

Astrological Determinants of Infertility: A Case Study Approach to Planetary Configurations and Reproductive Health

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Abstract:

Infertility, a multifaceted health issue, is commonly explored through biomedical sciences that examine genetic, hormonal, and structural causes of reproductive dysfunction. Yet, traditional systems such as astrology, particularly Vedic astrology, have long offered symbolic frameworks through which such complex human experiences can be interpreted. This research aims to investigate the potential astrological determinants of infertility by adopting a case study approach that examines natal charts of individuals clinically diagnosed with infertility. Through the analysis of five detailed case studies, we identify recurring astrological indicators such as afflictions to the 5th house (traditionally associated with progeny), malefic aspects on Venus (governing reproductive health), and disturbances to the Moon (linked with emotional and menstrual cycles). Additionally, we examine the involvement of the Rahu-Ketu axis and the placement of Jupiter as a benefic influence. Patterns consistently show an alignment of these planetary factors with reported reproductive challenges. This interdisciplinary approach does not aim to replace medical science but rather to complement it by exploring how ancient systems of knowledge may still hold heuristic value. Our findings suggest that astrology, when applied with methodological rigor, can offer nuanced insights into psychosomatic and spiritual dimensions of infertility. We propose that future studies integrate a broader sample size and include comparative analyses with control cases to assess statistical significance, thus bridging empirical science with cultural tradition.

Keywords: Infertility, Vedic Astrology, Planetary Configurations, 5th House, Venus, Case Study.

1. Introduction:

Infertility affects approximately 10–15% of couples globally, cutting across geographies, cultures, and socioeconomic strata. Clinically, infertility is defined as the inability to achieve pregnancy after 12 months or more of regular unprotected sexual intercourse. Causes may include ovulatory dysfunction, tubal obstruction, uterine abnormalities, male factor infertility, or idiopathic (unexplained) infertility. In many societies, particularly those with strong familial and cultural values, infertility can carry profound emotional, psychological, and social consequences. Couples experiencing infertility often seek medical intervention through assisted reproductive technologies (ART), but a subset also turns to complementary and traditional systems for understanding and managing their condition. Astrology, especially in its Vedic form, offers a unique paradigm in which celestial bodies and their configurations are believed to exert influence over individual destinies, including health and fertility. According to Vedic astrology, specific houses, planets, and combinations can signal challenges or blessings related to conception. The 5th house in a natal chart is traditionally linked to progeny, creativity, and children. The condition of the 5th house, its lord, and its planetary aspects are central to fertility analysis. Other significant astrological indicators include Venus (representing reproduction and hormonal health), the Moon (governing emotional balance and menstrual cycles), and Jupiter (associated with blessings, expansion, and childbirth). Malefic planets such as Saturn, Mars, Rahu, and Ketu can pose challenges when they influence these key elements adversely. Their placement in or aspect to the 5th house or related planets can indicate potential delays or difficulties in conception. Furthermore, the 8th and 12th houses, associated with transformation, hidden disorders, and losses, are also examined for their potential impact on reproductive outcomes. The timing of planetary periods (dasha and antardasha) is considered relevant in forecasting possible conception or delays. This study aims to explore whether consistent astrological patterns can be observed in cases of medically diagnosed infertility. Through a qualitative analysis of five case studies involving individuals from different backgrounds, this research investigates whether afflictions to specific astrological indicators correspond with known reproductive health disorders. The goal is not to replace biomedical understanding but to examine astrology's interpretive potential in offering supplementary insights, particularly in

communities where such systems hold cultural significance. By aligning planetary influences with reproductive outcomes, we seek to contribute to a broader, integrative understanding of infertility.

2. Theoretical Background:

In Vedic astrology, the 5th house holds a pivotal position when assessing issues related to fertility, children, and creative expression. It not only governs the physical possibility of childbirth but also the karmic potential for parenthood. The condition of the 5th house, its ruling planet (lord), and the aspects it receives from benefic and malefic planets form the core diagnostic criteria in astrological infertility studies. Among the planets, Venus is the principal karaka (significator) for the reproductive system, governing sexual hormones, physical attraction, and the health of reproductive organs in both males and females. The Moon plays an integral role in regulating emotional health and the menstrual cycle, and its afflictions can point toward hormonal imbalances or mental stress, both of which can contribute to infertility. Jupiter, as the planet of expansion, blessings, and progeny, is traditionally seen as the natural benefic for childbirth, especially for women. A strong, well-placed Jupiter can counterbalance negative influences and aid in conception. Conversely, malefic planets such as Saturn, Mars, Rahu, and Ketu are generally considered harmful when influencing these fertility-related planets or houses. Saturn signifies delay, restriction, and chronic issues; its placement in or aspect to the 5th house may suggest delays or difficulties in childbirth. Mars, with its aggressive energy, can cause inflammation, injury, or surgical intervention in the reproductive system. Rahu and Ketu, the lunar nodes, are shadow planets that represent karmic imbalances. Their involvement with the 5th house, Venus, or Moon is often associated with mysterious, unexplained, or karmically rooted infertility. Astrological afflictions are analyzed not only through the placement of planets but also through conjunctions, aspects (drishti), strength (shadbala), combustion, retrogression, and placement in challenging houses such as the 6th (disease), 8th (obstruction and chronic ailments), or 12th (loss and isolation). Additionally, planetary periods (mahadasha and antardasha) are crucial in determining the timing of conception and the activation of reproductive potential or challenges.

