including IUI and ICSI. Ovarian drilling was done to treat PCOS. She got conceived by the third attempt of ICSI but got aborted in 6th week of gestation. Thereafter she failed to conceive and came here for Ayurvedic management.

PAST HISTORY

H/O PCOS (for 8 years)

MENSTRUAL HISTORY

The patient visited OP 3 months prior to admission with irregular menstruation and PCOS. At the time of admission, the menstrual pattern got regularised. Present menstrual pattern is (3-4/28-30) Days. No Bleeding / Spotting between periods. Occasionally there is pain associated with periods.

OBSTETRIC HISTORY

Gestational Formula G₁ Po A₁ (Abortion in the 6th week of gestation.) Conceived on 30/04/2018.

PERSONAL HISTORY

Name- XX

Age- 29 Years

Sex –Female

Marital status-Married

Occupation -House Wife

Diet- Mixed

Sleep- Sound

Addiction –Nil

Bowel-1-2 times a day

Appetite -Normal

Bladder-5-6 times a day

Allergy- dust allergy

Weight- 71.8kg

Height- 158 cm

Prakrithi-Kapha pitta

ASHTAVIDHA PAREEKSHA

Nadi - Samagati

Mootram - Sukhapravrtti

Malam - Sukhapravrtti

Jihwa - Anupalepathwam

Drik - Vyktham

Sabda – Spashtam

Sparsha – Anushnasheeta

Akrithi - Madhyamam

ROGA PAREEKSHA

Dosham- Vata, Kapha

Dosham- Rasa, Rakta, Medas, Majja

Desham -Sadharanam

Balam -Madhyamam

Kalam- Puranam

Analam- Vishamagni

Prakriti- Kapha Pitta

Vayah- Younanam

Satva –Madhyamam

Satmyam –Sarvarasa Satmyam

Aharam- Abhyavahara Shakti- Madyamam

Jarana Shakti- Madyamam

ROGA NIRNAYOPAYA

Nidana: Intake of Sheeta, Ruksha, Teekshna, Katu Aharas

Poorvarupa: Aarthavakshayam, agni vaishamyam.

Roopa: Anapathyatha

SAMPRAPTI

Due to Nidana vitiation of dosha, dhatu, upadhathu, artava, and Srotoavarodha occurs and manifests as Aartavkashya and Agnivaishamyam further leads to Abeeja or Beejopaghata, and then to VANDHYATA.

CLINICAL FINDINGS

Inspection -NAD

P/S - Discharge ++

Slight erosion
Hypertrophied(upper lip> lower lip)
B/E - CMT: Nil
No adrenal mass felt
Position: Anterior

DIAGNOSTIC ASSESSMENT

- a) Hematology (15/03/2015)
Hb – 10.4g/dl, RBC - 3.88M/uL, WBC -5.30 K/uL, Platelet Count, 378 K/uL
- b) Hormonal Study (15/03/2015)
FSH-5.35mIU/mL, LH - 13.49mIU/mL, AMH-11.34ng/mL, Prolactin- 15.62ng/mL

THERAPEUTIC INTERVENTION

Chikitsa is focused on the correction of *Agni*, *Apana* *vayu vaigunya*, menstrual irregularities, *Sodhana*, and *Samana chikitsa* is aimed at *Arthava janana* and *Garbhasthapana*.

INTERNAL MEDICINES

OP MANAGEMENT (14/09/2017)

- 1) *Sapthasaram Kashayam + Amruthotharam Kashayam* – Dose – 10ml each + 40ml water
- 2) *Kumaryasavam + Punarnavasavam* – Dose - 10ml each
- 3) *Pulinkuzhambu Choornam* – 1tsp with hot water
- 4) Tablet *Rajapravrthini* – 2 Bd

IP MANAGEMENT (5/10/2017)

1. *Varanadi Kashayam + Amruthotharam Kashayam* – 10 ml each + 40 ml water for 7 days
2. *Triphala Guggulu* - 1 Bd for 18 days
3. *Varanadi Kashayam + Chiravilwadi Kashayam + Vaiswanara Choornam* – 10 ml each + 40 ml water for 7 days
4. *Hingu Triguna Thailam* – 10 drops with *Kashaya*
5. *Punarnavasavam* – 20ml Bd after food.

FROM 14/02/2018

1. *Erandadi special kashaya choornam*- Dose-Half glass bd, B/F (From 14/02/2018 – 24/02/2018)
2. *Varanadi kashayam*-Dose -15ml *kashayam*+45ml lukewarm water. Bd B/F
3. *Yogaraja Guggulu*-Dose-2-0-2 A/F
4. *Kumaryasavam*-Dose-20ml-bd A/F
5. *Sukumara Erandam*-Dose-25ml with hot water

Ayurvedic Therapy:

Panchakarma procedures were adopted for the purpose of *Sodhana* of vitiated *Doshas*.

