

Ayurveda View on Infertility and its management w.s.r. to role of *Uttar Basti*

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REVIEW ARTICLE

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ABSTRACT

Ayurveda considers *Vandhyatva* (infertility) as failure to give birth to a baby or experiencing *Garbha Strava* (repeated abortion) or *Mrutvatsa* (still births). The factors such as lifestyle, stress, excessive usage of contraceptives, genetic problems, smoking & drinking habits increases such cases day by day. As per *ayurveda* *Vandhyatva* occur due to the vitiation of *Vata Dosha* which affects basic constituents of *Garbha* (*Rutu*, *Kshetra*, *Ambu* & *Beej*). *Ayurvedic* classics describe both mental and body purification along with lifestyle management for treating infertility. *Ayurveda* philosopher had mentioned *Shamana* and *Shodhanchikitsa* for the treatment of infertility. *Panchkarma* provides best efficacy because it helps in balancing *Doshas* and *Dushyas*. *Uttarbasti* is one such type of therapy being indicated for infertility. It helps in detoxification of reproductive tract like uterus & fallopian tube. *Uttarbasti* helps in balancing *Vata Dosha* and thus helps in retaining *Garbha*.

Keywords: Infertility, *Vandhyatva*, *Garbha*, *Uttarbasti*, *Shodhana*.

1. Introduction

Infertility is inability to achieve pregnancy after a reasonable time of sexual intercourse without taking contraceptive measures. In *Ayurveda* various types of infertility are mentioned such as *Vandhya* (sterility), *Apraja* (curable and women can achieve pregnancy) and *Sapraja* (female becomes infertile after

conceiving for one or more times). Six type of *Vandhyatva* are depicted in **Figure 1**. Female infertility can occur due to some defects in movement of egg from ovary to uterus; less production of eggs; defective embryo formation and survival of embryo when it is attached to the lining of uterus. (1)

<i>Kakvandhya</i>	<i>Anapatya</i>	<i>Garbhastravi</i>	<i>Mrutvatsa</i>	<i>Balakshya</i>	<i>Garbha Kosh Bhang</i>
•Secondary infertility	•Primary infertility	•Repeated abortions	•Repeated still births	•Loss of strength	•Injury to uterus

Figure 1. Different types of *Vandhyatva* or Symptoms of infertility

Factors responsible for infertility in Females and Males

- Anovulatory cycle
- Menstrual irregularity
- Blockage in fallopian tubes
- PCOD
- Obesity
- Low sperm count
- Low motility of sperm
- Smoking and alcoholism

Ayurvedic scholars propounded four factors which are responsible for *Garbhoptatti* (Conception). They are *Rutu*, *Kshetra*, *Ambu* and *Beeja*. *Rutu* means fertilization or ovulation period, *Kshetra* means *Garbhshaya* (normal reproductive organs), *Ambu* represents *Rasa Dhatu* (maternal nutrition) and *Beeja* means *Artava-Shukra* i.e. normal ovum and sperm. Any defect in these factors there is alteration in *Garbhoptatti*. *Ayurvedic* literatures describes about the balancing of health through various detoxification processes. There are

various therapies mentioned in *Ayurveda* which not only helps in prevention but also helps in curing the different diseases. They help in improving the functions of the body organs and also help in rejuvenation of the organs. Systemic detoxification of the body can be done through different therapies like emesis, purgation and enema etc. *Uttarbasti* is one such therapy, used to detoxify reproductive tract mainly uterus and fallopian tubes. Sometimes fibroid formation, menorrhoea etc. causes implantation problems and *Uttar Basti* plays an important role in treating it. *Uttar Basti* also helps in the management of *Mutradosha* & *Mutraghata* etc. (2,3)

2. Treatment Modalities of infertility w.s.r. to *Uttar Basti*

Ayurveda considers two types of *Chikitsa* i.e. *Shamana* (medicinal treatment) and *Shodhana Chikitsa* (purification). *Ayurvedic* classics have given a lot of importance to *Sthanic Chikitsa*. The gynecology *Sthanic Chikitsa* deals mainly with *Tryavarta Yoni* (layers of vagina). *Yoniroga* and *Artava Vikara* are caused due to vitiation of *Vata dosha*. *Pitta* and *Kapha*'s functions are dependent of *Vata*

