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Case Study
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AYURVEDIC APPROACH IN PCOS:- A CASE STUDY

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ABSTRACT

Polycystic Ovarian Syndrome (PCOS) is multi-factorial and polygenic condition. It interferes with metabolic, endocrine and reproductive functions. It affects the pituitary - ovarian hormones and results in infertility, menstrual problems and excessive body hair growth in female. According to Ayurveda this type of clinical features found in Pushpaghni Jataharini and Nashtartva. Treatment of PCOS according to Ayurveda is mainly to correct hyperinsulinemia by using Pramehghna drugs, weight reduction through Vyayama, diet and drugs, give Yakritotejak drugs for the oestrogen clearance and to decrease its bio- availability and clear the Avarana by using Vatakapha nashaka drugs for the proper follicular genesis and ovulation.

KEYWORDS: Polycystic Ovarian Syndrome, Nashtartva, Nastpushpantak Rasa.

INTRODUCTION

Polycystic ovarian Syndrome (PCOS), an emerging lifestyle disorder involving multiple systems affecting 5-10% of the women exhibiting the full blown syndrome of hyperandrogenism, chronic anovulation, and poly cystic ovaries.^[1] PCOS is a psychosomatic disorder of uncertain etiology characterized by Obesity, Anovulation associated with Primary of Secondary infertility, hirsutism, abnormal menstrual pattern, increased incidence of pregnancy loss, and pregnancy related complications. Polycystic ovarian syndrome is a most prevalent endocrinopathy. Incidence of this disease is increasing now a days because of sedentary lifestyles, pollution, excessive intake of junk food. PCOS is affecting 4 to 6 percent of unselected women of reproductive age. [2] It is common metabolic-endocrinereproductive disorder. It leads to menstrual irregularities ranging from amenorrhoea to dysfunctional uterine bleeding, hirsutism, acne and anovulatory infertility.

Modern medical science has no ailment to cure PCOS, they only able to provide symptomatic treatment for it, which has unsatisfactory results lots of side effects and costly also and when medication not gives although symptomatic relief then they go for surgery drilling of ovaries.

In Ayurveda, there is no direct reference about PCOS but when we go through the Ayurvedic literature there are many references which are nearer to sign and symptoms of PCOS. Clinical features of PCOS are nearer to Pushpaghni Jataharini. The woman menstruates in regular interval but is unable to conceive is pushpaghni the other symptom is corpulent and hairy cheeks. According to reproductive point of view, the pathogenesis of PCOS is similar to condition of Nashtartva. Vitiation of vatakapha († estrogenic state) leads to Avarana of artava (inhibition of FSH) leads to Nashtartva (no proper growth of follicles and chronic anovulation).

CASE REPORT

21 years old unmarried girl came into OPD of National institute of Ayurveda, Jaipur. The chief complaint of irregular menses (heavy flow of menses followed by period of amenorrhoea of 2to5 months) since 4 years. She also complaint weight gain and hair growth on face and chest.

Menstrual history: L.M.P.-11/11/15, Past L.M.P.-15/5/15

Duration of flow- 10-12 days Interval-60-150 days

On-Examination

General condition of patient was found good. Her family history was found normal. A detailed comprehensive history reveals that in the beginning the weight is slowly increasing. As usual the patient avoids consulting a medical professional because of which pathology get worse. The patient belongs to high socio-economic class having junk food (Virudhhahara) and sedentary habits, which helps to aggravate the disease. The rest of her physical examination was unremarkable. Blood pressure

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was 120/70mm of hg, Pulse rate was 86/minute weight 71 kg and Height -5', BMI-26.

Personal history-Appetite-↓↓

Sleep- normal

Bowel-clear

Bladder-clear

Blood Investigation: On 19-11-2015

Hb-10.3 g%, TLC-5500 th/ul, ESR-25mm/hr, Neutrophill-68%, Lymphocytes-27%, Eiosinophills -2%, Monocytes- 3%, Basophills -0%.HIV, HBsAg, VDRL were negative. LFT, RFT & Lipid Profile was normal. MT –Negative, T3- 1.22ng/dl, T4 –12mcg/dl, TSH- 5.23 mcIU/ml, FSH- 4.65mIU/ml, LH- 12.75mIU/ml (LH:FSH is >2:1).

Ultra Sonography for Uterus & Adenexa

A pelvic ultrasound was performed which revealed a normal appearing uterus with endometrial thickness of 11.9 mm. No. of follicles in Rt.ovary were 13-15 And in Lt. ovary were 10-12.Rt. ovary volume was 21.4cc and Lt. ovarian volume was 14.4cc. and ovarian stroma was echogenic.

Urine Test for Routine and Microscopy

Within normal limits.

Treatment Protoca L

- 1. Nashtapushpantak Ras -250m BD before meal with milk
- 2. Kanchnar guggulu 2 tab BD + Kanchnar Kashya 3 Tsf BD
- 3. Aarogyavardhini Vati 500mg BD After meal
- 4. Triphala choorna 5gm OD in night

Duration

Management for 12 months.

Pathya-Apathya

During this period the patient was advised to take balanced and nutritive diet containing ghee, milk, fruits green vegetables and avoid oily, spicy, junk food. She was also advised to do early sleep in night and early wake-up in morning, morning walk, meditation and Pranayam.

OBSERVATION AND RESULT

Patient followed drug & *Pathya-Apathya* restrictions strictly. Patient got her normal menstruation(Duration-5-7days, Interval-30-35days).

DISCUSSION AND PROBBLE MODE OF ACTION

Nastapushpantka Rasa is given in condition of nastapushpa, which may be considered as amenorrhea or anovulation. It contains mineral drugs which has activity like – Rasayana, yogavahi, aartava janana properties along with tridosha har and kapha vat shamak property. It also work as anulomak, vajikara, yonivyapada har, raktashodhaka^[5] etc. the chemical ingredients of drugs

possess hypolipidemic, hypoglycemic, folliculogenesis, antioxidant, hepato protective^[6] etc.

Kanchnar^[7] help to remove blockage in the channels and also works on polycystic ovary due to kaphanasak and granthi har property.

Arogyavardhini vati helped to stimulate function of liver and thus enhancing kayagni and dhatwagni. [8] This give stimulus to all secreting glands leading to normal secretions i.e. increase secretion of SHBG by liver which leads to decrease in androgen production.

Triphala helps in cleansing and detoxifying body systems. It helps to clear obstruction and normalize the strots. Triphala alsovery useful for reducing excess weight.

CONCLUSION

PCOS is an increasing public health problem which is very common and leading cause of infertility in women. Polycystic ovarian syndrome or PCOS is a condition in which a women's level of sex hormone like estrogens and progesterone are imbalanced. Allopathic medicines are limited, comparatively

Ayurveda have various options of medicine without any side effects for every symptom of PCOS. Allopathy helps in managing and controlling effects of PCOS while Ayurveda can be considered as best cure and promising treatment with no side effects.

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