A MEDICO HISTORICAL AND CONCEPTUAL STUDY ON VANDHYATVA

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ABSTRACT

Vandhyatva (infertility) has been a long-standing problem since ancient times. Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus. According to WHO, positive reproductive health of a woman is a state of complete physical, mental and social wellbeing and not merely absence of disease related to reproductive system and functions. In about 10% of cases, the infertility investigation will show no abnormalities. In these cases, abnormalities are likely to be present but not detected by current methods. Possible problems could be that the egg is not released at the optimum time for fertilization, which it may not enter the fallopian tube, sperm may not be able to reach the egg, fertilization may fail to occur, transport of the zygote may be disturbed, or implantation fails.

As per Ayurveda, important factors for conception are considered as Rutu (fertile period), Kshetra (uterus and reproductive organs), Ambu (proper nutrient fluid) and Bija (shukra-sonital and also normalcy of Hrudaya (Psychology). Abnormality of properly functioning Vayu and Shadbhavas (mātruja, pitruja, aatmaja, satvaja, satmyaja and Rasaaja), anyone of these causes infertility (vandhyatva). From the time immemorial the phenomenon of infertility was prevalent throughout the world and this may persist till the human race exists. Every human being has inherent, intense desire to continue his own race; to become a mother is one of the most cherished desires of every woman. Failure to achieve conception by a couple of mature age, having normal coitus during appropriate period of menstrual cycle regularly, at least for one year of their conjugal is termed as infertility. The historical importance of stree vandhyatva and a comparative study regarding its Njdana, Samprapti, Lakshana, Chikitsa etc compiled from various Granthas are being presented in this paper.

As per Ayurveda, Rasayana drugs modulates neuro-endocrino-immunae system. Vajikarana Rasayana is the special category of Rasayana, which improve the reproductive system and enhance sexual function. Vajikarana also claims to have anti stress, adaptogenic actions to alleviate anxiety associated with sexual desire and performance. Some of the formulations are, Bruhani Gutika, Vrushya Gutika, Vajikaranam Ghrutam, Apatyakari ShashtiKadi Gutika etc.

KEYWORDS: Infertility, Rasayana, Vajikarana
INTRODUCTION

Infertility (Vandhyatva) has been a long-standing problem since ancient periods. Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus. According to WHO, positive reproductive health of a woman is a state of complete physical, mental and social wellbeing and not merely absence of disease related to reproductive system and functions. It is observed that 50% of normal couples achieve conception within three months of regular unprotected intercourse, 75% in six months and 80-85% conceive within a year. Infertility is termed primary if conception has never occurred and secondary if the patient fails to conceive after having achieved a previous conception. The incidence of infertility in any community varies between 5 and 15%. There are two types of infertility, primary and secondary. 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 as couples who have been able to get pregnant at least once, but are now unable. Infertility is a common problem now a days and becoming a distressful condition. In Ayurveda Vandhyatva has been explained equivalent to infertility. The principle cause of Vandhyatva is imbalance in Aartavahastrotas.

Infertility is defined as inability to conceive even after one year under normal marital relation without contraception. In Ayurveda, this condition is considered as Vandhyatva. It is a Universal phenomenon occurring both in developing and under developing countries.

The incidence of primary infertility is about 50% among females, while it is 25% among males, male and female factors together account for another 25%. Besides genetic factors, changed life style, increased stress, strain and environmental pollution are identified as factors contributing to the rising rate of infertility.

The Phenomenon of infertility as a Social Stigma in patrarchial Society, the female partner is generally blamed, she becomes the victim of social gossip for her barrenness. This in turn leads to unhappiness, psychosomatic ill health, as a result in marital disharmony.

Charaka exquisitely describes the position of infertile couple in the Society, while describing Vajikarana therapy (Cha.Chi. 2/16-19).

Harita has defined, Vandhyatva as failure to achieve a child rather than pregnancy because, he has included Garbhasravai and Mrutvatasa under the classification of Vandhya. Charaka and Vagbhatha have referred Vandhya as the result of Pradushta Garbhashaya Bijja Bhaga of shonitas (Ca.SaA/30), (A.S.2/48). Sushrutas, Madhavkara, Bhavamishra have quoted Vandhya in Vimsati Yoni Vyapat (Su.Ut.38/10, Ma.Ni.62/3, Bhii.Pra.Chi.70/6). Kashyapa mentions Vandhyatva as one of the 80 disorders of Vata (Ka.Sam.Su.27).

