



# Fallopian Tube Blockage and Its Management with *Uttarbasti* and Ayurvedic Medicine: A Case Study

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## ABSTRACT

Infertility affects approximately 8-12% of reproductive-aged couples. Among responsible factors of female infertility, the tubal blockage is the second highest and it is difficult to treat. There are very few recommended treatments available such as tubal reconstructive surgeries and *in vitro* fertilization. As per Ayurveda Tridosha dusti are the cause for tubal blockage. The intrauterine *Uttarbasti* and Ayurvedic medicines are as a safe therapeutic measure against tubal blockage is presented with case study.

**Key Words:** Fallopian Tube, *Arthavaha Srotasa*, *Uttarbasti*, *Kshar Tel*

## INTRODUCTION

Infertility is the failure to conceive (regardless of cause) even after 1 year of unprotected intercourse. It affects approximately 8-12 % of reproductive-aged couples<sup>1</sup>. Among responsible factors of female infertility, the tubal blockage is the second highest; affecting around 25–35% of population and it is difficult to treat<sup>2</sup>. There are very few recommended treatments available such as tubal reconstructive surgeries and *in vitro* fertilization.

The female reproductive track, from hypothalamus to the uterus is included in to *Artavavaha Srotas* as explained in Ayurveda. This system not only covers all the structures related to female reproductive organs at the anatomical level but also represents the hormones related to reproduction at the physiological level. Fallopian

tubes are very important structures of the *Artavavaha Srotas*, as they carry *Streebeej* from ovary to uterus for fertilization. Fertilization occurs in fallopian tube<sup>3</sup>.

*Tridosha dusti* is the cause of tubal blockage. Such as, vitiation of *Vata*, due to its *Ruksha* (Dryness), *Darun* (Hard) *Khara* (Rough) *guna* (Properties), may cause tubal blockage<sup>4</sup>. As stated by Chakrapani, *Darunatva* responsible for *Kathinya*<sup>5</sup> (Hardness) and thus, causing stiffness & loss of function of tubes, while *Rukshata* causes stenosis in the tube leading to loss of mobility. *Kapha*, having *snigdha* (unctuous), *sheet* (Cold) & *sthira* *guna* can cause *Avarodha* (Obstruction) and *Shopha* (Swelling) in the tube leading to its blockage<sup>6</sup>. Finally, *Pitta* with its *ushna* (Hot), *Drava* (liquid) *guna* may cause *Paka* i.e inflammation in the tube leading to blockage<sup>7</sup>.



It is also important to note that all type of tubal blockages may not be the same. In some cases, the *Vata* is dominant, creating stenosis type of pathology, while in some other cases, obstruction in lumen caused by the dominance of *Kapha*. Sometimes, a frequent infection of tube could be the cause of blockage because of *Pitta* dominance. Hence, tubal infertility is not the manifestation of vitiation of any specific *Dosha*, rather sometimes interplay of multiple *Doshas* may occur.

The drug assumed to be effective in removing the blockage of fallopian tube should possess *Tridoshaghna* properties mainly *Vata-Kapha Shamaka* (alleviating *Vata-Kapha*). Drug with *Sukshma* (Minute), *Laghu* (light), *Sara* (capable of flowing and permeating through), *Vyavayi* (Fast pervading or diffusing), *Vikasi* (dispersed all through body), *Pramathi* (virtue of specific cleansing property) *Guna*, can be assumed to have effective role in removing tubal blockage and in restoring the tubal functions by reaching up to the minute channels.

Considering above, *KsharTaila*, which is mentioned in *Stree Roga Adhikara*<sup>9</sup> and *Karna Rogadhikara*<sup>10</sup>, was selected in this case for *uttarbasti* (Intrauterine insertion of Medicine). Also, *Kanchanar Guggul*, *Triphala guggul*, *Varnadi kashay* are used as internal medicine.

## CASE STUDY

Female aged 29yrs, weight 70kgs, height 5'2, BMI 29.1

Case taking done on 4/11/2019

Complaining of Primary infertility since 1yr, No Acidity, No Gases, No skin rash, No other complain

Menstrual history: regular 3-4 days bleeding after 22-24 days with normal flow without pain, clots, smell.

