

## **ORIGINAL RESEARCH PAPER**

# "TO EVALUATE CLINICAL EFFICACY OF GOKSHUR BEEJA CHURN AND NIRGUNDI SWARAS IN STREE VANDYATWA WITH SPECIAL REFERENCE TO ANOVULATION."

## **Ayurveda**

**KEY WORDS:** Gokshur beej churna, Nirgundi Swaras, Annovulation.

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RSTRACT

In Ayurved classic reference of infertility as a independent diseases is not available. It is seen as complication of Yonivyapad. As per Ayurveda Anovulation is a result of Artavakshaya means there is deficiency of Artava. As Artawa is the Updhatu of rasdhatu. It directly indicates deficiency of rasadhatu. Various causes of female infertility are illustrated in Charakha samhita such as abnormalities of Reproductive organs, psychological problems, abnormalities of sukra, Abnormalities of Asrk, Abnormalities of Diet, abnormalities in mode of life, Akala Yoga (Coitus in infertile Period), loss of Bala, Abnormalities of Atma and Satwa. The WHO estimates the overall prevalence of primary infertility is between 3.9 to 16.8%. Patients of anovulatory cycles with previous history of at least 3 cycle were selected. The study was performed in Strirog and prasuti tantra department. Patients of anovulatory cycle were selected and randomly divided into two groups. In trial group Gokshur beej Churn and Nirgundi swaras from 2 nd day of menses up to 7 th day for 3 cycles, while control group tab. Clomiphene citrate 50 mg OD from 2 nd day of menses up to 5 th day for 3 cycles. From this it can be concluded that gokshur beej churn and nirgundi swaras preparable, effective, potent, easily administrable type of treatment.

#### INTRODUCTION:

In Ayurved classic reference of infertility as a independent diseases is not available. It is seen as complication of Yonivyapad. Sushruta quotes "Vandya Nastartavam" (Su.S.Utt.34/10-11).

Charakha says Vandya is an beejadusti, (Cha.Sha.4/30) Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus. As per Ayurveda Anovulation is a result of Artavakshaya means there is deficiency of Artava. As Artawa is the Updhatu of rasdhatu. It directly indicates deficiency of rasadhatu. 2 Various causes of female infertility are illustrated in Charakha samhita such as abnormalities of Reproductive organs, psychological problems, abnormalities of sukra, Abnormalities of Asrk, Abnormalities of Diet, abnormalities in mode of life, Akala Yoga (Coitus in infertile Period), loss of Bala, Abnormalities of Atma and Satwa.<sup>3</sup>

The WHO estimates the overall prevalence of primary infertility is between 3.9 to 16.8%.4 Ovulatory cause is an important cause of infertility among women, accounting for above 40% cases. Ovulation refers to the physical act of rupturing of the follicle with extrusion of the oocyte. when the follicle does not rupture and ovulation fails it is called as anovulation which disrupts reproductive health. Gokshur has Rasayan, vrushya and balya property. Nirgundi has vathahara property useful for normal ovulatory function.

Gokshur beej churna and Nirgundi Swaras is easily available, easily administrable and cost effective that's why this preparation was selected for the study.

**Review of Literature:** The second part as review of literature is divided into 2 parts –Ayurvedic review and modern review having an exhaustive account regarding anatomy physiology which are significant in relation to anovulation.

# MATERIALS AND METHODS: INCLUSIVE CRITERIA:

- 1) Age between 18 to 35 yrs
- 2) Patients was selected on the basis of special investigation like fern test, Follicular study, Serum Progesteron.
- 3) Patients having anovulatory cycle were selected for the present study

#### **EXCLUSIVE CRITERIA:**

- 1) Patients below 18 years and above 35 years.
- 2) Ovulatory cycle.
- 3) Patients of Physiology amnenorrhoea i.e. Pregency, Lactation, Menopause.
- 4) Patients with systematic diseases ex- Diabetic mellitus, Hypertension, Tuberculosis
- 5) Patients with other endocrine dysfunction i.e. Hypothyroidism, Hyperthyroidism
- 6) Patients with Tubal blockage.

#### **GROUP-A (Trial Group):**

Out of 60 patients 30 diagnosed patients of anovulation were administrated Gokshur beej churn and Nirgundi swaras orally from 2 nd day of menses up to 7 th day of menses for 3 consecutive cycles. 30 diagnosed patients of stree vandyatwa (anovulation) were administrated Tab. Clomiphene Citrate 50 mg once a day orally from 2 nd day of menses up to 5 th day of menses for 3 cycles.

