A ROLE OF NASYA IN THE MANAGEMENT OF ANOVULATORY CYCLES

*Dr. Shrutika Surlake, **Dr. Vishnu Bawane
* Assistant Professor, Dept.of Prasutitantra Striroga, B.R.Harne Ayurvedic Medical College, Karav, Vangani, Thane
** Professor & HOD, Dept.of Prasutitantra Striroga, B.R.Harne Ayurvedic Medical College, Karav, Vangani, Thane

Abstract

Infertility (Stree Vandhyatva) is defined as not being able to get pregnant despite having frequent, unprotected coitus for at least a year for most couples. Among the three eshanas that are described in our context, Putraishana-aspiration for the child is the strongest desire of all the married couple. Beeja especially streebeeja is the only entity which don’t have any alternative as it is the principle component which resembles a family in future as their own being. The beej dushti is related with anovulation. Ovarian factor contribute 15-25% and is the second common cause of infertility. As compared to modern science, this beej dushti can be well treated with Nasya karma explained in Ayurveda. Nasya means nothing but administration of medicine through nose. Hypothalamus plays an important role in infertility due to anovulation. Nasya acts on hypothalamus as well as pituitary gland.

Keywords: Nasya, Anovulation, Vandhyatva.

Introduction

According to Acharya Sushruta, Garbhhasambhav samigri explained in the ayurvedic texts i.e. Ritu, Kshetra, Ambu & Beeja [1, 2] are of prime importance for conception. Here, the term Beeja is considered as Antahpushpa [3] which is ovum. Ovulatory cause is an important subset in infertility among women, accounting about 40% of cases. Kapha and Aama form the avarana in the path of vata to bring out bhedan i.e. ovulation which is one of the karma of vata Prakruta Vata is responsible for the Beejotsarga. Vata predominance tridosha dushti is responsible for Abeejotsarga. Pitta also contributes to ovulation in which it is essential for transformatory changes (Pachana). Nasya is considered as a gateway of Shira (head). The procedure in which, medicines like Kwatha, Swarasa, Kalka, Sneha etc. are administered through nasal route is known as Nasya Karma. In Ayurveda various treatment modalities including Nasya is mentioned for the treatment of infertility due to Abeejotsarga. Nasya stimulates olfactory nerves and limbic system which in turn stimulates hypothalamus leading to stimulation of GnRH neurons. This may regularize GnRH pulsatile secretion which in turn triggers proper gonadotrophin secretion leading to Ovulation.

Concept of Ovulation

Ovulation- The rupture of mature follicle and the release of the secondary oocyte into the pelvic cavity usually occurs on day 14 in a 28 day cycle.

- Gonadotropin releasing hormone (GnRH) secreted by the hypothalamus
- Controls the ovarian and uterine cycles
- Stimulates the release of FSH and (LH) from anterior pituitary.
- FSH stimulates development of ovarian follicles secretion of estrogens.
- At midcycle, LH triggers ovulation.

The high levels of estrogens during the last part of the e-ovulatory phase exert a positive effect on the cells that secret LH & gonadotropin-releasing hormone (GnRH) and cause ovulation. Olfactory stimuli denoting pleasant or unpleasant smells transmit strong signal components directly and through amygdaloidal nuclei into hypothalamus [4]. Olfactory nerves are connected with the

[107]
higher centers of brain i.e. limbic system consisting hypothalamus [5].

Common factors responsible for Anovulation-
1) Hypothalamic-pituitary dysfunction-
   Polycystic ovary syndrome - PCOS, CAH [Congenital Adrenal Hyperplasia]
2) Hypothalamic-pituitary failure-
   Sheehan’s syndrome (panhypopituitarism), Kallman’s syndrome
3) Hyperprolactinaemia without SOL in the hypothalamic-pituitary region
4) Ovarian Failure
5) Hyperprolactinaemia with a space occupying lesion (SOL) in the hypothalamic-pituitary region
6) Congenital or acquired genital tract disorders

Nasya Karma-
Nasikaye hitam tatra bhavo va yata Nasadesaha | -(Vachaspati)

Nasya also known as-
1. Shirovirechana
2. Nasya
3. Sheersha Virechana
4. Nastaha Karma
5. Nasta Prachchardana
6. Moordhavirechana
7. Navana
8. Shirovireka

Mode of action of Nasya [6]

Hypothalamus

Receives input from the limbic system, cerebral cortex, thalamus, reticular activating system

Drug introduced through nasal route enters the CNS by two ways

1. Through nasal mucosa:
2. Vascular pathway

Nasya preparations in Anovulatory cycles
1. Aguruvadi tail [7]
2. Atibala taila
3. Amrutadya tail
4. Asthaydi tail
5. Narayan tail [8]
6. Prasarini tail
7. Phaltrikadi tail
8. Bala tail [9]
9. Mahanarayan tail
10. Mahalaxminarayan tail
11. Yevadi tail [10]
12. Rasna tail
13. Shatpak sukumar tail
14. Sahachradi tail

Conclusion
Pituitary and Hypothalamus have their anatomical positions in the caput which is functional area of nasya. Nasya develops stimulus to the GnRh neurons and also gives strength to the constituents present in the brain for their normal functioning. For normal ovulatory cycle, proper functioning of hypothalamo-pituitary-gonadal(ovarian) axis is must. So, to treat infertility due to anovulation, the important factors responsible are FSH & LH deficiency. Hypothalamus and anterior pituitary gland are essential for FSH & LH secretion and stimulators effect to neuro-secretory cell, this is possible through nasya. So nasya will have great therapeutic effect on infertility due to anovulatory cycle.

Funding
No funding

Conflict of Interest
Authors are declared that no conflict of interest

Informed Consent & Ethical Statement
Not applicable

Author Contribution
All authors are contributed equally.

References
5. B. D. Chaurasia, Human Anatomy, Volume 3, chapter 15, page-227