



Ayurveda : Case study

A case study on successful Ayurvedic management of infertility with habitual abortions

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Abstract

Pregnancy is by far the most beautiful experience one could ever be part of, in life. It fulfils the emotional needs of the mother as well as the father. To deliver a healthy baby, maintenance of pregnancy till term is important. Due to various reasons, pregnancy can be lost before term. This is very disheartening for a couple, and it is demanding emotionally and physically as well. Current case study is about a 32-year-old female patient with a history of 5 previous abortions, a known case of severe PCOS and severe hypothyroidism, who was treated successfully with combination of Ayurvedic tablets Jeehv, Myrha and Vamha (Ayurvedic Proprietary medicines). Myrha and Vamha pills helped to regulate periods with Amahara, Lekhana, Kaphahara and Artarvajanana properties and Jeehv medicine used in this study, have Vatahara, Shroto Shuddhikara and Garbhasthapaka Gana that helped in preventing Garbhasrava and maintain pregnancy. The patient was conceived after 4 months of treatment and delivered a healthy baby boy vaginally.

1. Introduction

Recurrent pregnancy loss or miscarriage is also known as habitual abortion. It is defined as three or more consecutive pregnancy losses before 20 weeks of gestation (Ober *et al.*, 1999). While modern medicine relates the case of recurrent abortion to altered hormonal levels and anatomical factors, Ayurveda explains this under Putraghni Yonivyapada. Putraghni Yonivyapada is a condition where repeated pregnancy loss occurs because of Artava dosha, Rakta dosha, Ati Rakta strava, *etc.* (Qublan, 2003). Putraghni Yonivyapada can lead to Vandhyatva (infertility) as a complication if left untreated.

There are a number of causes which can be responsible for habitual abortion like anatomical abnormalities of the reproductive system, chromosomal abnormalities, endocrine factors, immune factors, lifestyle factors, ovarian factors, various infections, *etc.* (Ghaywate Ravindra, 2020).

Polycystic ovarian syndrome (PCOS) causes impaired fertility and is assumed to be associated with increased risk of miscarriage. Direct reference of PCOS is not found in Ayurveda, but it resembles Artava Vaha Srotas Dushti in classics where Vata and Kapha are the primary doshas involved. The factors related to PCOS that increase chances of miscarriage are mainly poor egg quality and many more like insulin resistance or elevated insulin levels, higher luteinizing hormone (LH) levels, elevated testosterone levels, *etc.* (American Thyroid Association, 2014).

Pregnancy naturally demands an increase in thyroid hormone production in a woman with normal thyroid functions, whereas

women with preexisting hypothyroidism need special attention by means of appropriate thyroid supplement dose adjustments. Higher TSH levels (TSH levels greater than 4.5 ng/ml) are associated with increased risk for miscarriage and should be properly treated in early pregnancy (Sulekha *et al.*, 2022).

2. Case report

A 32-year-old woman, anxious and eager to conceive, approached Vedsara Clinic, Andheri West, Mumbai. She had a history of habitual abortions (5 miscarriages in the past 8 years) and was a known case of severe PCOS and severe hypothyroidism. The patient also had a history of irregular periods since menarche and was diagnosed with PCOS in 2010. She has been on regular allopathy treatment for hypothyroidism as well as PCOD for the last 9 years. Patient has reported unusual weight gain, low energy levels, mood swings, acne and hair fall at her first visit. It was observed that she was suffering from intense fear, anxiety, and sadness because of her previous multiple abortions.

Family history: Nil

Past medical history: Known case of PCOS (on OCPs for 17 years on and off on doctor's advice due to frequent absence of periods).

Hypothyroidism (Tab Thyronorm 100 mcg 1 tab before breakfast for 9 years)

2.1 Menstrual history

Age of menarche	15 years
Cycle	Delayed
No. of days of bleeding	2-3 days
Interval	No periods without OCPs
Pain	During periods ++
Clots	Nil

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2.2 Personal history

Diet	Non-vegetarian
Appetite	Reduced
Bowel	Constipated
Bladder	Normal
Sleep	Disturbed
Allergy	No known allergies

Marital history: 10 years

2.3 Obstetric history

- The patient conceived with the help of fertility treatments 5 times but could not sustain pregnancies till term. All the 5 abortions have been reported in the 1st trimester.

- Gravida-5 Abortion - 5 (G₅A₅).
- First 3 abortions: Spontaneous abortion.
- Last 2 abortion: Patient reported an uncontrolled increase in thyroid levels resulting in miscarriage.
- Fertility treatment history: History of follicular study done 14 times. Many times, follicle maturation was not seen despite hormonal treatment and HCG injections.
- Tried taking fertility supplements along with ovulation inducers (clomiphene citrate) for the past 5-6 years.

2.4 Ayurvedic management

Internal medicine given in first visit: Jeehv fertility supplement and Myrha and Vamha PCOS pills (Ayurvedic proprietary medicine from Gynoveda).