## **OBSERVATIONS AND RESULTS:**

Statistical analysis of different parameters:-

As grading used some assessment parameters were ordinal in nature, "Wilcoxon Signed Rank test" is used for intra-group comparison. (i.e. before and after treatment of a group) while for inter-group comparison, (i.e. for comparing two groups with each other) "Mann-Whitney U test" is used.

For dichotomous parameter, the effect of individual treatments are tested by using 'McNemar chi-square test' while to compare the effects of two treatments, 'Pearson Chi-square test' is used.

We have tested hypothesis for each parameter and result is interpreted accordingly. The level of significance is kept at 0.05.

Proper summary statistics like mean, median, S.D., IQR (Inter Quartile Range) are provided.

S. N	I. Sympt	Group	Diff.	Wilcoxon	P Value	Remark	Comparis
	om			sign rank T			on
1	Pain	Group A	1.00	153	<0.001		Equally effective

		Group B	1.00	120	<0.001	significa nt	
2	Quanti ty of	Group A	1.00	171	<0.001	significa nt	Equally effective
	bleedi ng	Group B	1.00	171	<0.001	significa nt	
3	Fernin g	Group A	0	0	0.001	significa nt	Equally effective
		Group B	01	0	0.003	significa nt	
4	USG follicul	Group A	1.50	0	<0.001	significa nt	Equally effective
	ar study	Group B	1	0	<0.001	significa nt	
5	Serum proges	Group A	1	10.083 Chi s	0.001	significa nt	Equally effective
	terone	Group B	1	18.5 Chi s	<0.001	significa nt	

S.N.	Parameter	% mean improvement		
		Group A Group B		
1	Pain	41.07 %	41.33 %	
2	Quantity of bleeding	39.88 %	44.44 %	
3	Ferning	22.22 %	13.89 %	
4	USG follicular study	50 %	50 %	
5	Serum Progesterone	40 %	66.67 %	

## **Overall improvement:**

In group A, 2 patients (7%) were found with excellent improvement, 14 patients (47%) were with moderate improvement, 13 patients (43%) were mildly improved while 1 patient (3%) realized negligible improvement. In group B, 2 patients (7%) were found with excellent improvement, 14 patients (47%) were with moderate improvement, 13 patients (43%) were mildly improved while 1 patient (3%) realized negligible improvement.

# Probable mode of Action of Trial drug-

As apan vayu play important role in ovulation by rupturing domiant follicle (By Nishkraman kriya) Due to Apan vayu vikriti there is disturbance in ovulation and also hormonal imbalance. Vata dosh plays an important role in ovulatory function.

## GOKSHURA:5

- It has guru, snigdha, madhur and sheet property act as a Vatapittashamak
- It has stomachic property and improves the quality of digestion and nourishment of Dhatus and updhatus.
- It promotes sperm production and ovulation process i.e. formation of ovum.
- Gokshur is said to be shukragami it means that micronutrients of gokshur are helpful for spermatogenesis and folliculogenesis, it has Rasayan property. As gokshur is well known diuretic having capacity of dissolving calculi.

## NIRGUNDI:

- Nirgundi is kaphavatshamak with Ushna virya and katuvipak -As nirgundi has tikta property it improves digestion and mainly acts on patients of anorexia.
- It also act as Rasayane (nourishment of all dhatu), it has good analgesic and anti-inflammatory property.
- Nirgundi helps to reduce premenstrual tension syndrome.

Nirgundi with it's analgesic property helps to correct the menstrual crams and proper menstrual flow. - It may be helpful for production of artawa as aartavajanan property.

#### CONCLUSION:

Among the avalible treatment for vandhyatwa gokshur beej churn and Nirgundi swaras take orally is beneficial in vandhyatwa.

- Total effect of combined therapy on data contributes about on trial group 38.63% and control group 43.27% after treatment.
- It is also noted that, gokshur beej churn and nirgundi swaras i.e group – A (trial drug) has shown mild better results in pain and ovulation.
- So it can be concluded that gokshur beej churn and nirgundi swaras preparable, effective, potent, easily administrable type of treatment.

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