



## Case Study

### AYURVEDIC APPROACH TO POLYCYSTIC OVARIAN SYNDROME

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#### ABSTRACT

Polycystic ovarian syndrome is a systemic, endocrinal and also a metabolic disorder and it is the most common cause of hyperandrogenic chronic anovulation occurring in reproductive age group. Approximately 75 percent of anovulatory women of any cause have polycystic ovaries and 20 to 25 per cent of women with normal ovulation demonstrate ultrasound findings typical of polycystic ovaries. In Ayurvedic literature, Acharya Kashyapa mentioned about *Pushpagni jataharini*, it bears some resemblance with symptoms of PCOS. Most of the symptoms seen in PCOS are related to the *Artavavaha srotas*. In *Bhaishajya Ratnavali*, it is mentioned that *Patoladi Kwatha* is *Hitakara* for *Andadhara roga* in *Andadhara roga chikitsa adhyaya*. In *Chakradutta*, in *Sthoulya chikitsa adhyaya* he mentioned that *Navaka guggulu* is good for *Kapha medoja roga*. In this case study, patient aged 23 years came to the OPD with the complaints of irregular menstruation and scanty bleeding during menstruation since 1 year. She was known case of PCOS and her symptoms got relieved after the administration of *Patoladi kwatha* along with *Navaka guggulu* for 3 months.

#### INTRODUCTION

PCOS is a condition in which the ovaries produce an abnormal amount of androgens, male sex hormones that are usually present in women in small amounts. The name polycystic ovary syndrome describes the numerous small cysts (fluid filled sacs) that form in the ovaries.

Approximately 6-10% of women within their reproductive age group suffering with PCOS and this percentage is slowly increasing due to the sedentary lifestyle. Polycystic ovarian syndrome can be considered as one of the leading causes for female infertility and one of the leading reproductive endocrine disorders in the world. It is the syndrome of hyperandrogenism, chronic anovulation and polycystic ovaries as per Rotterdam criteria<sup>[1]</sup>. Similarly, there can be associated symptoms like menstrual irregularities (amenorrhea, oligomenorrhoea,

hypomenorrhea or metrorrhagia), obesity, acne, increased hair growth etc. The exact etiology of the PCOS remains unknown, but it is very common nowadays due to sedentary lifestyle and unhealthy eating habits.

In Ayurvedic literature, no direct correlation of PCOS is available. As the name suggests it is group of many disorders hence a single *Yoni- vyapad* or any single disease cannot be correlated with this entity. Acharya Kashyapa mentioned about *Pushpagni jataharini*, it bears some resemblance with symptoms of PCOS. But most of the symptoms seen in this disease are related to the *Artavavaha srotas*. That is vitiated *Kapha dosha* blocks the physiological function of the *Apana vata*, leading *Anartava*. The factors which vitiate *Kapha*, *Vata*, and *Meda* have a considerable role in this disease.

One in every 10 women in India has PCOS. The incidence varies between 0.5-4 percent and it is prevalent in young reproductive age group (20-30%)<sup>[2]</sup>. In PCOS, considering the involvement of *Dosha* predominant, based on that the treatment should be planned and it should be aimed at pacifying the vitiated *Kapha*, making the *Vata* and increasing the *Agneya guna* of *Pitta*.

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Acharya Govind das has mentioned about *Patoladi kwatha*<sup>[3]</sup> in *Andadhara roga chikitsa adhyaya* in *Parishista prakarana* context of *Bhaishajya ratnavali*. He mentioned that *Patoladi kwatha* is *Hitakara* for *Andadhara roga*.

Acharya Chakradutta in *Chikitsa samgraha* mentioned about *Navaka guggulu*<sup>4</sup> in the context of *Sthoulya chikitsa*. It is used in all the diseases which are caused by *Medas, Kapha, Ama* and *Vata*.

### AIMS AND OBJECTIVES

To know the efficacy of *Patoladi kwatha* along with *Navaka guggulu* in the symptoms of PCOS.

### Case Report

A female patient aged 24 years (unmarried) came to the OPD of Prasuti Tantra and Stree Roga, S.S.C.A.S.R. & H, Bengaluru, with the complaints of irregular menstruation and scanty bleeding during menstruation since 1 year.

### Personal History

Diet: Non-veg

Sleep: 6-7 hours (day sleep – 1 hour)

Appetite: Moderate

Bowel: Once in 2 days (constipated)

Micturition: 5-6 times per day

Habits: Nil

### Menstrual History

Age of menarche: 13years

Lmp: 22/11/2022

Flow: 3 days (scanty)

D1- 1 pad (60% soakage)

D2- 2 pads (50% soakage)

D3- Spotting

Interval: 40-60 days

Pain: Severe pain present on D1 and D2 of the menstruation.

