



## Case Study

### CLINICAL EFFICACY OF SAHACHARADI TAIL BASTI IN MANAGEMENT OF PCOS - A CASE STUDY

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#### ABSTRACT

Menstrual irregularities, acne, obesity are the most common reproductive health problems that adolescent girls are facing in present era. The most debilitating underlying disorder that causes these problems is Polycystic Ovary Syndrome. Initially PCOS was related to infertility only but now it is clearly established that in many it starts with puberty and ends with menopause. The associated endocrine and metabolic abnormalities with PCOS play an important role in causing not only infertility but also put women at an increased risk of type II diabetes mellitus, chronic heart disease, dyslipidaemia, hypertension, hyperinsulinemia and obesity. So, it is very important to treat this condition not only from infertility point of view but otherwise also at the earliest to prevent the above-mentioned risks. Basti is one of the Panchakarma procedure in which medicine is administered in the form of Kwatha or Sneha through anal region or urinary or vaginal region. Basti chikitsa is the most effective treatments of Artavavyapad. A 19yrs old female patient approached the OPD complaining of irregular menses, acne, obesity, hair fall and weakness. USG abdomen scan revealed as a PCOS. Patient took lots of allopathic treatment for it but didn't get relief, so she wanted to take Ayurvedic treatment. Hence, she was treated as per Ayurvedic basic line of treatment of Aartavavyapad. She was administrated Sahacharadi tail basti for 7 days along with Chandraprabha vati and Aarogyavardhini vati. After such two cycles of Basti chikitsa from next month menses were regular. In follow up after 6 months all symptoms were subsided and scan revealed absence of PCOS. During this treatment patient did not report any negative effects suggesting progression of disease. An attempt has been made for successful management of PCOS in adolescence age to relieve her symptoms.

#### INTRODUCTION

The incidence of delayed periods, oligomenorrhoea, acne etc. in adolescent girls and young women is rising in our practice. These women do not ovulate regularly and the ovaries show small multiple follicles looking cysts, hence called Polycystic

Ovary Disease which is a misnomer and now called a syndrome. PCOD is a common cause of infrequent and irregular periods affecting as many as 10% of woman in their reproductive age. The PCO is a familial condition and appears to have its origins during adolescence mainly associated with increased weight gain during puberty. In modern medicine the treatment is mainly symptomatic which may fail in preventing the long-term consequences of PCOD.<sup>[1]</sup>

In Ayurveda there is no direct mentioning of this disease but the symptom of PCOD is found under various diseased conditions at various references i.e. menstrual irregularities are described under the broad heading of Ashtoartavadushti. From Ayurved point of view, Artav Dhatu under the guidance of Vata brings

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about development of reproductive organs, secondary sex characters, ecstasy, love sexuality etc., in the female body. After puberty it starts *Rutuchkra*- the reproductive cycle of perpetuation of the seed (*Beejartha*) and laying down bed for implantation (*Garbhashayya*). In absence of implantation (*Garbhasthapan*), the *Shayya* becomes defunct (*Purana Raja*) and is discharged in the form of *Rajasrav*. This cycle is repeated every month from puberty to menopause. There is a problem at some point of this highly organised stepwise *Chakra*. The real problem is at some stage of *Rutuchakra* executed by *Artav Dhatu* (representing *Shukra Dhatu* of male) and controlled by *Vata*.

For any action to be distorted, there can be two causes, one is dysfunction or deficiency (*Unmarga gaman or Kshay*) and the other can be obstruction (*Srotorodha*). In *Rutuchakra*, either the function of controller *Vata* parameters is deficient or there is some *Srotorodha* by *Vatakapha* at the point of *Beejartha*. That is why in menstrual irregularity, two entities are described namely *Vataja* and *Vatakaphaja Yonivyapad*. *Rasayan* (boosting) treatment for the first category and *Lekhan* and *Bhedan* (reducing and disintegrating) treatment for the second category is advocated. [2]

