

## VANDHYATVA - A CASE STUDY

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### ABSTRACT

Infertility is common problem affecting the couple and is one among the disappointing problem where couples are failure to achieve conception. In Ayurveda Vandhyatva can be compared with any type of infertility. It is mainly vata dosha pradhana vyadhi. Here, phalasarpi, syrup evecare, cap. Gynovedan, yoshajeevan lehya has been used. Present article will explain how to understand and manage infertility based on Ayurvedic perspective.

**KEYWORDS:** Vandhyatva, infertility, phalasarpi, yosha jeevan lehya.

### INTRODUCTION

Female infertility is known as *Vandhyatva* in Ayurveda. Failure to achieve conception by a couple of mature age, having normal coitus during appropriate period of menstrual cycle, regularly, at least for one year is termed as infertility<sup>1</sup>. According to Ayurveda successful pregnancy is the outcome of four prime factors *Rutu* (season or fertile period), *Kshetra* (healthy yoni, uterus and passage, reproductive organs), *Ambu* (proper nutrient fluid, clarity or normalcy of psychology, properly functioning *Vayu*, normal nervous system, and *Shadbhavas*, i.e. mother, father, *Atma*, *Satmya*, *Satwa* and *Rasa*) and *Beeja* (sperm and ovum)<sup>2</sup>. Even if one of the conditions is not met in right time pregnancy may not happen. Infertility is not an independent disease, rather a cardinal feature of so many diseases.

It has been clinically observed that *Ayurveda* helps in case of infertility. It seems to help

by not only treating the symptoms but also by strengthening the reproductive system and improving the local cellular immunity. In this case study *phalasarpi*, *evecare syrup*, *yoshajeevaniya lehya*, *Gynovedan* have been used and proved to be effective.

### CASE REPORT

A 29 years old female hindu patient, house wife by occupation visited the OPD of sri kalabyreshwara ayurvedic medical college and research center, department of *prasooti tantra* and *stree roga* on 12th August 2016 with complaints of pain in lower abdomen, backache during menstruation since 2 years. Detailed history of present illness revealed that patient was apparently normal. She had 1 missed abortion of 2 months amenorrhoea 2 years back after that she resumed her menstruation and started having above said complaints only during menstruation lasting for 3 days. Pain was spasmodic, intermittent in nature with increased severity during first

2 days. Earlier symptoms were mild so she neglected for 1 year. But severity of symptoms increased gradually. Hence she was on allopathic oral medications to take for first 3 days of menstruation for around 6 months and was getting temporary relief. After 6 months, symptoms became so severe that patient was unable to do her normal activities. Hence patient consulted another Allopathic hospital and was prescribed injectable and used to get relief temporarily in symptoms. She continued this treatment for around 1 year. Patient was not satisfied with Allopathic treatment and patient is planning for conceiving. So she approached Sri Kalabyaraveswara *Ayurvedic Medical College* Hospital and Research Centre for further management.

**Past history:** No H/O DM/HTN/hypothyroidism or any other major medical or surgical history.

**Family history:** No history of same illness in any of the family members.

**Menarche** - 13 yrs.

**M/C**- 4-5 / 28-30 days/bleeding- bright red in colour, moderate (2-3 pads/day), without foul smell, with/without clots/ Dysmenorrhoea-Present, spasmodic and intermittent, lower abdomen and lower back region.

**Married life** - 7 years.

**O/H** -POA1L0D0, A1 - 2 years back, 2MA, Missed abortion.

**Contraceptive history**- No

**General examination**

Built: Moderate

Nourishment: Moderate

Pulse: 76 b / min

BP: 130/80 mm of Hg

Temperature: 98.4 F

Respiratory Rate: 18 cycles / minute

Height: 5'4'' inch

Weight: 60 kg

Tongue: Uncoated

Pallor/Icterus/Cyanosis/Clubbing/Edema/Lymphadenopathy: Absent

**Systemic examination**

CVS: S1 S2 Normal

CNS: Well oriented, conscious.

