

Uttarbasti of Apamarga Kshara Taila with Dasmul Taila in the Management of Tubal Blockage

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Abstract- Infertility is a threat to the adult woman in her fertile period, it's a condition where the woman fails to achieve a pregnancy after 12 months or more of regular unprotected sexual intercourse. Woman's health is considered a major role in family, society and culture. Female infertility can be due to variety of causes such as ovarian, tubal, uterine, cervical and vaginal factors. Tubal factor responsible for infertility is the second most contributing factor after anovulation in about 35% of cases. According to Ayurveda, fallopian tubes are the part of Artavavaha srotas. These are the structures responsible to carry the Beejrup Artava, that is the Ovum. Tubal blockage is mainly due to vitiation of Vata and kapha dominant Tridoshaja condition. Uttarbasti enhance the fertility rate by normalizing the vata dosha in Yoni. Present case series includes eight diagnosed cases of infertility due to tubal blockage. In these cases, HSG was used as a diagnostic tool before and after the procedure of Uttarbasti given with Apamarga kshara Taila 2ml with Dasmul oil 3ml. Here, all eight patients reported tubal blockage either unilateral or bilateral before treatment and after two cycles, in which there were eight sitting of therapy, significant result were found in HSG image. It can be used as standard treatment for infertility due to Tubal blockage. During follow up of patients, no any type of complication was detected.

INTRODUCTION

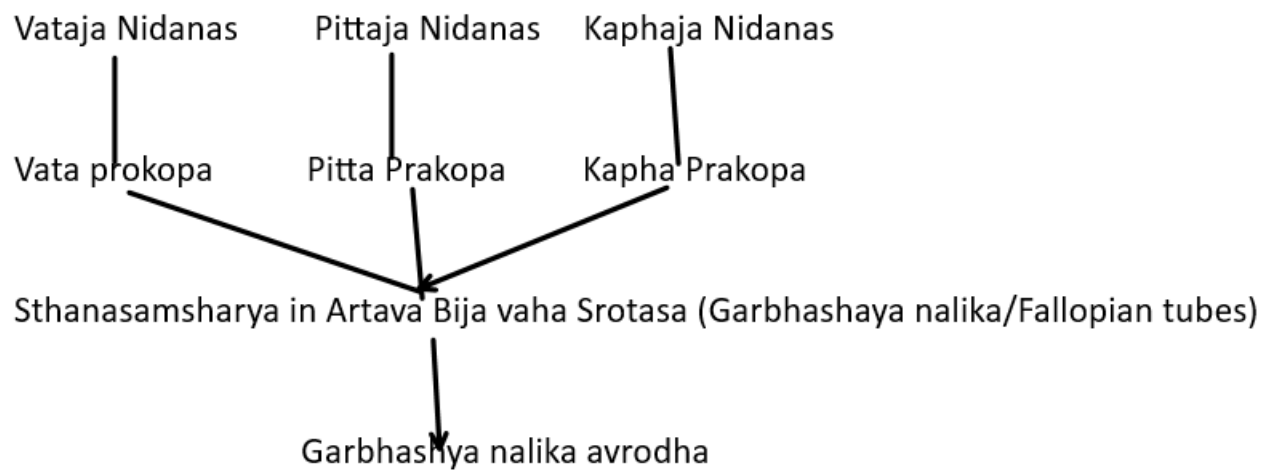
Infertility is defined as failure to conceive within one or more year of unprotected coitus. Female infertility can be due to variety of causes such as ovarian, tubal, uterine, cervical and vaginal factors. Tubal factor is second most responsible factor for infertility.¹ In Ayurvedic texts, the inability to reproduce is defined as Bandhyatva. Acharya Sushruta describe Bandhyatva under Yonivyapada in Uttartantra.² The word Yoni in classics refers to complete female

reproductive system. Acharya Sushruta explained that shape of Yoni like Shankha nabhi and contains three Avrata. Garbhashaya is in the third Avrata.³ According to this description Yoni suggests the total genital path. In this, fallopian tubes are also included as a part of Yoni (reproductive system). In Rituchakra, Tridosha phase of menstruation (Vata dosha in Rajakala, Pitta dosha in Rituvyatit Kala and Kapha Dosha in Ritukala)⁶. According to Acharya Sushruta, four factors responsible for conception are Ritu (appropriate period for conception), Kshetra (site for conception), Ambu (nourishment for conceived foetus) and Beej (healthy sperm and ovum).⁴ Kshetra is a broad term and includes all the structures of female reproductive system whose structural and functional integrity is essential for conception. Fallopian tubes being a part of the uterus itself are definitely the component of Kshetra. So, fallopian tubes (kshetra) must be patent for conception. Organs or bodily structures must be under the umbrella of any one of the Srotas. An attempt has been made to understand the fallopian tubes as Artavavaha Srotas. Artavavaha Srotas are two in number having roots in the Garbhashaya and Artavavahi Dhamnis, injury to which causes Bandhyatva (Infertility), Maithunasahishunta (Dyspareunia) and Artavanasha (Anovulation or Amenorrhoea).⁵ Artavavaha srotas is quite appropriate to compare with the fallopian tubes because these are the structures responsible to carry the Beejrup Artava, that is the Ovum. During Ritukala dominance of Kapha dosha occurs. Because of Kapha, Sthira guna tubal blockage (Avrodha) occurs in proliferative phase physiologically and Cilia activity is also hampered during Kapha Pradhana Awastha of menstrual cycle. In estrogenic phase of menstrual

