ROLE OF NARAYANA TAILA MATRA BASTI IN INFERTILITY W.S.R. TO ANOVULATORY FACTOR

DEPARTMENT OF STRIROGA & PRASUTI TANTRA

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WHY THIS TOPIC ...???
Infertility is a disease of the reproductive system defined by the failure to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse.

- Childlessness brings:
  - Marital disharmony
  - Social rejection: Results in Anxiety and Disappointment
  - Increased Anxiety: Hampers sexual functions
Most of couples (84 out of 100) conceive within a year. About 15% of all couples experience difficulty in conceiving.

Male is directly responsible in about 30-40%; Female in 40-55%. Both are responsible in about 10% cases. The remaining 10% is unexplained.
Female Infertility Factors

- Ovulatory dys.: 40%
- Tubal and Pelvic: 40%
- Unusual: 10%
- Unexplained: 10%
ABEEJOTSARGA

- Revati Jataharini
- Ashtartava Dushti
- Avarana
- Beeja Dushti
- Vandhya Yoni Vyapad
- Asrik Dosha
- Artavavaha Srotas Viddhata
Anovulatory factor is an important subset in infertility among women, accounting about 40% of cases. In such patients, **Ovulation induction is a rescuer.**

Hormonal therapy, In-Vitro Fertilization (IVF) - Embryo Transfer (ET), Gamete Intra Fallopian Transfer (GIFT) etc.
Unsatisfactory results, enormous expenses and lots of side effects like **ovarian hyper stimulation**, frequent abortion, multiple gestations and major long term possibility of ovarian cancer.

It is therefore crucial to consider alternative methods to control Infertility.
Act of ovulation is regulated by Vata especially Apana cures all the diseases of Vata. So it may act on Anovulation.

बस्तिर्वातहरवणवां। -(Ch. Su. 25/40).

**Why Matrabasti?**

It is one type of Anuvasana basti which is indicated in Infertility.

- अरुपपुष्पनष्टपुष्पनष्टबीजाकर्मण्यबीज परीता अनुवास्या इति॥
  -Ka.S.Si.7/11.

- जनयेदप्रजानां च प्रजा स्त्रीणां तथा नृणाम्॥
  -Ch.Si.4/23.

- नारीणामप्रजातानां नराणां चापि अपत्यदा:।
  उभयार्थकरा दृष्टा: स्नेहवस्तिनिरन्तिः॥च.सं.सि.१२/२२
Ovulation is under the control of Vata. Narayana Taila cures all the diseases of Vata including Vandhyatva. So it will definitely acts on Anovulation.

ततैलं नावनंध्यक्षगो पाने बस्तौं च योजयेत्।
अस्य प्रभावाद् वन्ध्यापि नारीपुत्रं प्रसूयते॥

Aims and Objectives

To evaluate the efficacy of *Narayana Taila Matrabasti* on anovulation.
Study was started after obtaining Ethical clearance from the Institutional Ethics Committee, IPGT&RA, Jamnagar.
The Patients were selected from the O.P.D of Stri Roga and Prasuti Tantra Department I.P.G.T. & R.A. Jamnagar.

The drug *Narayana Taila* was prepared in the Pharmacy of Gujarat Ayurveded University, Jamnagar.
Clinical study was conducted on patients of age group 19-40 years having complaint of failure to conceive for one or more years with two consecutive anovulatory cycles in serial trans-vaginal sonography.
Patients having infertility due to Tubal blockage, Cervical factors and other causes were excluded.

Disorders of Reproductive tract like T.B., Carcinoma and congenital deformities of reproductive tract were excluded.

Patients suffering from the known chronic illness, Cardiac diseases, Thyroid disorders were excluded.
Diagnostic Criterion

Routine Haematological Examination
Hb, TC, DC, ESR, PCV.

URINE:-(1) Routine (2) Micro

Trans Vaginal Sonography (B.T. & A.T.) for Ovulation Study. B.T. for 2 months
A.T. for 2 months
Production of Ova & Ovulation

Germinal cell (diploid)

Primary follicles

Primary oocyte (diploid)

Fertilization

Developing follicle

Mature follicle with secondary oocyte

Ruptured follicle

Corpus luteum

MEIOTIC I

First polar body

Secondary oocyte (haploid)

MEIOTIC II

Second polar body

Ovum (haploid)
Multiple small follicles

Follicles 12-16 mm size

Well developed follicle

Follicular cyst
Trans vaginal sonography is basic and primary investigation for this study. It was done from 8th – 9th day of menstrual cycle up to at least 22nd day of cycle to diagnose anovulation.

In all patients, for consecutive 2 cycles Serial Sonography was carried out to establish anovulation from both the ovaries.
# Drug Selection

<table>
<thead>
<tr>
<th>TAILA</th>
<th>NARAYANA TAILA</th>
</tr>
</thead>
</table>
| • The choice of a Taila or Ghrita depends on the accompanying Dosha.  
  • If Vata is associated with Kapha the Taila has to be preferred. | • Many classics have mentioned effectiveness of Narayana Taila in case of Vandhyatva. |
नारायण तैल

अश्वगन्धा बलां बिल्वं पाटला बृहतीद्वयम्।
श्वदंडप्राक्तिभला निम्बं श्योनाकं च पुनर्नवा॥

प्रसारिणीग्निमथं कुर्याद् दशपलं बृधक्।
चतुर्द्राौं जले पकत्वा पादशेषं श्रुतं नयेत्॥

