

**Title: Role of *uttar basti* in secondary infertility of elderly woman:
A Case Report****Author: Khan Tarannum Nisar**

Associate Professor, Dept. of Streeroga and Prasutitantra,

Govt. Ayurved College, Nanded.431601 Maharashtra, India.

Corresponding Author: e mail- dr.khan_na@yahoo.com; mobile- +91 9422186346**Abstract:**

Presenting a case of 42 years old female having secondary infertility of seven years. Patient was investigated and diagnosed as *Vandhya yoni vyapad*. *Yoga basti* has given for three consequent menstrual cycles followed by *Garbhashayagat uttarbasti* for next three consequent menstrual cycles along with oral medication. Patient got conceived; antenatal care was taken by timely follow-ups and patient normally delivered a healthy male baby.

Keywords:*Vandhya yoni vyapad, yoga basti.***Introduction:**

As per *Ayurveda*, four basic factors are required in healthy form for human reproduction i.e. *Rutu, Kshetra, Ambu and beej*. Abnormality among any of these factors may lead to infertility. All anatomical and physiological diseases of female genital organs are described as *yoniroga (yonivyapada)* in ancient *Ayurvedic* texts. It is also mentioned that not a single *yonivyapada* can occur without *Vatadosha*¹. Hence first line of treatment for *yonivyapada* should be *basti karma* as it is best remedy for *vatarogas*².

Garbhashayagat uttar basti is another modality to treat *yonirogas*³.

Vandhya yoni vyapad (infertility) is defined as cessation of *artava*⁴. Where the word *artava* stands for menstruation as well as ovum. So for the treatment of infertility, correcting *artava vikruti* and strengthening of reproductive organs can be achieved by *uttar basti* by *til taila*. Properties of *til taila* are described as it is *madhur, ushna, teekshna, vyavayi, brihana, vrishya,* and *garbhashaya shodhan*⁵. It is best among *vaatashaman dravyas*. Hence it cures diseases of *vata* and corrects most of the *yonirogas*.

Case History:

A 42-year-old woman had come for treatment of secondary infertility. She had obstetric history of two full term normal deliveries having both female, 13 years and 7 years before respectively. Her younger daughter died accidentally before six months i.e. at the age of six and half years. So patient was emotionally disturbed and strongly willing for another child. She was suffering from heavy menses too. During this period of time she didn't conceive in spite of not using any contraceptive. Her ultrasound report revealed small left hemorrhagic ovarian cyst with normal uterus. Related serological and radiological investigations were done. In which no

abnormality found except low haemoglobin.

Treatment protocol:

- *Shatavari*, *Gokshur* and *Latakaranj churna* in combination 10 gm. Bid with milk as *anupana* was given along with iron supplementation.
- *Yoga basti* was given from 5th day of menstrual cycle. For *anuvāsana basti* 60 ml. luke warm
- *Til taila* was used while for *niruha basti Dashmoola kwatha* 500 ml. was given.
- Starting with *anuvāsana*, both were given alternately for six days and ending with two *anuvāsana*. Such *yoga basti* was given for three consecutive menstrual cycles.
- *Garbhashayagat uttarbasti* was given for next three consecutive menstrual cycles.
- For *uttarbasti Til taila* 10 ml was used under all aseptic precautions in operation theatre.
- The *uttarbasti* was started on 5th day of menstrual cycle, after cessation of menstrual bleeding, daily for five days.

In the third month of treatment, follicle got ruptured on 14th day of menstrual cycle and patient conceived.

The patient was examined by regular follow-ups and routine antenatal care was given and patient delivered normally a full term healthy male baby.

Discussion:

Even though female reproductive age considered from menarche to menopause i.e. 16 to 45 years but after age of 35 years, chances of conception becomes low. The patient was of 42 years

of age but strongly willing for child due to her own reasons. So this case has considered for treatment.

All necessary investigations have done. All of them found to be within normal limits except mild anaemia of Hb 8.00 gm/dl. After examination, the fact came to know that there was age related *dhatu daurbalya* and *dhatukshaya janya vata prakopa*. As patient was in premenopausal age and had secondary infertility. Hence patient was diagnosed as a case of *Vandhya yonivyapada*. The *Basti* is mainly indicated in *vata prakopa janya* diseases.

Use of *anuvāsana basti* and *niruha basti* is also beneficial in all kinds of ailments implicating *vaata adhishtanas*. Charaka explained that the woman, who is unable to conceive due to *vata*, should be treated with *basti*⁶. *Uttarbasti* is one of the efficacious remedies in *Ayurveda* and proved in tackling the *yonivyapada* successfully.

Til taila with its enormous properties has excellent *vatashamak* effect. *Til taila* is easily absorbed through mucous membranes, provides nutrition, performs *vata shaman* and may potentiate the ovarian and endometrial physiological functions. Hence it empowers the reproductive organs especially fallopian tubes and uterus.

Conclusions:

Balya, *bruhaniya* *Ayurvedic* medicines along with iron supplementation also played an important role in improvement of general health of the patient. By applying all the above *Ayurvedic* measures the patient is treated. Thus, she conceived successfully, antenatal period was uneventful, and she gave birth to a healthy baby by normal

delivery in her premenopausal age. Hence the case has been reported.

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