

SUCCESSFUL NATURAL CONCEPTION AND FTND WITH AYURVEDA INTERVENTION IN A PATIENT WITH UNILATERAL TUBAL BLOCKAGE ASSOCIATED WITH ANOVULATORY CYCLES AND UTERINE FIBROID

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ABSTRACT

Procreation is an important desire of human beings. The inability to conceive within one year of unprotected coitus is termed as infertility. Among couples across the globe, infertility accounts to about 15%. Out of the many factors that are responsible for infertility in women, fallopian tube abnormalities or blockages account to approximately 30%. The fallopian tubes are an important part of the female reproductive system which play a pivotal role in the union of sperm and ovum. Any structural or functional abnormality in one or both fallopian tubes can cause infertility in women. Cases with unilateral tubal blockage have 50 percent reduced chances of natural conception. Whereas, in women with bilateral tubal blockage, natural conception is considered to be nearly impossible and these patients are advised treatments like in vitro fertilization. The present case is of a 32-years old female patient, with unilateral tubal block, uterine fibroid and anovulatory menstrual cycles trying to conceive naturally for eight years post-marriage. Her treating gynaecologist had suggested her in vitro fertilization, but due to financial crisis and unwillingness for the procedure, she opted for Ayurveda treatment. Since menarche, her menstrual cycle has been regular with moderate blood flow. She was thoroughly examined and was diagnosed as a case of infertility due to tubal blockage associated with fibroid and anovulatory cycles. In order to boost all the fertility factors, she was prescribed a non-hormonal Ayurvedic proprietary formulation 'Jeehv' manufactured and marketed by Gynoveda Pvt. Ltd. in a dose of 1g twice a day after food for six months along with Gynoveda's Iron and folic acid tablets in a dose of 250mg once a day before breakfast. *Jeehv* consists of Ayurvedic herbs like *Putranjeevak*, *Shivlingi*, *Shatavari*, etc. which are known to boost all the factors which determine fertility. The patient complied with the suggested treatment protocol and in the sixth month, she conceived naturally. The conception was confirmed on ultrasound. She gave birth to a healthy baby in May 2023 through vaginal delivery.

KEYWORDS: Female infertility, tubal blockage, fibroid, *Jeehv*, Ayurveda, case report.

INTRODUCTION

Failure to conceive within one or more years in women under 35 years of age and for six months or more in women above 35 years of age with regular unprotected coitus is termed as infertility. Infertility is estimated to affect approximately 15% of couples in the reproductive age across the globe.^[1] Innumerable factors are responsible for infertility in women. Out of these, fallopian tube illness accounts to approximately 30%.^[2] The fallopian tubes are important structures which facilitate the union of ovum and sperm. Any structural or functional abnormality in the fallopian tubes can cause infertility. Unilateral tubal blockage reduces the chances

of natural conception by fifty percent whereas bilateral tubal blockage makes chances of natural conception negligible. Surgical correction becomes necessary but the success rate is low. In vitro fertilization is the last resort for these patients. Infertility is referred to as '*Vandhyatva*' in Ayurveda. Ayurvedic herbs like *Putranjeevak*, *Shivlingi*, *Shatavari*, etc. support fertility in women by inducing ovulation, maintaining healthy endometrium and preventing early pregnancy loss. They also have anti-inflammatory action on the female reproductive system. The present case is of a 32-years old female patient diagnosed with infertility due to unilateral tubal blockage, uterine fibroid and anovulatory menstrual cycles.

Case presentation

1. Patient information

A 32-years old female patient (gravida-0) visited the clinic with her husband aged 34 years in March 2022. She had been married for eight years and was unable to conceive, so she had visited a gynaecologist. She underwent all the diagnostic tests and was diagnosed with complete blockage in the right fallopian tube and a uterine fibroid. She was not ovulating. The gynaecologist had advised her to go for a laparoscopy after which she could be posted for In vitro fertilization. The patient couldn't afford these procedures, so she gravitated towards Ayurveda with a hope to conceive naturally. Her husband's sperm analysis was normal.

2. Menstrual history

The patient achieved menarche at the age of thirteen with regular menses and moderate menstrual flow in every cycle. However, she experienced mild dysmenorrhea since menarche.

3. General medical history

She neither had a comorbidity nor a known allergy. However, she suffered from Typhoid infection in August 2015 but recovered well with medical intervention.

4. Surgical history

She did not undergo any surgery in the past.

5. Details of examination and treatment

On her visit to our Ayurveda clinic, she was thoroughly examined for determining the vitiated *doshas* and affected *dhatu*s. Her diet and habits were asked. All her diagnostic workup was reviewed.

