

A CASE REPORT ON TUBAL BLOCK WITH NARAYANA TAILA AND KSHARA TAILA UTTARA VASTI

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ABSTRACT

The Tubal block is a major cause of infertility. According to FIGO, 30- 40 % of female infertility is due to tubal block, with 19% with primary infertility and 29 % in secondary infertility¹. According to Susrutha, Vandhyatwa is due to Arthavavaha sroto dusthi due to vitiation of vatadi dosha's² and *Rtu, Kshetra, Ambu, Beeja* is considered as essential factors for the formation of *Garbha*³. In them, *Kshetra* refers to *shudda Garbhashaya* which means healthy Uterus with bilateral tubes and Ovaries. The main cause of Tubal block is due to Pelvic infections causing peritubal adhesions and mucus debris within the tubal lumen⁴. The *arthava vaha sroto sanga* is responsible for *Vandhyatwa* which is mainly due to vitiation of Kaphaja dusti – creates more favorable conditions for infections and Sanga – due to kapha and vata dushti. *Utharavasthi* is the procedure that has local & systemic action based on the dravyas used for *uttaravasti*. In this case, study drugs used for *uttaravasti* are *Narayana tailam* and *Kshara tailam* which have Kapha vata hara property, Anti-inflammatory, and anti-microbial property and also help in clearing the tubal block.

Keywords: Tubal block, *Vandhya*, Infertility, *Utharavasthi*.

INTRODUCTION

Infertility affects millions of people of reproductive age worldwide and has an impact on their families and communities. The tubal block is a major cause of infertility.

Infections like PID, Endometriosis, and infections after childbirth causing peritubal adhesions and mucus debris within the tubal lumen results in tubal block⁵.

Acharya Caraka mentioned “उत्तरमार्गदीयमानतया किंवा श्रेष्ठगुणतया उत्तरवस्तिः!” (Chakrapani. C.Si.9/50) The vasti which is given through uttamarga i.e. urogenital passage due to its superior qualities, is called *Uttaravasti*⁶. It has local and systemic action. For treating tubal block *lekhana and ksharana guna* dravyas are necessary to clear the block. In this case study, a female patient with infertility due to tubal block is treated with *Uttaravasti* (intrauterine administration) with *Narayana Taila and Kshara Taila* for 5 consecutive cycles from Day 6 to Day 10.

CASE REPORT:

A patient of 35 years came to O.P.D, Dept. of Prasuti tantra and Stree roga in Dr.A.L. Government ayurvedic hospital, of Dr. NRS Government ayurvedic college, Vijayawada, Andhra Pradesh with complaints of anxious to conceive for 7 years with a marital life of 8 years associated with Regular menstruation with scanty bleeding for 1-2 days since 8 years.

History of Present Illness (*Vedana Vruttanta*): The patient was normal with regular periods and normal bleeding for 4-5 days. After her 2 years of marital life, the couple went to the hospital for conception and scanty menstruation used allopathy medication, and also underwent on and off hormonal therapy for 5 years.

History of Past Illness (*Poorva roga Vruttanta*):

- Past Medical History: h/o recurrent UIT & Had h/o hormonal therapy for infertility and one cycle of IVF treatment then she was diagnosed as B/L tubal block.
- Past Surgical History: Underwent laparoscopic surgery for ovarian cyst in 2017.

Family History: No family history related to Diabetes, HTN, Bronchial asthma, PCOD.

MENSTRUAL HISTORY:

Age of Menarche: 13 years, LMP: 25/10/2021, Regular, Cycle with an interval of 32-35 days, Duration – 1-2 days with scanty flow.

Obstetric History: Nulli parous

Personal History: Appetite – Good, Sleep – Good, Bowel – Regular, Free, Urine – Free, Addictions – No, Hygiene – Good.

Physical examination: Built – Moderate, Height – 5”, Weight- 68 kgs, B.P – 110/70 mmHg, RR – 16/ min, Pulse – 70/min.

