

CONCEPT OF GARBHA SAMBHAVA SAMAGRI IN INFERTILITY A CRITICAL REVIEW

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ABSTRACT:

In today's era infertility is one of the burning issue; because of unhealthy food habits and life style. In *Ayurveda*, the cause of infertility can be explained under *Garbha sambhava saamagri* which means the factors essential for conception. These are essential factors to provide optimal health to mother and offspring. Among the four *saamagri* explained, *Kshetra* and *Beeja* carries the prime importance as the other two factors i.e. *Ritu* and *Ambu* can be included under the *Kshetra* and *Beeja* itself. The understanding of *Garbha sambhava saamagri* and its applied knowledge can be used definitely to diagnose and treat the infertile couples.

KEY WORDS:

Garbha sambhava saamagri, Infertility.

INTRODUCTION:

Every creature in this universe, tries to keep up its progeny. In order to fulfill this achievement, it is essential that both the parents should be fertile. Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus. One in every four couples in developing countries had been found to be affected by infertility.

Acharya Sushruta mentioned that in order to fulfill the achievement of *Garbha*, the four factors i.e. *Ritu*, *Kshetra*, *Ambu*, *Beeja* should be adequate¹.

Acharya Vaghbata explained only two factors i.e. *kshetra* and *Beeja*². Similarly *Acharya Kasyapa* explained in *shareera sthana*, only two factors i.e. *Ritu* and *Beeja*³.

RITU: *Ritu* means *Ritukala*. It extends for twelve to sixteen days after

menstruation during the reproductive age, in a normal menstrual cycle. In this period, if *purusha beeja* (seed) deposited; likely to bear the fruit (conception)⁴. So *Ritukala* refer to the period of maximum fertility.

As *Ritukala* concludes it leaves woman with constricted cervix hindering the entrance of *Beeja* in to *Garbhasaya* just like lotus closes after sunset⁵.

KSHETRA: *Kshetra* means *Garbhasaya*.⁶ Being the fertile land of children, the woman is considered as *Kshetra* and is the best of aphrodisiacs. *Shukra* (seeds) enters in to female hence she is called as *Kshetra*⁷.

It can be considered as female reproductive system. From ovary to the vulva every part of reproductive system should be defect free. That means, if any *Kshetra vikruti* there will be defective fertilization and implantation.

AMBU: *Dalhanacharya* considered *Rasadhatu* as *Ambu*⁸; indicates *prinana* (nourishment) at different stages. If there is no proper nourishment, then the conception also will not be there.

BEEJA: The term *Beeja* represents the *Shukra* and *Artava*⁶. Mother and father providing gametes can be claimed as chief contributors but not sole

participants for the formation of *Garbha*. For conception healthy sperm and ovum are must. If any defect in these, may lead to infertility or congenital anomalies of foetus.

In *Ashtanga Hridaya*, *Vaghbatacharya* added three more factors like *Marga, Hridi* and *Vata*⁸. Here *marga* is the disease free genital passage. *Hridi* is the normal psychological status. *Vata* is also necessary in the formation and development of *Garbha*.

DISCUSSION:

Among all above *Garbha sambhava saamagri*, *Kshetra* and *Beeja* are important² (*A.S.SHA*). All other factors can be considered under the *Kshetra* and *Beeja*. In this context *Ritukala* is characterized with proliferation of endometrium followed by ovulation i.e. *Garbhagrahana samartha kaala*, the most fertile period. The hypothalamus-pituitary-ovarian axis is the system which stimulates and regulates the production of the hormones needed for the normal sexual development and reproduction. Ovaries are under the direct influence of hypothalamus and pituitary glands through a complex system of positive and negative feedback mechanism. The

hypothalamus produces luteinizing hormone-releasing hormone (LHRH). That, in turn stimulates the pituitary gland to produce and release two gonadotropic hormones, follicular stimulating hormone (FSH) and luteinizing hormone (LH). The action of this hormonal system is cyclical. Following the ovulation, the dominant follicle becomes the corpus luteum, which begins to secrete progesterone and contributes to the production of estrogen. The augmented levels of these two hormones then sequentially transform the endometrial lining of the uterus into secretory lining in preparation for pregnancy.

Ovary is the heart of reproductive system for fertility status. Proper and timely ovulation is the key factor for pregnancy to occur. Any condition leading to disturbances to HPOA axis and subsequent irregularity in secretion of gonadotropins triggers anovulation and infertility.

While explaining *yonivyapad samanya nidana*, Acharya Charaka has mentioned *pradushta artava* and *beeja doshas* are the main *hetus*⁹. Among twenty types of *yonivyapad*, few interfere the conception.

