

ROLE OF *VIRECHANA KARMA* AND *MADHUTAILIKA BASTI* IN THE MANAGEMENT OF PCOS – A CASE REPORT

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ABSTRACT: Disease polycystic ovary syndrome (PCOS) much has changed over the past 80 years. According to Charaka woman is the origin of progeny. In order to fulfil this achievement it is essential that both the partners should be fertile. PCOS is most common endocrine disorder among woman of reproductive age (affecting 5 to 10% of premenopausal females in the united state). The prevalence of infertility in women with PCOS varies between 70 to 80%. Acharya Sushrutha had described four essential factors for fertility. This is the case report of female patient aged 29 years suffering from irregular menstrual cycle, tiredness, no issues, migraine diagnosed as case of PCOS with *vandhyatva*. Visited dept. of *Panchakarma*, SAMC&H, Bangalore for the treatment. *Virechana karma* & *Madhutailika basti* in form of *yoga basti* followed by *shamana aushadhi* was administered. Significant improvement in the signs and symptoms were observed clinically.

Keywords: PCOS, infertility, classical *virechana*, *madhutailika basti*, *shamana aushadhi*

INTRODUCTION: Poly cystic ovary syndrome (PCOS) is a complex condition characterized by elevated androgen levels, menstrual irregularities & small cysts on one/both ovaries. PCOS can be morphological or predominantly biochemical. 1. 7% of adult women affected with this heterogeneous disorder PCOS. Females between the age group of 18 to 44 are affected by PCOS, Statistically about 5 to 10% of the population. Women with PCOS have higher rates of abdominal CA. Cardiovascular diseases, dyslipidaemia & type 2 DM. The genetic specific aetiology of PCOS is unknown. Environmental factors implicated in PCOS can be exacerbated by poor dietary choices & physical inactivity, infectious agent & toxins may also play a role. PCOS is hormonal disorders with a potential to lead to various diseases. It also continues to a common cause of infertility among women. Problem with

ovulation irregularities, increased androgen level occurs in majority of women with PCOS, along with hirsutism, acne, alopecia are characterised.

Probable *Samprapti* of The Disease: *Nidana* such as *Aharaja nidana* which lead to *amarasa*, *Viharaja*-such as *vegadharana* as she was working lady and she had developed *asrigdosha* (PCOS) of the patient lead to *vridhhi* in *Kapha Dosha* and *ksheenata* of *pitta dosha*, leading to vitiated *dhatwagni*. *Rasa dhatwagni* was affected leading to symptoms of *srotodushti*, thus *artava dushtilakshana* were seen in this condition. As improper nourishment of *rasadhatu* lead to *artava dushti* or *ksheenata* of *Artava* due to *pitta*.

CASE REPORT: A 29 years female patient having an irregular menstruation & infertility since 3 years back visited outpatient department of panchakarma, SAMC&H, Bangalore.

History of presenting illness reveals that female patient who is under constant stress due to incompatible family environment since 8 years. She came with a complaint of having irregular menstruation since 3 years. She is also experiencing lethargy, tiredness; migraine & hair fall since 2.5 year. She visited gynaecologist and underwent ultrasound scan (in 2019) which revealed poly cystic pattern of ovaries and allopathic medication was prescribed. Later on there is absence of menstruation since last 2 months and again underwent ultrasound scan (in Jan 2021) which shows thickened endometrium, bilateral polycystic ovarian configuration. Hence for further treatment patient visited panchakarma OPD, SAMC&H Bangalore.

Menstrual history: Menarche at age of 12 regular 4-5 days

LMP- 16/2/2020

Menstruation- Irregular, scanty since 2 year

Duration- 2-3 days/45 to 60 days- scanty and 1-2 pads/day

Treatment Given

The patient was planned for-1) Virechana
2) Madhutailika basti in form of yogabasti
3) Shamana Aushadhi

1. VIRECHANA

Treatment procedure:

- Deepana and pachana chikitsa
- Snehapana
- Virechana yoga administration
- Samsarjana karma

Preparation for Panchakarma procedures

Deepana and pachana chikitsa (medicine that augments and assists the process of digestion) Chitrakadi vati³ Dose-2 tablets three times a day before food, with luke warm water for 5 days.

Snehapana

After Deepana and Pachana, Snehapana with Kalyanaka Ghrita 4 (medicated ghee)

was given to the patient in increasing order for 3 days, starting from 30ml and on the 3rd day dose was 100ml followed by luke warm water.

When *Samyaka Snehana Lakshana* produced like proper movement of *vata*, loose and fatty stool and increase in appetite. *Snehapana* stopped on 3rd day and whole body oil massage with *Balaashwagandha taila* and mild steam bath was done for next three days and *Virechana* yoga was given on 4th day after *Sarvanga Abhyanga and Svedana*.

During these three days light diet like rice, green gram soup and khichadi etc. was advised to the patient.

Virechana yoga

200ml of *Triphala kashayam*, 70gm of *Trivrita lehya* was administered at 8:30 am on empty stomach. Patient was advised to take luke warm water.

Observation of *Virechana*: Total no. of *vega* (urges of defecation) - 21

It was *Kaphant Virechana* (ended with watery stool mixed with mucous), Considering the *Pravara Shuddhi* patient was advised to take classical *Sansarjana* karma (specific light diet) for next 5 days which contains *peya* (liquid gruel), *vilepi* (gruel), *Yusha* (green gram soup) and rice and every form of food is repeated for two meals time.

