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## A Review of Polycystic Ovarian Syndrome In Ayurveda

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### ABSTRACT:

Polycystic ovarian syndrome is a heterogenous endocrine disorder & the most common growing health hazard amongst women of reproductive age. It is a combination of – Hyperandrogenism (clinical or biochemical), Oligomenorrhoea /or anovulation & polycystic ovaries. It is a frequently associated with insulin Resistance & Obesity. Basically, it is a systemic endocrine & metabolic disorder. Many Women with PCOS will give a history of infrequent cycles and skin manifestations include, acne, hirsutism, alopecia, obesity & Acanthosis Nigricans. In Ayurveda few diseases like *Yoni Vyapad*, *Puspghani Jataharini*, *Nashtartav* & *Aartavadushti* have some similarities with this disease. The particular or an exact disorder is not explained in Ayurveda. It involves imbalance of *Dosha*, *Dhatu* and *Updhatu* means different factors at different levels are involved in it. So the possible line of treatment is with by following *Dincharya* & *Ritucharya*, *Nidaan Parivarjana*, *Samshodhana Aaganeya* & *Artavajanan Dravyas*. So This paper is approach to explore ayurvedic concept of PCOS

**Keywords:** PCOS, *Yoni Vyapa*, *Nidaan Parivarjan*, *Dincharya* & *Ritucharya*, *Samshodhana* & Ayurvedic drugs .

### INTRODUCTION

PCOS is the most common health hazard amongst women of reproductive age. It is a clinicopathologic syndrome that is characterized by oligo-ovulation or anovulation, features of androgen excess and ultrasonic appearance of multiple cysts in the ovary. The Incidence of PCOS is 6-10% among women in reproductive age group.<sup>1</sup> It is frequently associated with Insulin Resistance, Obesity & Hyperandrogenism, all of which can interfere with implantation as well as development of embryo and also

contribute to poor egg quality and making conception more difficult.<sup>2</sup> Many gynecological disorders have described under *Yoni Vyapad* (*Arajska*, *Bandhya*, *Lohitakshaya Pushpghani*) & *Aartava Dushti* and some disorders like *Nastaartav* described by Acharya Sushrut separately.<sup>2</sup> Here Ayurveda helps to prevent the disease by following *Dincharya* and *Ritucharya* by use of *Pathya Aahar*, *Vihaar* And *Aushadh* and also with *Panchkarma* therapies . As the name suggest, it is group of disorder. hence a single *Yonivyapad* or any single disease cannot be co related.



## MATERIAL AND METHODS

Charaka Samhita, Sushruth Samhita and different classical Ayurvedic books, was thoroughly examined to compile a list of relevant references. Web sources are searched to locate study papers and related material to PCOD related researches.

## AIMS

To explore and understand ayurvedic theories and practices on PCOS.

**Etiopathogenesis:** The exact cause of PCOS is not known. According to modern point of view Insulin resistance & hyperandrogenism plays a important role. As the level of insulin increased in our body leads to decrease in production of SHBG (sex globulin binding hormone) and decreased IGFBP-I. this causes increased androgens.<sup>3</sup> So, decrease in SHBG leads to increase bio availability of free androgens. Increase level of IGFBP -I leads to increased level of IGF -I. It also alters Pu50C17- $\alpha$  activity thus increases androgens.<sup>4</sup>

Increased insulin leads to increase IGF-I and this act on theca cells leading to increased LH mediated androgen formation, increase LH hypersecretion that leads to ovarian androgen production. According to Ayurveda it all occurs due to *Mandagni*, excessive eating and *Kapha* promoting foods.

## Sign & Symptoms: <sup>5</sup>

1. Menstrual dysfunction typically occurs in PCOS ranging from oligomenorrhoea to amenorrhoea , women with PCOS will give a history of infrequent cycles and may be about three to six cycles per year which leads to endometrial hyperplasia & Ca.
2. Severe acne in teenagers appears to be a common finding of PCOS.
3. Obesity is around 50% of the patients Which leads to increase risk of Diabetes Mellitus & CVS in later life.
4. Insulin resistance & hyperinsulinemia are also important and common in PCOS. It is a important biochemical feature of PCOS.
5. Abnormal lipoproteins are also seen in PCOS patients.

