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A Critical Review on the Role of Laghumalini Vasant in an Anovulatory Factor of Female Infertility

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ABSTRACT

Anovulation, defined as the failure of the ovary to release an egg during the menstrual cycle, is a common cause of infertility in women. In *Ayurveda*, anovulation is linked to infertility and is referred to with terms like *Artavkshaya, Nashtartava, Anartava*, and *Nashta beejam*. *Ayurvedic* texts describe this condition as a disruption of the reproductive system's normal function, often attributed to imbalances in *Vata*, specifically *apan vata*, and *Kapha dosha*. These imbalances can cause blockages in the *Artavavaha srotas* (reproductive channels). Conventional treatments for anovulation often involve hormonal therapies, which may have side effects and limited efficacy in some cases. *Laghumalini Vasant* (LMV), a traditional *Ayurvedic* formulation, has historically been used to enhance reproductive health and address fertility disorders. This paper explores the potential role of LMV in the management of anovulation, focusing on its ability to regulate hormonal imbalances, support ovarian function, and promote regular ovulation by improving *rasa dhatwagni*. *Artava* is considered an *updhatu* of *rasa dhatu*. The formulation contains a blend of herbs and minerals believed to act synergistically to enhance fertility. By analyzing traditional *Ayurvedic* knowledge and contemporary clinical perspectives, the study highlights how *Laghumalini Vasant* could serve as a complementary treatment in managing anovulatory conditions. While traditional usage and anecdotal evidence support its efficacy, further clinical research is required to substantiate its effectiveness.

Keywords – *Anovulation, Female Infertility, Laghumalini vasant, Artavkshaya, Vandhyatva*

INTRODUCTION

"*Stree*" being the root cause of progeny, utmost care should be given to protect her from any ailments that affect her motherhood. Anovulation is one of the conditions affecting the unique capacity of women. Infertility is defined as the inability to conceive after one year of unprotected intercourse, affecting millions of couples worldwide. Anovulation plays a critical role among the various factors contributing to infertility, accounting for a significant proportion of female infertility cases.

Anovulation refers to the absence of ovulation, where the ovaries fail to release a mature egg during the menstrual cycle. It is a significant cause of infertility, accounting for about 25-30% of female infertility cases. Without ovulation, conception is impossible since there is no egg available for fertilization.

In *Ayurvedic* texts, anovulation, though not mentioned directly with the same terminology used in modern medicine, can be correlated with specific disorders affecting the reproductive system. Ancient *Ayurvedic* treatises, such as the *Charaka Samhita, Sushruta Samhita*, and *Ashtanga Hridaya*, describe conditions like *Artava Kshaya* (deficiency or improper functioning of menstrual blood) and *Yonivyapad* (gynecological disorders), which may correspond to ovulatory dysfunction.

AYURVEDIC ETIOPATHOGENESIS AND KEY CONCEPTS

The conceptual foundation for understanding ovulatory disorders lies in key *Ayurvedic* principles:

1. *Artava Kshaya* (Hypomenorrhea or Deficiency of Menstrual Flow) In *Charaka Samhita* (*Chikitsa Sthana 30*), *Artava Kshaya* is described as a condition where menstruation is delayed, scanty, or absent. This condition can be linked with hormonal imbalances that result in anovulation. Symptoms include delayed or irregular cycles, weakness, and infertility.

2. *Vandhyatva* (Infertility) The term "*Vandhya*" refers to a woman who is unable to conceive. Texts attribute *Vandhyatva* to the vitiation of *Vata dosha* and other factors like *Artava Kshaya*, which impair the production and release of a healthy ovum.

3. *Dosha* and *Dhatu* Vitiation According to *ayurved*, Anovulation is conceptually a **kapha - vataj disorder**. It involves the vitiation of *rasa, shukra dhatu* and *artavvaha srotas*. *Apana Vata*, a subtype of *Vata dosha*, governs the functions of menstruation and ovulation. Its disturbance can cause conditions like amenorrhea and anovulation, leading to infertility.

4. Role of *Rasayana* Therapy *Ayurvedic* rejuvenative therapies (*Rasayana*), including formulations like *Laghumalini Vasant*, are mentioned in the context of enhancing reproductive health by restoring hormonal balance and supporting natural fertility. They improve the quality of *Artava* (ovum/menstrual blood), focusing on *rasa dhatwagni*, as *artava* is an *updhatu* of *rasa dhatu*. These references establish a conceptual framework for interpreting ovulatory dysfunctions within the *Ayurvedic* paradigm.

AIM AND OBJECTIVE

AIM: To describe etiopathogenesis of anovulation and role of *laghumalini vasant* in an anovulatory factor of infertility.

OBJECTIVE: To interpret hypothetical action of *laghumalini vasant* in an anovulatory factor of infertility.

MATERIAL AND METHODS

Literature:

1. Literature review from *ayurved samhitas*.
2. Literature from modern texts.
3. Journals and website.

Method: Conceptual study.

DRUG REVIEW: *LAGHUMALINI VASANT* (LMV)

***Laghumalini Vasant* is a traditional *Ayurvedic* formulation used for reproductive health.**

SI NO.	Common name	*Latin* name	Part
1	*Rasaka*	*Zinc Oxide*	2 Part
2	*Maricha*	*Piper nigrum*	1 Part

Table 1: Contents of *Laghumalini Vasant*

SI NO.	Common name	*Latin* name	Quantity
1	*Nimbu swaras*	*Citrus lemon*	Q. S.
2	*Navaneet*	*Butter*	Q. S.

