

## POTENTIAL ROLE OF HERBAL MEDICINES IN ENHANCING FEMALE FERTILITY

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### ABSTRACT:

Herbal medication, the ancient Indian system of medicine, has been a driving force behind women's health and fertility for thousands of years. Grounded in holistic and personalized healing, Herbal medication promotes balance between the body's three doshas-Vata, Pitta, and Kapha-as the basis of reproductive health. The Ayurvedic system of women's fertility involves physical, mental, and emotional well-being, concentrating not only on conception but also on establishing the ideal environment for healthy reproduction, pregnancy, and postpartum recovery. Women's reproductive well-being, in Herbal medication, is regulated primarily by the status of the Shukra Dhatu (reproductive tissue) and equilibrium of the menstrual cycle (Ritu-chakra). Abnormal cycles, infertility, polycystic ovarian syndrome (PCOS), endometriosis, and hormonal disturbances are considered symptoms of underlying systemic imbalances in the doshas, especially Vata and Pitta. Herbal medication treats these problems with individualized therapy, herbal preparations, dietary changes, cleansing (Panchakarma), yoga, and meditation with the goal of bringing about reproductive equilibrium naturally and mildly. One of the key principles of Ayurvedic fertility treatment is the philosophy of Garbha Sambhava Samagri, or conception factors: Ritu (right time), Kshetra (receptive uterus), Ambu (nutrition), and Beeja (healthy ovum and semen). Maintaining these factors in synchrony is responsible for successful fertility. Ayurvedic scriptures also insist on preconception care (Garbhadhan Vidhi), i.e., cleansing of the body and mind, to make both the partners physically and psychologically fit for conception. Ayurvedic herbal medication are typically used to treat infertility and reproductive illness.

Among the most widely used are Ashwagandha (*Withania somnifera*), which energizes and soothes stress; Shatavari (*Asparagus racemosus*), which is reputed to balance hormones and enhance ovulation; Lodhra (*Symplocos racemosa*), which is used to treat uterine health; and Guduchi (*Tinospora cordifolia*), which energizes immunity and detoxification. These herbal medications are typically taken in forms that are appropriate to an individual's needs, doshic constitution, and specific reproductive concern. Furthermore, Panchakarma, Ayurvedic rejuvenation and detoxification therapy, plays a significant part in promoting fertility. It is a method of cleansing therapies such as Vamana (therapeutic emesis), Virechana (purge), Basti (medicated enema), and Nasya (nasal therapy) that eliminate accumulated toxins (Ama) from the body and restore doshic balance, thereby improving ovulation, endometrial receptivity, and hormonal balance. Ayurvedic daily routines also play an important role in fertility. Dinacharya (daily routine), Ritucharya (seasonal regimen), and Sadvritta (moral living) promote mental calm and hormonal equilibrium. Yoga and meditation are essential, stimulating circulation to reproductive organs, minimizing fear and anxiety, and balancing the mind-body interface, which is vital for conception and reproductive health in general. Clinical evidence and recent integrative studies have begun to validate many Ayurvedic treatments in the management of PCOS, anovulation, and idiopathic infertility. While there are merits to new reproductive technologies, Herbal medication offers a calming, side-effect-free, and supportive modality which can be utilized to augment biomedicine's intervention or as a standalone measure in the majority of cases. Briefly, Herbal medication is a traditional, holistic system of women's health and fertility. Its focus on individualized care, natural treatments, and body-mind integration makes it a valuable complementary and alternative strategy for reproductive health. With increasing demand for integrative and natural medicine throughout the world, Herbal medication is a sound and effective model for enhancing fertility and women's health throughout their reproductive life.

**KEYWORDS:** Female fertility, Herbal medicine, Hormonal balance, Medicinal plants, Phytotherapy, Reproductive health, Women's health.

## INTRODUCTION

Women's fertility, according to the Ayurvedic understanding, is a measure of her general energy and health. The reproductive processes are conceived by the ancient texts as a subtle interaction of various systems of the body under the control of the three doshas—of Vata, Pitta, and Kapha.<sup>[1]</sup> The optimum fertility is when the doshas are balanced, more specifically

when Vata, the dosha handling movement and reproductive function, is stable and regulated in a healthy manner. Reproductive tissue health (Shukra Dhatu), menstrual health (Artava), and body and mind readiness are also found to be significant in conception and pregnancy maintenance.<sup>[2][3]</sup>

Herbal medication also recognizes four key parameters for the successful initiation of conception: Ritu (ovulation timing), Kshetra (healthy reproductive organs), Ambu (adequate nutrition), and Beeja (viable sperm and ovum). These four are also referred to as Garbha Sambhava Samagri and are the pillars of fertility management in Herbal medication. Disturbance or imbalance in any of these categories is believed to be responsible for infertility or being unable to carry a healthy pregnancy.

Herbal medication provides a range of natural treatments for fertility issues, such as dietary control, detoxification therapy (Panchakarma), yoga, meditation, lifestyle changes, and specially formulated herbal drugs. Shatavari, Ashwagandha, Lodhra, and Guduchi are among the medicinal herbal medication that have long been used to improve ovarian function, balance hormonal activity, strengthen the uterus, and increase vitality. Rejuvenate reproductive organs, balance doshas, and get rid of toxins (Ama) using panchakarma treatments.<sup>[4]</sup>

Interestingly, Herbal medication promotes preconception care, or Garbhadhan Sanskara, which involves physical cleansing, mental preparation, and emotional healing of both the couple. This is to facilitate conception in the most optimal conditions, leading to healthier pregnancy and fewer complications. In today's age, when reproductive technology is gaining ground, Herbal medication offers a natural, alternative, and less intrusive means of fertility improvement. Not only does it help prepare the body for conception but also the mind and the emotions, which are essential but underplayed determinants of reproductive well-being.

According to the discussion above, Herbal medication has a threefold role in women's fertility: prevention, promotion, and cure. Its personalized and comprehensive approach provides long-term answers for most women's fertility problems today, making it a valuable tool in reproductive medical practice.<sup>[5]</sup>

### **Ayurvedic Perspective on Fertility and Reproduction:**

Fertility and conception in Herbal medication are inextricably connected with overall well-being, balance, and harmony of the body and mind. Herbal medication is distinct from modern medicine, which focuses more on individualized biological causes of infertility. Herbal medication considers a holistic approach. Fertility is considered a natural result of optimal health, normal functioning of body tissues (“Dhatus”), i.e., the reproductive tissue (“Shukra Dhatu”), and balance among the three essential energies or “Doshas”—Vata, Pitta, and Kapha.

Herbal medication identifies four elements needed for conception, collectively known as “Garbha Sambhava Samagri”. They are:

1. “Ritu” – the timely conception, usually in harmony with ovulation.
2. “Kshetra” – the health of the reproductive organs, specifically the uterus.
3. “Ambu” – good nutrition, which is conducive to the embryo's growth.
4. “Beeja” – reproductive seed quality (sperm and ovum).<sup>[6]</sup>

Disruption of any of these factors can lead to subfertility or infertility. These imbalances are most commonly brought about by unwholesome living, poor diet, chronic stress, toxins (“Ama”), or emotional upset, all of which can disrupt the “Doshas” and affect fertility.

In both sexes, the analogous reproductive tissue is “Shukra Dhatu”, the most subtle of the seven bodily tissues. In women, it is associated with ovulation and the menstrual cycle. If the six “Dhatus” (Rasa, Rakta, Mamsa, Meda, Asthi, and Majja) are not in good condition, the growth of Shukra Dhatu is hindered and a reproductive disorder arises. As per Herbal medication, fertility is contingent upon the “Dhatus” obtaining the proper nutrients, particularly through digestion and metabolism (“Agni”).<sup>[7]</sup>

From a “Dosha” perspective:

1. “Vata dosha”, which is in charge of movement and nervous processes, is closely linked with menstruation, ovulation, and foetal development. Disturbed Vata is well known for creating symptoms like irregular periods, cramps, or miscarriage.<sup>[8]</sup>
2. “Pitta dosha”, responsible for transformation and metabolism, regulates hormones and enzymatic function. Excess Pitta may cause inflammation-related diseases such as endometriosis or menorrhagia.<sup>[9]</sup>

3. “Kapha dosha”, which deals with structure and stability, governs nourishment and growth. It can lead to delayed metabolism, obesity, and cyst formation, as in PCOS.<sup>[10]</sup>

To correct these imbalances, Ayurvedic therapy follows an individualized course of treatment with the aid of herbal medicine, detoxification therapy (Panchakarma), and rejuvenation (“Rasayana”) therapy. Herbal medication such as Shatavari, Ashwagandha, and Lodhra are used to strengthen the reproductive machinery, balance hormones, and stimulate ovulation and menstrual cycles.<sup>[11]</sup>

Emotional and mental health are highly valued in Herbal medication during the reproductive process. Reproductive failure has traditionally been attributed to mental instability, stress, and despair. Additionally, pranayama, yoga, and meditation have been incorporated to help balance the doshas and soothe the mind. Ayurvedic fertility theory is essentially predicated on the notion that reproduction is a natural outcome of a body that is healthy, balanced, emotionally stable, and well-fed, rather than a singular act. By integrating mental, spiritual, and physical wellness to ensure reproductive health and a healthy pregnancy, this holistic approach provides a deep understanding of fertility.<sup>[12]</sup>

### **Common Female Reproductive Disorders: Ayurvedic View**

In order to understand and treat female reproductive diseases, the ancient Indian medical system known as Herbal medication offers a comprehensive and individualized approach. Herbal medication looks at dosha imbalances (“Vata”, “Pitta”, and “Kapha”) as well as the functioning of body tissues (“Dhatu”), channels (“Srotas”), and digestive fire (“Agni”) in order to determine the root cause of illness rather than just treating its symptoms. The method provides sustainable and natural ways to address the majority of reproductive health issues for women, including uterine fibroids, endometriosis, PCOS, monthly irregularities, and infertility.<sup>[13]</sup>

#### **1. Infertility (Vandhyatva):**

Ayurvedic definition of infertility is “Vandhyatva”, i.e., failure to conceive after one year or more of regular and unprotected sexual relations. Herbal medication attributes infertility to imbalances of Vata dosha, defective “Shukra Dhatu” (reproductive tissue), channel blockage (“Artavavaha Srotas”), and irregular menstrual cycles (“Artava Dushti”). The cause is defective diet, undue physical activity, chronic disease, stress, and defective life style measures.

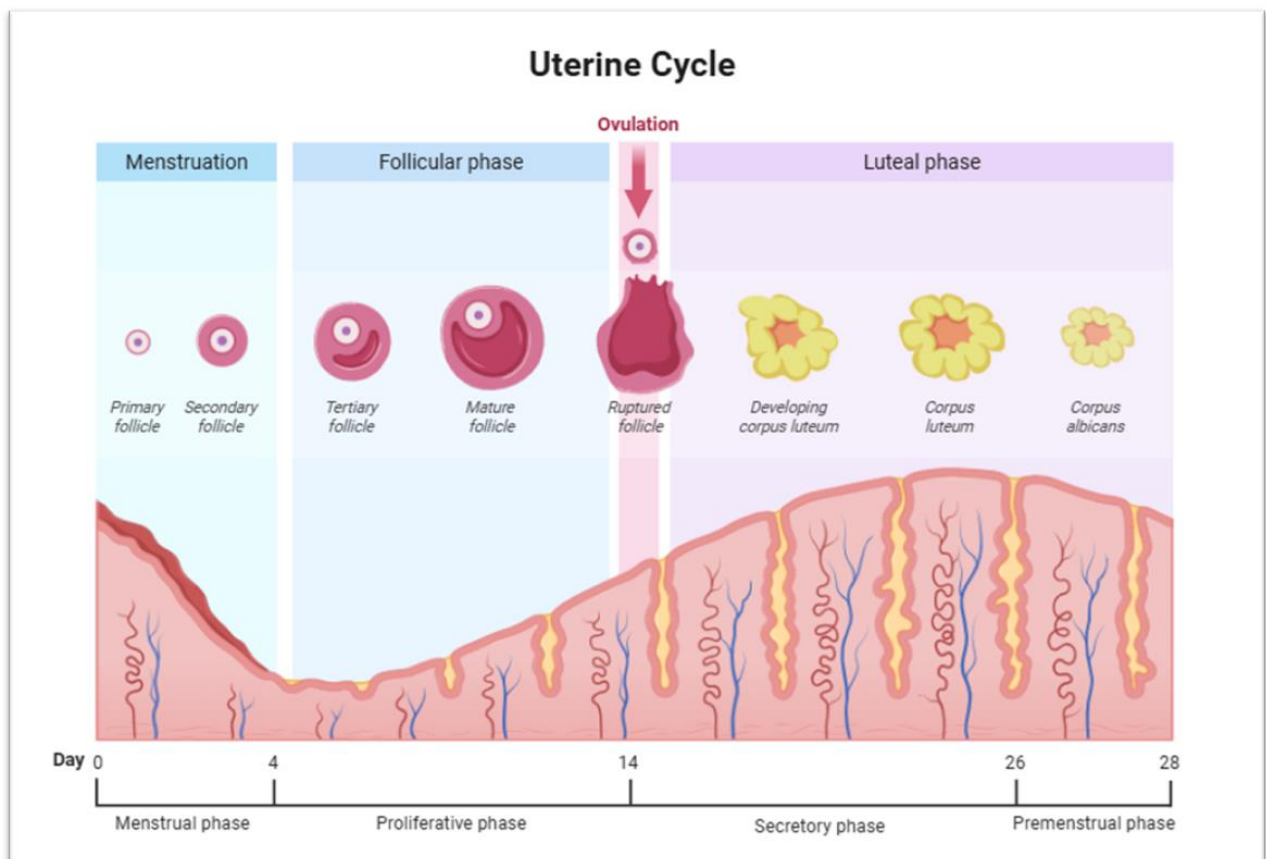
Ayurvedic treatment consists of purification of the body (by “Panchakarma”), the fortification of the reproductive organs, hormonal balancing, and enhancement of the quality of “Shukra” by “Rasayana” (rejuvenation) therapy and a few herbal medications such as “Shatavari”, “Ashwagandha”, and “Kapikacchu”.<sup>[14]</sup>

