

# Management of *Garbhashayhat vata* (Atrophic Uterus) Through Ayurveda - A Case Report

# Amol Deshpande<sup>1\*</sup> and Mayuri Deshpande<sup>2</sup>

<sup>1</sup>Department of Rachana Sharir, Mahatma Gandhi Ayurved College, Hospital and Research Centre, Salod (H)
Datta Meghe Institute Medical Sciences (DU), Wardha - 442001, India; deshpandeamol86@gmail.com

<sup>2</sup>Department of Kayachikitsa, Mahatma Gandhi Ayurved College, Hospital and Research Centre, Salod (H),
Datta Meghe Institute Medical Sciences (DU), Wardha - 442001, India

### **Abstract**

Infertility is a burning problem all over the globe. Many couples yearn to have babies in their life. Infertility is very common issue faced by many couples from years. They use conventional type of therapy for many years and then approach Ayurveda. *Vandhyatva* is term used in Ayurveda for sterility. This sterility comes due to many factors occurring inside and outside of the body. *Rutu, Kshetra, Ambu* and *Beej are* the *Garbhautpadkar bhava* (factors important for fertilization and implantation) which are immensely important for normal fertilization and attachment of the foetus in the womb. Disorder in any of the above factor can cause infertility. *Kshetra* means the site where the foetus will reside. It should be normal and healthy for its survival. Derangement or pathology in it may cause failure to conceive. There are various problems which causes pathology in uterus such as endometriosis, adenomyosis, fibrosis and atrophy are a few of them. In this case report, we have a 32 years old female patient with small uterus and an irregular menstruation. The cause for her infertility was long term use of hormonal therapy for contraception purpose. She was advised to do *Panchkarma* for eight days and herbomineral formulations were prescribed to her for five months. After 3 months, she got her regular menses. USG pelvis before and after treatment were advised to her and positive results were obtained with Ayurvedic treatment.

**Keywords:** *Gabhautpadkar bhava*, Hormonal Therapy, Infertility, Small Uterus

### 1. Introduction

There are various problems faced by married couples and infertility is one of them. Infertility is a very common issue nowadays. There are various strategies to fight infertility. But the results are not the same for all. Some couples face it throughout their life and some get fruitful results. Lifestyle changes, faulty eating habits, improper timings of sleep; all contribute to it in different proportions.

Infertility is defined as a failure to conceive even on regular coitus without barrier for one year. Infertility is a serious health issue worldwide, affecting approximately 8%–10% of the couples in the world. It is believed that 60–80 million couples suffering from infertility every year globally, between 15 and 20 million (25%) have an Indian

origin<sup>1</sup>. Ayurveda has the solution for all the issues faced by humans in all Eras. *Vrushan* (treatment for healthy progeny) is one of the branches of *Ashtang Ayurveda* (eight branches of Ayurveda). It deals with proper knowledge about coitus, healthy offsprings and diseases related to sexual activities. In Charak samhita there is complete *Adhyaya* that gives the knowledge about *Vajikaran*. Along with this, there is 30<sup>th</sup> *Adhyay* in *Chikitsasthan* which gives knowledge about various diseases occurring in women that are 20 types of *Yonivyapad* (diseases of female genital organs)<sup>2</sup>. Ayurveda has broad concepts about infertility. There is a description of *Vandhya* (absolute infertility), *Apraja* (habitual abortions) and *Sapraja* (secondary infertility) in which the main projecting

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<sup>\*</sup>Author for correspondence

issue is infertility. According to Acharyas, Rutu, Kshetra, Ambu and Beej are important factors for fertilization and birth of new life. Here Rutu means fertile period, Kshetra means uterus where the product of conception will reside, Ambu means rasa (nutrition) which will provide elements for the survival of fetus in womb and Beej means ovum and sperms. According to Ayurveda Kshetra includes Yoni, Garbhashaya (uterus) and yonimarga (vagina)1. Garbhashaya as its name depicts Ashay for Garbha where the fetus will survive. It should be pure and healthy for proper growth and health of the fetus. Any type of disfigurement or pathology occurring in these factors lead to infertility. There are a number of pathologies occurring in uterus which leads to infertility. Atrophic changes are one of them. It generally occurs in old age after menopause. It can occur in young females due to Hormonal therapy. The hormonal therapy may occur in case of contraception, artificial ovulation stimulation or in breast or uterine cancers. This may cause structural changes in the endometrium<sup>3</sup>.

