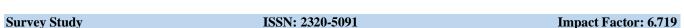


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SURVEY STUDY - TO ASSESS ASHTA ARTAVA DUSHTI AND ITS PREVALENCE IN INFERTILITY

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ABSTRACT

Shuddha Artava is central to conception and women's overall reproductive health. Shuddha Artava implies that the menstrual blood and ovum are pure, healthy, and untainted by toxins (Ama) or other impurities. This purity is seen as a sign of balanced reproductive health and is crucial for successful conception. Ayurveda has elaborated different gynaecological disorders under Yoni Vyapad, Artava Vyapad, Asrigdara, Arbuda, Arshas, Vandhyatwa, Shweta Pradara, and Artava Dushtis. There is a strong correlation between Artava Dushti and Infertility. Multiple factors cause infertility, and addressing these factors is of primary importance. Therefore, Nidana Parivarjana is the fundamental tenet. Infertility is defined as the inability of a couple to achieve conception after one year of unprotected coitus. For a married woman, childlessness can be tragic and lead to problems in her marriage as well as personal sadness and poor health. 10%–15% of marriages end up being childless. Few reasons for infertility are understood. Thus, diagnosing and treating them is crucial according to Ayurveda's Shuddha Artava concept.

METHODS

A cross-sectional survey study with 150 female volunteers who met the diagnostic criteria for infertility was chosen, and the Ashta Artava Dushti Assessment Validated Questionnaire was administered. The assessment was based on the subjects' responses.

RESULTS

Artava Dushti is prevalent in infertility patients. Most subjects have primary infertility. The Lakshanas described by Acharyas for different Ashta Artava Dushti are present in infertile patients.

INTERPRETATION & CONCLUSION

This study attempted to understand and clinically evaluate each Artava Dushti and their Lakshana, which seems difficult. Though the results show the prevalence of *Artava Dushti* in infertility, further study can be carried out on a large population. In this study, it was discovered that the *Lakshanas* described by Acharyas for *Ashta Artava Dushti* are present in infertile patients.

Keywords: Ashta Artava Dushti, Infertility.

INTRODUCTION

Ovarian hormones (Beeja), menstrual blood (Rajas), and menstrual ovum are all referred to as Artava (Upadhatu). Synonyms like Shonita, Asrik, Raja, Rakta, Lohita, Rudhira, and Pushpa denote menstruation and ovum.[1] Artava is necessary for both the embryo's growth and the health of female reproduction. According to Ayurveda, the majority of menstrual disorders fall under the category of "Ashtartava Dushti". Ashta Artava Dushti is explained in Ashtanga Hridaya, Ashtanga Sangraha, and Sushruta Samhita. This is also known as Rutu vyapad and Artava Vyapad. There are eight, including Vataja, Pitta-Kunapagandhi, Granthibhuta, ja, Kaphaja, Pootipooya, Ksheena, and Mutra-purisha-gandha. [2,3,4] Acharya Vagbhata considers healthy Artava essential for conception. He explained that congenital maldevelopment or deformity is due to Beeja dosha, which can be taken as Artava Dushti.[5] One of the etiological factors listed in Yonivyapad Nidana is Pradushta Artava. [6,7]

Acharya Charaka has included abnormality in *Asrik* as the cause of delay in achieving conception by an otherwise fertile or *Sapraja* woman.[8] While describing *Ashta Artava Dushti*, Acharya Sushruta in Sharira Sthana mentioned that a person affected by *Artava Dushti* is incapable of getting children.[9] Hence, diagnosing the type of Artava Dushti properly is essential, as treatment depends on diagnosis.

The term "Vandhyatwa" describes the delay or obstruction of this capacity. The prognosis of Vandhyatwa depends upon the causative factors. Multiple factors cause infertility, and addressing

these factors is of primary importance. Therefore, *Nidana Parivarjana* is the fundamental tenet.

Infertility is defined as the inability of a couple to achieve conception after one year of unprotected coitus. For a married woman, childlessness can be tragic and lead to problems in her marriage as well as personal sadness and poor health. Human infertility has been a source of individual suffering and perhaps global issues since the dawn of humanity. 10%–15% of marriages end up being childless.

