



**ROLE OF SHATAPUSHPA CHURNA IN THE MANAGEMENT OF VANDHYATVA (FEMALE INFERTILITY) W.S.R. TO ANOVULATORY FACTOR – A CASE STUDY**

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**ABSTRACT**

Female-factor infertility is most commonly caused by lack of ovulation. 2 to 10% of couples worldwide are unable to conceive a child and a further of 10-25% experience secondary Infertility (WHO). The female factors for infertility are ovulatory factors (35%), Tubal factors (30%), endometrial factors (21%), uterine factors (14%). Here in this case study I selected a case of Secondary infertility having anovulation. In the modern medicine they have hormonal therapy. In *Kashyapa Samhita Shatapushpa Churna* is indicated in *Vandhyatva*. Under *Artava*; menstrual blood and Ovum are included. *Shatapushpa* helps in formation of ovum and also regulating menstrual cycle. It has been proved that it is very effective treatment modality to increase the ovulation rate and Fertility rate.

**Keywords:** Anovulation, *Shatapushpa Churna*, *Vandhyatva*, *Artava*, *Kashyapa Samhita*.

**INTRODUCTION:** Infertility-The inability of a couple to conceive after one year of unprotected intercourse. It is of two types-Primary infertility-refers to couples who have not become pregnant after at least 1 year having sex without using birth control methods and Secondary infertility-refers to couples who have been able to get pregnant at least once, but now are unable. According to *Acharya Sushruta*<sup>i</sup> four essential factors are required for healthy conception, which are proper fertile period, physiologically adequate and healthy internal organs of reproduction, the proper nourishment - to the developing zygote or fetus, the activated ovum and spermatozoa. Fulfillment of all the above essentials ensures the fullness of the

motherhood. Any short come of the above factors impedes the conception and thus the motherhood of a woman. Among them *Beeja* is the core stone of the female reproductive process and in its absence conception cannot achieve despite of all the other factors. Here the *Beeja* is taken as *Antahpushpa* i.e. ovum. So anovulation can be included under *Beeja Dushti*. *Acharya Kashyapa*<sup>ii</sup> Mentioned that *Shatapushpa* Having property like *Balya*, *Brimhaniya*, *Deepana*, *Pachana*, *Yonivishodhana*, *Rutupravartana*, *Prajasthapana* etc. as described by *Kashyapa*. Here, “*Rutupravartana*” indicates both *Artavajana* and *Beejotsarga*.

**Table no. 1.Drug review:-**

Ingredients of *Shatapushpa Churna*<sup>iii</sup> –

Drug name	Latin name	Rasa	Guna	Virya	Vipaka	Dosha karma	Pradhan karma
1. <i>Shatapushpa</i>	<i>Anethum sowa</i>	<i>Katu</i>	<i>Laghu, Tikshna</i>	<i>Ushna</i>	<i>Katu</i>	<i>Vata, Kapha</i> <i>Shamaka</i>	<i>Balya,,Agni deepan, Yonivishodhana</i>

Table no 2.Treatment Protocol:

Drug	Route	Dose	Duration	Time
<i>Shatapushpa Churna</i>	Oral	3 gm twice a day with <i>Go-Ghrita</i>	For one month(30days) After cessation of menses	Before meal (At morning & evening)

**CASE STUDY:** A 26 year old married woman visited the Prasutitantra and Streeroga O.P.D. of I.P.G.T. & R.A., Jamnagar for Ayurvedic treatment on 28/02/2018, with the complaints of failure to conceive since 2 years. She has a history of one Abortion before 2 years and has a live female child of 4 years. She has regular menstruation. Her prolactin level was normal (7.24ng/ml). She was a second gravida with LMP 23/02/2018, I prescribed *Shatapushpa Churna* on 3/3/2018 after cessation of menstruation. First for 3 days I gave *Deepana Pachana* with *Aampachana Vati* 2 tab bid with Luke warm water, for *Anuloman Eranda Bhrista Haritaki* 5 gm at night with luke warm water was administered from 6th day of

menses. Then after started *Shatapushpa Churna* 3gms bid orally with the *Anupana* of *Go-Ghrita* for one month (30days). During the course of treatment we suggest ultrasonography for ovulatory study on 11<sup>th</sup>, 13<sup>th</sup> and 15<sup>th</sup> days of menses to see the size of follicle. TVS shows the size of follicle on 11th day 18\*18mm, on 13<sup>th</sup> day 20\*18mm, on 15<sup>th</sup> day ovulations done. After that she had no menses in next cycle, so on 3/4/2018 We advised Urine pregnancy test (upt) in PTSR OPD and the test was positive .

