



STREE VANDHYATWA: A CONCEPTUAL STUDY

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ABSTRACT

Infertility among women under age 35 is defined as the inability to conceive after a year, and for 35 and older it is after six months of trying without protection. Age, smoking, body weight and conditions like Polycystic ovary syndrome, endometriosis, pelvic inflammatory disease, uterine fibroids, a history of abdominal or ovarian surgery, diabetes, kidney disease and thyroid disease impair fertility. A woman who's never been able to get pregnant will be diagnosed with primary infertility and with at least one successful pregnancy in the past will be diagnosed with secondary infertility. Approximately 10 to 14 percent of Indians are currently infertile, with rates greater in metropolitan areas where one in six couples is affected, according to the Indian society of assisted reproduction. Infertility occurs if there is any abnormality in *ritu*, *kshetra*, *ambu* and *beeja* (*garbha sambhava samagri*.) as explained by *acharya charaka*. *Ayurveda brings hope in these patients by its unique way of management through panchakarma, shamanoushadi and pathyapathya*.

KEYWORDS :

INTRODUCTION

The majority of infertile couples worldwide encounter primary infertility. It is "a disorder of the reproductive system defined by failure to achieve a clinical pregnancy after regular, unprotected intercourse for a period of 12 months or more." (WHO-ICMART glossary)¹. Athologic spermograms, ovulation issues/anovulation, tubal illnesses, pelvic adhesion/endometriosis, cervical factors, and idiopathic causes—often referred to as "unexplained infertility"—are the main conditions associated with infertility². Sushruta claims that a woman whose Artava has been shattered is known as Vandhya.³ Infertility according to different acharyas are explained as follows

According to Charaka samhita.

1) **Vandhya**: refers to the complete inability to become pregnant as a result of severe intrinsic issues such as beejopaghata (totally aberrant chromosomal or mullerian agenesis development).⁴

2) **Apraja**: a woman with primary infertility (infertility where a woman conceives after receiving therapy) or a woman getting pregnant, with unsuccessful pregnancy.⁵

3) **Sapraja**: a condition in which a lady in her prime reproductive years fails to conceive after trying with previous history of having healthy pregnancies⁶

According to Acharya Haritha⁷

- (1) **Kakavandhya**: After having one child, unable to conceive.
- (2) **Anapatya**: Primary infertility.
- (3) **Garbhasravi**: Characterised by frequent abortions leading to failed pregnancies.
- (4) **Mritavatsa**: Characterised by recurring intrauterine fatalities, stillbirths, and perinatal deaths, which result in unsuccessful pregnancies.
- (5) **Balakshaya**: Infertility brought on by a loss of dhatukshaya or bala (strength).
- (6) **Unknown**: Any coitus before menarche causes constriction of uterus and ovaries, and the lady is unable to conceive or conceives very slowly and with great difficulty.

Aetiology

Vandhyatwa is a complex illness. They are divided into two categories:

[A] Anomalies in crucial elements:

Acharya Charaka⁸ states that Shonita (Stribeeja) and Shukra (Pumbeeja) should be healthy for a good progeny.

- **Aatmaja and Satvaja**: Aatma descends into the fertilised egg and creates garbha⁹ while being enveloped by satva. The use of Satmya Aahara and Vihara is crucial for maintaining the normalcy of Shonita and Shukra. The Rasa determines how the mother and embryo are nourished.

Therefore, any anomaly of the Garbhakarabhavas, will prevent conception.

