



TANTIA UNIVERSITY JOURNAL OF HOMOEOPATHY AND MEDICAL SCIENCE

www.tjhms.com

REVIEW ARTICLE

HOMOEOPATHIC APPROACH IN FEMALE INFERTILITY- A REVIEW

Neha Nagar¹, Anupriya², Kanak Singhal³

¹Assistant Professor, ³Intern, Bakson Homoeopathic Medical College & Hospital, Greater Noida, Gautam Buddha Nagar, Uttar Pradesh., ²Professor, Sri Ganganagar Homoeopathic Medical College Hospital and Research Institute, Sri Ganganagar, Rajasthan

Abstract

Received- 15/09/2023
Revised- 28/09/2023
Accepted- 30/09/2023

Key Word- Female Infertility, Homoeopathy, Endometriosis, Pelvic inflammatory disease.

Corresponding Author:- Neha Nagar, Assistant Professor, Dept . of repertory, Bakson Homoeopathic Medical College & Hospital, Greater Noida, Gautam Buddha Nagar, Uttar Pradesh.

Infertility is the inability of a couple to achieve conception after one year of unprotected coitus. Today almost one in six couples face difficulty in conceiving. Homoeopathy is often effective in curing in- fertility where conventional medicine either fails or is expensive or requires operative procedures and hormonal therapy with their added complication and side effects. By this review article we want to evaluate the efficacy of homoeopathic constitutional similinum in the management of female infertility.

INTRODUCTION

The prevalence of female infertility is rising quickly among Indians, which is also indicative of what is happening globally. Nearly one in six couples today have trouble getting pregnant (ref). After one year of unprotected coitus, infertility is

the failure of a couple to conceive.ⁱ

Ovulatory dysfunction accounts for between 36 and 44% of infertility in womenⁱⁱ. One of the most common diseases affecting women during their fertile years is endometriosis. In addition

to surgical and medical procedures, hormonal therapies, etc.ⁱⁱⁱ

Homeopathy is a holistic form of medicine that treats the whole person in order to treat disease. They can correct hormonal system misalignments and return them to normal. The straightforward homeopathic process efficiently and efficiently omits the laborious steps that come after the standard infertility treatments.

To be more precise, complete hormonal balance significantly raises the likelihood of conception without the negative side effects of drugs, devices, or invasive procedures. Infertility is described as the inability to conceive despite engaging in routine unprotected sex for a year or longer.

TYPES

Infertility comes in primary or secondary forms. Secondary infertility happens when at least one prior pregnancy has been achieved, whereas primary infertility happens when a person has never had a pregnancy.^{iv}

ETIOLOGY

Ovulatory Dysfunction: Primary hypothalamic pituitary dysfunction (caused by stress, Sheehan's syndrome, pituitary adenoma, or other pituitary tumours, among other things), intense exercise, eating disorders, and other factors. Polycystic ovary syndrome,

hyperthyroidism or hypothyroidism, hyperprolactinemia, hormone-producing tumours of the ovary or adrenal glands, Cushing's disease, congenital adrenal hyperplasia, and hormonal imbalances brought on by autoimmune, genetic, surgical, idiopathic, drug, or radiation-related conditions.

Fallopian tube anomalies: Proximal tubal blockage is brought on by mucus plugs, amorphous debris, or uterotubal ostium spasm. Distal tubal obstruction causes hydrosalpinx, which in turn prevents sperm from migrating and causes tubal contents to flow backward into the endometrial cavity, creating an unfavourable environment for embryo implantation.

Pelvic Adhesions: Pathogens like Chlamydial or Gonorrhoea, Endometriosis, Pelvic Tuberculosis, etc. cause this inflammatory disease in the pelvis. Uterine fibroids include intramural, submucosal, subserosa, and pedunculated fibroids. Causes of uterine anomalies include Mullerian aplasia, septate uterus, endometrial polyps, and synechiae from previous pregnancy-related curettage^v. Endometriosis disrupts and impairs oocyte release, alters sperm motility, causes disordered myometrial contractions, and hinders fertilization and embryo development through pelvic adhesions^{vi}

Turner's syndrome, Down syndrome, Spinal Muscular Dystrophy, Canavan Disease, and Kallmann Syndrome are examples of genetic factors.^v

Symptoms

The couple's inability to conceive is the main sign of infertility. A menstrual cycle that is excessively long (35 days or more), excessively short (less than 21 days), irregular, or non-existent may be a sign that ovulation has not occurred, which is a factor in female infertility. There might be no additional visible symptoms or signs.

Due to her inability to conceive, a woman dealing with infertility may experience emotional changes and depression. There is a significant psychological impact of infertility. Being infertile carries a stigma in many cultures. The individual dealing with this problem begins to feel excluded from her group, which further contributes to depression, anxiety, and stress.