## 2. Menstrual Disorders (Artava Vyapad):

All menstrual disorders fall under “Artava Vyapad”, which is characterized by irregular menstruation (“Asrugdara”), painful menstruation (“Kashtartava”), suppression of menstruation (“Amenorrhea”), and excessive bleeding (“Menorrhagia”). All are typically caused by doshic imbalance:

- i. Vata Dominance: leads to late, thin or dysmenorrheic menstruation.
- ii. Pitta imbalance: causes heavy bleeding, burning, and emotional instability.
- iii. Kapha exacerbation: may cause thick clots, slowed movement, and bloating.

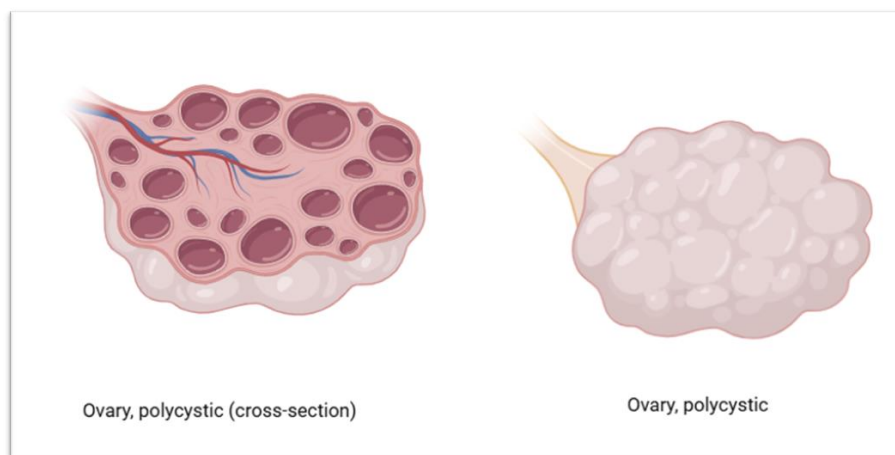
Ayurvedic treatment involves balancing the imbalanced dosha, dietary regulation, lifestyle modifications, and use of herbal medication such as “Lodhra”, “Ashoka”, “Manjistha”, and “Triphala”.<sup>[15]</sup>



### 3. Polycystic Ovarian Syndrome (PCOS)

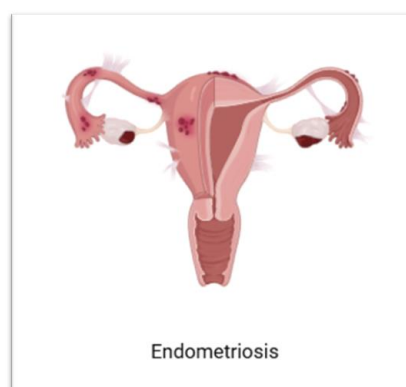
PCOS is a modern-day medical disorder that is analogous to several Ayurvedic ailments that involve “Artava Dushti” and “Granthi” (cystic tumors). It is primarily associated with Kapha as well as Vata disorders, which lead to weight gain, irregular ovulation, acne, hirsutism, and infertility.<sup>[16]</sup>

PCOS is treated in Herbal medication by purifying the body (through “Virechana” and “Basti”), balancing the metabolism, and enhancement of ovarian function. Medicines such as “Trikatu”, “Guggulu”, “Shatavari”, and “Guduchi” are given to balance the hormones and prevent cyst formation. Dietary advice includes the exclusion of oily, cold, and heavy food, and daily exercise and yoga.<sup>[17]</sup>



### 4. Endometriosis

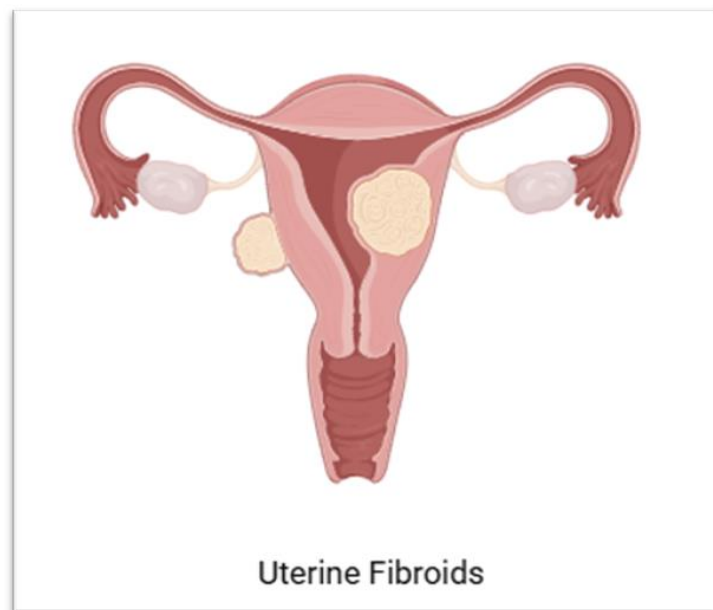
Endometriosis is considered in Herbal medication to be a condition of “Dushti” of “Rakta Dhatu” (blood tissue) and “Vata” overabundance, which causes the uterine lining to migrate to ectopic places. Infertility, high menstrual flow, and persistent pelvic pain are contributing symptoms.<sup>[18]</sup>



Treatment objectives include lowering inflammation, cleansing the blood, encouraging digestion (“Agni”), and balancing the Pitta and Vata doshas. Among the medications are “Ashoka”, “Kumari (Aloe vera)”, and “Turmeric”. The recommended treatments for enhancing pelvic circulation and releasing adhesions include “Panchakarma”, “Swedana”, and “Abhyanga”, which involve applying and rubbing oil.<sup>[19]</sup>

### 5. Uterine Fibroids (Garbhashaya Arbuda):

Benign growths called uterine fibroids can cause infertility, pelvic pain, and heavy menstrual flow. Herbal medication refers to fibroids as “Arbuda” (tumors), which are primarily caused by choked channels, blood stagnation, and Kapha deposition.



Treatment involves use of Kapha-reducing drugs and formulations such as “Kanchanara Guggulu”, “Varunadi Kashaya”, and “Triphala Guggulu”. Treatment with “Basti” and dietary changes decreases fibroid size and normalizes uterine function.<sup>[20]</sup>

Ayurvedic perspective of female reproductive disorders offers an inclusive, restorative, and natural management approach. By emphasizing restoring doshic equilibrium, purifying body channels, stimulating digestion, and fortifying reproductive tissues, Herbal medication tackles not only the manifestations of gynaecological issues, but also their underlying cause. Its holistic package, encompassing herbal medicine, detoxification treatments, dietary control, yoga, and stress management, provides lasting and customized solutions for women's reproductive well-being.<sup>[21]</sup>

## Ayurvedic Diagnosis and Assessment

Herbal medication, the ancient Indian system of medicine, diagnoses and evaluates health problems in a very personalized and complete way. When it comes to women's health and fertility, Ayurvedic diagnosis is more concerned with determining the root imbalances in the body than with treating the symptoms. The objective is to know the individual's special constitution (“Prakriti”), the present state of imbalance (“Vikriti”), and the condition of bodily tissues (“Dhatus”), channels (“Srotas”), digestive fire (“Agni”), and toxins (“Ama”), all of which are interconnected and play vital parts in fertility issues.<sup>[22]</sup>

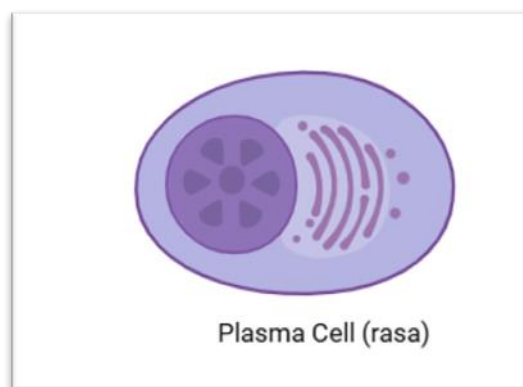
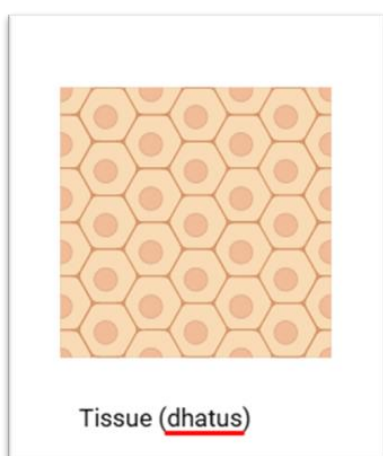
### 1. Prakriti and Vikriti Analysis

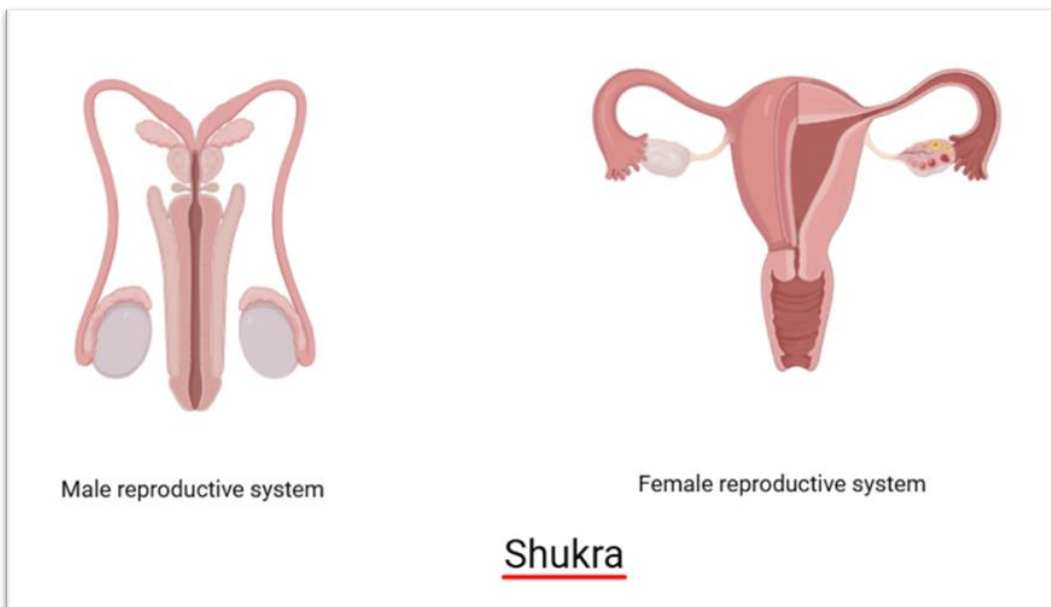
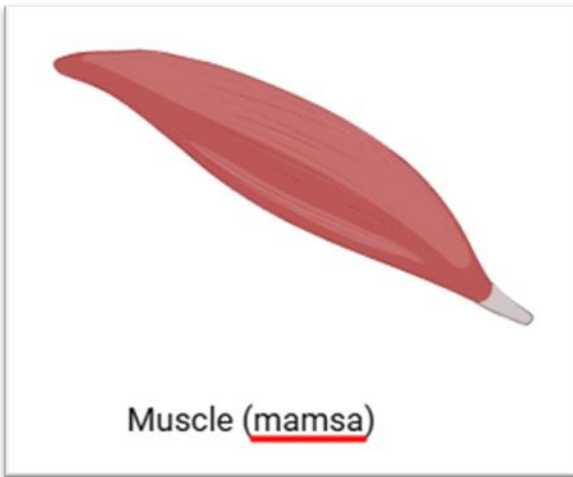
The initial Ayurvedic step is to know the patient's “Prakriti”, or natural constitution, based on the balance of the three “Doshas”, namely “Vata”, “Pitta”, and “Kapha”, at the time of birth. A person's morphological, physiological, and psychological characteristics as well as their reproductive attributes are shaped by their constitution.<sup>[23]</sup>

