

## Ayurvedic Treatment of PCOD

### Author:

**Vd.AnitaB.Kulakarni (Joshi)**

M.D(Ayurveda),. PGDMB, Ph.D.PDF(Ayu)

Assistant Professor in Vivekanand Ayurvedic College, Shrigonda



They have published 5 books on *Ayurveda* and have written many articles on *Ayurvedic* treatment .They are also in Advisory Board for publishing the journals.The present article is on latest treatment of PCOD which is a major problem among female and the expert treatment of PCOD is rarely available.

### Introduction

PCOD (Poly cystic ovarian disease)is one of the most common endocrine disorders among females. The current problem is increasing day by day and widely the infertility related problems are occurred if patient neglects this disease in initial phase, there are certain other problems too like amenorrhea and irregular mensuration due to anovulation. The causes of the disease are not fully understood but there is evidence of theories that relates to genetic disease. It is estimated by WHO that 116 million women were affected by PCOD in 2010(i.e. 3.4% of women) <sup>1, 2, 3, 4, 5, 6, 7, 8, 9, 10.</sup>

### Case presentation of PCOD-

IPD/OPD Number- 10082

Gender-Female

Marital status-Unmarried.

Age-21

Admission Type-Outpatient

Patient care-Observation

The patient complaining with :

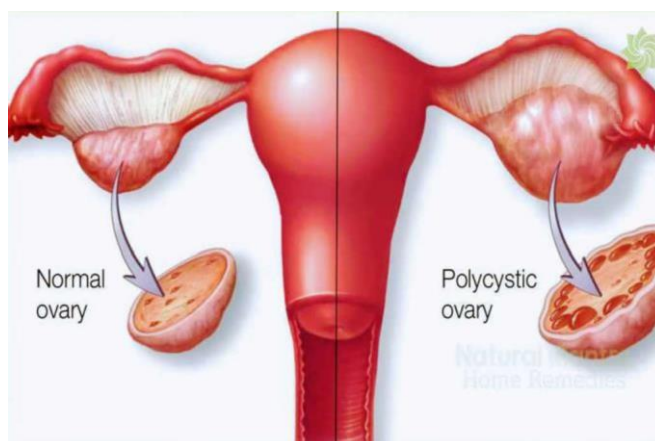
Irregular menses since 2 years.

Weight gain from last six months.

Abdominal Pain.

Hair loss.

### Short history of illness



Since past two years patient is having irregular menses and from last six month she is having right side abdominal pain. For regular menses she is taking Mala-D tablet with the interval of 3 month. But patient was not feeling better with this treatment.

Habits (Addiction)-No

Medical history-Mala-D(3month interval)

Investigation-USG of pelvis&abd-poly cystic ovarian disease (both ovaries) &Right ovary shows cyst of size-3.7 × 3.7cm.

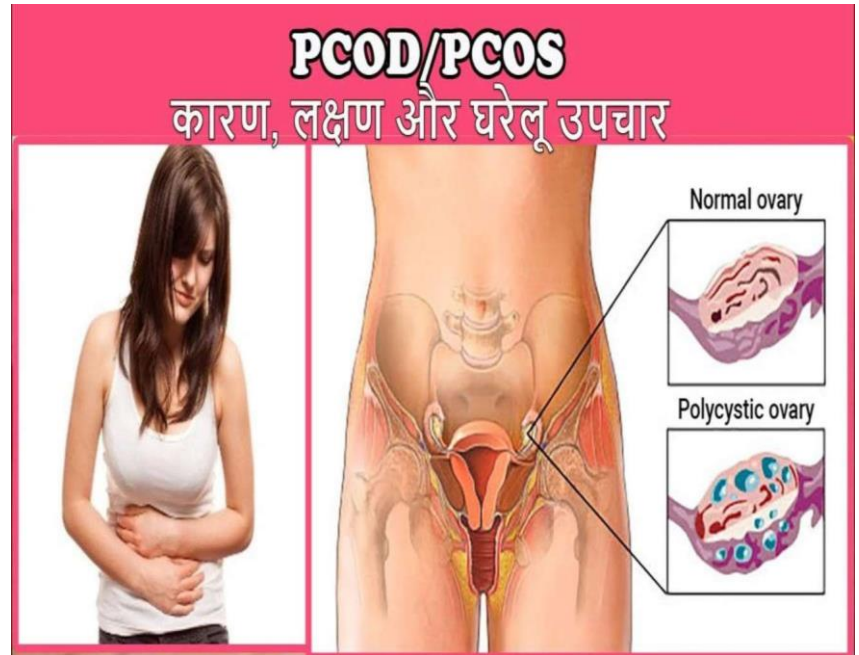
Allergies-No

### Current medication

*KanchnarGugulu* 500mg. Twice a day

*ChandraprabhaVati* 500mg. Thrice a day.

