“A Clinical Study of Ayurvedic Treatment on Polycystic Ovarian Syndrome (PCOD)”

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Abstract – During the last decade, incidences or PCOD has risen alarmingly. Previously it was confined to only higher income class, now days it has also encroached the middle and lower class as well.

Polycystic ovarian syndrome (PCOD) also known by the name of Stein-Leventhal syndrome. Incidence of this condition is growing amongst young women in reproductive age. It is almost ranging between 5-10% of young women coming from infertility. It is now increasingly perceived as disorder of changed life styles, faulty diet, endocrine disorders and nuleitional deficit. Infertility is by far the most common feature due to anovulation; therefore the present study has been carried out for clinical study of the efficacy of ayurvedic treatment on PCOD. The treatment was conducted for duration of 3 months. Response to treatment was recorded by parameters. Result revealed that PCOD can be cured successfully by using this ayurvedic regimen.

Key words – Polycystic ovarian syndrome, PCOD, PCOS, Endocrine disorders, Herbal compound, Yogbasti, Uttarbasti

INTRODUCTION:

Woman’s lifestyle is changing under the name of modernization, now a days speed has become the keyword of present. Beside these stress, unhealthy food habits, blind following of western life style have contributed to destruction of quality of life. This not only affects physical health but also mental status.
Polycystic ovarian syndrome is a condition where hormonal imbalance affects follicular growth during the ovarian cycle causing the affected follicles to remain in the ovary.

The ovarian cycle is governed by a hormonal feedback system moderated by hypothalamus. Thus, it requires constant feedback of hormonal for it to regulate the release of follicle stimulating hormone and luteinising hormone from the anterior pituitary gland. The hormonal feedback that hypothalamus is receiving due to high level of oestrogen, which has been formed from three androgen in peripheral tissue.

Ayurveda suggests that this is vata type disorder with involvement of other dosha, in some measures, gynaecological disorders are mainly supposed to be due to vitiation of vata. PCOD is disorder involving pitta, kapha, medas, ambu-vahashrotas and artavadhatu. The selected trial drug was decided according to doshadushadushti and hypothesized samprapti.

AIMS AND OBJECTIVES:
- To study the efficacy of ayurvedic treatment on Polycystic Ovarian Syndrome (PCOD)
- To study the effect of Artavnirmiti in irregular menstrual cycle in PCOD
- To study the rate of fertilization and rule out other causes of infertility

MATERIAL AND METHODS:
Total 40 patients were registered from OPD of Streeroga and Prasutitantra Department of R. A. Podar Medical College, Worli, Mumbai. Fulfilling the criteria of selection was included into study.

Inclusion Criteria –
- Married patients
- PCOD
- Anovulatory cycle
- Infertility patients
- Irregular menses / scanty menses due to anovulatory cycle
- Elevated LH
- LH : FSH Ratio > 3

Exclusion Criteria –
- Unmarried patients
- CA Cervix, Polyp
- Uterine fibroid
- Congenital defects of female genital tract
- Tubercular endometritis
- HIV / Hbs Ag / VDRL+

- Other gynaecological disorders

**Subjective and Objective Parameters** –

A) Subjective Parameters

1. Duration of bleeding

<table>
<thead>
<tr>
<th>Duration</th>
<th>Grade</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 – 5 Days</td>
<td>Nil</td>
<td>0</td>
</tr>
<tr>
<td>6 – 7 Days</td>
<td>Mild</td>
<td>1</td>
</tr>
<tr>
<td>8 – 9 Days</td>
<td>Moderate</td>
<td>2</td>
</tr>
<tr>
<td>Spotting &gt; 9 Days</td>
<td>Severe</td>
<td>3</td>
</tr>
</tbody>
</table>

2. Irregular Menstruation

<table>
<thead>
<tr>
<th>LMP Days</th>
<th>Grade</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>28 Days</td>
<td>Nil</td>
<td>0</td>
</tr>
<tr>
<td>28 – 45 Days</td>
<td>Mild</td>
<td>1</td>
</tr>
<tr>
<td>45 – 60 Days</td>
<td>Moderate</td>
<td>2</td>
</tr>
<tr>
<td>Above 60 Days</td>
<td>Severe</td>
<td>3</td>
</tr>
</tbody>
</table>

3. Amount of bleeding and quantity of menstrual blood

<table>
<thead>
<tr>
<th>No of Pads / Cycle</th>
<th>Grade</th>
<th>Score</th>
</tr>
</thead>
</table>
4. Pain during menstrual period

<table>
<thead>
<tr>
<th>Pain</th>
<th>Grade</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Pain</td>
<td>Nil</td>
<td>0</td>
</tr>
<tr>
<td>Painful menstruation but no need of analgesics</td>
<td>Mild</td>
<td>1</td>
</tr>
<tr>
<td>Daily activities inhibited</td>
<td>Moderate</td>
<td>2</td>
</tr>
<tr>
<td>Daily activities are inhibited, pain continuous</td>
<td>Severe</td>
<td>3</td>
</tr>
</tbody>
</table>

B) Objective Parameters

1. Haematological investigations
   - CBC
   - ESR
   - Blood Group
   - HIV / VDRL / Hbs Ag
   - BSL (F / PP)
   - Urine R & M
   - LH / FSH Ratio
   - T3 / T4 / TSH
   - Prolactin

2. USG for pelvic pathology
3. Follicular study – A serial vaginal and abdominal sonography was done from 10th day of menstrual cycle till after ovulation.