“Vikriti”, however, refers to the present doshic state of imbalance, which could be acute or chronic. In fertility disorders, like abnormal menses, PCOS, or infertility, Vata dosha tends to worsen, with secondary imbalances involving Pitta and Kapha. Recognizing these changes assists in tailoring treatment modalities.<sup>[24]</sup>

### 2. Analysis of Dhatus and Upadhatus

The well-being of the seven “Dhatus” (tissues)—Rasa (plasma), Rakta (blood), Mamsa (muscle), Meda (fat), Asthi (bone), Majja (marrow/nervous tissue), and Shukra (reproductive tissue)—is crucial while explaining fertility. In women, “Shukra Dhatu” takes the form of “Artava” (menstrual and ovulatory function) for conception.





Any derangement of the above six Dhatus may influence the quality and amount of “Shukra Dhatu”, as a result of which disorders like ovulatory dysfunction, uterine weakness, or hormonal imbalance can occur. Moreover, in Herbal medication, “Upadhatus” such as breast milk and menstrual blood are also considered significant markers of reproductive health.<sup>[25]</sup>

### 3. Srotas Examination (Bodily Channels)

Herbal medication focuses on the health of body channels (“Srotas”), especially the “Artavavaha Srotas” (channels that carry the female reproductive essence). Blockage, drying up, or vitiation of these channels can lead to gynaecological issues like menstrual disorders, amenorrhea, endometriosis, or infertility.<sup>[26]</sup>

A complete evaluation entails the observation for signs of stagnation (Kapha), inflammation (Pitta), or uncontrolled flow (Vata) in these channels. Removing the obstructions and reestablishing the flow are the central treatment goals of Ayurvedic fertility therapy.<sup>[27]</sup>

### 4. Agni and Ama

In Herbal medication, the digestive fire, or “Agni”, is important to wellness. It controls digestion, metabolism, and tissue building. Weak or unbalanced “Agni” causes the development of “Ama”, or toxic undigested material, which can deposit in reproductive tissues and channels and cause infertility.<sup>[28]</sup>

Ayurvedic diagnosis involves monitoring digestion, appetite, bowel movements, and “Ama” symptoms like tongue coating, fatigue, bloating, and putrid discharges. Reinstating “Agni” by nutritional and herbal means is usually a fundamental approach prior to treating female reproductive problems directly.<sup>[28]</sup>

### 5. Menstrual History and Artava Dushti:

Careful menstrual history is a crucial diagnostic aid in Herbal medication. The colour, consistency, timing, duration, and accompanying symptoms of menstruation provide clues to doshic imbalances and possible reproductive dysfunctions.<sup>[29]</sup>

“Artava Dushti”, or menstrual pathology, is categorized into types depending upon the dosha involved:

- i. Vata: Sparse, irregular, or painful menstruation.
- ii. Pitta: Copious, frequent, burning menses.
- iii. Kapha: Delayed, sticky, thick flow with slow movement.<sup>[30]</sup>

## 6. Nadi Pariksha and Other Diagnostic Tools:

The delicate technique known as “Nadi Pariksha” (pulse diagnosis) is used to assess doshic imbalances, organ function, and energy flow. Other traditional diagnostic tools are:<sup>[31]</sup>

- i. Jihva Pariksha (tongue examination)<sup>[32]</sup>
- ii. Mala Pariksha (stool examination)<sup>[33]</sup>
- iii. Mutra Pariksha (urine examination)<sup>[34]</sup>
- iv. Netra and Twak Pariksha (Examining the skin and eyes)<sup>[35]</sup>

These tools aid in the construction of a complete picture of a woman's reproductive health and determine individualized therapies.

Ayurvedic diagnosis in female fertility is a subtle and thorough process that entails the assessment of constitution, doshic imbalance, health of tissues, functioning of channels, digestion, and menstrual cycles. By understanding the underlying causative factors of dysfunction, Herbal medication provides individualized interventions that seek to re-establish natural balance and optimize fertility. This holistic, patient-centred system remains to provide significant insights and practical solutions for women with reproductive problems in both conventional and alternative healthcare systems.<sup>[36]</sup>

### Ayurvedic Herbal medication and Formulations for Fertility

Herbal medication, the ancient Indian system of medicine, provides a holistic and personalized method of promoting fertility. Ayurvedic fertility therapy is based on the harmony of body, mind, and spirit and aims to fortify the reproductive tissues (“Shukra Dhatu”), regulate the doshas (“Vata”, “Pitta”, and “Kapha”), purify the body, and revitalize the reproductive organs. One of the main resources in Ayurvedic fertility therapy is the employment of medicinal plants and preparations with known rejuvenating (“Rasayana”), hormone-balancing, anti-inflammatory, and adaptogenic actions.<sup>[37]</sup>

The report presents an in-depth overview of some of the most important Ayurvedic plants and preparations historically employed to improve female fertility and reproductive health.

Name	Properties	Benefits
<p><b>1. Shatavari (“<i>Asparagus Racemosus</i>”):</b> Shatavari is one among the foremost herbal medication that help female reproductive health from an Ayurvedic perspective. Known as a “Rasayana” (rejuvenator), it is actually one of the strongest herbal medications used to support hormonal balance, strengthen the uterus, and aid in improved ovulation.<sup>[38]</sup></p>	<p>i. Dosha action: Balances “Vata” and “Pitta” ii. Rasa (taste): Sweet and bitter iii. Virya (potency): Cooling iv. Vipaka (post-digestive effect): Sweet<sup>[39]</sup></p>	<p>i. improves uterine receptivity and ovum quality. ii. Regulates menstrual cycle. iii. Boosts cervical mucus production for conception. iv. Used as a galactagogue (induces lactation) in lactating women. Usage: Usual preparations comprise Shatavari Ghrita” and “Shatavari Kalpa”.<sup>[40]</sup></p>
<p><b>2. Ashwagandha (“<i>Withania somnifera</i>”):</b> Ashwagandha, or Indian ginseng, is a powerful adaptogen and nervine tonic which decreases stress—a primary cause of hormonal imbalance and infertility.</p>	<p>i. Dosha action: Balances “Vata” and “Kapha”. ii. Rasa: Bitter, sweet. iii. Virya: Heating. iv. Vipaka: Sweet.<sup>[41]</sup></p>	<p>i. Increases endocrine function and regulation of reproductive hormones. ii. Enhances ovarian function. iii. Lowers cortisol, anxiety, and stress-related infertility. iv. Increases overall vitality and energy. Usage: Formulations such as powder, capsules, and “Ashwagandhadi Lehyam” or “Ashwagandha Ghrita”.<sup>[42]</sup></p>
<p><b>3. Lodhra (“<i>Symplocos racemosa</i>”):</b> Lodhra is one of the most important herbal medications in managing gynecological disorders, specifically those due to “Pitta” and “Kapha” imbalances of the uterus.</p>	<p>i. Dosha action: Balances “Pitta” and “Kapha”. ii. Rasa: Astringent. iii. Virya: Cooling.<sup>[43]</sup></p>	<p>i. Normalizes excessive or prolonged menses. ii. Tones uterine muscles. iii. Improves conditions such as leucorrhea, PCOS, and endometriosis. iv. Decreases inflammation and excess secretions. Usage: involved in meals like “Pushyanuga Churna”, “Lodhrasava”, and “Patrangasava”.<sup>[44]</sup></p>
<p><b>4. Guduchi (“<i>Tinospora cordifolia</i>”):</b> Guduchi is a superior immunomodulator and detoxifier, commonly used to cleanse the reproductive system of toxins (“Ama”).</p>	<p>i. Dosha action: Tridosha balancing. ii. Rasa: Bitter. iii. Virya: Heating. iv. Vipaka: Sweet.<sup>[45]</sup></p>	<p>i. Enlivens immunity and hormonal equilibrium. ii. Purifies toxins from the uterus and fallopian tubes. iii. Favors normal ovulation and endometrial health. iv. Facilitates digestion and metabolic fire (“Agni”). Usage: Usually utilized in “Guduchi Satva”, “Amritarishta”, or along with other herbal medication in detoxification treatments.<sup>[46]</sup></p>
<p><b>5. Gokshura (“<i>Tribulus terrestris</i>”):</b> The ability of gokshura to promote both sexes' reproductive systems is well known. It encourages ovulation, libido, and maternal health.</p>	<p>i. Dosha action: Balances “Vata” and “Pitta”. ii. Rasa: Sweet. iii. Virya: Cooling.</p>	<p>i. Supports development of follicles. ii. Improves uterine tone and inflammation. iii. Treats urinary tract infection that impacts fertility. iv. A natural aphrodisiac and reproductive tonic. Usage: Frequently added to preparations such as “Chandraprabha Vati” and “Gokshuradi Guggulu”.<sup>[47]</sup></p>

<p><b>6. Dashamoola (Group of Ten Roots):</b> Dashamoola, a mixture of ten roots, is a popular treatment for purging and vata-related reproductive ailments.</p>	<p>i. Dosha action: Mainly Vata-balancing. ii. Rasa: Pungent, bitter, astringent. iii. Virya: Heating</p>	<p>i. Relieves pelvic inflammation and uterine congestion. ii. Facilitates hormonal balance. iii. Aids menstrual flow and cramping. iv. Applied in postnatal recovery to invigorate uterine well-being. Usage: Both internal and external practices can be observed in “Dashamoolarishta”, “Dashamoola Kwatha”, and “Dashamoola Taila”.<sup>[48]</sup></p>
<p><b>7. Kumari (“Aloe vera”):</b> Kumari is widely employed as an herb in gynecology for the treatment of menstrual and uterine ailments because of its detoxifying and cooling properties.<sup>[49]</sup></p>	<p>i. Dosha action: Balances “Pitta” and “Vata”. ii. Rasa: Bitter. iii. Virya: Cooling.</p>	<p>i. Encourages regular menstruation. ii. By strengthening the liver and detoxifying the blood, it enhances hormone metabolism. iii. Maintains endometrial health and uterine purification. iv. Helps remove cysts and fibroids. Usage: Taken as fresh gel, juice, or in herbal preparations such as “Kumaryasava”.<sup>[50]</sup></p>

Other Important Herbal medication and Formulations:

**1. Yashtimadhu (Licorice):**

- i. Hormone regulator maintains adrenal function.
- ii. Assists in uterine rejuvenation and oestrogen balance.<sup>[51]</sup>

**2. Bala (Sida cordifolia):**

- i. Tones uterine muscles.
- ii. Frequently used in postnatal tonics.<sup>[52]</sup>

**3. Phala Ghrita:**

- i. Medicated ghee for nourishing reproductive tissue.
- ii. Enhances fertility, particularly ovulatory dysfunction.<sup>[53]</sup>

**4. Formulation Combinations for Fertility Support:**

Herbal medication tends to blend herbal medication synergistically into formulations. Certain commonly used compounds in fertility care are:

- i. Ashokarishta – to regulate menstruation and minimize uterine inflammation.<sup>[54]</sup>
- ii. Patrangasava – for uterine strengthening and leucorrhea treatment.<sup>[55]</sup>
- iii. Phalasarpi – aids conception, aids uterine health, used in infertility treatment.<sup>[56]</sup>
- iv. Garbhupal Ras – aids early pregnancy and miscarriage prevention.<sup>[57]</sup>
- v. Narayan Taila – applied in “Abhyanga” (massage) to tone reproductive organs and pacify Vata.<sup>[58]</sup>

Ayurvedic herbal medicines and preparations present a deep and historically proven source of fertility enhancement and support for female reproductive health. Not only do these medicines address hormonal balance and functioning of the reproductive organs, but they cleanse the body, feed tissues, soothe the nervous system, and enhance the overall level of vigour. In contrast to many contemporary fertility interventions aimed at symptomatic amelioration or aided reproduction, Herbal medication seeks to reconstitute natural fertility by restoring balance, nourishment, and rejuvenation.