Here *artava* can be considered as ovum. *Artavavaha srotas* includes the ovary along with their blood supply¹⁰. In the opinion of Acharya Sushruta, *vandhya* is a woman who has lost her *Artava* i.e. menstruation¹¹. It may be due to trauma or injury to the *Artavavaha srotas* or *phalasrotas*. If ovary or ovarian vessels are injured, it will result in amenorrhoea. This etiology somewhat resembles the ovarian amenorrhoea of the modern science. *Yonivyapad* such as *Arajaska*, *Shandhi*, *Shushka*, etc are marked by amenorrhoea and cause infertility. Acharya Kasyapa mentioned *Pushpagni jataharini*, here the women of reproductive age suffering with regular but fruitless cycle (*vrutha pushpam tu ya nari yadha kalam prapashyati*), obesity (*sthoola*) and hirsutism (*lomasha ganda*). These all are the typical symptoms of Polycystic ovarian syndrome (PCOS). At present PCOS is an emerging health problem due to sedentary life style and westernized food habits. This is the most common cause of infertility in present era. So all these we can include under ovarian factors and can be considered under *Beeja*.

Both male and female gametes can be considered as *Beeja*. *Shukra kshaya*, *Ksheenaretas*, *Alparetasa*, etc can be correlated as oligospermia. *Doshaja shandtva* causes *shukrakshaya*, due to vitiation of *dosha* (*ashta shukra doshas*). *Vyadhijanimitashandtva* in which diseases person becomes weak and it lead to low sperm count. E.g varicocele, disease of testicles, etc. *Acharya Sushruta* quoted some terms like *Nirbeeja* and *Abeeja* and *Acharya Vaghbata* during explanation of *napumsaka lakshana*, *dushta shukra* respectively. Here *Nirbeeja* means absence of *shukra* and that of *Abeeja* means as one which is incapable of producing embryo. Meaning of this term indicates about Azoospermia. Absence of sperm, production of immature, immotile or dead sperms causes improper migration of sperms in the uterine cavity and then to the fallopian tube. This leads imperfect or no sperm penetration in to ovum result failure to occur pregnancy. The main causes of male infertility in today's era are general health and lifestyle issue such as excessive smoking, alcohol intake, degrading environment,

changes of food habits and deskbound work, stress etc.

Healthy reproductive system referred to as *kshetra* in *Ayurveda*. *Kshetra* also means the anatomical perfection and positioning of the reproductive organs. Any congenital uterine abnormalities such as bicornuate, arcuate, septate, didelphys uterus, uterine fibroid, and polyp may be the cause of infertility. History of myomectomy, lead to infertility due to inadequate endometrium for implantation. *Antarmukhi*, *Suchimukhi*, *Prasramsini*, *Mahayoni* these can includes under *kshetrajavikruti* and all these are characterized with displacement of uterus. *Garbhasaya Arbuda* is one among the most burning issue in today's era. This is mainly due to the sedentary life style like lack of exercise, intake of junk foods and hormone injected fruits and vegetables, intake of contraceptive pills, stress, also environmental influences, etc which leads to decreased body immunity and results in diseases like uterine fibroid etc. Uterine fibroids rank as the major reason for hysterectomy for women of their reproductive age.

Similarly *ambu* is derived from *aahara rasa*⁶. From *rasa dhatu*, the *rakta* named *raja* is formed (*ksheera dadhi nyaya*). *Rakta* reaching uterus and coming out of three days in every month is called *artava*. The *raja* is formed from the essence part of *rasa* i.e. *Raja* is nothing but the *upadhatu* of *rasa*. This *Ambu* can correlate with the blood and inter cellular fluid of endometrial tissue. Before implantation blastocyst obtains its nutrition from the uterine endometrial secretions called uterine milk. The endometrial stromal cells contain extra quantities of glycogen, protein, lipids and minerals necessary for conceptus. That's why if no proper nourishment even though in pregnancy leads to abortion. Same condition happening in *putipraja*, it appears to be description of genetic abnormality responsible for weak body-built of the woman who has repeated stillbirths in later life. Also the decreased level of Hb leads amenorrhoea. *Artava kshaya* and *ksheenartava* is due to deficiency of either *rasa* or *rakta*.

According to modern science, cervical, uterine, tubal, and ovarian factors are the main causes of infertility. Among

this first three we can consider under *kshetra vikruti* and last one under *beeja vikruti*. Male infertility generally depends upon the quality and quantity of sperm, and can include under *beeja vikruti*.