Regarding the historical importance of Stree vandhyatva and a comparative study regarding its Nidana, Samprapti, Lakshanas, Chikitsa etc are compiled from Vedas, Puranas, Holy Bible, Charaka, Sushrutas, Ashtang sangrahahas, Ashtang Hrudayas, Madhav Nidana; Bhava Prakasha, Yoga Ratnakara, Kashyapa Samhita, Harita Samhita, Blh Samhita, Basava Rajiyam and Rosa Ratna Samuskhaya.

Vedas: The Vedas considered as the most earliest of the literature available, explain about infertility. In Rugvedas, there is a clear description about the Krumis like Durnama, which destroys Garbhashaya (Uterus) (10/162/2) leading to infertility in woman. Yajurvedas also makes a reference of Garbhadharana Vidhi (Yajur 8/29), in Atharvavedas, a more detailed description is available (Atharvaveda 5/25/1 0-13) i.e. Yoni, Bijia, Virya, Garbha and such other elements together with their role in conception are being thoroughly discussed while discussing the structure of female reproductive organs, it also describes the method of fertilization in Gavani, which can be considered as fallopian tube. (Atharvavedas5/25/10-13). It also mentions the implantation and growth of the foetus in utero ( Atharvaveda 5/25/9), it is important to note that. Atharvavedas mentioned about several Krimis like Vatsapa (Atharvaveda. 8/6/1) Durnamas (Atharvaveda 2/52/2) and Kranava (Atharvaveds 2/25/3), which destroy the foetus and cause infertility in the female. It also suggests the herbs like Prsnparni (Atharvaveda 2/25/2-3) and Shwet Sarsapa (Athar 8/6/6) to control the Krumis and treating Mrutvatsa (repeated still births) and Vandhyatva effectively. Herbs like Ugragandha and two types of Sersapa are mentioned for the protection of foetus.
**Holy Bible:** Clear cut references are available regarding *Stree Vandhyatva* in Holy Bible, they are 'Shara' wife of 'Abraham' suffered from infertility (*Vandhyatva*) till the age of 90 years (Genesis: 16: 1. 17: 17), and also Elizabeth wife of 'Jckhariah ' was entitled barren i.e. *Vandhyatva* (Luke 1 : 7), wife of 'Manoha' also suffered from infertility (Judges 13: 2,3) and also 'Hanna' wife of 'Elkana' is another woman is not conceived and suffered a lot with infertility (I Samuel I :2,6 and II).

**Holy Khuran:** There is also description available in Holy Khuran about *vandhyatva*. Jakaria called his lord and said “oh my lord give me from yourself pure offspring. Then the angels called him, no doubt ‘Allah’ gives you glad tiding of ‘Yahya’ who shall confirm a word from ‘Allah’. Jakaria said ‘oh my lord from where shall I have a son, while old age has reached me and wife is barren (Sura-3 (Al-lug) A-Lay Imran. Section 4/38-40). It means Jakaria wife was barren and she has no offspring. Jakaria feared that. his wife 'Maryam' is barren who will look after him and his work (S. al. Maryam19- (AI-J ug) 16.section I verse 6).

**Srimad Bhagavat:** In Dwarka a Brahmin was there, whose wife delivered 9 stillborn babies, at that period she has been treated as *Vandhya*. Same time *Arjuna* was promised to the Brahmin couple that, he will protect their son, but lastly he was unable to protect their son. Ref. (2ml part *Dashama Skanda Arjuna Pratijna*).

There is a verse in *Ekadasa Skanda of Vaikutngamanam* that, *Arjuna* has done the *Pindodakadi karma* to died person who has no progeny. It means there were infertile couples in those days

**Charaka:** Acharya Charaka has described the effect of infertility. He says that the man with progeny was praised, while man without progeny was disregarded by the society. (Cha.Chi 2/16-19). He further describes that *Vandhyatva* is caused by the *Pradusha Garbhashaya Bila Bhaga of sonita* (Abnormal Bila of mother) (Ca. Sa. 4/30) and is one of the complications of untreated Yoni Vyepts (Ca.Ci.30/31).

