WORLD JOURNAL OF PHARMACEUTICAL RESEARCH

SJIF Impact Factor 8.084

Volume 13, Issue 6, 563-568.

Case Study

ISSN 2277-7105

CLINICAL EFFICACY OF AYURVEDIC MANAGEMENT IN PCOS - A **CASE STUDY**

P. Sravani¹*, Gundeti Anjali², Sunitha Joshi³ and Sujatha Gonu⁴

^{1*}PG Scholar, Final Year, PG Dept. of Prasuti Tantra and Stree Roga, Dr. BRKR Govt. Ayurvedic College, Hyderabad.

²PG Scholar, 2nd Year, PG Dept. of Prasuti tantra and Stree Roga, Dr. BRKR Govt. Ayurvedic College, Hyderabad.

³Professor & HOD, Dept. of Prasuti Tantra-Streeroga, Dr. BRKR Govt. Ayurvedic College, Hyderabad.

⁴Associate Professor, PG Dept. of Prasuti Tantra-Streeroga, Dr. BRKR Govt. Ayurvedic College, Hyderabad.

Article Received on 23 Jan. 2024,

Revised on 13 Feb. 2024, Accepted on 04 March 2024

DOI: 10.20959/wjpr20246-31652



*Corresponding Author Dr. P. Sravani

PG Scholar, Final Year, PG Dept. of Prasuti Tantra and Stree Roga, Dr. BRKR Govt. Ayurvedic College, Hyderabad.

ABSTRACT

Female reproductive system consist of hypothalamic-pituitary-ovarian axis and intact uterine-adnexa which maintains a complex mechanism. In human body all the systems are interrelated to function properly, any imbalance in one system may cause multisystem pathogenesis. A 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. Signs and symptoms vary within individual. This adversely affect the reproductive system by menstrual disorders, infertility, obesity, depression, insulin resistance and in due course may lead to diabetes mellitus, cardiovascular disease. According to Ayurveda, 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 Artavavaha srotas. The

factors which vitiate three doshas and dhatus like Rasa, Rakta and Medas have a considerable role in this disease.

Here a case report of 17 year old girl who presented with irregular cycle, weight gain, hair loss since 6months. On USG (A+P) She was detected to have Bilateral Polycystic ovaries. Based on the clinical features, treatment principles adopted were Amapachana, Vata-anulomana, Kapha-vata hara and Artavajanaka medications. After 2 months of internal medications, symptoms reduced and menstruation was regular. Ayurvedic principles are found to be helpful in Polycystic ovaries for healthy life.

INTRODUCTION

The definition of Polycystic Ovarian Syndrome is based on features such as clinical hyper androgenism, anovulation and polycystic ovary. Among these if two of the three criteria's present in a patients is diagnosed as PCOS. Currently incidence of PCOS is 10-15% and is increasing due to lifestyle changes. Now a days it's common from adolescent period, developing soon after puberty, 15-20% of infertile womens are diagnosed with PCOS. About 50-70% of PCOS patients are obese.

The exact etiology of PCOS is still unknown.

An autosomal dominant inheritance expression of genes in female with higher rate of DHEAS levels, early balding and insulin resistance. Lifestyle changes, sedentary life, diet and stress are the reasons initially. Genetic familial and environmental factors have also their contribution. The increased adipose tissues in obese patient screte leptin, adiponectin and cytokines which interfere with insulin signaling pathway which results in insulin resistance and hyperinsulinemia. HPO axis and adrenal glands plays a role in the genesis of PCOS to some extent.

Patients with PCOS, 87% develops oligomenorrhea out of which 26% with amenorrhea later. Due to the anovulatory cycles, infertility is a common consequence and if conceived she may develop carbohydrate intolerance, diabetes and hypertension. The chances of abortions are also around 20-30%. Hyperandrogenism appears in the form of acne and hirsutism. Baldness is very common without virilism. On examination, an elevated BMI score, thyroid enlargement, hyperinsulinemia, hirsutism, baldness and elevated blood pressure (130/90mmHg) are the findings.

Hormonal therapy restores menstruation, reverts hirsutism and other comorbidities arising due to PCOS long duration. Surgeries includes ovarian wedge resection, laparoscopic ovarian drilling and rarely oophorectomy in severe ovarian hyperthecosis and hyperandrogenism.

Ayurveda emphasis the emphasis the maintenance of *Sudha Arthava* (Healthy ovum) for fertile period, *Ritumati charya*, *Dinacharya*, *Rtucharya* helps to attain and maintain healthy life.

By not following the *Acharyas* (Regimens) bring about a life style impacted by stress and strain which leads to the intake of unhealthy food hampering the formation of *Rasa dhatu* which causes the vitiation all Dhathus especially Medodhatu (Adipose tissue) and Rakta dhatu (blood cells). As per *Asrayi Asraya Bhavas*, *Kapha dosha* is affected which leads to *Vata* aggravation, obesity, hormonal imbalance and amenorrhea. Pitta dushti is manifested as hormonal imbalance.

CASE REPORT

17 year old unmarried girl approached the Prasuti Tantra and Stree Roga OPD of Dr.B.R.K.R Government Ayurvedic Medical College Hyderabad, with complaints of irregular menstrual cycles, gradual weight gain and hairloss since 4months.Her USG findings reveals Bilateral PCOS.

Family history: Nothing specific.

Past history: K/C/O Hypothyroidism on Tab Thyronorm 25mcg od.