In a few cases, there is no detectable cause of infertility. All tests are normal for both – a male and a female partner, but they fail to conceive. So, we call it unexplained or idiopathic infertility.

The specific acts done to achieve conception are successful only in those couple who possess *avyapanna sukra* (sperm), *artava* (ovum) and *garbhasaya* (uterus).¹²

By this we can tell *Kshetra* and *Beeja* are important for the conception.

CONCLUSION

Infertility is a very depressive state for a couple as well as for the family. All the factors responsible for infertility which are explained in modern science can be summarized under the four factors told by *Acharyas* i.e. *Garbhasambhava saamagri*. Among the four saamagri explained, it is concluded that *Kshetra* and *Beeja* are the most important than the other two factors i.e. *Ritu* and *Ambu*. It can be included under the *Kshetra* and *Beeja* itself. So

they should be keenly investigated for the cause in case of infertility. Proper understanding of these factors can give healthy progeny.

REFERENCES

1. Sushruta samhita of susruta with the Nibandhasangraha commentary of sri Dalhanacharya & Nyayachandrika panjika of sri Gayadasacharya on nidanasthana edited by Vaidya jadavji trikamji acharya and the rest by Narayan ramacharya kavyatirtha, edition 2014, chowkhamba krishnadas academy Varanasi, Shareera sthana, chapter 2/33, page 348.
2. Prof. Jyotir Mitra, Ashtangasamgraha of vriddha vagbhata with the shashilekha Sanskrit commentary by Indu , edition 2012, Chowkhamba orientalia Varanasi, Shareera sthana , chapter 1/65, page 274.
3. Preconceptional care in Ayurveda by Dr. V. N. K. Usha, edition 2007 chowkhamba Sanskrit pratishthan Delhi, page no 10.
4. Sushruta samhita of susruta with the Nibandhasangraha commentary of sri Dalhanacharya & Nyayachandrika panjika of sri Gayadasacharya on nidanasthana edited by Vaidya jadavji trikamji acharya and the rest by Narayan ramacharya kavyatirtha, edition 2014, chowkhamba krishnadas academy Varanasi, Shareera sthana, chapter 3/11, page 351.
5. Sushruta samhita of susruta with the Nibandhasangraha commentary of sri Dalhanacharya & Nyayachandrika panjika of sri Gayadasacharya on nidanasthana edited by Vaidya jadavji trikamji acharya and the rest by Narayan ramacharya kavyatirtha, edition 2014, chowkhamba krishnadas academy Varanasi, Shareera sthana, chapter 3/9, page 351.
6. Sushruta samhita of susruta with the Nibandhasangraha commentary of sri Dalhanacharya & Nyayachandrika panjika of sri Gayadasacharya on nidanasthana edited by Vaidya jadavji trikamji acharya and the rest by Narayan ramacharya kavyatirtha, edition 2014, chowkhamba krishnadas academy Varanasi, Shareera sthana, chapter 2/33, page 348.
7. Agnivesha charaka samhita chikitsasthana, commentary ayurvedadeepika of chakrapanidatta & jalpalkapataru of sri gangadara kaviraja edited by kaviraja narendranath & balachandra sen gupta reprinted 1991

published by chowkhamba orientalia
Varanasi up,chapter 2/1/5.

8. Prof.K.R.Srikantha Murthy,
Ashtangahridaya vol-1,edition 2007,
Chowkhamba krishnadas academy
Varanasi, Shareera sthana , chapter1/8,
page 360.

9. Agnivesa's Charaka samhita based on
chakrapani datta's ayurvedadipika by
Dr.Ram Karan Sharma and Vaidya
Bhagwan Dash volume v, reprint2010,
chowkhamba Sanskrit series office,
varanasi chikitsa stana, chapter 30/7,8,
page no 130.

10. Ayurvedic concepts in gynaecology by
Dr.Nirmala c joshi,Reprinted:2013,
chowkhamba Sanskrit pratishthan
Delhi, page no 5.

11. Sushruta samhita of susruta with the
Nibandhasangraha commentary of sri
Dalhanacharya & Nyayachandrika
panjika of sri Gayadasacharya on
nidanasthana edited by Vaidya jadavji
trikamji acharya and the rest by
Narayan ramacharya kavyatirtha,
edition 2014,chowkhamba krishnadas
academy Varanasi, Uttara tantra,
chapter 37/10, page 669.

12. Agnivesa's Charaka samhita based on
chakrapani datta's ayurvedadipika by
Dr.Ram Karan Sharma and Vaidya

Bhagwan Dash volume II, reprint2010,
chowkhamba Sanskrit series office,
varanasi shareera stana, chapter 8/3,
page no 463.

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