cycle, Copius discharge is secreted by estrogen. This copius discharge may cause mucus plugs in fallopian tubes and physiologically block the fallopian tubes. According to modern, estrogen activates the alpha-adrenergic receptors, reducing transisthamic flow, whereas beta-adrenergic receptor stimulation by Progesterone increases transisthamic flow. Hence, Stimulate the outer layer of the uterotubular junction

during the phase of estrogenic dominance can cause muscle spasm, while the inhibitory response of progesterone after ovulation may relax the tubal musculature. Correlating fallopian tubes Artavavaha(Artava-bija-vaha) with Srotas, the its blockage is compared with Sanga Srotodushti of this Srotas.

Pathogenesis of tubal block according to Ayurveda:



AIM AND OBJECTIVE

- 1) Evaluation of Apamarga Kshara Taila with Dashmul Taila Uttarbasti in management of Tubal blockage.
- 2) A study of complications, during and after therapy.

MATERIALS AND METHODS

Patients visited the OPD with complaint of failure to conceive, then patients were examined and all routine investigations, USG TVS and HSG were advised. With the help of HSG Image diagnosis was confirmed. Patients having tubal blockage, either unilateral or bilateral were included for these cases. An informed and written consent was taken from each patient before starting the Uttarbasti.

INCLUSION CRITERIA

- 1) Married females of child bearing age (21-35 years).
- 2) Patients diagnosed with infertility due to tubal blockage

3) Patients having primary and secondary infertility were included.

EXCLUSION CRITERIA

- 1) Patients suffering from Hypertension, Diabetes, Heart disease.
- 2) Patient having any urogenital infections.
- 3) Positive for Hepatitis B, HCV, VDRL or any sexually transmitted diseases.
- 4) Abnormal (benign or malignant) growth of reproductive organs.
- 5) Patients having congenital anomalies of uterus.

Dose of medicine- Apamarga Kshara Taila 2ml and Dashmul Taila 3ml.

Route of administration- Intra uterine

Procedure – After cessation of menses, Uttarbasti was given for 4 days after cessation of menses for two consecutive cycles.

Procedure is mainly divided into three parts: -

1) Purva Karma – Milk with one teaspoon goghrit given at night before Uttarbasti administration for clearance of bowel. Abhyanga (Snehana) with Dashmul Taila for 15 min. and nadi swedan on perineal and lower abdomen area with Dashmul Kwath for 15 min. 2) Pradhana Karma- with all the aseptic measures, patient was kept in lithotomy position. Vulva, thigh and vaginal canal was clean with betadine solution. The Cusco's speculum was used to visualize the cervix. Uterine sound passed through the cervix to know the position and length of uterus. After that os was dilated with Hegar's dilators up to no. 8 to 10 size. The lubricated feeding tube of uterine end passed in the direction of uterus just to cross the internal os and 5 ml of Taila was injected gently with the disposable syringe of 5 ml from the other side of feeding tube. The Cusco's speculum was removed. A sterile pichu was kept. 3) Pashachat karma- Patient was asked to lie in the head low position for 15 minutes, then to lie on her.

RESULTS

In these cases, HSG was used as diagnostic tool and to assess the result after therapy. Here, all eight patients reported a good result of Uttarbasti therapy in two cycles in which there is eight sittings. In these cases, very encouraging results were noted. During follow up of patients, no any type of complaint was reported.

DISCUSSION

Fallopian tubes are very important structure of Artavavaha srotasa, as they carry Bija rupa Artava. Thus, Fallopian tubes can be termed as Artava Bija vaha srotasa. Tubal blockage is due to Vata Kapha pradhana Tridoshaja condition. The drugs assumed as effective to open the fallopian tubes were considered to have vata kapha shamaka, lekhan properties of Apamarga kshara taila and Kshara removes unhealthy tissues and help in growth of healthy tissues. Dashmul taila has vata shamaka and balaya properties. Tila Taila was used as base in both Tailas. Tila Taila has antiinflammatory action due to its Varna shodhana and Garbhashaya shodhana.¹⁰ Due to its vyavayi and sukshma guna it spreads in minute channels and spread easily. So, Apamarga Kshara Taila with Dashmul Taila were selected for removal of Tubal blockage. Dashmul Taila is used for reducing complications related with kshara tikshanaguna because of dillution. Uttarbasti

enhance the fertility rate by normalizing the vata dosha in yoni.

CONCLUSION

Tubal blockage can be correlated with Artava vaha Srotas dusti mainly Sanga. Uttarbasti given with drugs Apamarga Kshara Taila and Dashmul Taila is safe, reliable and effective in management of Tubal blockage. Ayurveda can provide hope in such cases as by following classical method of management fruitful results can be obtained.

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