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Review Article

ROLE OF PANCHAKARMA IN INFERTILITY

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ABSTRACT

Purpose: Vandhyatva (infertility) has been long standing problem since ancient period but it is most burning issue nowadays because of improper lifestyle. Both shamana and shodhanchikitsa is mentioned for infertility in ayurvedic texts. It is need of time to categorize and evaluate the efficacy of this treatment especially panchkarma with respect to various factors of infertility.

Method: Critical review and some case studies. Modern etiological factors are responsible to produce infertility are late marriage, nutrition less diet and fat rich food, stress and excess use of antibiotics and so on. It leads to produces disorders in both partners like unovulatory cycle, tubal block, PCOD, obesity and many more in female while low sperm count, erectile dysfunction etc. in male.

Results: Panchakarma contributes very important role in treating these disorders responsible for infertility by 1. Basti: Reproductive system present in katisthana which is sthana of apanvayu. Basti acts on vata predominantly. It increases strength of reproductive organs 2. Uttarbasti: Acts on endometrial receptors and also increases receptivity of genital tract to entry of sperms. 3. Virechana: It increases sheetguna required for shukrauttapti and increases jatharagni for nourishment of shukradhatu. 4. Nasya: It may act on pituitary gland stimulate secretion of FSH, LH hormones. 5. Various case studies also show significant results by panchkarma management in infertility.

Conclusion: From this review and case results it is clear that panchakarma can treat infertility successfully.

Keywords: Panchakarma, Infertility, Uttarbasti, Ayurveda.

INTRODUCTION

Vandhyatva Nashtartava Vidyat! i.e. a woman whose artava is perished is called vandhyatva is mentioned in ayurveda. Vandhyatva (infertility) has been long standing problem since ancient period but it is most burning issue nowadays because of improper lifestyle. The mean global incidence of infertility among general population is estimated as 16.7%. Both shamana and shodhanchikitsa is mentioned for infertility in ayurvedic texts. But it is need of time to categorize and evaluate the efficacy of this treatment especially panchkarma with respect to various factors of infertility.

MATERIALS AND METHODS

Critical review and some case studies are presenting here.

Nidana for vandhyatva:

1. Mithyaaharvihar
2. Aartavdushti
3. Mata pita beejdushti
4. PurvajanmakritPaparkarma

Modern etiological factors are responsible to produce Infertility:

1. Early and Late marriage: Not well development of reproductive organs.
2. Nutrition less & fat rich food: No nourishment of body, tempers ovary function.
3. Over use of antibiotics and excess use of chemotherapy agents, surgical procedures cause infertility.
4. Excess use of painkillers: Endocrine disrupter property.
5. Excess use of cosmetics: Blocks the hormones.
6. Tight clothing & mobile: Overheating of testis leads to low sperm count.
7. Smoking & alcoholism: Lowers motility of sperms and lowers LH hormones.
8. Improper hygiene of genital organs: Causes infection of genital tract.
9. Stress: Loss of energy and enthusiasm to do sex. Loss of libido. Affects HPO axis leads to impairment of ovarian function.

Due to above causes disorders produce in both partners:

Female

1. Unovulatory cycle
2. Acidic pH of vagina
3. Menstrual irregularity
4. Tubal block
5. PCOD
6. Obesity

Male

1. Low sperm count
2. Premature ejaculation
3. Loss of motility of sperm

Ayurvedic aspect of treating infertility: In Ayurveda both shodhan and shaman chikitsa are mentioned, but here we will see shodhan therapy i.e. panchakarma.

BASTI: Reproductive system present in katisthana which is sthana of apanvayu. Action of basti is predominantly on vatadosha and pakvashaya. Garbhashaya is made up of vayu and akashmahabhuta. In basti mainly tiktarasatamakdravya (vata+akashmahabhutapradhan) are used though they are vatavardhak, acts as catalyst to take the medicine to vatasthana. Sneha in basti acts as catalyst in absorption of other drugs medicinal properties. Since Basti is targeted at regulating the ApanaVayu it facilitates timely release of ovum and also good production of sperms.

