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Shodhanachikitsa In Polycystic Ovaries - A Case Study

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Abstract: Polycystic ovaries is one of the leading gynaecological problems. It can lead to infertility if neglected. It involves multiple systems disturbances. Hormonal imbalance is the major endocrinal disturbance behind it. This single case report is an effort to show that Ayurvedic Panchakarma treatment offers safe , genuine , effective , fast treatment option to treat polycystic ovaries. This is a case of a 31 years old female patient suffering with hypomenorrhoea, polycystic ovaries & associated metabolic disturbances like obesity. Weight of the patient was 80 kg with Body mass index (BMI) 32.05. Patient was treated with ayurvedic bodypurification treatment i.e. shodhanachikitsa (Panchakarma). First purification treatment for kaphadosha i.e. vamana done , followed by bastikarma for vata balance after one month. Changes in cyclicity of menses & development of follicle were observed prominently after panchakarma treatment. Positive changes in follicle maturation & signs of ovulation, endometrial thickness were noted clinically & sonographically. After 1 year patient conceived at the age of 32 years & given birth to healthy child. The establishment of normal menstrual cycle with regular menstrual discharge after the panchakarma procedures was observed. No significant side effects of the treatment noticed. Use of harmful chemical drugs, hormones & surgical interventions may be avoided by using such type of shodhana treatments. This a cost effective, non invasive treatment option with associated health benefits.

Key Words: Ayurvedic Shodhanachikitsa, effective, bastikarma, Polycystic ovaries , vamana

INTRODUCTION : Polycystic ovaries is one of the leading gynaecological problems. It can lead to infertility if neglected. It involves multiple systems disturbances. Hormonal imbalance is the major endocrinal disturbance that causes it. This single case report is an effort to show that Ayurvedic panchakarma treatment offers safe , genuine , effective , fast treatment option to treat polycystic ovaries. Menstruation is dependent on the proper functioning of a chain made up of hypothalamus-pituitary-ovary- uterus. Amenorrhoea may represent a weakening or break in one or more of these links. ^[1] Follicular or theca lutein cysts represent enlargement of follicular cysts or possibly unruptured graafian follicles. The ovum degenerates and disappears but the granulosa and theca cell lining persist and remain functional for a variable period of time. When gonadotrophic stimulus is abnormal , ovulation is arrested & tissues in and around the cyst wall can be predominantly oestrogenic, progestogenic or androgenic. Polycystic ovaries in Stein –Leventhal syndrome produce relatively excess amounts of androgens. ^[1]

This is a case of a 31 years old female patient suffering with hypomenorrhoea & polycystic ovaries & associated metabolic disturbances like obesity etc. Weight of the patient was 80 kgs with Body mass index (BMI) 32.05. Patient had obstetric history as G2P2A0L2 (G- Gravida, P – Para , A- Abortion , L- Live) with one full term normal delivery & one LSCS ~ Lower segment caesarean section delivery. Patient was treated with Ayurvedic bodypurification treatment i.e. Panchakarma. First purification treatment for kaphadosha e.g. Vamana (Therapeutic emesis) done, followed by Bastikarma (Per rectal purification procedure) for vata balance after one month.

Case Details : Main Symptoms & Clinical Findings:

- 1) Delayed Menses from 6 months
- 2) Scanty Bleeding during menses.
- 3) Pains during menses.
- 4) Obesity since 3-4 years

Menstrual History : Menarche- at 13 years of age, irregular, 5-6 weeks/ 1-2 days / mild – scanty discharge amount since 6-7 months , mild to moderate pains.

Past Menstrual History - 28-30 days cycle / 3-5 days duration / discharge amount moderate

Ultrasound Examination Findings (Pretreatment): Enlarged (Bulky) Ovaries with Polycystic Morphology. Multiple sub-centimeter sized peripheral follicles and echogenic central stroma in both ovaries seen. Uterus size, shape, position, echo-texture normal. Endometrial thickness 6 mm.

Doshadushti : *Kapha , Vaata*

Dushya : *Rasa, meda, shukra*

Agni~ digestive power : Sama ~ incomplete moderate *Samhanana*~ build - madhyama

Prakruti ~ constitution : Kaphapradhan Satva ~ mind– Madhyama ~

Yoniparikshana ~ per vaginal examination :

Artavavaha Srotus ~Female Reproductive system examination :

Vulva , vagina – Normal . Uterus - Bulky, Anteverted , Adnexa – ovaries – Bulky, fornices - clear, Cervix : Normal , soft , mobile , no erosion , white discharge + , no tenderness

Diagnosis : Polycystic Ovaries - *Artavakshaya*

LITERATURE REVIEW:

आर्तवक्षयेयथोचितकालादर्शनमल्पता वा योनिवेदना च । सु. सू. १५/१२ ^[2]

तत्र संशोधनमाग्नेयानां च द्रव्याणां विधिवदुपयोगः । सु. सू. १५/१६ ^[2]

दोषैरावृत्तमार्गत्वार्तवं नश्यति स्त्रियाः । सु.शा. २/१९ ^[2]

अत्र दोषाः कफो वायुः वातकफौ च । सु.शा. २/१९ टीका ^[2]

These sutras clearly mention the *lakshanas* ~ symptoms, *samprapti* ~ pathology & *chikitsasutra* ~ treatment principles; for the *Artavakshaya* ~ hypomenorrhoea.