### Treatment- For 3 months

Medicines	Dosage	Time of Administration
<i>Patoladi kwatha</i>	<i>Kasaya</i> -50 ml BD	Before food
<i>Navaka guggulu</i>	Tablet-2 BD	Before food

### Assessment Schedule

1<sup>st</sup> assessment on 30<sup>th</sup> day

2<sup>nd</sup> assessment on 60<sup>th</sup> day

3<sup>rd</sup> assessment on 90<sup>th</sup> day

### Assessment Criteria

#### Subjective Parameters

- Duration of bleeding
- Interval between 2 menstrual cycles
- Amount of bleeding

Clots: Absent

Colour: Blackish red

### Samsthanika Pareeksha (Systemic Examination)

CVS- S1 S2 heard, no murmur, sound heard.

RS- NVBS heard, no added sound.

CNS- patient is well oriented to time, place and person.

### Local Examination

Neck- No lymph node enlargement, acanthosis nigricans absent

Breast- Bilateral soft, no nipple discharge

P/A- Soft, non-tender, no organomegaly

Acne score is 25

Hirsutism score is 16

### Investigations

Blood test dated on

Hb- 12.7gm%

LH- 19.20

FSH- 4.34

(LH: FSH ratio is 4.42)

USG of pelvis dated on

- Bilateral PCOS morphology present
- Rt ovary- 3.1\*2.9\*3.0cm, vol 14cc
- Lt ovary- 3.4\*3.1\*2.1, vol 11cc

### Diagnosis

*Artavakshaya* due to PCOS.

### Preparation of Medicines

The ingredients for *Patoladi Kwatha* are *Patola, Yasti madhu, Moorva, Draksha, Shunti, Vid lavana, Bala, Peethamooli, Dhanyaka, Rasna, Indrayava, Lavanga, Pippali, Gaja pippali, Haridra, Daruharidra, Twak, Ela, Patra* was collected from authentic sources and preparation of *Kwatha choorna* were done. *Kashaya* was prepared based on the *Sharangadhara kwatha* formulation i.e., 1:16 → 1/8. The *Navaka Guggulu* tablet was procured from GMP certified pharmacy.

- Pain during menstruation (*Yoni vedana*)

### Objective Parameters

- No of follicular cysts
- LH: FSH Ratio
- Volume of the Ovary
- BMI
- Hirsutism (Ferriman - Gallway scale)
- Acne (Global acne grading system)

**OBSERVATION AND RESULTS**

Parameters	Before treatment	After treatment
Duration of menstruation	3 days	5 days
Interval between 2 menstrual cycles	40-60 days	30-35 days
Amount of bleeding	1 pad/ day	2 pad/ day (> 50% soakage)
Pain during menstruation	Severe pain	No pain
Number of follicular cysts	Rt ovary- 10 Lt ovary- 12	Rt ovary- 10 Lt ovary- 12
Hirsutism	16	10
BMI	32.4kg/m2	31.8kg/m2
Ovarian volume	Rt ovary-14cc Lt ovary- 11cc	Rt ovary-14.5cc Lt ovary- 11cc
Acne	25	11
LH: FSH ratio	4.42	1.40

**Before Treatment- Acne and Facial Hair**



**After Treatment- Acne and Facial Hair**



## DISCUSSION

The disorder which hampers the general health as well as the reproductive health of women should be considered with special care. Now a days, there is increase in the prevalence and incidence of the reproductive disorders have seen probably due to various factors such as newer gene mutation, migration, increase in population, radiation, life style changes etc.

### Discussion on Disease Review

It is the syndrome of hyperandrogenism, chronic anovulation and polycystic ovaries as per Rotterdam criteria. Similarly, there can be associated symptoms like menstrual irregularities (amenorrhea, oligomenorrhoea, hypomenorrhoea or metrorrhagia), obesity, acne, increased hair growth etc. Also, there can be elevated serum testosterone level, LH level, increased insulin resistance and reduced serum SHBG level<sup>[5]</sup>.

### Pushpagni jathaharini<sup>[6]</sup>

If we considered the *Nidana* mentioned for *Jathaharini*, all were in the form of *Manasika* and *Aharaja nidanas*. Even though a clear cut *Samprapti* has not been explained for *Jathaharini* affliction, its *Lakshanas* are described which include - *Vruta pushpa* can be refers to the anovulatory cycles, *Lomashaganda* refers to hirsutism and *Sthoola* refers to obesity. Hence, we can clarify that both hormonal and metabolic disturbance will be there in *Pushpaghni jathahaarini*.

### Artava kshaya

It is the condition where in the menstruation does not appear in proper time period or is delayed or intermenstrual period will be prolonged and the quantity of menstrual flow is reduced or scanty along with association of pain. In PCOS, one of the symptoms are anovulation or oligomenorrhoea. So, there will be decrease in amount and volume of the menstrual blood than the normal. Hence, the *Artava kshaya* can be considered as one of the symptoms in PCOS.

