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ABSTRACT:

Polycystic ovarian syndrome (PCOS) is known by the name of stein-leventhal syndrome also called as hyper androgenic anovulation. Incidence of this disease is increasing day by day due to change in life style pattern, stress, pollution & many more causes in growing young women during her reproductive age. It is one of the most common cause for infertility in women. Poly Cystic Ovarian Syndrome is a condition that has cysts on the ovaries that prevent the ovaries from performing normally. This is one of the major burning problem in front of society. Prevalence of PCOS in Indian adolescents is 9.13%. Therefore this study was carried out which was conceptual type in nature in *Ayurvedic* perspective w.s.r to *Kriyasharir*. The aim & objectives of this study was to know the pathophysiology of PCOS in terms of Ayurveda & to educate the common people regarding the prevention of PCOS. All the relevant material was compiled from various available *Ayurvedic* classics texts like *CharakSamhita*, *SushrutaSamhita* and *AshtangaHridaya*) and available commentaries on it. Research articles are also searched from various websites. This study revealed that PCOS is due to *Kaphaj* disorder which blocking *Vata* and *Pitta*, hence movement is obstructed and the transformation process is suppressed which results in formation of small cysts in spite of formation the mature ovum & finally it leads to amenorrhoea. For the prevention of this disease one should follow the daily regimen as well as seasonal regimen.

Key Words: Polycystic ovarian syndrome, *Kaphadoshaj*, *Ayurvedic* Classics.

INTRODUCTION: “Women is builder & moulder of a nation’s destiny, though delicate & soft as lily, she has heart, stronger & bolder than that of a man, she is supreme inspiration for man’s onward march”. RavindraNath Tagore.

Exactly Women’s play major role in development of nation but to achieve the same she must be healthy & free from mental & physical issue. Any feeling of physical or psychological factor directly affect her attitude and efficacy which adversely affects the family that moves the nation on back foot. Reproduction is noblest function & God has given magnanimous gift to woman. According to Ayurveda four

factors are essential for the formation *Garbha* (zygote) i.e. *Rutu*, *Kshetra*, *Ambu*, and *Beeja*. The woman is concerned with all these factors. *Rutu* related to the *Rutukala* of the woman. The union of *Beeja* of the both side i.e. *Shukra* (Sperm) and *Artava* (ovum) with *Atma* inside the uterus is called *Garbha*. So, the *Beeja* is the core stone of the female reproductive process and absence of this factor *Garbha* cannot occur in spite of the proper *Rutu*, *Kshetra* and *Ambu*. But certain causes by which this noble function is not properly achieved. That causes includes the stress, pollution, consumption of unhealthy food & many more. Infertility is defined as the inability of a couple to achieve conception

after one year of unprotected coitus. The World Health Organization (WHO) estimates that 60 to 80 million couples worldwide currently suffer from infertility¹. The trend of the infertility is increased day by day. When a woman cannot bear children, it tremendously affects her identity, but the pain can extend far beyond her to impact personal relationships. Polycystic ovary syndrome contribute great role in infertility. It is big & burning problem in front of society. Prevalence of PCOS in Indian adolescents is 9.13%. So for this reason topic was chosen to highlight over the polycystic ovary syndrome. It is diseases which characterized by amenorrhoea, enlarged ovaries with multiple small cysts, an abnormally high number of follicles at various states of maturation, and a thick, scarred capsule surrounding each ovary, Anovulation (lack of ovulation and therefore infertility). Same type of characteristics features also described in *Ayurvedic Classics*. This study was little effort to explain & highlight the polycystic ovary syndrome in *Ayurvedic Perspective literary*. By this study now we can explained the polycystic ovary syndrome in terms of Ayurveda.

AIM & OBJECTIVES:

1. To explain the concept of polycystic ovary syndrome in *Ayurvedic Perspective w. s. r to Kriya Sharir*.
2. To highlight on polycystic ovary syndrome in front of society through Ayurveda.
3. To educate the people regarding the preventive measure of polycystic ovary syndrome.

MATERIAL & METHODS:

A] Literature search- Review of literature regarding polycystic ovary syndrome is collected from modern science & on

different website regarding the same. Matter is also search regarding the Poly Cystic Ovarian Syndrome in Ayurvedic perspective on different website. All Compiled matter is reorganized and critically analysed for the discussion and attempt has been made to draw some fruitful conclusions.

B] Type of study- Conceptual study.

LITERATURE REVIEW:

Polycystic Ovary Syndrome: Poly Cystic Ovarian Syndrome is heterogeneous, multisystem, endocrinopathy in women reproductive age with ovarian expression of various metabolic disturbances & a wide spectrum of clinical features such as obesity, menstrual abnormalities, & hyperandrogenism. This disease was discovered & named as Stein-Leventhal syndrome in 1935².

This complex disorder is characterised by excessive androgen production by ovaries/adrenals which interferes with ripening of ovarian follicles³

Incidence: Current incidence of Poly Cystic Ovarian Syndrome (5 to 6%) is fast increasingly lately due to change in lifestyle & stress⁴

Aetiology & Pathogenesis: Poly Cystic Ovarian Syndrome has been attributed to several causes including the change in lifestyle, diet, & stress. Genetic & familial environment factors were added as factors in the development of Poly Cystic Ovarian Syndrome. Insulin resistance is key point in the genesis of Poly Cystic Ovarian Syndrome. CYP₂₁ gene mutation has been discovered in this connection⁵.