Individualized application of herbal medication according to “Prakriti”, doshic disturbance, and state of reproduction promises a personalized treatment strategy with minimal side effects and maximum long-term reproductive well-being. With greater scientific validation and acceptance across the world, Ayurvedic fertility herbal medication and preparations are becoming important integrative agents in women's reproductive medicine.<sup>[59]</sup>

## **Panchakarma and Detoxification Therapies**

### **Understanding Panchakarma**

Herbal medication, the traditional Indian system of medicine, emphasizes detoxification as a foundational component for maintaining health, treating disease, and enhancing fertility. Among its various therapeutic modalities, “Panchakarma”—a set of five bio-cleansing procedures—is one of the most powerful and comprehensive methods used to eliminate toxins (“Ama”), restore doshic balance, rejuvenate tissues, and prepare the body for conception. In the context of women’s reproductive health and fertility, Panchakarma plays a vital role in correcting hormonal imbalances, regulating menstruation, improving ovulation, and supporting healthy pregnancy outcomes.

The term “Panchakarma” literally means "five actions" or "five treatments." These are therapeutic procedures aimed at internal cleansing, cellular detoxification, and physiological rejuvenation. The five main components of Panchakarma are:<sup>[60]</sup>

- i. Vamana (Therapeutic Emesis)– Induced vomiting to remove excess “Kapha” and toxins from the upper GI tract.<sup>[61]</sup>
- ii. Virechana (Purgation Therapy)– Induced purgation to eliminate excess “Pitta” and purify the liver and intestines.<sup>[62]</sup>
- iii. Basti (Medicated Enemas)– Administration of herbal decoctions or oils into the colon to balance “Vata” and nourish reproductive tissues.<sup>[63]</sup>

- iv. (Nasya, or Nasal Therapy)-Toxins in the head and sinus area can be eliminated by administering herbal oils or powders through the nose.<sup>[64]</sup>
- v. Raktamokshana (Bloodletting)-Therapeutic blood purification used selectively for specific inflammatory and “Pitta”-related conditions.<sup>[65]</sup>

While all five therapies are not always performed in every case, an individualized approach is taken based on the woman’s constitution (“Prakriti”), current imbalances (“Vikriti”), and reproductive condition.<sup>[66]</sup>

### **Importance of Detoxification in Fertility:**

In Herbal medication, “fertility is seen as a natural result of a healthy body and balanced mind”. Toxins (“Ama”), accumulated due to improper diet, sedentary lifestyle, chronic stress, or environmental factors, are considered one of the main causes of reproductive dysfunction. The following conditions can result from “Ama’s disruption of “Agni” (digestive fire), blocking of reproductive pathways (“Artavavaha Srotas”), and hormonal imbalances:<sup>[67]</sup>

- i. Menstrual irregularities
- ii. Anovulation
- iii. Polycystic ovarian syndrome (PCOS)
- iv. Endometriosis
- v. Uterine fibroids
- vi. Infertility

Panchakarma aims to “clear the physical and energetic pathways”, reestablish the healthy flow of reproductive functions, and create an optimal environment for conception.<sup>[68]</sup>

Stages of Panchakarma for Fertility Care: A systematic procedure, panchakarma is usually performed in three steps:

- i. Purva Karma (Pre-Cleansing): The body becomes ready for total detoxification after this first phase.
  - a. Snehana (Internal and External Oleation): Administration of medicated ghee or oil to loosen toxins from the tissues.<sup>[69]</sup>
  - b. Using herbal oils, Abhyanga (Oil Massage) is a full-body massage that promotes lymphatic drainage and circulation.<sup>[70]</sup>
  - c. Swedana (Sudation or Fomentation): Herbal steam therapy to open up the body’s channels (“Srotas”) and move toxins toward the digestive tract for elimination.<sup>[71]</sup>

These therapies improve “Agni”, soften bodily tissues, and mobilize toxins toward the gastrointestinal tract for expulsion.<sup>[72]</sup>

ii. Pradhana Karma (Main Cleansing): Based on each person's needs, one or more of the five Panchakarma procedures are carried out during this primary phase:

- a. “Virechana” is especially beneficial for women with “Pitta”-dominant disorders like endometriosis or heavy bleeding.<sup>[73]</sup>
- b. “Basti” is considered the most important therapy for women's fertility, especially in “Vata”-related issues like irregular cycles, premature ovarian failure, or miscarriage.<sup>[74]</sup>
- c. “Uttara Basti”, a specialized form of Basti administered vaginally or intrauterine, is highly effective in cleaning and rejuvenating the uterus and fallopian tubes.<sup>[75]</sup>

iii. Paschat Karma (Post-Cleansing and Rejuvenation): Following detoxification, the body enters a period of rebuilding and rejuvenation:

- a. Rasayana (Rejuvenation) Therapies: Use of fertility-enhancing herbal medication like Shatavari, Ashwagandha, and Phala Ghrita to strengthen “Shukra Dhatu” (reproductive tissue).<sup>[76]</sup>
- b. Dietary Management: A gradual transition from light to regular food to support digestion and restore energy.<sup>[77]</sup>
- c. Adopting “Dinacharya” (everyday routines) and “Ritucharya” (seasonal habits) will help you stay balanced and encourage conception.<sup>[78]</sup>

iv. Specific Panchakarma Therapies for Common Female Disorders:

### 1. PCOS:

- a. Virechana and Basti therapies help regulate the menstrual cycle and reduce cyst formation.<sup>[79]</sup>
- b. Herbal medication like Guggulu, Triphala, and Shatavari support hormonal balance post-detox.<sup>[80]</sup>

### 2. Endometriosis:

- a. Virechana eliminates inflammatory toxins.<sup>[81]</sup>
- b. Basti reduces pelvic pain and supports tissue repair.<sup>[82]</sup>
- c. Rasayana therapy restores uterine integrity.<sup>[83]</sup>

**3. Amenorrhea or Oligomenorrhea:**

- a. Through Nasya treatment, the hormonal connection between the brain and ovaries is restored.<sup>[84]</sup>
- b. Menstrual flow is stimulated and Vata dosha is balanced with basti.<sup>[82]</sup>

**4. Unexplained Infertility:**

- a. Full Panchakarma is often recommended to reset the entire reproductive system.<sup>[60]</sup>
- b. Followed by targeted “Rasayana” therapy for tissue nourishment and ovulation support.<sup>[83]</sup>

**5. Benefits of Panchakarma in Fertility Care:**

- a. Clears physical and energetic blockages.
- b. Rejuvenates reproductive tissues and organs.
- c. Balances hormones naturally.
- d. Reduces stress and emotional tension.
- e. Improves digestion and nutrient absorption.
- f. Enhances overall vitality and reproductive potential.<sup>[85]</sup>

Panchakarma and detoxification therapies are cornerstone treatments in Ayurvedic reproductive care. By addressing the root causes of infertility through deep cleansing, balancing the doshas, and rejuvenating reproductive tissues, Panchakarma creates the optimal internal environment for conception. When combined with appropriate diet, herbal medication, yoga, and lifestyle practices, these therapies offer a safe, natural, and effective pathway to fertility and overall well-being in women. As interest in holistic and integrative approaches to fertility grows globally, Panchakarma continues to gain recognition as a powerful tool in natural reproductive healthcare.<sup>[86]</sup>

**Role of Diet and Nutrition (Ahara):**

The three main pillars of life in Herbal medication are “Nidra” (sleep) and “Brahmacharya” (controlled living or celibacy), with “Ahara” (nutrition and diet) being one of them. The role of diet in sustenance of health, avoidance of disease, and enhancement of fertility is aptly highlighted in ancient Ayurvedic literature. Particularly in the case of women's health and reproductive ability, correct diet not only sustains the body but is also used to balance the doshas, develop healthy reproductive tissues (“Shukra Dhatu”), and maintain the normalcy of the menstrual cycle (“Artava”).<sup>[87]</sup>

Fertility, in the opinion of Herbal medication, is not merely the capacity to bear children but also an indication of perfect physiological, mental, and emotional health. The reproductive potential of a woman has deep connections with the quality of her digestion (“Agni”), the cleanliness of her body tissues, and freedom from toxins (“Ama”). A healthy, nutritious diet is instrumental in the realization of these states and thus in the promotion of fertility.<sup>[88]</sup>

### **1. Sustaining the Reproductive Tissues (“Shukra Dhatu”):**

Menstrual blood and ovum were released by “Shukra Dhatu” in females. It is the most subtle of the seven body tissues and relies on proper nourishment of the previous six Dhatus—“Rasa”, “Rakta”, “Mamsa”,

“Meda”, “Asthi”, and “Majja”. A diet rich in nutrients facilitates the formation and sustenance of healthy reproductive tissues and increases the likelihood of conception.

Foods that are “Shukra”-promoting tend to be sweet in taste, cooling in energy, oily or greasy (“Snigdha”), and body-building. These include:

- a. Milk and ghee of cow.
- b. Fresh fruits such as pomegranate, dates, figs, and mangoes.
- c. Nuts like almonds and walnuts (soaked and peeled).
- d. Whole grains such as rice and wheat.
- e. Spices such as saffron, cardamom, and cinnamon (in moderation).

These foods help regenerate tissues, balance hormones, and enhance reproductive health.<sup>[89]</sup>

### **2. Improving Digestive Fire (“Agni”) and Minimizing Toxins (“Ama”):**

A healthy digestive fire (“Agni”) ensures proper digestion and assimilation of food, resulting in the production of high-quality tissues, including “Shukra Dhatu”. Weak digestion leads to the accumulation of undigested food as toxins (“Ama”), which may block reproductive channels (“Artavavaha Srotas”), interfere with hormonal balance, and cause infertility.<sup>[90]</sup>

#### **In order to improve “Agni”, Herbal medication advises:**

- a. Consuming warm, freshly cooked food.
- b. Shunning processed, reheated, and stale food.
- c. Eating at set times and not eating too much.

Agnitating foods that plague “Ama” and threaten fertility, including fried food, excess dairy, heavy meat, refined sugar, and cold drinks, must be reduced or eliminated.<sup>[91]</sup>

### 3. Pacifying Dosha Imbalances through Diet:

Each dosha (“Vata”, “Pitta”, and “Kapha”) has its own dietary recommendations to ensure balance:

- a. Vata-predominant women, who might have irregular cycles, anxiety, or being too thin, should eat warm, oily, grounding foods such as stews, ghee, nuts, and root vegetables.
- b. Pitta-predominant women, who might have heavy menstruation or inflammation, should eat cooling, mildly spiced, and non-acid foods such as coconut, milk, cucumber, and leafy greens.
- c. Kapha-predominant women, who might be prone to PCOS or weight gain, require a light, dry, and warm diet consisting of barley, lentils, leafy greens, and pungent spices such as black pepper and turmeric.

A diet personalized according to the individual's constitution (“Prakriti”) and prevailing imbalance (“Vikriti”) maintains hormonal balance and reproductive health.<sup>[92]</sup>

### 4. Fertility-Boosting Herbal medication and Supplements:

Some foods and herbal medication are “Rasayanas” (rejuvenators) in Herbal medication, particularly useful for fertility:

- a. Shatavari: Stimulates ovulation and uterine well-being.
- b. Ashwagandha: Antistress and aids endocrine function.
- c. Ghee with saffron: Uterine tonic.

These may be included in the diet as medicated ghee, herbal preparations, or as food additives under the supervision of an Ayurvedic practitioner.<sup>[93]</sup>

### 5. Seasonal and Ethical Eating Habits:

Consuming locally grown, seasonal, and climate-appropriate food maintains doshic balance year-round. Further, “eating gratefully and mentally calmly” increases the nutritional impact of food, aids mental clarity, and stabilizes reproductive hormones.