### Proposed Chikitsa Siddhanta for PCOS

*Vatadosha* is the main causative factor in the manifestation of all types of *Yonivyapad*. So, we should treat vitiated *Vatadosha* first.

PCOS is *Apana vata vikruthijanya vyadhi*. As a treatment for this the drugs should possess *Agnideepaka*, *Anulomaka*, and *Pakvashayashuddhikara* properties. With *Deepana pachana* actions of the drugs it will regulate the normal function of *Agni* and with *Anulomana* action the *Kupitha doshas* obstructed in the *Pakvashaya* will be expelled out. Thus, with this *Pakvashayashuddi* the *Avarana* in the *Artavavaha srotas* gets relieved and it will help to decrease the overall symptoms of PCOS.

### Probable Mode of Action of Patoladi kwatha

Almost all ingredients in *Patoladi Kwatha* are having *Katu*, *Tikta*, *Kasaya rasa*, *Ushna veerya*, *Rooksha*, *Teekshna*, *Sookshma guna*, *Katu vipaka* and *Kapha-vatahara* properties. *Katu rasa* has *Sneha-kleda-medo shoshana*, *Deepana-Pachana*, *Srotoshodhana* and *Kaphahara* properties. Due to *Ushna veerya*, it is *Aashupachana*, *Soshana*, and *Kapha-vatahara* properties.

Due to indulging in *Nidana sevana*, the *Manasika hetu* like stress, *Shoka* etc will cause *Tridosha prakopa* and *Santarpana hetu* like eating junk foods, following sedentary life style etc will cause *Kapha prakopa*. These *Tridosha prakopa* or *Kapha prakopa* will be leading to *Jataragni mandhyata*. So, the *Ushna Teekshna guna*, *Kapha vata hara*, and *Deepana-pachana* property of *Patoladi kwatha* will help to correct the *Jataragnimandhyata* and further *Dhatuvagni mandhyata* also get corrected. As we know if *Medodhatvagni mandhya* occur *Medo dushti* will happen and symptoms like *Sthoulya* or *Prameha poorvarooopa* also occur. Similarly, if *Shukra dhatvagnimandhya* occur *Shukradushti* will happen and symptoms like hirsutism, infertility etc can be seen. So, by correcting all these *Dhatvagnimandhyata* by *Patoladi kwatha* it will reduce all these symptoms in PCOS patients

### Probable mode of action of Tab. Navaka guggulu

Most of the ingredients of *Navaka Guggulu* have *Katu rasa*, *Ruksha*, *Teekshna* and *Sookshma guna*, *Katu vipaka* and *Kapha-vata hara karma*. *Triphala* is *Kaphameda hara* and used in *Meha*. *Trikatu* is *Stoulyahara* and *Agnimandyahara*. *Trimada* is *Deepana*, *Pachana* and having *Lekhana karma*. *Guggulu* has *Medohara*, *Lekhana*, *Vrishya*, and *Rasayana* properties.

### Action of tab Navaka guggulu in Sthoulya and Prameha

*Navaka guggulu* helps to balance *Tridosha*. The *Kashaya rasa*, *Laghu*, *Ruksha guna* of *Triphala* causes *Vatanulomana*. *Katu*, *Tikta rasa*, *Laghu*, *Ruksha guna*, *Ushna virya* helps in clearing the obstruction from *Srotas* by removing *Kapha*, *Meda*. *Lekhana* and *Kaphameda hara* properties cause reduction in excessive *Kapha* and *Meda* thus helps in breaking *Samprapti* of *Sthoulya*. Tannins, gallic acid, chebulinic acid, ellagic acid and other bioactive substances such as flavonoids, saponins, anthraquinones, amino acids, fatty acids and different carbohydrates are found in *Triphala*. Due to which it has anti-obesity, hypolipidemic, hypocholesterolemia, hypoglycemic, insulin releasing, anti-stress, anti-oxidant and immunomodulatory activities. Cholesterol biosynthesis in the body is mainly maintained in the

liver by the enzyme HMG-Co A and HMGR. HMG-Co A reductase is inhibited by *Triphala*. *Triphala* is high in fibres, which aid with digestion and bowel control. A reduction in cholesterol absorption may have resulted in considerable reductions in total cholesterol.

#### CONCLUSION

*Patoladi kwatha* along with *Navaka guggulu* have shown effective result in PCOS symptoms by increasing the duration of bleeding and amount of bleeding during menstruation and reducing the interval between 2 menstrual cycles, pain during menstruation, LH: FSH ratio, hirsutism, acne and BMI. Longer duration of treatment period can be considered for better results. The efficacy of *Patoladi kwatha* along with *Navaka guggulu* over estrogen, serum testosterone and androgen levels can be assessed for future studies.

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