In India, the overall prevalence of primary infertility lies between 3.9% and 16.8%, as per WHO estimates. Infertility is a significant clinical problem today, affecting 8-12% of couples worldwide.[10]

Evaluating the typical Artava Dushti symptoms can be challenging, making a diagnosis difficult and selecting the right treatment. Few reasons for infertility are understood. Thus, diagnosing and treating them is crucial according to Ayurveda's *Shuddha Artava* concept.

Objectives of the study -

Primary objectives: To diagnose infertility cases by questionnaire and clinically diagnose and evaluate the *Ashta Artava Dushti*.

Secondary objectives: 1. To critically analyse the classical *Lakshana* of *Ashta Artava Dushti*. 2. To ascertain the prevalence of *Artava Dushti* in infertility.

Material and Methods -

Sampling Method and Research Design –

150 Subjects fulfilling the inclusion criteria were taken from the OPD & IPD department of PG studies in *Prasuti Tantra & Stree Roga*, Sri Sri College of

Ayurvedic Science and Research Hospital, Bengaluru.

Research design:

A cross-sectional survey study with 150 subjects fulfilling inclusion criteria was selected and given a questionnaire.

Inclusion criteria:

Subjects between the age group of 20 years to 45 years, having regular, irregular menstrual cycles, Primary and secondary infertility. (Anxious to conceive with unprotected sex for 6 months for more than 35 years of age and 1 year for less than 35 years of age.)

Exclusion criteria:

Subjects below the age of 20 years and above the age of 45 years.

Assessment -

1. Diagnosis of Infertility patients was done by taking a detailed case history regarding infertility.

- 2. *Artava Dushti* was evaluated by a validated questionnaire prepared based on classical references.
- 3. Based on the *Lakshanas* stated by the subjects, *Ashta Artava Dushti's* diagnosis was made.

Results -

The symptoms were diagnosed using the Lakshanas d escribed in the Ayurvedic texts, compiled from nume rous references.

Then, a questionnaire focused on comprehending the meaning of each word was presented.

Based on an understanding of the symptoms, the men stru-

al history and characteristics of menstrual blood, type and site of pain, amount of bleeding (pads/days and soakage), the colour of menstrual blood, consistency of bleeding, and other associate d symptoms were assessed by asking questions of the study participants.

Table 1: Demographic Profile

Parameter	Category	Total	%
Age (Years)	20-25	8	5.3
	26-30	50	33.3
	31-35	55	36.7
	36-40	36	24.0
	41-45	1	0.7
Socioeconomic Status	Upper Class	6	4.0
	Upper Middle	82	54.7
	Lower Middle	50	33.3
	Upper Lower	8	5.3
	Lower	4	2.7

Table 2: Reproductive and Fertility Data

Parameter	Category	Total	%
Duration of Infertility	1-5 Years	129	86.0
	6-10 Years	20	13.3
	>11 Years	1	0.7
Pregnancy History	0-2	144	96.0
	3-4	6	4.0
Living Offspring	0	127	84.7
	1-2	23	15.3
Type of Infertility	Primary	126	84.0
	Secondary	24	16.0

Table 3: Menstrual Health Data

Parameter	Category	Total	%
Menstrual Regularity	Regular	105	70.0
	Irregular	45	30.0
Pain Type	Vataja	50	33.3
	No Pain	44	29.3
	Others	56	37.4
Amount of Bleeding	Vataja (Alpa)	31	20.7
	Pittaja (Madhyama)	90	60.0
	Kaphaja (Prabhuta)	29	19.3

Table 4: Prevalence of Artava Dushti

Type of Artava Dushti	Total	%
Pootipuyabha	36	24.0
Ksheena	34	22.7
Vataja	25	16.7
Granthibhuta	21	14.0
Kaphaja	17	11.3
Pittaja	9	6.0
Mutrapurishagandhi	5	3.3
Raktaja	3	2.0

Observation -

On Demographic Data

Age: The age range in this study with the most partici pants is 31 to 35 years old, reflecting the recent trend of late marriage and family formation; the age range is between 41 to 45 years old.