Acharya Sushruta says there is imbalance of *Vata* and *Kapha* doshas in amenorrhoea. He says if the passage is encircled by *vata* and *kapha* amenorrhoea will be produced. Considering the *Vata* & *Kapha* actions, *amenorrhoea* of this type may be considered as hyperoestrogenic polycystic nature with features of *vata* & *kapha dushti* ~ vitiation

Treatment :

In Ayurvedic gynaecology, specially for diseases related to ovulation disturbances again Sanshodhan – purification treatment is the first line treatment.

दोषाः कदाचित्कुप्यन्तिजितालंघनपाचनैः।जिताःसंशोधनैर्येतुनतेषांपुनरुद्भवः।। च. सू. 16/20 अ. ह. सू. 4/27 ^[3,4]

Ayurveda panchakarma i.e. bodypurification treatment is the first-line treatment in majority of diseases. Earliest Shodhana (Removing vitiated doshas) brings the body equilibrium and increased response to other treatment and also important in relapse prevention .This is superior treatment to other treatment modalities. The vitiated doshas can be pacified by shamanchikitsa but shodhanachikitsa minimizes the chance of recurrence,that means complete cure.

सर्वा व्यापन्नयोनि तु कर्मभिर्वमनादिभिः ॥४५॥ च. चि. 30/४५ [३]

सर्वतः सुविशुद्धायाः शेषं कर्म विधीयते ॥४६॥ च. चि. 30/४६६ [३]

मृदुभिः पंचभिर्नारीं स्निग्धस्वित्रामुपाचरद् ।

एवंयोनिषुशुद्धासुगर्भविन्दन्तियोषितः ।।च. चि. 30/1२५ [३]

अदुष्टेप्राकृतेबीजेजीवोपक्रमणेसति ।

पञ्चकर्मविशुद्धस्यपुरुषस्यापिचेन्द्रियम् ।।च. चि. 30/126 [३]

परीक्ष्यवर्णैर्दोषाणांदुष्टंतदुष्टैरुपाचरेत् ।

Acharya Charaka has clearly advised *vamana* & other *panchakarma* in all types of gynaecological diseases. All other treatments should be followed after panchakarma. Purity is undiseased physiological state of zygotes that means, there should not be any alterations in physiology, functions, behavior of cells, zygote should be free from genetic mutations & any defects which can produce perfect, natural, long lasting union i.e. “*Supraja*”~ Superior Progeny. Panchakarma at the start of medicinal treatment - aims at achieving the pure, natural, physiological state of sperms & ovum.

In this case two *Shodhana* (bodypurification) procedures i.e. *Vamana* & *Basti*, out of five panchakarma procedures are used. Patient was treated with *vamana* first, followed by *sansarjanakrama* ~ specific serial stepwise dietary regulations for 7 days. Then after one month *Bastikarma* was done on same patient with follow up of *sansarjanakrama*

MATERIALS:

A. Emetic compound (*Vamakayoga*)^[5]:

मदनमधुकलम्बानिम्बबिम्बीविशालात्रपुसकुटजमूवदिवदालीकृमिघ्नम् ।

विदुलदहनचित्राःकोशवत्यौकरञ्जःकणलवणचैलासर्षपाश्चर्दनानि ।।अ. ह. सू. 15/1 [४]

- i) Madanphalapippali – *Randia spinosa* powder - 2-3gms.
- ii) Pippali – *Piper longum* Churna – ½ gm
- iii) Jeshthamadha – *Glycyrrhiza glabra* powder - ½ gm
- iv) Vacha – *Acorus calamus* – ½ gm
- v) Sauvarchal – Rock salt - ½ gm
- vi) Tankanbhasma – *Tankana boriox* – ¼ gm
- vii) Honey 5 ml

B. Liquid for Akanthapana ~ full of stomach : Milk

C. Sauvarchal – Rock Salt water (lawanjala)

Dose (matra) for *Vamana* : Textual dose of *vamakayoga* for *vamana* is full of oneself's finch (*antarnakhamushthi*) (*madanphalapippali*)

Practically used : adults- 3-5 gms of *vamakyoga*.