In its Mahati Garbhavakraarti Sariradhikiila 4th chapter *Vandhya* has been described failure to achieve conception is infertility. While describing *Nidana* for *Vandhyatva*, the important factors are constituents of *Garbha* included *rutu*, *Kshetra*, *Ambu*, *Bija*, normalcy of *Hrudaya* or Psychology, Properly functioning *Vayu* and *Sadhbhves*, abnormality in one of these can cause infertility. Abnormality of *Yoni*, psychology, *sukra*, *Asrk*, diet and mode of life, coitus at improper time and loss of *Bala* have been included, in the causes of delay in achieving conception by an otherwise fertile or *Sapraja* woman by *Charaka*. The woman suffering from diseases of Vata it copulates with husband, than also she does not conceive. Normally of psychology has given highest importance for achieving conception.

1. Abnormalities of *rutu* (Season or fertile period)
2. Abnormalities of *Kshetra* - *Yoni* and *Garbhashaya* are considered under *Kshetra*, coitus in *Kubja* (hump back) or Lateral posture (Ca.Sa-8/6)

In abnormalities of *Ambu* - *Bala Ksaya* is described under the cause of infertility (Cha.sa.217)

*Charaka* directly quotes the *Vandhyatva* is the result of *Pradustha Garbhasaya Bila Bhaga of sonita* and *sukrashaya Bija Bhaga of sukra* of females and males (Cha. Sa. 4/30,31).

The women suffering from *Vata* if copulates with husband, then also she does not conceive. (Cha. Siddhi. 1134).

*Charaka* also describes the causes separately for Ajanma of Garbha (not achieving conception), *Vinasa* or *ciraskala Jata Garbha* (death of foetus or delayed birth of foetus), *Vikrts Garbha* (birth of abnormal child) and *Sapraja* (not achieving conception even after a successful pregnancy).

Due to abnormality in Matrujadi, Shadhhavas, conception does not occur, along with these, the abnormalities of Aahara Sosatwa, Kala and Swabhava cause *Vinasha* or *Chirakala Jata of Garbha*. Due to the vitiations of Doses in mother when the *Artava* and *Garbhasaya* are slightly vitiations, there is a chance of conception, but the child will be born with congenital anomalies. Due to *Yoni Pradosha, Manobhigata, shukra aartava, Ahara – Vihar dosha, Akala Samyoga* and *Balakshaya* the conception may be delayed in a woman with a successful pregnancy. *Charaka* describes 4 symptoms: *are Ajanma Garbha, Vinasha or Chirakala Jata Garbha, Vikruta Garbha and Sapraja*; and also *Vandhyatva* can be classified 3 types *Vandhyd, Apraja* and *Sapraja*.
**Vandhya:** It is due to congenital absence of uterus or Aartava. Chakrapani explains "Vandhya refers to incurable congenital or acquired abnormalities, resulting into absolute sterility" (Ca. Sa. 2/5 Chakrapani's Commentary).

**Apraja:** Infertility in which woman conceived after treatment or primary infertility.

**Sapraja:** It is a condition in which a woman in her active reproductive age does not conceive after giving birth to one or more children or it refers to secondary infertility.

For the treatment Charaka has mentioned, the use of enema is highly beneficial (Cha. Sid. 1134), infertility gets cured by use of purgation. Shatavaryadi Anuvasana basti is useful for the woman having repeated still births (Cha. Ci. 25/15), Jivantyadi yamaka mentioned as Putriya (Cha. Sid. 5/9-11), Use of Jivinya Garbha Sthapana group of drugs are also beneficial (Cha. Suo 4/18), shatavari or shatavari ghruta in the dose of one Karsha gives male child (Cha. Ci. 30/52) & Ghruta prepared with Jivinya group of drugs give female child (Cha. Ci.30/69). Vandhyatva, which occurs due to the abnormality of both the partners are able to conceive after treating with Anuvasana Basti (Cha Si.4/24).

**Sushrut Samhita:** Sushruta has quoted Vandhya in Vimsati Yoni Vyapats. Infertility has been included in the clinical features of injury to Aartavavaha Strotas -(SuSa.9/12). Sushruta has mentioned causative factors like Charaka and other authors, and he also has said that, the conception would not occur due to destruction of Aartava, which is a complication of Yonyarshas (Su.Ni 2/17). Sushrutha while describing Bija; Bija implies the meaning of Shukra and Aartava, vitiated shukra and Aartava by Vatadi doshas, causes infertility.(SuSa.2/5).