Socio-economic status: In the study, most subjects belong to the upper middle class.

Reli-

gion: The majority of research participants were Hin du, whereas the least number were Christian and Muslim.

Marital Status—

All of the participants were married. Marital status can be influenced by personal, cultural, emotional, and practical factors.

Married Life: The study's maximum number of participants had been married for a few months to five years. **Consanguine-**

ous Marriage: A smaller proportion of research participants were married in consanguineous unions than non-consanguineous ones. **Duration since trying to conceive** – Maximum study subjects try to conceive within 5 years of marriage.

Number of pregnancies: Number of pregnancies were attempted throughout the study more participants tried to conceive within the first five years of marriage, but fewer participants attempted to do so between the sixth and tenth years of marriage. **Living Offsprings**: Most participants had never conceived during the re-

search, while a smaller percentage of subjects had previously living offspring.

H/O Abortion / Miscarriage -

A significant proportion of the individuals had no pri or history of abortion, while a small percentage had. **H/O Fetal Death** – In this study, only two subjects had a previous history of fetal death, while other subjects didn't have the same history. **Contraceptives:** In the survey, it was found that the majority of

the barrier technique (male condoms) as a form of bir th control.

Coi-

participants utilised

tal History: Most respondents had three to four mont

hly coital events during ovulation. However, some subjects had fewer coital events.

Type of Infertility: Compared to secondary infertility, the majority of research participants had primary infertility. **Menstru-**

al Cycle: Of the individuals in this research, 45 had ir regular menstrual periods, and 105 had normal ones. It was assessed based on the interval between two menstrual cycles. **Cy-**

cle Interval: Most research participants had cycle int er-

vals between 22 and 28 days, a small number had cyc le intervals between 29 and 35 days and greater than 36 days, and just a few per cent were fewer than 21 days.

Amount of Bleeding: Most study participants experi enced medium bleeding, defined as 20 to 80 millilitre s daily. However, some participants experienced extr eme bleeding, identified as 8-10 days of excessive bleeding or profuse bleeding that required them to use more pads daily during cycles. In contrast, only a handful of participants had bleeding for only 2 days or only spotting for two to three days.

Pain -

Type of Pain: During the study, most participants re ported experiencing throbbing

/breaking pain, whilst 29.4% reported no pain during their menstrual cycle. A few respondents experienced pain, such as excruciating bodily aches or itching.

Intensi-

ty of Pain: During the menstrual cycle, the highest n umber of participants with pain at an intensity one is noted; thereafter, an intensity of 6 is noticed. Site of Pain: While many research participants report

ed having painless periods, many others reported experiencing pain at several different loc

ers reported experiencing pain at several different loc ations throughout their bodies.

Consistency -

Consisten-

cy: According to *Kaphaja Artava Dushti*, a more signifi-

cant number of research participants exhibited consist en-

cy, including *Snigdha*, *Picchila*, *Jadya*, *Guru*, *Vibaddha*, and *Majjopasamsrushta*; in contrast, 25.3% of su bjects exhibited consistency in *Tanu*, *Phenila*, *and As nigdha*.

Ambhasi Majjati: Research shows more participants noticed their menstrual blood sinking in water. The consistency of products like Majjopasamrushta, Picchila, Vibaddha, and Guru may explain this finding. Alasya: During the study, it was noted that most partici-

pants had fatigue or sluggishness during their menstr ual cycle.

Changes in Micturition: According to the findings, most research partici-

pants did not exhibit any changes in micturition durin g menstruation. Howev-

er, certain patients, including *Mutrakricchra* and *Mutrakrichra* and *Mutrakrichra* and *Mutrakricchra* and *Mutrakricchra* and *Mutrakricchra*

Da-

ha: It was noted in the study that while a small perce ntage of participants had a burning feel-

ing in their bodies throughout their menstrual cycle, this might be attributed to the *Pitta Dosha* predominance.

