Case Report
Efficacy of Vamana and Garbhaprada Yoga in Female Infertility due to Anovulation-A Case Study

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Abstract
A female patient of infertility, on the basis of follicular study (USG) was diagnosed as anovulation (Anartava). Initially she was given classical Vamana Karma followed by oral administration of Garbhaprada Yoga in the dose of 6 gm twice a day with lukewarm milk before food for one month. She got pregnant after one month of this treatment. Thus combined effect of Vamana Karma and Garbhaprada Yoga was found to be effective in one patient of Vandhyatva due to Anovulation.

Keywords: Infertility, Vamana Karma, Garbhaprada Yoga, Anovulation

Introduction:
Infertility is defined as failure to conceive though having regular unprotected coitus for more than year. Since olden days the process of procreation was given importance as it is a source of all kind of happiness. Conception depends on the fertility potential of both the male and female partner. The male is directly responsible in about 30-40%, the female in about 40-50% and both are responsible in about 10% cases. The remaining 10% is unexplained. Out of four essential factors, Beeja (ovum/sperm) is important factor for the conception. Beeja is directly referred as Antapushpa (ovum) and Beejotsarga to ovulation process.

Anovulation can be considered as Nashtartava which occur due to predominantly involvement of Kapha leading to vitiation of Vata. Vamana Karma which is considered as the best line of treatment for the Kapha disorders relieves Kapha, enhances Agni and by opening the channels may help in Artava Utpatti. By considering this Vamana Karma was taken in the study. Thereafter Garbha-Sthapana drugs viz. Garbhaprada Yoga was prescribed to enhance the process of production of Beeja Rupi Artava.

Description of the Patient:
A female patient aged 29 years came with complaints of having no issue though married for three years and having uninterrupted sex. She was associated with irregular menstruation for 5 months and having H/o PCOD since 2 years and weight gain for 4 years. She took hormonal treatment and undergone for intrauterine insemination procedure 3 times without any benefit. So she came to SDM College of Ayurveda and Hospital for better management.

On the basis of follicular study (USG) patient was diagnosed as anovulation (Anartava).

Menstrual History: Menarche: at the age of 12 years, having irregular menses with 15 to 20 days duration and interval-60days with pain present during menses and clots and smell present in the menses fluid

- Contraceptive history-not used
- Sexual history-3-4/week
- No family history of consanguinity, infertility, delayed conception, diabetes mellitus, hypertension and thyroid dysfunction.

Examination of Patient:
- Weight-56.2 kg
- BP-120/70mmhg
- Pulse 82 /M
- Height-125cm, weight-56.2kg, BMI-35.8 kg/m²
- Breast examination-NAD
- P/A-soft, No tenderness, No organomegaly
- P/S-cervix healthy.
- P/V-AV/NS/FF

Investigations Report:

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>HB</td>
<td>11.8gm%</td>
</tr>
<tr>
<td>USG</td>
<td>Uterine 47*48mm Adenomyoma with B/L PCO</td>
</tr>
<tr>
<td>TSH</td>
<td>3.65 mIU/ml</td>
</tr>
<tr>
<td>FSH</td>
<td>11.3</td>
</tr>
<tr>
<td>LH</td>
<td>7.87</td>
</tr>
<tr>
<td>PROLACTIN</td>
<td>7.74 ng/ml</td>
</tr>
<tr>
<td>HSG</td>
<td>B/L tubes patent</td>
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</tbody>
</table>
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**Follicular Study (USG):**

<table>
<thead>
<tr>
<th>Day of ovulation</th>
<th>Right ovary</th>
<th>Left ovary</th>
<th>Endometrial thickness</th>
</tr>
</thead>
<tbody>
<tr>
<td>12th day</td>
<td>10mm</td>
<td>10mm</td>
<td>10mm</td>
</tr>
<tr>
<td>14th day</td>
<td>No dominant follicle</td>
<td>No dominant follicle</td>
<td>6.2mm</td>
</tr>
<tr>
<td>16th day</td>
<td>10*8mm</td>
<td>10*8mm</td>
<td>9.6mm</td>
</tr>
</tbody>
</table>

**Treatment Given:**
At the onset Panchakola Phanta was given in the dose of 50 ml twice a day before meal for 3 days for Deepana and Paachana. Thereafter internal Snehana was done by cow’s ghee administered in increment doses of 30ml, 60 ml, 90 ml and 120 ml and with it Samyak Snehana was achieved. It followed by Sarvanga Abhyanga done by Murchita Taila and Baspa-Sveda and Kapha Utikeshaka Ahara on Vishrama of one day. Vamana Karma was performed by administration of Madanaphala- Pippali, Vacha and Saindhava Yoga. Yastimadhu Phanta was used as Vamanopaga drug and Saindhava Jala was given for gargle. It caused six Vamana Vega and it followed by Samsarjana Krama of 5 days. In the last Garbhaprada Yoga was given in the dose of 6gm twice a day with lukewarm milk before food.

**Result:**
The patient got conceived with one month’s treatment and is under regular Ante Natal Check-up in SDMCA Hassan.

**Conclusion:**
The combined effect of Vamana Karma and Garbhaprada Yoga found to be effective in management of Vandhyatva due to Anovulation.

**References:**


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