



Case Study

AN AYURVEDIC APPROACH TOWARDS POLYCYSTIC OVARIAN SYNDROME- CASE REPORT

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ABSTRACT

Polycystic ovarian syndrome is a gynecological disorder whose prevalence seems to have increased considerably among the Indian women in the last few years. It interferes with metabolic, endocrine and reproductive functions. Many young girls and middle aged Indian women are suffering from this syndrome which is marked by appearance of multiple cysts on ovaries and disturbances in monthly menstrual cycles. According to both men and women have *Shukradhatu* consisting of androgen and estrogen hormones. Any imbalance in the levels of these hormones causes infertility. Usually, an imbalance of hormones in women causes excessive secretion of androgen, causing the formation of cysts in the ovaries, which is medically known as Polycystic Ovarian syndrome (*Artavadusti/Kshaya*). According to Ayurveda aim is mainly to correct hyper insulinemia by using *Pramehgana* drugs, weight reduction through *Vyayama*, diet and drugs, give *Yakritotejak* drugs for the oestrogen clearance and clear *Avarana* by using *Vatakapha Nashaka* drugs, *Shodhana, Shamana, Brumhana* for the proper follicular genesis and ovulation.

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INTRODUCTION

Polycystic Ovarian Syndrome (PCOS) is characterized by persistent anovulation than can lead to clinical manifestations, including enlarged polycystic ovaries, secondary amenorrhea or oligomenorrhea, obesity, hirsutism, and infertility.^[1] A presumptive diagnosis of PCOS often can be made based on the history and initial examination. The syndrome can be diagnosed if at least two of the following conditions are present: oligomenorrhea or amenorrhea, hyperandrogenism, and PCOS on ultra sound. Polycystic ovaries have been called "Oyster Ovaries"^[2] because they are enlarged and sclerocystic with smooth, pearl-white surfaces without indentations. Other clinical features include increased level of male hormones, male pattern baldness or thinning of hair, excess facial and body hair growth,, oily skin or dandruff, dark coloured patches on skin mainly on neck, groin, underarms, chronic pelvic pain, increased weight or obesity, diabetes, lipid abnormalities and high blood pressure. Pituitary Gland is responsible for the secretion of LH (luteinizing Hormone) and FSH

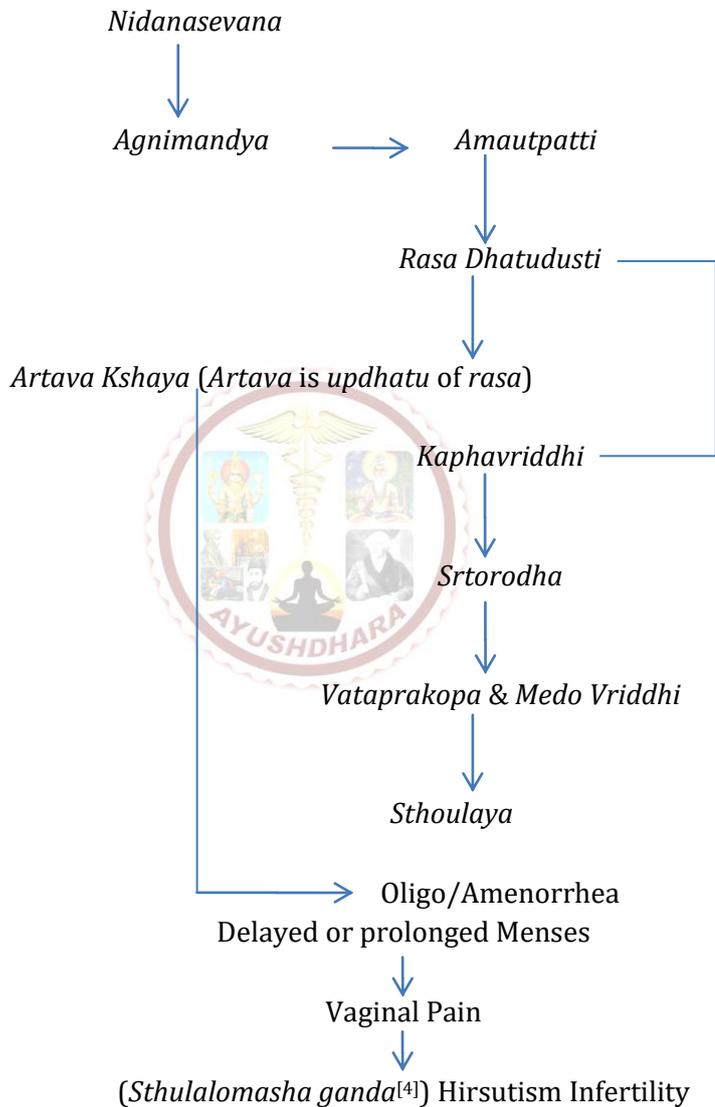
(Follicle Stimulating Hormone), after these hormones reach the ovaries the immature ovaries start maturing expanding the size of the follicles which simultaneously secretes estrogen, the pituitary gland senses the surge of LH to the ovaries causing the most mature follicle to release the egg which can be termed as Ovulation. The free eggs travels through the fallopian tube where it awaits for the sperm to fertilize it, if not fertilized, the thin lining of uterus sheds during the menstruation. In PCOS the pituitary gland secretes abnormal level of LH in blood stream imbalancing the menstrual cycle. In addition there is high level of Insulin hormone secretion by pancreas, which combines with LH leading to excess production of male hormone called testosterone.^[3]