Table 2: *Bhavana dravya* of *Laghumalini Vasant*

SI NO.	Name	*Rasa*	*Guna*	*Virya*	*Vipaka*	*Doshkarma*	Action
1	*Kharpara*	*Kasaya Katu*	*Laghu*	*Sheeta*	*Katu*	*Tridosha-gna*	*Raktapradarnashana*
2	*Maricha*	*Katu*	*Laghu Tikshna*	*Ushna*	*Katu*	*Vata-kapha samana*	*Dipana*
3	*Nimbu*	*Amla*	*Ushna*	*Ushna*	*Amla*	*Kapha-vata-samana*	*Rochana Dipana Pachana*
4	*Navneet*	*Madhura*	*Sheeta*	*Sheeta*	*Madhura*	*Vata-pittahar Kaphakar*	*Vrishya*

Table 3: Properties of ingredients of *Laghumalini Vasant*

PHARMACOLOGICAL PROPERTIES AND CONCEPTUAL MECHANISM

The hypothesized action of *Laghumalini Vasant* addresses the pathogenesis of anovulation by targeting *agni*, clearing *srotas*, and nourishing *dhatus*.

1. Action of *Kharpara Bhasma* *Kharpara bhasma* (*Zinc Oxide*) is considered an excellent drug possessing *yogvahi* property. It is characterized as *shukrala, balya*, and *vrishya*. It is believed to improve folliculogenesis and induce ovulation. Zinc is an essential component for ovulation as it influences the balance of estrogen and progesterone. Furthermore, zinc supports ovarian health and promotes follicular growth and maturation.

2. Action of *Maricha* *Maricha* (*Piper nigrum*) has *deepan* action, meaning it improves *jathragni* and *rasa dhatwagni*. It clears obstruction in *srotasas*. *Maricha* is also an antioxidant, which protects reproductive cells from oxidative stress and enhances the bioavailability of zinc.

3. Action of *Nimbu* *Nimbu* (*Citrus lemon*) has an anti-inflammatory property. Its other actions include *Rochana, dipana, pachana, anuloman*, and *pittasarak*.

4. Action of *Navneet* *Navneet* (Butter) is an excellent *rasa, majja*, and *shukra dhatuposhak dravya*. By improving digestion, *Navneet* helps in the ovulation process, as *raja* is an *updhatu* of *rasa dhatu*. *Navneet* contains *lactobacillus* necessary for absorption. The *butyric acid* (*SCFAs*) in *navneet* reduces inflammation in the digestive system and aids in cell proliferation.

ROUTE OF ADMINISTRATION AND DOSAGE

Laghumalini vasant is given orally in tablet form.

Parameter	Detail	Source
Dosage	125 mg twice a day	
Anupana	After proper *khal* with ghee and *mishri*	
Kala	*Saman kala* (in between the meals)	
Rationale for *Kala*	Improves *jatharagni* and *rasa dhatwagni* and performs *rasa, shukra dhatuposhan*	
Duration	Minimum 3 to 6 months	

RESULT

The conditions which are mentioned in various contexts in *Ayurvedic* classics under various headings such as *Artavkshaya, Nashtartav, Anartava, Nashta beeja*, and *Vandhyatva* can be compared to some extent with the symptoms of anovulation.

DISCUSSION

According to *ayurved*, anovulation is a *kapha - vataj* disorder involving *rasa, shukra dhatu* and *artavvaha srotas*. *Laghumalini vasant* acts on *Jatharagni* and *dhatwagni* because of its *deepan, pachan* properties. This action reduces

aama and improves the *rasa dhatu*. LMV relieves the obstruction at *apan kshetra* and performs *apan vatanuloman*. The formulation thus induces ovulation and hence increases the chance of conception. Furthermore, Zinc, supplied via *Kharpara bhasma*, promotes folliculogenesis, improves ovum quality, and enhances fertility. The synergistic blend of minerals and herbs in LMV supports ovarian function and hormonal balance, breaking the pathogenesis (*sampraptivighatan*).

CONCLUSION

According to *ayurved*, the anovulatory factor of infertility can be treated by *shodhana* and *shamana chikitsa*. *Laghumalini vasant*, due to its multiple conceptual properties such as ***Tridoshaghna, Kapha-Vata shaman, Rasa* and *Shukra dhatu poshan, Srotorodhnashan, Vrishya***, and ***Rasayan***, can be used to cause *sampraptivighatan* of anovulation and hence improves the outcome of infertility. Further clinical research is required to substantiate its effectiveness in treating anovulation and related fertility issues.

REFERENCE:

1. Vaidya Laksmipati Sastri, Yogaratnakara, edited by Bhisagratna Brahmasankarsastri, Varanasi, Chaukhambha Prakashan, 2020, reprint, p 245.
2. Dr. Ravindra Angadi, A Textbook of Rasasastra, Varanasi, Chaukhamba Surbharati Prakashan,2020, ch 15, p224.
3. Prof. P. V.Sharma, Dravyaguna Vijnana, Varanasi, Chaukhambha Bharati Academy, reprint, 2009, ch 5, p362
4. Prof. P. V Sharma, Dravyaguna Vijnana, Varanasi, Chaukhambha Bharati Academy, reprint, 2009, ch 5, p345
5. https://www.planetayurveda.com/library/laghu-malinivasanta-rasa/
6. Journal of Reproductive Medicine, 2011; 56(9-10): 357-362.
7. Fertility and Sterility, 2013; 100(3): 822-828.
8. Journal of Clinical Endocrinology and Metabolism, 2016; 101(9): 3239-3246.
9. Journal of Reproductive Medicine, 2011; 56(9-10): 357-362.
10. Fertility and Sterility, 2013; 100(3): 822-828.

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