

Case Study

PCOS WITH INFERTILITY AND ITS AYURVEDA MANAGEMENT - A CASE STUDY

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ABSTRACT

PCOS (polycystic ovarian syndrome) is a complex disorder comprising of anovulation, hyperandrogenism and polycystic ovaries. It is the primary cause of infertility nowadays. In Ayurveda all gynecological disorders are explained under *Yonivyapadas*. Based on the principles PCOS can be diagnosed and treated as well. Following is a case study of a female having infertility due to PCOS. Her reports showed PCOS, right tubal block and unovulatory cycles. She was treated with different Ayurveda treatment modalities like *Yoni dhavan* (vaginal douche), *Anuvasana* and *Niruha basti* (oil and decoction enema) and internal medicines like *Rasapachaka, Aarogyavardhini* and *Dashamoolarishta*.

KEYWORDS: PCOS, polycystic ovarian syndrome, infertility.

INTRODUCTION

Polycystic ovarian syndrome is a disorder of the endocrine system caused by hormonal imbalance. It is characterized by excess androgen production by ovaries or adrenals which interferes growth of ovarian follicles. It consists of three diagnostic criteria – chronic anovulation hyperandrogenism and polycystic ovaries. It is the leading cause of infertility. 5-10 % of child bearing age women have PCOS.

Patients with PCOS complaints of increasing obesity, menstrual disorders -like irregular menses, oligomenorrhea or amenorrhea. PCOS patients along with infertility can have long term metabolic consequences. These patients are at risk of developing Diabetes mellitus, endometrial carcinoma, hypertension and cardiovascular diseases. The conventional treatment for PCOS with infertility is metformin, OC pills and ovulation induction drugs. Long term use of these drugs can cause side effects symptoms. ovarian hyperstimulation like GIT syndrome and hepato toxicity also. But PCOS should be treated for infertility as well as menstrual disorders and to prevent long standing metabolic diseases.

In Avurveda PCOS is not described as a disease. The clinical features. separate etio pathogenesis can be correlated to different gynaecological disorders. In Ayurveda all gynaecological disorders are incorporated Yonivyapadas and Aartavadushti. Based on these principles PCOS and infertility can be considered as Rasa, Rakta, dushti, Vata dushti predominantly, associated Kapha or Pitta dushti and Dhatavagni mandya. As all female reproductive organs lie in

pelvic area the *Apana vayu* governs all the physiological functions. So the management in PCOS should be targeted at *Agni deepana*, *Pachana*, *Vatanulomona* and *Rasarakta prasadana*.

Case Report

A female of 28 years came to our OPD (no. 9209) with primary infertility and willing for conception. Her married life was 8 years. She was taking allopathy treatment for last 4 years with ovulation induction drugs, laproscopic ovarian drilling and failed to conceive.

Her other complaints were as follows

Malavashtambha (constipation) frequently, P/V white discharge, P/v itching, P/R bleeding sometimes after defecation, irritability, anxiety.

H/o present illness: K/C/O PCOS since 4 years has taken allopathy medicines, hormones, ovulation induction drugs, has done diagnostic hystero laparoscopy, HSG, and twice IUI.

Married life: 8 years.

Menstrual history: 2-3/45-60 days, irregular cycle, moderate flow sometimes with clots, dysmenorrhea Personal history: allergic to antifungals, occupation: part time typist.

Diet: Irregular timings, junk food daily Chinese food for 4 years,

Sleep: disturbed, insomnia sometimes

Psychological aspects: disturbed, stressed, anxious, irritable

Clinical examination: Patient well conscious, oriented Hemodynamically stable.

0/E: P-76/min, BP -100/60, Ht.-152cm, Wt.-54.5 kg, motion - sometimes constipation, urine- WNL , P/A – soft, non -tender, P/V- uterus-AVAF, fx clear , cervical motion non tender.

P/S -Cervix healthy

Prakriti: *Vata pittaja, Jaran Shakti* (digestive power) –*Madhyam, Agni dushti*.

Investigations:

Haemogram -WNL

BSL - Normal

Urine-NAD

TSH- 2.45 normal

AMH, Sr.FSH, Sr.E2, Sr. Prolactin -WNL

USG -

- 1. 29/05/18- s/o Bilateral polycystic ovaries, Rt ovary- 15.1, left-10.6cc
- 2. 6/07/18- right ovary- 13cc, left-10.6 cc

HSG on 25/05/18 -

- 1. Uterus Normal, left tube partially visualized, No Spill
- 2. Right tube blocked at cornu of uterus

Male partner: Semen analysis 30/05/18

Vol- 1.5 ml

Count- 60 million/ml

Motility- 40%

Dead sperms- 40%

Treatment

I st visit: LMP: 22/03/18

- i. Rasapachaka vati 2BD
- ii. Aarogyavardhini 2 BD
- iii. Dashamoolarishta 2 tsf BD
- iv. Yonidhavan Triphala, Darvi kwatha for 7 days

II nd visit: LMP: 24/04/18 without hormones

- i. Rasapachaka vati 2BD
- ii. Aarogyavardhini 2 BD

- iii. Avipattikar churna vati 2 HS
- iv. Yonidhavan Triphala, Darvi kwatha for 7 days
- v. Anuvasana basti- Sahachara taila alt., Niruha-Dashamoola.

