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## A Clinical Study of *Apamarga Mula Kalka* in Management of *Bandhyatva*

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### ABSTRACT

Infertility is a big problem of spouse nowadays. Conception depends on the fertility potential of both male and female partner only when there is unprotected sex for one year. In Ayurvedic text like *Charak Samhita*, *Sushruta Samhita*, *Rasratna samuchya* and *Hareet Samhita*, many types of *bandhyatva* have been described. We can correlate infertility with *bandhyatva*. *Acharya Sushruta* described four essential factors for conception i.e. *ritu* (fertile period), *kshetra* (Fertile uterus), *ambu* (female sex hormone) and *beeja* (viable ovum and sperm). In the present study all the factor were taken up for clinical drug trial. *Apamarg* is selected for the study as described by *Acharya Shodhal* in *Gad Nigrah*. *Apamarg* is the lord of all herbs and it cures *Anapatya* as described in *Atherva Veda* and also in *Gad Nigraha*. Hence, *Apamarg* is selected for clinical trial.

### KEYWORDS

*Ritu, Kshetra, Ambu, Beeja, Apamarg, Bandhyatva*



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## INTRODUCTION

Infertility and its treatment can have serious implications on psychological, physical, economic, and social well being for both spouses. Infertility has been ranked as one of the great stressors in married life. It is like a chronic illness that uses a large amount of couple's resources and involves in the expenditure of a considerable amount of time, money, physical and emotional energy. In today's world, infertility is often caused by pressure of modern altered life style and the stress they generate. It is very stressful condition when a women failure to conceive & that condition describe very beautifully by *Acharya Charaka* in *Charaka Samhita*.

**चित्रदीपः सरः शुष्कमधातुधातुसन्निभः |**

**निष्प्रजस्तृणपूलीतिमंतव्यःपुरुषाकृति ||<sup>1</sup>**

In *Ayurveda* infertility is described under the heading of *bandhyatva*. It defines *bandhyatva* as inability to achieve child even after conceiving. *Acharya Sushruta* used term *bandhya* in *yonivyapad*<sup>2</sup> and *Acharya Charaka* described *bandhya* under *beejansh dusti*<sup>3</sup>.

However, conception does not occur due to *beejansh dusti* and *arta vavyapad* but there are other factors responsible for conception. Conception depends on the

fertility potential of both the male & female partner hence the problem of infertility is not directly related to male & female but both partners are equally responsible.

Infertility is defined as even after having normal unprotected coitus during appropriate period of menstrual cycles. Primary infertility denotes that patient who never conceives<sup>4</sup>. Secondary infertility<sup>5</sup> indicates previous pregnancy but failure to conceive subsequently within one or more year of unprotected regular intercourse.

A successful pregnancy is a multistep event. Pregnancy may not happen, even if one of the event or condition is not met or not met in right amount of the time. For successful pregnancy there are four factors as described in *Sushruta Samhita*<sup>6</sup>. Factors are *ritu*, *kshetra*, *ambu* and *beeja*. In which *ritu* is symbol of fertile period, *kshetra* is symbol of genital tract, *ambu* symbolizes proper nutrient fluid, clarity or normalcy of *hridaya* or psychology and *beeja* symbolizes *shukra* and *artva* (semen).

## AIM

To discuss the role of *apaamarg mula kalka* in the management of *bandhyatva*.

Ethical committee approval no is UAU/35/2015.



## MATERIALS AND METHODS

A clinical study was conducted on clinically diagnosed 30 patients of infertility in females in *P.G. Department of Prasuti and Striroga*, Rishikul Govt. Ayurvedic College and Hospital, Haridwar, Uttarakhand. All 30 patients were selected for *Apamarg mula kalka* in the management of female infertility. The route of ayurvedic medicine was oral.

In all factor we selected a women having normal *ritu kala* with any abnormal factor (ovarian, tubal, uterine, cervical) which hindered conception.

### Criterion for selection of drug

The main causative factor for infertility is *Vata*, for which a drug having ability to pacify the vitiated *Vata* is required. *Apamarg* contains *istikt, ushna, katu, kaphanashak, arsh, kandu, udar roganasak, rakta, hridaya, grahi, vamankarak*. Due to these properties *Apamarg* is used for treatment of infertility.

### Selection of cases

Entire study was done in Dept of *Prasuti Tantra* and *Striroga*, Rishikul Govt. Ayurvedic College and Hospital, Haridwar, Uttarakhand. Patient coming with the complaint of *vandhyatva* having regular unprotected coitus from at least

one year, without any specific organic pathology were taken for detailed study.

Complete history of both spouse were taken and general, systemic and gynaecological examination were completed.

### Inclusion criteria

- Patient of child bearing age having complained of failure to conceive within one or more years even after regular unprotected coitus.
- Patient of infertility having normal anatomy and physiology.
- Patient having primary and secondary infertility will be included for the study.
- Patient having infertility because of ovarian factor /cervical factor /tubal factor /uterine factor.
- Unexplained infertility.

