

ROLE OF PANCHAKARMA IN THE PCOS – A CASE STUDY

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ABSTRACT

Polycystic ovarian syndrome/disease is a systemic endocrine and metabolic disorder. It was originally considered a gynecological disorder. Hyperinsulinemia and hyperandrogenemia are the chief culprits responsible for oligo/amenorrhoea, hirsutism, obesity and enlarged ovaries with multiple small cysts and thick tunica results in anovulation, previously known as Stein Leventhal Syndrome includes oligo/amenorrhoea, hirsutism, obesity and enlarged ovaries with multiple small cysts and thickened tunica. PCOS affecting up to 20% of females in their reproductive period, leading to primary or secondary infertility. Ayurveda, the ancient science has answer to many diseases including polycystic ovarian syndrome. As the name suggest it is group of many disorders hence a single yoni-vyapad or any single disease cannot be correlated with this entity.

KEYWORDS: PCOS, Ayurveda, Panchakarma, Granthi, Yoni Vyapad.**INTRODUCTION**

Ayurveda advocate prevention of disease by following dincharya and ritucharya, by use of pathya aahar, vihar, aushadh and also by avoiding apathya aahar, vihar, prajnaparadha, mandagni, eating excessive sweet and kaphvardhak aahar and lack of love and other etiological factors. Therefore, kapha reducing, insulin rebalancing, obstruction clearing aushadh aahar and vihar can helps to prevent / treat PCOS. This disorder involves pitta, kapha, medas with ambuvahasrotas and artavdhatu, these should be considered during treatment.

In this present case study, panchakarma plays an important role such bahudosh vyadhi like PCOS.

Etiopathogenesis^[1,2]

The cause of the PCOS remain unknown, insulin resistance and hyperandrogenism play an important role. There is no defect in Hypothalamo-Pituitary Ovarian axis but normal function is masked by inhibition of ovarian follicular development and inappropriate feedback to pituitary. The high oestrogen production is largely due to conversion of androgen to estrogen in the ovary and peripherally. It causes increase in luteinizing hormone (LH) and decrease in follicle stimulating hormone (FSH). A vicious circle is established for the increase in luteinizing hormone induces thecal hyperplasia and increased androgen synthesis in the ovary. High level of androgen results in increase in the peripheral production of the sex hormone binding globulin (SHBG). This leads to increased level of free androgens to produce hirsutism

and to be converted to oestrogen. The hyperthecosis is related to an over production of androgens which reduces granulosa cell proliferation and maturation, as well as stimulating fibrosis of surrounding stroma and capsule resulting in anovulation and infertility (Jeffcoate's Principal of Gynaecology). According to Ayurveda - It occurs due to prajnaparadha, mandagni, eating excessive sweet and kapha alleviating foods.

CASE REPORT

21 year old unmarried woman approached the Prasuti Tantra and Stree Roga OPD of our hospital, with complaints of irregular menstrual cycles, gradual weight gain and hair loss since 5 months. Her USG findings reveal bilateral PCOS.

Diagnostic parameter

- Oligomenorrhea,
- Acne
- Hirsudism

Past History: No relevant history.**Menstrual History**

| | |
|-------------------------|------------------|
| Age of Menarche | At the age of 15 |
| Cycle | Irregular |
| Interval | 2-3 months |
| No. of days of bleeding | 6 to7 days |
| No. of pads/day | 3-4 |
| Pain | + |

| | |
|-----------|---------|
| Clots | + |
| Discharge | Present |

Personal History

| | |
|--------------|--------------------|
| Diet | Mixed |
| Appetite | Reduced |
| Bowel habits | Constipated |
| Bladder | Normal Micturition |
| Sleep | Good |
| Allergy | No any |

Marital History:

Unmarried
The patient was moderately built with 82 kg. On the basis of clinical history, physical examination and USG reports the patient was diagnosed with PCOS.

USG Findings: (16 sept 2022) Anteverted uterus normal in size. Endometrium normal, both ovaries with enlarged in size shows multiple small follicles & stromal echogenicity, Right ovary size- 40×23×19 mm, Volume 9 cc, 18 to 20 follicles. Left Ovary – sized 38×29×19 volume 10 cc, 20 to 25 follicles.