Pathology: Macroscopically, ovaries in women with Poly Cystic Ovarian Syndrome are 2 to 5 times the normal size. A cross section of the surface of the ovary discloses a white, thickened cortex with multiple cyst that typically less than

centimetre in diameter. Microscopically the superficial cortex is fibrotic & hypo cellular & may contain prominent blood vessels. In addition to smaller atretic follicles, there is an increase in the number of follicle with luteinised theca interna. The stroma may contain luteinised stromal cell⁶. Multiple cysts of 2 to 9 mm size are located peripherally along the surface of the ovary giving it “necklace” appearance on ultrasound⁷.

Clinical features: The patients complains of increased obesity, menstrual abnormalities in the form of oligomenorrhoea to amenorrhoea & infertility. There may be hirsutism. Virilism is rare. Internal examination reveals bilateral enlarged cystic ovaries which however many not be revealed due to obesity⁸.

Severe acne in the teenage years appears to be a common find of Poly Cystic Ovarian Syndrome.

Investigation:

1. TVS (Trans vaginal sonography) is especially useful in obese patient.
2. Serum values: LH level elevated & the ratio LH: FSH is > 3:1
3. Reversible oestradiol: Oestron ratio: This oestron level is markedly elevated.
4. SHBG level is decreased.
5. Androstenedione is elevated.
6. Serum testosterone & DHEA may be marginally elevated.
7. Fasting insulin is > 10mIU/I in PCOS.
8. Laparoscopy: Bilaterally Poly Cystic Ovaries is characteristics Poly Cystic Ovarian Syndrome.
9. Prolactin level is elevated.⁹

DISCUSSION: It's very tough job to correlate the PCOS with one disease according to Ayurveda. Clinical features of PCOS can be match with different types of

Yonivyapada described in *Ayurvedic Classics* particularly in *Charak&SushrutSamhita*. Many opinion can considered to correlate this disease according to Ayurveda. First opinion, *Aartava-kshaya*, which can be correlated with PCOS has been described as deficiency or loss of *Artava*. *Artava* does not appears in time or is delayed, is scanty and dose not last for three days. Pain in vagina also can be seen. According to *Ayurveda*, *Aartava-kshaya* is a disorder involving *Vata* and *Kaphadoshas*, *Medas*, *Ambu/Rasa*, *Shukra/ArtavaDhatu* and *Rasa*, *Rakta*, *ArtavaVahaSrotas*. Therefore Poly Cystic Ovarian Syndrome can also be described with same involvement of *Dosha*, *Dhatu* and *UpadhatuKapha* predominance manifests as increased weight, subfertility, hirsutium, diabetic tendencies and coldness. *Pitta* predominance manifests as hair loss, acne, painful menses, clots and heart problems. *Vata* predominance manifests with painful menses, scanty or less menstrual blood and severe menstrual irregularity^{10, 11, 12}.

The pathology is an obstruction in the pelvic cavity (*ApanaKshetra*) causing disorders in the flow of *Vata*. This in turn leads to an accumulation of *Kapha* and *Pitta*¹³.

Another opinion, PCOS is *Kaphaj* disorder. *Jatharagni* play an important in pathophysiology of PCOS. PCOS is a disorder involving, *Kapha*, *Pitta*, *Vata*, *Medas*, *Ambhuvahasrotas&ArtavaDhatu*. The causes of PCOS as per Ayurveda can be taken as eating excessive sweet and *Kaphagenic* foods, which vitiates the *Agni* & finally leads to *Mandagni*. *Pitta* and *Vatadosha* also involved in this disorder. Because of all three *Doshas* plays an important & distinctive role in the

production, development, maturation & release of ovum. Due to vitiation of Kaphadosha, first it affect the Jatharagni which leads to formation of Ama. Artavadhatu affected by the heavy sticky qualities of Kapha and Ama creates SrotasDushti in ArtavavahaSrotas. Apanavayu in ArtavavahaSrotas becomes stagnant – Sanga, due to excessive Kapha and Ama accumulation blocking the channel impeding the flow of Vata in the ovarian cycle. The accumulated Kapha is expressed in the formation of the cyst in the ovary as it takes on a heavy white sticky quality expressing Kapha and Ama. Due to Vata being blocked its affect the Pittadosha & the other functions of both these Doshas begin to become aggravated. Pitta aggravation at the level of Bhrajakapitta and Ranjakapitta manifests as acne and increased body hair¹⁴. Menstrual problems manifest due to the aggravation of all three Doshas but namely Apanavayu .

Due to Vitiation of Pittadosha & Agni small follicles are not able to grow further & form mature ovum. In spite of forming the mature ovum in ovary many small cysts along with fluid are present. So in this way the pathophysiology of PCOS can explain in Ayurved perspective.

CONCLUSION: Polycystic ovary syndrome is disease which is described in Modern science, symptoms, pathophysiology can be explain up to certain extent in Ayurved perspective. As per Ayurvedic Treatises description of polycystic ovary syndrome can't explain in single disease. KashyapSamhita is only exception to it. According to Kashyapa features of Vandhya & Pushphaghni match with symptoms of PCOS. Finally it can be concluded that PCOS is due to

Kaphajdisorder which blocking Vata and Pitta, hence movement is obstructed and the transformation process is suppressed which results in formation of small cysts in spite of formation the mature ovum & finally it leads to amenorrhoea. For the prevention of this disease one should follow the daily regimen as well as seasonal regimen so as to maintain the health. In Polycystic ovary syndrome Sarvagasana, Matsyasana, Ardhmatsyendrasana, Paschimottanasana, Suryanamaskar, Ushtrasana and all backward bending Asana are recommended.

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