

Garbha-Prada Yogas from Yoga Ratnakara**Dr. Bhalgat M.S¹, Dr. Magar S.K²**

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Abstract

Infertility is a disease of the male or female reproductive system defined by the failure to achieve a pregnancy after 12 months or more of regular unprotected sexual intercourse. Infertility affects millions of people of reproductive age worldwide – and has an impact on their families and communities. Estimates suggest that between 48 million couples and 186 million individuals live with infertility globally. In the male reproductive system, infertility is most commonly caused by problems in the ejection of semen, absence or low levels of sperm, or abnormal shape (morphology) and movement (motility) of the sperm. In the female reproductive system, infertility may be caused by a range of abnormalities of the ovaries, uterus, fallopian tubes, and the endocrine system, among others. Yogratnakara one of the renowned gem of Ayurveda have evaluated the efficacy of certain medicinal formulations to treat female infertility and safer pregnancy till term as well.

Introduction

Infertility, whether male or female, is defined as the inability of a couple to achieve conception or bring a pregnancy to term after a year or more of regular, unprotected sexual intercourse. According to WHO, between 2 and 10% of couples worldwide are unable to conceive a child and a further of 10-25% experience secondary Infertility i.e. are unable to conceive a second or subsequent child. About 15% of couples of childbearing age seek medical help for infertility, usually after about two years of failing to conceive. Among these couples, infertility is exclusively a problem in the female in about 30-40% of cases, exclusively in the men in about 10-30% of cases. In 15-30% of cases, both partners have detectable abnormalities. After thorough medical examinations, the causes of infertility remain unexplained in 5-10% of couples. WHO believes that around 60-80 million couples in the world are infertile.

Becoming pregnant is not that easy even for people who do not have fertility problems, human being is one of the least fertile creature on earth. There is only a fairly short time within the menstrual cycle when conception is possible, making the chances of conception only 25% each month. It is estimated that 10% of normally fertile couple fail to

conceive within their first year of attempt and 5% after two years.

Infertility is a crisis of the deepest kind. It threatens many aspects of a couple's life- not only the partners relationship to each other, but it also effects them individually and their relationship with friends and family.

Infertility therapy is now highly successful, with pregnancy rates obtained with most treatment comparable to natural pregnancy rates. For those couples who do not become pregnant after several treatment cycles, the decision to continue treatment is made depending on their individual wishes and needs in consultation with medical experts.

Management of infertility includes both the physical and emotional care of couple. Therefore, support from physicians, nurses and all people involved in treating the infertile couple is essential to help them to cope with the various aspects of their condition. Counseling and contact with other infertile couple is essential to help them to cope with the various aspects of their condition. Counseling and contact with other infertile couples and patients association provides much needed help outside the medical environment.

Infertility issues in women can occur because of ovulation failure, failure of implantation, embryonic growth due to infections, etc. Most of

such issues can be effectively and safely treated with ayurvedic medicine for female infertility.

What is female infertility ?

Infertility is a disease in which the ability to get pregnant and give birth to a child is impaired or limited in some way. For heterosexual couples (man and woman), this is usually diagnosed after one year of trying to get pregnant (but may be diagnosed sooner depending on other factors). For heterosexual couples, one third of causes of infertility are due to a male problem, one third are due to a female problems, and one third are due to combination or unknown reasons. When the cause of the infertility is found to come from the female partner, it's considered female infertility or "female factor" infertility.

How common is female infertility?

Infertility is a common disease. At least 10% of women deal with infertility of some kind. The chances of being infertile increases as a woman ages.

What causes female infertility?

There are many possible causes of infertility. However, it can be difficult to pinpoint the exact cause, and some couples have "unexplained" infertility or "multifactorial" infertility (multiple causes, often both male and female factors). Some possible causes of female factor infertility can include.

Problems with the uterus : This includes polyps, fibroids, septum or adhesions inside the cavity of the uterus. Polyps and fibroids can form on their own at any time, whereas other abnormalities (like a septum) are present at birth. Adhesions can form after a surgery like a dilation and curettage (D&C).