PCOS is also called hyperandrogenic chronic anovulation. Many women with PCOS have onset of symptoms during adolescence. PCOD is the most common cause of hyperandrogenism/hirsutism in adolescent girls. Preadolescent girls with idiopathic premature adrenarche are at risk of PCOS. Patient may be thin, normal or obese in size. A secondary defect is insulin resistance. [3]

**Case Report:** A 19 years old unmarried female patient came to our OPD of Striroga and Prasuti tantra at SSVPHatta, with complaint of irregular menses since 2-3 years. She was taking allopathy treatment for last 2 and half year but she didn't get complete result from it. Her other complaints were as follows:

- Irregular menses since 2-3 years
- Acne since 1 year

#### Abhyantar chikitsa

Sr.no	Drug of intervention	Dose	Anupan	Duration
1.	<i>Chandraprabha vati</i>	250mg twice daily, after food	Lukewarm water	For 7days prior to <i>Basti</i>
2.	<i>Arogyavardhini vati</i>	250mg twice daily, after food	Lukewarm water	

Patient was admitted in SSVPH Ayurvedic College and Research Hospital, Hatta, for *Basti* therapy.

**Panchakarma:** Patient was giving 2 sittings of *Anuvasan Basti* with *Sahacharadi tail* for 7days.

**Purvakarma:** *Sarvanga Snehan* and *Swedan* with *Ksheerabala Taila* and *Bashpa Sweda* before *Basti karma*. *Anuvasan basti karma* is given for two cycles (with interval of 15 days).

- Weight gain since 1 year
- Hair fall since 6 months
- Mood swings
- Generalised weakness

Past history- No H/O DM/HTN or any other major medical or surgical history.

Family history- No history of same illness in any of the family members.

Occupational History- Student

Menstrual/Obstetric History- 3-5/45-60 days, irregular cycle, moderate flow sometimes with clots, dysmenorrhea.

Marital status- Unmarried.

Diet- Irregular timings, junk food and Chinese food once in a week since 3-4 years.

Sleep- Disturbed.

**Psychological aspects-** Disturbed, stressed, anxious, irritable.

#### General Examination

Pulse- 78/ min, BP- 110/70 mmHg, RR- 18/ min, Height- 150cm, Weight- 55kg, Built- moderate, Tongue- slightly coated, Temperature- 98.4°F.

#### Systemic Examination

- CVS – S<sub>1</sub> S<sub>2</sub> Normal
- CNS – Well conscious, oriented.
- RS – Air entry both side equal, no added sounds.
- P/A – Soft, No tenderness.

Physical examination: Revealed obesity

**Laboratory Investigations:** Routine blood investigations to know the variations in blood Biochemistry and Thyroid function levels were assessed.

**Imaging-** USG abdomen and pelvis was done to know the condition of uterus and ovaries, report says; polycystic ovaries.

**Diagnosis:** *Artavavyapad*

#### Therapeutic interventions:

Based on Ayurvedic line of treatment of *Artavavyapad*, formulated a line of treatment.

**The order of the Basti is as follow**

Day	1	2	3	4	5	6	7	A= Anuvasan basti with Sahacharadi tail
Type of Basti	A	A	A	A	A	A	A	

**OBSERVATIONS**

Changes observed in the subjective and objective criteria before, after completion of 1st cycle of Basti and after completion of 2nd Basti are observed and they are as follows.

Criteria	Before treatment	After 1 <sup>st</sup> cycle	After 2 <sup>nd</sup> cycle
Menses	Irregular	Regular	Regular
Acne	+++	++	absent
uterus	bulky	normal	normal
Weight gain	55kg	53kg	49kg
Hair fall	Present	Reduced	Absent
Mood swings	Present	Absent	Absent
Generalised weakness	Present	Complete relief	Complete relief

USG Abdomen and pelvis was done on 08/08/2019 i.e., before treatment and, 11/02/2020 and 08/04/2020 i.e., after treatment.

Regular follow-up was done for general condition, menstrual cycle and other changes in body and mind.

Important follow-up diagnostic and other test results.

After the treatment, when there was regular Menstruation, decreased body weight, mentally active was observed. Patient was referred to get USG Abdomen and pelvis study done on 08/04/2020. It is clear; that there was no PCOD. Ovaries are normal in size.