INVESTIGATIONS-

1. To rule out pelvic pathology using ultrasound.
2. Hysterosalpingography: to determine the fallopian tube's patency.
3. To examine the uterus and the tube for any pathology, a laparoscopy is performed.

REPERTORIAL APPROACH-

1-Kent repertory

STERILITY:

copious menstrual flow, from:

2-Repertory of Hering guiding symptoms of our Materia Medica

STERILITY:

- too early and too profuse menses
- with late or profuse menses
- .; no menses or sexual desire
- too profuse menses
- with tendency to miscarry
- caused by discharge of mucus from vagina after an embrace,
- from atony of ovaries,
- from excessive sexual indulgence,
- from uterine atony

3-Boenninghausen characteristics

Materia Medica and repertory

Barrenness, sterility

4- Perfect repertory of mind

SADNESS, sterility, from:

5- A concise repertory of Homoeopathic Medicine by Dr.S R Phatak

STERILITY

- Acid vaginal secretion, from
- Atrophy of mammae and ovary, from:
- Excessive sexual desire, from :
- Menses, copious, from
- Non retention of semen, from :
- Ovarian atony, from:
- Sycotic:

- Weakness, from :

6-The Concordance Repertory of Materia Medica - William D Gentry

Sterility.-

- Menses too early and too profuse.
- with premature and profuse menses; weak feeling in genitals.
- from uterine atony
- depression of spirits
- with leucorrhoea
- caused by sexual excesses
- from uterine catarrh
- absence of desire
- from atony of ovaries.
- with chronic ovaritis; soreness and great sensitiveness
- with menses suppressed
- with too scanty menses
- with retarded menses
- Discharge of mucus after coition causing
- Sterility (see section on Uterus).-
- on account of profuse leucorrhoea
- Dysmenorrhea with
- Menses too profuse, with

Homeopathic Therapeutics^{-vii}

1. **ACID PHOS**- Acid Phos is a fantastic treatment for primary sterility brought on by incapacitating conditions like diabetes and tuberculosis. Menstruation is too early, excessive, and irregular. The PH of vaginal secretion changes to an acidic form,

which causes sperm deposited there to quickly perish. Disinterested and despondent.

2. **AGNUS CASTUS** - Agnus castus is a potent treatment for infertility in women who have diminished sex drives. When there is a sex aversion, Agnus Castus is used. It's possible that this is caused by excessive masturbation. Additionally relaxed, there are clear vaginal discharges.
3. **ALETRIS FARINOSA Q**- The main symptoms of Aletris Farinosa are early and heavy periods coupled with infertility. Menorrhagia can also be accompanied by leucorrhoea, anemia, weakness, and persistent exhaustion. Additionally, Aletris Farinosa is prescribed when a person has a propensity for frequent abortions and promote conception.
4. **AROMA RADIX**-When an irregular menstrual disorder occurs, a good treatment for female infertility. Dysmenorrhea. The menstrual flow can be light or heavy. Give 5 drops in water three times per day starting on the first day of menstruation for seven days. If sexual activity is performed after the menses have stopped, it will correct menstrual irregularity.
5. **BORAX**-One of the most effective homeopathic treatments for female infertility brought on by acid vaginal

discharges. These vaginal discharges are unpleasant, harmful, and they destroy the sperm. It is prescribed when the vaginal discharge is acrid, plentiful, and warm, resembling the egg's white. In these situations, borax favours simple conception. If you experience difficulty conceiving after a D&C, this is an effective treatment.

6. **CALCAREA CARB** - Calcarea carb. is a useful treatment for female infertility brought on by excessively frequent or protracted periods. Also before time, the periods are present.
7. **GRAPHITES**- Graphites are a popular sterility treatment as well. It is appropriate for emaciated but previously obese women. Warm patient. Menstrual periods that are late, constipated, pale, and painful in the epigastrium. Decided to dislike coercion. Difficult conception due to sterility. Lady is dejected and sad, and the music makes her sad.
8. **NATRUM CARB**-The best treatment for female infertility caused by sperm non-retention. Vaginal discharges that are unpleasant and irritating could also be present. There is a strong sense that everything is about to come out. The benefits of sitting and moving around are greater. thick yellow mucus leucorrhoea that is extremely common and smells foul. Like the meat of

washing, periods are late and sparse. Too frequent and early periods. Excessive sexual inclination.