Problems with the fallopian tubes : The most common cause of "tubal factor" infertility is pelvic inflammatory disease, usually caused by chlamydia and gonorrhea.

Problems with ovulation: There are many reasons why a woman may not ovulate (release an egg) regularly. Hormonal imbalances, a past eating disorder, substance abuse, thyroid conditions, severe stress and pituitary tumors are all examples of things that can affect ovulation.

Problems with egg number and quality: Women are born with all the eggs they will ever have, and this supply can "run out" early before menopause. In addition, some eggs will have the

wrong number of chromosomes and cannot fertilize or grow into a healthy fetus. Some of these chromosomal issues (such as "balanced translocation") may affect all of the eggs. Others are random but become more common as a woman gets older.

Who is at risk for female infertility?

Many factors can increase a woman's risk of female infertility. General health conditions, genetic (inherited) traits, lifestyle choices and age can all contribute to female infertility. Specific factors can include:

1. Age
2. Hormone issue that prevents ovulation.
3. Abnormal menstrual cycle.
4. Obesity.
5. Being underweight.
6. Having a low body-fat content from extreme exercise.
7. Endometriosis.
8. Structural problems (problems with the fallopian tubes, uterus or ovaries).
9. Uterine fibroids.
10. Cysts.
11. Tumors.
12. Autoimmune disorders (lupus, rheumatoid arthritis, Hashimoto's disease, thyroid gland conditions).
13. Sexually transmitted infections (STIs).
14. Polycystic Ovary Syndrome (PCOS).
15. Primary Ovary Insufficiency (POI).
16. Excessive substance use (heavy drinking).
17. Smoking.
18. DES syndrome (DES is a medication that was given to women to prevent complications in pregnancy like premature birth or miscarriage. However, this medication has caused infertility in some of the children of mothers who took DES.).
19. A past ectopic (tubal) pregnancy.

How does age impact female infertility?

As a woman ages, her chances of becoming pregnant decreases. Age is becoming a more common factor in female infertility because many couples are waiting to have children until their 30s

or 40s. Women over age 35 have a higher risk of having fertility issues. The reasons for this include:

1. Overall number of eggs is lower.
2. More eggs have an abnormal number of chromosomes.
3. An increased risk of other health conditions.

Advance age pregnancy or elderly gravida has seriously become a serious concern.

YOGA RATNAKARA GARBHA PRADA YOGAS:

Yogratnakara one of the renowned gem of Ayurveda have evaluated the efficacy of certain medicinal formulations to treat female infertility and safer pregnancy till term as well

Individual Drugs

1. Sweta Brihati moola + milk ---Nasya in left nostril (for male Child)
2. Matulunga beeja rubbed with milk - given after Ritusnana
3. Palasha one leaf boiled with Gokshira
4. Lakshmana moola + milk ---Nasya & Paana
5. Lakshmana moola (Shape like Lanka) --- used as Garland
6. Palasha one leaf boiled with Gokshira
7. Ashwagandha kshirapaka + Ghrita – given after Ritusnana

Compound Formulations

1. Lakshmana Ghrita: Fine powder of Lakshmana moola (which is in the shape of Lanka) is duly mixed with Go-Ghrita and is used for Nasya to enable a woman to conceive
2. Phala ghrita: (10 gms. each of Manjishta, Madhuka, Kushta, Triphala, Sarkara, Bala, Meda, Maha meda, Kshira Kakoli, Kakoli, Aswagandha moola, Ajamoda, Haridra, Daruharidra, Priyangu, Katurohini, Utpala, Kumuda, Laksha, Sweta & Rakta Chandana are pounded to fine paste. This paste is added with 640 gms of Ghee and subjected to Ghritapaka by adding Satavari swarasa and Go-Kshira (2560 ml.).

Individual monthwise medicinal formulations to prevent garbhastrava and garbhapata

Strict monitoring of the pregnant mother should be done when she is consuming these medicines. Everytime the well being of the mother and foetus should be ensured under strict medical

supervision. For preparing Kshirapaka, the coarsely powdered drugs are boiled in eight parts of milk added with 32 parts of water. The boiling is continued till all the water content is evaporated and milk alone is left. The end product is filtered and is taken internally into consideration and the drugs are taken in equal quantity.

