

## Review Article on *Ayurvedic* Concept of Prerventive Management of *Vandhavytva* w.r.s to Infertility

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### Abstract:

*Ayurveda* is an ancient science, which mainly focus on the concept of prevention of disease. Healthy progeny is an important factor for healthy population, but due to increase in the infertility also called as *vandhyatva* in *Ayurveda*. As per *Ayurveda* important factors for conception are considered as *Ritu* (fertile period), *Kshetra* (uterus and reproductive organs), *Ambu* (proper nutrient fluid) and *Beej*(ovum) and also normal of *Hridaya*(psychology)*vandhavytva*( infertility) has been long standing problem science ancient period. According to modern concept infertility is failure to conceive within one or more years of regular unprotected coitus. The historical importance of *strivandhyatva* and a comparative study, *nidan*, *samprapti*,*lakshan*, *chikitsa* etc. compiled from various *granthare* being presented in the study. The major causes are including male factor such as azoospermia, hypospadias, female factors such as peritoneal factor, tubal factor, ovarian factor, cervical factor. Sometimes unexplained causes are also responsible for infertility. So this article contents general awareness and clinicallyused various treatment modalities as per *Ayurveda* for female infertility.

**Keywords:** *Ayurveda*, *Vandhyatva*, infertility.

### Introduction:

*Vandhatva*(infertility) has been major problem since ancient period. Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus. As per WHO, positive reproductive health of a women is a state of complete physical, mental and social

wellbeing and not merely absence of disease related to reproductive system and functions. If the antiquity of *Vandhyatva* is looked back, one can see the praise of a fertile woman and slander of a barren woman.

**Definition:**

Infertility is defined as the inability of a sexually active, non-contracepting couple to achieve pregnancy in one year.

**Types of infertility:**

There are two types of Infertility:

1. Primary infertility

2. Secondary infertility.

**a. Primary infertility:** It denotes those patients who have never conceived.

**b. Secondary infertility:** It indicates previous pregnancy but failure to conceive subsequently within one or more years of unprotected regular intercourse.

**Causes of Infertility**

- For conception the fertility potential of both male and female partners are responsible.
- Male factors up to 30 – 40%.
- Female factors 40-45%.
- Both the factors in 10% of cases.

**Male factors**

1. Defective spermatogenesis.
2. Obstruction of the efferent duct system.
3. Failure to deposit sperm high in the vagina.
4. Errors in the seminal fluid.

In *Ayurveda*, *Vandhyatva* (infertility) is a condition where, due to factors like *Sukra Dosha* (unhealthy semen), *Ativyayama*(overexercise), and loss of *Bala*(low strength)and improper *Ahara*(food)and *Vihara*(lifestyle)etc., the *Beejamsha* (spermatozoa and ova) gets defected and finally leads to reduced fertility of *Sukradhatu* (sperm).In *Ayurveda*,this condition is managed with multiple concepts of correcting the states of *Dhatu* and *Doshas*. *Balya* (which increases strength of body), *Vrishya* (which increases fertility), *Brumhana* (which nourishes body),*Rasayana*(nourishing tissues)and *Vajeekarana Dravya*(increasing sexual potency) are used effectively in improving sexual wellness. Understanding *Vandhyatva* (infertility) from all aspects of reduced fertility and management of the condition from *Ayurveda* point of view has been elaborated.

### **Female factors**

**The important causes of female factors are described as follows:**

1. Vaginal factors
2. Uterine factors
3. Tubal factors
4. Peritoneal-factors
5. Ovarian factors
6. Coital errors
7. Cervical factors

**Some other factors which hamper the fertility are:**

- Any psychiatric illness
- Antipsychotic drugs
- Endocrine Disorders
- Cushing's syndrome
- Thyroid disease
- Diabetes- Both type I and type II diabetes
- women with PCOS
- overweight

**Female factors of infertility according to *Ayurveda*:**

- *Ashudha yoni*
- *Garbhashaya beejbhagapra dosha*
- *Suchimukhi yonivyapad*
- *Antarmukhi*
- *Karnini*
- *Yoni arshas*
- *Shlaishmiki yonivyapad*
- *Garbhashaya greevamukhagata varna.*

### **Unexplained infertility –**

In about 10% of cases the infertility investigation will show no abnormalities. In these cases abnormalities are likely to be present but not detected by current methods. Possible problems could be that the egg is not released at the optimum time for fertilization, which it may not enter the fallopian tube, sperm may not be able to reach the egg, fertilization may fail to occur, transport of the zygote may be disturbed, or implantation fails. It is increasingly recognized that egg quality is of critical importance and women of advanced maternal age have eggs of reduced capacity for normal and successful fertilization.

### **According to Ayurveda classification of *Vandhyatva*:**

The woman in whom there is a hindrance of any kind to the normal process of conception is called *Vandhya*. The Classification of *Vandhyatva* has not been given separately in any classics except *Harita Samhita*, *Rasa Ratna Sammucchaya* and *Vandhya Kalpadruma*.