### Exclusion criteria

- Patient having any urogenital infection.
- Patient having history of excessive menstruation.
- Patient having chronic debilitating disease, STD, PID, DM, Hepatitis B, T.B, Malignancy.
- Patient having congenital anomaly, chromosomal defect.
- Associated disorder like endometriosis, infection, and endocrinopathies.



- Uterovaginal canal surgery.
- Immunological problem.
- Patient having organic heart disease, chronic renal diseases.
- Patient having evidences of vaginal infection, cervical tear or chronic infection.
- Patient having undue elongation of cervix, abnormal uterine size, position & mobility.
- Presence of unilateral ,bilateral adenaxal masses – fix or mobile
- Presence of nodules in pouch of douglus.

### **Clinical Examination**

Detailed physical examination of all the system of the body with special attention on the condition of reproductive system was performed.

Examination of cases was done under following headings:-

1. General examination: General condition of patient, B.P., P.R., Temp., R.R., anaemia, jaundice, cyanosis, oedema, lymphnode, clubbing or any other special signs were noted.
2. Systemic examination: Examination of R.S., CVS, CNS, GIT, urogenital system, liver, spleen, etc. was done.
3. Specific examination: Local examination of reproductive system was done in detail, P/S examination was done

to know the condition of vulva, vagina, any discharge and condition of cervix.

P/V examination was done to know the consistency of cervix, its size, shape, mobility and consistency of uterus with condition of the adnexae.

### **Investigations**

After detailed history and complete examination cases were subjected to following investigation –

1. Blood Examination:
  - (a) Hb%
  - (b) TLC
  - (c) DLC
  - (d) ESR
2. Urine Examination: For routine and microscopic examination.
3. USG: For condition of uterus and adnexa or for any other pelvic pathology and thickness of endometrium.

### **Method of treatment**

1. Drug *Sweta Apamarg mula*
2. *Kashaya Kalpana Kalk*
3. Drug doses according to *Sharangdhar*
4. *Kalk 1tola (12 gram)/ day for 5 days after menses*
5. Duration For 3 Month in 3 consecutive cycle

### **Probable mode of action of drug**



अपामार्गः सरः तीक्ष्णो दीपनः

कफवातजित् |

निहन्ति दहसिध्मार्शः

कंडूशूलोदरारुचीः ||(म.नि.अभयादिवर्ग

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*Apamarg* has property of *sara guna* which means easily mobile in all over body, *tikshana guna* means *pittakarak*, *kapha-vatanashan*, *deepan* means *agniverdhak* property, *kaph dosh* and *vata dosh nashak* property and also *kandu*, *shula*, *apchinashan* property. *Sarakguna* of *apamarg* enhances the proper function of *prakritapanvayu*. *Apanvayu* is responsible *shuk- rartvanishkrimanat*, means the work of *apan vayu* is to regulate menses. With this property *apamarg* regulate menses & reduces pain during menses by normalising *vata*.

*Tikshnaguna* of *apamarg* enhances *pitta* which is responsible for *artva* formation. As we know *artva* is *agnay* and according to *samanya-vishesh sidhant* *apamarg* enhances the formation of *artva* and normalize the quantity and quality of *artva*.

*Ushnaguna* of *apamarg* promotes normal flow of menstrual blood i.e. *ushna guna* of *apamarg* is responsible formation of menstrual blood. *Katu rasa* of *apamarg* is

responsible for following action as described by *Acharya Charaka*:

- *Shonit sangha tbhinnati* - It is responsible for anti-coagulant action of blood (menstrual blood).
- *Margan-vivrunoti*- By virtue of *katu rasa apamarg* is responsible for opening of channels & dilates the blood vessels.

Due to *kaphnashak* property it will clear all channel by removing *margavrodh* and due to *ushna guna* it normalizes vitiated *vata*. After normalising the *vata* and *kapha dosha*, it increases vitality power of reproductive organ and prepare *kshetra* for conception because *kapha* has an anabolic action on body. It acts as a uterine strengthen tonic.

## CONCLUSION

The results were not satisfactory in reference to conception but drug *apamarg* has shown good results in increasing size of growing follicles. Follicular study shows that drug can act as initiating factor for increasing size of follicles. 6.66% follicles were small in size and unruptured. But after treatment, 13.33% follicles were normal in size which is improvement. 83.33% follicles were normal in size & unruptured which was improved up to 86.66%.



- 70% of patients had *Vata-pitta Prakriti*.
- 6.66% patient had *vata-kapha prakriti*. *Apamarg* is *vata-kapha nashak* and *ushna, tikshana* in property. Rasa of *apamarg* is *katu* and *tikta* which is responsible for normalize the vitiated *vata-kapha*. *Apamarg* showed good work on *vata-kaphaj samprapti* of infertility and women *vata-kaphaj prakriti*.



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