dosha. *Panchkarma* helps in curing many disorders of the body. *Basti* is one such *Panchkarma*'s therapy which improves the *Rakta, Vata, Kapha* and *Pitta Dosha*. *Basti* is used as a route for drug administration which has local as well as systemic effects. Many scholars have advised to first treat *Sthanic Dosha* and afterwards *Sthanantara Dosha*. *Basti* helps in clearing *Srotas* especially *Vatavaha srotas* also balances the vitiated *Doshas*. It is considered as potent detoxifying therapy because it removes vitiated *Doshas* rapidly and provides nourishment to the body. It can be easily performed in the people of all ages. *Basti karma* is the best choice of treatment for *Vata dosha* as *Vata* is responsible for *Gati Gamana* which further helps in *Shareera Vyapara*. *Pakwashaya* is said to be the main seat of *Vata dosha*. *Basti* therapy helps on balancing *Vata Dosha* through actions like *Samshodhana, Samgrahana, Vajikarana, Samshamana, Brahmana, Karshana*, etc. *Uttar Basti* is the most widely used method to treat various *Stree Roga* and *Klaibya*. *Uttar Basti* is one among the three *Basti* and is given in *Uttar Marga* i.e. through urinary or vaginal tracts. *Uttar Basti* is one of the approaches of *Sthanic Chikitsa* as mentioned in **Figure 2**. (4-6)

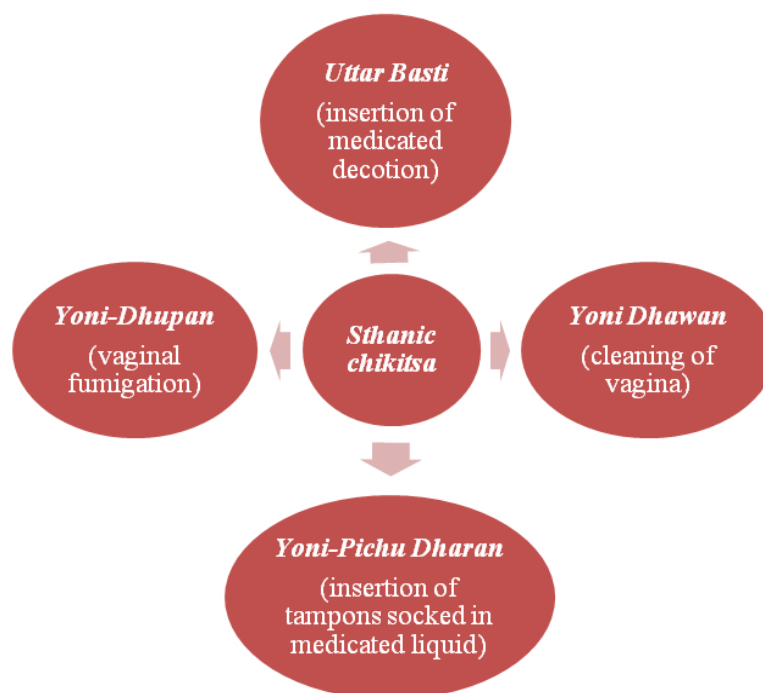


Figure 2. *Sthanic Chikitsa* for *Stree Roga*

Uttarbasti

Uttarbasti word indicates its superiority among other types of *Basti Karma*. Protocols

of *Uttarbasti* are *Poorva Karma* (pre-operative), *Pradhan karma* (operative) and *Pashchat karma* (post-operative). *Karma*

which is performed through the urethra or vagina (*Uttarmarg*) is known as *Uttarbasti*. Medicated decoctions such as oil or *Kwath* are inserted into intra uterine cavity through vagina. *Uttarbasti* helps in removal of vitiated *Doshas* from the *Garbhashaya* and thus balances the *Doshas* of female uro-genital system. Most of the activities of lower portion of body such as functioning of colon, urinary bladder, uterus, pelvis and lower limbs etc. are controlled by *Apan Vayu*, due to the *Dushta Dosha* obstruction occur in *Vata*, *Pitta*, *Kapha* & *Apan vayu* and this affects the functioning of the body thus *Uttarbasti* plays very important role in managing such types of conditions.

Indication and contraindications

Uttarbasti is a potent *Chikitsa* for *Vandhyatva* (infertility), *Shukra Dushti*, *Klaibya*, *Dhvaja-bhanga*, *Yoniroga*, *Yoni vibransha* (uterus prolapse), *Mutraghata*, *Garbhashaya Roga*, *Asrugdar* (abnormal uterine bleeding), *Artava shikara*, *Rajo-Dushti* and *Rajo-nasha* etc. It should be avoided in some cases such as vaginitis, cervicitis, sexually transmitted diseases and carcinoma of genital organs.

Time period

Rutu kala (after end of menstrual bleeding) is considered as the correct time for the administration of the *Uttarbasti* because uterus and vagina are ready to receive *Sneha* easily at this time. Before performing *Uttarbasti Karma* one should make sure to eradicate the previous infections.