RS: normal vesicular breathing, no added sounds

P/A- Soft, tenderness absent, no organomegaly

Bimanual examination- uterus retroverted, tenderness present in left lateral fornix

Per speculum examination- vagina normal, cervix healthy and normal size, no white discharge

**Ashta Vidha Pariksha:**

1) Nadi - 82 b / min

2) Mala - Once / day

3) Mutra - 5 - 6times/day

4) Jivha - Alipta

5) Shabda – Avishesha

6) Sparsha - Anushna Sheeta.

7) Druk - Avishesha

8) Akriti - Madhyama.

**Dasha vidha pariksha**

Prakruti – Kapha pittaja

Vikruti – Madhyama

Bala – Madhyama

Sara – Madhyama

Samhanana – Madhyama

Satmya – Madhyama

Satva – Mishra rasa satmya

Pramana – Madhyama

Ahara shakti – Abhyavarana shakti – Madhyama

Jarana shakti – Madhyama

Vyayama shakti – Avara

Vaya – Madhyama

**Lab Investigations**

Hb – 12.3gm%

TLC – 5800 cells/ mm<sup>3</sup>

Random blood sugar – 98mg/dl

Thyroid profile- normal

Trans abdominal scan– USG done on 12-Dec-14

Impression: uterus normal in size, retroflexed, ET- 6.5 mm, Complex cyst in left ovary with internal echoes measuring 23x23 mm- likely Endometriotic Cyst. Tubular structure with internal echoes measuring 2.3 x 1.6 cm in the left adnexa -- ? Hydrosalpinx.

### Intervention

*Phalasarpi* 1 tsf BD before food with warm water

Evicare syrup 2 Tsf BD after food

Gynoveda 1 tab BD after food during menses (pain)

Yoshajeevanalehya 1 tsf BD after food with milk

Medicines were given for duration of 3 months.

### RESULTS

There was a considerable change in various symptoms as noted below:

DATE	PAIN	BACKACHE	LMP
12/08/16	Present	Present	8/08/16
15/09/16	Present	Absent	10/09/16
15/10/16	Absent	Absent	7/10/16
20/11/16	Absent	Absent	11/11/16

Patient got conceived and UPT showed positive on 22/01/17 (10 weeks 2 days).

### DISCUSSION

*Vandhyatva* is a *Vata* dominated *Sannipataja vyadhi*. *Ghrita* is Tridoshaghna due to its properties and milk is also *Vata-pitta shamaka*, *Jivaniya* and *Rasayana*. So, *Phala-ghrita*<sup>3</sup> has the properties of *Ghrita*, milk and other ingredients. *Phala-ghrita* contains mainly *Tikta*, *Madhura* and *Katu rasa*, *Laghu*, *Snigdha*guna, both *Katu* and *Madhuravipaka* and also *Ushna* and *Sheetavirya*. It also has *Dipana*, *Pachana*, *Lekhana*, *Anulomana*, *Shothahara*, *Krimighna*, *Balya*, *Prajasthapana* and *yoni Pradoshanashaka* actions. Hence this drug

was selected for oral administration in the present study.

Evicare syrup<sup>4</sup> is having an herbal combination which helps in repairing the endometrium, regularizes endogenous hormonal secretion, anti-spasmodic and anti-inflammatory properties, immunomodulator, regulating follicle maturation, ovulation and normalizing estrogen and progesterone level.

Gynovedan<sup>5</sup> is a herbal patent medicine which helps in correcting an anovulatory cycles and having anti-spasmodic and anti-inflammatory properties.

Yoshajeevana lehya<sup>6</sup> is *sita veerya*, *rasayana*, *tridosha shamaka*, helps in maintaining the growth of fetus during pregnancy, uterine tonic, *rakta shodaka*, *vata-anulomana*.

### CONCLUSION

In the present case study *Phalasarpi*, *syrup evicare*, *cap Gynovedan* and *yoshajeevan lehya* have been used for the treatment of infertility which is found to be very effective. There is drastic improvement in signs and symptoms. Patient is free from all the symptoms. Hence *Ayurveda* gives the complete cure by not only relieving the symptoms of illness but also by increasing the defence mechanism and immunity of patient. This in turn prevents the recurrence of disease. But to prove this with greater confidence further studies are to be conducted to prove the efficacy of these medicines.

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