



## MANAGEMENT OF TUBAL BLOCK INFERTILITY WITH UTTAR BASTI: A CASE REPORT

[Shriram Dwivedi](#)<sup>1</sup>, [Archana Singh](#)<sup>2</sup>

Assistant Professor, Dept. Of StriRoga&Prasuti Tantra, Govt. Ayurveda College & Hospital, Rewa (M.P.)

Assistant Professor, Dept. Of RogaNidana Evam VikritiVigyana, Govt. Ayurveda College & Hospital, Rewa (M.P.)

Corresponding Author: [archi04singh@gmail.com](mailto:archi04singh@gmail.com)

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## ABSTRACT

The problem of Infertility arising as a major and multifaceted issue worldwide whose prevalence is increasing day by day. Around 8–12% of couples worldwide had been affected by this problem. It can be attributed primarily to male factors in 25%, Female factors in 58%, and is unexplained in about 17% of couples. Out of this fallopian tube, the blockage has been considered the second biggest reason for female infertility. In the modern system of medicine, there is no proper intervention available to clear the tubal blockage, whereas *Ayurveda Uttar Basti* gives very promising results in the treatment of such cases. In this paper, a success story of the treatment of a case of secondary infertility due to tubal blockage has been presented which was treated with *Uttar Basti* after *Matra Basti* for 3 cycles along with some supportive treatment. *Matra Basti* pacifies the vitiated *Vata&Kapha* Dosha, removes *Strotorodha*, and facilitates the proper formation of *Dhatus*, whereas *Uttar Basti* with hot potency drugs is very effective in treating the blockage of the tube. After 3 successive interventions, the patient conceived completed her gestation period successes fully and delivered a healthy baby. So, it can be concluded that *Uttar Basti* can be an effective intervention in treating patients with infertility due to tubal blockage.

**Keywords:** *Matra Basti*, Secondary infertility, Tubal Blockage, *Uttar Basti*.

## INTRODUCTION

Infertility is becoming a common reproductive problem nowadays, causing severe psychological and social stress to couples. Failure to conceive again and again breaks the hope of couples and brings an economic burden too as the treatments are very expensive. Infertility defines as the failure of a couple to conceive after one year of regular unprotected coitus. It can be attributed primarily to male factors in 25%, Female factors in 58%, and is unexplained in about 17% of couples. 30-40% of women with infertility are due to ovulatory factors and tubal factors.[1] The tubal blockage is one of the most common causative factors in female infertility (prevalence is 19.1% in the fertility age group).[2] In modern medical science, tubal reconstructive surgeries and *in vitro* fertilization are the treatments but these facilities are not easily accessible, are associated with various side effects, and are expensive. In Ayurveda infertility due to tubal blockage can be considered as *Artava-eejavaha Strotorodh* as the fallopian tube can be considered as *Beejvahini* and the condition can be treated effectively with *Uttarbasti*. [3]

### Case Details:

A 27-year-old female patient visited *Stri&PrasutiVibhag*, Govt. Ayurveda College, Rewa (M.P.) with a complaint of failure to conceive for 2 years. She also reported a spontaneous abortion for two years. The patient also complained that she had rashes on the perineal part and had foul-smelling discharge in an on & off manner. She had consulted many allopathic gynecologists and went for the allopathic treatment but was unable to conceive. The general condition of the patient was fair. On systemic examinations, there were no abnormal findings observed. She had no previous medical or surgical illness. Menstrual history was normal (3-4 days/ 30-32 days/ regular/ average). There was no coital abnormality reported and no contraceptive measures had been used by them. The findings obtained on per vaginal and per speculum, examinations were also normal (there were no signs of cervicitis or vaginitis, the uterus was found anteverted and fornices were clear). Other pathological investigations (CBC, ESR, PBS,

RBS, LFT, Lipid Profile, Thyroid Function Test, and Urine random & microscopic) were also within normal limits. Mantoux, HIV, HbsAg, and VDRL tests were reported non-reactive. On Ultrasonography uterus was found normal in size, and anteverted, the endometrium was 1.1 cm. thick, bilateral ovaries were polycystic, the uterus and ovaries were freely mobile, and Doppler shows normal vascularity. The patient was advised for HSG, and bilateral blockage at both cornual ends was reported. The Semen Analysis of her husband was observed normally. So, the final diagnosis was secondary infertility due to tubal blockage, which can be correlated with *Vandhyat-vadue to ArtavavahaStrotorodh* in *Ayurveda*.