Procedure

Uttar Basti Yantra consists of two parts i.e. *Bastiputaka* and *Bastinetra*. Quantity of drug introduced in *Uttarbasti* should be *Mridu* and *Laghu*. *Pushpanetra* should be 10 *Angula* in *Pramana*. In married lady, we can insert *Bastinetra* up to 4 fingers in length. After this two *Prasuta* of *Sneha* or *Kwatha* like decoctions will be used in *Uttarbasti* specifically to clean uterus. Consecutively by increasing quantity of *Sneha*, *Uttarbasti* should be performed with gradual increment of dosing. This is done for consecutive 3 menstrual cycles and in severe cases *Uttar Basti Karma* can be done for 6 days with

interval period of three days. After completing this, *Shodhana Chikitsa* should be performed on the patient. To perform *Uttar Basti* woman should be placed in supine position with elevated knees and flexed thighs. After this *Pushpanetra* should be inserted in vagina slowly and then drug is administered by pressing *Bastiputaka*. This *Karma* should be performed by an expert under aseptic conditions with all precautions. *Taila* is preferred when we want to treat the vitiated *Vata Dosha* associated with *Kapha*. *Ghritha* is preferred when *Vata* is associated with *Pitta Dosha*. To treat cervix we prefer *Shatavatri Ghritha* or *Bruihata Shatavatri Ghritha* etc. To treat problems of ovary we can use *Narayana Taila*, *Shatpuspa Taila* and for treating tubal blockage problems we can use *Apamarga Kshara Taila* & *Kumari Taila*, etc. (7-9)

3. Advantages of Uttarbasti

Uttarbasti Karma in cervical region stimulates secretion of mucus and helps in movement of sperms after receiving *Bhrimhana* drugs. Oil in combination with *Lekhaniya* drugs helps in treating dysmenorrhea and also helps in conception. When *Lekhaniya* drugs are given in intra-uterine region through *Uttarbasti* then they remove the obstruction of tube and helps in development of tubal cilia in fallopian tubes. It helps in rejuvenating the endometrium lining and balances the processes of reproductive system like ovulation. (10,11)

4. Conclusion

In *Ayurveda*, treatment is done on the basis of constitutional predominance of an individual. In light of infertility we look very closely to the reproductive system. *Ayurveda* emphasizes on both systemic and localized treatment. To treat *Vata Dosha*, *Basti* is always preferred. In modern world, due to the mismanagement in lifestyle, infertility problems are increasing. *Ayurveda* suggested *Uttarbasti* as line of treatment for *Garbhashyagat Rogas* since this approach facilitates absorption of drugs and helps to achieve target delivery of drugs to the affected organs. When *Sukoshna* (lukewarm) *Sneha* or *Kwatha* enters into the uterine cavity or urethra, *Srotas* can easily carry drugs towards the desired sites such as fallopian tubes and

cervix etc. thus this *Chikitsa* is considered as useful approach to treat disorders of genital/reproductive system.

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Conflict of Interest

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References

1. Occupational and Life Style Exposure on Female Infertility by Dr Jorgenten -The Open Reproductive Science Journal; 2008.
2. Richard M Sharpe. Life Style and environmental contribution to Male Infertility.
3. MahrshiSusruta. *SusrutaSamhita*, Chikitsasthana 37/117-118 edited with Ayurveda-TattvaSandipika, Hindi Commentary, Scientific Analysis, Notes etc.

- by Kaviraja Ambika dutta Shastri. Varanasi: Chaukhamba Sanskrit Sansthan; 2014
4. Alper M M, Gareus P R, Spence J E, Quaringtom A M. pregnancy rate after HSG in oil and water based contrast media. *ObstetGynael*; 1986.p. 68.
5. ShuklaKamayani- A comparative study of *uttarbasti* of *yavaksharataila* and *kumara taila* in tubal blockage. Postgraduate thesis, Jamnagar: Gujarat Ayurveda University; 2010.
6. *Ashtanga Sangraha*-edited with Hindi Commentary, Kaviraj Atridev Gupta (editor), Varanasi: Chaukhambha Krishnadas Academy; 2005.
7. Text book of Gynaecology, Dutta D.C.,7th Edn. Kolkata: New central Book Agency Pvt. Ltd.; 2010.
8. Dipika and Gudhartha Dipika. Shrangdhara Samhita. Commentary, Varanasi: Chaukhambha Prakashana, 2000. *J Ayu Herb Med*. May- June 2016; 2(3).
9. Gynaecology (Review Series). 3rd Edn. New Delhi: Elsevier; 2006
10. Women's Power to Heal through Inner Medicine by Maya Tiwari, Mother OM Media, 2007.
11. Kaviraj Shastri A. *Sushruta Samhita*. Edition: Reprint 2012. Varanasi: *Chaukhambha Sanskrit Sansthan*; 2012.