Local examination:

Per abdomen: Soft, Fatty abdominal wall, no organomegaly, mini-lap scar present.

Per Speculum: Vagina and Cervix – healthy, os- nulliparous os. No discharge.

Per vaginal: Uterus anteverted, Normal Size, Mobile, Free Fornixes.

Investigations:

USG & HSG: B/L Tubal block with hypoplastic uterus with 4*2*3 cm size.

Diagnosis: Vandhya due to B/L tubal block.

Treatment: Planned for 3-6 consecutive cycles of Uttara vasti with Narayana Taila 2ml and Kshara Taila 1ml. From D5 to D10 of every menstrual cycle.

Materials and Methods:

Equipment and medicines used: Cusco’s bivalved self-retaining vaginal speculum, Alli’s forceps, IUI cannula, disposable syringe, Lukewarm oil – of Narayana Taila 2 ml, Kshara Taila 1 ml.

The patient is asked to lie in the Lithotomy position, and Cusco's bivalved speculum is introduced to visualize the cervix and OS. *Yoni Prakshalana with panchavalkala kashyam* to be done followed by mopping of cervix and vagina with a sterile cotton swab. Then introduce the IUI cannula which is fitted with the oil-loaded 3 ml disposable syringe up to the internal os after getting an idea of the length of the uterus.

Intrauterine administration of the drug to be done gently, slow, and steady manner to avoid vasovagal shock followed by Pichu soaked in Narayana Taila is to be introduced into the vagina.

OBSERVATION AND RESULTS:

Table 1: Observation during every cycle:

Observation	1 st cycle	2 nd cycle	3 rd cycle	4 th cycle	5 th cycle
Cycle regularity	32-35 days	32days	30-32 days	30-32 days	30-32 days
Duration	1-2 days	1-2 days	2 days completely	2-3days	2-3 days
Spillage /pain during administration	Not felt	Not felt	Felt	Felt	Felt
Regurgitation of Taila during the procedure	Present	Present	Less	Less	No

On Day 9th of the 5th cycle Advised HSG & USG:
Results show that Both Tubes are patent.
USG: Uterus with normal size, 5.4*3*3.1 cm.

DISCUSSION

Uttara vasti is a unique procedure that has both systemic and local action. The *Yoni Prakshalana* helps in cleansing the vagina and cervix as the *panchavalkala kashya* has antibacterial, antiseptic, and anti-inflammatory properties. It also deals with the altered pH of the Vagina providing a healthy environment to stop infectious organism growth. Tubal block can be considered as *Arthava vaha sroto sanga* is due to vitiation of Kapha and vata dosha. The drugs in *Narayana taila*⁷ and *kshara taila*⁸ have lekhana, kapha-vata hara properties. *Narayana Taila*⁷ ingredients has *Garbhastapaka guna*, *Pumsatva karaka*, *Rasayana guna* along with kaphavatahara property and *sroto-shodhaka* guna, it specially said for vandyatwa i.e., “*Vandya cha naari labhate ca putram*”⁷. *Kshara taila*⁸ has *Ksharana* property and by that, it can clear the mucus plug or adhesions formed due to previous infections. “*Kshara tailamedam srestam sarvakleda rujaapham*”⁸.

CONCLUSION

The tubal block is caused due to adhesions and the formation of mucus plugs due to recurrent infections. As Kapha dusthi is responsible for microorganism growth and development and adhesions and extra growths are formed due to vitiation of vata and Kapha dosha. As the treatment protocol is framed based on *Samprapti vigatana meva cikitsa* as the drugs possess Kapha vata hara dravyas and the lekhana & ksharana guna to clear adhesions or mucus plug obstruction along with aphrodisiac, immunomodulatory, anti-inflammatory, antioxidant and rejuvenating properties

which not only helps in tubal block also does good nourishment to endometrium for proper growth.

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