According to Acharya Sushruta,¹⁰ four elements are involved in conception

- **Rutu**: Rutu was defined by Acharya Dalhana as the Rajaha Samayaha, or ovulation phase. Seeds planted during the Rutu (season) are more likely to produce fruit. Rutu is therefore the most fertile period, during which Yonimukha or Garbhashya open for sperm entry and assist conception. According to bhavprakash Beejotsarga and Garbhadhana should be performed during the Rutukala. It lasts for 12 days¹¹, 16 days¹², or the entire month¹³ if Yoni, Garbhasaya, and Artava are healthy. Occasionally, Rutukala may appear without menstruation. It is known as Rutukala because the seeds (sperm) placed during this time are likely to bear fruit (conception).
- **Kshetra**: Acharya Dalhana described Kshetra as being Garbhasaya. The female reproductive system is also referred to as Kshetra. To pass spermatozoa, the cervix and cervical mucus must be permeable. The ciliary movement must be sufficient and the fallopian channel must be open. During pregnancy, the uterus must be able to support implantation and fetal growth.
- **Ambu**: Ambu was described by Acharya Dalhana as Aharapakotpanna rasa dhatu. Hormone levels must be sufficient and Rasa must properly nourish the vaginal organs. According to Acharya Vagbhata¹⁴, just as a lotus flower closes after dusk, so too does a woman's yoni after rutukala and she will not receive shukra. The sun can be compared to the ovary, the sun's beams to the hormones secreted by the ovaries, and a lotus flower to the cervix. As a result, at the conclusion of Rutukala, the level of the

ovarian hormone oestrogen drops, the cervical region of the uterus constricts, and neither shukra nor beeja can enter (Sperm).

- **Beeja:** According to Acharya Dalhana, Beeja is Artava and Shukra. Ovulation must occur, and the ovum must be healthy. The male must generate a sufficient amount of morphologically and maturely normal spermatozoa. Vishvamitra explains the physiology of the beeja nirmana in Sushruta Sutra 14/14, Chakrapani commentary. He clarified that rakta (the form attained by the rasa after entering the relevant strotas) enters the minute channels (Sukshmaresha pratikashah bijaraktavaha sirah), obtaining the specific nuclear form that is capable of forming beeja.

In the same context, Acharya Sushruta stated that artava is the upachita that results from rasa's attainment of raktatva through countless dhamanis.

According to Acharya Kashyapa, the rajovaha shiras, where rajaha pravisarjana takes place, expose the garbha developing entity to the rajovaha shiras. Then it assumes the form of a pushpa, and its pravartana takes place once a month¹⁵

The apana vayas mentioned by Acharyas in the prakrita karma of apanavata¹⁶ control Pravartana. Similar to this, the parisarpa described during coitus calls for the presence of agni, which is related to pitta¹⁷.

In Nirmana Prakriya, the Mahabhutas Prithvi and Jala play a significant role as representatives of the Kapha. Both Acharya Charaka and Acharya Sushruta refer Upachya as Kapha Karma and purantarpanabalasthairyakrit¹⁸ as Kapha Karma,¹⁹ respectively. All of these traits contribute to Beeja's creation. Additionally, to possessing Ashrayashrayi Bhava for Kapha and Rasa, it is crucial for the development of its Updhatu artava.

Therefore, an anomaly in any one of these crucial elements may result in Vandhyatwa.

Acharya Vagbhata has underlined the importance of normal psychological status, healthy Marga, Rakta, Shukra, and Garbhashaya.²⁰

Causing factors

Vandhyatwa has also been described in eighty different forms of Vatikaroga²¹. Yoni never spoils without Vata. Vata is hence the primary cause of Vandhyatwa.

The Nidanans of Vandhyatwa²², which are nearly identical to the causes of infertility according to modern science, have been precisely described by Acharya Charaka.

1. Pradosha, Yoni:

Yonivyapad: If any of the twenty Yonivyapad are not adequately handled, the woman is unable to attain successful pregnancy.

Injury to Artavavaha Strotas: Along with other symptoms like dyspareunia and amenorrhoea, Acharya Sushruta classified Vandhyatwa under the clinical aspects of injury to Artavavaha Strotas.

Yoniars – here Artava is destroyed causing infertility.

Garbhakoshabhanga: The word "Bhanga" is thought to refer to uterine prolapse or retro-displacement, one of the causes of infertility.²³

Bhagasankocha²⁴: Deep lacerations or tears of the vulva and vagina may occur during coitus with a girl before her

menarche. Healing scars from these ulcers may create vaginal constriction, which would prevent the penis from penetrating properly during coitus, leading to incomplete coitus and increasing the risk of infertility.