FROM 5/10/2017

- 1) *Udwarthanam* with *Kolakulathadi Choornam* for 14 days (5/10/17 to 18/10/17).
- 2) *Lepam* with *Rasnajambeeram* for 5 days (6/10/17 to 10/10/17)
- 3) *Snehapanam* with *Varanadi Thailam* for 6 days (20/10/17 to 25/10/17)
- 4) *Abhyangam* with *Kottamchukkadi Thailam + Ooshmaswedam* for 2 days (26/10/17 and 27/10/17)
- 5) *Virechanam* with *Avipathi Choornam* for 1day(28/10/17)

FROM 14/02/2018

- 1)*Abhyangam* and *Ooshma Swedam* with *Himasagara Thailam*. Done for 1st three days along with *Rasna Jambeera Thalam*. (14/2/18 to 16/2/18)
- 2)Started *Yoga vasthi* from 4th day (*Sneha vasti*-5 days, *Kashaya vasti*-3days) -for 8 days.(17/2/18 to 24/2/18)

Sneha vasthi done with *Sahacharadi sevyam* (17/2/18, 18/2/18, 20/2/18, 22/2/18, 24/2/18). *Kashaya vasthi* done with *Maharasanadi kashayam* (19/2/18, 21/2/18, 23/2/18).

- 3)From the 5th day started *avagaham* with *Erandam*, *Nirgundi*, *Shigru kashayam*, and *Triphala kashayam* for 7 days. (18/2/18 to 24/2/18).

Adhonabhi abhyangam is done with *bala Thailam* for 7 days. (18/2/18 to 24/2/18)

PRECONCEPTIONAL CARE

- 1)*Bala Sookshma Choornam* -2 tsp with milk or water
- 2)*Phalasarpi* – 1tsp Bd with milk
- 3)*Maha Dhanwantharam Gulika*– 1 Bd
- 4)*Vilwadi Lehyam*

PATHYA AND APATHYA

1)Pathya

Ahara:-*Masham*, *Ksheera*, *Lashuna*, Rice, fruits, and vegetables, water

Vihara:-8 hrs of sleep, coitus during ovulation time.

2)Apathya

Ahara:-Oily foods, bakery items, *Teekshna ahara*, *katu ahara*, *amla kanji*, *Surana*, *dadhi*

Vihara:- Divaswapnam, Vegadharanam, stress

FOLLOW-UP AND OUTCOME:

Follow up: after 1 month.

The urine pregnancy test was positive on 30/04/2018. Beta HCG- 10746M1U/ML(on 02/05/2018). Thickened endometrium with an anechoic area within the gestational Sac.

DISCUSSION

The case is diagnosed as VANDHYATHVA, SECONDARY INFERTILITY. The condition was associated with PCOS which got corrected before the commencement of IP management. For conception proper functioning of the female reproductive system, menstruation, healthy ovum, and sperm are of prime importance. This is called *Garabhasambhav samagri*. Out of these four basic elements, *Garbhashaya* should be in good condition. This is very necessary for embedding fertilized zygote in the uterine wall, as well as it should have the proper nourishment needed for the growth of the foetus.

The treatment focused to remove the *Avarana* of *Artavavaha srotas* and to achieve *Agnideepti* and *Anulomana* of *Vayu*. Here the site of manifestation is the reproductive system. This patient had the habit of taking *Abhishyandi Aharas* which in turn leads to *Kapha Medo dushti* and *Srotorodham*. This finally results in *Apana vayu Vaigunya*.

Dosha involvement is *Kapha Vata* with *Dushti* of *Rasa, Rakta, Mamsa, Meda, Majja*, and *Sukra*.

The first aim was to correct the menstrual cycle. The first course of medicine was *Amrutottaram kashayam* + *Sapthasaaram kashayam*, *Kumaryasavam* with *Punarnavasavam*, *Pulinkuzhambu choornam*, and *Rajapravarthini gulika*. *Amrutottaram kashayam* with *Sapthasaaram kashayam*, both are mainly *Kaphavatahara*, *Agnideepana*, *Vatanulomana* and *Srotosodhana*.

Kumaryasavam and *Punarnavasavam* both are *Raktha prasadana*, *Deepana*, *kaphavatahara* and *Anulomana*. *Punarnavasavam* is having *Srotovivarana* property. *Pulinkuzhambu choornam* is wonderfully acting on the conditions of *Granthi arthava* is *Vatakaphahara*, *Srotoshodhana*, *Lekhana*, *Deepana*, and *Vatanulomana* in action. *Rajapravarthini gulika* helps to regulate the menstrual cycle. It is again *Vatanulomana* *Srothosodhana* and thus indicated for *Nashtartava*, *Aniyamita Rithu* i.e., irregularities of menstruation.