Modern medical science has no cure for PCOS, they only able to provide symptomatic relief for it, which has unsatisfactory results lots of side effects and costly also and when medication not gives relief then they go for surgery drilling of ovaries.

According to Ayurvedic Principles, PCOS occurs primarily due to the imbalances state of *Doshas*, the *Doshavaishmaya* is linked to the symptoms of PCOS.

PCOS is associated with *Stribeeja* and *Rajah* formation, along with the *Medhodhatu*. Ayurvedic treatment for PCOS aims to provide ideal care by correction of *Aamadosha*, *Koshtashuddhi* achievement, regularizing *Tridoshas*. Sushruta and Vagbhata says that “*Sarverog Aapi Mandagni*” that means we need to cure the main culprit i.e., *Aama*.

Samprapti of PCOD



In today’s lifestyle, there are many lifestyle disorders originating which is making people more prone to the diseases, PCOS has also taken turn towards lifestyle disorders, where in the women are more prone to the obesity due to hormonal imbalances, irregular menses, hair fall one of them which mainly seen in married women. To give a proper treatment we need to understand the *Samprapti* of the PCOS according to Ayurvedic point of view for better treatment aspect.

Channels carrying *Aartva* are obstructed by *Vata* and *Kapha*, so not discharged monthly.^[5] For the treatment of PCOS *Jatargani* and *Dhatwagni* has to be treated.

Case Report

A 19 years old unmarried girl visited Hospital of Saint Sahara Ayurvedic College and hospital, Kotshamir with complain of pain lower abdomen and history of irregular menstruation

(heavy flow of menses followed by period of amenorrhea of 2to3 months) since 2 years. She also complained of weight gain and hair growth on face.

Menstrual history:

L.M.P- 12/1/19

Past L.M.P.- 23/11/18

Duration of flow- 10-12days

Interval- 60-120days

De-identified demographic information and other patient specific information

Polycystic ovarian syndrome (PCOS) is a problem in which woman's hormones are imbalance. It can cause problem with the menstruation periods and pain. If it is not treated that it can lead to serious health problems such as Heart disease and Diabetes, Polycystic Ovarian Syndrome (PCOS) affecting 5% to 10% of reproductive age female. Treatment can help to control the symptoms and prevent long term problems.

Polycystic ovarian Syndrome (PCOS) is irregular or missed periods of female. It is hard to recognized missed periods as a sign of PCOS in teen age girls. Because of imbalance in hormonal level that can cause changes not in just ovaries but also the entire body of female.

Main concern and symptom of patient

Main concern of patient was irregularity of menstruation, abdominal and back ache, hair fall and increased weight.

Important information from the patient history

After interrogation with the patient it was revealed that patient was suffering from irregular menstruation and pain since 8 months. She took allopathic treatment but did not have relief. So she approaches to our hospital for further treatment.

Diagnostic Method

Laboratory investigation: Routine blood investigation to know the variation in Blood Biochemistry and thyroid function level were assessed.

Hb-10.8g%, TLC-6500/cumm, ESR-22mm/hr, Neutrophil-69%, Lymphocytes-26%, Eosinophils-2%, Monocytes-3%, Basophills-0%, HIV, HBsAg, VDRL were negative. LFT, RFT% Lipid Profile was normal. T3-1.29ng/dl, T4-13mcg/dl, TSH-4.89mc IU/ml, LH-12.35MIU/ml.

Ultra Sonography for Uterus and Adenexa

A pelvic ultrasound was performed which revealed a normal uterus with endometrial thickness of 6.9mm. Numbers of follicles in right ovary were 12 and in left ovary were 12. Peripheral follicles (most of which are < 5mm in diameter) and central ovarian stroma was echogenic. Right ovary volume was 15.8cc and left ovary volume was 14.0cc.

Report say's Polycystic ovaries.