Sho-

sha: While most individuals do not experience the fe atures of *Shosha*, *Shosha*

is present in a lesser number of subjects.

Var-

na: Most individuals observed menstrual blood in the *Raktavar*-

na pattern, whereas the least number of subjects notic ed menstrual blood in the *Shukla* or *Pandu* colours.

Gandha: In this study, it was shown that while most participants did not smell bad dur-

ing their menstrual cycle, some people did have anoth er kind of *Gandha*, which is thought to be responsible for *Artava Dushti*.

DISCUSSION

Artava is considered as menstrual blood here.
 Artava is Agneya, has Rakta (blood) characteristics, forms Garbha (fetus), and is also essential for life. Ayurveda emphasises the relevance of

Shuddha Artava for conception. Acharya Sushruta has mentioned that a person affected by Artava Dushti cannot produce offspring. Abnormalities or variations in Artava may suggest underlying causes. These reasons are deeply ingrained; they might be reproductive, endocrine, systemic, infectious, genetic, or lifestyle linked. Nidana, or the underlying cause of Dushti, can be the same. Still, the manifestation can vary depending on factors such as Vaya, Kha Vaigunya, Prakriti, Vikruti, Samhanana, Desha, Kala, or Pathyapathya, which can take the form of Yoni Vyapad, Artava Vyapad such as Asrigdara, Kashtartava, or any of the Ashta Artava Dushti.

- Yoni Vyapad covers a broader category of female reproductive health. At the same time, Asrigdara is focused explicitly on abnormal bleeding, and Artava Dushti is concerned with the quality, quantity, or timing of menstrual flow with its abnormalities.
- Yoni Vyapad is more often associated with structural or anatomical factors in the reproductive system. These include physical changes or damage to the reproductive organs, infections, or disorders like prolapse and fibroids.
- Asrigdara is related to endocrinal, anatomical, and organic lesions as well as systemic causes that influence endometrial growth, like uterine fibroid, which can cause heavy menstrual bleeding.
- Artava Dushti is primarily related to endocrinal and systemic causes that influence menstrual quality, quantity, and regularity.
- Nashtartava, Artava Kshaya, Artava Vriddhi –
 These are associated with endocrinal, anatomical,
 systemic, organic, and local causes like estrogen
 deficiency or irregular shedding and ripening of
 endometrium.
- Few symptoms explained in each condition are similar to other Vyapads based on the doshas, but there are differences in symptoms based on the condition. In Yoni Vyapada, more local symptoms are explained, whereas, in Artava Vyapadas such as Artava Dushtis and Asrigdara, the focus is more on the appearance of the Artava (men-

- strual blood). The condition can be diagnosed promptly based on these symptoms.
- As an example, in Asruja Yoni Vyapada, heavy menstrual bleeding is a symptom that also leads to repeated abortions, which is similar to abnormal uterine bleeding. In Asrigdara, on the other hand, heavy menstrual blood occurs along with associated Lakshanas, such as a change in blood colour or the possibility of intermenstrual bleeding due to endocrine disruption (HPO axis), which can be attributed to ovulatory or anovulatory dysfunctional uterine bleeding; in Raktaja Artava Dushti also known as Kunapagandhi Artava Dushti, heavy bleeding is linked to foul odour and burning sensation, which can be caused by endometriosis.
- The presentation of problems in the patient can be due to many factors, such as *Vaya*, *Prakriti*, *Vikriti*, *Desha*, *Kala*, *Ritu*, *Ahara*, and *Nidana Sevana*. These factors may lead to infertility, which is a matter of concern. To determine the exact cause, fully understanding the distinction between Yoni Vyapadas and Artava Vyapadas is vital.

Vataja Artava Dushti - Diagnosis of Vataja Artava Dushti

Together, Vataja *Artava Dushti* can be assessed by the presenting complaints, such as

- 1. Watery or thin menstrual bleeding.
- 2. Change in bleeding pattern spotting, intermenstrual bleeding with less amount.
- 3. Delayed menstrual cycle interval or prolonged spotting during menstruation.
- 4. Frothy appearance of menstrual blood.
- 5. Blackish discolouration of menstrual blood.
- Present with the throbbing or piercing type of pain, which can be predominant in Kati and Yoni Pradesha.
- 7. Raised body temperature or along with fever in menstruation.