Akanthapana: 1-4 litre. as required.

Eradicated dosha pramana – Quantity of Doshas vomited = vomitus-intake quantity

= approximately 54 tolas or 500-550 ml.

Duration of treatment for Vamana :

7 days followed by 7 days of Sansarjanakrama **Follow up :** weekly for one month

Materials for Basti ^[6]:

मदनकुटजकुष्ठदेवदालीमधुकवचादशमूलदारूरास्नाःयवमिसिकृतवेधनं

कुलत्थोमधुलवणंत्रिवृतानिरूहणानि।। अ. ह. सू. 15/3 ^[4]

A. Bastidravya ~ mixture for niruhabasti

i) Dashamoola + Erandamoola (Decoction)

iii) Kalka (Paste) (Madanphala + Vekhand + Kutaj + Yashtimadhu) (1/8 of kwath)

iii) Chandanbalalakshadi oil - 50 ml

iv) Sauvarchal – Rock salt - about 10 grams

vi) Honey 10 ml

B. Anuvasan Basti : with Siddha (Medicated) Til oil at prior evening of First Bastikarma

C. Matrabasti - Chandanbalalakshadi oil in evening after food.

Dose (matra) for basti :

Prepared *Bastidravya* 700 to 960 ml as per bala, doshaprokopa & tolerability of the patient.

Dose of Anuvasan Basti : 120 ml. Dose of Matrabasti - 60 ml

Duration of treatment : 7 settings (days) Followed by Sansarjanakrama

Follow up - fifteen days or Monthly for 3 months

DISCUSSION: The response to treatment was observed in terms of improved maturation of ovarian follicles with establishment of regularity of menstrual cycle. Purification of cellular wastes creates better environment for effective cellular functions & metabolism. Panchakarma treatment decrease in resistance for hormone functions at cellular level with better function of hormone receptors at target tissues.

Shodhanachikitsa brings individual cell purification i.e. clearance of waste of cellular metabolism & improved supply of essential nutrients (rasa) through improved digestion & circulation the system performance & output is improved. So the results are quick & long lasting.

Changes in cyclicity of menses & development of follicle were observed prominently after panchakarma treatment. Positive changes in follicle maturation & signs of ovulation, endometrial thickness were noted clinically & sonographically. After 1 year patient conceived at the age of 32 years & given birth to child. The establishment of normal menstrual cycle with regular menstrual discharge after the panchakarma procedures observed. No significant side effects of the treatment noticed. This case is very classical example of polycystic ovaries or *Artavakshaya* which can be treated successfully & safely when other pathies find it very difficult for cure.

FINDINGS :

Ultrasound Examination Findings (Post-treatment): Uterus anteverted, normal size, shape & echo texture. No focal lesion. Both ovaries enlarged in size, Right Ovary measures 44x17x30 mm, left ovary measures 38x 21 x 29 mm. Central stroma is echogenic. No solid/cystic mass lesion. Follicle size on 21st day Right ovary 14 x 14 mm Left ovary 16 x 13 mm & endometrial thickness 10 mm.

RESULT: Establishment of cycle regularity with follicle maturation & Ovulation were observed prominently after panchakarma treatment. Positive changes in follicle maturation & signs of ovulation, endometrial thickness were noted clinically & sonographically. After 1 year patient conceived at the age of 32 years & given birth to child. No significant side effects of the treatment noticed.

CONCLUSION:

1. Ayurvedic panchakarma treatment offers a very safe, effective & fast treatment option in patients suffering with polycystic ovaries.
2. Treatment also aims at doing the long lasting & basic reversal in pathophysiology of the problems.
3. Use of harmful chemical drugs, hormones & surgical interventions may be avoided by using such type of shodhana treatments.
4. This a cost effective, non invasive treatment option with associated health benefits.
5. Such studies should be supported by further research using larger sample size.

REFERENCES:

1. *Norman Jeffcoate (1957) , V.R. Tindall, Jeffcoate's Principles OfGynaecology* (5th ed. 1987 reprint 1993 pg. 451, 496) Oxford , LN: Butterworth – Heinemann
2. Sushruta, *Sushratasambhita , Sutrasthana 15/12, 15/16 , Sharirsthana 2/19* Varanasi, VN: Chaukhambha orientalia
3. Agnivesh, Charak (1996) *Charaksamhita*, Sutrasthana 16/20, 30/1, 30/126, Varanasi, VN: Chaukhambha
4. Laghuvagbhata , (1982) *Ashtangahrudaya* , Sutrasthana 4/27, 15/1, 15/3 Varanasi , VN: Chaukhambha
5. *Salim Mulla JMDSR.2015,2-6,7-12*
6. *Salim Mulla Int J Cos Derm. 2021, vol 1-1, 7-10*

