

ROLE OF PANEYAKSHARA IN THE MANAGEMENT OF PCOS**Tanu Chauhan¹ Arpana Jain² Deepak Kumar³**¹3rd year pg scholar, ²Assistant Professor;

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PCOS is the most common female endocrine disorder which is of clinical and public health importance as it is very common, affecting up to one in five woman of reproductive age. According to the concepts of Ayurveda, PCOS can be correlated with *Pushpaghni Jathaharini* of *Kashyapa Samhita* based on clinical features. Another specific condition *Nashtarthava* told by *Susrutha Samhitha* can also be considered in which *Kaphavata Avarana* cause obstruction to the *Arthava*. Signs and symptoms of PCOS based upon Ayurvedic principles can be inferred that *Kapha Vata* vitiation is the main cause of this disease along with *Dushti* mainly in *Rasa Rakta Medo Dhatu* and *Agneyatwa* of the *Pitta* is reduced. *Kapha Vata Samana* and *Pitha Vardhana* is the basic treatment principle in *Arthava Rodha*. So the medicine should be of this nature. *Paneeya kshara* mentioned in *Susrutha Samhitha* is an ideal intervention for this condition. *Ksharana* and *Kshanana* property of *Kshara* executes *Kapha Medohartwa* and increases the *Agneya* property of *Pitta* acts mainly on the *Doshic* status of PCOS. *Palasha Kshara* and *Kalayanaka Kshara* are commonly used. *Kshara* if used wisely in desired dose is a potent remedy to reduce the symptoms, size of the cyst and normalize ovulation.

Key words: PCOS, *Paneeya Kshara*, *Palasha Kshara*, *Kalyanaka Kshara*.

INTRODUCTION

PCOS is the most common female endocrine disorder which is of clinical and public health importance as it is very common, affecting up to one in five woman of reproductive age.¹ Poly cystic ovarian syndrome is a hormonal imbalance in women that is thought to be one of the leading causes of infertility. Syndrome of multi system involvement representing hypothalamo - pituitary - ovarian /adrenal interaction.

Real cause is unknown. Over eating, over sleeping, over crying and worrying etc. are told as aetiology. The root cause - the resistance to hormone insulin which leads to elevated levels of insulin. The elevated insulin interferes with follicle development in the ovaries, resulting in anovulation. As a result of this failure, progesterone levels are low and LH levels are elevated, which in turn cause the ovaries to produce too much of testosterone.

A condition called *Pushpaghni*

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*Jathaharini*² which is described by *KashyapaSamhitha* resemble very much of a PCOS patient according to Rotterdam criteria. In this specific condition the female may have regular periods but which are futile in the sense of ovulation. She has plump cheeks with increased hair growth. It is said that *Jathaharinis* destroy *BeejaRoopaArthava*, bodies, the foetuses, the born and those children being to be born. This may be considered as clinical manifestation of hyperandrogenism resulting in hirsutism and anovulation.

Another specific condition “*Nashtarhava*”³ told by *SusruthaSamhitha* can also be considered in which *Kaphavata Avarana* cause obstruction to the *Arthava*. *Vandhya*⁴ is considered as congenital under development of female genital tract by *Vagbhata*. But according to *Susrutha*, *Vandhya* is anovulation or secondary amenorrhoea causing inability to conceive a child. This is also a common finding in PCOS. “*Vandhya Nashtarhavam Vidyath*” (Su. U. 38/10).

Sthoulya, *Mukhadooshika*, *Athilomata* and *Prameha* are seen associated with PCOS. In Ayurveda obesity is described as *Sthoulya* which comes under *Santharpana Janya Rogas*⁵. The complication of hyperinsulinemia is type-2 diabetes mellitus which comes under *Prameha*. Prodromal symptoms of *Prameha* include undue *Bahi:kaya Malas* and *Kaya Chidra Malas*. There will be *Abhishyanna Dehathwam*. This can be correlated with acanthosis nigricans. All these disease have *MedoDushti*. There is presence of *Sukra* in females also but it does not have the function of *Garbhotpada*, according to *Bhavaprakasa*. He says the function of formation of *Garbha* is achieved by *Arthava* in females (B.P.Pu 3/188). We can

consider that there is a balance between the *Agneyamsa* and *Soumyamsa* in both females and males. But a female body must have a dominance of *Agneyamsa* and male must have dominance of *Snigdhasa*. It means *Agneyamsa* cause female characteristics and *Snigdhasa*, male characteristics. Here, when the *Agneyamsa* of *Arthava* is diminished due to *KaphaVridhi/Dushti*, the *Soumyamsa* increases resulting in increased male characteristics including increased hair growth. It may be correlated with *Athilomata*. In PCOS, development of follicles has been arrested at one or any level and remained as it is. The cysts are follicles at varying stages of maturation and atresia, so these cysts are not destined to ovum. Thus, this pathology is compared with *Granthibhutaartava Dushti*^{6,7}. In a *Granthibhuta Artava*, the *Artava* (ovum) becomes *Granthibhuta* i.e. cyst, as in PCOS, the follicles becomes cysts instead of developing up to mature ovum

