

THE AYURVEDIC VIEW OF POLYCYSTIC OVARIAN DISEASE

Chaitalee Anil Walale¹, Pallavi B. Khandare²

¹BAMS, MD Scholer, Stree Rog Prasuti Tantra Dept.
Siddhakala Ayurved Medical College, Sangamner, Maharashtra, India

²BAMS, MD, Assistant Proffesor of Rachana sharir Dept.
Late. B.V. Kale Ayu. Medical College, Latur, Maharashtra, India

Email: dr.pallavikhandare@gmail.com

ABSTRACT

Polycystic ovarian disease, PCOD is the most common clinical condition, we all encounter in our practice. The exact cause of PCOD is unknown; however it has been linked to hormonal imbalance. The sedentary lifestyle, dietary variations, lack of exercise, stress etc. are also the contributory factors. The symptoms of PCOD may begin in adolescence with menstrual irregularities, Hyperinsulinaemia, Hyperandrogenism, obesity and may lead to infertility. Current treatments for PCOS are only moderately effective at controlling symptoms and preventing complications. Though, in Ayurveda this condition has not been explained as a single disease, but it can be construed under the headings *Yonivyapada* and *Artavadushti*. This paper reviews the contemporary and Ayurvedic perspectives of PCOD and propounds of a holistic treatment in the form of good stress-free lifestyle, appropriately balanced diet, *Yoga, Pranayama*, along with administration of wisely selected Ayurvedic drug, for an effective management of PCOD.

Keywords: Polycystic ovarian disease, *Artavadushti*, infertility, symptoms, diagnosis, Holistic approach.

INTRODUCTION

Woman care has been discussed elaborately in Ayurveda. Every author of ayurvedic classics has written a separate chapter for women problems and its treatment. PCOD is a disease characterized by multiple cysts in the ovaries.³ the most common symptoms are irregular menses, weight gain, acne, dandruff, excessive hair growth on the face, chest, back thinning of hair, infertility. However, 30% of women are with normal menses, approximately 85%-90% of women with Oligomenorrhoea have PCOD while 30%-40% of women with Amenorrhoea have PCOD. Hirsutism is a common clinical

presentation of Hyperandrogenism occurring up to 70% of women with PCOD². Under Ayurvedic classification PCOD is often times classified as *Gulma*. According to Aacharya Charaka one of the sites of *Gulma* is pelvis. And PCOS is specifically considered under the heading of *Raktagulma* because of the associated symptoms of bloating, pain, delayed or absent menstrual period & infertility. The *Raktagulma* occurs only in women not in men because of the specific presence of uterus & menstrual flow due to vitiation of *Vata* having entered into uterus for the menstrual flow. In every month the menstrual blood

being checked enlarges the abdomen. This patient, consequently suffer from pain, pulsation in the mass of *Gulma*.

The *Gulma* is an abdominal mass, lump or cyst due to a vitiation of *Vata dasha*. PCOS is also sometimes labeled under the classification of *Granthi* which refers to a tumor, cyst. The main clinical feature of *Granthi* is swelling or protuberance. *Granthi* available in ayurvedic classics can be compared with PCOS.

Aim: To study Ayurvedic view of PCOD depending upon its *Hetu*, *Lakshana* and various aspect of its treatment.

Objectives-

1. To study *Hetu* of PCOD according to Ayurveda.
2. To study *Lakshana* of PCOD according to Ayurveda.
3. To study *Chikitsa* of PCOD according to Ayurveda.

Materials and Methods-

Based on review and analysis of Ayurvedic literatures as *Bruhatrayee*, *Laghuttayee*, text books related to *Streeroga - Prasutitantra* are taken for the study.

Hetu-

Ayurvedic texts mention the presence of *Shukra Dhatu* (semen) in both men and women. *Shukra Dhatu* plays a vital role in maintaining the health of the reproductive system⁶. *Shukra Dhatu* can be considered as a combination of androgen (male hormone) and estrogen (female hormone). Any imbalance in *Shukra Dhatu* can cause infertility⁸.

An imbalance in the *Doshas* can affect the efficiency of the *Shukra Dhatu*. When *Doshas* affect the efficiency of the *Shukra Dhatu* in women⁹, it leads to excess production of male hormone and other symptoms of PCOD such as the appearance of cyst in the ovaries⁵.

Lakshana⁷-

*Vandhyata*⁸.

*Rajovikruti*⁸ – Irregular menses, with or without pain & with or without clots

Gandha Vikriti

Varna Vikruti

Sthaulya.

Atiksha – Astane, Atimatrena.

*Twakdushti*⁹.

Diagnosis

1. Medical History:

Menstrual periods, weight changes and other symptoms are observed⁴.