III rd visit: LMP: 20/05/18

Same as above, Shatagandha vati 2 BD

For husband: Tab. CoQ forte BD and Shatavari

Ashwagandha Ksheera pak. IV th visit: LMP: 20/06/18

- i. Shatagandha vati 2 BD
- ii. Varunadi kwatha 2 tsf BD
- iii. Anuvasana basti (oil enema)- Sahachara taila alt., Niruha- Dashamoola

V th visit: LMP: 11/07/18 Shatagandha vati 2 BD

Follow up

Every time when she visited she was counselled, timely diet and exercise were advised. At every follow up her bowel habits, *Basti pratyagam kal* and other symptoms were assessed

After 5 months of treatment her monthly cycles were regular plan on next visit was to do follow up HSG, ovulation study and semen analysis. But patient came on 27/08/18 after 1 month 16 days amenorrhea and with UPT positive.

Drugs

- 1. Rasapachaka vati –Kalingaka, Patola, Kutaki
- 2. Aarogyavardhini vati –Triphala, Shuddha shilajita, Guggulu, Chitraka and mainly Kutaki and Nimba.
- 3. Varunadi kwatha -Varun, Pashanbheda, Shunthi, Gokshur
- 4. Dashamularishta -Shaliparni Prishniparni Kantakari Bruhati Gokshur Bilva Agnimantha Patala Gambhari Tintuk Dhataki Draksha Koshtha Pippali Jatamansi.

Drugs used in the patient

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S.No.	Name of the drug	Rasa	Veerya	Vipaka	Action
1	Rasapachaka	Tikta, Katu	Ushna	Katu	Deepana, Pachana, Rasa dhatwagni vardhana, Kapha pittaghna
2	Aarogya vardhini	Katu, Tikta	Ushna	katu	Restores balance between three <i>Doshas, Deepana, Pachana,</i> liver stimulatory, <i>Bhedana</i>
3	Varunadi kwatha	Mainly <i>Tikta</i>	Sheeta	Katu	Deepana, pachana, Kapha shoshana, balances vitiated Vata

DISCUSSION

In the present case considering all laboratory and clinical findings female partner had PCOS, unovulatory cycles and so infertility.

1. Line of management was *Dhatavagni vardhana* (improve digestive power, *Deepana, Pachana, Vata* pacification and *Garbhashaya poshana*.

- 2. Clinical examination and history revealed *Dhatavaagni mandya, Rasa dhatu dushti, Vata* and *Kapha vaigunya*, especially *Apana vayu vaigunya* (abnormal *Vata* and *Kapha doshas*).
- 3. Rasapachaka vati is of Tikta (bitter), Katu (pungent) Rasa so used as Agnideepana, Pachana and for Prasada rasa and Raja nirmitee.
- 4. Aaroghyavardhini mainly acts on *Rasa* and *Rakta dhatu* and helps in *Prasadabhuta rajanirmitee* (quality follicular development) the drug is also useful for individuals suffering from indigestion and irregular bowel movements. It brings about the promotion of the digestive power of the body, acts as a tonic for liver, heart, kidneys, uterus, rectum and intestine. It is also beneficial for chronic fevers and water retention. *Arogyavardhini vati* reduces inflammation of spleen, liver, bladder, kidneys, uterus and intestine. So it helped in relieving her constipation.
- 5. Yonidhavana of Triphala and Daruharidra, both are of Kashaya rasa (astringent) were useful to control local vaginal infection and, Kapha Shoshana (absorption).
- 6. Anuvasan and Niruha basti helped in Vata pacification and Anulomana which is Ardha chikitsa for Vata dosha and it is the main causative factor for yoni Vyapadas and PCOS.
- 7. After first cycle of *Anuvasana* and *Niruha* basti she started getting normal periods without hormones and over a period of time she had monthly regular cycles.

CONCLUSION

Depending on Ayurveda basic principles of *Dosha*, *Dhatu*, *Agni* any disease can be diagnosed and treated as well. In the case mentioned Ayurveda treatment helped in improving ovarian function as well as in combating hormonal imbalance and regularizing normal menstrual cycles. So, it can be concluded that Ayurveda treatment can be successfully applied in PCOS and infertility in today's era for better outcome and with no side effects.

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