Here we have a case of a 32 year old woman having atrophic uterus. She was on contraceptive pills from 6-8 years. Now she is suffering from infertility due to atrophic changes occurred in uterus. As we have seen earlier, *Kshetra* is important factor for normal fertilization and pregnancy, the treatment to make it healthy is prescribed to the patient.

# 2. Case Report

A 32 year old woman come to OPD with complaints of irregular menstrual period and failure to conceive for the past 3 years. She said that she has small uterus than normal women. She has undergone various treatment modalities to overcome this issue. Along with this, she tried IVF 4-5 times which was not fruitful.

# 2.1 Personal History

The patient got married at the age of 21, continued her education and was not ready for an early pregnancy. In order to continue her education, she was on contraceptive pills for 7-8 years. Then she tried to conceive without any barrier during coitus but has failed since three years.

# 2.2 Family History

There was no any history of Endometrial atrophy on maternal or paternal side. In her family there were normal pregnancies and normal deliveries.

### 2.3 Past History

No history of any type of surgery. No history of abortion or miscarriages. No history of HTN/ DM.

### 2.4 History of Present Illness

The patient was on contraceptive pills from 7-8 years. The patient had regular menstruation until 4-5 years back. There after she started having irregular menstrual cycles. On advice of her physician, the patient has undergone ultrasound scanning of abdomen and accidently discovered about her small uterus (atrophy). She then started with modern medicine for two years and tried artificial fertilization methods which were in vain.

### 2.4.1 On Examination

Temperature –  $98.5^{\circ}$  F, Pulse – 75 / min, BP – 120/80 mm of Hg, Respiratory rate – 15 / min

Ashtavidha parikshya bhava – (Eight sights of examination)

Nadi (Pulse) - 75/ min

*Mutra* (urine) – No complaints

Mala (by-products) - No complaints

Jivha (Tongue) - Saam

Shabda (speech) - Normal

Sparsha (touch) - Normal

Drik (vision) - Normal

Akruti (physique) - Madhyam

Samparapti ghatak – (Components in pathophysiology)

Dosha (Vitiators) - Vata pradhan

Dushya (targets) - Rasa, Mamsa

Strotas (channels) - Artavvaha, rasavaha

**Dushtiprakar** (**type of pathology**) – Strotosanga, vimargagaman

**Pratyatmlakshan** (signs & symptoms) – Artavkshay, infertilty

# 2.5 Strotas parikshan (Channel Examination)

According to the signs and symptoms of the patient, there is *Artavvaha* (the channels related to menstruation) and *Rasavaha strotas* (channels related to nourishment) *Dushti* (disorder).

### 2.6 Investigations

Ultrasonography Pelvis.

### 2.7 Treatment

Line of treatment is based on *Shaman* and *Shodhana Chikista* and according to the *Prakruti* of the patient, by thinking *Sankoch* is a karma of *Vata Dosha* plan of treatment is started from *Basti*. Detail treatment plan is mentioned in Table 1.

### 2.8 Results

The first ultrasound was done on 11/3/2020 which was showing small sized uterus with polycystic ovaries. The uterus was anteverted with 5.6 cm \* 3 cm. In the report of 1/8/2020 the uterus was normal with 7 cm \* 3 cm measurements.

### 3. Discussion

Rutu, Kshetra, Ambu and Beej are the important factors for fertilization and healthy pregnancy. There are various factors which can cause impairment in all of the above factors. Some acts on single factor and some acts on all of them. In this case, there was atrophy in the uterus due to long term hormonal therapy which was followed for contraceptive purpose. It is found that the size of uterus has increased after a course of 5 months of treatment.