No any history of any surgery, TB and any major illness

No any known case of Diabetes, hypertension, thyroid, asthma, etc

Not having any family history

On examination:

*Nadi* (Pulse): *kapha Vata pradhan*, 76/min

*Mala* (Stool): frequency once or twice in day with normal consistency

*Mutra* (Urine): Normal frequency without burning & urgency

*Jivha* (Tongue): *Niram*, No pallor

B. P.: 120/80 mm of Hg

Respiratory system examination: AEBE, No any added sound

Abdominal examination: No swelling, tenderness, No *Atop*

Investigation

5/11/2019HIV/ HBsAg/ VDRL: Negative

5/11/2019 TB platinum: Negative

20/11/2019 USG pelvis: Arcuate Uterus, Bilateral ovaries normal, Minimal free fluid in POD

13/8/2019 HSG: Arcuate Uterus, Rt Fallopian tube partially visualized with no spillage noted, Lt Fallopian tube Cornual block with no spillage noted (Fig. 1)

5/ 6/2019 Follicular Study: ovulation occurs on 15<sup>th</sup> day of cycle



5/6/2019 Husband Semen Analysis: Count is 60 million/ ml, Motility Grade IV & III is 65%, No any Pus cell

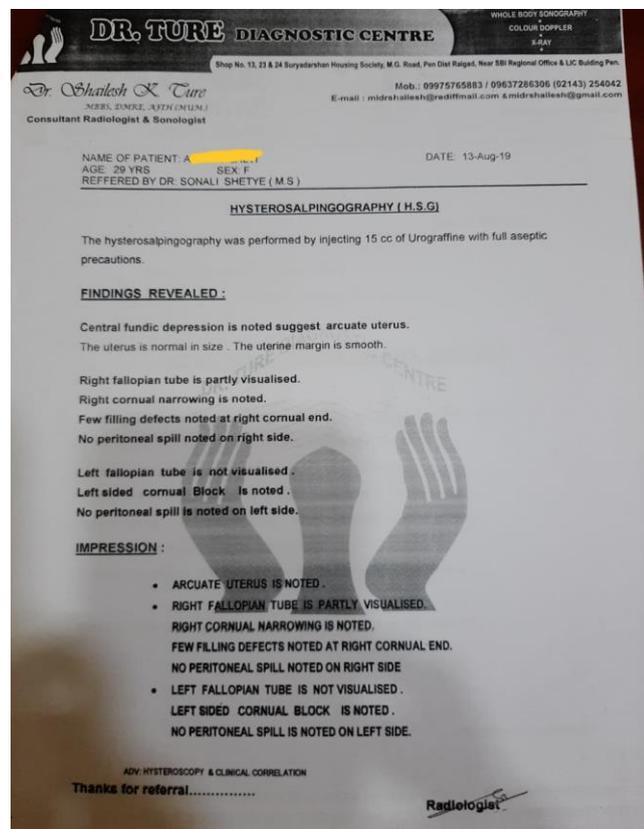


Figure 1 HSG Before treatment

## TREATMENT PROTOCOL

### Drug of choice

1. *Kanchanr Guggulu* 2-2 after lunch & Dinner
2. *Triphala guggulu* 2-2 after lunch & Dinner
3. *Varanadi Kashay* 10 ml with normal water Morning & evening empty stomach  
*Uttarbasti* with *Kshar Tail*

### Drug review

1. *Kanchanr Guggul*<sup>11</sup>

Content: *Guggul* (Comiphora mukula), *Kanchanr* (*Bauhinia variegata*), *Shunti* (*Zingiber officinale*), *Marich* (*Piper nigrum*), *Pipali* (*Piper Longum*), *Haritaki* (*terminalia chebula*), *Bhibhitaki*

(*Terminalia bellerica*), *Amalaki* (*Embllica officinalis*), *Varuna* (*crataeva nurvala*), *Ela* (*Elettaria cardamomum*), *Twak* (*Cinnamomum zeylanicum*), *Patra* (*cinnamomum tamala*)

*Guna* (Qualities):

*Rasa*: *Tikta* (Bitter), *Katu* (Pungent), *Kashay* (Astringent), *Madhur* (Sweet);

*Virya* (potency): *Ushna* (warm);

*Vipak* (Quality after digestion): *Katu* (Pungent)

*Dosha karma*: *Kapha pittahara*.

Properties: *Lekhana*, *granthihara* (Remove Swelling)

*Roga karma*: *Gandamala* (goitor), *apache*, *arbuda* (cancer), *granthi* (cyst), *vrana* (wound healing properties), *gulma*, *kusta* (Skin disease) and *bhagandar* (fistula).

### 2. *Triphala guggul*<sup>12</sup>

Content: *Guggul* (*Commiphora mukul*), *Amalaki* (*Embllica officinalis*), *Bibhitaki* (*Terminalia belerica*), *Haritaki* (*Terminalia chebula*), *Pipali* (*Piper longum*).

