

POLYCYSTIC OVARIAN SYNDROME (PCOS) – ANAYURVEDIC VIEW

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ABSTRACT

Polycystic ovarian syndrome (PCOS) was originally Described in 1935 by Stein and Leventhal as a Syndrome manifested by amenorrhea, hirsutism and Obesity associated with enlarged polycystic ovaries. More common amongst infertile women. It is prevalent in young reproductive age group (20–30%). Polycystic ovary may be seen in about 20% of normal women. This heterogenous disorder is characterized by Excessive androgen production by the ovaries mainly. PCOS is a multifactorial and polygenic condition. Here is an approach to justify the Ayurvedic treaties that There is no undescriptive disease or symptom in Ayurveda. Though it is not directly mentioned but every single symptoms and signs of PCOS have been written in

different contexts.

INTRODUCTION

In Ayurveda, even though no direct reference about Polycystic Ovarian Syndrome (PCOS) is available, there are some diseases, symptoms of which are very similar to That of PCOS. The features of PCOS may be correlated with Vata-Kaphaja Artava Dushti resulting in Abeejata of Artava (Nashtartava), Granthi bhuta Artava Dusti, Kheenartava, Stholya, Padmini kantik, Atiloma, Pushpaghni Jataharini, Prameha & Prameha pidika.

AIMS AND OBJECTIVES

- To build up a relationship between PCOS with different symptoms described in Ayurvedic texts.

- Samana chikitsa in different symptoms of PCOS.

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.

LITERATURE REVIEW

AYURVEDIC VIEW

Vatakapahaja Artavadusti

- 1) Due to Ahitakara Ahara and Vihara, Jatharagnimandya takes place.

|
Which leads to production of Ama and causes Rasadhathu Dusthi

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It turns into Dushta Artava utpatti which leads to Menstrual Abnormalities.

- 2) Vitiation of Vata-Kapha leading to Avarana of Artava resulting in Nashtartva (no proper growth of follicles and chronic anovulation) can be considered As the main pathology.
- 3) Aggravated Kapha and Ama having affected Rasadhathu moves Through the channels to Medadhathu

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Kapha, Ama and Medadhathu have similar Qualities hence these are easily attracted to each other.

|
Medadhathu's metabolic Disturbance reflects the Kapha aggravation.

Medadhathuagni affected by the increased Kapha Dosha and Ama causes Medavaruddhi

|
Increased Medadhathu causing obesity. It starts to block the channels of the body.

Artava dusti

A) Vataj

Varna – Menstrual blood which is vitiated and contaminated by vata is discharged in different colours. Blood is red, black or dark violet in color.

Vedana – Woman suffers from various kinds of pain which are typically caused by vitiated vata. She may experience pricking pain, throbbing pain, stabbing pain, tearing pain etc.

B) Kaphaj

Varna – Menstrual blood which is vitiated and contaminated by kapha is discharged in colours particular to kapha. Blood is white, whitish or slightly yellowish in colour.

Vedana – Woman suffers from various kinds of pain / discomforts / symptoms which are typically caused by vitiated kapha. She may experience coldness, stickiness, unctuousness, itching, putrid smell etc.

C) Granthi bhuta Artava Dusti

Dosha = VK Dushya = Artava

Srotas: Artava vaha

Nastartava

Dosa - VK Dusya - Artava

Kheenartava

As like Nastartava.

Stholya

Dosa – kapha

Dushya – Rasa

Nidan Samprapti – Slesmaahar, Adhyasan, Avyayami, Divaswapna rata

|
Apakwa ahara forms Ama

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Madhura Ama Rasa circulate all over body & forms Meda dhatu

|
Marga Avritta by excessive Meda.

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No formation of Uttarottara dhatu in required amount

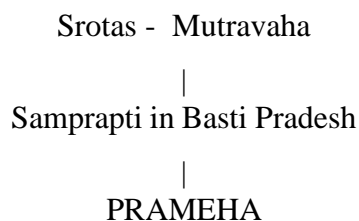
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ARTAVA KSHAYA

Prameha

Divaswapna, Avyayama, Madhura ahar vihar

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Aparipakwa Ama + Dushita vata, pitta, kapha

|
Dusya – Meda



Tarunya pidaka / Mukha dooshika/Padmini kantaka - (Acne)

- 4) Intake of fried and junk food – vitiates Kapha and Pitta, leads to blood vitiation and acne.
- 5) Night awakening – leads to normal body rhythm imbalance, stress metabolism imbalance, leading to toxins and acne.
- 6) Stress and anxiety – leading to metabolism imbalance and toxins.
- 7) Physiological changes taking place during adolescence – attributed to hormonal imbalance.

