



## **AYURVEDIC MANAGEMENT OF PCOS: A CASE STUDY**

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### **ABSTRACT:**

Poly Cystic Ovarian Syndrome is a relatively common endocrine disorder in women of reproductive age group. It is found in around 70% of women who have ovulation difficulties leading to infertility. Poly Cystic Ovarian Syndrome (PCOS) is one of the most common metabolic and reproductive disorders among women of reproductive age. Women suffering from PCOS present with a collection of symptoms associated with menstrual dysfunction and androgen excess. PCOS women may be at increased risk of multiple morbidities, including obesity, insulin resistance, type II diabetes mellitus, chronic anovulation, hyperandrogenism, psychological disorders, and infertility. A case 24-year-old female suffering from PCOS reported was treated successfully at Ayurveda Hospital within 3 months by various Ayurveda medicine and panchakarma procedures. The improvement is evident from the regularity of the menstrual cycle and also from the ultrasonography (USG) reports.

**Keywords:** Aartava Kshaya, Infertility, Poly Cystic Ovarian Syndrome

## INTRODUCTION

Polycystic Ovarian Syndrome (PCOS) is the most common endocrinopathy in women of reproductive age, resulting from insulin resistance and compensatory hyperinsulinemia. This results in adverse effects on multiple organ systems and may result in alteration in serum lipids, anovulation, abnormal uterine bleeding, and infertility. According to the *Ayurvedic* view, PCOS can be correlated with *Aartava Kshaya*. *Aartava-kshaya*, which can be correlated with PCOS has been described as deficiency or loss of *artava*, *artava* does not appear in time or is delayed, is scanty, and does not last for three days. Pain in the vagina also can be seen. According to *Ayurveda*, *Aartava-kshaya* is a disorder involving *Pitta* and *Kapha* doshas, *Medas*, *Ambu/Rasa*, *Shukra/Artava Dhatu* and *Rasa, Rakta, Artava Vaha Srotas*<sup>[1]</sup> Therefore Poly Cystic Ovarian Syndrome can also be described with same involvement of *Dosha*, *Dhatu* and *Upadhatu* *Kapha* predominance manifests as increased weight, subfertility, hirsutium, diabetic tendencies and coldness. *Pitta* predominance manifests as hair loss, acne, painful menses, clots, and heart problems. *Vata* predominance manifests with painful menses, scanty or less menstrual blood, and severe menstrual irregularity<sup>[2,3]</sup>

## CASE REPORT

A diagnosed case of 24 years old Hindu female who presented with irregular menstruation since 2 years came in OPD of *streeroga tatha prasuti tantra* of CSMSS *Ayurvedic* Hospital. She also complained of Pimples, Weight gain, Whitish and foul-smelling discharge (on and off) per vagina, Facial hair growth, Mood swing, Constipation, and infertility.

History of past illness

No significant medical, surgical, gynecological, or psychiatric diseases.

Family History: Her father is hypertensive and there are no significant medical, surgical, gynecological, or psychiatric diseases in her family members.

Personal History: Her appetite was good. She drinks 8-9 glasses of water daily. The tongue was mildly coated and dry (*Alpa saam*). She passes stool every alternate day but there is no constipation. Her bladder habit is normal and she is non-vegetarian. There is no significant addiction.

Menstrual History: Her Menarche was at 13 years old, it was regular but has been irregular for the last 3 years. Menstruation only used to occur with a progesterone challenge test. Currently, it is irregular (every 2-3 months), and bleeding occurs for days. It is associated with foul smell and clots. She doesn't complain of dysmenorrhoea. She uses 1/2 pads per day during menstruation.

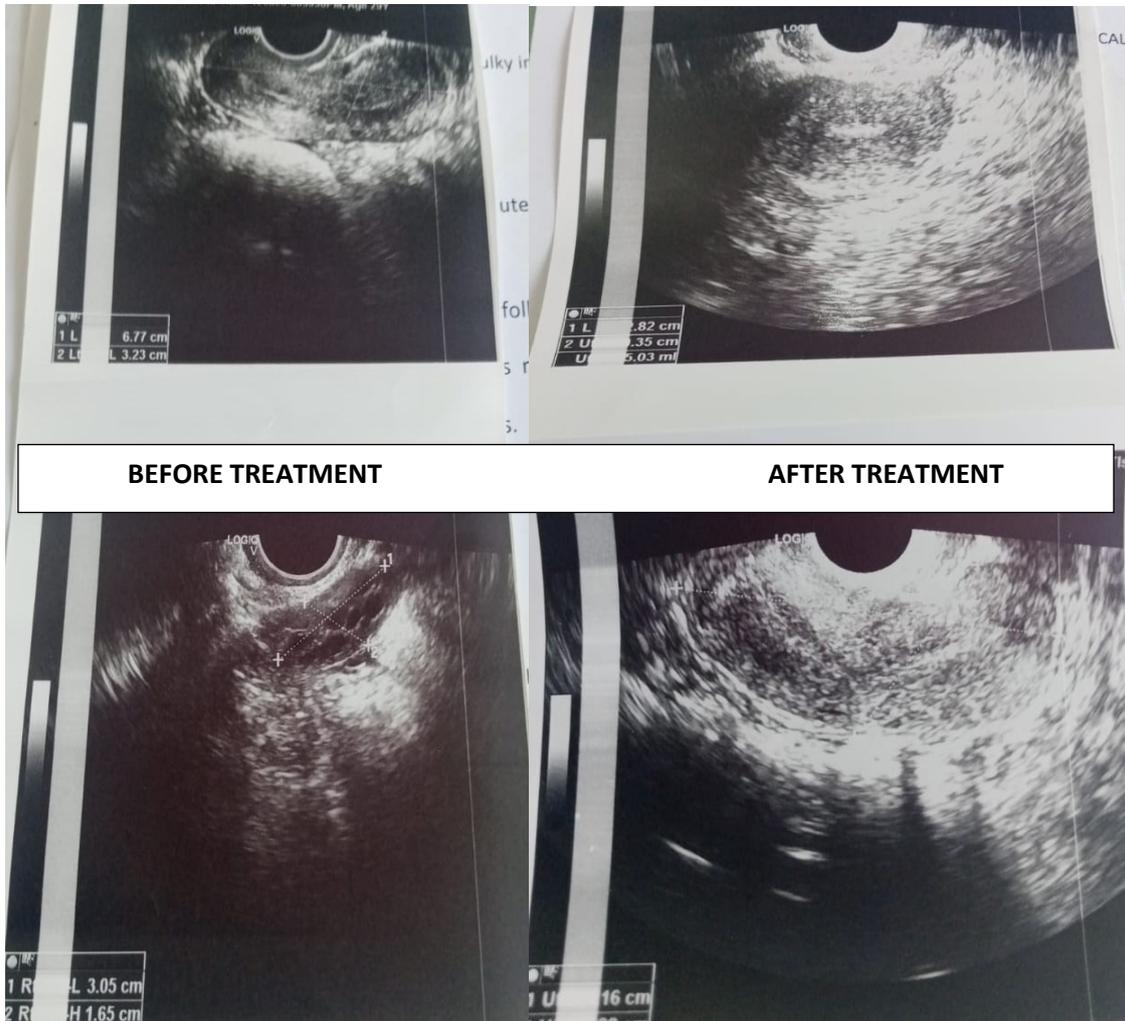
Mental state examination:



4.	Constipation	++	+	Normal	Normal
5.	Generalised Weakness	++	++	+	Normal

**Table no 2.USG findings before and after treatment**

Sr. no	Before Treatment (29/01/2024)	After Treatment (19/03/2024)
1	Right ovary volume: 16.0cc (3.4 ×1.7 cm)	Right ovary volume: 7.5cc (2.5 ×1.6 cm)
2	Left ovary Volume: 10.0cc (3.5 ×1.9 cm)	Left ovary Volume: 8.0cc (2.0 ×1.5 cm)
3	Endometrial thickness: 5.2mm	Endometrial thickness: 3.7 mm
4	Bulky ovaries with Polycystic changes in both ovaries	No significant abnormality



**Fig. 1: USG changes before and after treatment**

**DISCUSSION**

*Virechana Karma* is a bio-cleansing in nature. Thus it works on correcting the internal

pathology. It removes the metabolic waste, accumulated toxins, and vitiated *Dosha* from the body. Thus, it helps in regularising the disturbed hormonal levels in the body.

Action of medicines

*Kanchanar guggulu*<sup>[4]</sup>: It consists of *Kanchanar* (*Bauhinia variegata*), *Trikatu* (Ginger, Black pepper, Long pepper), *Triphala* (Haritaki, Bibhitaki, Amalaki), *Varuna* (*Crataeva nurvala*), *Dalchini*, and *Guggulu* resin in equal amounts. It has *Vata*, *Kaphagn* Property. The *sang* (Obstruction) type *Vikruti* is destruct with this Medicine. It is mainly useful in *Granthi Vikar*.

*Rajpravartini Vati*<sup>[5]</sup>

It consists of *Kumari* (Aloe vera), *Kasisa bhasma* (Blue Vitriol), *Tankana* (Borax), and *Hingu* (Asafoetida). The contents of *Rajpravartini Vati* have *Ushn Guna* and *Vata*, *Kapha Nashak* property. It acts on *Aartavaha Strotas* and balances the *Apan vayu*. It is useful in irregular menstruation.

*Pushyanug churna*<sup>[6]</sup>: It is one of the renowned formulations described in *Ayurveda* classical text. It consists of 25 herbo-mineral drugs. The main ingredients are *Patha* (*Cisampelaos Pereira*), *Jambu* (*Syzygium cumin*), *Amra* (*Mangifera indica*), *Pasanbhed* (*Bergenia lingulata*), *Kumari*, *Rasanjana* (*Berberis aristata*), *dhataki* (*Woodford fruticosa*), *Arjuna* (*Terminalia arjuna*), *Madhuka* (*Glycyrrhiza glabra*), *Gairika* (Red ochre), etc. Due to *Tikta*, *Kasaya rasa*, and *Sheeta virya*, most of

the herbs have *pittahara and Stambana* properties, it is used in all types of *pradara roga*. It has mainly haemostatic, anti-inflammatory, and uterine tonic properties it is useful in the treatment of menorrhagia, metrorrhagia, and menstrual disorder

### **Declaration of patient consent**

The authors confirm that they have acquired a patient consent form, in which the patient or caregiver has granted permission for the publication of the case, including accompanying images and other clinical details, in the journal. The patient or caregiver acknowledges that their name and initials will not be disclosed, and sincere attempts will be undertaken to safeguard their identity. However, complete anonymity cannot be assured.

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Nil.

### **Conflicts of interest**

There are no conflicts of interest.

### **CONCLUSION**

In conclusion, subfertility due to Poly polycystic ovarian Syndrome can be cured successfully by using the aforementioned *Ayurveda* treatment in 2 to 3 months. Findings from this case study indicate that *Ayurveda* treatment plays an effective role in the management of PCOS. The result obtained in this single case study is encouraging and the protocol followed here may be subjected to trial in larger samples.

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