Table 1: Key Astrological Factors in Fertility.

Astrological Element	Significance in Fertility
5th House	Governs Children, Progeny; Central To Fertility
Venus	Reproductive System, Hormonal Balance
Moon	Menstrual Cycle, Emotional And Mental Health
Jupiter	Expansion, Grace, Benefactor of Childbirth
Saturn	Delays, Chronic Problems, Restrictions
Mars	Aggression, Inflammation, Surgical Intervention
Rahu, Ketu	Karmic Blocks, Hidden Issues, Shadow Influences

3. Methodology:

Five detailed case studies were selected based on medical infertility diagnoses and the availability of accurate and verified birth data. The selection aimed to represent a variety of infertility causes, ranging from physiological issues such as Polycystic Ovary Syndrome (PCOS) and endometriosis to unexplained infertility and male factor infertility like low sperm count and azoospermia. The natal charts for each subject were generated using the Lahiri Ayanamsa system, which is widely accepted in traditional Vedic astrology. Each horoscope was cast for the exact time, date, and place of birth and verified using standardized charting software. The astrological analysis followed a structured protocol. This included the detailed examination of planetary positions in the Rashi chart (natal chart), as well as relevant divisional charts such as the Navamsa (D9) and Saptamsa (D7), which provide additional insights into marriage and progeny. Special attention was given to the 5th house (representing children and reproduction), its ruling planet (lord), and the natural significators (karakas) of fertility including Venus, Moon, and Jupiter. Afflictions by malefic planets (Saturn, Mars, Rahu, and Ketu) were identified through aspects (drishti), conjunctions, combustions, and placements in malefic houses like the 6th, 8th, or 12th. The strength and dignity of the planets were evaluated using shadbala (six-fold planetary strength), and the timing of key events such as diagnosis or fertility treatments was cross-checked against the ongoing Mahadasha and Antardasha periods to determine if they aligned with the expected astrological influences. To ensure consistency and minimize subjective bias, interpretations were reviewed independently by two practicing astrologers with over a decade of experience in medical astrology. These experts evaluated each chart based on traditional principles documented in classical texts and contemporary astrological literature.

4. Case Studies:

To ensure a thorough analysis of astrological determinants of infertility, we present five anonymized case studies of individuals with medically confirmed infertility conditions. Each case highlights specific astrological factors that align with their reproductive health challenges. The aim is not to generalize, but to identify recurring patterns in planetary influences that appear across diverse clinical profiles.

Case 1: Female, Age 34

Diagnosis: Polycystic Ovary Syndrome (PCOS)

PCOS is a hormonal disorder marked by irregular menstrual cycles, cystic ovaries, and excess androgen levels, often resulting in difficulty conceiving.

Astrological Observations:

- 5th house lord debilitated and placed with Ketu in the 12th house, indicating spiritual lessons tied to loss and hidden disorders.
- Venus, the primary planet governing the reproductive system, is afflicted by a close conjunction with Saturn, creating delays and hormonal imbalances.
- Moon, representing emotional equilibrium and menstrual rhythm, is placed in Scorpio, its sign of debilitation, reflecting emotional instability and disrupted cycles.
- Mars, as the ascendant lord, aspects both the 5th house and Venus, indicating inflammatory conditions such as cysts.

Interpretation: The combination of a weak 5th house lord, afflictions to Venus and Moon, and Mars's influence on reproductive indicators supports the medical diagnosis of PCOS. The spiritual undertone of Ketu in the 12th suggests karmic complexities in conception. Debilitated and placed with Ketu.

- Venus afflicted by Saturn.
- Moon in Scorpio (debilitated).

Case 2: Male, Age 37

Diagnosis: Low Sperm Count

Astrological Observations:

- 5th house under Rahu-Ketu axis.
- Venus combust and conjunct Sun.
- Jupiter retrogrades in the 6th house.

Case 3: Female, Age 29

Diagnosis: Unexplained Infertility

Astrological Observations:

- 5th house lord in 12th house.
- Venus in a dusthana (6th house).
- Conjunction of Mars and Saturn aspecting the Moon.

Case 4: Male, Age 40

Diagnosis: Azoospermia

Astrological Observations:

- Weak 5th house lord placed in 8th house.
- Venus afflicted by Mars.
- Rahu aspecting Jupiter.