**Method of Churna Preparation:**

*Shatapushpa Beeja* was purchased from Local market of Jamnagar. *Churna* was Prepared & packed in Air tight container.

Table no 3. Investigations

<b>HB , BgRh</b>	13.0gm% , A positive
<b>TLC</b>	7,000/cumm
<b>ESR</b>	36 mm/hr
<b>HIV,HbsAg,VDRL,HCV</b>	Negative
<b>URINE ROUTINE AND MICROSCOPIC</b>	NAD
<b>S.TRYGLYCERIDE</b>	57mg/dl
<b>S.HDL</b>	47mg/dl
<b>S.VLDL</b>	11mg/dl
<b>FBS</b>	64mg/dl

**PROBABLE MODE OF ACTION OF SHATAPUSHPA CHURNA:**

According to *Rasapanchaka* of *Shatapushpa*, it is *Kapha-Vatashamaka*, *Apananulomaka*, and *Rasadhatu*

*Vridhikara* . Due to these Properties, *Shatapushpa* digest the *Mala (Ama)* & will help in its proper functioning. By the *Ushna Veerya* and *Laghu Tikshna Guna* it clears the *Srotosanga* and stimulates the *Srotas* thus making the proper function of *Artavagni* by which menstrual cycle regulated and ovulation occurs.

**RESULT:** After starting *Shatapushpa Churna* on 9<sup>th</sup> day of menses, we did Trans vaginal sonography on 11<sup>th</sup> day of menses the size of follicle 18\*18mm, on 13<sup>th</sup> day - 20\*18mm, and on 15<sup>th</sup> day ovulation occurs. After ovulation we advised to the patient for coitus on 15<sup>th</sup> to 20<sup>th</sup> day (5days). She has no menses in next cycle (on 23/03/18), then she was advised UPT on 03/04/2018 and the test was positive that means she had conceived.

**DISCUSSION:** According to *Acharya Kashyapa Beeja* is taken as *Antahpushpa* i.e. ovum. So, anovulation can be included under *Beejadushti*. *Shatapushpa* improves *Dhatvaagni* and Clears *Srotosanga*, *Avarana* And helps to improve pelvic

pathology. *Shatapushpa* helps to increase the size of follicle by *Madhura*, *Balya*, *Laghu* and *Tikshna Guna*, *Katu Vipaka*. By all these properties of *Shatapushpa Churna*, the *Size* of follicle were increased, ovulation occurs and conception achieved.

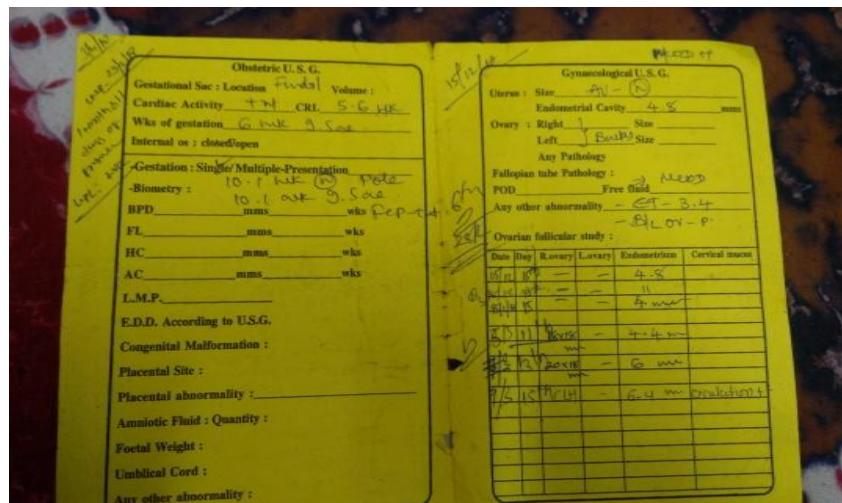
**CONCLUSION:** We can Conclude that Ayurvedic treatment is better for *Vandhyatva* and Anovulation . In modern Science there is only Hormonal Therapy which has more side effects than benefit. *Shatapushpa* is easily available in Market, not much Expensive. *Vata* is governing factor of the whole reproductive physiology. Therefore any vitiation in *Vata* will certainly affect the ovulation. *Shatapushpa* Acts on *Apama Vayu* and Normalize the Pathology and remove the *Sanga* and *Avarana* and improve the size of follicle.

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#### Photo no 1



**Photo no 2**



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