He also included Vandha under Vatoda Yonivyapadadas of which the characteristic feature is "vandhvam Nashtartavam Vidyat", The word aartava means Stree Bija (ovum) or Rajahstrava (Menstrual Blood). So the word Nastartava may represent the absence of either ovum or menstrual Blood. Here it is apt to consider arthava as an ovum as it becomes the prime factor in achieving conception.

While describing the types of Vandha and Prognosis: Sushruta followed Harita, Charaka and other authors. Regarding Chikitsa, he indicates both shodhana and shamana therapies in the treatment of Yoni Vyapata. After Snehana and Swedana, Panchakarma i.e. vamana. Virechana, Anuvasan- Asthapan Basti, Raktabhokshanam and Nasva. IS done by Mrudu Dravyas, according to the vitiation of Dosha. (Su.Vi.38/21).

The drugs prescribed for Punsavana Karma can also be used for treating infertility (SuSa 2/32 Dalhana Commentary). The infertile woman should be given Basti with shatapaka Tail, after Snehan, Swedana etc (Su.Chi.38/89).

The infertile women undergone cleansing procedures should be given Basti of Bala taila prescribed under Mudhagarbha - (Su.Chi 15/15). Bala Taila is beneficial in woman desiring pregnancy. (Su.chi. 15/29).

**Ashtang Sangraha:** Vagbhata has referred Vandhyatva. It occurs due to abnormality of Bijansha (A. S. ,5dr. 2/48), and also mentioned that, abnormalities of Kshetra, woman suffering from Yonivyapada, never conceive and untreated Yoni Vydpada ultimately results in Vandhyatva (A. S Ut. (38/53). Putraghni & Jatagni Yoni Vyapada cause Vandhyatva.

Regarding treatment Vagbhata mentioned that, the causes of gynaecological disorders should be treated. including injury to the uterus or its prolapse. diseases of Shukra, Aartava, Yonivyashra etc. He has mentioned that, pregnancy occurs only in healthy reproductive organs (A.S Ut. 39/79), he also followed Charaka and other authors.

**Sahacharadi Taila** (A.S Kal. 5/24) or **Mustadi Taila** (A.S.Kal. 4111) is beneficial in woman having repeated stillbirths. Bala Taila is beneficial in Vandhyatva - (A.S. Sa. 41 51). Oral use of Phala Ghruta during Rutu kala results achievement of pregnancy (A.S.Ut. 39/81 )

**Ashtang Hrudaya:** Vagbhata considers healthy Garbhashaya Marg (Vaginal canal) Aartava (Ovum) and shukra (Sperm), properly functioning Vayu and normal psychological status (happy mood) as essential factors for conception (A.H. Siir. 1/89). To cure Vata. Vatahara Karma are adopted, particularly Snehana, Swedana, Basti etc (A.RUt. 34/22).

In treatment aspect, he followed Charaka, Sushruta and Ashtang Sangraha etc. use of Lakshmana or eight leaf buds of vata with Milk prescribed under Punsavana is also beneficial for vandhya (A.H. sa. 1/41-42), it is also opined by Arunadatta. the same treatment can helpful for the woman having repeated abortions or children with short life (A.H.Sar. 1/41,42).
**Madhav Nidana:** Madhavakara included the Vandhya in Vimsati yoni vyapata (Mii. Ni. 63/3). "Vandhyam Nastartavam --" loss of Aartava without pregnancy is known as Vandhya.

**Bhavprakasha:** Bhavprakasha followed Madhavakara, he also included Vandhya among Vimsati yoni Vyapada (Bh. P1. Chi. 70/6), Bhavmishra describes Vandhya under Vataja Yonivyapada of which characteristic feature is "Vandhyam Nastartavam vidyat ",

Bhavmishra denotes the cause of vandhyatva is. "Semen falling on the ' Samirana Nadi'"(Bh. Pr. Pu. Garb 3/18) and for other causes he followed Charaka & Vagbhata etc. Bhavmishra followed Ashtang sanranga and Ashtang Hrudaya regarding use of Phala Ghruta during menstruation in achieving pregnancy and this also increases progeny (Bh. ProChi. 70/45-47 to 61).

