

## A Comparative study of Ashwagandha ghrita and Phalaghrita in the management of Vandhyatva with special reference to cervical factor

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### Abstract

*Vandhyatva (Infertility) is also an independent disease, rather a cardinal feature of so many diseases. In Sushruta Samhita, the Vandhyatava has been included in twenty Yoni vyapada. Acharya Charaka and Vagabhatta have referred Vandhyatva due to abnormality of Beejamsa. First time Acharya Harita has classified Vandhyatva in detail.*

*In the present scenario of the space age millennium and rapid advancement in the technology, infertility is still a problem that has been continued from ages.*

*Childlessness is described as Vandhyatva and is termed as Infertility in Modern Science. Conception depends on the fertility of both the female and male partners According to the current statistics, it is the fact that infertility is increasing and major causes of the disease are described in modern science as PID, STD and endometriosis in older couples. So over all, female is more responsible for the conception. There are so many drugs mentioned in Ayurvedic classics for the treatment of Vandhyatva. According to previous work done in the department of Stree Roga & Prasuti Tantra, in our institute many drugs are proved effective in the management of Vandhyatva. Among them, Phalaghrita stands the best.*

*The another drug- Ashwagandha in the form of ghrita was taken for clinical trial on the basis of references met within our classics. Present study explains the effect of both drugs in female infertility in reference to cervical factor.*

### Introduction

**E**very creature in this universe , tries to keep up

its progeny. For this purpose, each creature has been given reproduction by the God. Reproduction is the noblest and should be the most reverent of all human powers. God has given this precious gift to the woman. Acharya Charaka has mentioned that the woman is the origin of progeny. Motherhood is the cherished desire deep down in the heart of every woman. The desire for offspring in every woman is so synonymous with motherhood as it adds a new meaning to her life and existence. In order to fulfil this achievement, it is essential that both the partners should be fertile.

Acharya Sushruta has described four essential factors for fertility.

1. Rutu = Proper fertile period.
2. Ambu = Proper nourishment for developing the zygote.

3. Beeja = The activated ovum and spermatozoa.

4. Kshetra = Physiological maturity and healthy organs of reproductive system.

We ensure motherhood, when four factors are fulfilled, for woman where as only one factor is essential for men.

1. Tubal factor - 45%
2. Ovarian factor - 25%
3. Cervical factor – 20%
4. Uterine factor - 10%

Above factors, Physiological factors , Sharirika, Manasika factors, Aahara and Vihara are also responsible for female infertility. All the factors responsible for female infertility have been described clearly in Ayurveda. When the female is fully responsible, is known as female infertility.

From female faulty factors only the cervical factors are taken up for the present study. The cervical mucus acts as a filter allowing only functionally best spermatozoa to penetrate cervical mucus. When cervical mucus is hostile and

unfavorable, it doesn't allow penetrating, even if spermatozoa are healthy.

According to our classics we can describe this factor as Kshetraaj and Ambu dusti.

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The another drug- Ashwagandha in the form of ghrita was taken for clinical trial on the basis of references met within our classics.

#### Aim –

“Comparative study of Ashwagandha ghrita and Phalaghrita in the management of Vandhyatva with special reference to cervical factor.”

#### Objectives: -

1. To study and understand Vandhyatva in details with Ayurvedic and modern references.
2. To assess the effect of Phala Ghruta .
3. To assess the effect of Ashwagandha Ghruta .
4. To study the comparative effect of Phala Ghruta and Ashwagandha Ghruta in Vandhyatva.

#### Review Of Literature: -

All the references of Vandhyatva and its drugs studied from

1. Ancient Granthas of Ayurveda.
2. Modern Textbooks of Gynaecology & Obstetrics.

#### Material And Methods

##### Selection of Ghrita :

The choice of taila and ghrita depends on the accompanying Dosha. If Vata is associated with Kpha, the taila is preferred, and if Pitta is associated the ghrita is preferred.

##### Selection of Drug :

In our classics, Acharyas have mentioned so many drugs for the treatment of Vandhyatva. Among them , Phalaghrita has been proved the best.