Blood Investigations Done on 16 sept 2022 Before treatment

| Test | Value |
|-------------|--------|
| Haemoglobin | 11.4 |
| WBC | 10600 |
| Pl. Count | 407000 |
| BSL | 100 |
| FSH | 4.88 |
| LH | 11.71 |
| Insulin | 20.60 |
| Prolactin | 11.04 |
| AMH | 12.38 |
| T3 | 1.09 |
| T4 | 8.88 |
| TSH | 3.308 |

Ayurvedic Management

Internal medicine: In the first visit

1. Combination of Choorna- Ashok, Guduchi, Shatavari, Aswagandha, Khadir, Punarnava, Manjishtha, Lodhra, Vijaysar, Jambu Beej, Kutaki, karela, Triphala, Meshashrunji 3 gm BD for After Meal.
2. Asvagandharishta 15 ml BD before Food
3. Suvarna Bhasma OD After Meal
4. Kulatha Qwath 10 ml BD After Food

Panchakarma Treatment

Virechana Karma

Poorva Karma

- Deepan & Pachana- Chitrakadi vati with kosha Jala.
- Snehapana – Sahacharadi Taila
- Sarvang Bahya snehan with Tila Taila
- Swedan – sarvang Bashpa Sweda

Pradhan Karma – Trivrut Leha 40 gm
Paschat Karma – Sansaran kram for 5 days.

Virechana Karma- Total 16 vega, no any complication occurs after virechana. samyakshudhi achieved.

Virechana is extremely effective in obesity, irregular or heavy periods, hormonal imbalances, skin pigmentation and the multitude of other symptoms triggered by PCOS. It also has rakta prasadhana karma. Shodhana normalize agni, pacifies vitiated vata kapha dosha and clean obstruction of srotas. The only way is to address the problem at its root by Srotoshodhana, Agnideepana and Vatanulomana are the main principles to be achieved. PCOS belongs to Santarpannottha condition for which Doshavsechana is indicated. Samshodhana therapy is the best for the Prakupita Dosha Nirharana and correction of Agni. To remove obstruction of Kapha and regularize the normal function of Vata both Urdhva and Adhobhagadosaharana by Virechana can prove beneficial.

Follow up & outcome after Virechana

Along with strict diet- with normal periods; 2 kg reduction in weight was also noted. Hirsudism & acne gets reduced.

Basti

After Virechana Shuddhi, plan for the basti chikitsa which is important in yoni vyapad, because vata is main cause in yoni vyapada. In PCOD, main involvement of vata is of apan vayu.

Drugs used for Basti Chikitsa

Anuvasana – Sahacharadi Taila 60 ml

Niruha – Lekhan Basti

- Triphala + Dashamoola Quath
- Goumottra
- Sahacharadi taila
- Madhu
- Saindhav

The main objective of treatment is to regulate the menstrual cycle and proper flow of Aartavaduring each menstrual cycle. Mulsthana of Aartavaha srotas is Garbhashyaand Aartava vahini dhamani which is the main seat of Apanvayu. In this disease condition mainly Apanvayu dushtiis there and Bastiis the most effective treatment on this. So, for this patient we choose Bastitreatment as Vatahar chikitsa. If we do only Lekhanand Bhedan (reducing and disintegrating) treatment it may lead to Vatavruddhi so for that purpose treatment using Snehais more effective. So, we give Sahacharadi tail Anuvasana & lekhan basti in patient.

Follow up & outcome after basti

Patient reduced the weight about 2 kg & faced somehow heavy menses treated with the Tab. Styplon 2 tabs trice a day & tab Endotone 1 tab trice a day. After 3 days patient had no bleeding & pain.

Vaman**Poorva karma** – Snehan – Varunadi ghrita**Pradhan karma** - Vaman Dravya- **Madanfal churna****Paschat Karma** - Sansarjan kram – for 5 days.**Importance of vamana in PCOS**

According to Ayurveda, PCOS may be considered as Agni Vaishamyajanya Vikara (disease caused due to vitiation of metabolism) in general and Rasagni (metabolism at Rasa Dhatu level) and Medodhatvagni (metabolism at Meda Dhatu level) Mandya as far as Doshha is concerned it is Kapha-Vataja disorder. As PCOS is metabolic disorder, Vamana helps to increase metabolism of body, thereby reducing weight and specifically act on liver metabolism which is the main site of hormone formation.

Outcome after panchakarma treatment

Patient weighed 78 kg after panchakarma means lose weight as well as inches loss, with normal flow of bleeding during menstruation with normal interval of 28 to 29 days. Acne & hirsudism also reduced significantly.

USG Report (26/09/23) - Uterus anteverted normal in size. Endometrium -5mm. Both ovaries appears normal.