Methods and Posology:

As we know that PCOS is not mentioned in Ayurveda classic literature hence - 1) foremost we have to understand the *Doshdushya* in PCOS as per Ayurveda 2) Define the role of *Paneeeya Ksharin* PCOS *Samprapti Vighatanas* especially of *Palasha* and *Kalyanaka Paneeya Kshar*. To achieve both of these we have to go through the *Samprapti* of PCOS and *Kshar kalpana* with details about *palasha kshar* and *kalyanaka kshar* as follows..

Samprapthi of PCOS

In this particular disease, it is evident that major etiological factors are *Athisnigda*, *Madhura*, *Abhishyanthi Ahara* (high calorie food, junk food etc) and reduced bodily activities (*AlpaVyayama*). *Divaswapna* (day sleep) was a habit to most of the patients. It causes vitiation of *KaphaDosh*. Considering

a *Roga*, *Doshadooshya* *Vichinthana* is very important, from the description of *Pushpaghni* it is not very clear, So we have to consider *Nashtarthava*. In this condition *Kapha* and *Vata Dosh* encircle *Arthava* and cause *Arthava Nasha*. In this condition actions of *Pitta* will be suppressed. When *Guna* like *Snigdhatwa*, *Guruthwa*, *Mandathwa*, *Sthirathwa* etc of *Kapha* increases excessively it can cause obstruction (*Avarana*) to the path of *Arthava*. Similarly, reduction in the *Chaladi Guna* of *Vata* in *Arthava* may cause obstruction to its movement. *Dushyas* involved are *Rasa*, *Meda* and *Mamsa*. *Dhathwagni* will be reduced, especially at the level of *MedoDhatu*. The consistent *Dhathwagnis* will also be in reduced state, thus *UtharottaraDhatuPoshana* is impaired. This result in obesity. *Acharya Susruta* explains, when the deranged *Vata* vitiates the *Mamsa*, *Shonita* and *Meda* mixed up with *Kapha*, they produce circular, raised & knotted inflammatory swelling called '*Granthi*'⁸ which can be correlated with cyst.

So by analysing the signs and symptoms of PCOS based upon Ayurvedic principles it can be inferred that the *Kapha*, *Vata* vitiation is the main cause of this disease along with *Dushti* mainly in *Rasa*, *Rakta*, *MedoDhatu*. The *Agneyatwa* of the *Pitta* is reduced in this condition.

Kapha, *Vata Shamana* and *Pitta Vardhana* is the basic treatment principle in *Arthava Rodha*. So, a better intervention is that which improves *Agni* and *Srothorodha*. For this approach of treatment secondary *Kalpnas* like *Kshara* plays an important role. It implies in improving the *Doshic* status of PCOS.

Kshara Kalpana

Herbal medications is used by humans as an intergral part against the ill health. *Acharya Charaka* as mentioned 18

parts of plants which can be used as medicine and *Kshara* is one among it⁹.

Ksharas are alkaline substance obtained by processing the ash of drugs. The word *Kshara* is derived from the root *Kshar*, means to melt away or to perish¹⁰. *Acharaya Susruta* defines as the material which destroys or cleans the excessive/morbid *Doshas* (*Kshyaranat Kshyananat va Kshara*). They are considered as *Anushatras* (like sharp surgical instruments) because they do *Chedy*, *Bhedy*, *Lekhya* and *Tridoshaghna*.¹¹

According to *Acharya Susruta* and *Vagbhata*, *Ksharas* are considered as superior among *Shastras* and *Anushastras*. Because *Ksharas* can be used where *Shashtra Chikitsa* is contra indicated or where we cannot use instruments e.g. in *marmas*, for women, children or those who are afraid of surgery – *Ksharas* are more suitable. By using *Kshara* chance of recurrence of disease are very rare. According to *Susruta* an alkali administered by a intelligent physician is potent enough to speedily subdue all serious diseases, in which it is indicated. *Ksharas* are mainly of two types *Paneeya Kshara* used for internal administration and *Pratisarniya Kshara* for external application. *Kshara* have *Teekshna*, *Usna*, *Dahanakarma*, *Pachana*, *Shodhana* and *Ropana* and indicated in *Gulma*, *Arsha*, *Grahani*, *Mutrakrichra*.