**Kashyapa Samhita:** Kashyapa mentions vandhyatva as one of the eighty disorders of Vata (Ka.Sam.Su. 28/6). He says that, the couple having number of children with proper growth and development due to effect of nature or their own deeds are fortunate, other wise (having failed to achieve pregnancy) should be treated (Ka .Sam.Sar.5/3). Under the description of Jataharnini, Kashyapa has mentioned one Pushapaghi having useless Pushpa or menstruation (no conception)" and certain other characterized with repeated expulsions of fetus of different gestational periods, since in these condition also the woman fails to get a child, thus it can also be included under infertility (Ka. Sam. Kha. 6/33).

The causes of infertility, are mentioned like Charaka; especially mentions abnormality in Shadbhava will cause the infertility (Ka. Sam. Sa.5/5).

Excessive Medication for Vamana. virechana to a person of Mrudu Koshta, even after proper Snehana and Svedana causes bleeding, resulting in the vitiation of Vayu, this aggravated Vayu causes destruction of Bijja and Pushpa, in such conditions infertility always develops (Ka.Sa.Si.3).

The available portion of Kashyapa Samhita presents a unique chapter in its Kalpa Sthana named Revati Kalpadhyyaya. In this chapter, thirty different types of Revatis (Jata harini) producing various abnormalities by affecting the woman during her various stages i.e. menstruation, pregnancy etc. are described. These are considered as causative factors (Ka. Sam. KS.Revati Ka/pa 33,34). Pushpaghni, Andaghni, Durdara, Kalratri), and jataharini are curable.

Vandhyatva cured by Virechana (Ka.Sa.Chi-Z). Anuvasana Basti is advocated to an infertile woman having Nashtha pushpa, Alpa Pushpa, Nashta Bijja and Akarmanya Bijja (Ka. Sam. Si.7). Vandhya conceives by use of this Basti as the Yoni becomes healthy. This Basti is beneficial to the woman having repeated abortions, short lived and weak children, or delicate and who indulge in coitus daily (Ka. Sam. Si.1). Kashyapa says that, after using Shodhana both should be prescribed congenial diet (Ka. Sam. Jati /3).

Shatapursha Taila in the form of nasya, massage or enema is beneficial and using Lasuna Taila or Ghruta is also beneficial (Ka. Sam.7/23). Lasuna will be Pathya to the infertile woman or white Adrikarni (Girikarni) with milk. Use of this to an infertile woman, provides a son possessing all the qualities.

**Harit Samhita:** As per Harit Samhita Vandhya is described as a Separate entity. Harit has defined Vandhyatva as, failure to achieve a child rather than pregnancy because; he has included Garbhastravi and Mrtavastha under the classification of Vandhya. The causative factors of Vandhyatva, he followed Charaka and other authors. Harit while giving the classification, he included child hood under Vandhya (Ha. Sam. yJ 48/1). As the period of rutukala does not exist in child hood, the question of fertility does not arise.

In abnormalities of Rtu, coitus after end of Rutukala is a causative factor for Vandhyatva. Other than the Rutukala, the conception is not possible, because the acceptance of Bijja does not occur. While discussing abnormalities of Kshetra, he says that, constriction of uterus and vulva due to the coitus done with the girl before menarche also causes infertility (Ha. Sam.3rd , 5 1h _ 48/1 ,2). In abnormalities of Ambu, Harit mentioned Dhatu Kshaya (Ha. Sam.48/1) is one of the causes for infertility.

Classification of Vandhya as per Harit Samhita, Kak Vandhya, Anapatyata, Garbha Strava, Mrutvatsa, Dhatukshaya and Garbha Kosh Bhanga (Hs. Sam 3rd Sth- .48/ 1-6). Except Kak Vandhya all are curable; and Infertility of woman who has coitus before her menarche gets cured with difficulty.
The following are the treatment for Vandhyatva (Ha. Sam. Tru. 58/25), Oral uses of powdered Chandana, Ushira, Manjishtha, Girikarni and sugar churned with milk results in achievement of conception. (Ha. Sam. Tru. 58/12). After relief from menstrual disorders due to Vata, powdered or pestled shweta Girikarni, shweta gunja and shweta Punarnava should be used with milk for one month, result in achievement of pregnancy. (Ha. Sam. Tru. 58/13). After relief from menstrual disorders due to Pitta, the woman should use root of the Arka, or Shweta Giri Karnika; once menstrual disorders due to Kapha are cured by oral use of Triphala, Giri Karni, Aaragvadha, Vatsaka and Payasa with milk makes the woman fertile (Ha. Sam. Tru. 58/23). Use of Baladya, Chandanadya, Drakashadya, Khandakadya and Punarnavadya powders are beneficial for achievement of conception (Ha. Sam. 58/24-25).