2. Physical examination:

Measure blood pressure. Body Mass Index [BMI] and waist size, checking the areas of increased hair growth for Hirsutism¹.

3. Pelvic exam:

Examination for enlargement of ovaries or swollen by increase number of cysts³.

4. Blood test:

Blood test for hormone androgen and glucose level¹².

5. Ultrasound¹².

Treatment-

1. Shodhana chikitsa⁶-

This primarily includes selected *Panchakarma upakrama* especially *Anuvasana*, *Niruha* and *Uttarbasti* which are more beneficial in this condition⁷. The classics too quote *Basti* to be modality of choice in this context due to its utility in conditions of vitiated *Vata*. Other *Panchakarma* modalities like *Vamana*, *Virechana* are also prescribed for vitiated *Kapha* and *Pitta* respectively. *Snehana* and *Swedana* need to be given prior to any *Panchakarma*⁶.

2. Shamana Chikitsa⁵-

PCOD treatment in Ayurveda involves using a combination of powerful herbs that strengthen the reproductive system. These herbs also treat inflammation and hormonal imbalance that are at the root of PCOD. Certain herbs also work against other complications of PCOD such as digestive disorders, weight gain, insulin sensitivity, and improving mood. In essence, these herbs perform the same function as allopathic medications for treating the different symptoms of PCOD.

Shilajit (purified Asphaltum)-

Shilajit has anti-inflammatory effects. It also boosts

immunity and energy level and rejuvenates the female reproductive system. Many women with PCOD experience heavy bleeding, resulting low level of hemoglobin, weakness & inability to do hard work. It also improves heart health. *Shilajit* is a *vajikaran* drug which rejuvenates sexual function and can be an effective treatment for some of the side effects of PCOS.

Shatavari –

Shatavari is rich in various steroidal saponins, vitamins A, B1, B2, Folic acid, C, E and minerals such as magnesium, phosphorus, calcium and iron. These act as anti-oxidant and protect the female reproductive system. *Shatavari* also has anti-diabetic properties that help improving fertility.

Karavellaka –

This bitter fruit has potent anti-diabetic properties. It also treats digestive disorders, lower inflammation, boosts immunity and prevents cancer. It helps women with PCOD by regulating their periods and assisting in weight loss.

Lodhra –

Lodhra is rich in compounds called flavonol glucosides that are highly beneficial in reducing uterine disorders. It also helps in regulating ovarian hormones and improves fertility.

Do and dont's for PCOD patients-

- Minimize the intake of dairy products, including curd and other milk products. Butter milk is an acceptable drink.
- Follow a natural sleep cycle.
- Avoid sleeping during the day time and try to get uninterrupted sleep during night.
- Stay away from all kinds of junk food.
- Avoid white sugar.
- Avoid non-vegetarian food. Though Ayurveda allows an occasional intake of fish.
- Use herbs like garlic, cinnamon and fenugreek.
- Opt for herbal teas like spearmint tea for green tea.

Yoga Asanas⁷ for PCOD-

<i>Naukasana</i>	<i>Bhadrasana</i>
<i>Sarvangasana</i>	<i>Shalabhasana</i>
<i>Bharadvajasana</i>	<i>Padmasana</i>

DISCUSSION

PCOD is not only the reproductive endocrinopathy but also a metabolic disorder. The number of patients with already diagnosed PCOD is increasing day-by-day and approaching towards Ayurvedic practitioners for treatment. To understand PCOD from approach scholars need to study its Ayurvedic classics properly. There is a need before treating PCOD by Ayurvedic ways all the scattered references should come in mind and the proper etiopathology should be understood. After that the proper Ayurvedic diagnosis should be made and then only one can get best result for PCOD. Any imbalance or diseased condition is seen as interplay and imbalance between the *Dosha*³. The action of hormones expresses the nature of *Pitta*. The energy is responsible for transformation. All stages of the female reproductive process are a result of the interplay of hormones. *Pitta* reflects in the influence of the hormone on the different stages of the ovarian and menstrual cycle. Each of the three *Doshas Vata, Pitta* and *Kapha* has a specific role in the female reproductive cycle. *Vata dosha* rules the reproductive system, and the organs are located in *Artava Dhatu*⁴, these are the tissues of the reproductive organs. *Artava* provides nourishment for the ovum and allows movement of the egg from the ovum to the uterus. *Vata* is responsible for movement of the follicle during the ovarian cycle, the rupture of the ovary wall releasing the matured ovum, the movement of the fimbriae the finger like projections that guide the ovum into fallopian tube and the movement of the ovum towards the uterus¹³. *Apan vayu*, one of the five *subdoshas* of *vata* allows for the downward movement of menstruation fluid and delivery of a child during labor⁴. *Pitta* is responsible for transformation and influences hormonal balances¹³. *Khapha dosha* is responsible for providing nourishment

growth of the tissues such as the growth of follicles, uterus and the development of an egg and sperm in to a fetus. PCOS is a *Sannipatik or Tridoshik* condition³. The disease begins as a *Vata* imbalance, which pushes *Kapha* and *Pitta* out of balances in the *Shukravaha Srotas* or reproductive channel³. When *Vata* becomes vitiated in the *Shukravaha Srotas* it manifests as an irregular menstrual cycle. *Pitta* vitiation in leads to acne, *Kapha* vitiation leads to symptoms associated with cysts and weight gain^{3,4}.

