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## Role of Prajasthapana Gana Siddha Ghrita Uttarbasti and oral yoga in the management of Vandhyatva with special reference to *Bijotsarga* (ovarian factor)

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## ABSTRACT

Motherhood is described as the pleasing punishment to woman. 10 to 15% marriages prove to be childless. Infertility is inability to conceive. Ayurveda may give a promising hand to cure the disease. In Ayurveda to achieve pregnancy Acharya Sushrut has given four essential factors i.e., Rutu, Kshetra, Ambu, Beeja. Also Acharya Chakrapani describe Prajasthapak Gana to treat infertility. Now a days Prajasthapak Gana Siddha Ghrita Uttarbasti is the key treatment in infertility. So therefore it has been decided to evaluate the efficacy of above treatment in Vandhyatva.

Key words: Vandhyatva, Uttarbasti, Prajastahapak Gana.

#### INTRODUCTION

In Ayurveda classics there is description of etiopathology of Vandhyatva and many remedies are mentioned but it has been given in general. The drugs mentioned are mostly for the fertile woman to have a healthy child. Acharya Chakrapani while commenting the Prajasthapak Gana has stated that Prajasthapak dose refers to the factors which causes infertility.<sup>[1]</sup> The causative factors of infertility can be classified in to uterine, tubal, ovarian, cervical. Acharya Sushrut has given four factors i.e. Rutu, Kshetra, Ambu, Beeja to achieve pregnancy.<sup>[2]</sup> But till now it is not clear as

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to where exactly the Prajasthapak Gana mentioned, to treat the Prajasthapak Dosa acts on which factor of infertility. So it is very important to study its effect on each and every factor individually. Therefore it has been decided to evaluate its efficacy in ovarian factor in the present study.

#### **AIM AND OBJECTIVES**

- 1. To compare the efficacy of Prajasthapak Gana Siddha Ghrita Uttarbasti and combined effect of Uttarbasti and oral administration of the same drug in relation to ovarian factor.
- 2. To find out the effect of drug on uterine endometrium and cervical factor and assess its total effect.

#### **MATERIALS AND METHODS**

In present study the patient were selected from OPD and IPD of Ayurved Hospital. A special proforma was prepared incorporating all signs and symptoms based on both Ayurveda and modern description. A detailed clinical history was taken. Both primary and secondary infertile patients having anovulatory menstrual cycle or with unruptured ovarian follicle were selected for Dr. Swati R. Ubarhande et al. Role of Prajasthapana Gana Siddha Ghrita Uttarbasti in Vandhyatva

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present study. After the diagnosis the patient were randomly categorized into two groups.

- 1. Uttarbasti (Group A)
- 2. Uttarbasti with oral Yoga (Group B)

#### Group A - Uttarbasti Group

The patients of this group were treated with *Prajasthapaka Gana Siddha Ghrita Uttarbasti.* 

- Route Intrauterine
- Kala Rutukala
- Dose 3ml
- Duration 3 days in a month for consecutive two cycles.

#### Group B - Uttarbasti with oral Yoga group

The patients of this group were treated with

- 1. Prajasthapak Gana Siddha Ghrita Uttarbasti as in group A
- 2. Oral Yoga *Prajasthapaka Gana* in the form of *Vati.*
- Dose 5 gm B.D
- Anupana Kshira
- Dureation 2 months

#### **Assessment Criteria**

The result was assessed on the basis of following criteria;

- 1. Follicular study by USG
- 2. Scoring pattern by Menstrual cycle
- 3. Scoring pattern of cervical Mucus
- 4. Scoring pattern of follicle
- 5. Overall effect of treatment

#### **OBSERVATION AND RESULTS**

In the present study 19 patients of infertility were registered out of which 5 patients left out before the completion of the course due to some unavoidable circumstance. All these patients were studied in the 2 groups. Group A was *Uttarbasti* group and Group B was *Uttarbasti* with oral yogas group.

#### **Table 1: Effect on Cervical Mucus**

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#### Mean % Gro Mean SD SE t р Score Differe Reli up nce ef BT AT 1.5 A 1 2.5 60 0.8 0.3 4.4 <0. 3 4 01 1 В 1.3 1 75.1 0.6 0.2 4.0 <0. 0.3 3 3 5 3 01 3

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#### Table 2: Effect on ovulation

Effect on ovulation	Group A		Group B	
	No of pts	%	No of pts	%
Ruptured	5	71.4	4	57
Unruptured	2	28.6	3	42.9

#### **Table 3: Overall effect of Therapy**

Parameters	Group A		Group B	
	No of pts	%	No of pts	%
Conceived	1	14.3	1	14.3
Complete Remission	4	57.1	3	42.8
Improvement	1	14.3	2	28.6
Unchanged	1	14.3	1	14.3

#### DISCUSSION

In group A initial mean amount of cervical mucus was 1 which was increased to 2.5. In group B initial amount of cervical mucus was 0.33 which was increased to 1.33. This improvement was statistically significant (P<0.01) In group A 71.4% of patients were having ovulation after treatment while 28.6% of patients were remained unovulated. In group B 57.1% of patients were having ovulation after treatment while 42.9% of patients were remained unchanged. In group A only 1 pt was conceived. Complete remission

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was found in 4 patients while 1 patient was reported with improvement. Only 1 pt was reported no response to the treatment in this group. In group B only 1 pt was conceived. Complete relief was found in 3 pts. Improvement was observed in 2 patients and 1 patient was remained unimproved.

#### **CONCLUSION**

In present study most of the patients were having primary type of infertility (100%). On the basis of the observation of this study it may be concluded that *Uttarbasti* with oral *Yoga* has got an edge over only *Uttarbasti*. It is relivent that *Uttarbasti* with oral *Yoga* of *Prajasthapan Gana* drugs may be recommended for management of *Vandhyatva* w.s.r. to *Bijotsarga*.

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#### REFERENCES

- 1. Charak Samhita, Ayurved Dipika Commentary by Chakrapani Bramhanand Tripathi, Chaukhamba Prakashan, Varanasi, reprint edition 2004, shloka 4/24
- Sushruta Samhita, Ambikadutta Shastri, Chaukhmba Sanskrit sansthan Varanasi, Seventh edition 1989, Sharirsthan adhaya 2, Shloka 33.
- Comparative study of Shatapushpa and Mishreya on Bijotsarga (ovulation) by Dr Arti Rajput, 2001 K.B dept Jamnagar.
- Role of Phalghrita and Uttarbasti in the management of Vandhyatva w.s.r to cervical factor by Dr Neha Pandya,1999, Jamnagar.

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