Diet and nutrition (“Ahara”) are central to Ayurvedic fertility management in women. By supporting reproductive tissue, enhancing digestion, averting toxin buildup, and balancing doshas, a balanced diet can naturally boost fertility and promote conception. Herbal medication 's nutrition philosophy is not generic; it is highly individualized, addressing not only what we consume, but also how, when, and why we consume it. When used with herbal

medication, lifestyle modifications, and cleansing, care of diet is an effective method in maintaining reproductive health and overall fertility in women.<sup>[94]</sup>

### **Lifestyle and Behavioural Guidelines (Vihara)**

In Herbal medication, “Vihara” refers to lifestyle and behaviour that supports diet (“Ahara”) and treatment (“Chikitsa”) to maintain health, prevent illness, and ensure reproductive wellness. Especially in the case of women's health and fertility, “Vihara” plays a vital role in balancing the body, mind, and spirit. Herbal medication believes that fertility is not only influenced by the physical organs but is also closely linked to a woman’s emotional state, daily practices, interaction with the environment, and spiritual well-being. Therefore, adopting appropriate lifestyle and behavioural practices is essential for naturally enhancing fertility in a sustainable way.<sup>[95]</sup>

#### **1. Dinacharya (Daily Routine)**

- a. Herbal medication places great importance on “Dinacharya”, or a consistent daily routine, to create balance and rhythm in bodily functions.
- b. A regular schedule helps maintain healthy digestion (“Agni”), regulates the doshas, promotes good sleep, and supports hormonal balance, all of which are crucial for fertility.

#### **Key aspects of a fertility-friendly “Dinacharya” include:**

- a. Rising early: Ideally at “Brahma Muhurta”, which is about 1.5 hours before sunrise, thus aligning with natural cycles.
- b. Cleansing practices: Activities like tongue scraping, drinking warm water, and having a gentle bowel movement help eliminate toxins from the body.
- c. Abhyanga (oil massage): Massaging the body with warm oil, such as sesame or medicated oils, nourishes the body, relaxes the nervous system, and improves blood flow to the reproductive organs.
- d. Exercise and yoga: Regular physical activity such as walking, stretching, and specific yoga poses like “Baddha Konasana” and “Setu Bandhasana” can improve blood circulation to the pelvic region.
- e. Meditation and pranayama: Practicing breathing exercises and mindfulness on a daily basis helps reduce stress, anxiety, and emotional issues that may contribute to infertility.<sup>[96]</sup>

## 2. Ritucharya (Seasonal Regimen)

Ritucharya involves making lifestyle adjustments according to the seasons to maintain doshic balance as external conditions change. For example, during the cold and dry seasons, Vata dosha tends to increase, which can lead to menstrual irregularities and hormonal imbalances. Women trying to conceive should follow seasonal guidelines, adjusting diet, clothing, activity, and rest to avoid such imbalances.

Throughout the year, attention must be given to maintaining warmth, fluidity, and the body's sustenance, especially during winter when Vata-related disorders are more common.<sup>[97]</sup>

## 3. Management of Stress and Mental Health

Herbal medication recognizes the significant impact of the mind ("Manas") on reproductive health. Continuous stress disrupts the balance of "Prana Vata", which is responsible for mental and nervous functioning, and can directly affect ovulation, menstrual cycles, and libido.

### To enhance emotional well-being and fertility, Herbal medication recommends

- a. Daily meditation to achieve inner calm and hormonal stability.
- b. Positive relationships and emotional support.
- c. Avoiding overstimulation, such as late-night screen time or excessively stressful environments.
- d. Adopting Sadvritta, which involves practicing kindness, truthfulness, compassion, and spiritual discipline to achieve mental peace and emotional stability.<sup>[98]</sup>

## 4. Nidra (Proper Sleep)

Quality sleep is essential for tissue repair, hormonal regulation, and mental health. Poor sleep patterns can lead to doshic imbalances, weakened immunity, and reproductive issues.

For fertility, Herbal medication suggests going to bed by 10 PM and limiting screen time and stimulation before sleep.

### It also recommends:

- a. Developing a calming bedtime routine, such as taking a warm bath or using oils and herbal teas like Brahmi or Ashwagandha-infused milk before sleep.
- b. Sleeping in a dark, quiet, and clean environment.<sup>[99]</sup>

## 5. Sexual Activities and Brahmacharya:

When planning for conception, Herbal medication recommends responsible and mindful sexual activity.

In the context of fertility, “Brahmacharya” does not mean celibacy, but rather timely and harmonized sexual activity that aligns with the menstrual cycle, mental readiness, and physical energy levels.

- a. Intercourse is best during the fertile window, around ovulation, and should be avoided during menstruation and times of illness.
- b. Frequent or indiscriminate sexual activity may weaken “Shukra Dhatu” (reproductive tissue) and disturb reproductive energy.
- c. Both partners should cultivate a pure mind, emotional balance, and mutual respect to enhance the factors necessary for successful conception (“Garbha Sambhava Samagri”).<sup>[100]</sup>

## 6. Avoiding Fertility-Impeding Habits

Lifestyle choices such as excessive travel, irregular work schedules, night shifts, poor posture, smoking, and alcohol consumption are considered “Vihara Viruddha” (opposite to good behaviour) and can harm fertility.

These habits may aggravate Vata, reduce digestion (“Agni”), and create toxins (“Ama”) that can affect the reproductive system.

By avoiding these habits and following a sattvic (pure) lifestyle that is peaceful, regular, and supportive, fertility can be naturally improved.

Herbal medication offers a holistic lifestyle plan (“Vihara”) to enhance women's fertility by integrating physical discipline, mental clarity, and spiritual awareness. Daily routines, stress management, structured sleep, seasonal living, and ethical behaviour all contribute to the optimal function of the reproductive system. When combined with healthy eating, herbal treatments, and detoxification, these practices form a natural, balanced, and personalized approach to reproductive health.<sup>[101]</sup>

## Role of Yoga and Meditation

Fertility, in Herbal medication, means more than merely being able to conceive; it indicates a woman's physical, emotional, and spiritual condition. Herbal medication is a body-of-mind-and-spirit concept that aims for balancing the body, mind, and spirit, which are vital for healthy reproductive function. Practices like yoga and meditation are ancient approaches that aid women by balancing the doshas, the natural energies of the body, assisting the reproductive organs, enhancing hormone functions, and minimizing emotional stress. Mind-Body Relationship in Reproductive Health

Herbal medication is firm in its belief that the mind and body are intimately related, particularly in the area of reproductive health.

Emotional disturbances such as anxiety, depression, or unresolved trauma can impact ovulation, menstrual cycles, and hormone production. Stress, especially, elevates Vata dosha, which governs movement and nervous system control, including the movement of the ovum, menstrual bleeding, and hormones.

Yoga and meditation calm the nervous system, raise Ojas, the body's vital energy, and bring on a calm, balanced state of mind conducive to fertility.

These are not only healing procedures but also assist in preventing diseases beforehand.<sup>[102]</sup>

## Yoga Asanas (Postures) for Fertility

Some yoga postures strengthen the pelvic muscles, increase blood supply to the reproductive organs, and assist the endocrine system.

These postures also induce relaxation, which is critical in restoring hormonal balance when stress or erratic lifestyle patterns disturb it. Some of the suggested yoga poses for enhancing fertility are:

- a. Bound Angle Pose, or Baddha Konasana, opens the hips, sustains ovarian health, and increases blood flow to the pelvic region.
- b. Bhujangasana (Cobra Pose): Activates the adrenal glands and reproductive organs while enhancing flexibility in the spine.
- c. Bridge Pose (Setu Bandhasana): Improves digestion, helps maintain hormonal balance, and tones the pelvic muscles.

- d. Viparita Karani, also known as the Legs-Up-the-Wall Pose, reduces tension and improves uterine blood flow, which promotes relaxation.
- e. Paschimottanasana (Seated Forward Bend): The mind is soothed, stretches of the reproductive organs will be achieved and will help to ease up fertility-related discomfort.

The more one practices these postures under the proper guidance of an expert prepares the body for conception and reduces symptoms of common gynecological conditions like PCOS, endometriosis, and irregular periods.<sup>[103]</sup>

### **Pranayama (Breath Control) for Hormonal and Emotional Balance**

Pranayama practices regulate Prana Vayu, the life force, and eliminate mental obstacles that may influence reproductive health.

Deep breathing alleviates anxiety, stabilizes mood, and enhances oxygen supply to reproductive tissues.

#### **Effective pranayama practices for fertility are:**

- a. Nadi Shodhana (Alternate Nostril Breathing): Balances the two hemispheres of the brain and tranquillizes the nervous system.
- b. Bhramari (Humming Bee Breath): Induces relaxation and enhances the activity of the pituitary and thyroid glands.
- c. Ujjayi (Victorious Breath): Stimulates the parasympathetic nervous system and assists endocrine function.

These methods also assist in balancing the hypothalamic-pituitary-ovarian axis, which regulates the menstrual cycle and ovulation.<sup>[104]</sup>

### **Meditation for Fertility and Emotional Harmony**

Meditation is a fundamental aspect of maintaining mental and emotional equilibrium, which is at the heart of Ayurvedic well-being.

Stress triggers the "fight or flight" response, which depresses levels of reproductive hormones such as oestrogen and progesterone. Meditation reverses this by triggering the "rest and digest" response and enabling the body to heal and regain fertility.

**Regular meditation can:**

- a. Decrease levels of cortisol and adrenaline.
- b. Increase Sattva Guna, or purity and clarity of mind.
- c. Enhance the quality of sleep, digestion, and emotional stability.
- d. Foster self-awareness and internal connection with fertility potential.

Mindfulness meditation, mantras (such as "Om" or "Shreem"), and guided visualizations of the womb and fertility are especially beneficial for women wishing to conceive.

**Integration with Ayurvedic Treatment**

Yoga and meditation are integral parts of the treatment in Ayurvedic infertility therapy (Vandhyatva Chikitsa).

They complement other therapies such as Panchakarma, herbal remedies, and diets by assisting in detoxification, rejuvenation of the tissues (Rasayana), and mental acuity. Yoga also strengthens the body's responsiveness to Ayurvedic therapy.

The Ayurvedic tradition views yoga and meditation as powerful healing tools that balance body, mind, and spirit, rather than just physical activities or relaxation methods.

These practices regulate hormones, balance doshas, enhance circulation, and calm mental stress—all necessary for the improvement of fertility. When part of a customized Ayurvedic lifestyle, i.e., right diet (Ahara), daily routine (Dinacharya), and emotional stability, yoga and meditation become powerful partners in the path to conception and overall wellness for women's reproductive health.<sup>[105]</sup>

**Preconception and Post conception Care in Herbal medication**

Herbal medication is a historical Indian health system that promotes proactive and general well-being. With regard to reproductive health, Herbal medication also gives comprehensive instructions on preconception and post-conception nurturing. The objective of this program is to encourage a successful pregnancy, a secure conception, and healthy fertility. These directives are founded on the premise that physical, mental, and emotional health of the parents, particularly the mother, is crucial for a healthy conception and proper fetal growth.

## **Preconception Care (Garbhadhana Paricharya)**

Before becoming pregnant, Herbal medication stresses that both spouses' physical and mental states must be purified and ready. This is likened to plowing good ground before sowing a seed, to ensure optimum conditions for growth.

### **1. Purification (Shodhana Therapy):**

- a. Detoxification by means of Panchakarma therapies is commonly advised prior to conception.
- b. These are Vamana (vomiting), Virechana (laxation), Basti (enema), Nasya (nasal cleansing), and Raktamokshana (bloodletting). These therapies assist in the elimination of toxins, equilibrium of the three doshas (Vata, Pitta, Kapha), and preparing the reproductive system for proper functioning.

### **2. Diet and Lifestyle Modifications:**

- a. Nutrition plays a crucial role.
- b. To nourish the reproductive tissues, a Satvik (wholesome and pure) diet is recommended, which includes ghee, milk, seasonal fruits, vegetables, whole grains, and herbal medication like ashwagandha, shatavari, and gokshura (Shukra Dhatu). Alcohol, smoking, stress, and irregular sleep must be avoided.<sup>[106]</sup>

### **3. Mental and Emotional Readiness:**

- a. There should be a calm and emotionally stable atmosphere.
- b. Practices like meditation, yoga, and fulfilling relationships assist in enhancing mental health, which is thought to impact the quality of the sperm and egg.

### **4. Timing and Rituals:**

- a. Herbal medication promotes the timing of sexual intercourse with the woman's ovulation cycle and her emotional preparedness.
- b. The Garbhadhana Samskara is one of the 16 Sanskaras (holy rites), pointing out the holy aspect and intention of conception.<sup>[107]</sup>

**Post-conception Care (Garbhini Paricharya):**

After conception, the attention shifts to maintaining a healthy pregnancy and facilitating fetal growth.