Sphalita Mutratwa: Gonococci induce inflammation of the reproductive system in addition to the urinary system, hence sphalita mutratwa in girls is seen in strictures, partial obstruction, or spasm of the urethra, with the most prevalent cause being Gonorrhoeal urethritis. Infertility is frequently caused by gonorrhoeal salpingitis.

Utkshipta Yoni: The only cause of infertility is upward displacement of the cervix in situations of uterine retroversion. Aticharana yoni vyapad: According to Acharya Sushruta, excessive coitus is the root cause of this illness. The woman is unable to get pregnant. Profuse mucoid unctuous secretion from cervical and endometrial glands in the early stages due to high sexual desire and vaginal itching as a result of frequent coitus.

Vamini yonivyapad: According to Acharya Charaka, in this circumstance, the shukra is evacuated within 6 or 7 days of its admission into the uterus, with or without discomfort. When the cervix or fallopian tubes are blocked, sperm escapes without fertilization, resulting in this disease. On the other hand according to Acharya Sushruta, Yoni excretes beeja that is mixed with raja and vata, resulting in infertility.

Putraghni yonivyapad: The exacerbated Vata repeatedly destroys the fetus as a result of the dominance of the Ruksha guna and dushta shonita.

Shandhi Yonivyapad: The Ashaya (uterus) of the female fetus is affected or afflicted with Vayu because of anomalies in beeja. The future newborn will have little or no breasts.

2) Mansika Abhitapa:

Achieving pregnancy depends greatly on the couple's normal psyche. Happiness of heart²⁵ will be vitiated by Bhaya, a troubled mind (Vimana), Shoka, Krodha, etc., and it is also claimed that Vishada exacerbates already-existing pathology. Hence, saumnasya is crucial for getting pregnant.

3) Shukra Dosh: Any one among 8 shukra dustis can cause infertility.

4) Artava Dosh: Ovum, menstrual blood, and ovarian hormones are all referred to by the name artava. One of the key causes of Vandhyatwa is Nashtartava. Artava is tainted by various Doshas, including Infertility is caused by Ashtartava Dushti because the ovum's Beeja is destroyed.

5) Ahara Dosh: Dietary irregularities result in infertility in three different ways:

- By causing Dhatu and Dhatvagni loss, they have an impact on hormones.
- By vitiating the doshas, which contribute to infertility and many gynecological diseases.
- By impeding zygote implantation or the nutrition of fertilized eggs.

Vihara Dosh:

This dosha is aggravated by an aberrant way of living and Vegavidharana²⁶ (restraining one's inherent urges), which results in a variety of gynaecological problems. Defective practise includes coitus with a lady in Nyubja or Parshvaavastha²⁷, discharge of semen on Samirana Nadi²⁸ or outside the vagina.

It's likely that semen is not effectively deposited inside the vaginal canal in all of these situations. So, sperm cannot access the uterus, leading to infertility.

Infertility is also brought on by abnormal lifestyles in two different ways:

1. By vitiating the Doshas, gynaecological disorders are brought on.
2. By impairing sperm entrance due to improper seminal ejaculation deposition.

7) Akala Yoga:

The term "Kala" is used to refer to both the age and the Rutukala. Conception does not occur in adolescent girls or elderly women²⁹ due to premenarche and menopausal stages, respectively, and before or after Rutukala due to the absence of or destruction of the ovum, respectively.

8) Bala Kshaya:

Bala is an allusion to physical prowess and the capacity for conception. Bala is dependent on Dhatus, hence the loss of Bala owing to Dhatushaya as a side effect of illnesses, early ageing, and unidentified causes undoubtedly alludes to infertility.

9) Atma Dosh:

This condition comprises both abnormal Atma descent in this pregnancy and infertility brought on by the couple's past sins. Idiopathic reasons are referred to be past-life wrongdoings. Atma descends in a fertilised egg and is surrounded by Satva; both Atma and Satva are considered parts of the embryo's Shadbhawas. Since Shukra, Shonita, and Atma are united during conception, any abnormalities may naturally result in sterility.