**DISCUSSION**

According to *Acharya Charak* every patient is unique. It is not compulsory to nomenclature every disease of patient.<sup>[4]</sup> In Ayurveda PCOD is not directly correlate with any certain diseased condition. *Acharya* included most of the gynaecological diseases under *Yonivyapada*. PCOD is also considered as a *Yonivyapada* as *Artavadushti/Aartavavyapada*. The *Samprapti* of *Vyadhi* occurs in every patient is different. Treatment of *Vyadhi* can be done by deciding the *Dosha dushya dushti*, *Srotas*, *Srotodushti*, *Sthan* and *Samuthan* of *Vyadhi*. So according symptoms and signs of patient following *Dosha dushya dusti* and *Samprapti* is taken in account.

**Samprapti Ghatakas**

*Dosha: Kapha, Saman, Apan vata* and *Pachak pitta*

*Dushya: Rasadhatu-rajjo dusti (Aartava), Mamsa, Meda dhatu*

*Srotas - Rasa- Medo- Artava*

*Sroto Dusti - Granthi and Srotorodha.*

*Samuthan: Pakwashay*

**Adhistan:** *Garbhashaya*

**Samprapti:** Increased intake of unwholesome diet, modern lifestyle, stress along with *Aatavadosha*, *Nija-aagantuja dosha* lead to *Apan vayu dusti*, further leads to *Khavaigunyata* in *Aartavaha srotas*. Vitiated *Vata* leads to *Mansadhatu dushti* which causes cysts in the ovaries. And due to improper dietary habits, brings about *Agnidushti* causing *Rasa dhatu dushti*. This leads to improper nourishment of its *Updhatu* i.e. *Raja* and its *Uttar dhatu mamsa* and *Meda* leads to *Rajakshya*, *Rajadushti*, *Sthaulya*, *Granthi* formation like symptoms.

For any action to be distorted, there can be two causes, one is dysfunction or deficiency (*Unmarga gaman* or *Kshay*) and the other can be obstruction (*Srotorodha*). In *Rutuchakra*, either the function of controller *Vata* parameters is deficient or there is some *Srotorodha* by *Vatakapha* at the point of *Beejatha*. That is why in menstrual irregularity, two entities are described namely *Vataja* and *Vatakaphaja Yonivyapad*. *Rasayan* (boosting) treatment for the first category and *Lekhan* and *Bhedan* (reducing and disintegrating) treatment for the second category is advocated.

PCOD causes hormonal imbalance in female body leads to delayed periods, oligomenorrhoea, acne, obesity etc. in adolescent girls. These women do not ovulate regularly and the ovaries show small multiple follicles looking cysts, hence called Polycystic Ovary Disease.

**Probable Mode of Action of Chandraprabha vati**

Among the all ingredients of *Chandraprabha vati* main are *Shilajatu* and *Guggulu*. *Shilajatu*, acted as rejuvenator which helped to combat disease. *Guggulu*

(*Commiphora wightii*) having properties like *Srothorodhahar*, *Shothahara*, *Vranaprakshalana*, *Lekhana*, *Raktasodhaka*, *Tridoshaghna* etc. Its *Shothahara*, *Srotorodhahar* and *Lekhana* properties might have helped in the reduction of growth of *Granthies*. Other ingredients like *Lohbhasma* and *Makshika* helps in balancing haematopoietic compound.<sup>[5]</sup> These drugs were administrated to do the basic body purification of the patients and also all these drugs are favourable to the function of the female genital organs.<sup>[6]</sup>