UTTARBASTI: It contributes very important role in treating infertility because it has direct local action in reproductive system. It also helps to increase receptivity of genital tract to entry of sperms. Ovaries contain receptors which receive hormones secreted by hypothalamus and pituitary gland. The drug stimulates these receptors, so that proper ovulation occurs in each cycle.¹ Uttar Basti relieves tubal block by lysis of adhesions and relieves obstruction.² In cervical factor, drug administered locally in the cervix and absorbed by cervical epithelium due to sukshma property of drug. The lipid soluble drug is passively diffused across the membrane in the direction of its concentration gradient. The rate of transport is proportional to lipid: water partition coefficient of the drug. The more lipid soluble, higher is the concentration and quicker diffusion. In this way altered cervical pH can be corrected by Uttar Basti.³

Basti and Uttarbastidravys for different diseases:

Tubal Block:

1. Kasisadi Tail + Kshar Tail
2. Kumari Tail
3. ShatavariGhrit uttarbasti.
4. Tila Tail + saindhav + gomutra + mamsarasabasti.

Acidic pH of vagina:

1. Balamool + milk = ksheerpak + sukhoshna jal.
2. Kankshijal
3. Panchvalkalkwath.

Menstrual irregularity or unovulatory cycle:

1. Phalagrita
2. Shatavarighrit
3. Kashmaryadighrit, Madhutaalikbasti.

PCOD or Uterine Fibroid:

1. Dashmool Tail + Devdarvyadikwath
2. Phalaghrit

Miscarriages:

1. Gambhari + Kutaj = kwath + ghrita
2. Bala tail
3. Jivantyadianuvasanyamakbasti
4. Chatusnehaanusanbasti, Guduchyadi tail uttarbasti.
5. Udumbaradi tail uttarbasti.

Obesity:

Lekhanyaganbasti, Yapanbasti.

Ovarian factors:

Prajasthapangandravya siddha ghrituttarbasti. Vrishyabasti.

Cervical factors:

Ashwagandhaghrit and phalghrituttarbasti.

Uterine fibroid:

Panchatiktaguggulghrituttarbasti.

Unexplained infertility:

Sheetkalyanakghrituttarbasti

Erectile dysfunction:

Ashwagandhadi Tail uttarbasti.

Low sperm count:

Shukrakarakbasti, Drakhashadiniruhabasti, Vrishyabasti.

VIRECHANA: It acts on vitiated Pitta dosha decreases ushnaguna of pitta and increases sheet guna required for formation of shukradhatu. Impaired agni by vikrit pitta also corrected by virechana. Agni is required for prakritmirmirti of shukradhatu. Obstructing dosakapha is removed and vatadosa that gets obstructed by kaphadosa is also cleared off by virechana.

Dravya:

Mahatiktakghrit, TrivritLeha.

NASYA: It acts directly on brain, pituitary because "NASA HI SHIRASO DWARAM". No one cranial nerve is exposed to exterior than olfactory receptors. The mucosal epithelium is sensitive to variety of stimuli. The ghrita and tail easily absorbed through mucosal epithelium. It helps to stimulate the pituitary to secrete FSH & LH hormones.

In Female: Chandan Tail, Bala Tail, shatpushpa tail, phalaghrit.

In Male: Narayana Tail.

CASE STUDIES which was treated by ayurvedic treatment:

1. Case of Tubal Block: Kaphavruttavata, female suffering from PID. History of Tuberculosis.

Used Treatment: First given yogabasti. Then uttarbasti with Kumari Tail.

Action: Ushna, tikshna medicines acts by lekha karma. Tila tail acts as garbhashayashodhak, vranapachak, vranashodhak.

Result: 70% tubal block removed.

2. Case of Acidic pH of vagina: All is normal, but sperms are killed in vagina. Investigation shows pH of vagina is more acidic.

Used treatment: Avagahsweda with kankshi + water uttarbasti with panchavalakalkwath.

Action: Amliyata of yoni due to vitiation of pitta. Panchavalakalkwath having kashayrasa, sheetvirya. This helps in pittashaman by sthanikshodhan. Kankshi acts as jantughna.

Result: Patient is conceived in next cycle.

3. Case of Low sperm count: Hetu: fast food, stress, overload of work, late meal.

Used treatment: Snehan with mahatiktakghrit 4 days. Virechana with trivritleha. Basti with bala tail.

Action: Pitta and kaphdushti leads to indigestion. Improper formation of rasdhatu so further dhatus are not nourished. Mahatiktakghrit helps in piittashaman and virechan remove vitiated pitta. Bala tail basti helps in dhatuvridhi.

Result: Sperm count is increased at significant level.

DISCUSSION

The important cause of infertility is adoption of modern life style. Ayurveda can treat infertility by various methods of panchakarma procedures like basti, virechana, nasya using different ayurvedic formulations. Proper selection of drug and time of administration is very essential for getting the desired results.

CONCLUSION

This review summarizes and evaluates the evidence underlying the use of panchakarma for female infertility. From review of ayurvedic texts and case study results it is clear that panchakarma can treat infertility successfully.

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