After 18 days of *virechana* she got her monthly periods which lasted for 4-5 days. After 15 days she visited again and *Madhutailika basti* was advised.

Madhutailika Basti in form of Yoga Basti *Basti* is the most important karma among panchakarma due to its multiple effects. *Madhutailika basti* is one among *yapana basti*, it is type of *Niruha basti*. This unique *basti* contains *madhu* and *taila* as main ingredient hence this *basti* is named as *madhutailikabasti*⁵. Here *madhutailika*

basti was administered in form of *yoga basti* so basically *yogabasti* includes five

Anuvasana basti and three *Niruha basti* so *yogabastikala* is eight days.

Table no.1: Showing the type of Basti administered on each days.

Day	1	2	3	4	5	6	7	8
Basti	<i>Anuvasana Basti</i>	<i>Madhutailika Basti</i>	<i>Anuvasana basti</i>	<i>Madhutailika Basti</i>	<i>Anuvasana basti</i>	<i>Madhutailika basti</i>	<i>Anuvasana basti</i>	<i>Anuvasana basti</i>

Anuvasana basti time of administration - after food at 2:00pm

Medicine includes- *Sahacharadi taila* 50ml+ *phalasarpi* 50ml

Madhutailika basti(Niruha basti) time of administration - empty stomach at 9:00 am

It includes- *Madhu*-100ml

Saindhava lavana-12gm

Mahakalyanaka ghrita-100ml

Shatapushpa kalka- 30gm

Erandamuladi kwatha-250ml

Table no. 2: Showing the details of *basti pratyagamana kala*.

Day *Basti Pratyagamana kala*

1 *Anuvasana* 6.5 hours

2 *Madhutailika* 18 minutes

3 *Anuvasana* 20 minutes

4 *Madhutailika* 2 minutes

5 *Anuvasana* 3.15 hours

6 *Madhutailika* 2 minutes

7 *Anuvasana* 9 hours

8 *Anuvasana* 5.15 hours

SHAMANA AUSHADHI

1stvisit on 31/1/21

1) *Garbhaphala rasa* 1 tablet thrice a day before food with warm water.

2) *Phalasarpi* 1 tsp twice a day before food with warm water.

3) *Aloevera juice* + *haridrachurna* + *jeerakachurna*+ *guda* all mixed well and given after food twice a day.

2ndvisit on 9/2/21

1) *Ashwagandha ksheerapaka* 30ml after food twice a day.

2) *Aloes compound* after food twice a day

3) *White onion paste*6 -*yoni pichu* before half hour of coitus.

FOLLOW UP:Every time when she visited she was counselled timely diet & exercise were advised. At every follow up her bowel habits, *basti pratyagamana kala* and other symptoms were assessed.

RESULT:Improvement in menstrual irregularities.Other associated symptoms like headache, lower abdominal pain, migraine got reduced.

DISCUSSION:In the present scenario PCOS is one of the commonest syndrome seen in human in the fertility age group.

Based on signs and symptoms this syndrome can be correlated to *vandhyatva* explained in Ayurvedic classics. There are many lines of treatment explained for the same. Based on the *lakshana* and involvement of *dosha* the appropriate *shodhana* should be opted.In the present case as the involvement of *Pitta* and *Artava dushti* was observed hence *virechana* was considered to be as first line of treatment. For the same *snehapana* started with *kalyanaka ghrita* as it acts on stress factor too, followed by *Abhyanga*, *Swedana* and on the day of *virechana Trivrit lehyam* was administered as it is considered as best *sukhavirechaka dravya*. As explained in *Kashyapa Samhita*⁷ i.e. '*Virechanenabijambhavatikarmukam*' concept has been adopted here. Hence immediately after *virechana karma* the improvement in the menstrual flow and cycle irregularity was corrected because *virechanakarma* acted at the root level and

vitiated *pitta dosha* and *artava dushya* has been rectified. For the further functioning of *Artavavaha srotas* the *madhutailika basti* was administered in *yogabasti* schedule. This *basti* is considered to be best *vatahara* and *garbhashaya shodhaka*. This procedure will be helpful to get the good progeny in future. As a part of follow up the *shaman aushadhi* like *garbhapala rasa*, *phala sarpi*, Aloes compound, *Ashwagandha ksheerapaka* was advised to strengthen *arthavavaha srotas* and prevent vitiation of *arthava dushti*. One of the peculiar protocol i.e. white onion paste *pichu* was advised to the patient as explained in *Yogaratanakara*. *Palandu* is best *vatahara & vrishya* hence it helps in motility of sperm so further action can be expected. As onion is rich in sulphur it enhances the strength of genital tract. With all these cumulative line of treatment significant improvement in sign and symptoms was observed.

CONCLUSION: A female patient aged around 29 years diagnosed with *vandhyatva*(infertility) with *nasta arthava* (PCOS) treated with *virechana*, *madhutailikabasti* and *shamanaushadhi* respectively. The significant improvement was observed in the signs and symptoms like pain during menstruation, cycle length 45 to 60 days, 2-3 days scanty flow.

Virechana karma and *madhutailika basti* along with *shaman aushadhi* are found to be effective clinically, in the management of *vandhyatva*.

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