*Guna*:

*Rasa*: *Tikta* (Bitter), *Katu* (Pungent), *Kashay* (Astringent), *Madhur* (Sweet);

*Virya* (potency): *Ushna* (warm);

*Vipak* (Quality after digestion): *Katu* (Pungent)

*Dosh Karma*: *Kapha Vata shamak*

Properties: *Lekhana*, *Shophahara*

*Rogkarma*: *Bhagandar* (Fistula), *shoph* (swelling), *gulma* (Abdominal distension), *Arsha* (Piles)

### 3. *Varanadi Kashay*<sup>13</sup>

Content: *Varuna* (*Crataeva nurvala*), *Shtavari* (*Asparagus racemosus*), *Chitrak* (*Plumbago*)



zeylanica), *Sairyaka* (*Strobilanthes ciliates*), *Moorva* (*Chonemorpha fragrans*), *Bilwa* (*Aegle marmelos*), *Vishanika* (*Aristolochia bracteolate*), *Brihati* (*Solanum melongena*), *Bhadra* (*Aerulana*), *Karanja* (*Pongamia glabra*), *Pootikaranja* (*Holoptelia integrifolia*), *Jaya* (*Premnaco rymbosa*), *Hareetki* (*Terminalia chebula*), *Sahijan* (*Moringa oleifera*), *Kush* (*Desmostachya bipinnata*), *Agnimukh* (*Semecarpus anacardium*)

Guna:

*Rasa: Katu* (Pungent), *Tikta* (Bitter), *Kashay* (Astringent);

*Virya* (potency): *Ushna* (warm);

*Vipak* (Quality after digestion): *Katu* (Pungent)

*Dosha karma: Kapha Vata shamak, Pitta Vardhak*

Properties: *Agnideepan* (Improve digestion),

*Medoghna* (Reduce Fat)

*Rogkarma: Sthoulya* (Obesity), *Ajirna* (Indigestion), *Shirshool* (headache), *Adhman* (Stomach gas), *Vidradhi* (Abscess), *Vrana* (Wound)

#### 4. Kshar Tail<sup>14</sup>

Content: *Mulak* (*Raphanus sativus*), *Sarjikshar*, *Yavkshar*, *Vid Lavan*, *Samudralavan*, *saindhav Lavana*, *Saurvachallavan* (5 types of Salts), *hingu* (*Asa foetida*), *Shigru* (*Moringa oleifera*), *Shunthi* (*Zinziber officinalis*), *Devdaru* (Himalayan cedar), *Vacha* (*Acorus calamus*), *Kushta* (*Saussure alappa*), *Rasanjana* (aqueous extract of *Berberis aristata*), *Shatapushpa* (*Anethum sowa*), *Pipalimul* (*piper longum* root), *Musta* (*Cyperus rotundus*), *Kadali Swaras* (*Musa paradisiacal*),

*Madhushukta* (Fermented sweet preparation) boiled with sesame oil.

Guna:

*Rasa: Katu* (Pungent);

*Virya* (potency): *Ushna* (warm);

*Vipak* (Quality after digestion): *Katu* (Pungent)

*Dosha Karma: KaphaVatashamak, Pitta vardhak*

Properties: *Lekhan*

*Rogakarma: Karnaroga* (Pain in ear, tinnitus, itching in ear, worm infection)

#### UTTARBASTI PROCEDURE

*Uttarbasti* procedure has been started a day after cessation of menstruation. As *purvakarma*, the patient has undergone *Snehana* (oleation) with *Mahanarayan Tail*<sup>15</sup>, followed by *Nadi Sveda* (fomentation) with *Dashmool* decoction steam on the lower abdomen, back and lower limbs, before administration of *Uttarabasti*. For sterilization, the peri-vaginal area is cleaned with *Triphala Kvatha*<sup>16</sup> (decoction) known as *Yoni Prakshalana* (vaginal douche). The procedure was carried out with all aseptic precautions. Patients were made to lie in the lithotomic position, external genital region was cleaned with antiseptic solution, and vagina and cervix were visualized with the help of Cusco's speculum. The uterine sounding was done. The *Uttarabasti* cannula, already attached with 5 ml syringe filled with *Kshar Taila* was passed in to the uterine cavity. The drug was pushed above the level of internal os with constant and gentle force, and then the patient was advised to lie in head low position for 45 min. *Uttarabasti* of *Kshar Taila* was given



in 5 ml dose for 6 days<sup>17</sup> in one cycle (after cessation of menses), for three consecutive cycles.

### PRECAUTIONS

During the course of *Uttarabasti*, patients were asked to avoid spicy diet and prohibit coitus.

### ASSESSMENT OF COMPLICATIONS

Lower abdominal pain, per vaginal bleeding, urogenital infection etc. during and after the procedures are the complications occurs in the procedure of *Uttarabasti*.

This patient was tolerated the *uttarabasti* procedure without any complications.

### END POINT

The treatment should be stopped in the occurrence of following conditions.

- (i) If the patient conceived in between the course of the study.
- (ii) If signs of any type of urogenital infections were observed.
- (iii) If heavy per vaginal bleeding started
- (iv) If abdominal pain occurred, troubling patient a lot.