**Bhel Samhita**: Bhel says that, Vandhyatva occurs due to abnormalities of Bija in female and male, non consumption of congenial Rasa, Suppression of natural urges and disorders of Yoni (Har. Sam. Sa.312-5).

The woman either delivers abnormal child or become infertile is known as Vandhya. He further mentions that, causes of failure to become pregnant are only two i.e. affected with various diseases of Vata and abnormalities of Yoni(reproductive organs) (Bhe. Sam. Sa.2). Aggravated Vayu expells the Shukra (Sperm) from the uterus, destroys the Rajah (Ovum), thus the woman becomes infertile. No male or female is infertile by birth, due to coldness of Ashaya (Garbhasaya) or uterus) and dryness of Indriya, the infertility occurs. (Bhe. Sam. Su.16).

**Niruhabasti** like a nectar to infertile women (Bhe. Si.6/24). GuduchyadiRasayana Basti is beneficial for the infertile women (Bhe. Si.8/39).

**Basava Rajiyam** (Bas. Raj Vandhya Prakaranam): In Basava Rajiyam, Vandhyatva is described as a separate entity, he mentioned the causes for Vandhyatva in female as Ashta Dosa, Striyaha..e. Vataja, Pittaja, Raktaja, Sannipataja, Abhicharaja, Daiuja, and Grahadosha.

Classification of Vandhya according to Basava Rajiyam is as follows:

- Janma Vandhya, Mrut Vandhya, Kak Vandhya and Kadalivandhya. Janma Vandhya means not even one conception, Mrut Vandhya is Delivered child but not alive, having two children is called as Kak Vandhya and Kadalivandhya means having one child.

**Kalyana Ghrutam** is beneficial in Vandhya. For Kaka Vandhya Vishnu Kantha Yogam is prescribed. Maha Drakshadi Churnam and Maha Manjishtadi Churnam are useful in Vandhya and also Lajjalu Yogam in Garbhapatha, Utpaladi Yoga in Garbha Strava is useful.


Vandhya has been again classified as 1. Garbha Stravi (repeated abortion), 2. Mrutvatsa (Still born), 3. Stri Prasuti (Who delivered female baby) and 4. Kak Vandhya (Who delivered one child) (R.R.S. 22/4). In Vandhya Jaya Sundara Rasa is beneficial (RRS22/5-14), Devadali Prayoga, Sharapunkha Yogam, Rudrakshadi Prayogam,Shwetakantakari, Vishnukanta Prayoga (RR 22/15-57) are also beneficial. Ashwagandha is beneficial in Kak Vandhya (RRS 22/58). He has mentioned Mrutvatsa (child dies immediately after delivery or with in 15 days or in one month of 2 to 3 years is known as Mrutvatsa), for this Daiva Vyapashraya chikitsa is prescribed. Vandhya Karkotaki Prayoga is beneficial in Mrutvatsa (RRS 22170).

**Yogaratnakara**: He has included Vandhya in Vimsati Yoni Vayu - (Yoni Rogadhikara Ch/2) Yogaratnakara has followed Sushruta as "Vandhya Nashtartava Ghneya", (Yonirogadhikara 1 7) i.e. a loss of aartava or Rakta due to Vayu is known as Vandhya.

The following treatment was mentioned for Vandhya in Yoni Vyapada Chikitsa. An infertile woman using potion with Bala, sugar, Atibala, Madhuka, leaf buds of Vata and Gajakesara mixed with honey, milk and Ghruta positively delivers a son.

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A woman having taken bath after menstruation on 4th day, if uses milk medicated with decoction of Ashwagandha in morning hours definitely conceives, and if uses root of Lakshmana up rooted during Pushya Nakshatra and pounded with milk by a virgin positively conceives; use of Kuranta root, flowers of Dhataki, leaf buds of Vata and Nilotpala pestled with milk is sure to result in pregnancy; the woman consuming beneficial diet and then taking Parswa Pippala with jiraka and white Visika Punkha definitely delivers a male child, use of Lakshmana pestled with milk in the form of tisane results in pregnancy and birth of an erudite child, as a tisane results in birth of energetic son subsequently she delivers so many sons and her physique is maintained, the woman drinking Tila taila, milk, Phanita, curd and Ghruta churned with hand and mixed with Pippali delivers nice son, use of all the seeds of one Matulunga pounded with milk at the end of "tu" (after menstruation on fourth day), results in birth of a son and Phala Ghrutam for female infertility (Y.R. Yoni Vyapat Ch.42-49).