TREATMENT PROTOCOL:
Standardization and authentication of drug will be done. The treatment was conducted in following way for 3 consecutive cycles.
The patient was treated with 5gm powder of *Anethum Sowa*[^5](Shatapushpa), *Asparagus Racemosus*[^5](Shatavari), *Piper Longum*, *Piper Nigrum*, *ZingiberOfficinale*[^6](Trikatu), *CaesalpiniaBonducella*[^7](Latakaranja), *TephrosiaPurpurea* (Sharapunkha), *Curaima Longa*[^7](Haridra), *PterocaarpusMarsupium* (Vijaysar), *MomordicaCharantia*[^7](Karela), *EmblicaOfficinalis*[^8](Amalaki) – Twice a Day.

Before menses patient were treated with [^9]YogBasti (TriphalaKashay and TilaTaila) for 3 consecutive cycles.

Panchkarma and other non-surgical procedures Snehan, Swdan, Basti and [^10]Uttarbasti are some external therapies are useful along with regular exercise – Suryanamaskara, Sarvangasana and Paschimottanasana.

**OBSERVATIONS:**

**RESULT:**

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>No (n)</th>
<th>Mean Score</th>
<th>Mean (d)</th>
<th>Relief %</th>
<th>SD</th>
<th>SE</th>
<th>t</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irregular Menstruation</td>
<td>40</td>
<td>2.475</td>
<td>0.250</td>
<td>2.275</td>
<td>76</td>
<td>0.733</td>
<td>0.166</td>
</tr>
<tr>
<td>Duration of</td>
<td>40</td>
<td>2.350</td>
<td>0.425</td>
<td>1.925</td>
<td>57</td>
<td>0.5723</td>
<td>0.0905</td>
</tr>
</tbody>
</table>

[^5]: Shatapushpa, [^6]: Trikatu, [^7]: Latakaranja, [^8]: Sharapunkha, [^9]: Haridra, [^10]: Vijaysar, [^1]: Karela, [^2]: Amalaki

In entire study 74.50% patients were housewives and 25.50% were professionals.

Within treatment timeframe patients had not taken any modern medicines.

Most of the patients having complaints of irregular menses and few of them with absent menstruation, scanty or less menstrual blood, dysmenorrhea, acne, obesity, hirsutism.

An assessment criterion was based on a gradation of symptoms. The cardinal symptoms which are - irregular menses, duration of bleeding, dysmenorrhea, quantity of menstrual blood, hirsutism, acne and obesity before and after treatment.

Data was analysed by using paired ‘t’ test. LH / FSH Hormonal Report revealed that the ratio observed up to the normal level. Report revealed and observed the reduction of polycystic appearance of ovaries and improvement of follicular maturity.
From the observation made before and after the treatment following inference are drawn.

- The symptoms like irregular menstruation improved by 76%.
- At the end of treatment 57.5% patients had normal duration of menstrual bleeding.
- 92% of patients were relieved from dysmenorrhea.
- 70% patients had average quantity of menstrual blood.
- In obese patients 85% had normal BMI level.
- But in hirsutism there was no statistically significant result seen.

**DISCUSSION:**

According to Ayurveda PCOD is a disorder involving *pitta, kapha* and *vatadoshas, rasa* and *meda-dhatu, rasa, rakta* and *artavavahashrotasa*.

The given treatment works to improve hormone utilization and regulates overall hormone balance. The powder of herbal drugs is also quite beneficial in curbing the three aggravated *doshas* and brings balance, strength to the menstrual system. It helps to regulate *artavadhatu*.

The properties of *deepana* and *pachana* of above drugs elevate the *jatharagni* and *dhatwagni* along with *artavagni*. Powder given is also effective on *kapha* reduction, insulin enhancing, anti-androgenic, anti-diabetic, anti-oxidant, hypolipidimic drugs and eventually help to relieve the symptoms of PCOD.

General *basti* regulates the nervous control and *uttarbasti* regulates CNS controlling the pelvic organs. Hence by governing HPO axis through hypothalamus, it helps in maintaining follicular growth.

**CONCLUSION:**
87% patients were successfully get cured.
62% patients had conceived within the follow up period of 3 moths.
No significant complications observed in overall study.

In conclusion PCOD can be effectively cured by using ayurvedic treatment regimen.

References:
“A Clinical Study of Ayurvedic Treatment on Polycystic Ovarian Syndrome (PCOD)”

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