



AYURVEDIC MANAGEMENT OF INFERTILITY IN A COUPLE: A CASE REPORT

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ABSTRACT

Infertility is a condition characterised by the inability to conceive a child after a year of regular, unprotected sexual intercourse. It can affect both men and women and can be caused by various factors. Infertility can be a complex and multifaceted issue, and it can be a profoundly distressing and emotionally challenging experience for individuals and couples. Seeking support from healthcare professionals, counsellors, and support groups can help manage the emotional impact of infertility. Infertility treatment varies depending on the underlying cause. Some individuals or couples may find success with medical interventions, while others may choose to explore alternative paths to parenthood, such as adoption or surrogacy. This case report concerns a couple who failed to conceive with a history of 8 years of married life. The female partner diagnosed with Primary Infertility due to PCOS and the male partner with Primary Infertility associated with Asthenozoospermia were given *Rasayana* and *Vajeekara* drugs respectively, for two months, along with proper diet advice. This case report describes the role of *Rasayana* and *Vajeekarana* drugs in managing both female and male infertility.

Keywords: Infertility, Primary Infertility, PCOS, Asthenozoospermia, *Shamanoushadis*, *Rasayana*, and *Vajeekara* dravyas.

INTRODUCTION

Infertility affects around 1 in 7 couples of reproductive age, often causing psychological distress^[1]. The leading causes in women include ovulatory dysfunction (polycystic ovarian syndrome), tubular dysfunction (Pelvic Inflammatory disease, Endometriosis), cervical and uterine dysfunction (congenital abnormalities, Fibroids) and causes in men include reduced sperm quality, motility and production, varicocele, congenital anomalies of vas deferens/epididymis as well as sexually transmitted infections in both the partners^[2]. Infertility can be primary or secondary. Primary infertility is when a person has never achieved a pregnancy, and secondary infertility is when at least one prior pregnancy has been achieved^[3]. Addressing this condition is essential as every human being deserves a happy life with their kids. In this case, the female partner was diagnosed with PCOS-related infertility, and the male partner was diagnosed with asthenozoospermia-related infertility. Polycystic ovary syndrome (PCOS) is a hormonal imbalance that occurs when ovaries (the organ that produces and releases eggs) produce unusually high levels of hormones called androgens. This causes reproductive hormones to become imbalanced. As a result, people with PCOS often have irregular menstrual cycles, missed periods and unpredictable ovulation. Small follicle cysts (fluid-filled sacs with immature eggs) may be visible on ovaries on ultrasound due to lack of ovulation (anovulation)^[4]. Asthenozoospermia

(also known as asthenospermia) is an infertility condition in which a person has reduced sperm motility (the ability of the sperm to move). Reduced sperm motility decreases the chances of the sperm fertilising the egg in the female reproductive tract^[5]. In *ayurveda*, *Vandhyatwa* is the term used to describe infertility, and with the help of *Rasayana* and *Vajeekara* drugs, infertility can be managed. So, in this couple, *Rasayana* and *Vajeekara* drugs were administered for two months.

Case Details

Male Partner

Thirty-seven years old male with a history of 8 years of married life failed to conceive.

N/K/C/O HTN, DM.

Diagnosis: Infertility associated with Athenozoospermia.

Female Partner

Twenty-five years old women with a history of 8 years of married life failed to conceive.

Married life: 8 years

Menstrual cycle: Irregular menstruation (Gets cycle only when she takes Registerone).

N/K/C/O HTN, DM

Diagnosis: Infertility associated with PCOS

MATERIALS AND METHODS

The treatment protocol planned was *Deepana* and *Pachana*, *Koshtashuddi* and *Shamanoushadis* and *Rasayana*, as well as *Vajeekara* drugs.

Table 1: Showing treatment protocol of female partner.

S.No	Drug	Dosage	Adjuvant	Duration
1	<i>Haritakyadi yoga</i> ^[6]	Three gms BID before food	Lukewarm water	Seven days
2	Grab capsule	One cap BID after food	water	Two months
3	<i>Chandraprabha vati</i> ^[7]	1 Tab BID, after food	water	Two months

Table 2: Showing treatment protocol of the male partner.

S.No	Drug	Dosage	Adjuvant	Duration
1	<i>Agnitundi Vati</i>	One tab BID, after food	water	Three days
2	<i>Gandharvahastadi Taila</i>	15 ml OD at night, after food	Milk	Seven days
3	Cap. Addyzoa	One cap BID, after food	water	Two months
4	Cap. Verya	One cap BID, after food	water	Two months

RESULT

The couple got conceived.