S. No.	Medicine given	Ingredients	Dosage
1.	Jeehv fertility supplement	Putranjivak, Shivlingi, Shilajit, Shatavari, Jivanti, <i>Aloe vera</i> , Ashoka, Lodhra, Ashwagandha, Devdaru, Katuki, Haritaki, Shuddha Kasis, Bang Bhasma, Shuddha Hing, Shuddha Tankan, Punarnava, preservatives, and excipients.	Two pills after breakfast and two pills after dinner
2.	PCOS pills Myrha	Kutaj Twak Churna, Patola Churna, Katuki Churna, Shuddha Shilajit, Trikatu Churna, Trijat Churna, Yashad Bhasma, Kanchanar, Varuna, Ashwagandha, Haridra, Amalaki, Methi, Saptarangi, Asana, AVartika, Jambu, Meshashringi, Mamejava, Guduchi, Bilva, Nimba, Karvellak, preservatives and excipients.	Two pills after breakfast and two pills after dinner
	Vamha	Manjishtha, Pippali, Shatpushpa, Shatavari, Devdaru, Shuddha Hinga, Shuddha Kasis, Lauha Bhasma, Ghrit Kumari, Ulatambal, Dashmool, Haritaki, Devdaru, Kullatha, Krishna Jirak, Gajar Beej, Karpasa Beej, Methi, Lashun, Jyotishmati, Chitrak, Chandrasur, preservatives and excipients.	Two pills after breakfast and two pills after dinner

2.4 Advice

- Follow the Gynovedic diet (replace sugar with jaggery, iodized salt with rock salt, refined oil with virgin cold pressed oil, avoid milk and milk products, avoid meat, 40-90 water ruler, chew the

food well, never overeat, daily 3 meals at fixed time and 12 h overnight fasting) and a healthy lifestyle.

- Regular exercise for at least 45 min/day was recommended.
- Tracking ovulation in every cycle and being in contact with the partner during the fertile period was explained.

2.5 Follow up

First follow up: June 12 2021	The patient reported that energy levels increased. Experienced decrease in PMS and reduction in mood swings. Ovulation was tracked at home using an ovulation kit. The patient reported ovulation positive on day 12th of her period.
Second follow up: July 10 2021	Following diet and lifestyle along with medicines, the patient reported improvement in periods flow and got her periods on 28th day from her previous cycle and 3 kg weight loss observed after 45 days of treatment. Observed reduction in hair fall. Also, followed the process of tracking ovulation at home, positive on day 11 of her periods. The patient was advised to continue with the same routine.
Third follow up: August 14 2021	Patient experienced major changes in her skin by means of reduction in acne breakouts and glow. Loss of weight of 5 kg in 3 months. The ovulation was positive on day 12 of her periods was in contact with her partner during her fertile period.
Fourth follow up: September 11 2021	The patient reported positive ovulation on day 11 of her period. Medicines were continued, diet and lifestyle also followed very well.

At the end of the month, she came with complaints of nausea, headache, and mild tenderness at nipples. She was advised to do a UPT (urine pregnancy test) at home with the first urine sample after she wakes up in the morning. UPT came positive in September 2021 and was confirmed with a beta HCG test and the patient consulted a Gynecologist for further Garbhini Paricharya (ANC) management and resulted in normal labor with a healthy child.

The patient delivered a healthy baby boy on 14th June 2022. It was a FTND (37 weeks 5 days). Child's birth weight: 2600 g.

3. Discussion

Being a mother is a physiological event that fulfils the emotional need of a woman. In today's fast pace of life, this physiological event exhibits multiple and variable complications which may result in pregnancy loss. So, it is important to overcome these complications and keep the fetus nourished and protected throughout pregnancy till term. Ayurveda classics have described Putraghni Yonivyapad in detail which can be well correlated with habitual abortion, and it can be treated successfully with proper Ayurvedic interventions. PCOS is caused by faulty dietary habits and sedentary lifestyle that leads to excessive Kapha production which affects digestion and produces Ama (sticky toxins that block the channels in ovary) due to which PCOS is always associated with slow egg growth development, poor egg quality, poor secretory changes in endometrium and even anovulation, which can ultimately result in early pregnancy loss many times. Herbs in Myrha and Vamha pills perform Agni Deepan, Amapachan, Strotoshodhan, Artava Janana and lekhan functions in order to improve egg quality and to ensure ovulation. The special herbs in Jeehv fertility supplement collectively improves fertility by supporting egg growth, ensuring timely ovulation, reducing inflammation, improving endometrial receptivity, and supporting healthy endometrial growth to achieve successful implantation. Shivaling improves egg quality, Putranjivak ensures healthy implantation to achieve pregnancy, Shatavari prevents early pregnancy loss and Jivanti with other herbs nourishes the uterus for healthy pregnancy. Considering that poor egg quality and poor endometrium is the number one cause for early pregnancy loss, Pregnancy achieved after such proper preparation can have great chances to sustain till term. After 4 months of this treatment with Myrha Vamha and Jeehv the patient conceived and delivered a healthy baby boy through normal delivery. In this way, if we really follow basic principles of Ayurveda very well, we can successfully treat habitual abortion.

4. Conclusion

4 months of Ayurvedic treatment with Jeehv, Myrha and Vamha (Ayurvedic Proprietary medicines) have shown very encouraging results in a patient with a history of habitual abortions where healthy conception was observed, which further turned into full term healthy live fetus delivery. No complication was observed during the 9 months of pregnancy.

Conflict of interest

The authors declare no conflicts of interest relevant to this article.

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