In Sharangadhara Samhita, Acharya has mentioned Phalaghrita for Vandhya Dosha.

In our Institute in the Department of Stree

Roga (Gynaecology) and Prasuti Tantra, the efficacy of Phalaghrita has been tried out in the faulty cervical factors.

Besides that, another drugs are also mentioned in our texts for Vandhyatva. One of them, 'Ashwagandha' has been taken for present study because of its properties of Balya , Brimhaniya and Vrushya.

In Chakradatta, Acharya Chakrapani has also mentioned Ashwagandha for Vandhyatva. According to Acharya Bhavaprakasha, Ashwagandha is one of the potent drug which is the most effective upon such types of diseases.

So many references have already been given in introduction part therefore a comparative study of both these drugs locally as well as systemically has been taken for present study.

Phalaghrita was prepared according to textual reference

Meda ,Mahameda, Kakoli and Kshirkakoli drugs are not available .therefore their representative drugs i.e. Ashwagandha and Shatavari were taken in double quantity. Rest of the ingredients of the compound were taken in one -one part. The quantity of ghrita was taken twice the whole drugs . The quantity of milk was taken four times to ghrita.

Ashwagandha ghrita was prepared according to Ghritapaka Vidhi of Bhaishajya Kalpana. The root of Ashwagandha was taken for the preparation of ghrita.

The quantity of ghrita was taken twice to the drug and the quantity of milk was taken 4 times to the ghrita.

#### Methodology

Management of the Patients After diagnosis of cervical factor the patients were randomly categorized in to two groups of each 10 for present study.

Group A : Ashwagandha ghrita

Ghritapan 15 gms.

orally Twice a day

for 2 months with warm milk

Group B: Phalaghrita

Ghritapan 15 gms.

orally Twice a day

for 2 months with warm milk

Medicine given: From the first day of menstrual cycle.

Follow up: On the first day of next two consecutive cycles.

Total effect of the therapy : Total effect of the therapy was assessed in terms of cured, markedly improved, moderately improved, improved and unchanged on the following grounds

- (1) Cured – 100% result increase in cervical mucus score > 10 and conception take place
- (2) Markedly improved – 75% result, increase in cervical mucus score > 10.
- (3) Moderately improved – 50% result, increase in cervical mucus score < 5.
- (4) Improved – 25% result, increase in cervical mucus score < 5.
- (5) Unchanged – 0 % result, No change in the cervical mucus score after treatment.

Criteria for assessment The criteria for assessment of treatment is based on Sim’s Huhner and Moghissi’s score for cervical mucus.

Total 7 factors of cervical mucus were given 0 to 3 score.

The cervical mucus score is as follows :

- (1) Amount
- (2) Viscosity
- (3) Ferning
- (4) Spinnbarkeit
- (5) Cellularity
- (6) Density of sperm Dead / No sperm /hpf.
- (7) Motility of sperm

**3. Results And Discusion**

It has already been mentioned in drug review that Ashwagandha ghrita and phalaghrita both are partially similar in their properties. But, Ashwagandha has another property of Shukrajanana and Shukrapravartana, where as Phalaghrita has the property of Prajasthapana. The present study is based on the comparison of the effects of both the drugs on functional abnormalities of cervical mucus.

Chief Complaints :

All patients i.e. 100% included in the present study had primary infertility.

Associated complaints :

Majority of the patients i.e. 42.86% had complaints of dysmenorrhoea, followed by 28.43%

had scanty periods.

This reflects that hostile mucus were seen in the patients with scanty periods which is the natural etiopathology of such patients where as dysmenorrhoea was observed due to the vitiation of Vata.

**Comparision Of Both Therapies:**

The over all effects of both the therapies on properties of cervical mucus showed that the administration of Ashwagandha ghrita (group A ) was more effective to increase the amount and threadibility as compared to Phalaghrita where as Ashwagandha ghrita was more effective in comparision to Phalaghrita to decrease the cellularity and viscosity of cervical mucus.