Diagnostic Reasoning

Patient was clearly diagnosed with PCOS by sophisticated technique such as USG where there is no room for differential diagnosis.

Types of Intervention (Medicine)

1. *Chitrakadivati* one Bd before food
2. *Avipatikar Churna* one *Karsha* (12gm) OD at night
3. *Ashoka Arista* 15ml Bd for three months
4. *Chandraprabha Vati* 1tab Bd for 3 Months
5. *Kanchnar Gugglu* 2tab Bd for 3 Months
6. *Varunadi Kasaya* 15 ml Bd for 1 month Follow up.
7. *Chandraprabha Vati* 1tab Bd for 1month follow up

Duration

Management for 6months

Pathya- Apathya

During this period the patient was advised to take balanced diet containing ghee, milk, fruits green vegetables and avoid oily, spicy, junk food. She was also advised to do early sleep in night and early wake up in morning, morning walk, meditation and *Pranayam*.

OSERVATION AND RESULT

Patient followed drug and *Pathya- Apathya* restrictions strictly. Patient got her normal menstruation (Duration 5-7days, Interval 30-35days).

Materials and Methods

A patient aged 19 years came to our OPD complaining of irregular menses (every 45 days once), abdominal and back ache while menstruation, and hair fall, and increased weight. She gave the history that, menses were regular every 30 days once while taking the medicines after medicines are stopped same history comes to the picture. She also complained that there was mood swing like the anger has also increased.

The patient was given the following treatment

Deepana and *Pachana*: *Chitrakadhi Vati* was given for 1month before food twice a day. Before starting with main treatment continued with *Avipattikarachoorna* for *Nityavirechana* for 7days.

Later on the patient was advised for *Askokarista* 15ml BD with luke warm water after food. *Chandraprabha Vati* and *Kanchnar Gugglu* was given 2tab after food twice a day for 3months.

After 1st follow-up the patient said that the intensity of pain which she had earlier was reduced to mild now. *Varunadi Kashaya* 15ml BD after food with *Chandraprabha Vati* was continued for the next 1month which gave good results as she explained that regular menses with proper bleeding was present.

After the 2nd follow-up *Ashokarista* was advised to take 15ml mixed with luke warm water twice a day for 2months and *Kanchnar Guggulu* 2

tab bd. Further patient told about the regularizing the menses with decreased pain.

Here the *Vata Kaphahara* treatment is must and the patient has to be advised to avoid extra calories, street foods, and instant foods which cause *Mandagni* leading to the disorders.

DISCUSSION

From the above case study according to Ayurveda it can be consider as *Tridoshaja Vyadhi* with *Rasa Dhatu Kshaya* and *Dushti* of *Rasa, Rakta* and *Artavaha Srotas*. In the above treatment *Nitya Virechna* was given with *Avipatikar Churan* to eliminate the aggravated *Doshas*. *Chitrakadi Vati* helps in the *Deepana Pachana* of *Dhatu* when *Rasa* is formed properly, all the other six *Dhatu* will formed in a proper manner. As *Artava* is a *Updhatu* of *Rasa Dhatu*, *Deepana Pachana* of *Rasa Dhatu* will normalize *Artava Dhatu*. Further *Chandraprabha Vati* was given which helps in decreasing the size of *Granthi* on the ovaries as it balances the hormones of women, relieves the pain of menstrual cycle because of *Pippali* and *Loha Bhasma*. *Chandraprbha Vati* was given with *Kanchnar Guggulu* as it help to remove blockage in the channels and also works on polycystic ovary due to *Kapha- Hara, Lekhana, Chedana* and *Granthi- hara* property.^[6] *Asoka Arista* was given as it balances *Tridosha* mainly *Pitta Dasha* with an effect on pain in menstruation, irregular prolonged bleeding, heavy periods. *Ashoka Arista* gives good result in the above set.^[7]

Since *Varunadi Kshaya* is a medicine which have *Katu- Tikta Rasa, Ushna Veerya*. It has *Kapha- Vataharam, Medanashanam* and *Gulmanashan* property. It helps in treating *Agnimandha Dhatu*.^[8] and PCOS is involved with these two helped in the improvement of *Agni*.

Since PCOS is considered with hormonal imbalance, obesity, menstrual irregularities should be treated which mainly concern with *Agni*. Later

on *Pathya Apathya* has to be given which keeps the *Doshas* and *Dhatu* in its equilibrium.

CONCLUSION

The Ayurvedic management of PCOS should not only concern with *Artava Kshya* but the *Agni* and *Avaran* which is caused by *Kapha Dasha* and *Dhatu* should also be considered to have better results with proper *Pathya Apathya* to be advised. Proper collection of results and documentation on large sample size should be done for the further study.

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