In this case, the patient under study has completed her 3 months cycle of *uttarabasti* without any above complications.

### CRITERIA FOR ASSESSMENT

For assessment of therapy, Hysterosalpingograph was performed after the cessation of menstruation in the fourth cycle.

### RESULT

In this case HSG was performed on 17/02/2020 showing the report of (Fig 2)

- Uterus is normal in size and shape

- Both cornuae & fallopian tubes are well opacified
- Bilateral peritoneal spillage is seen without any abnormal loculation.

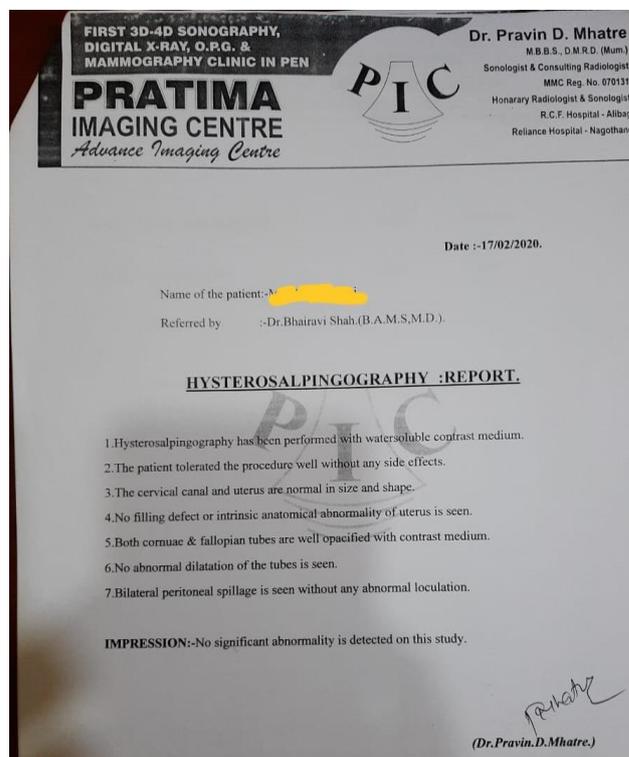


Figure 2 HSG after treatment 16/03/2020 Pregnancy test was done it was positive (Fig 3)

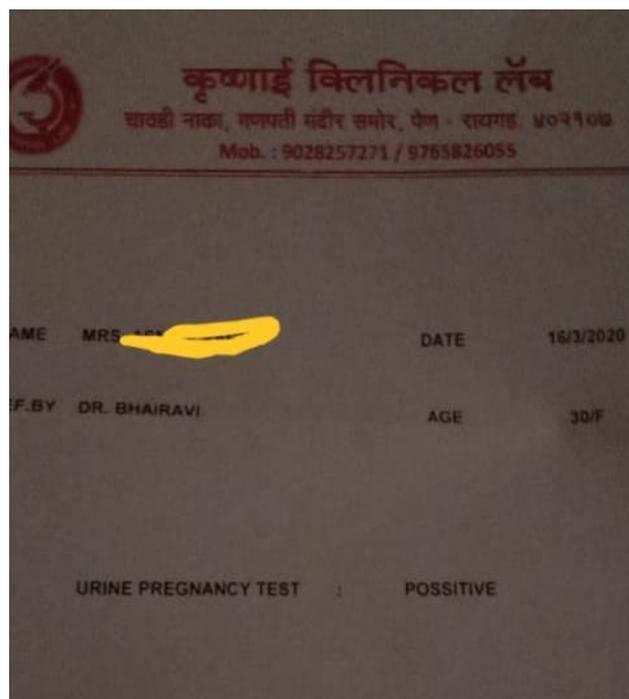


Figure 3 UPT report



## DISCUSSION

In this case, the *prakruti* analysis has indicated that the patient is having *kapha pradhan prakruti* and *Yoniroga's (Diseases of female reproductive system)* which is the indication of vitiation of *Vata*<sup>18</sup>. Hence, it has been concluded that this patient is having a fallopian tubal blockage due to the vitiation of *Kapha* and *vatadosha*.

As *Kanchnar guggul*, *Triphala guggul*, *varandi kashayare* having properties of *kapha-vata shamak*, *ushna*, *Lekhan*, *Shothahar guna*; they are used in this case to balance *kapha* and *vatadosha*.

As *Uttarbasti* directly works on the local area of uterus & fallopian tube; *Kshar Tail* is used for *uttarbasti*. Having *sukshma*, *ushna*, *tikshna*, *snigdha*guna, it helped to relieve the blockage of fallopian tube.

## CONCLUSION

This proves the intrauterine *Uttarabasti of Kshar Tail and Ayurvedic medicines* are as a safe therapeutic measure against tubal blockage. It maintains the functionality of fallopian tube and patient can conceive naturally.



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