# 3.1 Probable Mode of Action of Drugs

In this case, patient was advised *Yogabasti* (eight days enema treatment) as detoxifying measure. Before every *Pradhan karma* (main treatment), *Purvakarma* (preparatory phase) that *Snehan* and *Swedan* should be advised. The *Bala tail Snehan* and *Swedan* with *Dashmuladi Niruha* gives nourishment to the body parts. It is the best in degenerative changes or atrophic changes<sup>4</sup>. *Phalghrit Matrabasti* was administered to the patient as it contains *Prajasthapangana Dravyas* (beneficial for nidation and implantation) which will help to conceive without any abnormal consequences<sup>5</sup>.

Table 1. Treatment plan

Karma	Snehan	Sarvang snehan (oleation) was done with bala tail.				Two rounds of <i>Yogbasti</i> were done.
	Swedan	leaves of	n (Box fomentation) was done with fresh (irgundi (Vitex nigundo), Eranda (Ricinus communis) Adhatoda vasika)			Alternate <i>Anuvasan</i> (oil enema) and <i>Niruhabasti</i> (Decoction enema)
	Yogabasti	Matra basti – <i>Phalghrit</i> 50 ml was administered Shodhan basti – <i>Dashamuladi niruha basti</i> was administered.				was given for 8 days continuously.
Type of treatment	Drug name	Dose	Administration time	Duration	Anupana	
Internal	Dashmularishta	40 ml	BD- early in the morning and two hours before meal at night	5 months	Lukewarm water	
	Laghumalini vasanta	250 mg tablets	2 before lunch & 2 before dinner	5 months	Lukewarm water	
	Chandraprabha vati	250 mg tablets	2 before lunch & 2 before dinner	5 months	Lukewarm water	

*Pathya* (Do's) – Freshly prepared food, easily digestible food, regular exercise was advised. *Apathya* (Don'ts) – *Dadhi* (yogurt), spicy food, roadside food, stale food, Nonvegetarian and *Diwaswap* (noon nap)

Basti is one the karmas of Panchkarma and it is widely used in various disorders. In Agryasamgraha (superior in all) of Acharya Charak it is depicted that 'Basti Vataharanam' (Basti in Vata related disorders). In Niruha basti, the solution is hypertonic in nature and causes osmosis which in turn ensures detoxification in the body $^6$ . Acharyas has told Vasti is best in Vatavikar. In this case there is Shosh means atrophy/shrinkage which is described under Vata imbalance Vyadhis. Dashmuladi niruha basti is known as Sarvavyadhihar (applicable in all types of disorders)<sup>7</sup>. Dashmularishta is polyherbal formulation used in various Vatavyadhis. Acharya Sharangadhara has indicated it in infertility in his Sharangdhara samhita<sup>8</sup>. Laghumalini is advised in this patient as it nourishes rasa dhatu and makes subsequent dhatu strong. It contains mainly Katu Pradhan Rasa Dravya (herbs having pungent taste) which increases metabolisms in the body and digest the toxins. Laghumalinini vasant increases the receptivity of endometrial walls and helps in attachment of fetus in the womb9. Chandraprabhavati is advised in all types of diseases by Acharya Sharangadhar calling it as Sarvarogpranashini. It is a herbomineral formulation and can be used in male as well as female infertility. In an article, it is stated that it can be used for long period even though it has some metals in it10. As Pathya and Apathya are important aspects of treatment, the food and behaviour regimes were advised to the patient<sup>11</sup>.

### 4. Conclusion

Infertility can be treated with Ayurveda line of treatment. The drugs which are given in Samhitas can be consciously used for treating Infertility. In Ayurveda there are various terms used for infertility. In this case, there was shrinkage of uterus than normal dimensions. Here the treatment of *Shosha* which is *Vata* related disorder acted on the target organ perfectly. According to the concept and arrangement of *Doshas* in that stage, one can overcome this burning issue. *Purvakarma*, *Pradhan karma* can be advised for detoxification of the body. Drugs which particularly act on *Artavvaha* and *Rasavaha Strotas* can be used in treating the atrophic Uterus. Here this case is successfully treated with *Yogbasti*, *Dashmularishta*, *Laghumalini vasant* and *Chandraprabhavati*.

#### 4.1 Consent

Consent was taken from the son of the patient for this treatment.

### 4.2 Financial Support and Sponsorship

Datta Meghe Institute of Medical Sciences (DU), Sawangi Meghe, Wardha.

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