9. **NATRUM PHOS**- Another treatment for acid vaginal discharge, which kills sperms. Women who experience infertility and have unpleasant, irritable, creamy, honey-coloured vaginal discharges should take Natrum Phos. The discharge also has a sour smell.
10. **PULSATILLA NIGRICANS**-One of the most effective homeopathic treatments for infertility in women with brief, scanty menstrual cycles. Women who have experienced irregular menstruation since menarche can use the homeopathic remedy pulsatilla to treat their infertility. The menses never come on time and are consistently delayed. Additionally, the menstrual discharge is very scant and lasts only a few hours. The most effective homeopathic treatment for infertility in females with PCOD is pulsatilla.
11. **SEPIA**-Sepia is a medication used to treat infertility in females whose periods are brief, scanty, and suppressed. This could be accompanied by the noticeable symptom of uterine pressure. Additionally, there is a sex aversion. While having sex, the vagina may be

painfully dry and uncomfortable. Ovulation that is irregular or absent, low sex desire in men.

12. **STAPHYSAGRIA**-When there is no known cause of female infertility, staphysagria is one of the best treatments. Sperms are harmed by the thick cervical mucous secretions that are present. Additionally, no sperm was entering the vagina because of the spasm of the vagina.

Discussion-

Infertility is a major health issue challenging the global mass. Conventional medicine is not capable of treating all cases and many times despite the investigation being normal, the couple fail to conceive, which called as unexplained infertility. In this scenario homoeopathy has a definite role to play.

It's evident from past studies that positive results in different cases of infertility are clinically significant. Homoeopathic constitutional remedies were successful in treating 27 out of 40 cases testing positive for Urine Pregnancy Test (Earlie Icon) and USG of pelvis. ^{viii} Three cases of infertility with an underlying pathology successfully treated with standalone homoeopathic treatment are reported. These cases presented with a structural deformity as a cause of infertility. The patient's partners were also given homoeopathic medicines in all the

cases. The first case showed a long liquefaction time on semen analysis and the female partner had a unilateral tubal block. The second case investigation reported ipsilateral varicocele and small-sized testes with oligospermia. In the third case, the female had polycystic ovarian syndrome with a sub-septate uterus and multinodular goitre. All three cases were treated with individualised homoeopathic medicine. All these cases were followed up regularly and they conceived within 6 months of treatment. ^{ix}This confirms that we can use constitutional Homoeopathic remedies in the treatment of Female Infertility. By choosing first line of treatment, it will help to avoid the side-effects of hormonal tablets, unnecessary operations and expensive and uncertain therapeutic measures thus improving the quality of life and increased chances of conception .

CONCLUSION

Homoeopathic constitutional similimum firstly treat the causes of infertility like Symptoms of PCOD, PID, Endometriosis. Patients with Infertility either Primary or secondary can take Homoeopathy as first line of treatment.

REFERENCES

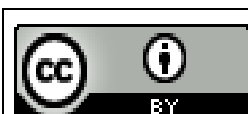
1. Jeffcoate (2008) Principles of gynaecology. (7th ed), Jaypee Brothers Medical Publishers.

2. Jeffcoate (2008) Principles of gynaecology. (7th edn), Jaypee Brothers Medical Publishers
3. Moreira S, Soares E, Tomaz G, Maranhao T, Azevedo G (2010) Polycystic ovary syndrome: A psychosocial approach. Acta Med Port 23: 237-242.
4. Wienhard J Tinneberg HR (2003) Alternative treatment possibilities of complaints due to endometriosis. Zentralbl Gynakol 125: 286-289
5. Olooto WE. A review of Female Infertility; important etiological factors and management SERUM concentrations of ghrelin, leptin and lipid profile in type 2 diabetes mellitus View project. 2012. [cited 2022 Jul 23]; Available from: www.scholarsresearchlibrary.com
6. Wendy Kuohung MDH. Causes of female infertility [Internet]. [Cited 2022 Aug 1]. Available from: <https://www.medilib.ir/uptodate/show/5408>
7. Macer ML, Taylor HS. Endometriosis and Infertility: A review of the pathogenesis and treatment of endometriosis-associated infertility. Obstet Gynecol Clin North Am [Internet]. 2012 Dec [cited 2022 Aug 1];39(4):535. Available from: [/pubmed/articles/PMC3538128/](https://pubmed.ncbi.nlm.nih.gov/23538128/)
8. William Boericke. New Manual of Homoeopathic Materia Medica & Repertory, Augmented Edition. Indian books & periodicals publishers New Delhi. 2015,p.
9. Lobo A, D'cunha P, Lobo B (2018) Effectiveness of Homoeopathic Treatment in Female Infertility. Reprod Med Int 1:008. doi.org/10.23937/rmi-2017/1710008
10. Rajachandrasekar B, Sunny A. The usefulness of homoeopathic medicines for infertility – A case series. Indian J Res Homoeopathy 2022;16(2):110-118.

How to Cite this Article- Nagar N., Anupriya, Singhal K., Homoeopathic Approach In Female Infertility- A Review . TUJ. Homo & Medi. Sci. 2023;6(3):24-30.

Conflict of Interest: None

Source of Support: Nil



This work is licensed under a Creative Commons Attribution 4.0 International License