Height- 149 cm

BMI- 27.47

PR- 78/minute

RR-20/minute

BP-110/80 mm of Hg

Mala- Normal with regular bowel evacuation

Mutra- Normal

Kshudha- Normal

Trushna- Normal

Agni- Slightly suppressed

Nidra- Disturbed

Sweda- Moderate

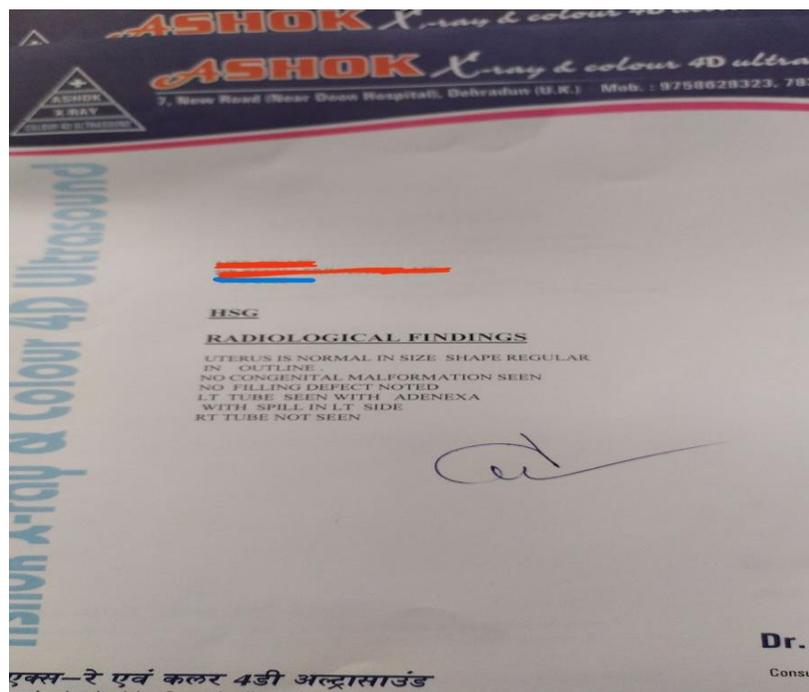
Nadi- *Pitta-kapha* dominant

Jivha- Slightly coated

After thorough examination, she was diagnosed as a case of *Vandhyatva* with predominant vitiation of *Kapha-vata* doshas. She was prescribed a non-hormonal Ayurvedic proprietary formulation '*Jeehv*' manufactured and marketed by Gynoveda Pvt. Ltd. in a dose of 2 tablets (500mg each) to be taken after breakfast and after dinner with warm water for 6 months along with Gynoveda's Iron and folic acid in a dose of 2 tablets before breakfast. She was advised to track ovulation every month with the help of an ovulation detection kit. Once the ovulation showed positive result, she was advised to be in intimate contact with her partner for 3 consecutive days. She religiously followed the treatment protocol and tracked the ovulation every month. Her first cycle after commencement of treatment was anovulatory. All the consecutive cycles were ovulatory. In the sixth month of treatment, she conceived naturally. The conception was confirmed on ultrasonography and she was advised to stop consuming the medicines.