#### Probable mode of action of *Aarogyavardhini vati*

Among the 13 ingredients of *Aarogyavardhini vati* main are *Kutaki (Picrorrhiza kurro)*, *Chitrakamoola (Plumbago zeylanica Linn)*, *Guggulu (Commiphora wightii)*, *Shilajatu (Asphaltum)* and *Triphala (Haritaki, Bibhitaka and Amalaki)*.<sup>[7]</sup> *Aarogyavardhini vati* helps to treat the *Sama avastha* of the disease by using the properties like *Tridoshana*, *Sothahara*, *Srotorodhahar*, *Raktasodhaka*, etc. It is used to treat purification of *Raja* and *Beej Rupa Aartava*, obesity, acne and loss of appetite. Especially *Triphala* and *Guggulu* are very useful for reducing excess weight.<sup>[8]</sup> *Guggulu: Deepana, Amahara, Kaphavatahara, Medohara, Pramehahara, Granthi hara*.<sup>[9]</sup>

Combination of *Chandraprabha vati* and *Aarogyavardhini vati* is used to treat the *Sama avastha* in PCOD. During *Sama avastha panchakarma* is not advised. So, before administration of *Basti* we gave *Chandraprabha vati* and *Aarogyavardhini vati* for 7 days before each cycle of *Basti* which is proven effective.

#### Probable Mode of Action of *Sahacharadi Taila Basti*

The main objective of treatment is to regulate the menstrual cycle and proper flow of *Aartava* during each menstrual cycle. *Mulsthana* of *Aartavaha srotas* is *Garbhashya* and *Aartava vahini dhamani* which is the main seat of *Apanvayu*.<sup>[10]</sup> In this disease condition mainly *Apanvayu dushti* is there and *Basti* is the most effective treatment on this. So, for this patient we choose *Basti* treatment as *Vatahar chikitsa*. If we do only *Lekhan* and *Bhedan* (reducing and disintegrating) treatment it may lead to *Vatavruddhi* so for that purpose treatment using *Sneha* is more effective. So, we give *Sahacharadi tail Anuvasana basti* in patient.

*Sahacharadi Taila* contents 4 parts *Tila Taila* and 16-part *Kwatha* of *Sahachara*, *Devadaru* and *Nagara*. *Devadaru (Cedrus deodara)* is *Kapha*, *Vatashamaka* having the propertied like *Vedana Sthapana*, *Shothahara*, *Kusthaghna*, *Kaphanisaraka*, *Vranashodhana*, *Vranaropana*. It is used in *Mutra Roga*, *Krimi Roga*, *Sthaulya*, *Jwara*. *Nagara (Zingiber officinalis)* is *Kapha-vatashamaka* useful in the conditions like, *Shothahara*, *Shulahara*. Internally it is

digestive. *Sahachara (Barleria prionitis)* is also *Kapha-vatashamaka* having the properties like *Vedana Sthapana*, *Shothahara*, *Kusthaghna*, *Kaphanisaraka*, *Vranashodhana*, *Vranaropana*. It is used in *Mutra Roga*, *Krimi Roga*, *Sthaulya*, *Jwara* which is used in combination. *Sahacharadi Taila* which is mentioned by the *Vagbhata* containing three drugs among them all are having the *Ushna veerya* and *Kapaha Vatashamaka* properties.<sup>[11]</sup>

According to *acharya Charaka Sahacharadi tail basti* is *Sarvaroganashaka, Rasayana*. Useful in *Kshata, Vatakshaya, Pittavikara, Rupa, varna, Bala, Mansa, Shukra Vradhana*. In this disease condition it is useful as *rasayana, Bala, Mansa, Shukra vardhana* and *vatakshya*.<sup>[12,13]</sup>

*Sahachara* is used to remove unwanted follicles. Oil of *Sahachara (Barleria prionitis)* were helped to destroy cysts on ovaries and stimulate the follicular maturity.<sup>[14]</sup>

#### CONCLUSION

Using Ayurveda's basic principles of *Dosha, Dushya, Dhatu, Srotas* and *Sthanadushti* any disease can be diagnosed and treated as well. In the above-mentioned case Ayurveda treatment helped in improving ovarian function as well as in combating hormonal imbalance and regularizing normal menstrual cycles. So, it can be concluded that Ayurveda can not only help in relieving symptoms but also treatment can be successfully applied in PCOD and infertility in today's era for better outcome and with no side effects. Along with this *Panchkarma chikitsa* internal medication is also important.

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