### ***Maharshi Harita* classified *vandhyatva* in six types, viz.**

- *Kakvandhya* (one child sterility)
- *Anapatya* (no child or primary infertility)
- *Garbhasrav i*(repeated abortion)
- *Mritvatsa* (repeated stillbirths)
- *Balakshaya*( loss of strength)
- *Vandhya* due to *balyavastha*, *garbhakoshabhanga* and *dhatukshaya*.

### **Essential factors for fertility:**

#### **According to *Acharya Charaka* :**

- ***Matrutahand Pitrutah***: The normalcy of *Shonita* and *Shukra*.

***Aatmatah and Satvataha***: *Aatma* is always encircled with *Satva*, which descends in the fertilized egg, and forms *Garbha* (embryo) without them the formation of *Garbha* is not

possible and established idiopathic infertility

- **Satmyataha and Rasataha:** Then ormalcy of *Shonita* and *Shukra* greatly depend upon the use of *Satmya Aahar* and *Vihar*. The nourishment of mother and embryo depend upon the *Rasa*. Without *Rasa* even mother cannot survive, so there is no question about embryo.
- **Rutu:** Fertile period is more explained by *Acharya Dalhana* that *Rutu* means *Rajaha Kala* i.e.ovulation period. Deposition of the spermatozoa in the upper vagina should be in appropriate time of the menstrual cycle.
- **Kshetra:** Anatomically and physiologically adequate reproductive organs. Vagina must be healthy. Cervix and its secretion are also permitted to pass spermatozoa. The oviduct must be patent and sufficient cilliary movement is present. The uterus must be capable of supporting implantation and fetal growth throughout pregnancy.
- **Ambu:** Proper nourishment to genital organs, adequate hormonal level and proper nutrition is required for genital organs.
- **Beeja:** The adequate ovum and spermatozoa and the female's ovulatory mechanisms must be normal. The male must produce an adequate number of normal spermatozoa. In the practice so many cases are seen ,in which all above factors are fulfilled, yet pregnancy cannot takeplace.

This condition is known as idiopathic *Vandhyatva*. This condition can be explained by the *Atmaja* and *Satvaja Bhavas* of *Acharya Charaka*. So in any abnormality in these essential factors, cause *Vandhyatva*.

### Causative factors

Without *Vata* the *Yoni* never gets spoilt, *Vandhyatva* has also been described in eightytypesof*Vatavyadhi*(*Cha.Chi.30/115*).So,*Vata* is the prime causative factor of *Vandhyatva*. *Acharya Charaka* has clearly described the *Nidanof Vandhyatva* which is almost similar to causes of infertility according to modern science.

### Other causative factors are as follows:

**A.YONI PRADOSHAT:** The word "*Yoni*" refers to entire reproductive system. Thus under this heading, congenital or acquired disease of anatomic components of reproductive system i.e. vagina, cervix, uterus, fallopian tubes can be included.

**It includes,** 1) *Yonivyapada*

- 2) Injury to *ArtavavahaSrotas*
- 3) *Yoniarsha*
- 4) *Garbhakoshabhanga*
- 5) *Bhagasankocha*
- (6) *Sphalita Mutratva*
- 7) *Utkshipta Yoni*
- (8) *Aticharana Yoni Yyapada*

**B) MANSIKA ABHITAPA:** Normal psychology of the Couple is very important for achievement of pregnancy.

**C) BEEJADUSHTI:** When in Ovum, the gene concerned with uterus is damaged, the progeny becomes sterile.

**D) SHUKRA DUSHTI:** Quantitative and qualitative abnormalities of sperms along with spermatic fluid cause infertility.

**E) ARTAVADUSHTI:** The word *Artava* refers to ovum, menstrual blood, and ovarian hormones. Abnormality of ovum and ovarian hormones produce infertility.

**F) AHARADOSHA:** Dietetic abnormalities cause infertility in two ways: 1. by producing loss of *Dhatu* and that of *Dhatvagni*, thus they influence hormones.

2. By vitiating *Doshas* which cause various gynecological disorders, leading to infertility.

**G) VIHARA DOSHA:** Abnormal mode of life and suppression of natural urges aggravate *Doshas*, which produce. Management of Female Other than the supine posture of the women during coitus, discharge of semen on *Samirana Nadi* or outside the vagina comes under defective practice. In all these conditions probably semen is not properly deposited inside the vaginal canal. Thus sperm fail to enter uterus causing infertility. Abnormalities of mode of life also produce infertility in two ways. 1. By vitiating *Doshas*, they cause gynecological disorder 2. By preventing proper entry of sperm due to faulty deposition of seminal ejaculation.

**H) AKALA YOGA:** The word "*Kala*" refers to period of age and *Rutukala* both. In adolescent girls and old ladies due to pre menarche and menopause stage respectively and before or after *Rutukala* due to absence and destruction of ovum respectively, the conception does not take place.

**I) BALA KSHAYA:** *Bala* refers to physical strength and capacity to become pregnant. Here, probably *Bala* refers to infertility due to unknown cause or premature aging or any systemic disorder.