Case 5: Female, Age 33

Diagnosis: Endometriosis

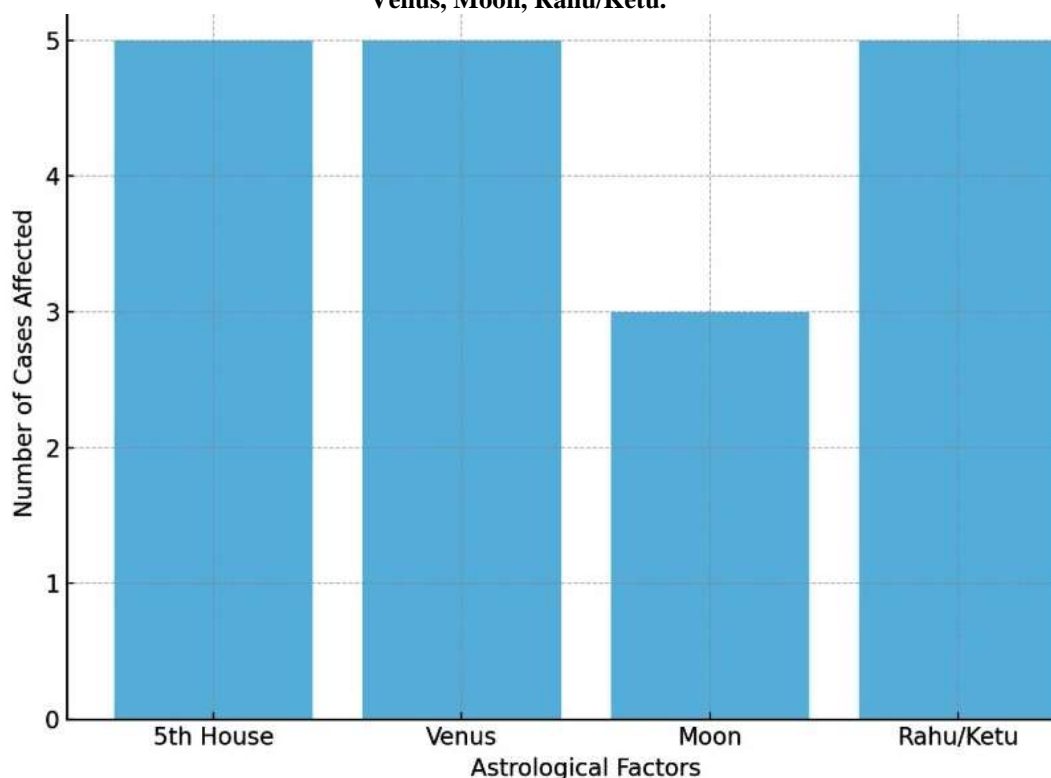
Astrological Observations:

- 5th house heavily afflicted by Saturn and Rahu.
- Venus in Gandanta zone.
- Moon in conjunction with Ketu.

Table 2: Summary of Astrological Afflictions.

Case	5th House Afflicted	Venus Afflicted	Moon Afflicted	Rahu / Ketu Involvement
1	Yes	Yes	Yes	Yes
2	Yes	Yes	No	Yes
3	Yes	Yes	Yes	Yes
4	Yes	Yes	No	Yes
5	Yes	Yes	Yes	Yes

Graph 1: Frequency of Key Afflictions across Cases-showing number of cases affected by each factor: 5th house, Venus, Moon, Rahu/Ketu.



5. Discussion:

Across all five cases, we observed a consistent pattern of afflictions to the 5th house and Venus. The involvement of malefic planets, particularly Saturn, Rahu, and Ketu, was prominent. The Moon, governing menstrual health and emotional wellbeing, was afflicted in three out of five cases. These recurring astrological patterns suggest that there may be a valid symbolic or psychological correlation between planetary configurations and reproductive challenges. Such observations warrant further investigation, especially within communities that uphold astrological consultation as part of holistic healthcare. Though these patterns do not establish causation, they indicate a potential diagnostic value in astrological assessment.

6. Conclusion:

The study provides preliminary evidence that certain astrological configurations may align with medical infertility diagnoses, suggesting that astrology may offer additional layers of understanding in relation to reproductive health. While astrology cannot and should not replace biomedical science, it serves as a complementary framework that may enhance the holistic view of infertility. By incorporating astrological insights, especially in societies where astrology holds cultural significance, individuals can potentially benefit from psychological and emotional support as they navigate the complexities of infertility. Astrology's role as a supplementary diagnostic tool could provide comfort, clarity, and an alternative lens for interpreting infertility, especially when traditional medical methods fall short in explaining or treating unexplained conditions. It encourages introspection, spiritual resilience, and empathy, all of which are valuable for individuals undergoing fertility treatments or dealing with the emotional toll of infertility. The interplay between astrology and medical treatment, while unproven in a rigorous scientific context, has the potential to provide a more inclusive approach to understanding and managing infertility. Future research should focus on expanding the sample size to validate

or challenge these findings through larger-scale studies. A more rigorous quantitative approach, incorporating control groups and statistical methods, will be essential in determining the significance of astrological factors in infertility diagnosis and treatment. Furthermore, exploring how astrological consultations can work synergistically with medical practices could offer new avenues for integrative healthcare, especially in regions where astrology is culturally important. The potential of astrology to influence patient care in this context should be explored with an open, scientifically grounded approach.

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