**1. Monthly Routine:**

- a. Based to the fetus's growth phase, Herbal medication recommends a monthly program designed for the pregnant woman which includes eating habits and lifestyle adjustments.
- b. For example, during the first trimester, cooling and nutritive foods are suggested to support implantation and early development, whereas in the third trimester, unctuous foods are suggested to facilitate delivery.

**2. Herbal Support:**

- a. Shatavari, Brahmi, and Guduchi herbal medication are usually prescribed to build the strength of the uterus, alleviate stress, and increase immunity.
- b. These herbal medications are consumed under the guidance of an Ayurvedic doctor.

**3. Emotional and Environmental Impact:**

- a. It is thought that a mother's experiences directly affect the fetus.
- b. So, she is told to do something good, avoid bad feelings, and stay in a supportive and positive environment. Listening to soothing music, reading spiritual literature, and maintaining a low level of stress are stressed upon.<sup>[108]</sup>

**4. Physical Activity:**

- a. Mild exercises such as prenatal yoga and walking help with circulation, digestion, and emotional stability.
- b. But overexertion must be prevented.

**5. Food Recommendations:**

- a. The food during pregnancy should be light, nutritious, and easily digestible.
- b. Milk, rice, green gram, fresh fruits, and clarified butter (ghee) are good. Spices like turmeric, ginger, and cumin may be added in small amounts to facilitate digestion.
6. Preparation for Delivery: Certain preparations of ghee are administered in the last weeks of pregnancy to lubricate the reproductive system and facilitate an easy delivery. Abhyanga (oil massage) and Basti treatments may be advised as well.

Ayurvedic preconception and post-conception care presents a well-established, holistic approach in the enhancement of fertility, aid to the health of the mother, and support for fetal development. In order to create an atmosphere that is favourable to conception and delivery, Herbal medication combines mental balance, physical wellness, and faith. When practiced under the supervision of an experienced professional, it offers significant assistance to women throughout their reproductive life.<sup>[109]</sup>

### **Challenges and Limitations:**

Herbal medication, the ancient system of medicine based on Indian knowledge, has been playing a critical role in preserving women's health and solving fertility problems over centuries. Despite having a holistic and personalized approach, Herbal medication also encounters a number of difficulties and limitations in its applicability to contemporary women's reproductive health. These are complex problems, encompassing issues of scientific evidence, coordination with conventional medicine, regulatory issues, and public attitude.

#### **1. Lack of Standardization and Scientific Evidence:**

Lack of structured treatments and trustworthy scientific evidence is one of Herbal medication's major shortcomings when it comes to curing female infertility. Although numerous Ayurvedic herbal medication and treatments such as Shatavari, Ashwagandha, and Panchakarma have yielded encouraging results in clinical observation, strict, large-scale clinical trials are usually lacking. Lack of standard formulations and dosage recommendations hampers measuring efficacy and safety on a consistent basis. The lacuna prevents the acceptance of Herbal medication within the international medical community as well as among evidence-based practitioners.

#### **2. Integration with Modern Reproductive Medicine:**

Herbal medication and contemporary reproductive medicine follow different paradigms at their very core. While Herbal medication aims at dosha balancing (Vata, Pitta, Kapha) and fortification of reproductive tissue (Shukra Dhatu), conventional medicine is concerned with hormonal analysis, surgery, and reproductive assistance techniques (ART) such as IVF. Failure of the two systems to combine their approaches leads to confusion among patients and suppresses the supportive role of Herbal medication in the care of fertility. Additionally, some therapists would discourage ART options, thus delaying timely medical treatment in women with severe fertility problems.<sup>[110]</sup>

### **3. Diagnostic Limitations:**

Traditional methods of diagnosis, which includes as pulse analysis, tongue examination, and patient history, are highly valued in Herbal medication. Although these methods provide profound insights into the constitution (Prakriti) and imbalances of the patient, they might not detect underlying structural or endocrine disorders like PCOS, endometriosis, or tubal blockage with the same accuracy as current diagnostic techniques. In the absence of imaging and laboratory studies, Herbal medication cannot accurately diagnose complicated fertility issues.

### **4. Delayed Treatment Outcomes:**

Ayurvedic treatment is slow and focuses on long-term balance, not instant effects. Although this is good for general wellness, it might not be ideal for women with critical reproductive timetables, especially those of advanced maternal age. Delayed conception as a result of extended Ayurvedic therapy can heighten emotional stress and limit the timeframe for medical interventions.

### **5. Regulatory and Quality Control Issues:**

Herbal medication's herbal and medicinal components face significant regulatory challenges. Poor quality of herbal preparations, adulteration, and absence of standardized manufacturing procedures jeopardize the credibility of Ayurvedic fertility treatment. Most over-the-counter Ayurvedic preparations are not regulated and can include heavy metals and contaminants, which can pose health hazards, particularly during pregnancy.<sup>[111]</sup>

### **6. Limited Research on Women's Reproductive Disorders:**

While Herbal medication has some overall principles for reproductive well-being, specific research into contemporary reproductive diseases like premature ovarian failure, habitual miscarriages, or auto-immune-related infertility is scant. The ancient texts do not specifically mention such conditions, and this leaves a void in the progression from traditional knowledge to current reproductive health issues. This negates the ability to apply Herbal medication fully to changing reproductive needs in women.

### **7. Awareness and Accessibility**

In most of the world, particularly urban and Western, Herbal medication is perceived as alternative or complementary and not primary care. Limited information, inaccessibility to trained Ayurvedic practitioners, and misconceptions regarding its effectiveness are factors

leading to its underuse. In addition, all women are not accessible to full Ayurvedic care, especially in rural or low-income communities.

Although Herbal medication provides a rich, personalized, and integrated understanding of women's reproductive health and fertility, its potential is hampered by shortcomings in scientific validation, integration with conventional medicine, diagnostic shortcomings, and regulation. Overcoming these gaps by means of research, policy endorsement, practitioner education, and cross-disciplinary collaboration can advance Herbal medication 's contribution to women's fertility in a more effective and evidence-supported form.<sup>[112]</sup>

## CONCLUSION

Herbal medication, an ancient system of natural healing, has a deep understanding of women's health and fertility. It is based on the principles of balance, personalized treatment, and harmony between the body, mind, and spirit. Herbal medication offers a holistic approach to maintaining reproductive health and managing fertility problems in women.

One of the main strengths of Herbal medication is its focus on “preventive and promotive care”.

It doesn't just treat infertility once it has occurred but places great importance on preparing the mind and body for conception through preconception care (Garbhadhana Samskara). This includes detoxification through Panchakarma, changes in diet and lifestyle, mental well-being, and spiritual balance. These practices aim to create the most favourable environment for conception and are essential for the healthy development of both the mother and the unborn child.

During pregnancy, Herbal medication offers specific guidelines under “Garbhini Paricharya” that include month-by-month dietary and lifestyle recommendations. These are designed to support the growth of the fetus, the mother's strength, and her mental peace. Herbal medication also emphasizes creating a calm and positive environment for the pregnant woman, recognizing the importance of emotional well-being in the child's development.

The use of “herbal remedies” such as Shatavari, Ashwagandha, Guduchi, and Brahmi is another key aspect of Herbal medication. These herbal medications offer natural, adaptogenic support to the reproductive system. They help nourish reproductive tissues, regulate hormones, reduce stress, and boost immunity—all factors that are crucial for conception and

a healthy pregnancy. When used under proper guidance, these herbal treatments can support conventional fertility treatments and contribute to overall well-being.<sup>[113]</sup>

However, despite its value, Herbal medication has certain limitations in the context of modern reproductive issues. For example, there are not always well-established treatment methods, limited scientific evidence from large-scale studies, and few diagnostic tools. These factors can make Herbal medication less suitable for complex fertility conditions such as PCOS, endometriosis, and idiopathic infertility.

Despite these limitations, Herbal medication can serve as a “supportive system” alongside conventional reproductive medicine. Its holistic approach can help manage stress, regulate menstrual cycles, improve sleep, and enhance the body's natural fertility potential—key elements of effective fertility management. As a complementary system, Herbal medication can fill in the gaps that modern medicine may not address, particularly in areas like emotional support, lifestyle adjustments, and long-term reproductive health.

Furthermore, the growing interest in natural and personalized healthcare has created new opportunities for Herbal medication in the field of fertility. With proper research, quality assurance, and collaboration, Herbal medication has the potential to become a more significant part of women's reproductive care.<sup>[114]</sup>

## REFERENCES

1. Patibandla S, Gallagher JJ, Patibandla L, Ansari AZ, Qazi S, Brown SF. Ayurvedic Herbal Medicines: A Literature Review of Their Applications in Female Reproductive Health. *Cureus.*, 2024 Feb; 16(2): e55240.
2. Treating long standing Primary Infertility with Ayurveda - A Case Study | Journal of Ayurveda and Integrated Medical Sciences [Internet]. [cited 2025 Aug 10]. Available from: <https://www.jaims.in/jaims/article/view/355>
3. Treating long standing Primary Infertility with Ayurveda - A Case Study | Journal of Ayurveda and Integrated Medical Sciences [Internet]. [cited 2025 Aug 10]. Available from: <https://www.jaims.in/jaims/article/view/355>
4. Rathi I, Mavi A, Shannawaz M, Saeed S, Yadav A, Hasan S. Effectiveness of Ayurveda Intervention in the Management of Infertility: A Systematic Review. *Cureus.* 16(4): e57730.

5. Bawane V, Shitre A. A comprehensive review of Garbha Sambhava Samagri and its role in Vandhyatva with special reference to Beejadushti. *Int J Health Sci.*, 2022 July 5; 2433–8.
6. Sk DV, Kumari C, Siddesh S, M R. Treating long standing Primary Infertility with Ayurveda - A Case Study. *J Ayurveda Integr Med Sci.*, 2017 Dec 31; 2(06): 142–9.
7. Kulanatha (Ipitakaduwa) IGPR. &lsquo; Rtu & rsquo; and & lsquo; Rtukāla & rsquo;; The time to be pregnant exploring Ayurveda perspectives on fertility in literature. *Univ Colombo Rev [Internet]*. 2025 July 21 [cited 2025 Aug 7];6(1). Available from: <https://ucr.sljol.info/articles/10.4038/ucr.v6i1.217>
8. Choudhary P, Sharma RK, Sharma DC, Saini M. A PHYSIOLOGICAL STUDY OF SHUKRA DHATU W.S.R. SEXUAL HORMONES. *Int Ayurvedic Med J.*, 2021 Oct 16; 9(9): 2165–73.
9. Sajeev DS, Pratap DA. ROLE OF VATA IN FERTILITY. 11(16)
10. Biradar DM, Biradar P, Srinivasulu M. Genetics of Ayurveda in Infertility. *J Ayurveda Integr Med Sci.*, 2017 Aug 31; 2(04): 181–5.
11. Dwivedi J. A Review of Vata, Pitta, and Kapha Doshas in Ayurveda. *SGS - Eng Sci [Internet]*. 2025 May 7 [cited 2025 Aug 9];1(1). Available from: <https://spast.org/techrep/article/view/5284>
12. Akter R. Stree Vigyan and the role of panchakarma in female reproductive health. *J Kaumarbhritya Stree Vigyan.*, 2024 Jan 1; 1(1): 16–8.
13. Hinduism and Ayurveda | 7 | Implications for managing mental health | [Internet]. [cited 2025 Aug 9]. Available from: <https://www.taylorfrancis.com/chapters/edit/10.4324/9780429490576-7/hinduism-ayurveda-dinesh-bhugra>
14. 24-1.pdf [Internet]. [cited 2025 Aug 9]. Available from: <https://store.additionbooks.com/wp-content/uploads/2024/09/24-1.pdf>
15. Shinde P, Sb D. BASTI IN FEMALE INFERTILITY (VANDHYATVA): A CRITICAL ANALYSIS, 2016.
16. Goel M, Singh R, Bidhoodi U. Therapeutic aspects of Kashtartava (dysmenorrhea) in Ayurveda: a review. *J Indian Syst Med.*, 2022 June; 10(2): 111.
17. Anitha S, Babu G, Prasad K, Prasad P. Role of Ayurveda and Yoga in the management of Polycystic Ovarian Syndrome (PCOS). *J Ayurveda Integr Med Sci.*, 2025 Apr 30; 10(3): 117–23.