The general procedure for its preparation is *Mridu Bhasmikanana* (conversion to ash), adding water (1:6 ratio) filtration (21 times) Distillation (boiling the *Ksharajala* still water evaporates) collection (process called *lixivation*). The plants are rich source of inorganic molecules when they are burnt forms as ashes and if it is dissolved with water, plant minerals soluble in water permeate through filtration with

predominance of bicarbonate and while boiling this salts converted into solid form, they still have the hygroscopic nature. So quality and quantity depends on the number of filtration of the *Kshara Jala*. *Paneeya Kshara* is given in *Dwigunja*¹²(*Dwigunja* – one Gunja = 125 mg hence 250 mg) 250mg dosage.

PalaashaKshara one of the most common *PaneeyaKshara* mentioned in *Ksharapanchaka* by Charaka, by *Astangahridayain Gulmachikitsa* and by *RasaTarangini* in 14 tarang. *Palasha* (*Butea monosperma*) it is also said to be as *KimsukaKshara* or *ParnaKshara* -*Palasho Agni Janano*¹³ indicated in *Gulma, Pleeha and YakrithVridhi, Prashamana, Muthrakrichra* and *Ashmarihara*. *PalashaKshara* with *PippaliChoorna* and honey improves *Agni* and is indicated in *Gulma, Pleeha and UdaraRogas*. *PalashaKshara* with *Gavyaajya* indicated in *RakthaGulma*¹⁴. *AgneyaDravyas* are *Pittavardhaka* as well as *Vata – kaphaShamana*. Due to its *Ushna, Theekshna* properties it decrease *KaphaDosh*, *medo dhatu* and removes *Srothorodha*.

*Kalyanaka kshara*¹⁵ mentioned in *AsthangaHridayaChikitsaSthana* - *Arshochikitsa* is a *PaneeyaKshara* which can be applied in the *Doshik* status of PCOS. Ingredients include *Trikatu, Triphala, Danthi, Bhalathaka, Chitraka, ErandaTaila* and *Gomutra* and should be prepared under proper purificatory as per classical reference. *Kalayanaka Kshara* is effective in normalizing *Vata*. The drugs of *Kalayanaka kshara* has *Kapha Vata Shamana* property, *Vata Anulomana* and as it is *Kshara* preparation it should be *Chedana, Bhedana* and *Lekhana* property. *Chedana, Bhedana* and *Lekhana* properties of the drugs helps in reducing the cyst size, ovarian volume, normalize ovulation. *KaphaVataShamana* and *VataAnulomana*,

RakthaPrasadana, Sophahara properties results in improving *agni* and *Ama* which ultimately results in reducing pelvic congestion.

Need for Shodhana in PCOS:

When the symptoms are analysed in PCOS, it can be seen that the predominant *Doshas* are *Vatha Kapha* with associated *Pitta Dusthi, Raktha Dusthi* and also we can considered *Medovaha Srotodusthi*. So both *Paneeya Ksharas* executes an better intervention applied accordingly after a *Sodhana* therapy. Since complex pathology involving *Tridoshas* and multiple *Dhatu*s are seen associated with PCOS along with the chronicity demands *Sodhana Karma* as the main treatment. Any medicine which is administered without proper *Shodhana* will not produce an expected result¹⁶. The *Sodhana* processes performed prior to the treatment creates an atmosphere for the drugs to work at the *Dhatu* level. As we consider *Kaphavritta Vata* and *PittaKshaya* in *Anshansh Kalpana* of *Doshdushti* in PCOS i.e. *Dushti of Kapha, Vata* and *Pitta* classical *Vamana Karma* with proper *Sansarjan Karma* considered as *shodhana* in PCOS.

Mode of Action of Kshara in PCOS:

As we seen in *Kshara Kalpana* both *Palasha* and *Kalyanaka Kshara* having *Ushna, Teekshna, Deepana, Pachana, Darana, Chedya, Bhedya, Kshapana, Ksharana* and *Kshanana* property of *Kshara* executes *Kapha Medohartwa* and increases the *Agneya* property of *Pitta* acts mainly on the *Doshik* status of PCOS.

CONCLUSION

Inferility is a very burning issue facing in this era. PCOS plays a major role in female infertility. Considering modern medicine there is no proper cure for PCOS other than insulin regulators. Treatment

modality should be correcting the functioning of *Agni*, *Doshas*, *Dhatus* and *Srotas*. To reverse the pathogenesis to an extent and maintaining proper diets places an important role in its management. *Ksharakalpana* is one which is commonly used clinically but less explored *Kalpana*. *Paneeya Kshara* if used wisely in a desired dose is a potent remedy to reduce the symptoms, size of the cyst and normalize ovulation.

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