All are also responsible for causing an irregular menstrual cycle by disturbing H-P-O axis attributing towards Polycystic ovaries.

Atiloma (Hirsutism)

- 8) Atiloma and Pushpaghni Jatharani can be correlated with Hirsutism. Acharya Kashyapa has given very precise description of Pushpaghni Jatharini, which is almost having the symptoms of PCOS as told by modern science.
- 9) *Pushpaghni Jataharini*; It is curable. Woman menstruate in time but it is useless (vyathpushpa i.e. anovulatory cycle).
- 10) *Atiloma*; When there is excessive expression of kapha, there is deficit expression of vata. When vata is less, tissue in which it resides i.e. bone tissue increases. Body hairs are excreta of bone tissue. When bone tissue increases, body hairs also increase.

Prameha pidika

- 11) If the diabetic condition is neglected, seven types of pidika (pustules) are produced. These pidika occur in fleshy spaces, vital parts (marma) and joints. The names of these seven pidikā are sharavika, kacchapika, jalini, sarshapi, alaji, vinata and Vidradhi.
- 12) Skin changes are the only signs of acanthosis nigricans. Dark, thickened, velvety skin in body folds and creases — typically in armpits, groin and back of the neck. The skin changes usually appear slowly. The affected skin may also have an odor or itch.
- 13) Kacchapika is deeply and extensively infiltrated, with distress and pricking pain. It has a

smooth surface like that of tortoise (Kachhapa).

- 14) Alaji pidika commences with a burning sensation in the skin accompanied by fever and thirst. It steadily spreads all over the body and causes severe distress with a fire-like burning sensation.
- 15) These two Kachhapika and Alaji can be correlated with Diabetic carbuncle seen in PCOS women.

MODERN VIEW

PCOS –Diagnostic criteria, pathology & Clinical features

Diagnosis is based upon the presence of any two of The following three criteria (ASRM/ESHRE, 2003).

- Oligo and/or anovulation.
- Hyperandrogenism (clinical and/or biochemical).
- Polycystic ovaries.

Pathology

- Typically, the ovaries are enlarged.
- Ovarian volume is increased > 10 cm³
- Stroma is increased. The capsule is thickened and pearly white in color.
- Presence of multiple (> 12) follicular cysts measuring about 2–9 mm in diameter are crowded around the cortex.

Clinical features

- The patient complains of increasing Obesity (abdominal –50%)
- Menstrual abnormalities (70%) in the form of oligomenorrhea, amenorrhea or
- DUB and infertility.
- Presence of hirsutism and acne are the important features (70%). Virilism is rare.
- Acanthosis nigricans is characterized by specific skin changes due to insulin resistance. The skin is thickened and pigmented (grey brown). Commonly affected sites are nape of the neck, inner thighs, groin and axilla.
- HAIR-AN syndrome in patients with PCOS is characterized by; HYPERANDROGENISM, INSULIN RESISTANCE and ACANTHOSIS NIGRICANS.
- Examination reveals; Bilateral enlarged cystic ovaries which may not be revealed due to obesity.

SAMANA CHIKITSA

Main Symptom (Lakhyana)	Associated Symptoms	Treatment (SamanaChikitsa)
(Kheenartava) Hypomenorrhoea Oligomenorrhoea	-	Brihat Kalyanak ghrita Kalyanak ghrita Phala ghrita
	White discharge	Trikatu, Kutaj, Pathakwath
	Urinary Tract Infections	Chandraprabha Vati
	Anaemia	Lohasava Raja pravartini vati Tankan Bhasma
	Underweight	Kumaryasava Balarishta
	Overweight	Triphala guggulu Silajit
	Acne	Kaishor guggulu Triphala guggulu

DISCUSSION

Poly Cystic Ovarian Syndrome is one of the main causes of subfertility in women. It is associated with anovulation, androgen excess, obesity and subfertility. As per the Ayurveda, whole of the syndrome are described in Artava dusti, kheenartava, nastartava which is indicating Amenorrhoea, oligomenorrhoea & hypomenorrhoea. Description about Obesity in Atisthoulya, Insulin resistance in Prameha, Hyperandrogenism in Atilomata, Acne as padmini kantik and some of the later complications as described in prameha pidika. So overall it's a theoretical approach to establish the Ayurvedic view towards Polycystic ovarian syndrome.

CONCLUSION

In Ayurvedic treaties there is no undescriptive disease or symptom in Ayurveda. Though it is not directly mentioned but every single symptoms and signs of PCOS have been written in different contexts. Here an approach have been Made to to understand the ayurvedic prospective of Polycystic ovarian syndrome.

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