18. Role of Ayurveda on PCOS (Polycystic Ovary Syndrome): A Critical Review | Indian Journal of Integrative Medicine [Internet]. [cited 2025 Aug 10]. Available from: <https://www.mansapublishers.com/index.php/ijim/article/view/3080>
19. Sreedhar A, Kumar SS. Ayurvedic Management of Endometriosis. *Int J Ayurveda Pharma Res.*, 2025 Feb 7; 149–52.
20. Pawar D, Gholap S. AYURVED APPROACH TO ENDOMETRIOSIS – A CASE STUDY. *Int Ayurvedic Med J.*, 2020 Aug 18; 8(8): 4271–7
21. Patel DVS, Sharma DS, Sharma DS. UTERINE FIBROID IN AYURVEDIC PERSPECTIVE AND ITS MANAGEMENT, 11(4).
22. Pathak DA, Saxena DA. REVIEW ARTICLE ON GARBHASHAYA ARBUDA-AYURVEDIC PERSPECTIVE OF GARBHASHAYA ARBUDA (UTERINE FIBROID), 13(5).
23. Edavalath M, Bharathan BP. Methodology for developing and evaluating diagnostic tools in Ayurveda – A review. *J Ayurveda Integr Med.*, 2021 Apr 1; 12(2): 389–97.
24. Walkikar SS, Rai A. Analysis of Prakriti in Ayurvedic Classical Texts. *Int J Res AYUSH Pharm Sci.*, 2023 Oct 28; 1–7.
25. Mills PJ, Peterson CT, Wilson KL, Pung MA, Patel S, Weiss L, et al. Relationships among classifications of ayurvedic medicine diagnostics for imbalances and western measures of psychological states: An exploratory study. *J Ayurveda Integr Med.*, 2019 July; 10(3): 198–202.
26. Aradhana DA, Jana DP. RASA DHATU AS THE GUIDING ELEMENT IN MAINTAINING WOMAN’S HEALTH AND ITS ROLE IN PRASUTI TANTRA AND STREE ROGA- A CONCEPTUAL STUDY., 2015; 13(23).
27. Principal, Govt. Ayurveda, Yoga & Prakrut Chikitsa Mahavidhyalaya, Jaipur, Rajasthan, India, Kaushal K. Conceptual Study of Srotas (Body Channels) & Medicinal Plants Acting on Them. *J Adv Res AYURVEDA YOGA UNANI SIDHHA HOMEOPATHY.*, 2022 Nov 4; 09(3 & 4): 6–9.
28. Chauhan DA, Sharama R, Sheoran R, Gupta B. A CRITICAL REVIEW ON ARTAVAVAHA SROTAS AS CONCEPT TO FEMALE REPRODUCTIVE SYSTEM IN AYURVEDA., 13(2).
29. D D, Kumari S. Critical Understanding of Agni and Artavakshaya in Women’s Health from Ayurveda Perspective. *Int J Ayurveda360.*, 2024 Dec 15; 1(3): 134–46.
30. Kulkarni K, Swamidas S, Mishra R. A REVIEW ON MENSTRUAL CYCLE AND CONCEPT OF AYURVEDA. 10(9).

31. Arkachari M, Patil AS. EXPLORING AYURVEDA FORMULATIONS FOR WOMEN HEALTH ISSUES WITH REFERENCE TO ARTAVA DUSHTI AND VANDHYATVA - A REVIEW., 2015; 14(1)
32. Pandey A, Bhardwaj B, Shirvadkar D. Critical Review and Analysis of Nadi Vigyan: A Boon to Ayurvedic Methodology. *J Ayurveda Integr Med Sci.*, 2023 Mar 25; 8(2): 68–73.
33. Saini DP, Parashar DD. JIHVA PARIKSHA AS A DIAGNOSTIC TOOL IN ANNAVAHA SROTODUSHTI VIKARA: AN OBSERVATIONAL STUDY.
34. Rathod S, Dawre M. AN AYURVEDIC REVIEW OF STOOL EXAMINATION (PURISHA PARISKHAN).
35. S CKD, Ajantha, Samarawickrama AG. A Review on Mutra Pareeksha in Ayurveda. *J Ayurveda Integr Med Sci.*, 2017 Feb 28; 2(01): 139–43.
36. S DH, Kv M, K S. A Comprehensive Analysis of Nidana for Netra Rogas as explained by different Ayurveda instigators in the specific context of Netra Shalakyas. *J Ayurveda Integr Med Sci.*, 2017 Oct 31; 2(05): 117–25.
37. Kurande VH, Waagepetersen R, Toft E, Prasad R. Reliability studies of diagnostic methods in Indian traditional Ayurveda medicine: An overview. *J Ayurveda Integr Med.*, 2013; 4(2): 67–76.
38. Critical Review of Ayurvedic Herbs in Treatment of Gynecological Problems | International Journal of Research in AYUSH and Pharmaceutical Sciences [Internet]. [cited 2025 Aug 10]. Available from: <http://www.ijraps.in/index.php/ijraps/article/view/166>
39. Meher K, Thanugula SPS, Pradeep S, Thakur C, Acharya R. Understanding the Role of Shatavari (*Asparagus racemosus*) in Enhancing Female Fertility a Traditional Perspective. *Int J Ayurveda Pharma Res.*, 2025 Apr 10; 104–10.
40. Khan DR, Sahu DN. IMPORTANCE OF SHATAVARI CHURNA FOR FEMALES ACCORDING TO AYURVEDA, 11(1).
41. Jadhav DA, Gaikwad DP, Bhosale DM, Yugandhara D. TO STUDY THE ROLE OF SHATAVARI AND ASHWAGANDHA KSHEERPAK SEVAN IN MANAGEMENT OF INFANTILE UTERUS.
42. Rawat N, Roushan R. Ashwagandha (*Withania Somnifera*); A potential aphrodisiac drug in Ayurveda, 2018; 8(8).
43. Dongre S. Efficacy and Safety of Ashwagandha (*Withania somnifera*) Root Extract in Improving Sexual Function in Women: a double---blind, randomized, placebo---controlled study.

44. Priyadarshini DSP. EFFECT OF DIET AND LIFESTYLE ON STRI ROGA AN AYURVEDIC REVIEW, 14(7).
45. Patil DA, Berde DK, Tekale DP, Aishwarya D. CASE STUDY: SUCCESSFUL AYURVEDIC MANAGEMENT OF FEMALE INFERTILITY DUE TO BILATERAL TUBAL BLOCKAGE, 14(7).
46. Complex effects of Ayurvedic formulation: Guduchi and Madhuyashti on different components of life history may elude the elixir effect | Journal of Genetics [Internet]. [cited 2025 Aug 10]. Available from: <https://link.springer.com/article/10.1007/s12041-018-1045-2>
47. Nagar DN, Rao DP, Singh C, Prasad DR, Manoj D, Rajpurohit DN. AYURVEDIC APPROACHES TO MANAGING MALE AND FEMALE INFERTILITY AND THE ROLE OF AYURVEDA IN PROMOTING HOLISTIC HEALTH AND WELLNESS IN THE 21ST CENTURY, 12(19).
48. Choudhary S, Kaurav H, Chaudhary G. GOKHRU (TRIBULUS TERRESTRIS AND PEDALIUM MUREX): MEDICINAL IMPORTANCE OF CHOTA GOKHRU AND BADA GOKHRU IN AYURVEDA AND MODERN SCIENCE. Asian J Pharm Clin Res., 2021 Apr 13; 6–13.
49. An open label single arm clinical study to evaluate the combined effect of Dashamoola Ksheera Basti and Rakta Chandana Yoga oral administration in Vandhyatwa w.s.r. to Female Infertility | Journal of Ayurveda and Integrated Medical Sciences [Internet]. [cited 2025 Aug 10]. Available from: <https://jaims.in/jaims/article/view/4201>
50. Ansari AS, Sevliya K, Mohammad I, Badar A, Lohiya NK. Plants for Female Fertility Regulation: A Review. J Pharmacol Toxicol., 2017 Mar 15; 12(2): 57–75.
51. Adams CE. WOMEN AND FOLK REMEDIES: YOUTH, FERTILITY, AND HEALTH. | EBSCOhost [Internet]. Vol. 5. 2018 [cited 2025 Aug 21]. p. 183. Available from: <https://openurl.ebsco.com/contentitem/gcd:135097814?sid=ebsco:plink:crawl&id=ebsco:gcd:135097814>
52. Chandran A, Syam R J, Jerone JJ, V SK. Ethnopharmacological study about Glycyrrhiza glabra L. (Licorice) based on Ayurveda, An Indian System of Traditional Medicine- A Review. Int J Ayurvedic Med., 2022 Oct 9; 13(3): 587–600.
53. Jain A, Choubey S, P.K.Singour, Rajak H, Pawar RS. Sida cordifolia (Linn). J Appl Pharm Sci., 2011 Apr 30; (Issue): 23–31.
54. Object object. EFFICACY OF PHALA-GHRITA ON FEMALE INFERTILITY. [cited 2025 Aug 21]; Available from: <https://core.ac.uk/reader/333809460>

55. Mishra DS, Srivastava DN, Rakkar DS, Aakanksha D. AYURVEDIC THERAPEUTICS FOR ASRIGDARA A COMPREHENSIVE REVIEW, 14(5).
56. Comparative study between Patrangasava and Pradararipu Rasa in the treatment of Leucorrhoea | Journal of Ayurveda and Integrated Medical Sciences [Internet]. [cited 2025 Aug 21]. Available from: <https://www.jaims.in/jaims/article/view/3062>
57. K TK, O KK, Warriar DRR. A CASE REPORT ON MANAGEMENT OF FEMALE INFERTILITY DUE TO LOW ANTI MULLERIAN HORMONE WITH AYURVEDIC TREATMENT PROTOCOL. Kerala J Ayurveda [Internet]. 2023 Sept 30 [cited, 2025 Aug 21]; 2(3). Available from: <https://www.keralajournalofayurveda.org/index.php/kja/article/view/189>
58. Gandhali A, Surekha D, Ayu MS, Streerog P. International Journal of Research in Indian Medicine.
59. Pandey DA, Saxena DA, Srivastava DS. CONCEPTUAL OVERVIEW OF SHATAVARI TAILA NASYA AND UTTARABASTI IN MANAGEMENT STREE VANDHYATVA, 13(19).
60. Patibandla S, Gallagher JJ, Patibandla L, Ansari AZ, Qazi S, Brown SF. Ayurvedic Herbal Medicines: A Literature Review of Their Applications in Female Reproductive Health. Cureus, 2024 Feb; 16(2): e55240.
61. Panchakarma: Ayurvedic Detoxification and Allied Therapies—Is There Any Evidence? | Request PDF [Internet]. [cited 2025 Aug 21]. Available from: <https://www.researchgate.net/publication/287120056>
62. Prarthana T, Rao VG. Management of secondary amenorrhea and PCOS by Vamana and Virechana - a case report. J Res Ayurvedic Sci., 2022 Mar; 6(1): 11.
63. JAHM\_201732\_01.pdf [Internet]. [cited 2025 Aug 21]. Available from: [https://www.ayurvedjournal.com/JAHM\\_201732\\_01.pdf](https://www.ayurvedjournal.com/JAHM_201732_01.pdf)
64. Singh N, Sharma R. An Ayurvedic Approach to Stree Vandhyatva (Anovulation) Utilizing Uttar Basti. Int J Ayurveda Pharma Res., 2023 Sept 13; 88–92.
65. Meher K, Patil PA, Dhoran SV, Budhwat RK, Sharma K. Role of Nasya Karma in Hormonal Imbalance Related - Gynaecological Disorder. J Ayurveda Integr Med Sci., 2025 May 13; 10(3): 204–11.
66. Sawarkar G, Sawarkar P, Desai P. Raktamokshana - A Systemic Review. Int J Ayurvedic Med., 2021 Mar 31; 12(1): 23–34.