### Treatment Plan:-

The treatment was planned on basis of ayurvedic principles of pacification of *Vata* and *KaphaDosh*a and provides nourishment to the uterine walls. Interventions were as follows-

1. Syrup Gynesol 10 ml/ Twice Daily
2. Tab Hyponidd 2 tab / Twice Daily
3. Syrup Septiline 10 ml / Twice Daily
4. Syrup *Ashokarishta* 20 ml with an equal amount of water after meal twice daily.
5. *Matra Basti* for two consecutive days with 50 ml *SahacharaTaila* after performing *Abhyanga* and *Swedana*(massage of the lower abdomen, lumber region, and lower limbs with *Bala taila* followed by *NadiSweda*). It was planned to administer from the second day of the menstrual cycle.
6. *Uttar Basti* with a combination of *Ksahar Tail* 2.5 ml and *SahacharaTaila* 2 ml, after *Matra Basti* on the third day, and continued for 4<sup>th</sup> and 5<sup>th</sup> day consecutively (without administration of *Matra Basti*) with all precaution (*Yoni Prakshalana* i.e. sterilization of peri vaginal part was done with *PanchavalkalaKvatha*)

The patient was advised to stay in the leg rise position for some time after *Basti* and avoid intercourse at least for three days following *Basti* intervention.

### Follow ups & Result:-

The patient was attended for follow-ups every 15<sup>th</sup> day and was under observation at the time of the *Bas-*

ti procedure. After the 1-month improvement in general condition was reported, and vaginal discharge and foul smell subsided. On completion of sittings of the third month, she reported amenorrhea and went for a UPT test, which was positive. On USG (after 3 weeks) a single well-defined gestational sac with fetal cardiac activity had been seen.

## DISCUSSION

Ayurveda emphasized four main essential factors for conception i.e., *Ritu* (menstruation), *Kshetra* (functioning reproductive organs), *Ambu* (nutritive juices), and *Bija* (healthy sperm and ovum). Abnormality in any one of these factors causes infertility.[4] As we mentioned above that there was a bilateral tubal blockage reported in the USG, it can be considered as an abnormality in *Kshetra*, as the *Artava-BeejavahaSrotas* had been obstructed. This type of obstruction occurs due to the vitiation of *Apana Vata*,

and *Kapha Dosha*. Tubal blockage or obstruction to *Artava-beejavahaSrotas* works as a barrier between sperm and ovum causing infertility. So, the treatment protocol primarily aims to remove the *Srotorodha* of *Artava-BeejavahaSrotas* and maintain the normal function of *Doshas*.

According to Ayurveda *Vata Dosha* plays a major role in the physiology and pathology of the reproductive tract, therefore proper functioning of *VataDosha* must be maintained for pregnancy and during the entire gestational period.[5],[6] *Acharya* also considered *Tail & Basti* as the best treatment for *Vataja* disorders hence *Matra Basti* has been decided to perform with *SahacharaTaila*. [7] Various articles describe many benefits of *Matra Basti* in female reproductive systems such as improvement in PCOD, anovulatory conditions, dysmenorrheal, etc.[8],[9],[10],[11]

### SahacharaTaila Rasa Panchaka[12]:-

|        |                |
|--------|----------------|
| Rasa   | Madhura, Tikta |
| Vipaka | Madhura        |
| Virya  | Ushna          |
| Guna   | Guru, Singdha  |

*Sahachara Tail* when administered as *Matra Basti* clarifies the obstruction (*Strotorodha*) due to its *UshnaVirya* and *TiktaAnurasa* thus pacifying *Vata*. Its *Guru Singdhaguna*, *Madhur Vipaka*, and *Madhur Rasa* deal with *Rukshata*, and *Kharata* and bring *Vata* to normalcy. *Basti* not only pacifies the *Apana Vayu*, instead it corrects the vitiation of *Vata* in all manners as said by *Acharyas*, and hence improves the nourishment of *Dhatu*s also.[13]