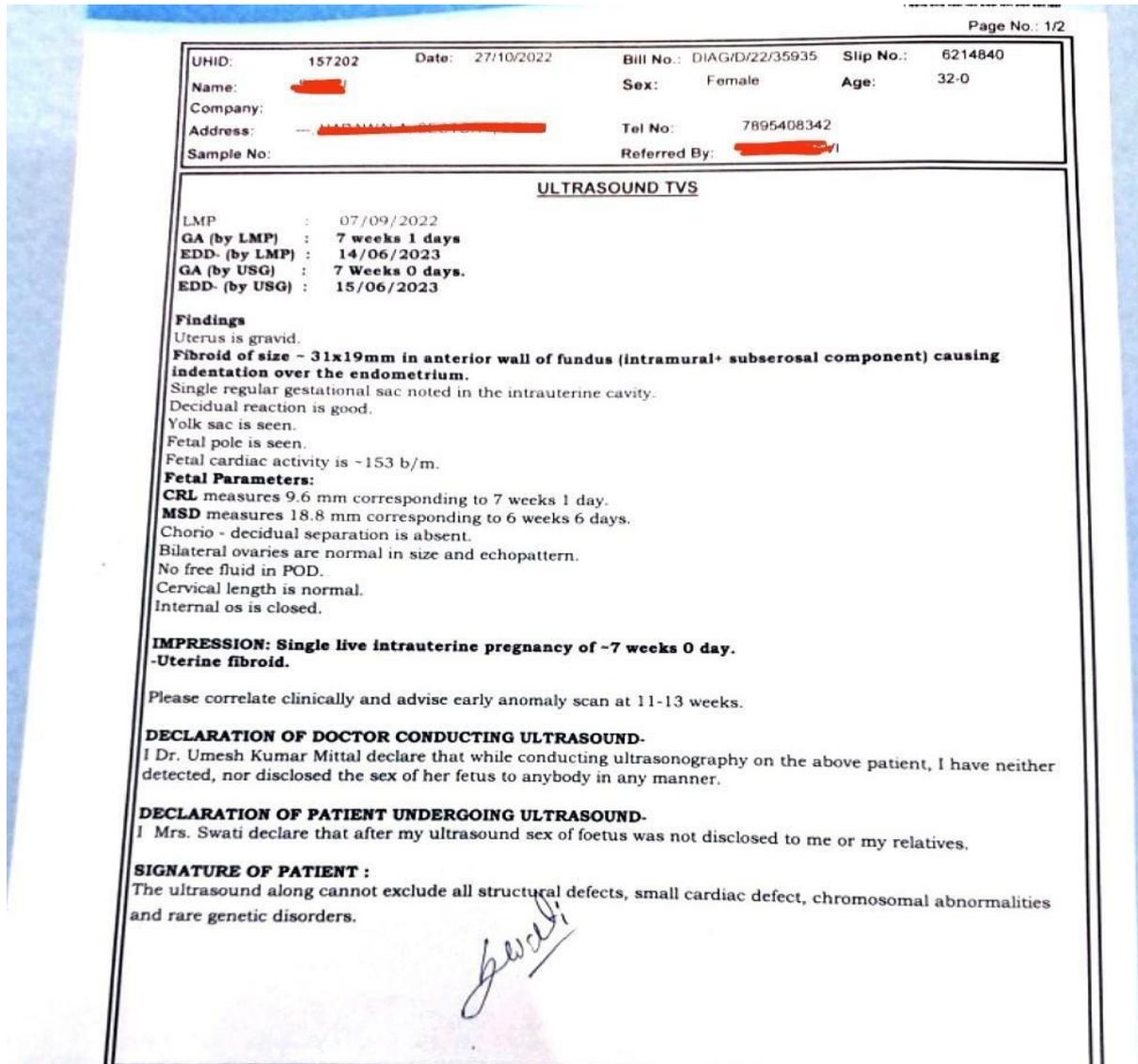
On examination

Weight- 61 kg



Monthly follow-up- (Table-1).

	Month-1	Month-2	Month-3	Month-4	Month-5	Month-6
Ovulation	Negative	Positive	Positive	Positive	Positive	Positive
Urine pregnancy test	Negative	Negative	Negative	Negative	Negative	Positive
Period flow	No change	No change	Slightly improved	Improved	Improved	Period missed
Period pain	No change	No change	No change	Slightly reduced	Reduced	Period missed
Energy level	No change	No change	Slightly improved	Improved	Improved	Improved
Skin health	No change	No change	Slightly improved	Slightly improved	Improved	Improved



DISCUSSION

According to Ayurveda, *Garbhadhaarana* (conception) is dependent on four essential elements known as *Garbha sambhava saamagri*. These factors are *Ritu* (fertile period), *Kshetra* (healthy uterus with receptive endometrium), *Ambu* (proper nutrition supply to the foetus) and *Beeja* (healthy ovum and viable sperm). Any defects in one or more of these elements can cause *Vandhyatva* (infertility).^[3] In the present case, the right fallopian tube was completely blocked, the menstrual cycles were anovulatory and required induction with HCG injections with no rupture at times and the uterus

had a fibroid interfering implantation. All these factors had led to infertility. The aim of our treatment was to induce ovulation, facilitate natural conception and implantation and prevent early pregnancy loss due to fibroid. To achieve all this, Gynoveda's *Jeehv* along with their Iron and folic acid tablets was the best choice. *Jeehv* comprises Ayurvedic herbs like *Putranjeevak*, *Shivlingi*, *Jeevanti*, etc. which support all the fertility factors. *Putranjeevak* (*Putranjiva roxburghi*) helps in maintaining the endometrial thickness and improves the receptivity. *Jeevanti* (*Leptadenia reticulata*) makes the uterine environment favourable for natural conception.

Shatavari (*Asparagus racemosus*) helps in healthy growth of ovum. *Ashoka* (*Saraca asoca*) supports ovulation. *Shivlingi* (*Bryonia laciniosa*) provides nourishment to the embryo, thus preventing early loss of pregnancy. In this patient, all these herbs worked well to induce ovulation, facilitate conception and healthy implantation of the embryo. From the second month of the treatment, the patient started ovulating naturally without the need of hormonal pills. The ovulation was tracked every month with the help of an ovulation detection kit. In the sixth month, she missed her periods. Her urine pregnancy test was positive and the conception was confirmed on ultrasound. No side-effects were experienced by the patient during the course of treatment and she had a full-term normal delivery without any complications throughout the three trimesters. This ensures safety of the medicines administered.

CONCLUSION

The present case highlights the efficacy and safety of Ayurvedic formulations like *Jeehv* in female infertility. In patients who are unable to conceive due to various anatomical or physiological defects, Ayurvedic medicines can be administered to boost all the fertility factors as a standalone therapy or as an adjuvant to the conventional fertility treatments like hormonal therapy, IUI, IVF, etc. Ayurvedic treatment is not only cost-effective but also non-invasive and safer as compared to the conventional treatment modalities. However, there is a huge scope for extensive research and evidence generation which is essential to establish Ayurveda as the first choice of treatment in female infertility.

Declaration

Informed consent was obtained from the patient to publish the case report.

The authors declare that no competing interests exist.

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