Table 3: Showing BT and AT value of Progressive Motility of Male Partner

1	Progressive Motility	BT	AT
		1%	40%

Table 4: Showing BT and AT USG report Female Partner

Sl. No	Date	BT	AT
1	24/04/2023	PCOS like morphology (Right ovary measures 3.2x2.0 cm, Left ovary measures 3.2 x 1.6 cm).	
2	21/06/2023		Single Intrauterine live fetus with the approximate gestational age of the fetus is eight weeks four days.

DISCUSSION

Infertility is a medical condition that affects millions of couples around the world. A variety of factors can cause it. Infertility can be a challenging and emotional experience for couples who are trying to extend their family. Disappointment, frustration and sadness can impact the relationship between partners and family. Due to financial difficulties, a lot of couples fail to afford modern fertility treatments like surgery, medications and assisted reproductive technologies such as IVF. So, in this case, couples are treated entirely with only *Ayurveda* medications. A female partner who was diagnosed with Primary infertility associated with PCOS is given *Haritakyadi yoga* for *Deepana-Pachana* and *Koshtashodhana* for seven days; later, Cap Grab and *Chandraprabha vati* are provided for two months. The male partner, who was diagnosed with Primary infertility associated with Asthenozoospermia, was given *Agnitundi vati* for *Deepana- Pachana* for three days; after that, for *koshtashodhana Gandharvahastadi taila* was given for seven days and then Cap Addyzoa and Cap Verya were given for two months.

PCOS is a hormonal disorder that affects women of reproductive age. There are various causes for PCOS: Insulin Resistance, Hyperandrogenism, Inflammation and Hormonal imbalance, which in turn leads to ovarian dysfunction. The enlarged ovaries with multiple small follicles fail to mature and release

eggs, causing anovulation and ending up in the manifestation of PCOS, thereby inducing infertility in women. So, the drugs like *Chandraprabha vati* and Capsule Grab administered in this case have the following properties.

Chandraprabha Vati: *Chandraprabha Vati* has *Agnideepana*, *Rasayana*, *Tridoshahara*, and *Lekhana* properties. The *Rasayana* property of *vati* boosts immunity, and the *Lekhana* property helps dissolve cysts. *Chandraprabha Vati* improves ovulation and brings menstrual regularity, which is essential for fertility. PCOS is associated with chronic inflammation and oxidative stress, which can affect fertility. *Chandraprabha Vati's* anti-inflammatory and antioxidant properties may help reduce inflammation, protect ovarian function, and improve egg quality, all of which are important for fertility.

Capsule Grab: Ingredients like *Triphala Guggulu*, *Manjishtha*, and *Guduchi* have anti-inflammatory properties that help reduce inflammatory changes in PCOS. The antioxidant and immunomodulatory properties of *Triphala Guggulu* help combat oxidative stress and boost the immune system.

Asthenozoospermia is an infertility condition in men wherein a man produces sperm with low motility. Due to various factors like genetic, environmental, hormonal imbalance and stress, there will be increased oxidative stress, which leads to sperm cell membrane damage and, in turn, will impair sperm

motility as well as count. So, the following drugs were given in this condition.

Capsule Addyzoa: Capsule Addyzoa enhances Sperm motility by increasing the movement and forward progression of sperm, which is essential for successful fertilisation and conception. The drug's antioxidant properties help protect sperm from oxidative damage. It also has hormone-regulating and adaptogenic properties.

Capsule Verya: The ingredients of Cap. Verya has Aphrodisiac, Spermatogenic, Adaptogenic, and hormone-balancing properties, which enhance libido and sperm cell production, reduce stress levels, and regulate hormonal imbalance.

CONCLUSION

Infertility can have negative social impacts on the lives of infertile couples, particularly women. These negative impacts may lead to varying degrees of depression, anxiety, distress and poor quality of life. So, proper intervention is need of the hour to balance both physical and mental health. *Ayurveda* offers a holistic approach to addressing infertility in both men and women, with *Rasayana* drugs playing a significant role in improving reproductive health and *Vajeekara* drugs are specially aimed at improving sexual function, enhancing libido and increasing sperm count and quality. Along with medicines, following a proper diet and lifestyle is crucial in preventing any disease. In this case, with the help of

Rasayana and *Vajeekara* drugs, the couple got conceived. Hence, the treatment may be considered adequate. Even though infertility is a complex and challenging issue, but with the proper support and treatment, couples can overcome them and fulfil their dream of starting a family.

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