As per the result, it can be said that increase in amount and threadibility in group A patients was due to the Balya and Brimhaniya properties of Ashwagandha and decrease in the cellularity and viscosity of cervical mucus in group B was due to the anti infectious properties of the drug.

**4. Conclusion:**

The main base for the treatment is “Nidana parivarjana”.

**Discussion Of Other Observations** After studying the literature, it is observed that the nidanas of Vandhyatva described in Ayurveda are almost similar to the causes of infertility according to modern science.

If we see the description of Vandhyatva in Ayurveda, it can be concluded that the definition of infertility / sterility i.e. failed to conceive (may be primary or secondary ) in modern science, is a part of the definition of Vandhyatva in Ayurveeda. Main aim of Ayurveda is to get a healthy normal child both mentally and physically i.e. called Supraja. The baby should fulfill the definition of Swastha So, Garbhapata / Garbhastrava (may be repeatedly), stillbirth baby or death of consecutive child after a healthy child etc. of a woman come under the heading of Vandhyatva in Ayurveda.

Before coming to the study of associated symptoms, it will be worth while to mention that the features presented by a patients viz. scanty period, dysmenorrhoea, dyspareunia are only the subjective symptoms which can only be graded regarding relative intensity but never can be measured.

Therefore, the progress seen in these cases gives only a relative idea and not the exact figure.

It is observed that some patients who had complaint of scanty period, before the treatment they got a normal period after completion of the treatment. It suggests that both the drugs are not only effective on cervical mucus but also on menstrual blood. In sthula patients, it may be due to removing the obstruction of Vata and in krusha patients, it may be due to subside the cause of nutritional deficiency.

It is observed that the patients were having dysmenorrhea and dyspareunia before the treatment got relief after taking this drugs orally. It may be due to Vatashamana, Pittashamana and Anulomana properties of both the drugs. Because vitiated Vata and Pitta is the main cause for dysmenorrhea and dyspareunia.

It is also seen that some patients have gained their weight after taking the Ashwagandha ghrita. It may be due to the Balya and Brimhana effect of the Ashwagandha as well as the ghrita.

**Conclusion :**

- Vandhyatva is most complicated problem of all gynaecological complaints and the leading cause of marital upset, personal unhappiness and ill health.
- Term Artava can be inferred here as all the physiological secretions of the uterus.
- Cervical mucus is produced as the part of Prasda of Rasa and Rakta dhatu by proper sthanik Agni and Secreted by Anulomagati of Apanavayu and Prakrutagati of Vyanavayu.
- Ruksha guna of Vata and Ushna, Tikshna guna of Pitta are the two main etiological factors of the cervical factors.
- The main principle of the management of cervical factors are Brumhana, Agnivardhaka and Vatanulomaka treatment.
- 50% patients were having physiological white discharge, not a single patient having vaginitis or cervical erosion, while 100% patients were having nulli parous os on P/S Examination.
- Some, of P/V findings were AVAF uterus in 71% regular shape in 100% and free mobile uterus in 100%.
- The result of fern pattern was seen

insignificant in both the groups.

- It is also found that associated symptoms like scanty periods, dysmenorrhea and dyspareunia were relieved off in both the groups. After follow up period, it was seen that the quality and quantity of the cervical mucus was returned to its previous stage (condition before the treatment) which was a matter of headache; what were the causes behind it is a matter of thought . It may be due to following causes –

- (i) Intake of apathya more and more
- (ii) The treatment for two months is not sufficient to eradicate the pathological factors.

From the above discussion, it can be concluded that though the percentage of cervical factor in Vandhyatva is less than other factors, but it is as important as other factors. So, for healthy mucus patient should be taken Balya, Brumhana and Madhura ahara and avoid the Ushna, Tikshna ahara. They should be remained free from Krodha, Chinta, Shoka etc. which have great role to create, abnormalities in almost all causative factors of Vandhyatva. Lastly, the effect of both trial drugs have good effect to increase the status of cervical mucus . But to see the follow up study my view is that, both drugs should be prescribed for a long period or till conception instead of only for two mouth which will be more effective. So, further study on this subject should be carried out in future.

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