CONCLUSION

PCOD is a lifestyle disorder and the leading cause of infertility among women of reproductive age group, leading to endocrine dysfunction and multiple sign and symptoms. The condition is to be properly perceived, interpreted and diagnosed which is key to providing a better line of treatment. It is need of hour to plan a comprehensive care through Ayurveda, which should be complete and conducive to the patients. Ayurveda is not only about herbal medicines. In fact, the basic philosophy of Ayurveda advises on healthy way to live life. Medicines are a last resort of for treating any condition. In order to be healthy, you need to eat right, exercise regularly and manage your stress levels. For the herbs to do their job effectively, you need to take care of what you are eating and how you are living your life. If you do so, there's no stopping you from reversing PCOD or any other lifestyle disease.

REFERENCES

1. Burghen C.A. Givens J.R. and Kitabchi A.E. Correlation of hyper androgenism with hyperinsulinemia in Polycystic ovarian disease. *Journal of clinical Endocrinology and Metabolism* 50,113-116 (1980).
2. Azziz Reral, The prevalence and features of polycystic ovarian syndrome in an unselected population. *Obstetrics and Gynaecology* 2004 Jun;89(6):2745-2749.
3. Pt. Kashinath shastri, Dr. Gorakhanath Chaturvedi editor. (Edition 2009) *Charak Samhita of Agnivesha, Chikitsasthana*; 30/17. Chaukhamba Bharati Academy, Varanasi; p842.
4. Vaidya Yadunandana Upadhyaya editor, vidyotini hindi commentary by Atrideva Gupta. (edition 2012)

- Ashtaanga Hridayam of Vagbhatta, Uttarasthana 33/45: Chaukhamba Prakashana, Varanasi.
5. Kaviraja Ambikadutt Shastri editor. Edited with Ayurveda Tatva Sandipika (edition 2011) *Sushruta Samhita of Sushruta, Uttaratantra*; 38/10. Chaukhamba Prakashana, Varanasi; p203.
 6. Dr. Kadam Ruta et al. contemporary and traditional perspectives of PCOD. A critical Review *IOSR Journal of Dental and Medical science* p-ISSN:2279-0861.volume 13, issue 9 ver.VI(sep 2014) p89-98.
 7. Data base on medicinal plant used in Ayurveda, volume 3, by P.C. Sharma, M.B. Yelne, T.J. Dennis, edition 2005, published by central council for research in Ayurveda & Siddha.
 8. Hannan, J.M.A.,et al. “ Antihyperglycaemic activity if Asparagus recemosus root is partly mediated by inhibition of carbohydrate digestion and absorption, and enhancement of cellular insulin action.” *British Journal of Nutrition* 107.09(2012):1316-1323.
 9. Data base on medicinal plant used in Ayurveda, volume 3, by P.C. Sharma, M.B. Yelne, T.J. Dennis, edition 2005, published by central council for research in Ayurveda & Siddha.
 10. Data base on medicinal plant used in Ayurveda, volume 3, by P.C. Sharma, M.B. Yelne, T.J. Dennis, edition 2005, published by central council for research in Ayurveda & Siddha.
 11. Bhutani KK et al. Effect of *Symplocos racemosa* Roxb. On gonadotropin release in immature female rats and ovarian histology. *J Ethnopharmacol.* 2004; 94(1):197-200.
 12. Mamata Jadhav et al., Anti-androgenic effect of *Symplocos racemosa* Roxb. Against letrozole induced polycystic ovary using tar model, *Journal of Coastal Life Medicine* 2013; 1(4): 309-314
 13. Dr. Kadam Ruta et al. contemporary and traditional perspectives of PCOD. A critical Review *IOSR Journal of Dental and Medical science* p-ISSN:2279-0861.volume 13, issue 9 ver.VI(sep 2014) p89-98

Source of Support: Nil

Conflict Of Interest: None Declared

How to cite this URL: Chaitalee Anil Walale & Pallavi B. Khandare: The Ayurvedic View Of Polycystic Ovarian Disease. *International Ayurvedic Medical Journal* {online} 2018 {cited August, 2018} Available from: http://www.iamj.in/posts/images/upload/1828_1831.pdf