

## A CASE REPORT ON MANAGEMENT OF POLYCYSTIC OVARIAN SYNDROME (PCOS)

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### 1. ABSTRACT

Poly cystic Ovarian Syndrome (PCOS) is a common endocrine disorder that affects females of reproductive age. It interferes with metabolic, endocrine and reproductive functions. It affects the pituitary - ovarian hormones and, results in infertility, menstrual problems, hyperandrogenism, hyperinsulinemia and hirsutism in females. In Ayurvedic literature, symptoms resembling PCOS are described under conditions like *Pushpaghni Jataharini* and *Nashtartava Yonivyapad*, both considered difficult to cure (*Asadhya*). Although a complete cure for PCOS is not available in modern medicine either, its symptoms can be effectively managed with a combination of appropriate medications, a healthy lifestyle, regular physical activity, and dietary modifications. Treatment of PCOS should include mainly to correct hormonal imbalance, hyperandrogenism by using digestive liver stimulant drugs that are *Aagnidipeek*, oestrogen clearance by *Pachaka* drugs, reduction of fat by *Kledmedohar* drugs, proper follicular genesis and ovulation by *Vatakapha Nashak* drugs. So, in this case study, we have given the *Kumaryasava*, *Rajpravatini vati*, *Kanchnar guggul*, *Medoabhay vati* and *Sukumar kashay* which possess the activity of *Agnideepak*, *Pachak*, *Kledomedohar* and *Vatakaphahar*. This case study of one patient shows good result in reducing the size of ovarian volume and polycystic appearance.

**2. KEYWORDS:** PCOS, *Pushpaghni Jatharini*, *Nashtartava Yonivyapad*, *Rajpravatini vati*, *Kanchnar guggul*, *Kumaryasav*, *Sukumar kashay*, *Medoabhay vati*.

### 3. INTRODUCTION

Polycystic Ovarian Syndrome (PCOS) is recognized as one of the most common hormonal disorders in women of reproductive age, with its prevalence estimated to affect nearly one in four women globally.<sup>[1]</sup> The condition is typically identified based on the Rotterdam 2003 criteria<sup>[2]</sup>, which require the presence of at least two of the following three features: irregular or absent ovulation, elevated androgen levels (manifesting as symptoms like hirsutism or increased serum androgens), and the presence of multiple cysts in the ovaries as seen on ultrasound.<sup>[3]</sup>

The global prevalence of PCOS shows wide variation, ranging from 2.2% to 26%, depending on the population studied and the diagnostic criteria used.<sup>[4]</sup> In general, around 5–10% of women aged 18 to 44 years are affected by PCOS, making it the most commonly diagnosed endocrine disorder in this age group. Modern lifestyle factors such as sedentary behavior, poor dietary habits, and increased mental stress have contributed significantly to the rising incidence of PCOS. Women often seek medical attention due to symptoms like irregular menstruation, weight gain, excessive hair growth, or infertility. More serious health risks associated with PCOS include insulin resistance, type 2 diabetes, cardiovascular disease, hypertension, and an increased risk of endometrial cancer.<sup>[5]</sup>

Currently, there is no definitive cure for PCOS in conventional medicine. Management typically includes oral contraceptive pills (OCPs), insulin sensitizers like metformin, and ovulation-inducing agents such as letrozole. These treatments aim at symptom relief and short-term control, but they may not adequately prevent the long-term complications associated with the condition.

In Ayurveda, PCOS does not have a direct textual equivalent, but several conditions may reflect its symptoms. Terms like *Sthoulya* (obesity), *Lomashaganda* (excessive body hair), and *Vritha Pushpa* (anovulatory cycles or menstrual irregularities) are discussed in classical texts. The condition *Pushpaghni Jataharini*<sup>[6]</sup> mentioned in *Kashyapa Samhita* is considered comparable due to its clinical manifestations. Additionally, conditions like *Vandhya Yoni Vyapad*<sup>[7]</sup> (infertility with features of amenorrhea) and *Granthi Bhuta Artava Dushti*<sup>[8]</sup> (cystic abnormalities in the menstrual blood due to vitiated *Vata* and *Kapha doshas*) provide insights into the *Ayurvedic* understanding of PCOS.

#### 4. AIMS AND OBJECTIVES

##### Aim

To evaluate the Ayurvedic treatment modalities in the management of Polycystic Ovarian Syndrome (PCOS).