## *Ayurvedic chikitsa*

The treatment has been divided in to two types.

a. *Shodhana Chikitsa*

b. *Shamana Chikitsa*

### **A. SHODHANA CHIKITSA:**

**Panchakarma** therapy (for *Sharira Shodhana* purpose) should be done, especially *Basti* because of its wide range and effective use for *Vata Dosha*. Importance of *Panchakarma*.

1) Pre-conceptional use of *panchakarma* to get quality progeny. The couple who wants best progeny should undergo the process of *panchakarma*, after *panchakarma* male should take *eksheera ghrita* and female should take *tila taila* and *Urada*. In our daily practise we generally use *Dashmula Taila – Snehana Dashamula Kwatha - Dwedana, Trivritadileham – Virechan Balapanchanga Kwath – Asthapana Bala Taila- Anuvasana*

2) *Virechana* for ovulation: Patient with PCOS, generally we use *virechana* for *snehana* we use many *Ghrita* like *Brahmighrita, Phalaghrita, Shatavarighrita*, etc.

3) *Nasya karma* helps in conception and stability of pregnancy. *Nasya* with *Anutaila* may help to regulate H-P-O axis.

4) *Aasthanabasti* and *Anuvasana Basti* followed by *Uttar Basti* useful to correct ovulatory factor, tubal factor, uterine factor and cervical factor. *Uttar basti* with *brahmighrita, phalaghrit ashatavarighrita* helps in *Kshetra Nirmana*, *Uttar basti* with *kshara ghrita, panchagavyaghrita, dhanvantartaila* helps to patent the tubes.

5) *Shirodhara* used to regulate H-P-O axis. *Shirodhara* with *taila, dashmulakwatha*, milk, *takra* as per *prakriti* and *dosh dushti* in patient.

### **(B) SHAMANA CHIKITSA:**

The therapeutic measures mentioned for *Pradara, Raktatisara, Shonitapitta, Raktarshacan* be adopted as *Yoni Rogas Chikitsa* (Cha. Chi. 30/327). *Rasayana* and *Vajikarana* drugs are also useful for treating *Yoni Roga*. (*Su.Sha.2/12 Dalhana*)

### **Role of *rasayan* and *vajeekarana* drugs in *Ayurveda*:**

*Vajikarana* Or *Vrishya Chikitsa* is a one of eight majors pecialty of the *Ashtanga Ayurveda* which has aphrodisiacs effect and improves virility and health of progeny.

*Rasayana* drugs modulates neuro-endocrino-immune system.is the special category of *Rasayana* ,which improve the reproductive system and enhance the sexual function. *Vajikarana* also claims to have anti- stress, adaptogenic actions to alleviate anxiety associated with sexual desire and performance. Some of the formulations are, *Vrihani Gutika*, *Vrishya Gutika*, *Vajikaranam Ghritam* , *Upatyakari Shashtikadi Gutika* etc.

### **Ayurvedic preventive measures for *vandhayatwa*:**

- Intake of proper diet and following *pathya* and *apathya*
- Addition of ayurvedic concepts in life style which includes *dinacharya*, *rutucharya*, *trayopstambha*, *sadvritta*, *achararasayana*, *ashtanga yoga*.
- Following *panchakarma* procedure.
- Regular practice of yoga which includes *suryanamaskar*, *pranayama*.

### **Discussion**

- *Vandhyatwa* is infertility which affects both in couples psychologically to greater extent. In *ayurveda* also causes of infertility is mentioned in which both male and female factors are responsible due to change in lifestyle. In classical *ayurvedic* texts various causes of *vandhavyta* is summarized which are the basic causes of infertility in the female by following the proper *panchakarma chikitsa* which includes *shodhan* and *shaman chikitsa* , following *ritucharya*, *dincharya*, and adaptation of yoga in the daily routine. As in female *basti* treatment gives the significantly good results and in male use of

*vajikaran* treatment which includes intake of *ayurvedic* drugs such as *gokshura*, *ashwaghadha*, *yashtimadhu* has significant results. Some unexplained factors are also responsible for the infertility, which are not clinically diagnosed in the routine



examination. In *panchakarma*, *basti* is the most effective treatment mentioned in *ayurvedic* texts. This treatment shows the highly significant results in treatment of infertility.

## Conclusion

Infertility is becoming one of the major problems in the society. Due to change in lifestyle & amalgamation of environmental, social, psychological and nutritional factors and preventive measures mentioned in classical *ayurvedic* texts. In *Ayurveda* contemporary medicine, treatment concentrating on correcting dysfunction diagnosed with the numerous diagnostic tests. The adaptation of infertility management including hormonal therapy, ovulation induction and invasive diagnostic techniques are huge. But the success rates are less and highly expensive too. *Ayurveda* on the other hand, looks profoundly into the distinct constitution and goals to improve the functioning of body systems that contribute in the process of fertilization and encouraging the better results in fertilization.

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