*Uttar Basti* is an exclusive treatment concept of *StreeRoga* which acts specifically on organs of the female reproductive system. It is indicated in various *Yoni Rogas*, *Vandhyatva* (infertility), *Yoni Vibhransha* (prolapsed of the uterus), *GarbhashyaRoga* (uterine disorders), *Asrugdara* (dysfunctional uterine bleeding), *Yoni Shula* (pain in genitalia) and *ArtavaVikara* (menstrual abnormalities), *Mutraghata* (retention of urine) and *Mutrakruccha* (dysuria).[14] *UttarBasti* has been recognized as a

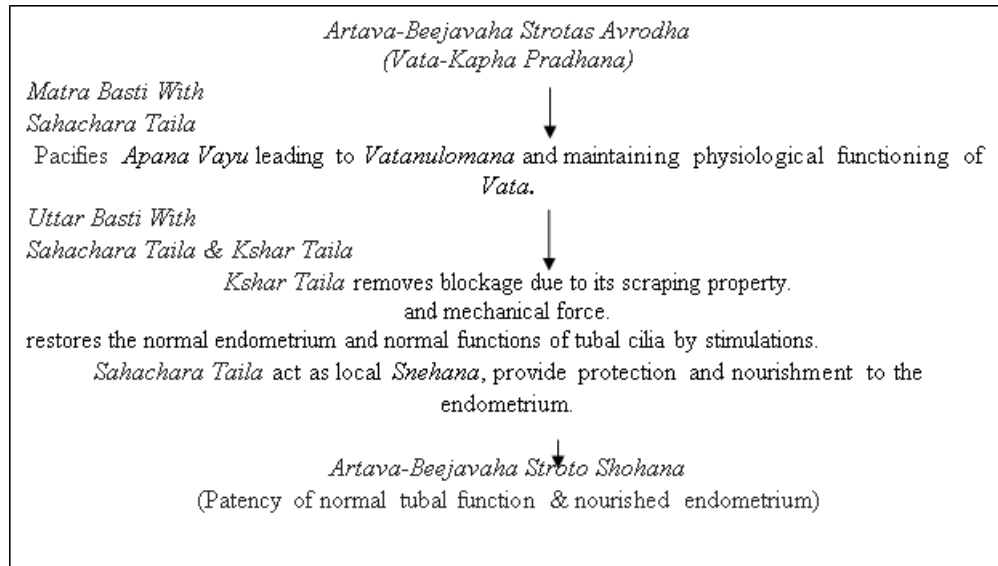
very effective treatment in case of tubal blockage infertility and there are so many studies showing significant results with different medications. In the present case *SahacharaTaila* and *KsharaTaila* had been administered in 2- & 2.5-ml quantities (total 4.5 ml), after two sittings of *Matra Basti* as mentioned above and continued for 2 days (total 3 sittings of *Uttar Basti* on 3<sup>rd</sup>, 4<sup>th</sup>, & 5<sup>th</sup> day).

### Mode of Action:

*Matra Basti* with *Sahachara Tail* given through the rectal route normalizes *Apana Vayu* leading to *Vatanulomana* and maintaining the physiological functioning of *Vata*, which may help in the removal of obstruction in tubes. After the intervention of *Matra Basti*, *Uttar Basti* with *Sahachara Taila*[15],[16],[17] & *KsharaTaila*[18],[19] administered with a constant pressure in this way that oil reaches the cornual end speedily. When lukewarm oil enters into the uterine cavity, *Srotas* transmit the *Ut-*

tar Basti Dravya towards the desired sites such as endometrial layers, fallopian tubes, ovary, etc. inserted Sahachara Taila act as local Snehana, softens the structures, and provides nourishment too, whereas Kshara Tail acts on blockage due to its Lekhana Guna (scraping nature). The pressure of the insertion of oils also creates pressure on the tubal end which

helps in the removal of the obstruction. Other supportive treatments i.e., Syrup Gynesol, Tab Hyponidd, Syrup Septiline, and Ashokarishta act as a uterine tonic and provide many beneficial effects.[20],[21].[22]



## CONCLUSION

Through the Ayurvedic interventions, the patient conceives in just after 3 months and completed her gestational period successfully without any serious complications under Ayurvedic supervision. The result obtained in this single case study was quite encouraging as it took a very short time to give a positive result, with minimum invasion & side effects as well as cost-effective. So, the treatment protocol can be followed for patients of infertility due to corneal end tubal block.

**Informed Consent:** Written consent was obtained from the patient for the purpose of publication of their clinical details.

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