In the view of Ayurveda *Jathragni* is important for proper digestion . It makes *Aahaar Rasa* which nourishes all the *dhatu*s. All *dhatu*s have its own *agni* called *Dhatwa Agni* which works at tissue level.

When we eat junk food, fatty food, it vitiates *Vata And Kapha Dosha* which leads to *Agnimandya And Pachkaagni*

*/ Pitta* unable to do their work and unable to care of its metabolism so *Aahar Rasa* produced will not nourish *dhatu*s properly. The first *dhatu* is *Rasa Dhatu* and its *Updhatu* is *Raja*, here we will consider *raja* as *aartav* (menstrual flow )so if *Ras Dhatu* is not nourishes properly it will leads to *Aartava Kshaya / Nashta Aartava* which is the most common symptom in PCOS patients.<sup>5</sup> The second and third *dhatu* is *Rakta & Mamsa Dhatu* as we see the symptoms like acne, complexion , lazy, generalized weakness , acanthosis nigricans , all are the symptoms of PCOS . If *meda dhatu* is affected it will leads to improper fat deposition which further leads to obesity, again a symptom of PCOS. Then *Asthidhatu*, *Kesh* is *Updhatu* of *asthidhatu* as symptoms seen in PCOS are Hirsutism, greying of hairs, alopecia so if *asthidhatu* is not nourished properly again symptoms of PCOS. *Majja dhatu* helps in nourishment of brain tissues / cells, *dushti of majja dhatu* responsible for depression, mood swings, & hormonal disturbances again all are the symptoms of PCOS. Last but not the least *dhatu* i.e. *shukra dhatu* if it is not nourished properly which leads to anovulation.

## Diagnostic criteria: <sup>6</sup>

### Rotterdam criteria for PCOS: -

1. Oligo/anovulation
2. Hyperandrogenism (clinical/ biochemical)
3. Polycystic ovaries (either 12 or more follicle or increased ovarian volume >10cm<sup>3</sup>) as identified by ultrasound.

The diagnosis of PCOS is done after the exclusion of the other causes of anovulation and hyperandrogenism like:

1. Thyroid dysfunction
  2. Acromegaly
  3. Congenital adrenal hyperplasia
  4. Hyperprolactinemia
  5. Androgen secreting tumors / Adrenal tumors
  6. Drugs
  7. Cushing syndrome
- a. Therefore, free androgen, serum prolactin, thyroid profile are done. If there is clinical feature of hyperandrogenism and total testosterone is >5nmol/L, 17-OH is estimated to exclude androgen secreting tumors.

## Investigation:

1. LH:FSH ratio >3
2. Increased testosterone & androstenedione
3. Insulin resistance, levels raised
4. E1 increased
5. USG findings as described above

## Treatment

In modern we help the patient in following ways:

- Lifestyle modification & weight loss
- Insulin sensitizers like Metformin
- Ovulation Induction for management of infertility

### Ayurvedic management:

Ayurveda treats disease by *Aahara, Vihara*, lifestyle changes, herbal medications and some *panchkarma* therapies. PCOS mainly involvement of *Dosha, Dhātu And Updhatu*, it is not co related with single disease but symptoms resemble with different *Yoni Vyapad Like Arajaska, Lohitkshaya, Pushpghani Jatharini*.

Ayurveda practices *tridoshas* so here *vata* imbalance results in irregular menstruation and pain. If *pitta dosha* imbalances results in acne, hirsutism, heart problems and carcinomas. if *kapha dosha* involves results in weight gain, cyst, depression like symptoms also involved. So, treatment for PCOS in Ayurveda should be planned with following considerations

