

Ayurvedic Management of Primary Infertility Associated With Poly Cystic Ovarian Morphology – A Case Study

Asuti G^{1*} and Nirwani G²

¹Department of Prasuti Tantra and Stree Roga, Sanjeevini Ayurveda Medical College and Hospital, Gokul Road, Hubballi, Karnataka, India

²Department of Roga Nidana and Vikruti Vijnana, Sanjeevini Ayurveda Medical College and Hospital, Gokul Road, Hubballi, Karnataka, India

***Corresponding author:** Gourish Asuti, MS (Ayurveda), Professor and HOD, Department of

Prasuti Tantra and Stree Roga, Sanjeevini Ayurveda Medical College and Hospital, Basaveshwar Nagar, Gokul Road, Hubballi, Karnataka, Email: drgourish@gmail.com

Abstract

The present day life style and food habits have been changed so much so drastically that the younger generation are landing up in many major health issues including life style disorders. Poly cystic ovarian syndrome, further resulting into primary infertility is a major cause of concern in the reproductive age groups of the present day generation.

The present case report is of an infertile married couple who had not been able to conceive even after 4 years of regular unprotected sexual life. The female partner was diagnosed with PCOS. The couple underwent conventional treatments of primary infertility but did not get any fruitful results. Eager to conceive, they approached us for Ayurvedic treatment.

Based on the Ayurvedic diagnostic parameters, the case was diagnosed as primary infertility (Vandhyatva) associated with poly cystic ovarian morphology. Along with proper lifestyle and diet, the patient was given with Ayurvedic Shamanoushadhis for 6 months, after which she successfully conceived and delivered a healthy male baby.

Keywords: Primary Infertility; PCOS; Vandhyatva; Shamanoushadhis

Introduction

The drastic changes in the human lifestyle and food habits have lead to many grave health hazards. Among them primary infertility is one of the predominant health issues faced by the married couple nowadays. Infertility is defined as the inability of the married couple to conceive even after 1 year of regular uninterrupted sexual life [1]. According to a survey conducted in central India, the condition seems to be common in 10-15% of couples [2]. As per the current statistics male infertility problems constitutes 30-40% and female infertility problems constitutes 40-55% and both are responsible in about 10% cases [3]. A critical evaluation on female infertility shows that ovulatory factors contribute almost 30-40% of the case. Among anovulatory causes of infertility, Poly Cystic Ovarian Syndrome (PCOS) plays a major role [4]. A direct description of Poly Cystic Ovarian Syndrome in classical Ayurveda texts is not seen. But by considering the clinical features and analysing the Dosha involved, the treatment principles of Vandhyatva can be adopted to get good results in the cases of primary infertility. One such successful case study is been reported in the present paper.

Patient Information

Married young couple approached our OPD with the complaint of inability to conceive even after 04 years of regular unprotected sexual life. The semen parameters of

Case Report

Volume 7 Issue 2 Received Date: May 08, 2023 Published Date: June 16, 2023 DOI: 10.23880/jonam-16000402 husband were found to be within normal limits. The wife, aged 24 years, had no menstrual irregularities in past. According to her, she used to get the cycle every month and the bleeding would be seen for 4-5 days duration.

Previous History

After 2 years of marriage, in the year 2020, she missed her menstrual cycles for 2 months. Anticipating some good news they underwent Urine pregnancy test, but it showed negative result. Hence they underwent 2 years of conventional hormonal treatment for the same but they did not get any fruitful results. Finally when they were advised for alternative methods of pregnancy like Intra Uterine Insemination etc, they approached Ayurveda, with the eagerness and willingness to conceive by natural method.

Ayurvedic Approach

The couple approached our OPD in December month of 2020. Detailed history was taken. It was noted that the patient was not a known case of diabetes, hyper tension, asthma or thyroid disorders. She was not on any medications. According to the patient she had normal menstrual history but after marriage, she developed irregular menses. To rule out the possibilities of PCOS, we advised USG in January 2021. The USG report had the impression of "Bilateral Polycystic Ovarian Morphology".

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The patient was thus diagnosed as primary infertility associated with PCOS. Samprapti drawn was: Kapha Medodushti and Srotorodha causing Avarana of Artavavavaha srotas leading to Nashtartava and Vandhyatva. Considering all these factors treatment principles of Vandhya, Nashtartava and Medohara were adopted.

Therapeutic Intervention

The patient was advised with the following medicines:

- Cap. `Stree Hita (1 BD after food)
- Cap. Pconidd (1 BD after food)
- Tab. Kanchanara Guggulu DS (1 BD before food) for 2 months.

During the course of medicines, it was observed that, her menstrual cycles were regularised. We advised her to continue the same medicines for another one month. During this period, we got her Thyroid profile, Hb% report, AMH (Anti Mullerian Hormone) report, FSH and LH report, Prolactin reports done, which showed all normal values.

After 3 months of above medications, the Follicular study was performed and the observations were as follows (Table 1):

Day	Date	DF Right Ovary	DF Left Ovary	E.T.	Fluid in POD
10^{th}	13-3-2021	1 DF 13x12mm	No DF	9 mm	-
12 th	15-3-2021	1 DF 15x12mm	No DF	9.8 mm	-
19 th	22-3-2021	No DF	No DF	11 mm	-

Table 1: The Follicular study and the observations.

By seeing the dominant follicle in the right ovary, we educated the couple to have intimate physical contact between the 12th to 18th days of her menstrual cycle. On the 19th day, ruptured follicle was also reported along with normal uterus and ovaries which indicate that the PCOS has been cured completely. But unfortunately the patient did not conceive as she got her menses.

We encouraged the couple by explaining the positive outcomes of the treatment till now and convinced the couple to continue the same medications for another 2 months. She happily agreed and continued the medicines in April and May months and in the month of June she missed her menses. Urine pregnancy test showed positive result. Hence on 3^{rd} July 2021, USG was performed and the impression read "Single intrauterine live embryo of average gestational age of 06 weeks 00 days".

Overwhelmed by the result, the couple further continued Ayurvedic medicines and ANC regime. We advised her following medicines during her pregnancy:

- Tab. Garbhapala Rasa (1 OD)
- Tab. Faala Gold (1 OD)
- Tab. Ostone (1 OD)
- Syp. 4Blud (3 tsf BD)

Out come

With no any gestational complications, she delivered a healthy male baby on 2/2/2022 through LSCS.

Discussion

The diagnosis was made as primary infertility with PCOS. But according to Ayurvedic principles, we drew the Samprapti as: Ahitakara Ahara vihara lead to Kapha Medo

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Dushti which in turn lead to Srotorodha causing Avarana of Artavava vaha srotas. The normal movement of Vata especially Apana vata got obstructed by the increased Kapha which in turn obstructed the natural functioning of Artava.

The ultimate aim of the treatment was to release the obstructed Vata and to enable its normal functioning in the Koshta especially in Garbhasaya. The obstruction was because of the accumulated Kapha in the channels of Vata especially in Arthavavavaha Srotas. Hence, medicines with Kapha vata shamaka properties were selected.

Shodhana with Panchakarma therapies can also be adopted in this kind of cases. But in the present study, we got fruitful results with Shamanoushadhis only. The successful outcome in the present case signifies the relevance of logical selection of medicines according to the stage, judicious combination of internal medicines, diet and regimen for the complete cure of the disease.

Conclusion

The present case study showed how we can manage primary infertility associated with PCOS effectively through Ayurvedic Shamanoushadhis alone. The result obtained in this single case study is encouraging and the protocol followed here may be subjected for trial in larger samples.

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