##### Objectives

1. To Study the Ayurvedic Management of Polycystic Ovarian Syndrome (PCOS).
2. To Study Polycystic Ovarian Syndrome (PCOS) through Ayurvedic point of view.
3. To provide safe, cost effective treatment.

#### 5. MATERIALS AND METHODS

1. Literary information about the study has compiled from Ayurvedic texts.
2. Various publications, textbooks, research papers have considered to collect the literary material.
3. For all the procedures various Ayurvedic text are referred.

**Centre of study:** Government ayurvedic hospital, Dharashiv. Department of *stree Roga and Prasutitantra*. Simple random single case study.

#### 6. PATIENT INFORMATION

A 24 Y/F unmarried patient come at OPD of *streeroga* and *prasutitantra*, Government ayurvedic hospital, Dharashiv.

##### Chief complaints

1. Irregular menses since 5 yrs
2. Weight gain since 2 yrs
3. Facial hair growth since 6 months
4. Blackish discoloration over neck since 6 month

**Family history** - Nothing specific.

**Past medical history**- There was no relevant past medical history.

**Marital history** - unmarried

##### Physical Examination

Blood pressure	110/80 mm of hg	Height	158 cm
Pulse rate	74/min	Weight	56 kg
Respiratory rate	20/min		

**General Examination***Ashtavidha parikshan*

1	Pulse	70/min	5	Build	Medium
2	Voice	Clear	6	Eyes	<i>Prakrut</i>
3	Tongue	<i>Saama</i>	7	Stool	Regular
4	Urine	Regular	8	Touch	<i>Anushna</i>

*Dashvidha parikshan*

1	Region	Sadharan	6	Digestive power	Moderate
2	Appetite	Moderate	7	Age	24 yr
3	Strength	Low	8	Satva	Heena
4	Prakruti	Vata-pitta	9	Diet	Regular junk food, nonveg
5	Disease	Moderate	10	Kala	2 years

**7. Diagnostic Assessment**

*Hetu*: Irregular diet timings, spicy and junk food, sedentary life, no exercise, late night sleeping.

According to Ayurveda samprapti ghataka are as follows:

*Dosha*: Kapha, Vata

*Dushya*: Rasa, Rakta, Meda

*Srotas*: Rasavaha, Medavaha, Artavavaha

*Srotodushti*: Strotosang, Vimargamana.

*Pratyatma lakshana*: artavakshaya

**Investigations**

**Blood investigations**: Haemoglobin- 12.8 g/dl, BSR-79.7 mg/dl, and Thyroid profiles were within normal limits.

**USG Findings**

Uterus Antiverted 7.1 x 4 x 4 cm Normal in size and Normal in echotexture

ET 8 mm. No e/o focal lesion

Right Ovary 14 cc Bulky in size and Normal in echotexture with MSF 5x6 mm

Left Ovary 13.6 cc Bulky in size and Normal in echotexture with MSF 6x6 mm

E /o Mild Free fluid In POD.

These ultrasound findings are indicative of a bilateral presentation of Polycystic Ovary Syndrome (PCOS).

## 8. Therapeutic Intervation

**Shaman Chikitsa** - given for 3 months

SN	Medicines	Dose
1	Kanchnar Guggul	250 mg BD
2	Rajpravatini Vati	250 mg BD
3	Medoabhay Vati	250 mg BD
4	Sukumar Kashay	15 ml BD
5	Kumariasav	10 ml BD

**Shodhan Chikitsa**

**Yogbasti<sup>[9]</sup>**

	Anuvasan Basti	Niruh Basti	Duration
1 <sup>st</sup> cycle	Sahcharadi Tail 60 ml	Erandmuladi kashay 550 ml	8 days
2 <sup>nd</sup> cycle	Narayan Tail 60 ml	Rajyapan kashay 550 ml	8 days
3 <sup>rd</sup> cycle	Narayan Tail 60 ml	Rajyapan kashay 550 ml	8 days

**Virechan<sup>[10]</sup>**

1	Deepan Pachan	Lashunadi vati 250mg BD Aampachak vati 250mg BD	3 days
2	Aabhyantar snehpan	Dadimadi ghrut (30,50,70,100,120 ml)	5 days
3	Virechan yog	Tivrutta Avleh 10 gm	1 day
4	Sansarjan kram		7 days

## Dietary and Lifestyle Modifications

1. Advised to take balanced and nutritive diet containing Ragi, Lahsuna, Ghee, milk, fruits, green vegetables, and Luke warm water.
2. Avoid oily, spicy, junk food. She was also advised to do early sleep in night and early wakeup in morning, morning walk, Yoga therapy, Meditation, Pranayama.
3. Advised Yoga therapy [Suryanamaskara, Butterfly pose (Suptbandhkonasana), Chakki chalasana] Meditation and Pranayama (kapalbhati, Anuloma Viloma).