1. *Nidaan parivarjan* (Avoidance of Causative factor) : what we eat, what we think, what we do are the basic things responsible for PCOS. So *aahaar-vihara* are strictly followed by patients. intake of *mithaya aahar* (unwholesome) like sandwiches, burger, pizza and combinations like yogurt with fruits, salad with cucumber and raw mushrooms, cheese burgers must be strictly avoided. Exercise & Yoga like *shavaasan, mandukasan, anulom-vilom* helps to reduce weight.
2. *Aushadhi's* (Drugs) like
  1. *Shatavari* play a key role in maintaining the duration of the menstrual cycle, normalize the cycle and blood flow<sup>7</sup>
  2. *Ashwagandha* it reduces the stress which is the common cause of amenorrhea.<sup>8</sup>
  3. *Shatpushpa* it regularize periods and increases the chances of ovulation by improving the growth of the follicles.<sup>9</sup>
  4. *Ashoka* used in menstrual irregularities, it helps in hormonal balancing and the problems like acne, hirsutism.<sup>10</sup>
  5. *Manjishtha* is a blood purifier and balance the *kapha & pitta dosha*.<sup>11</sup>
  6. *Guduchi* it fights inflammation, reduce stress, ability to balance blood sugar<sup>12</sup>
  7. *Latakaranj* helps in menstrual abnormalities like infrequent, irregular or absence of menstrual cycles and some other symptoms of PCOS<sup>13</sup>.
  8. So many drugs for *dosha & dhatus* nourishment like *Patola, Kutuki, Pipli, Dashmool, Aleovera, Musta, Amlaki, Patha* also helps to treat PCOS.

## 9. Classical formulations like

1. *Kanchnaar Guggulu*
2. *Vridhivadhika Vati*
3. *Arogyavardhini vati*
4. *Shatavari ghrith*
5. *Varunadikshaya*
6. *Pushpdhanwa Ras*
7. *Yograj guggulu*

*Panchakarma for PCOS*: Panchakarma helps to clear Ama and balance Agni.

## DISCUSSION

In ayurvedic literature, there are primarily four elements mentioned for conception, with the importance of maintaining their quality for optimal pregnancy results.

1. *Ritu* - the right time (ovulating time)
2. *Kstera* is a field (whole reproductive tract)
3. *Ambu* - a well-balanced diet
4. Ovum, menstrual blood, hormones, *Beeja*

*Artava* is the most important of the four factors since the normal physiology of the other three components is dependent on the normal functioning of *artava*. "*strenam garbhoupayogi shyaat artavam Sarva sammtam*". *Antaha Pushpa* – hormones and ovum – and *Bahaya Pushpa* – menstrual blood – are both referred to as *artava* in ayurvedic literature. The physiology of *antaha Pushpa* can be predicted using the characteristics of *bahya Pushpa and rituchakra*. When the *antaha Pushpa* (hormones) is functional physiologically than the *bahya Pushpa* (menstruation) shows features of *shudha artava* if there is no anatomical deformity in the genital tract.

Study of etiology, pathophysiology, observing the sign, symptoms of PCOS, and associating them with the features of *vata, pitta, and Kapha* in their nature as well as in vitiated states, the potential *doshaja* vitiation seems to be *Kapha vata* predominate *tridoshaja vikara*. PCOS is a complex endocrine disorder associated with obesity, hirsutism, and recurrent anovulation. It's a leading cause of infertility and irregular periods.<sup>13</sup> PCOS is not tied to a single entity in Ayurveda, however it does resemble *pushpaghni jatiharini, shandi yoni vyapad*, Charak's *bandhya, Sushruta's bandhya yonivyapad*, and Kashyap's *vikuta jatiharini* are some of the other names. PCOD can be avoided and minimized by the practice of *dincharya and ritucharya*, as well as *pathya aahar, vihar, aushadh, and apathya*.

## CONCLUSION

PCOS is a complex condition in women associated with psychological, reproductive and metabolic features. Insulin resistance and hyperandrogenism both contribute to pathophysiology of PCOS. The direct correlation with PCOS is not mentioned in Ayurveda texts. So, the treatment should be planned accordingly by their *doshadushya* involvement. To treat a women with PCOS need balanced diet and exercise for weight reduction as the first line of treatment along with ayurvedic herbal drugs as well as modern medicines depend up on the patients need. It is a Treatable disease with lifestyle changes and medications.

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