Month	Ayurvedic formulations for Kshirapaka
First	Madhuka, Shaka beeja, Kshirakakoli & Suradaru
Second	Ashmantaka, Krishna tila, Tamravalli & Shatavari
Third	Vrikshadani, Kshirakakoli, Utpala & Sariva
Fourth	Ananta, Sariva, Rasna, Padma & Madhuka
Fifth	Brihati dvaya, Kashmari, shungatwak of Kshira Vriksha & ghrita
Sixth	Prithakparni, Bala, Shigru, Svadamstra & Madhuyasthi
Seventh	Sringataka, Bisa, Draksha, Kaseru, Madhuka & Sita
Eighth	Kapittha, Bilva, Brihati, Patoli, Ikshu & Nidigdhi
Ninth	Madhuka, Ananta, Kshirakakoli & Sariva
Tenth	Sunthi + Kshirakakoli / Sunthi / Yashtimadhu / Devadaru

Yogratnakara quoted yogas to prevent garbhastrava and garbhapata

1. Paste prepared with equal parts of Lajjalu, Dhataki pushpa, Utpala, Lodhra & madhu, should be administered orally. While consuming this medicine, woman should sit in the cold water tub.
2. Mud of the pot maker's hand should be collected, mixed with honey and taken orally along with Goat's milk / sweta Aparajita churna + honey with Goat's milk
3. Powders in equal parts of sugar, Bisa and Tila + honey
4. Equal parts of Venugranthi, Kulattha and Haridra should be decocted and given orally
5. Equal parts of Hribera, Ativisha, Mustha, Mocharasa and Indrayava should be decocted and given orally

6. Paravata mala mixed with fresh juice of Tambula (Nagavalli), taken internally for three consecutive days
7. Wearing of Atibala mula over kati region, prevents garbhapata

The dose of the final product should be consumed as per the doses mentioned in Bhaishajya Kalpana.

Yogaratanakara has not clearly mentioned the dose of the ingredients to be taken for formulations and the actual dose of final product to be taken during specific time. In such conditions, the Anukta Dravya Sangraha Pramana of Bhaishajya Kalpana aadharabhuta Siddhanta is taken into consideration for convenient dose application.

Discussion

Infertility can be incredibly stressful. If you have been trying to get pregnant for 12 months without success — or six months if you are over the age of 35 — reach out to your healthcare provider. Once you are diagnosed, your provider can help you develop a plan moving forward. Yogaratanakar one of the famous treatises of Ayurveda have evaluated variety of medicinal formulations to treat female infertility in the content of yoni vyapad chikitsa. In yogaratanakar month wise medicinal formulations are also evaluated for safer pregnancy outcomes avoiding garbhastrava and garbhapata.

Conclusion

Infertility has increased tremendously in the past decade and this is due to the result of a combination of social, environmental, psychological, and nutritional factors. Infertility is managed by looking at the reproductive system components. Ayurveda pays attention to each individual body types, enhances the body systems participating in the process of fertilization and therefore serves as an excellent alternative for reaching fertilization. Ayurveda addresses the internal balances and external influences contributing to the problem by building the Ojas, improving the overall health of the individual, stimulating the hypothalamus and pituitary glands thereby indirectly inducing the ovaries to ripen and release eggs. Ayurveda provides a noninvasive, low cost and non-iatrogenic alternative and complement to modern

western medicine in the treatment of female infertility. Yogaratanakara has very deeply covered treatment of female infertility alongwith garbhastravhar and garbhapathar yogas . Detail evaluation of individual monthwise treatment during pregnancy is also clearly discussed. It also mentions about DaivaVyapashraya measures like Chyavana Mantra & Ubhayatrimasaka Yantra. Yogaratanakara has given a great contribution in dealing with female infertility issues and that has to be definitely considered for the fruitful outputs. The outlook (prognosis) for female infertility depends greatly on the individual and the underlying cause of infertility. Most forms of female infertility cannot be predicted or prevented. However, efforts can be taken for hopeful outputs to create peaceful motherhood.

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