## 9. OBSERVATION AND RESULTS

Sr. No.	Symptoms	Before Treatment	After treatment
1	No. Of days of bleeding	2-3 days	3-4 days
2	Interval	60-90 days	30-35 days
3	Cycle	Irregular	Regular
4	No. Of pads	1-2 pads / day	2-3 pads/day
5	Pain	++	+
6	Weight	56 kg	51 kg
7	BMI	22.4	20.4
8	Acanthosis Nigricans	+++	+

## Results of investigations

Investigations	Before treatment	After treatment
USG	-Endometrial Thickness 8 mm -Right ovary volume 14 cc -Left ovary volume 13.6 cc -Multiple smaller sized follicles -Bilateral PCOS	-Endometrial Thickness 6 mm -Right ovary volume 10 cc -Left ovary volume 9cc -Few smaller sized follicles -No significant abnormality

## 10. DISCUSSION

PCOS is mainly *Vata*kapha Pradhana Vyadhi so *Chikitsa* mainly focus on *Vata*kapha Dosha Prashamana including both *Shamana* and *Shodhana Chikitsa*. *Shamana* treatment involves *Aahara* i.e. intake of *Pathya Aahara* and avoiding *Apathaya Aahara*, *Vihara* i.e., *Alpa Vyayama* and *Aushadh* i.e., prescribed medication. *Shodhana Chikitsa* involves *Basti* which is best treatment modality of *Vata Dosha* and *Kapha*Anubandhi *Vata*, *Pitta*-Anubandhi *Vata*. *Basti* is easy to perform and *Acharya Vagbhata* considered it as *Ardha Chikitsa*. The main objective of treatment is to regulate the menstrual cycle and proper flow of *Aartava* during each menstrual cycle.

### Mode of action of medicines

1. *Kanchnar Guggul* - Action: *Lekhana* (scraping), *Kapha-Vata shamak*, anti-inflammatory. Helps reduce ovarian cysts and swellings by balancing *Kapha* and dissolving growths (*granthi*).
2. *Rajpravartini Vati* - Action: Uterine stimulant, *Raktavardhak*(increases blood flow), *Vata-Kapha* balancing. Regulates menstrual cycles, promotes proper flow, *Aartava janan*.
3. *Medoabhay Vati* - Action: Fat metabolism enhancer, *Deepana-Pachana*. Helps manage obesity and insulin resistance, both common in PCOD.
4. *Kumaryasav* - Action: Uterine tonic, *Pitta* balancing, digestive stimulant. Improves ovarian function, regulates hormones, supports liver detox (which is linked to hormonal balance).
5. *Sukumar Kashay* - Action: *Vata*-pacifying, mild laxative, detoxifying. Balances *Apana Vata*, supports regular menstruation, and relieves pelvic congestion and constipation.

## 11. CONCLUSION

Therefore, in this instance, we can draw the conclusion that the pathogenesis of polycystic ovarian disease is greatly disintegrated by *Chikitsa* in combination with *Sukumar Kashaya*, *Kanchnar Guggul*, *Rajpravartini vati*, *Medabhay vati*, and *Kaumaryasava*, as well as

*Panchkarma* like *Yoga Basti* with the *Sahacharadi Taila Anuvasan basti*, *Erandamooladi Niruha Basti* and *Virechan* with *tivrutta avleh*. Throughout the course of this treatment, no side effects or complications were discovered. The study's findings are promising. It suggests that *Ayurvedic* treatment can control the menstrual cycle, help with weight loss, and relieve PCOS symptoms.

## 12. Patient Perspective

*"After so many years of disappointment, this Ayurvedic treatment gave me new hope. I not only saw improvements in my reports but also felt better overall mentally and physically."*

## 13. Informed Consent

Written informed consent was obtained from the patient for publication of this case report and associated clinical data.

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