Reports after panchakarma therapy (Mar 2023)

| Test | Values |
|----------------|--------|
| Haemoglobin | 11.4 |
| WBC | 10600 |
| Platelet count | 407000 |
| FSH | 3.93 |
| AMH | 10.55 |
| TSH | 2.683 |
| Prolactin | 10.34 |

General Observations

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 26/09/23 shows Uterus anteverted normal in size. Endometrium - 5mm. Both ovaries appears normal.

DISCUSSION

PCOS occurs due to the vitiation of vata and kapha dosha as they do margavarodha to artava vaha srotas leading to absence of flow of artava. It can be understood as the sannipataja dosha manifestation with samprapti of rasa dusti, medodusti, aavarna of vata and aartava dusti with beejopaghata as factor. After shamana chikitsa dosha may be aggravate again but in shodhana chikitsa all dosha are eliminated by root so they can never be reoccurred.^[3] Shodhana eliminates body toxins and normalize the endocrine function by its purifying action (bio-cleansing property).

For elimination of pitta dosha virechana is best therapy.^[4] It also has rakta prasadhana karma. Shodhana normalize agni, pacifies vitiated vata kapha dosha and clean obstruction of srotas. The only way is to address the problem at its root by Srotoshodhana, Agnideepana and Vatanulomana are the main principles to be achieved. PCOS belongs to Santarpannottha condition for which Doshavsechana is indicated. Samshodhana therapy is the best for the Prakupita Dosha Nirharana and correction of Agni. To remove obstruction of Kapha and regularize the normal function of Vata both Urdhva and Adhobhagadosaharana by Vamana & Virechana can prove beneficial. Basti is the prime therapy in regulating vata dosa,^[5] main factor for all the physiological & pathological activity of body & mind. PCOS in Ayurveda.

i. Shandi Yoni Vyapad (C.S.)^[6] (C.S.Ch. 30/34-35).

- A congenital disorder (bijadosha).
- Absence or slight development of breasts.
- Dislike coitus.
- Incurable Disease.

ii. Shandi Yoni Vyapad (S.S.) (S.S.Ut. 38/18-20).^[7]

- Primary amenorrhoea (anartava).
- No breast development (astana).
- Capable of coitus but vaginal canal is rough.

iii. Bandhya (C.S.Sh. 4/30)^[8]

Bijamsa dushti (chromosomal /genetic abnormalities); if part of bija responsible for the development of uterus is defective then born girl child would be bandhya (infertile).

iv. Bandhya Yoni Vyapad (S.S.Ut. 38/10-11).^[9]

Breast developed (only differentiating point with shandi). Has amenorrhoea (nastratava considered as destruction of artava of female foetus).

v. Vikuta Jatiharini (Ka.S.K. 6/34-35).^[10]

- Oligomanorrhoea and scanty menses or excessive menses.
- General weakness (metabolic manifestation).

vi. Pushpaghni Jatiharini (Ka S.K.6/32-33).^[11]

It is curable.

- Woman menstruate in time but it is useless (vyathpushpa i.e anovulatory cycle).
- Has corpulent and hairy cheeks – hirsutism; may be due to hyperandrogenism.

Thus Pushpaghni jatiharini seems to be nearer to polycystic ovary syndrome. Sthula purusha (obese person) in ashtanindiya (censurable person) described by Acharya Charak have described faults which include polyuria, polydipsia and short life. This condition may simulate with hyper insulinemia condition. Atiloma person with excessive hair growth is also a censurable person. Above two conditions may indicate female afflicted with PCOS.

SUMMARY

PCOS is a highly complex endocrine disorder. It is a leading cause of infertility, menstrual disturbance and is associated with obesity, hirsutism and chronic anovulation. PCOS can't be correlated with a single entity in ayurveda but has some resemblance with pushpaghni jatiharini. Others are shandi yoni vyapad, bandhya of Charak, bandhya yoni vyapad of Sushruta, vikuta jatiharini of Kashyap. Obesity is the main cause and symptom which can be prevented by following dincharya and ritucharya and can be reduce by pathya aahar, vihar, aushadh and restriction of apathya aahar vihar.

CONCLUSION

With ayurveda basic concept of dosha, dushya, dhatu, strotas & sthandushti, any rog condition can be diagnosed & treated. In such presentation of PCOD, panchakarma chikitsa helped in maintaining proper ovarian function to have hormonal balance in regular manner of normal menstrual cycle.

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