Common Causes[6]

Conception depends on the fertility potential of both the male and female partner. The male directly responsible in about 30-40 %, the female in about 40-55 % and both are responsible in about 10% cases. The remaining 10% is unexplained.

Male factor

1. Defective spermatogenesis.
2. Obstruction of the efferent duct system.
3. Failure to deposit sperm high in the vagina.
4. Errors in the seminal fluid.

Female factor:

The important causes of female infertility as given by FIGO Manual (1990) are as follows:

1. Vaginal factors.
2. Uterine factors
3. Tubal factors.
4. Peritoneal factors
5. Ovarian factors
6. Coital errors
7. Cervical factors:

Unexplained infertility-

In about 10% of cases the infertility investigation will show no abnormalities. In these cases abnormalities are likely to be present but not detected by current methods. Possible problems could be that the egg is not released at the optimum time for fertilization, which it may not enter the fallopian tube, sperm may not be able to reach the egg, fertilization may fail to occur, transport of the zygote may be disturbed, or implantation fails. It is increasingly recognized that egg quality is of critical importance and women of advanced maternal age have eggs of reduced capacity for normal and successful fertilization.[6]
Classification of Vandhyatva:

It has not been given in any classics except Harita Samhita. In earlier description of etiology charaka mentioned the word sapraja; in the clinical features of asrujayonivyapada the word apraja has been given in Charaka Samhita.

Considering all these references together vandhyatva can be classified in three types according to Aacharya Charaka

- Vandhya
- Apraja
- Sapraja

Maharshi Harita classified vandhyatva in six types, viz.

- Kakvandhya (one child sterility)
- Anapatya (no child or primary infertility)
- Garbhasravi (repeated abortion)
- Mritvatsa (repeated stillbirths)
- Balakshaya (loss of strength)
- Vandhya due to balyavastha, garbhakoshabhanga and dhatukshaya.[7]

Role of Rasayana, Vajeekaranadrugs in Ayurveda

Vajikarana Or VrushyaChikitsais one of eight major specialty of the Ashtanga Ayurveda which has aphrodisiacs effect and improves virility and health of progeny. Vajikarana producing ahorse’s vigor, particularly the animal sgreath capacity for sexual activity in the individual. It revitalize all seven Dhatus, restores equilibrium and health. Rasayana drugs modulates neuroendocrin-immune system. Vaajikarana Rasayanais the special category of Rasayana, which improves the reproductive system and enhances sexual function. Vajikarana also claims to have anti stress, adaptogenic actions to alleviate anxiety associated with sexual desire and performance. Some of the formulations are, BruhaniGutika, VrushyaGutika, Vajikaranam Ghrutam, Apatyakari Shashtikadi Gutika etc. [8]

CONCLUSION

Infertility is becoming a fiery problem meanwhile past decade and this is primarily due to the amalgamation of environmental, social, psychological and nutritional factors. In contemporary medicine, treatment concentrating on correcting dysfunction diagnosed with the numerous diagnostic tests. Moreover, the hitches arising due to the infertility management including hormonal therapy, ovulation induction and invasive diagnostic techniques are huge. In cases of unexplained infertility, life style modifications and ART (Artificial reproductive techniques) are only treatment option available. But the success rates are less and highly expensive too. Ayurveda on the otherhand, looks profoundly into the distinct constitution, and goals to improve the functioning of body systems that contribute in the process of fertilization in totally.

Vandhyatva the female infertility is not merely a problem from the period of Vedas, but it is a struggle of early couple beyond Veda period also. This struggle is quite natural as every living being tries for its progeny. Though various scholars defined Vandhyatva in different ways, ultimately they defined it as an inability of female partner to get a live healthy child. There were so many false beliefs, stories regarding the causes and treatments of Vandhyatva from Veda period to different Ayurveda classics period. Even then, there are so many truths and recipes to overcome the problem. Aim of this article is not just to provide the historical data of Vandhyatva but also to draw attention of the scholars to rediscover the scientific supportive remedies for this age-old burning problem from ancient literature.
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