67. Singh SK, Kushawaha A, Rajoria K, Dave HH. An Open-Label Randomized Comparative Clinical Study of Different Panchakarma Therapies in Female Infertility. *J Ayurveda*, 2022 Mar; 16(1): 11.
68. Ogunsola OI, Adeyi A, Ashiru OA. Detoxification as a potential intervention for improving in vitro fertilization outcomes: a comparative analysis of failed cycles before and after detox. *Glob Reprod Health*, 2024 Autumn; 9(3): e0085.
69. linda\_fitzgerald.pdf [Internet]. [cited 2025 Aug 21]. Available from: [https://files.achs.edu/mediabank/files/linda\\_fitzgerald.pdf](https://files.achs.edu/mediabank/files/linda_fitzgerald.pdf)
70. Scholar P, District DK. SNEHANA KARMA – TRUTHS AND MYTHS ABOUT OLEATION THERAPY AN AYURVEDIC PERSPECTIVE, 2023; 10(12).
71. B, K H M, S Desai A, Borannavar S. CLINICAL EFFICACY OF ABHYANGA - A CONCEPTUAL STUDY. *Int Ayurvedic Med J.*, 2023 Dec 19; 11(12): 3077–84.
72. Kamble P, C S, Rathnakar LV. An Ayurvedic Approach in the Management of Female Infertility Caused due to Uterine Factor. *Int J Ayurveda Pharma Res.*, 2024; 39–49.
73. (PDF) Role of Agni in Panchakarma Practice: A Conceptual Study. ResearchGate [Internet]. 2025 Aug 6 [cited 2025 Aug 21]; Available from: [https://www.researchgate.net/publication/376017905\\_Role\\_of\\_Agni\\_in\\_Panchakarma\\_Practice\\_A\\_Conceptual\\_Study](https://www.researchgate.net/publication/376017905_Role_of_Agni_in_Panchakarma_Practice_A_Conceptual_Study)
74. Palatty PL, Kamble PS, Shirke M, Kamble S, Revankar M, Revankar VM. A Clinical Round up of the Female Infertility Therapy Amongst Indians. | EBSCOhost [Internet]. Vol. 6. 2012 [cited 2025 Aug 21]. p. 1343. Available from: <https://openurl.ebsco.com/contentitem/gcd:83819113?sid=ebsco:plink:crawler&id=ebsco:gcd:83819113>
75. ad\_51674.pdf [Internet]. [cited 2025 Aug 21]. Available from: [https://ayuscript.com/submission/ad\\_51674.pdf](https://ayuscript.com/submission/ad_51674.pdf)
76. Munjal D, Choudhary P. Effect of Ksheerbasti and Uttara Basti on Endometrial Fibrosis Induced Infertility (Kshetra Dushti Janya Vandhyatva) - A Case Report. *J Ayurveda Integr Med Sci.*, 2024 Nov 5; 9(8): 331–6.
77. Yadav D, Rajpurohit D, Sahay Shukla G, Agarwal R, Goyal M. ROLE OF AYURVEDIC HERBAL AND HERBO-MINERAL FORMULATIONS INFEMALE INFERTILITY- A REVIEW ARTICLE. *Int Ayurvedic Med J.*, 2023 June 21; 11(6): 1255–63.
78. Gaskins AJ, Chavarro JE. Diet and fertility: a review. *Am J Obstet Gynecol.*, 2018 Apr 1; 218(4): 379–89.

79. Mehta DDD, Marlewar DSG, Gaikwad DSV, Dewaikar DSJ. RAJSWALA PARICHARYA, DINCHARYA, RITUCHARYA - NEED OF MODERN ERA, TO AVOID MENSTRUAL DISORDERS, 8(7).
80. Siriwardene SAD, Karunathilaka LPA, Kodituwakku ND, Karunarathne Y a. UD. Clinical efficacy of Ayurveda treatment regimen on Subfertility with Poly Cystic Ovarian Syndrome (PCOS). *Ayu.*, 2010 Mar; 31(1): 24.
81. Admin. PCOS Treatment in Ayurveda | Panchakarma for PCOS [Internet]. *Ayursh*. 2024 [cited 2025 Aug 21]. Available from: <https://www.ayursh.com/blog/pcos-treatment-in-ayurveda-panchakarma-for-pcos/>
82. Sandhya MK, Donga PSB. Ayurvedic Management of Endometriosis – A Case Study. *IJFMR - Int J Multidiscip Res* [Internet]. 2024 July 7 [cited 2025 Aug 21];6(4). Available from: <https://www.ijfmr.com/research-paper.php?id=24119>
83. Dindur SC, Chakravarthy GRR, Jahagirdar G, Kannan PM. Exploring the efficacy of Basti and Sthanika Chikitsa in Ovarian Endometrioma Management: A Case Study. *J Ayurveda Integr Med Sci.*, 2025 June 12; 10(4): 352–8.
84. Kumar DH, Pareek DP, Kumar DP, Panwar DN, Kumar DP. Integrating Shodhana and Rasayana Therapies in The Treatment of Female Infertility: A Critical Review of Scientific Evidence. *Afr J Biomed Res.*, 2024 Dec 23; 27(4S): 9135–40.
85. Marlewar DrSG, Kulkarni DrHD. “A Review of Role of Nasya Karma in Gynaecological Disorders.” *IOSR J Dent Med Sci.*, 2017 Feb; 16(2): 113–6.
86. HempCann Solutions [Internet]. 2025 [cited 2025 Aug 21]. Ayurvedic Treatments for Female Infertility (Vandhyatava). Available from: <https://vediherbals.com/blogs/blog/panchakarma-for-infertility>
87. Gupta A. Panchakarma: Ayurveda’s natural cleanse [Internet]. *Kerala Ayurveda USA*. 2022 [cited 2025 Aug 21]. Available from: <https://www.keralaayurveda.us/wellnesscenter/panchakarma-ayurvedas-natural-cleanse/>
88. (PDF) Aahara and different Ayurvedic Aahara Upayoga Niyama: A narrative review. *ResearchGate* [Internet]. 2025 Aug 6 [cited 2025 Aug 21]; Available from: [https://www.researchgate.net/publication/391413984\\_Aahara\\_and\\_different\\_Ayurvedic\\_Aahara\\_Upayoga\\_Niyama\\_A\\_narrative\\_review](https://www.researchgate.net/publication/391413984_Aahara_and_different_Ayurvedic_Aahara_Upayoga_Niyama_A_narrative_review)
89. (PDF) A REVIEW ON CONCEPT OF INFERTILITY IN AYURVEDA. *ResearchGate* [Internet]. 2025 Aug 6 [cited 2025 Aug 21]; Available from: [https://www.researchgate.net/publication/373482564\\_A\\_REVIEW\\_ON\\_CONCEPT\\_OF\\_INFERTILITY\\_IN\\_AYURVEDA](https://www.researchgate.net/publication/373482564_A_REVIEW_ON_CONCEPT_OF_INFERTILITY_IN_AYURVEDA)

90. Art of Living Ayurveda [Internet]. 2023 [cited 2025 Aug 21]. Optimize Your Fertility: 10 Ayurvedic Foods to Boost Shukra + Libido in Women. Available from: <https://www.artoflivingayurveda.com/blog/fertilityfoods101>
91. Balahia G, Kumar A, Chambyal K, Thamman RK. Effect of Agni on Artava: A Comprehensive Ayurvedic Analysis. *J Ayurveda Integr Med Sci.*, 2025 July 30; 10(7): 102–6.
92. Rao VS, Gupta S, Armour M, Cheema BS, Smith CA, Moran L, et al. Perspectives and dietary management of excess weight in polycystic ovary syndrome: A focus group study with clinicians of traditional Indian medicine. *Integr Med Res.*, 2025 Sept; 14(3): 101184.
93. Krishna Swamy S, Ezhilarasan Muruga Radha Devi PD, Ayothiraman S, Kolappan NS. Dietary food habits, Varmam, and Yogam for improvement in women's fertility as per Siddha. *J Res Siddha Med.*, 2024 Dec; 7(2): 67.
94. Herbal Supplements and Fertility: A Comprehensive Review | Journal of Health and Rehabilitation Research [Internet]. [cited 2025 Aug 27]. Available from: <https://jhrlmc.com/index.php/home/article/view/834>
95. 6891eb918871f.pdf [Internet]. [cited 2025 Aug 27]. Available from: <https://iajesm.in/admin/papers/6891eb918871f.pdf>
96. Preventive health care and life style management | Journal of Ayurveda and Integrated Medical Sciences [Internet]. [cited 2025 Aug 27]. Available from: <https://jaims.in/jaims/article/view/2916>
97. Role of Vyayama (Exercise) in maintenance of Health - An Ay | Journal of Ayurveda and Integrated Medical Sciences [Internet]. [cited 2025 Aug 27]. Available from: <https://jaims.in/jaims/article/view/1089>
98. Seasonal Regimen In Ayurveda (Ritucharya): An Ancient Lifestyle Science With Modern Applications | American Journal of Psychiatric Rehabilitation [Internet]. [cited 2025 Aug 27]. Available from: <http://ajprui.com/index.php/ajpr/article/view/602>
99. Lanza di Scalea T, Matthews KA, Avis NE, Thurston RC, Brown C, Harlow S, et al. Role Stress, Role Reward, and Mental Health in a Multiethnic Sample of Midlife Women: Results from the Study of Women's Health Across the Nation (SWAN). *J Womens Health.*, 2012 May; 21(5): 481–9.
100. AYU (An International Quarterly Journal of Research in Ayurveda) [Internet]. [cited 2025 Aug 27]. Available from: [https://journals.lww.com/aayu/fulltext/2024/45030/impact\\_of\\_nidra\\_sleep\\_on\\_reproductive\\_health\\_a.3.aspx](https://journals.lww.com/aayu/fulltext/2024/45030/impact_of_nidra_sleep_on_reproductive_health_a.3.aspx)

101. Meher K, Panda SK, Kumar M. Importance of Brahmacharya for Health in Contemporary Times. *Int J Health Sci Res.*, 2023 Sept 12; 13(9): 163–7.
102. Knowledge about infertility risk factors, fertility myths and illusory benefits of healthy habits in young people | *Human Reproduction* | Oxford Academic [Internet]. [cited 2025 Aug 27]. Available from: <https://academic.oup.com/humrep/article-abstract/23/8/1858/2914095>
103. Ojha DrR. Role of Yoga and Meditation In The Empowerment of Women ; an Ethical Perspective. *IOSR J Eng.*, 2013 Apr; 03(04): 01–5.
104. Asanas for the pelvic organs. The best female yoga asanas [Internet]. [cited 2025 Aug 27]. Available from: <https://klubnayaaliga.ru/en/asany-dlya-organov-malogo-taza-samyeluchshie-zhenskie-asany-v-ioge/>
105. Yadav A, Tiwari P, Dada R. Yoga and Lifestyle Changes: A Path to Improved Fertility – A Narrative Review. *Int J Yoga.*, 2024 Apr; 17(1): 10.
106. Fedorchenko Y. COMPLEMENTARY THERAPIES FOR ENHANCING FERTILITY IN WOMEN ABOVE 35 YEARS: WELLNESS, INTIMACY, AND REPRODUCTIVE VITALITY. *Anti-Aging East Eur.*, 2025 June 30; 4(2): 100–7.
107. Charaf S, Wardle JL, Sibbritt DW, Lal S, Callaway LK. Women’s use of herbal and alternative medicines for preconception care. *Aust N Z J Obstet Gynaecol.*, 2015; 55(3): 222–6.
108. Nypaver C, Arbour M, Niederegger E. Preconception Care: Improving the Health of Women and Families. *J Midwifery Womens Health.*, 2016; 61(3): 356–64.
109. Birewal K, Khatavkar R, Thakur J. A BRIEF REVIEW ON MASANUMASIK GARBHINI PARICHARYA: AYURVEDIC ANTENATAL CARE, 11(5).
110. Review on Ayurvedic concept of Garbhini Paricharya | *Journal of Ayurveda and Integrated Medical Sciences* [Internet]. [cited 2025 Aug 27]. Available from: <https://jaims.in/jaims/article/view/1690>
111. Bulavenko O, Ostapiuk L, Rud V, Voloshinovskii A. Problems and challenges to women’s reproductive health in the 21th century. 2021 [cited 2025 Aug 27]; Available from: <https://dspace.vnu.edu.ua/handle/123456789/5288>
112. Progress and challenges in women’s health: an analysis of levels and patterns of mortality and morbidity - *ScienceDirect* [Internet]. [cited 2025 Aug 27]. Available from: <https://www.sciencedirect.com/science/article/abs/pii/S0010782414001383>
113. Jindal UN. Mid-life fertility: Challenges & policy planning. *Indian J Med Res.*, 2018 Dec; 148(Suppl 1): S15.

114. Disha Mendhe 1215.pdf.pdf [Internet]. [cited 2025 Aug 27]. Available from:  
<https://sanjeevanidarshan.com/upload/docs/Disha%20Mendhe%201215.pdf.pdf>