The following conditions can understand Vataja Artava Dushti –

Endometriosis, Pelvic inflammatory disease, Uterine fibroid and polyp, Adenomyosis

Polycystic ovaries

Pittaja Artava Dushti

Diagnosis of Pittaja Artava Dushti

Together, *Pittaja Artava Dushti* can be assessed by the presenting complaints, such as

- 1. Color of menstrual blood Yellowish, Bluish, bright red, or Dark or blackish bleeding
- 2. Watery menstrual bleeding.
- 3. Burning sensation
- 4. Burning pain can be predominant in *Kati Pradesha*.
- 5. Raised body temperature.
- 6. Present along with foul smell, cadaveric smell.
- 7. Difficulty in micturition.

Consider-

ing the *Lakshanas*, several ailments fall under the heading of *Pittaja Artava Dushti* –

Pyometra, Dysfunctional Uterine Bleeding (DUB), Adenomyosis, Endometriosis, Pelvic inflammatory disease, Uterine fibroid and polyp.

Kaphaja Artava Dushti

Diagnosis of Kaphaja Artava Dushti

- 1. Whitish Color of menstrual blood
- 2. Itching during menstruation.
- 3. Heavy menstrual bleeding
- 4. Present along with a foul smell.
- 5. Denser and heavier menstrual bleeding.
- 6. Menstrual blood possessing stickiness or threadlike appearance.
- 7. Heaviness of menstrual bleeding
- 8. The presence of clumps or clots in menstrual blood,

Sponginess of menstrual blood

- 9. Oiliness and unctuousness in menstrual blood.
- 10. Tiredness and sleepiness during menstrual cycle
- 11. Sinking of menstrual blood in water

Several diseases can

be classified as Kaphaja Artava Dushti due to the L akshanas -

Pyometra, Dysfunctional Uterine Bleeding (DUB), Endometriosis, Adenomyosis, Uterine fibroid and polyp, Chronic endometritis, Endometrial carcinoma.

Kunapagandhi Artava Dushti (Raktaja)

Diagnosis of *Kunapagandhi Artava Dushti* can be made based on features –

- 1. Foul smell of menstrual blood
- 2. Heavy menstrual bleeding
- 3. Burning sensation during bleeding

The condition can be classified as *Kunapagandhi Artava Dushti* due to the *Lakshanas* -Endometrial carcinoma, PID, Endometrial Polyps, Adenomyosis, Endometriosis, Dysfunctional uterine bleeding (DUB).

$Granthibhuta\ Artava\ Dushti\ (Kapha+Vata)$

Diagnosis of Granthibhuta Artava Dushti

- 1. Blackish Color of menstrual blood
- 2. Itching during menstruation.
- 3. Heavy menstrual bleeding
- 4. Present along with a foul smell.
- 5. Denser and heavier menstrual bleeding.
- Menstrual blood possessing stickiness or threadlike appearance.
- 7. The presence of clumps or clots in menstrual blood, Sponginess of menstrual blood
- 8. Tiredness and sleepiness during the menstrual cycle
- 9. Sinking of menstrual blood in water

Several diseases can be classified as Granthibhuta Artava Dushti due to the Lakshanas: Endometriosis, Uterine fibroid and polyp, Chronic endometritis, Dysfunctional Uterine Bleeding (DUB), and Adenomyosis.

Putipuyanibha / Puyanibha Artava Dushti (Pitta + Kapha)

Diagnosis of *Putipuyanibha / Puyanibha Artava*Dushti can be made based on features –

- 1. Foul smell of menstrual blood
- 2. Heavy menstrual bleeding
- 3. Burning or itching sensation during bleeding
- 4. Yellowish to whitish colour of bleeding.

The condition can be classified as *Putipuyanibha*Artava Dushti due to the Lakshanas –

Pyometra, Endometrial carcinoma, Endometrial Polyps.