10) Jataharinis:

The Jataharinis destroy Bijaripaartava, Vapu (the body), Garbha (the fetuses), Jata (the born children), Jayamana (the birth), or Janishyamana (to be born). Additionally, Acharya Kashyapa mentioned jataharinis, which are characterised by repeated expulsions of fetuses at various gestational stages, such as Andaghni, Durdhara, Kalaratri, Nakini, and Vashya, among others.³⁰

11) Daivaprakopa: 11th-century term for an idiopathic cause of infertility.

12) Beejadushti: The progeny becomes sterile when the uterus-related gene in the ovum is disrupted.

13) Samshodhana vyapad³¹

If excessive Vamana and Virechana medications are administered to a person with Mridukoshtha despite receiving sufficient Snehana and Swedana, the Vayu becomes vitiated and destroys the beeja (sperm and ovum) and pushpa due to the secretion of Jeevrakta (Menstruation).

Infertility is said to be brought on by vaginal factors, cervical factors (5%), uterine factors (10%), tubal factors (25–30%), ovarian factors (30–40%), peritoneal factors (5%), and coital errors (34%), according to modern science.³²

Ayurvedic management

The Charaka Samhita states that "all disease originates owing to an imbalance in Agni and the single most critical component in the building of Ama (toxin formed when undigested food forms in the stomach) is the Agni" (the power of digestion). As a result, treating Ama must always involve treating Agni, which includes using digestive herbs and spices, adhering to a proper schedule for mealtimes, and avoiding cold foods and beverages.³³ The Ayurvedic deep interior cleansing treatment known as panchakarma can also be used to get rid of Ama. Ojas will benefit from a healthy Agni as well.

The assessment of a person's dosha is crucial for prescribing

treatment and identifying any blockages and weaknesses in certain body regions, for which the appropriate food, body therapies, herbal remedies, sensory therapies, lifestyle, and yoga therapies are used³⁴. Combination of herbs is used to treat infertility with the aim of resolving an underlying biological or functional issue³⁵

Ayurvedic herbal treatment for infertility

Latakaranj, Varun, Kanchnaar Guggulu, Arogya Vardhini, Punarnava Guggulu in Ovulation problems caused due to polycystic ovarian syndrome (PCOS), Chandraprabha in Premature ovarian failure (POF), Kaishor Guggulu, Triphala guggulu in blocked fallopian tubes, adhesions (scar tissue) and pelvic inflammatory disease.

Medicated ghees and oils are widely used³⁶, including satapushpa tailam, narayana tailam, phala sarpis, kalyana ghrita, kalyana gulam, and dadimadi ghrita.

Role of abhyanga

Abdominal massage improves blood flow to the reproductive system. Pelvic massage therapy relieves muscle pain and inflammation and promotes tissue regeneration. Effective in treating blocked fallopian tubes. Studies show that fertility massage improves the immune system by increasing the types of infection-fighting cells while reducing tissue damage. Diet in management of infertility

Acharys Charaka and Vagbhata define a few often consumed culinary items. The foods that are thought to be the most beneficial include Rakta shali, Mudga, Rainwater, Saindhava (Rock Salt), Jivanti, Aina Meat, Godha, Rohita Matsya, Cow's Ghee, Cow's Milk, Tila Taila, Ginger, Grapes, Pomegranate, and Sugar. Simply taking salt and ginger before food is recommended by Bhavaprakasha³⁷ because it improves agni, which is main culprit in most diseases also improves taste, and clears the throat and tongue.

CONCLUSION:

The scientific method is becoming more and more popular. Everyone wants to measure things using scientific standards in this day and age.³⁸

In Ayurveda, it is vital to learn, comprehend, and demonstrate them, especially in light of contemporary scientific standards. In accordance with Ayurveda, Nidan-parivarjana is the first line of treatment, so before treating any disorder, we should be aware of the pathology and underlying causes of that condition. This is what Ayurveda states by offering a non-invasive, affordable, and better outcome compared to modern medicine.

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