तैऱवढके न सांय ज्य शतर्यवा रसवढकम्।
क्षुऩे तर च गोक्षिं तैलात् तस्माच्छतुर्गुणम्॥

शनैविरिचयेदेभि: कल्पैर्दिपलिकै: पृथक।
कुष्ठैला चन्दनं मूर्वा वचामांसी सर्सन्धेवेः॥

अश्वगंधा बलारास्ना शतपुष्पेन्दारुभिः
पर्णिचतुष्प्येनैव तगरेण च साधयेत्॥

Sha. S. Mad Kha 9/101-106
According to AFI for approx 2.5 kg of *Narayana Taila*:-

- Tila Taila 3.072 kg. Oil;
- 96 gms Kalka Dravyas each;
- Shatavari Swarasa 3.072 kg;
- Godugdha 12.288 litres,
- *Kwatha Dravyas* 480 gms each in 49.152 litres of water reduced to ¼ i.e 12 litres.
NARAYANA TAILA
Basti Procedure

**Purva Karma**
- Abhyanga with Bala Taila on katiprushtapadaparshvaaadhodara for 10 minutes.
- Swedana by Nadisweda

**Pradhan a Karma**
- Narayana Taila Matrabasti through anal route in Left lateral position

**Pashchata Karma**
- Rest in supine position for at least 30 minutes
- Swedana
Properties of Narayana Taila

- **Rasa**
  - Katu
  - Tikta

- **Guna**
  - Laghu
  - Snigdha

- **Veerya**
  - Ushna

- **Vipaka**
  - Katu

- **Doshakarma**
  - Vatakapha shamaka
<table>
<thead>
<tr>
<th>Drug</th>
<th>Dose</th>
<th>Route</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Narayana Taila</em></td>
<td>60 ml</td>
<td>Rectal route</td>
<td>After cessation of menses for 8 days in two consecutive menstrual cycles</td>
</tr>
<tr>
<td><em>Matrabasti</em></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
NARAYANA TAILA

Rasa
- Katu
  - Deepana
  - Pachana
  - Kaphahara
- Tikta
  - Vatahara
  - Srotoshodhana

Guna
- Laghu
  - Kaphahara
  - Srotoshodhana
- Snigdha
  - Vatahara
  - Pachana

Veerya
- Ushna
  - Pachana
  - Vilayana

Vipaka
- Katu
  - Srotoshodhana

Karma
- Anulomana
  - Deepana
  - Pachana

Amapachana, Vata kapha shamana
  - Remove Sanga & Avarvana
  - Proper function of Vayu
  - Regulation of Beeja Granthi karma
  - Beejotsarga
Scoring Pattern of Follicle

0 = <12 mm
1 = 12-19 mm
2 = 19-23 mm
3 = Ovulated
## Assessment of overall effect of the therapies

<table>
<thead>
<tr>
<th>Types</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Conceived</td>
<td>The patient’s husband otherwise normal was conceived after the treatment.</td>
</tr>
<tr>
<td>(ii)</td>
<td>Complete cured: Ovulation occurred.</td>
</tr>
<tr>
<td>(iii)</td>
<td>Improved: Ovulation not occurred but only improvement in the size of follicles i.e. 12-19 mm</td>
</tr>
<tr>
<td>(iv)</td>
<td>Unchanged.</td>
</tr>
</tbody>
</table>

### FOLLOW UP

Follow up study was conducted for one cycle after completion of the treatment.
RESULTS
<table>
<thead>
<tr>
<th>Group</th>
<th>Total Registered</th>
<th>Completed</th>
<th>Discontinued</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Narayana Taila Matra Basti</em></td>
<td>11</td>
<td>11</td>
<td>0</td>
</tr>
</tbody>
</table>
FOLLCULAR SIZE (B.T.)

Narayana Taila Matra Basti

- <12mm: 81.82%
- 12-19mm: 0%
- 19-23mm: 18.18%
- Ovulation cystic: 0%

Narayana Taila Matra Basti
Follicular Size (A.T.)

Narayana Taila Matra Basti

<table>
<thead>
<tr>
<th>Size</th>
<th>In %</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;12mm</td>
<td>27.28</td>
</tr>
<tr>
<td>12-19mm</td>
<td>9.09</td>
</tr>
<tr>
<td>19-23mm cystic</td>
<td>0</td>
</tr>
<tr>
<td>Ovulation</td>
<td>63.63</td>
</tr>
</tbody>
</table>

Narayana Taila Matra Basti
• In the study, ovulation was achieved in 63.63% of the patients.

• 9.09% of patients conceived after one cycle of *Matra Basti*. 
Probable mode of action of *Matra Basti* (Ancient View)

- **Matra Basti**
  - **Guda** (Sharira Mula having both local and systemic effect)
  - Normalizes the **Apana Vayu** (Sthana Adhopradesha)
  - **Vata Anulomana** leading to the extrusion of ovum from the follicle & Ovulation
CONCLUSION
Abeejotsarga (Anovulation) is mainly due to Vata Dushti.

As the Basti is the Pradhana Chikitsa in Vata Vikara it definitely acts on Anovulation.

Matrabasti is more convenient form of Basti as there is no need of any restrictions during its application.

Narayana Taila Matra Basti is effective treatment modality in infertility due to anovulatory factor.
Abeejotsarga

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