Ksheena Artava Dushti (Vata + Kapha)

Diagnosis of *Kheena Artava Dushti* can be made based on features –

- 1. Scanty menstrual bleeding
- 2. Watery menstrual bleeding.
- 3. Frothy appearance
- 4. Present along with throbbing or piercing type of pain, which is predominant in *Kati* and *Yoni Pradesha*

The condition can be classified as Ksheena Artava Dushti due to the Lakshanas-

Polycystic ovaries, Asherman syndrome.

Mootra purisha Gandhi Artava Dushti (Sannipataja)

This presentation is unique to Ayurveda. Direct references in modern science have not been found. Acharyas have explained Mootra Purisha Gandhi, not the presence of Mutra and Purisha in Artava, and it is an *Asadhya* condition.

The presence of *Mutra Gandha or Purisha Gandha* in menstrual blood is appreciated more than the presence of *Mutra* and *Purisha* in menstrual blood.

Causes -

The vagina and urethra are anatomically very close to each other, which can sometimes cause the smell of urine with menstrual blood.

Impact of gynaecological condition on Fertility

- Polycystic Ovary Syndrome (PCOS): This causes irregular cycles and often prevents regular ovulation (anovulation), leading to infertility.
- Endometriosis: Tissue similar to the uterine lining grows outside the uterus, often causing pain and inflammation, making it difficult for eggs to fertilise. Its lining epithelium becomes destroyed and converted into granulation tissue. This exudes pus, which tends to collect in the uterus to form a *pyometra*, further affecting fertility.
- Uterine fibroids: These benign growths in the uterus can interfere with the implantation of a fertilized egg or cause changes in the uterus's shape, hindering fertility.
- Pelvic Inflammatory Disease (PID): PID leads to scarring and blockages in the fallopian tubes, preventing sperm from reaching the egg or the fertilized egg from reaching the uterus.
- Adenomyosis The growth of endometrial cells inside the uterine myometrium (usually >2.5 mm beneath the basal endometrium). Menorrhagia may be due to dysfunctional myometrium con-

- tractility, endometrial hyperplasia, and anovulation. Other symptoms may include pelvic pain, backache, dyspareunia, and subfertility.
- Pyometra a collection of pus in the uterine cavity that takes place due to the presence of a low-grade infection that damages the endometrium, affecting implantation further and causing infertility.
- Endometrial polyp—This is a tumor-like growth that causes mechanical interference with sperm entry, embryo implantation, and altered endometrial receptivity.
- Endometrial tuberculosis Dysfunction of menstruation is primarily attributed to endometrial causation; infertility is considered due to pathology in endometrium and fallopian tubes and a blockage of ovum transport.
- Endometrial carcinoma irregular bleeding, discharge is free from blood (hydrorrhoea); otherwise, it is brown, watery, and offensive.
- Hence, understanding these Lakshanas can offer insight into the underlying Dosha Dushti, support the recommended treatment course, and aid in conception.

CONCLUSION

Ashta Artava Dushti was prevalent in infertility. The participants exhibit one or more symptoms the Acharyas described for each Ashta Artava Dushti. There was a combination of Artava Dushti present in the patients. Artava Dushti is concerned with the quality, quantity, or timing of menstrual flow, with its abnormalities occurring because of factors like endocrinal and systemic. Yoni Vyapad covers a broader category of female reproductive health, which is due to anatomical, endocrinal, and organic lesions. At the same time, Asrigdara is focused explicitly on abnormal bleeding caused by organic lesions, endocrinal causes or systemic illness. Due to lifestyle changes, endocrinal, systemic, and other environmental factors, the menstrual cycle is affected, showing irregularity or scanty bleeding during the cycles. At the same time, in some subjects, it manifests as heavy or prolonged bleeding. These menstrual irregularities or underlying diseases induce anovulation and alter the thickness of the endometrium, lowering the possibilities of implantation and impacting fertility. In this

study, it was discovered that the *Lakshanas* described by Acharyas for *Ashta Artava Dushti* are present in infertile patients.

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