*Aarogyavardhinivati*. 500mg. Twice a day



*BharangyadiKashaya*with *TilaKwatha*as *Anupana*. (10 ml-*BharangyadiKashaya*)

### Follow up

Pattern of PCOD is not changed but total symptomatic relief was there by *Ayurvedic* treatment. Menses are regular now.

### Further Advice with regards to treatment

To do physical exercise. Avoid *KaphaVata*as *Ahara*. Patient should be advised to monitor weight and advised not to increase her weight.

### Discussion and Conclusion

As PCOD is presenting mainly *KaphatmakaVyadhi* and *Vata* is *Anubandhi* in every uterine disorder so the treatment mainly based on *Lekhana Karma*. The *KaphavatmakaAvarodhais* get cleared by *Ushna*, *Tikshna*, *VatanulomanaDravya*. PCOD reflects *GranthiyuktaSampraptisoBharangyadiKashaya*(mentioned by *Bhavaprakasha*) by its

*Ushna Tikshna Gunab* breaks the pathogenesis of the disease. Further more clinical trials will evidence betterment of *Ayurvedic* therapies for *Anukta Vyadhilike* PCOD.

## References

1. www.wikipedia.com, Kollmann M, Martins WP, Raine-Fenning N (2014). "Terms and thresholds for the ultrasound evaluation of the ovaries in women with hyperandrogenic anovulation". *Hum. Reprod. Update* 20 (3): 463–4.
2. www.wikipedia.com, "Stein-Leventhal syndrome, also known as polycystic ovary syndrome (PCOS), is a disorder characterized by hirsutism, obesity, and amenorrhea because of luteinizing hormone-resistant cystic ovaries."
3. www.wikipedia.com, Fauser BC, Diedrich K, Bouchard P, Domínguez F, Matzuk M, Franks S, Hamamah S, Simón C, Devroey P, Ezcurra D, Howles CM (2011). "Contemporary genetic technologies and female reproduction". *Human Reproduction Update* 17 (6): 829–847.
4. www.wikipedia.com, "Molecular progress in infertility: polycystic ovary syndrome". *Fertility and Sterility* 78 (3): 569–576.
5. www.wikipedia.com, Diamanti-Kandarakis E, Kandarakis H, Legro RS (August 2006). "The role of genes and environment in the etiology of PCOS". *Endocrine* 30 (1): 19–26. doi:10.1385/ENDO:30:1:19. PMID 17185788.
6. www.wikipedia.com, Goldenberg N, Glueck C (2008). "Medical therapy in women with polycystic ovary syndrome before and during pregnancy and lactation". *Minerva Ginecol* 60 (1): 63–75.
7. www.wikipedia.com, Boomsma CM, Fauser BC, Macklon NS (2008). "Pregnancy complications in women with polycystic ovary syndrome". *Semin. Reprod. Med.* 26 (1): 72–84.
8. www.wikipedia.com, Azziz R, Woods KS, Reyna R, Key TJ, Knochenhauer ES, Yildiz BO (June 2004). "The Prevalence and Features of the Polycystic Ovary Syndrome in an Unselected Population". *Journal of Clinical Endocrinology & Metabolism* 89 (6): 2745–9.
9. www.wikipedia.com, Teede H, Deeks A, Moran L (2010). "Polycystic ovary syndrome: a complex condition with psychological, reproductive and metabolic manifestations that impacts on health across the lifespan". *BMC Med* 8: 41.
10. www.wikipedia.com, Vos T, Flaxman AD, Naghavi M, Lozano R, Michaud C, Ezzati M, Shibuya K, Salomon JA, Abdalla S, Aboyans V, et al. (Dec 15, 2012). "Years lived with disability (YLDs) for 1160 sequelae of 289 diseases and injuries 1990-2010: a systematic analysis for the Global Burden of Disease Study 2010". *Lancet* 380 (9859):2163–96.