With all these medicines her menstruation got corrected and on USG no PCOS changes were noted. Next went for *Sodhana* therapy. As a part of *Sthoulya chikitsa Udwarthanam* was done, because the patient was obese (BMI-30.04), it acts as *Kaphahara* and *Medohara*. (After *Udwarthanam*, *Snehapana* with *Varanadigana sidha thailam* was given. Starting dose was 75ml and a maximum of 175ml was given. After *Samyak snigdha lakshana*, 2 days *Abhyangam* and *Ooshma Swedam* with *Kottamchukkadi thailam* was done. It is *Ushna*, *Vatakaphahara* and *Srotoshodhana*. Following this *Virechana* with 30g *Avipathi choorna* was given on the 3rd day.) Along with *Udwarthanam* internally *Varanadi kashayam* and *Amrutottaram kashayam* and *Triphala guggulu* were given. *Triphala guggulu* is indicated for *Vidradhi*, and *Gulma*, and is *Kaphavatahara*, *Medohara*, *Srotosodhana*.

Avipathi choorna is indicated for *Pandu*, *Agnimandya*, and all the inflammatory conditions. It is *Pittakaphahara*, *Srothosodhana* and *Yaktrprasadana*. Here it is given for the proper *Arthava Utpathi*. Good vegas were obtained during *Virechana*. After 1-day rest patient was discharged. During the whole course of internal medications and in patient management, her husband was abroad so the next course of *Yogavasthi* was planned one month prior to his arrival. Till the next course of IP management menstruation was regular with no other complaints.

Erandadi special Kashaya Choornam is a combination of *Erandamoola*, *Beejapooraka moola*, *Gokshura*, *Brihatidwayam*, *Asmabheda*, and *Vilwa*. It is *Vatakaphahara*, *Vatanulomana* and *Mootrala*. *Varanadi Kashayam* is *Kaphavatahara* and *Agnideepaka*. It is very effective in the management of *Gulma* and *Antravirdhhi*. *Yogaraja Guggulu* is *Rajo doshahara* and is specifically mentioned as "*Vandhyanam garbhada*". It is *Tridoshahara* and *Rasayana*. It helps to improve the quality of the ovum. *Kumaryasavam* helps to correct the *Sukradoshas* as *Sukradhatu dushti* is there. It is *Agnideepana*, *Vrishya* and *Krimihara*. So helpful in the proper nourishment of *Dhatu*. *Sukumara eranda* for the purpose of *Mridu Virechana*. Here due to *Agnidushti* and *Avarana*, *Dhatu ksheenatha* was there. To correct that and to get *Anulomana* of *Vayu*, *Sukumara eranda* was given.

With these medications, the Menstrual cycle got corrected and USG reported normal ovaries. So decided to move to the next phase – *Sodhana*. The

first three days *Abhyangam* and *Ooshmaswedam* followed by *Yoga vasthi* were planned. *Vatanulomana* is very important in infertility. Hence *Sarvanga Abhyanga* along with *Ooshmasweda* is done with *Himasagara Thailam*. *Vasthi* is mentioned as *Apatyakara* and is effective in *Alpapushpa* and *Nashtapushpa*. *Apanavayu Vaigunya* which causes the obstruction of the ovum is treated with *Yoga vasthi*. It is mentioned as *Yoni prasadana* and “*Vandhyanam Puthrada*”. *Kashayavasthi* with *Maharasnadi kashayam* is indicated in *Vandhyathva*, *Garbhadharana*, *Brimhana*, and *Yoni roga*. *Snehavasthi* done with *Sahacharadi sevyam* is *Vatahara*, supports *Pakvasayagata vata* and *apana vayu* and indicated for *Yonirogas*.

Adhonabhi Abhyangam with *Bala thailam* is done as it cures *Yoniroga*. For reducing *Vatakopa Avagaha* is done with *Vataharapathra kashayam* (*Erandam*, *Nirgundi*, *Sigru*) and *Triphala kashayam*.

With all the medications patient got conceived after one month after her husband's arrival. ie within a cycle itself.

PATIENT PERSPECTIVE

The patient was satisfied with the treatment as she got conceived.

INFORMED CONSENT

The patient provided written permission for the publication of this case report.

CONCLUSION

This case report shows how effectively *Ayurvedic* treatment modalities can manage secondary infertility. The result obtained in the single case study is patient conceived within a follow-up period of 3 months and had no significant complications during this study.

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