Menstrual history

Age of Menarche	13
Cycle	Irregular
Interval	2-3months
No.of bleeding days	4
No.of pads/day	2-3
Pain	+
Clots	NIL

Personal history

Diet	Mixed
Appetite	Reduced
Bowel habits	Constipated
Bladder	Normal micturition

Sleep	Good
Allergy	NIL

Marital life: Unmarried

The patient is moderately built with 60kg. On the basis of clinical history, physical examination and USG reports the patient was diagnosed with PCOS.

USG Findings: Anteverted uterus size of 60*29*30 mm, ET-7cm, both ovaries with 12cc volume and Bilateral PCOS pattern were noted.

Blood Investigations: Hb- 13g/dl,T3-113.9ng/dl,T4-7.70n/dl.TSH-1.70IU/dl

Treatment advised

Kanchanara guggulu	2 Bd After food
Sukumara gritha	1tsf Bd with milk after food
Shatapushpa churna	3gms bd with water
Ashoka Arista	15ml bd after food
Triphala churna	1tsf at bed time with hot water

Advice

Green leafy vegetables,

Fiber rich foods

Regular Yoga and Exercise

Avoid high calorie and processed food.

Follow Up and Result 3 months: Along with strict diet -periods become regular with 5kg weight reduction was noted. Follow up USG reveals normal uterus and ovaries with dominant follicles seen.

DISCUSSION

There is always high level of inflammatory changes in patients with PCOS. Inflammation is also linked to excessive weight gain which can correlated with *Samavasth*a (Metabolic toxins) in Ayurveda. *Apathya Ahara Viharas* (Unwholesome diet and lifestyle) causes the formation of *Ama* in *Rasa dhatu* which in turn causes *Artava updhatu dusthi*. This vitiated condition leads to improper selection and maturation of ovum. The *Ama* thus produced, vitiates the remaining *Dhatus* which manifests as excessive weight gain and hair loss. Hair loss occurs in *Asthi*, unwanted hair and hair loss occurs in *Asthi dhatu dusthi* (Bone tissue degeneration). *Kapha* and *Medo dhatu dusthi* happens due to excessive intake of Mamsahra along with Avyayama and Divaswapna (Day sleep). These vitiated *Doshas* and *Dhatus* reach

ovary which hampers its morphology. To normalize this condition drugs having the action *Agni deepana, Pachana, Vatanulomana, Lekhana and Artava janana*. Properties should be used.

Kanchanara guggulu has *vata-kaphasamana*. *Lekhana* (Scrapping) and *Shothohara* (Anti-inflammatory) properties. It is found effective in balancing *Kapha* by boosting metabolism. Guggulu helps in burning fat and enhances digestion. Kanchanara guggulu helps in reducing insulin resistance often associated with PCOS.

Sukumara ghritha normalizes vata kapha doshas and its Anulomana property helps in relieving constipation. Punarnava and Eranda having anti-inflammatory action. Ashwagandha, shatavari, ksheera Kakoli, Gou ksheera having brimhana property and provide nutrition. Due to presence of eranda and gogritha, Anulomana of Apana vata is maintained. Shatapushpa is Kapha samaka and has the properties of agnideepana, pachana which improve jataragni dourbalya, lekhaniya karma, dhatu vardhaka, srotovardhaka.

Ashoka Arista is Vata shamaka property, Deepana and pachaka property and has anti-inflammatory, anti-spasmmodic, anti-oxidant, immunomodulatory. Triphala churna protects the body from free radicals, inflammatory and mutagenic changes. It has hypoglycemic action which reduces insulin resistance. Regular exercise and *yoga* keeps body and mind in equilibrium state, which is a state of *Swastha*.

Due to above properties, vitiated Doshas and Jataragni (Digestive fire) get corrected, Srotoshodhana occurs resulting in expulsion of Doshas out of the body. Lekhana property reduces Kapha and Medas, Rasayana and Artavajanaka properties restore the normalcy in the femlae reproductive system.

CONCLUSION

Patients suffering from PCOS are of increased risk for succumbing to enfeedling health conditions namely Type II Diabetes, Hypertension, Cardiac complaints and Carcinoma of the uterus. It is also one of the preminent causes of infertility. Ayurvedic management is found to be very fruitful in management of PCOS and associated with weight gain, a healthy diet and appropriate physical activities are also found to be effective. Ayurvedic therapies can easily reduce weight gain and also the symptoms of PCOS. It helps to lower the insulin resistance

more efficiently there by favoring ovulation which is one of the prime factor for maintenance of fertility.

REFERENCES

- 1. Bhaishajya Ratnavali Streeroga, Siddhipradha, Kaviraj Sri Govindadas, Chukambha Sur bharati prakashan, 114-116.
- 2. Chaudhary A. Clinical treatment of polycystic ovary syndrome in Ayurveda.
- 3. Stree Rog Chikitsa, Savita singh, Motilal Banarasidas, Delhi, Patna.
- 4. Ayurvedic Concepts in Gynecology, Nirmala G. Joshi: Chaukhambha Sanskrita Pratisthan, Delhi.
- 5. Brahmanand Tripathi edited Sarangadhara samhita Chaukambha surbharati prakashan, Varanasi, 1994; 2.
- 6. Ras tantra sar va Siddha prayog sangrah Part Shri Krishna Gopal Ayurved Bhawan Trust, Ajmer, 2006; 644: 1-16.
- 7. Siriwardane SAD, Karunathilaka. Clinical efficacy of Ayurveda treatment regimen on subfertility with Poly Cystic Ovarian Syndrome. Ayu, 2010; 31(1).
- 8. Kashyap Samhita or Vriddha jivakiya Tantra. Trans IGM Shastri, Bombay Sastu Sahitya, 1970; 757.
- 9. Bhavaprakash Nighantu, Haritakyadi varga Siddha vaidhiya Thirattu, 42, 43.